Programming the Demographic Dividend: from Theory to Experience

1. Country profile
2. Policy declaration
3. Gap analysis
4. Building partnerships
5. Theory of change
6. Implementation planning
7. Programme implementation
8. Monitoring and evaluation
9. Scale-up

United Nations Population Fund
West and Central Africa Regional Office
Programming the Demographic Dividend: from theory to experience

UNFPA Regional Office for West and Central Africa
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### Abbreviations and Acronyms

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<td>AFIDEP</td>
<td>African Institute for Development Policy (Kenya)</td>
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<td>AU</td>
<td>African Union</td>
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<tr>
<td>CREDD</td>
<td>Cadre stratégique pour la relance économique et le développement durable 2016-2018 (Mali)</td>
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<tr>
<td>CREFAT</td>
<td>Centre de Recherche en Économie et Finance Appliquées de Thiès</td>
</tr>
<tr>
<td>CREG</td>
<td>Consortium régional pour la recherche en économie générationnelle</td>
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<tr>
<td>CSCRDP</td>
<td>Cadre stratégique pour la croissance et la réduction de la pauvreté 2012-2017 (Mali)</td>
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<td>CSOs</td>
<td>Civil Society Organizations</td>
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<td>DD</td>
<td>Demographic Dividend</td>
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<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
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<tr>
<td>ICDE</td>
<td>Indice de couverture de la dépendance économique</td>
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<td>IDHE</td>
<td>Indice de développement humain étendu</td>
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<td>IQCV</td>
<td>Indice de qualité du cadre de vie</td>
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<td>I2S2D</td>
<td>Indice synthétique de suivi du dividende démographique</td>
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<td>ISRT</td>
<td>Indice synthétique réseaux et territoires</td>
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<td>ISSP</td>
<td>Indice synthétique de sortie de pauvreté</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>NTA</td>
<td>National Transfer Accounts</td>
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<td>PDES</td>
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<td>SCAPP</td>
<td>Stratégie nationale de croissance accélérée et de prospérité partagée 2016-2030 (Mauritania)</td>
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<td>SDGs</td>
<td>Sustainable Development Goals</td>
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<td>UNFPA</td>
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<td>WCARO</td>
<td>West and Central Africa Regional Office</td>
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A country’s ‘demographic dividend’, the economic benefits that it reaps from its age pyramid, often accrues when an increase in the proportion of a country’s working-age population (typically arising from declining fertility) is accompanied by public authorities’ and private organization’s effective investments in health, women’s empowerment, education and employment.

A number of African countries have entered (or are in the process of entering) this phase of demographic transition. Continent-wide, this could represent an estimated benefit of up to US$500 billion every year over a 30-year period, boosting economies and enabling hundreds of thousands of people to escape from poverty and improve their quality of life. However, the demographic dividend isn’t automatic; capturing it requires immediate multisectoral and targeted investments.

I proudly present this Demographic Dividend Programming Guide, which makes concrete recommendations for decision makers who are setting up a comprehensive national policy to harvest the demographic dividend. It is a unique toolkit, based on a nine-step programme, translates the demographic dividend concept into political measures.

This Programming Guide was produced by the United Nations Population Fund (UNFPA) through its West and Central Africa Regional Office (WCARO), with the financial support of the World Bank. It is part of a commitment UNFPA made five years ago to support the African Union’s efforts to rally stakeholders around the demographic dividend in order to achieve the objectives of the 2030 and 2063 Agendas. As the leading UN agency for Population and Demography, UNFPA has performed extensive research work to understand the demographic dividend phenomenon by analysing previous experiences, drafting recommendations and implementing projects in the regions concerned by this issue.

This Programming Guide originally aimed to offer orientation and guidance for the Sahel countries participating in the Sahel Women’s Empowerment and Demographic Dividend (SWEDD) Programme of WCARO. However, as it became clear that the demographic dividend would be a central issue for the whole continent in the coming decades, the Programming Guide broadened its range of action to become an instrument for implementing the African Union Roadmap on the Demographic Dividend for all African Member States interested in following this political path. Therefore, though the analysis heavily relies on data provided by the initially targeted Western African countries, the recommendations and conclusions drawn for every operational step can be of use to and adapted by countries outside of the region.
We would like to thank the Centre de Recherche en Économie et Finance Appliquées de Thiès (CREFAT) for the data provided and the work accomplished with the SWEDD countries in this field, as well as the ICON-INSTITUT Public Sector GmbH for their collaboration in the preparation of this guide.

The West and Central Africa Regional Office and I sincerely hope you will find this publication useful and will find the information and tools needed to embrace the path towards reaping the benefits of the demographic dividend in your country.

Mr Mabingué Ngom

Regional Director
West and Central African Regional Office
United Nations Population Fund
The demographic dividend (DD) has been defined as “the rise in gross domestic product (GDP) per capita that can result from an increasing proportion of effective income-earners relative to the number of consumers in a population due to shifts in the population age structure and to enhanced productivity resulting from investments in health, empowerment, education and employment.” By this definition, the global DD started in 1973 and is projected to continue until 2026. In Africa, the DD started in 1991 and, according to current population projections, will continue until 2083. West and Central Africa were the last subregions to enter the DD phase in the late 1990s. In some countries, such as Niger, it is unlikely to begin until 2030.

The long duration of these processes (until 2103 in West Africa and 2099 in Central Africa) means that, under current demographic conditions, the DD in these sub-regions will make a relatively modest — but long-lasting — contribution to annual per capita GDP. It can be intensified by speeding up the fertility transition. Crucial measures that affect the DD include reducing child mortality, morbidity and malnutrition and child marriage as well as increasing female education and gender equity, addressing social norms on fertility and expanding comprehensive family planning programmes.

Experts unanimously and emphatically point out that the benefits of the DD are not an automatic consequence of demographic trends (Bloom, Canning and Sevilla, 2003; Canning, Raja and Yazbeck, 2015; Guenguant, 2011; Mehotra, 2015). For it to happen, countries need to make concerted efforts to implement social and economic policies that include improving education and human capital, attracting foreign direct investments, promoting domestic savings and investment, improving the business environment to build demand for labour, reducing barriers to trade and encouraging female employment outside the home.
This Programming Guide presents a process for effectively programming the necessary policies in three major phases and nine steps.

1. Country Profiles
2. Policy Declaration to Harness a DD
3. Gap Analysis
4. Building Partnerships
5. Theory of Change
6. Implementation Planning
7. Programme implementation
8. Monitoring and Evaluation
9. Scaling Up
A demographic dividend (DD) is the accelerated economic growth that results from a decline in a country’s mortality and fertility and the subsequent change in a population’s age structure. With fewer births each year and an elderly population that is still low, the country has a larger number of people of working age and a smaller number of dependents. This creates opportunities for economic growth and human development because more resources are available to be invested in economic development and family well-being.

The United Nations Population Fund (UNFPA), as the leading international agency on population and development issues, prioritized strategic support to countries in their efforts to take advantage of the DD by providing them with this Demographic Dividend Programming Guide. The need for such a Programming Guide has been expressed widely by governments and throughout the development community. This Programming Guide will demystify the academic discourse on the concept and identify determinants and consequences of the DD. It provides pragmatic guidance on the types of measures that countries need to implement in order to draw the greatest possible benefit from the demographic trends currently underway in most of the world (and particularly in sub-Saharan Africa).

This Guide pragmatically presents the nine Steps necessary to implement public policies designed to promote and capture the benefits and opportunities for development offered by the DD. Concrete examples, illustrated primarily with information from the six countries that integrate the Sahel Women’s Empowerment and Demographic Dividend (SWEDD) Project, illustrate the different programming stages.
1. Three Phases and Nine Steps for Action

The Programming Guide offers three important phases and nine Steps for effective programming:

Figure 1
Programming Steps for Achieving a DD Policy Framework

The focus of each of these Steps is methodological rather than substantive. Nevertheless, each of the methodologies is illustrated with concrete examples from the policy cycle, particularly in SWEDD countries. This does not mean that SWEDD countries should be taken as a model; the processes in these countries evolved without any particular blueprint, and other countries will not necessarily replicate their experiences. In the later Steps, fewer examples are available from SWEDD because the policy cycle is not yet far enough advanced in those countries. Instead, where appropriate, the later steps include examples from other countries that are already in later Steps of the process.

Due to the compact nature of this document, the Steps provide a first look at challenges and offer some solutions without going into the amount of detail that an exhaustive treatment of some of them would require. For example, no country has thus far provided a complete and detailed theory of change for the policies needed to enable the DD. Step V (Theory of Change), provides some of the elements for such a theory, but it does not go as far as formulating the theory in its finished form. The same is true of Step VIII (Monitoring and Evaluation), which addresses a number of relevant issues with respect to the evaluation of policies in this area, but which cannot go into details.
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Nevertheless, it is hoped that this Programming Guide will advance the discussion on the acceleration and capitalization of the DD from the realm of diagnostic studies and generic policy discourse, which, in turn, will lead to a formulation of more pragmatic and operational ideas on the concrete elements that would make up such a policy. It is a first initiative, to be followed by many more, but given current demographic trends in sub-Saharan Africa it has become a necessity as a way to turn regional governments’ political commitment into concrete courses of action.

2. The Concept of the Demographic Dividend: Some Results in Africa and the World

There are different definitions for the DD, including the one presented in the introduction and one given by the African Union (AU) in its Roadmap on Harnessing the Demographic Dividend as “the benefit that can arise when a country has a relatively large proportion of working-age population due to declining fertility, and effectively invests in their health, empowerment, education and employment through public action and private sector involvement.” All of the definitions stress how a country’s age structure can favour or hinder economic growth, but some are more operational than others in measuring the DD. A definition, following Mason (2005) and the UN Population Division (2017b), contains all the necessary elements for this measurement: “the rise in GDP per capita that can result from an increasing proportion of effective income-earners relative to the number of consumers in a population due to shifts in the population age structure and to enhanced productivity resulting from investments in health, empowerment, education and employment.”

Demographers distinguish two DDs. The first DD is the one that may occur when birth rates in a country decline. This creates a transitory phase in which the share of the population in the working ages (15-64 years) starts to rise. This generally occurs only once, during a period of about 30-50 years. As such, it is also called the demographic window of opportunity. During this window, individuals and families have more resources to improve their living conditions and to invest in the health and education (human capital) of their children, as well in equipment and buildings that help to produce goods and services (physical capital). If the additional resources of older people are invested (either locally or abroad), the national income increases, either through increased productivity or increased foreign revenue. In both cases, the income per inhabitant will increase faster than without these investments.

Graph 1 illustrates the demographic mechanism behind the first DD, showing the population pyramids of Côte d’Ivoire (left) and Senegal (right). Because fertility in these countries is still high, the pyramids have a roughly triangular form with a broad base (many children) and a slender top (few old people). As fertility starts to decline, the base of the population pyramid will shrink and the structure will become more like that of Cabo Verde (see Graph 2), where the population aged 15-24 is actually larger than that aged 0-9 years. This phenomenon is often called the ‘youth bulge’, and depending on the speed of fertility decline it can be more pronounced than in Cabo Verde. Over time, the youth bulge moves up. In Iran, the youth bulge...
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currently finds itself in the 25-34 year age group (see Graph 2). Because this age bracket includes the peak reproductive ages, the number of births in Iran has recently increased again, but this is a transitory phenomenon.

Although mortality decline also plays a role in bringing about the demographic changes that may result in a first DD, fertility decline is more important. This is what creates the major difference in the age structures of countries like Côte d’Ivoire (Graph 1, fertility of 5.14 children per woman in 2010 - 2014) and Cabo Verde (Graph 2, fertility of 2.50 children per woman). However, once this change has come about, mortality decline is one of the important factors that make it possible to reap its benefits.

Provided that appropriate policies are in place, the ageing of a population can lead to a second type of DD, which can be more sustained and larger than the first. The degree to which a country realizes the second DD depends on the how it anticipates and organizes the support of its elderly. The crucial point in this context is whether the ageing of the population will increase the amount of retirement savings invested by older workers.

Graph 1
Age Pyramids by Five-year Age Groups of Côte d’Ivoire (left) and Senegal (right) in 2015

Graph 2
Age Pyramids by Five-year Age groups of Cabo Verde (left) and Iran (right) in 2015

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Eventually, the bulge in the age structure moves up to the highest ages and the pyramid becomes rectangular or even inverted, with populations that become larger as ages increase. This situation sets the stage for the second DD. In the meantime, the country experiences its first DD, characterized by a large population in the intermediate age range. With fewer births each year and an elderly population that is still small, the country has a large number of working-age people and a small number of dependents.

Box 1 - Two Types of Demographic Dividend

The First Demographic Dividend

A larger proportion of the population in the labour force, due to rapid fertility decline, can increase economic labour income relative to consumption (provided that the labour force is gainfully employed).

Having fewer children allows women to spend more years in school, participate in formal economic activities and enhance their income-earning potential.

Lower fertility reduces the public and private costs of caring for dependent children (nutrition, health, education), so parents have more resources to invest in the human capital of each child (thereby increasing their productivity as working adults).

The Second Demographic Dividend

Due to the aforementioned factors and the improved health and longevity of workers, savings for old-age security increases, thereby stimulating investment and capital formation. This enables governments to improve the quality of health and education services and accumulate savings for capital formation and the development of infrastructure, which can attract direct foreign investment.

A Schematic view of the Effects of the DD on the Generational Economy

Box 1 summarizes the main characteristics of the first and second DDs. The actual size of the DDs depends on a number of factors, including the speed of the fertility decline. The most basic factor that determines the size of the dividend, particularly the first dividend, is the level of production and consumption of the population at each age. In each society, some individuals produce more than they consume (the active population), while others consume more than they produce (e.g. children, young people and older adults). This balance between production and consumption varies systematically by age. Consequently, there are mechanisms for the transfer of resources from those age groups that generate a surplus to those that have a deficit. Analysis of these transfers explains the impact of the age structure on the economy and the possibility of benefiting from the DD.
The methodology developed for this purpose is known as ‘national transfer accounts’ (NTA). Graph 3 illustrates the relevant age profiles with data from the six SWEDD countries. It shows that income generation (the red line in the graph on the left) varies more strongly with age than consumption (the green line in the graph on the left). Between the ages of 25 and 65 (the exact numbers vary by country), individuals generate more income than what they consume. In contrast, children, young people and the elderly have a deficit between what they produce and what they consume. People in the middle ages of the life cycle transfer part of the surplus to their dependents, particularly children under age 25, and save part of it for the future to cover the shortfall in income that people will face when they pass the age of 65. Some of the transfers operate at the household level, e.g. parents providing for the day-to-day needs of their children, whereas others operate at the societal level, e.g. through the payment of taxes to provide health and education services or, in countries where these exist, government pensions.

Subtracting consumption from income at each age and multiplying by the corresponding populations yields the aggregate deficit by age (shown on the right side of Graph 3). In a broad-based population pyramid with lots of children and few old people, much of the population is concentrated at the youngest ages where the balance between consumption (both private and public) and labour income is strongly negative, so much so that the negative aggregate balance between income and consumption found at the youngest ages is not fully compensated by the positive balance in the middle age.
range. In the SWEDD countries, the highest net life cycle deficit of this kind is found in Chad, where it amounts to 26 per cent of GDP (US$2.74 billion). In the other countries, it ranges from 16 per cent (Mauritania) to 23 per cent (Côte d’Ivoire) of GDP. A more favourable population distribution among the ages in Graph 3, with fewer people on the left and more in the middle age range, could significantly reduce these deficits or even convert them into surpluses.

In addition to the net life cycle deficit, another important indicator used in the NTA methodology is the (economic) support ratio. This is the ratio (rather than the difference) between aggregate labour income and aggregate consumption. In the SWEDD countries, this ratio is consistently below 50 producers per 100 consumers. In Niger, it is as low as 36. The most important determinant of the economic support ratio is the age structure of the population. A large percentage of the population under the age of 15 implies a low support ratio.

To bear this out, an alternative measure is the demographic (or age) dependency ratio, which is the number of persons in the typical ‘dependent’ age brackets (under 15 or 65 and over), divided by the number of ‘potentially active persons’ aged 15 to 65. If all potentially active persons actually worked, with the same level of productivity, and all those under age 15 or over age 65 were inactive with zero income, the economic support ratio and the demographic dependency ratio would be simply two ways to express exactly the same information. But not everybody in the potentially active age brackets actually works, and of those that do, their productivity varies. In addition, consumption levels vary by age and sex, so computing the support ratio requires more information than the demographic dependency ratio.

Graph 4 shows the observed and projected evolution of the economic support ratio for all six SWEDD countries from 1950 until 2050. These are observed values up until 2015; after 2015, they are based on the middle variant of the UN Population Division’s population projections (2015 Revision).

**Graph 4**

*Observed and Projected Economic Support Ratio in SWEDD Countries (1950-2050)*

Following Mason (2005), the United Nations (2017 b) currently quantifies the size of the first DD as the “growth rate of the support ratio, measuring the direct contribution of changes in the support ratio to economic growth. If the rate of growth of the support ratio is negative, the direct effect of changes in the support ratio is to curtail economic growth.” In other words, the first DD occurs when the economic support ratio is increasing. Further, the faster the increase, the larger the DD. This is also the measure being used in NTA projects at the global level, specifically by CREFAT in its analyses of the West and Central African countries (see Step I). Graph 4 shows that the SWEDD countries have entered the phase of their first DD around 2015.

Requirements for Reaping the Benefits of the DD

The demographic trends depicted in Graph 4 suggest potential benefits. Researchers unanimously and emphatically point out that the benefits of DD are not an automatic consequence of a change in age structure. Achieving benefits requires a set of proactive policies to capitalize on the potential offered by the window of demographic opportunity (Bloom, Canning and Sevilla, 2003; Canning, Raja and Yazbeck, 2015; Guenguant, 2011; Mehrotra, 2015). This is particularly true of the second DD, but it applies to the first DD too. For example, in a situation of rising unemployment, the demographic dependency ratio of the population can go down without a corresponding rise in the economic support ratio.

The DD can only be effectively realized through the implementation of a multisectoral investment policy in the areas of health, education, economy and governance. Countries must improve the quality of human capital through appropriate health and education policies; guarantee sufficient jobs in order to avoid a situation where an increase in the working age population results in greater unemployment; and develop efficient and flexible financial institutions that can take advantage of the increased savings associated with the second DD. Key interventions in this regard include improving education and human capital; attracting foreign direct investments; promoting domestic savings and investment; improving the business environment to build demand for labour; reducing trade barriers; and encouraging female employment outside the home.

Improving child health services decreases childhood mortality and leads couples to want smaller families. A proactive policy for girls’ education, especially in secondary education, helps to delay the age of marriage, reduce early pregnancy and to overall family health. Investments in education also make it possible to have a skilled labour force to stimulate economic growth.

In conjunction with this, countries should invest in sectors able to provide employment for this additional working-age population, particularly in sectors such as production, services and technology. It is also necessary to attract foreign investment in these labour-creating sectors and financing entrepreneurial initiatives to augment domestic savings.

Good governance practices (particularly in the areas of the rule of law, stability and security, and the efficiency of public administrations) are essential to enable all economic sectors to benefit from the DD. For example, UN Security Council Resolution 2250 on Youth, Peace and Security provides
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room for increasing the organization’s engagement in peacebuilding, recovery and reconstruction by harnessing the DD across the region. Systematic efforts to influence policy and programme interventions need to be made in order to address the growing number of young people and their vulnerability to migration, violent extremism and radicalization. Guaranteeing the rule of law is also essential in attracting direct foreign investment and creating employment. Strong legal institutions that protect investments are critical in enhancing sustained benefits of the DD.

In the short term, some of the benefits derived from the DD will have to be used to sustain investments in these areas. This is the point made by Leridon (2015), for example, when he writes about educational spending: “to say that states and households can reduce their spending on children presupposes that efforts are already ‘saturated’. If 100 per cent of young people are enrolled under satisfactory conditions, the reduction in their enrolment can reduce the share of the state budget devoted to schooling and allow a shift towards more directly productive spending. But if the enrolment rate is well below 100 per cent — as is the case in West Africa, for example — the (relative) decline in the younger population will simply improve school enrolment and will yield no appreciable savings.” In the long term, however, these investments will pay for themselves.

There have been attempts to assess whether some countries meet the conditions necessary to reap the benefits from improving demographic trends in the coming 20 years. Bloom et al. (2007) looked at 32 countries of sub-Saharan Africa, assessing whether they would achieve the demographic conditions for the DD and analysing institutional factors that would allow them to benefit from these trends. They concluded that, of the SWEDD countries, only Côte d’Ivoire presented the necessary conditions for such a benefit.\footnote{Guengant (2011) considers that Mauritania should be added to this list.} In the other SWEDD countries, the current scenario under the ‘business-as-usual’ assumption leads to the expectation of some limited benefits in the coming 15 years, and a gradual improvement thereafter. The results could be much more positive if the demographic transition in these countries were accelerated.

A more recent assessment by Medina and Chager (2015), classified all African countries in four categories according to their prospects for achieving the DD. The assessment placed all of the SWEDD countries in the last category where urgent action is required, except for Burkina Faso, which is in the third group with already good socioeconomic tools in place. According to the authors, the SWEDD countries have the advantage of relatively favourable employment and female labour force participation indicators, as well as relatively low incidence of HIV/AIDS, which would help them realize the potential benefits of a DD. However, their situations with respect to fertility (the primary condition for achieving the demographic conditions for a DD), infant mortality, human capital and female education are among the most unfavourable in the continent.
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Status of the DD in the World and on the African Continent

At the global level, the economic support ratio started to increase in 1973. It is projected to continue increasing until 2026 when the first DD ends and the window of demographic opportunity starts to close (United Nations, 2017 b). In Europe, the first DD started in 1962 and lasted until 2000. In Asia, it started in 1975 and is projected to last until 2033. In East Asia, the process was shorter and more intense than in other parts of the region, primarily because the peak in support ratios was particularly high. Bloom, Canning and Sevilla (2003) estimated that 25 to 40 per cent of the economic growth that characterized the Asian “miracle” could be attributed to these favourable demographic trends.

The situation in Africa is very different, with a DD that is projected to be slow, long and relatively shallow. The first DD in Africa started in 1991; under the UN Population Division’s current medium variant population projections, it is expected to continue until 2083 (United Nations, 2017 b). “The contrast with Africa is striking. The first dividend starts later in Africa as shown above and it is more slowly evolving once it begins... In year 10, the first dividend is only half of what is seen in Asia and the peak first dividend is realized only 30 years after the dividend phase begins as compared with 10 years in Asia. The first dividend never exceeds 0.7 per cent per year in Africa, but the first dividend is very long-lasting. After year 40 the first dividend is higher in Africa than any other region and it only disappears entirely after year 92.”

The timing and intensity of the DDs in African subregions vary considerably (see Graph 5). In 1975, Northern Africa was the first subregion to enter the DD phase; its window of opportunity is projected to close by 2028. The next subregion to enter the DD phase was Southern Africa, in 1979; this situation is projected to continue until 2058. East Africa is close to the regional average, with a DD that started in 1988 and likely to end by 2078. West and Central Africa were the last subregions to enter the DD phase, in 1997 and 1998, respectively. According to current population projections, the DD will last the longest, until 2103 in West Africa and 2099 in Central Africa.

The economic support ratio in the SWEDD countries has been increasing since 2015 (see Graph 4). In some, such as Côte d’Ivoire, the process actually started as early as the 1990s, whereas in others, such as Niger, it will only become effective after 2030.

Graph 5
Support Ratios for Africa and subregions since the Beginning of the First DD
Source: NTA website (see UNDP).
Economists have attempted to estimate the contribution of different factors or ‘drivers’ to the low economic performance of sub-Saharan Africa compared to other parts of the world. Such factors include low starting levels of per capita income, geographical disadvantages, political unrest and inflation. Based on the assessment by Ndulu et al. (2007), demographic factors explained the largest part of the deviation of Africa’s predicted growth. The difference in the levels of the cluster of demographic factors accounts for 0.86 percentage points out of the total growth gap of 1.12 percentage points relative to the global mean or to South and East Asia. Differences in age dependency ratios and potential labour force growth rates accounted for 1.49 percentage points of the 2.78 percentage point growth gap with East Asia and by 0.96 percentage points of the 1.72 percentage point gap with South Asia. Table 1 presents the percentage deviations of the economic growth rate from the world average due to specific demographic drivers in the SWEDD countries.

Table 1
Estimated Deviations from World Average Growth Rates in the SWEDD Countries due to Specific Demographic Drivers

<table>
<thead>
<tr>
<th>Country</th>
<th>Age Dependency</th>
<th>Potential Labour Force Growth</th>
<th>Initial Life Expectancy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burkina Faso</td>
<td>-1.34</td>
<td>-0.26</td>
<td>-0.93</td>
</tr>
<tr>
<td>Chad</td>
<td>-0.68</td>
<td>-0.51</td>
<td>-1.12</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>-0.70</td>
<td>-0.14</td>
<td>-0.86</td>
</tr>
<tr>
<td>Mali</td>
<td>-0.98</td>
<td>-0.44</td>
<td>-1.01</td>
</tr>
<tr>
<td>Mauritania</td>
<td>-0.52</td>
<td>-0.21</td>
<td>-0.86</td>
</tr>
<tr>
<td>Niger</td>
<td>-1.26</td>
<td>-0.59</td>
<td>-1.19</td>
</tr>
</tbody>
</table>

Source: Ndulu et al., 2007, Table 3.6.

Despite its protracted nature (under the assumption of demographic trends as currently projected), United Nations (2017 c) considers that Africa has the potential for a sizeable DD. “In these countries, policies to ensure universal access to reproductive health services, including family planning, as well as others to expand education and employment opportunities, should receive priority consideration. These policies would enable or accelerate, as the case may be, the first DD, namely, the increase in the ratio of producers to consumers generated by the shift of the population age structure at the intermediate stages of the demographic transition. Even when an independent effect of age structure on economic growth is not verified, improvements in educational attainment contribute to productivity and income growth, implying that a substantial portion of the DD may be in fact an ‘education dividend’. Even though Africa’s demographic transition has been delayed and is projected to proceed at a slower pace than in other developing regions, it
INTRODUCTION

could yield the largest total DD over the long run.” All of this is conditional on current demographic and technological scenarios. Faster than expected fertility decline, a technological revolution in the information and communication technologies sector or a significant transfer of manufacturing activity from East Asia to Africa (which some expect to occur during the next decades), could result in even more positive outcomes.

This slower pace of the demographic transition and the resulting shallowness of the DD are based on current population projections that foresee a relatively slow fertility decline in most of the continent. If this process were accelerated, it would not only bring the DD nearer, but it would also intensify it, compressing the benefits into a shorter period. Therefore, the first challenge facing sub-Saharan Africa, in general, is to speed up the path to the first DD. The measures required towards that end include reducing child mortality, morbidity and malnutrition; increasing female education and gender equity; addressing social norms on fertility; reducing child marriage; and expanding comprehensive family planning programmes.

The estimations that CREFAT made for the size of the DD show that a faster (or slower) pace of fertility decline would make a considerable difference for the intensity of the DD in the SWEDD countries. Graph 6 presents the aggregate result under the medium, high and low population projection variants of the UN Population Division (2015 Revision). Under the low fertility variant, which is the most favourable, the dividend will gradually increase, reaching a maximum of 0.72 per cent in 2035. If fertility declines according to the medium (i.e. business-as-usual) variant, the maximum will be only 0.58 per cent, while under the high fertility scenario it will take until after 2050 and be less than 0.55 per cent.

Graph 6
Alternative Projections of the First DD in the SWEDD Countries Based on the NTA Model (left), with a Separate Projection for Niger (right)


The case for Niger is shown separately on the right of Graph 6 because it is significantly different from the average of the SWEDD countries. In Niger, the current dividend is still negative and will only become positive around 2030. Although this means a significant delay compared to the other countries, Niger’s future dividend is projected to be slightly higher than elsewhere, in the order of 0.65 to 0.85 per cent per year, depending on the fertility variant.

The six SWEDD countries face multiple challenges, such as low agricultural productivity, climate change impacts and in some cases, a significant lack of security. Although several of the countries have registered some degree of economic growth in the past 50 years, populations have increased at the same rate or even faster, so that per capita GDPS have barely increased or even diminished (as in Niger). The best performances have been those of Burkina Faso and Mali, where, according to World Bank statistics, between 1960 and 2008 the per capita GDP in terms of purchasing power parity (PPP) approximately doubled (2.05 and 1.80, respectively) (Guengant, 2011).

An additional problem is that much of the growth has occurred has tended to depend on extractive industries that create relatively little employment. Consequently, the urban informal sector in most of the countries of the region has absorbed most of the growth of the working-age population. In 1999 and 2000, the informal sector contributed 70 per cent to the GDP of Niger, 60 per cent to that of Mali, 50 per cent to the GDP of Burkina Faso and 44 per cent to that of Côte d’Ivoire (Guengant, 2011). On the positive side, business analysts point out that China, the world’s largest provider of cheap labour, is approaching its so-called Lewis turning point (The Economist, Jan. 31, 2013; Forbes, March 3, 2017) after which urban wages in China start to rise dramatically. This may ultimately create the conditions for Africa to improve its competitive advantage, expand its labour markets and realize the benefits of the DD.
Conclusion

The DD can be defined as “the rise in GDP per capita that can result from an increasing proportion of effective income-earners relative to the number of consumers in a population due to shifts in the population age structure and to enhanced productivity resulting from investments in health, empowerment, education and employment.” By this definition, the world’s DD started in 1973 and is projected to continue until 2026. In Africa, the DD started in 1991 and, according to current population projections, will continue until 2083. West and Central Africa are the last subregions to enter the DD phase, in 1997 and 1998, respectively. In some countries, such as Niger, it will not come about until 2030.

The long duration of these processes (until 2103 in West Africa and 2099 in Central Africa) means that, under current demographic trends, the DD in these subregions will be relatively modest. It can be intensified by speeding up the fertility transition. Crucial measures to that effect include reducing child mortality, morbidity and malnutrition; increasing female education and gender equity; addressing social norms on fertility; reducing child marriage and expanding comprehensive family planning programmes.

Experts have unanimously and emphatically pointed out that the benefits of the DD are not an automatic consequence of favourable demographic trends. For it to happen, countries need to make a concerted effort to implement social and economic policies that include improving education and human capital; attracting foreign direct investments; promoting domestic savings and investment; improving the business environment to build demand for labour; reducing trade barriers and encouraging female employment outside the home.
1.1. The Need to Establish a Profile for each Country

Before a country can formulate a political declaration, it must start by constructing a profile in order to assess its situation regarding the possibility to accelerate and capture the DD. This can only be achieved once the main gaps to be filled have been detected and quantified (see Step III). The success of capturing the DD is conditioned by a set of assumptions whose order of priority derives from the situation of each country.

The methodology for preparing the profiles depends on the following elements:

1. Identifying the modelling approach.
2. Determining the need for expertise based on the modelling approach identified, and therefore the mobilization in human resources (e.g. consultants, national and international experts).
3. Choosing the variables and indicators to be favoured, considering the assumptions of the effective implementation of the DD and the socioeconomic particularities of each country.
4. Choosing the most relevant hypotheses regarding the demographic and economic evolution of the countries. Given the dependencies that affect all countries, but particularly those in Africa, this involves not only developing a national scenario, but placing this scenario within the broader global context.
5. Constructing a regularly updated database to accompany developments in the success of the DD. In the case of the SWEDD countries, the creation of national DD observatories supported by CREFAT will facilitate this work.

1.2. The Choice of the Model for Establishing the Country Profiles

Action 1: Form a technical team to formulate the questions to be answered and to carry out the research necessary for formulating a country profile

Configuring a technical team and deciding on the appropriate model are, to some extent, joint decisions because some of the major sources of expertise in the in the world — and specifically in Africa (CREFAT, AFIDEP) — are committed to specific methodologies. However, before outside expertise is
called in to apply a particular methodology, it is recommended to form a
group of representatives from different sectors and stakeholders in order to
clarify the questions that the country profile should answer. These include:

1. What is the current stage of the demographic transition in the country?
2. What is the likely evolution of this situation?
3. What are the major factors that could determine this evolution?
4. Given this situation, what are the purely demographic prospects for a
   DD?
5. What is the situation regarding the several socioeconomic factors that
determine the degree to which the benefits of the DD will materialize?
6. Given this situation, what is the size of the DD likely to be over time?
7. What transformative factors, such as changes in the structure of the world
economy or technological innovations, could change the likely outcomes?

**Action 2: Decide on the appropriate model or models for establishing
the country profile**

The first step in establishing a country profile is situating the country regarding
the DD. There are two predominant models of DD analysis and evaluation:
the National Transfer Accounts (NTA) model developed with support
from UNFPA and applied by CREFAT, and the DemDiv model created by the
Health Policy Project, with the support of USAID.
NTA model

The NTA model is founded on the principles of the theory of the generational economy and the role of human capital in economic development (see Dramani, Ndiaye and Ouarme, as well as Dramani, 2016). It assumes that changes in the population structure by sex and age over the years have profound implications for aggregate levels of production and consumption. This assumption is based on the notion that on average, very young people and the elderly consume more than they produce, while the opposite happens with individuals in the active ages, in accordance with the economic life cycle pattern and the corresponding transfers between generations (see Graph 3 of the Introduction). Based on data from the most recent Living Standard Measurement Surveys or similar household data, the model requires:

1. Quantification of economic flows by age group through the disaggregation by age of the aggregate values of the national accounts. This enables visualization of the average (individual) and aggregate (national) profiles of consumption and labour income by age.

2. The difference between these two quantities makes it possible to evaluate the life cycle deficit or surplus for each age group (Mason and Lee, 2011), as well as the limiting ages at the beginning and the end of the surplus (see Box 1.1).

3. The calculation of the economic support ratio, which allows (all other things being equal), the isolation of the effects that any change in the age structure has on the ability to create wealth and hence on economic growth, taking into account profiles of consumption and labour income. Any increase in the ratio corresponds to an improvement in productive capacities due to the more rapid increase in the number of ‘effective producers’ compared to ‘effective consumers’.

The NTA method ultimately leads to a projection of the DD according to the scenarios retained in the population projections (see the model described below); this determines the opening date of the window of opportunity to capture the DD (when the contribution of the change in the age structure of the population in the formation of the GDP per capita becomes positive).

Box 1.1 - Life Cycle Deficit

- Life cycle deficit > 0 for the ages corresponding to the normally dependent (youth and elderly), whose productive capacity does not cover their needs.
- Life cycle deficit < 0 for other years or the individual because working-age individuals have a productive capacity that exceeds their needs, resulting in a surplus (savings).

Sources: CREFAT/ CREG, 2017; Dramani, 2016, Tome 2, p.258.
Box 1.2 - Economic Support Ratio

- Economic Support Ratio = Effective Producers / Effective Consumers
- The total number of Effective Producers is equal to the sum of the number of individuals at each age weighted by the average labour income index associated with each age.
- The total number of Effective Consumers is equal to the sum of the number of individuals at each age weighted by the average consumption index associated with each age.

Box 1.3 - Reports on the DD in the SWEDD countries

With the help of CREFAT and UNFPA, some SWEDD countries are quite advanced in the production of NTA analysis. The following reports on the DD have been produced so far:

DemDiv model

DemDiv (from Demographic Dividend) (Moreland et al., 2014), is a data-driven tool that can inform policymakers of the potential benefits of the DD and increase their support for multisectoral policies to realize these benefits. The model is based on:

- **Two sub-models** to estimate demographic trends and economic developments (see Figures 1.1-1.3) using simulation modelling such as that originally adopted by Coale and Hoover (1958) and more recently by Ashraf et al. (2013) to estimate GDP, GDP per capita, employment and investment.

- **Several scenarios** to detect how the combination of policies relating to areas such as family planning, education, employment, labour market flexibility and new technologies can ultimately generate a DD that could not occur under a business-as-usual scenario.

**Graph 1.1**

Example of Côte d’Ivoire

**Table 1.1**

<table>
<thead>
<tr>
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<tbody>
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<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
<td>F</td>
<td>M</td>
</tr>
<tr>
<td>Age at start of surplus</td>
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<td>27</td>
<td>35</td>
<td>23</td>
<td>No surplus</td>
</tr>
<tr>
<td>Age at end of surplus</td>
<td>73</td>
<td>49</td>
<td>65</td>
<td>52</td>
<td>65</td>
<td>No surplus</td>
</tr>
<tr>
<td>Duration of surplus</td>
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<td>14</td>
<td>39</td>
<td>18</td>
<td>43</td>
<td>0</td>
</tr>
<tr>
<td>Support ratio 2016</td>
<td>42</td>
<td>46</td>
<td>45</td>
<td>39</td>
<td>41</td>
<td>40</td>
</tr>
</tbody>
</table>


Sources: DD Profiles for each country carried out with the technical assistance of UNFPA and CREFAT (see References at the end of this chapter).
Figure 1.1
Main Variables Estimated by the DemDiv Model

Excel Model

Policy Inputs
- Girls' Education
- Adult Male and Female Education
- Contraceptive Prevalence Rate
- Postpartum insusceptibility
- Sterility
- Labor Market Flexibility
- Info and Comms Technology Use
- Financial Market Inefficiency
- Public Institutions
- Imports as % of GDP

Endogenous Outputs
- % Married
- Total Fertility Rate
- Life Expectancy
- Infant Mortality
- Child Mortality
- Employment
- Investment
- Total Factor Productivity
- GDP

Spectrum/DemProj

Demographic Outputs
- Total Population
- Births
- Population by Age and Sex
- Dependency Ratio

Calculated Outputs
- Infant, Child and Maternal Deaths
- GDP per Capita
- Human Development Index
- Employment Gap

Source: Moreland et al., 2014, p. 18.

Figure 1.2
Components and Logic of the Demographic Sub-model

Contraceptive Prevalence Rate
- Sterility
- Post-partum Insusceptibility

Total Fertility Rate
- High-Risk Births
- Under-5 Mortality

Marriage
- Population
- Life expectancy

Girls’ Education

Source: Moreland et al., 2014, pp.4

Figure 1.3
Components and Logic of the Socioeconomic Sub-model

Global Competitive Index: Financial Efficiency
- Investment/Capital Stock
- Employment
- Total Population

Global Competitive Index: Information and Communication Technologies
- Total Factor Productivity
- Gross Domestic Product
- GDP Per Capita

Global Competitive Index: Public Institutions
- Global Competitive Index: Labor Flexibility
- Average Years of Education

Note: The boxes in red correspond to the input variables of the demographic sub-model, the same ones that are likely to vary due to the implementation of the related policies.

Source: Moreland et al., 2014, pp.9.
The demographic sub-model underpins the structure of the whole model and makes it possible, using certain input variables, to make the necessary projections for infant mortality, fertility, life expectancy and dependence in order to yield estimates of a population’s size and age structure. Given its emphasis on fertility reduction as a driver of GDP growth, DemDiv is more useful in the context of high-fertility countries (e.g. those in Western Africa) than in countries with relatively low fertility (e.g. Botswana, Cabo Verde, Mauritius and Namibia) where the realization of the DD depends less on further fertility decline and more on the implementation of complementary social and economic policies to capitalize on demographic trends.

The choice of input variables is crucial because they must be sensitive to the implementation of family planning, health and education policies or programmes (see Figure 1.2).

The results of this first population size and age structure sub-model (and several other input variables that reflect the impact of economic policies) are integrated into the socioeconomic sub-model. Ultimately, the socioeconomic sub-model equations allow estimation of the value of the GDP and GDP per capita over the projection period. This GDP projection is essentially based on three elements: investment, employment and total factor productivity (Figure 1.3).

The interactions between the two sub-models make it possible to evaluate the combined effects of the changes envisaged at the level of the input variables on the projections of the GDP and GDP per capita over the selected time period of analysis (generally 40 years).

**Action 3: Choose an appropriate set of population projection alternatives**

In the NTA model, the hypotheses on the future evolution of the demographic variables (i.e. the population projections that are used), are key elements in the model’s implementation. The work being supported by CREFAT, for example, is based on the projections of the UN Population Division, with its three variants (low, medium, high). In contrast, the DemDiv model does not depend on an external projection because its demographic sub-model estimates the future population size and composition.

The NTA model does not require using UN Population Division projections. For example, the population-education projections developed by the Wittgenstein Centre in Vienna are an alternative in the context of human capital formation. Cuaresma, Lutz and Sanderson (2014) found that improvements in educational attainment are the key to explaining productivity and income growth and that a substantial portion of the DD is an education dividend.

The findings include two major implications. First, human capital formation, especially education and mortality, is even more central to realizing the DD than other researchers have acknowledged. Not only is it impossible to capture the DD without improvements in human capital, but also the DD in itself is, to a large extent, the result of these improvements. Second, investing in education is key to reduce fertility, and thus the population projections of the UN Population Division may not give sufficient weight to fertility declines likely to occur in West and Central Africa as a result of rising levels of education.
1.3. Choice of Variables and Indicators

Action 4: Determine the choice of variables and indicators that will be used to characterize the situation of the country vis-à-vis the DD

Countries should define a list of variables that are directly or indirectly related to the DD on the basis of which it is possible to quantify the most important gaps to be filled, taking into account the main intervention areas of the DD and the SDGs.

For example, within the framework of its ongoing project to monitor the DD in West and Central Africa, CREFAT constructed a list of common indicators. These indicators are grouped into five partial indices by five main dimensions and one overall composite index (see Annex 2). The five main dimensions are:

1. Life Cycle Deficit (based on 14 indicators of revenue and consumption by age);
2. Quality of Living Conditions (based on 13 indicators, including environment, crime, political participation and time use);
3. Transition from Poverty (based on 7 poverty and economic mobility indicators);
4. Extended Human Development (based on 16 indicators of the conventional Human Development Index variables plus adolescent fertility, maternal mortality and others); and
5. Networks and Territories (based on 23 indicators regarding spatial distribution, including migration, quality of housing and infrastructure).

The final composite index constructed out of these five components is the geometric mean of the components, called I2S2D. Most of the information needed for the construction of the indicators comes from the Living Standards Measurement Surveys of the countries.

This example is included for illustrative purposes only. Other countries might choose to develop alternative indicators to quantify where they find themselves in the DD process. These might be based on a smaller list of indicators that are conceptually more aligned with the approach taken by the theory of change in Step V. For example, although the indicator list used by CREFAT contains 73 indicators, it is limited to the information collected in the Living Standards Measurement Survey. The list could be extended further, because arguably it does not contain information about some important areas that need to be represented in the indicator framework for monitoring and evaluation (Steps V and VIII), such as:

- **Family planning:** Contraceptive prevalence rate, prevalence rate of traditional contraceptive methods, prevalence rate of modern contraceptive methods (except sterilization), mean post-partum infertility period, incidence of sterility, mean ideal number of children by women’s age and education, percentage of women aged 15 to 49 in unions, mean number of prenatal and postnatal consultations, and mean number of midwives per 1,000 women of reproductive age;

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8. The acronyms refer to the French names of the indicators, which are Indice de couverture de la dépendance économique (ICDE), Indice de qualité du cadre de vie (IQCV), Indice synthétique de sortie de pauvreté (ISSP), Indice de développement humain étendu (IDHE), Indice synthétique réseaux et territoires (ISRT) and Indice synthétique de suivi du dividende démographique (I2S2D) (see Annex 2).
COUNTRY PROFILE

- **Gender Equality**: Gender Development Index, Human Development Index of females, Human Development Index of males, and female participation in the labour force;

- **Youth empowerment**: Youth unemployment, percentage of young people that do not work and do not study, incidence of child labour, and percentage of young people pursuing vocational training;

- **Governance**: Voice and Accountability Index, stability and Absence of Violence Index, Government Effectiveness Index, Regulatory Quality Index, Rule Of Law Index, Corruption Control Index; and

- **Economic environment**: Openness of the economy, levels of competitiveness, and labour productivity.9

1.4. Sources of Information

**Action 5: Determine and organize the sources of data to be used in the analysis**

Most of the data listed above can be obtained either from national statistical offices, household surveys such as the Demographic and Health Surveys or the Multiple Indicators Cluster Surveys for fertility and health indicators or from international organizations such as UNDP (the Human Development Index), the World Bank (indicators of governance, economic environment), the International Labour Organization (labour force, child labour), the World Economic Forum (competitiveness), or from Internet resources, such as world-statistics.org.

1.5. Analysis of the Country Profile

**Action 6: Execute the analysis and interpret the results**

It is important to mobilize competent personnel to carry out the analysis, particularly three types of experts specialized in the following areas: prospective analysis, analysis of demographic components and analysis of the DD, and economic analysis (for analysis of national accounts and econometric modelling). In addition, specialists in the creation, management and processing of databases are needed to ensure proper monitoring.

National and regional cooperation should be sought to analyse the country profile. Countries should mobilize partners, such as national statistical institutes, national and regional universities and research centres, international organizations with long-standing experience in population and development issues (such as UNFPA), organizations with relevant competences in matters related to the DD (such as CREFAT), and non-governmental organizations likely to participate in DD implementation processes.

At the regional level, cooperation is needed to develop methodologies to create and analyse the country profiles in order to ensure comparability. It is urgent that the national observatories of the DD be created as soon as possible, together with the regional observatory.

9. The family planning indicators can be obtained from the Demographic and Health Surveys. The governance indicators are described in Kaufmann, Kraay and Mastruzzi (2010). The other indicators are routinely available from a variety of sources, such as the population census and various household surveys.
Country profiles should be widely disseminated in order to ensure full stakeholder awareness and mobilization. Dissemination should prepare public decision makers and planning officials to focus on national development through the DD lenses and should facilitate the adoption of new ways of proceeding when planning public policy. Step IX will explain why it is important to develop the capacities of public officers at the national, regional and local levels. By disseminating and raising stakeholder awareness, the policy declaration — which is the next step to officially proclaim the adoption of this way of planning national development — facilitate implementation of the policies involved.

1.6. Conclusion

Prerequisites for the Construction of the Country Profile

In order to build the country profile, countries must:

1. Be able to position themselves with respect to the phases of the demographic transition and conduct relevant research on the DD;
2. Have reliable, regularly updated and validated data;
3. Seek partnership for analysis and regional cooperation to ensure comparability; and
4. Widely disseminate the country profile to ensure awareness and mobilization.

Operational steps for the Construction of the Country Profile

Action 1: Form a technical team to formulate the questions to be answered and carry out the research necessary for formulating a country profile;
Action 2: Decide on the appropriate model or models for establishing the country profile;
Action 3: Choose an appropriate set of population projection alternatives;
Action 4: Determine the choice of variables and indicators that will be used to characterize the situation of the country vis-à-vis the DD;
Action 5: Determine and organize the sources of data to be used in the analysis; and
Action 6: Execute the analysis and interpret the results.

Countries should not use one analytical model (NTA or DemDiv) at the expense of the other, but rather try to complement one with the other. The CREFAT indicators are a useful starting point, but it may be necessary to complement them with additional dimensions (for which data may have to be sought from sources other than the household surveys used by CREFAT). So far, most countries have projected their DD based on the population projections of the UN Population Division. However, it is may be worth considering other projection sources (e.g. the population projections developed by the Wittgenstein Centre in Vienna), as these give explicit consideration to human capital factors and their influence on population trends.
STEP II
Policy declaration

2.1. The Action Framework

The economic and social capital benefits of the DD will only be attained if countries proactively articulate their demographic transition with specific policies to: improve the quality of human capital through appropriate health and education policies; guarantee sufficient jobs in order to avoid a situation where an increase in the population of working age people results in greater unemployment; and develop efficient and flexible financial institutions that can take advantage of the increased savings thought to be associated with the second DD.

Implementing this set of policies to harness the DD is a necessary step to substantively influence national development and to create tangible and sustainable effects for the populations involved. This paper refers to the array of policies as a ‘policy declaration to harness the demographic dividend’ (PDHDD). The following sections present actions to build a PDHDD and provide further information on its advantages.

Action 1: Consider the guiding frameworks and principles of a PDHDD

For the national PDHDD to be legitimate, it must be aligned with national development priorities; it must refer to existing national rights and policies concerning development. Below are the recommended national frameworks on which each country must base its PDHDD.

The national level

The national constitution contains national values and principles of governance such as the rule of law, power sharing, popular participation, social justice, protection of the marginalized, integrity, transparency and accountability and sustainable development. The constitution is the major national framework stating the rights of all citizens, such as economic and social freedoms, including the rights to health care services, adequate housing and sanitation, adequate food of acceptable quality, clean and safe water, social security and education.

A national development plan sets out the steps to follow to help the country make sustainable economic, cultural, social and political progress. The national development plan framework is a useful articulation point with a PDHDD.
A national population policy is intended to affect population size, growth, distribution and composition. The interactions between population dynamics and national development are at the base of the PDHDD.

The continental level

African states have a clearly defined, common vision of “the Africa we want,” as set up in Agenda 2063. In its Framework document, at least two of the seven shared aspirations are particularly linked to the DD narrative. The states composing the African continent aspire to become “an Africa where development is people-driven, relying on the potential of African people, especially its women and youth, and caring for children (…and) An Africa of good governance, democracy, respect for human rights, justice and the rule of law.” (African Union Commission, 2015).

There are at least four political documents, endorsed by African countries, related to harnessing the DD that should frame national PDHDDs. The African Youth Charter (2006) spells out the rights and duties concerning youth empowerment; the common position on the Post-2015 Development Agenda and the 2030 Development Agenda (2014) gives priority to structural transformation for inclusive people-centered development; the AU Agenda 2063 (2015) sets out the vision of a peaceful, integrated and flourishing Africa, driven by its people; and the AU Roadmap on Harnessing the Demographic Dividend through Investments in Youth (2017) provides key principles based on four thematic pillars required to harness the DD.

The international level

The UN-voted agenda, Transforming our World: the 2030 Agenda for Sustainable Development, better known as the SDGs, sets out 17 specific goals (United Nations, 2015). Figure 2.1 shows their direct and indirect links with the ‘thematic policy wheels’ needed to reach a DD, as depicted by the Population Reference Bureau.

The 1994 International Conference on Population and Development (ICPD) Action Plan, on the interrelation between population and development, establishes the international consensus on critical qualitative and quantitative objectives to reach sustainable and development goals that respect human rights (United Nations, 1994).

Chapter III of the Report on the ICPD details the interrelationships between population, sustained economic growth and sustainable development. Chapter IV of the Report stresses the importance of taking into consideration gender equality, equity and women’s empowerment. No policy sector alone will give enough impulse to a DD; all policy ‘gears’ must work together to yield a DD (United Nations, 1995).
Figure 2.1
Linkages between the Thematic Wheels for Creating a DD and the SDG agenda

Source: AFIDEP, adapted from the African Union Commission (2013)

Source: Senegal Report to harness a demographic dividend (Ministry of Economy, Senegal, 2017, p.5)
**Action 2: Take the pulse and examine the country’s potential for a DD**

In order to establish the path to harness a DD, each country must examine its situation in terms of demographic trends and the socioeconomic state of the population. It must also model a path to arrive at the conditions favourable to reaping the benefits of a DD. The PDHDD should contain a summary of the country profile, showing the variables to adjust in order to foster a DD.

Policy briefs are necessary to compile the requisite background information and analysis on the economic dependency ratio and the situation of youth and of gender equality. Among the main factors conducive to attaining the benefits of a DD are women’s and girl’s empowerment in health, education, employment and rights; defining relevant objectives in terms of the level of women’s economic and social empowerment will allow a country to reap those benefits.

Each policy brief should identify the key actions needed in order to bring indicators in each sector to levels that will bring about the conditions for a DD.

This analysis will show how the window of opportunity to harness a DD is currently open in the countries of West and Central Africa. The analysis will point to the need to accelerate the demographic transition and to intensify investment in developing human capital in the country. This subject was introduced in Step I and will be further developed in Step III of this Programming Guide.

**Action 3: Single out key pillars of policy action**

The AU Roadmap to Harness the Demographic Dividend identifies four policy areas to act upon in order to maximize a country’s chances of reaping the benefits of a DD: health and well-being; education and skills development; employment and entrepreneurship; and rights, governance and youth empowerment.

Although these four pillars are necessary to attain the benefits of a DD, they are not sufficient. Reaching and reaping the benefits of the DD requires accelerating demographic transition (for which family planning is a key policy to boost), improving health, education, governance and accountability, economic reforms and job creation, and promoting gender equality and cultural transformation.

Recognizing that gender equality and equity and full respect for women and girls’ rights are essential to national development is a fundamental position in reaching a DD. An illustration of this appears in the lower chart of Figure 2.1, where SDG 5 (gender equality) appears visibly related to three ‘thematic wheels’ (demographic transition, education, and economic reforms/job creation). Gender equality is also related to governance and health policies.

Steps V and VIII of this Programming Guide will show in more practical terms the importance of focusing on cross-cutting issues in terms of generating a theory of change and monitoring and evaluation indicators. While incorporating the four pillars of the AU Roadmap, the Steps will define six main outcome areas and eight axes of evaluation.
Every country should: consider cultural transformation and gender equality as cross-cutting in all pillars; organize the pillars to correspond to their priority needs; itemize objectives and actions to take within each pillar; single-out partners to support those actions; and list the quality and quantity indicators that will allow periodic progress measurement.

**Action 4: Explain the implementation, monitoring and evaluation mechanism**

Due to the interrelationship between a PDHDD and the other policies aiming at specific aspects of national development, each country will have to create a collaborative space in which actors from all policy sectors will be represented. This entity can take the form of a steering committee, as it has been done in Kenya (National Council, Kenya, 2017), which will be in charge of facilitating implementation and of monitoring and evaluating progress. Mali’s PDHDD, for example, charges this entity with the production of a periodic DD progress report (Ministries, Mali, 2016). For more on this issue, see Step VIII of this document.

**Action 5: Describe the methodology used to arrive at the PDHDD**

As a transparency measure, it is useful to communicate in the PDHDD the methodology used to finalize the endeavour. This section should include the associated government entities and the partners and stakeholders consulted and rallied to the policymaking process.

**2.2. Advanced Tips – Real Advantages of a PDHDD**

**Advantages over past population policies**

To some extent, the narrative to harness a DD coincides with that of more traditional population policies to reduce rapid population growth. However, while both narratives emphasize the importance of smaller family sizes, there are important differences between the two. Further, a PDHDD provides real added value (see Table 2.1).

In African countries, past population policies did not explicitly link to the influence that a country’s population structure has on boosting economic and social development. All countries in the West Africa subregion (except Ghana, which has had a national population policy since the 1960s) have long considered the evolution of their populations and their fertility levels to be satisfactory. It is only in the past 15 to 25 years that they have adopted general and reproductive health plans and programmes and road maps regarding the MDGs. However, these initiatives have not led to a decrease in fertility or in the rapid rhythm of population growth.
Table 2.1
Comparative View – Traditional Population Policies versus a Policy Design to Harness a Demographic Dividend

<table>
<thead>
<tr>
<th>Feature</th>
<th>Past population policies</th>
<th>PDHDD</th>
<th>The plus point of a PDHDD</th>
</tr>
</thead>
<tbody>
<tr>
<td>The narrative</td>
<td>The reduction of population growth is related to high mortality and low fertility</td>
<td>Though high mortality and low fertility may have the same effect on population growth, they affect development in very different ways</td>
<td>Much more explicit view, emphasizing the interrelationships between population dynamics and development</td>
</tr>
<tr>
<td>The indicator that matters the most</td>
<td>The demographic growth rate</td>
<td>The economic support ratio</td>
<td>While recognizing that the two indicators are related, the economic support ratio also factors in other metrics, such as the age profile of consumption and income generation, which allow for a more effective economic development planning</td>
</tr>
<tr>
<td>Fertility decline method or the relationship between factors such as women’s empowerment or youth employment and population reduction</td>
<td>Fertility decline will come with development</td>
<td>Fertility is unlikely to decline based on motivation alone if women do not have access to safe and effective means of individual fertility control</td>
<td>The DD narrative counters the persistence of a developmentalist interpretation of fertility decline, particularly the notion that ‘development is the best contraceptive’. It more precisely takes human rights into account, shows how the benefits of fertility decline are not automatic and demonstrates how proactive measures are necessary to guarantee its effectiveness</td>
</tr>
<tr>
<td>Recognition of the importance of population dynamics for sustainable development</td>
<td>Population dynamics is a useful tool to describe the status quo</td>
<td>Population dynamics must be a mainstreamed consideration in sector policies such as health, employment, youth and gender equality. Acting upon the population structure at the same time as in those sectors, population dynamics may have a positive effect on sustainable development.</td>
<td>Elaborating a PDHDD is preceded by an awareness-raising process in decision makers. It requires the creation of an efficient mechanism to ensure that population dynamics considerations are mainstreamed</td>
</tr>
<tr>
<td>Time frame</td>
<td>No specific time frame</td>
<td>Identifies a particular time frame of 30 to 50 years, during which countries can take maximum advantage of their fertility decline. If the first opportunity for a DD expires, countries may or may not experience a second DD.</td>
<td>Giving a time frame sets clear efficiency objectives to sustainable development policy planning</td>
</tr>
</tbody>
</table>
It is therefore necessary to find a new model for family planning in each country. A bottom-up approach could work better, provided that there is a strong commitment from leadership at the national, regional and community levels. The examples of Ethiopia, Malawi and Rwanda show how important this kind of political determination can be. The ‘stop and go’ approach of the past will not work to accelerate the fertility transition in order to attain the demographic window of opportunity. The approach should be replaced by the firm and sustained commitment of the public and private sectors (see, for example, May, 2017).

However, in as much as democratic states play the central function of producing public goods that individuals cannot produce by themselves — such as the ones mentioned in Agenda 2063 — it is the role of African democratic states to propose national development policies to “consolidate the positive turn around, using the opportunities of demographics, (...) as a springboard to ensure its transformation and renaissance to meet the people’s aspirations.”

**10. African Union Commission, 2015, p.11.**

### Additional advantages of a PDHDD for SWEDD countries

#### Benefiting from a unique demographic window of opportunity

Some countries are in a favourable position to harness a DD. For example, the information collected by CREFAT for Burkina Faso, Chad, Côte d’Ivoire, Mali, Mauritania and Niger shows that the window of opportunity for a DD opened around a decade ago (UNFPA/CREFAT/CREG, 2017). Bloom et al. (2007) and Guengant (2011) also mention Côte d’Ivoire and Mauritania (see Introduction). If those countries increase investment in policies promoting a DD, particularly if they accelerate decreases in their fertility rates, then benefits will begin to accrue within the next 15 years. This is based on studies using the NTA methodology (see Step I). Therefore, it is timely for those countries’ current or future national development policies to connect with the conclusions of national DD studies.

#### Fostering democratic ownership of the National Development Plan

The state has the primary role in producing national development (a public good). Development objectives must provide signals for individuals to behave in harmony with collective interests. It is desirable for each country to produce development policies related to the DD narrative that goes beyond government circles and are shared as a common national development narrative.

The experiences of Thailand and Singapore show that the active and overt roles the state played by proclaiming policies aimed at modifying fertility were instrumental in obtaining results. Like the East Asian countries that first benefited from a DD, governments currently engaged in the DD agenda need to reach out to their populations to start consolidating dialogue at all levels in order to produce social progress (Population change, Thailand, Singapore). A PDHDD is a chief instrument in this process; it should clearly state what the sought-for change is and how the population will benefit from such a transformation. Continuously showcasing the benefits for the population will allow for continued and long-standing commitment to bring about cultural change.
Activation of synergies between different public sectors

The economic and social capital benefits of the DD will only be reaped if countries proactively accompany it with key policies in education, health and youth employment. In addition, there needs to be coordination with other government sectors such as planning, budgeting and finance, economy, equality and family.

The main challenge is in mainstreaming the DD narrative as an integral part of the national development agenda. All policies involved that have traditionally been managed as separate sectors should start working together, either by incorporating additional elements or by organizing existing policy actions around the objectives needed to capitalize on a DD. This will not happen without a clear political will to put the spotlight on the DD objective as a strategic element that guides national development efforts. Thus there is a need for a comprehensive policy declaration that shows the organic roles that each policy sector plays in attainment a national development dynamic geared towards the accomplishment of a DD.

Providing a more sustainable development model

The state-policy character of a policy declaration on DD adds an element to the multisector character of the DD agenda. The policies involved will need to be the object of consensus-building between the different political actors, not just within government institutions. Thus, a country’s engagement in achieving the DD goes beyond political statements issued by one government (particularly one elected for a single elective term). It requires a long-term vision and the policies should be consistently pursued for a period that goes beyond that of an electoral mandate. Rather, the policies should be principles that guide the political decisions and actions of successive governments, as recognized, for example, in Harnessing the Demographic Dividend to Accelerate Socioeconomic Transformation and Economic Development in Malawi (AFIDEP/Government of Malawi, 2016): “develop a long-term national development and socioeconomic transformation vision that succeeding governments will operationalize in their manifestos and implement them.”

A PDHDD must, therefore, avoid becoming separated from the general development context. Instead, it should frame and strengthen the national development narrative and provide strong arguments to accelerate the implementation of specific actions to make national development more sustainable. By providing momentum for transforming cultural practices, a PDHDD will also set the tone for a national development narrative that will have long-lasting, sustainable effects.

The emergence of the macroeconomic reasoning around the DD is an important reason for this renewed interest in the need for fertility reduction on the continent. The focus on the DD should provide a new stimulus. The PDHDD will ensure the involvement of those government sectors most directly concerned with the management of the economy; this will be of central importance, provided that appropriate solutions can be found for the challenges of policy coordination.
2.3. Progress on the Road to a PDHDD – Country Mapping in some West and Central African Countries

The following continuum summarizes the steps to be taken by countries such as Kenya or Senegal, which have recently produced their PDHDD.

Figure 2.2
Steps to Produce a PDHDD

<table>
<thead>
<tr>
<th>Literature review or training to understand the central importance that population dynamics have to sustainable economic and social development</th>
<th>An analysis of the country’s current development situation, including demographic considerations</th>
<th>Country modelling to measure the country’s potential to benefit from a DD</th>
<th>Policy analysis to elaborate the strategies the country can put in place in order to increase its chances of harnessing a DD</th>
<th>Drafting a document with the essential information to show the road to a national harnessing of a DD</th>
<th>Official pronouncement and publication of the PDHDD</th>
</tr>
</thead>
</table>

Each one of the following six West and Central African States has taken steps towards adopting policies favouring a DD. With UNFPA and CREFAT technical support, they have produced policy briefs relating the current situation to the DD; some have produced their PDHDD.

Below are their “progress report cards”, showing the road travelled to achieve their PDHDD, as compared with the continuum chart in Figure 2 above. For each State, the list of documents produced shows their engagement on the road to a PDHDD. Those documents contain valuable analyses and facts upon which to build their PDHDD. The policy briefs listed refer to those mentioned above.

**Burkina Faso PDHDD Progress Report Card**

The National Economic and Social Development Plan for 2016-2020 (*Profil du dividende démographique du Burkina en 2014*, Provisional report dating from July 2016) was elaborated by a Steering and Supervising Committee (Comité d’orientation et de supervision - COS). The Committee is presided over by the Prime Minister and composed of representatives from the national and local governments, the private sector and civil society. Its Strategic Objective 2.1 promotes the health of the population and the acceleration of the demographic transition.

Figure 2.3
Burkina Faso’s Road to a PDHDD
**POLICY DECLARATION**

*Profil du dividende démographique du Burkina en 2014*, Provisional report dating from July 2016. Policy Briefs:

- ‘Demographic Dividend in Burkina Faso: a Gender Approach’;
- ‘Economic Dependency in Burkina Faso: Vulnerable Youth Heirs of Low-income Senior Citizens’;
- ‘Youth, Demographic Dividend and Employment Market: a Third of GNP to Finance the Consumption of the Youth’;
- ‘Demographic Dividend Window Open in Burkina Faso: an Opportunity to Boost Sustainable Development’;
- ‘The Demographic Dividend for an Inclusive Development in Burkina Faso’; and
- ‘Spatial Disparities and Demographic Dividend in Burkina Faso.’

**Chad PDHDD Progress Report Card**

The National Development Plan for 2017-2021, elaborated by the Office of the Prime Minister and the Ministry of Economy, Planning and Development, refers to the DD: “in order to benefit from the DD, Chad must make efforts to begin its demographic transition over the 2017-2021 period by reducing fertility that has stagnated for almost 30 years to about 6 children per woman.”


Policy Briefs:

- ‘Economic Dependency in Chad: 32 per cent of GNP to Finance the Consumption of Youth and Senior Citizens’;
- ‘Gender and Demographic Dividend in Chad: Men 22 Times Less Dependent than Women’;
- ‘Youth, Employment Market and Demographic Dividend in Chad: looking for over 50 per cent of GNP to finance youth consumption’;
- ‘Spatial Disparity and Demographic Dividend in Chad: A Deficit 4 Times Higher in Rural Areas’;
- ‘Chad Demographic Dividend Profile: From-Myth-to-Reality-Approach to Harnessing the Demographic Dividend’; and
- ‘Demographic Dividend in Chad: Between Structural Constraints and Endogenous Potential’.

**Figure 2.4**

Chad’s Road to a PDHDD
Côte d’Ivoire PDHDD Progress Report Card

The National Development Plan for 2016 – 2020, elaborated by a multisector Steering and Supervising Committee (Comité interministériel d’orientation et de supervision - COS-PND 2016-2020), presided by the Prime Minister, and articulating the action of the Ministry of Development and Planning and the office of the Director General of Planning and Poverty Fighting.


Policy Briefs:

• ‘Open Window of Opportunity for the Demographic Dividend: Contribution to Economic Development in Côte d’Ivoire’;
• ‘Economic Dependency in Côte d’Ivoire: The Dilemma of Intergenerational Financing: 36 Per cent of GNP to Finance Public Social Demand’;
• ‘Gender Equality: What is at Stake for the Harnessing of the Demographic Dividend in Côte d’Ivoire’;
• ‘Youth, Employment Market and Demographic Dividend in Côte d’Ivoire: The Contribution of Generational Economics’;
• ‘Spatial Disparities in Côte d’Ivoire: Analysis using Generational Economics Lenses’; and
• ‘The Challenge of Accomplishing a Demographic Dividend in Côte d’Ivoire’.

Figure 2.5
Côte d’Ivoire’s Road to a PDHDD

Mali PDHDD Progress Report Card

• The current Strategic Framework for Growth and Poverty Reduction (CSCRP) for 2012-2017, defines the need for urgent action: “The large young population of Mali could constitute a ‘time bomb’ in the coming decades if a strategy to benefit from the demographic dividend is not put in place. Young people will only be able to increase the capacity of the nation to emerge from poverty once they exercise it to health, education and decent work”;

• The 2016 Strategic Framework for Economic Relaunch and Sustainable Development of Mali (CREDD) for 2016-2018;

• Rapport national sur le profil du dividende démographique au Mali. Published by the Ministère de l’Aménagement du Territoire et de la Population, UNFPA and the World Bank; and

• Published in 2017, ‘The Mali Roadmap for the Demographic Dividend’ “to fully benefit from a DD through investment in youth,” includes all the components of a Policy Declaration.

Mauritania PDHDD Progress Report Card

- *The National Development Plan (SCAPP) for 2016-2030*, published by the Ministry of Economy and Finance. It shows the existing window of opportunity for a DD in Mauritania and links to various government sectors that should be involved to achieve it;

- ‘*Rapport de l’atelier de formation sur la mesure du dividende démographique en Mauritanie*, provisional version drafted by UNFPA and CREFAT in March 2016; and

- April 2017 Ceremony in Nouakchott to launch the national campaign ‘How to Fully Benefit from the DD by Investing in the Youth’.

Niger PDHDD Progress Report Card

- The *National Social and Economic Development Plan* for 2017-2021 is under construction at the moment. The existing draft takes into account the demographic transition as one of the strategic axes to consider for national development. This section links this axis to other policies, such as the National Gender Policy, the National Policy on Youth, the National Social Protection Policy and Health Ministry action; and

2.4. Conclusion

**Operational steps to produce a national PPHDD**

**Action 1**: Anchor the National Policy Declaration to Harness a Demographic Dividend on relevant and existing guiding frameworks and principles;

**Action 2**: Examine, with concrete data, the national potential for a DD;

**Action 3**: Single out key pillars of policy action or priority sectors;

**Action 4**: Explain the implementation, monitoring and evaluation mechanisms devised to enact and follow-up the PPHDD; and

**Action 5**: Strengthen the PDHDD by transparently describing the methodology used to arrive at and acknowledging the participation of partners.

A policy to harness the DD goes beyond a traditional population policy. It seeks to sustainably influence national development by taking into consideration people’s reproductive aspirations, their health, their children’s health, their economic autonomy and their democratic empowerment. In order to be legitimate, the PDHDD needs to be rooted in national, regional and even international development objectives. A policy document that encompasses the different measures to harness the DD should be composed of guiding principles and frameworks, a country analysis, key pillars of policy action, implementation and monitoring guidelines, partnerships and budgeting strategies. See Annex 1 for a template.

The countries analysed in Section 2.3 have taken several concrete steps: roadmaps to harness the DD have been launched in Mali and Mauritania, and work is underway in the other four countries (Burkina Faso, Chad, Côte d’Ivoire and Niger). Yet they are not the most advanced of the African continent in this respect. Kenya and Uganda made considerable progress in articulating their policy frameworks, whereas the progress of Ethiopia, Malawi and Rwanda in expanding family planning has been notable.
Dignité, sécurité et santé pour toutes les femmes et les filles dans toutes les circonstances
3.1. What is Gap Analysis?

In general, a gap analysis compares a current situation with the desired state of the problem or issue being analysed in order to establish what it would take to achieve the latter. A gap analysis involves three essential components: a measure by which to characterize the current situation; a definition of the situation considered desirable; and some relatively simple measure to characterize the costs to be incurred, the measures that need to be taken or the improvement in certain key indicators that need to happen in order to advance from the initial characterization to the desired state.

Depending on the issue, the way in which each of these components is operationalized can have different levels of complexity. In the simplest case, a gap analysis can be a straightforward comparison of some current indicator with a desirable level of that indicator. For example, the literacy of persons between 15 and 24 years of age in a country is 60 per cent. In order to be in a similar situation to a group of other countries considered to be an appropriate reference, this number should increase to at least 90 per cent.

A slightly more complex form that the gap analysis can take is that of a costing exercise: what would it cost a country’s ministry of health to ensure that all state-run family planning clinics satisfy certain minimum quality standards? African ministries of health routinely carry out these kinds of assessments. A more difficult question would be: What would it take to reduce the unsatisfied demand for contraception of women of all education levels and in all regions of the country to less than X per cent? This involves not only a monetary calculation of supply factors, but also a more complete analysis of the reasons why the underlying unsatisfied demand in certain regions or among certain educational groups exceeds X per cent. The reasons could stem from poor infrastructure, cultural biases, gender inequalities, lack of community support or several other factors that would require investigation. This requires at least the development of a set of more detailed indicators that would allow measuring the progress made in achieving the objective. In the limit, a gap analysis can evolve into a complete theory of change (see Step V).

The preconditions for the DD belong to several distinct domains (health, education, economy, gender, governance) that may require different approaches to the components listed above. For example, a gap analysis in the governance area may require an indicator of perceived corruption or insecurity, whereas a gap analysis of educational goals can often rely on routine administrative indicators collected by the ministry of education. UN Women has elaborated standardized protocols for gap analysis in the gender area, but
these are of little use for analysing entrepreneurship among young people. Therefore, the design of a unified methodology that goes beyond using simple aggregate indicators must draw on distinct methods from various areas, particularly those that consider the preconditions for the DD.

Given that countries will vary in their prioritization of which gaps to close, gap analysis must be country-specific. However, it is possible to adopt a common methodology to carry out this task. Irrespective of a country’s stage of advancement, establishing gaps requires taking into account several factors:

- The key investment pillars in youth stipulated by the AU Roadmap on Harnessing the Demographic Dividend, particularly health and well-being; education and skills development; employment and entrepreneurship; and rights, governance and youth empowerment;

- The specific challenges in detected gaps as presented by each country, which must be presented clearly in the document; and

- The 17 SDGs formulated with a horizon of 2030, and especially the Development Agenda 2063, which represents the AU’s common development vision for the African continent.

The importance of this diagnosis is not only about the possibilities of making better use of the DD, but also of better understanding how the opportunity for a DD can contribute to achieving the SDGs.

3.2. Identification and Quantification of the Gaps

Establishing a first country profile according to the methodology presented in Step I enables classification of it in terms of the phase of the demographic transition and the country’s smaller or greater proximity to reaching and capitalizing on the DD after the demographic window of opportunity has opened. This first profile makes it possible to form ideas about the most important gaps, but it is not enough to measure and analyse which gaps remain to be closed with respect to specific policy measures that contribute directly or indirectly to the realization of the DD.

In all the examples of the previous section, the objective can be stated in relatively unambiguous quantitative terms. In the case of the DD, however, one may state very broad demographic and economic objectives (e.g. less than 60 dependents per 100 persons of working age, absence of a life cycle deficit, economic growth of at least 5 per cent per year). These direct impacts need to be complemented with an analysis of the gaps in other variables that have a more indirect impact on achieving the DD. This requires establishing which variables need to be considered in this context. Further, criteria need to be established about the levels that they should reach in order to be effective, i.e. the critical values. Secondary schooling of girls is certainly important, but there is no generally agreed upon norm dictating the percentage of girls that should have secondary education in order to enable the DD. Similarly, contraceptive prevalence rates in the SWEDD countries, which are currently in the order of 5 to 20 per cent, need to increase — but the question is, by how much?
Action 1: Selection of the reference criterion: two possible options

First option: Choose a reference country or a reference country group that is recognized as an emerging country (group) and that has managed to take advantage of its DD. It is possible to recover the values of the indicators that are the object of the gap analysis shortly before or in the beginning stages of the DD in those countries.

This referent cannot be the same for all African countries because the existing analyses and NTA profiles have clearly shown different degrees of demographic transition, different dates for the effective opening of the window and differences in the levels of key NTA indicators.

Some precautions must be taken in selecting the reference country or group countries. The selection must take account of the opening date at the window of opportunity for the country, which should not go too far back in the past because of increasing intensification of international changes and progress in key fields such as health and communication. It is also widely recommended that there be a certain cultural proximity (norms and societal values) with the referent because customs and practices have a significant, albeit difficult to measure, influence on key variables of the economic dividend.

Second option: Set a precise ex-ante definition of the reference criteria regarding the different policy components with respect to the DD. These are precise objectives to be attained in accordance with the plan for capturing the DD that each African country is called on to draw up. It is desirable — and even necessary — that this definition/quantification of targets takes account of the other national and sectoral sustainable development policies.

Action 2: Measurement of the gaps

For each of the main variables, it is initially a question of calculating the difference between the value of each variable in a given year \( t \) and the variable’s reference value in accordance with the option chosen above. If the first option under Action 1 is chosen, then this is the value of the variable associated with the country/group of countries referring to a selected year \( t \), where this year corresponds to the desired level of advancement of the DD. If the second option is chosen, it is the ex-ante value in accordance with the objectives to be achieved for year \( t \).

All things being equal, this gap quantifies the way forward for a country to fulfil a necessary condition to attain the given objective. The greater the gap is, the greater the delay in the variable under consideration.
Box 3.1 - Example of gap analysis using a reference country

As an example of the first option described above, take female adult literacy in Côte d’Ivoire in 2015 (t), which was estimated to be 32.5 per cent.

Assume that Thailand is considered an appropriate reference country. When the DD in Thailand got started (1975), female literacy there was 80 per cent. Considering that current demographic conditions in Côte d’Ivoire already make a DD possible, this implies a very large gap in female literacy of 80 – 32.5 = 47.5 per cent.

If Thailand is not considered an appropriate reference and if instead China is taken as a reference, the difference is much smaller, as female literacy in China in 1975 was less than 40 per cent. However, China is special in the way it achieved its DD, which will probably not be replicated in Côte d’Ivoire. Therefore, the idea that Côte d’Ivoire still has a large deficit in female education to bridge in order to achieve its DD seems more plausible than the alternative — that Côte d’Ivoire will be able to deal with this gap in the same way that China did, while still capitalizing on its DD. Experimenting with different reference countries may result in more idea about the situation.

3.3. Use of the gap analysis in the overall evaluation strategy

Once the gap measurement has been completed, the proposed approach will allow:

**Action 3: Prioritize the gaps (and possibly redefine the objectives to be expected)**

Once all the gaps have been calculated, they should be prioritized to better target policy priorities and to redefine within each DD policy objective the quantifiable goals and the time horizon (i.e. the duration) necessary to achieve them. The time analysis should take into account the transversality/simultaneity of the measures to be taken.

At this stage of policy development, three recommendations can be made:

**Recommendation 1**: Prioritization of priorities should take into account the National and Sectoral Development Plans and the 17 SDGs. This will ensure greater coherence between the DD strategy and the national development strategy, enhancing the opportunities to capitalize on the DD.

**Recommendation 2**: The setting of quantifiable goals and a time horizons must take into account the evolution of the population sizes affected by the measures because this number has a direct impact on the cost of the measures.

**Recommendation 3**: The choice of the time horizon to achieve a given objective must not be set independently of the choice of measures directly and indirectly related to it. The same horizon will not be uniformly assigned to all the objectives, as different degrees of handicaps and/or difficulties in their realization have to be considered.
Action 4: Select investments that will reap the benefits of the DD

After redefining the quantifiable goals, evaluate the proposed measures’ costs to achieve the expected results. In addition, evaluate the financial resources to be mobilized from both domestic and international sources. In this regard, it is clear that the more consistent the quantifiable goals of the DD strategy are with those of the national sustainable development strategy, the more feasible it will be to optimize the financing of the DD.

Action 5: Evaluation ex-post

Given the time horizons, it will be necessary to measure the differences between the results obtained (values actually achieved), and the objectives set (expected values), in accordance with any logic of ex-post policy evaluation. Measuring this second type of gap is a valuable tool for monitoring the process of capturing the economic dividend over time. It allows, over the years and to the extent that it is needed, readjustment of the priorities and goals.

Action 6: Construct a common tool

Ultimately, gap analysis and monitoring are based on the construction of a common tool that allows the assessment of the gaps to be filled over the years. It should help to visualize the whole process to better capture the DD, from the preliminary assessment of the initial gaps to the final ex-post evaluation. Because prioritizing DD objectives takes into account some national development policies, it is a useful tool for assessing (over time) the DD’s contributions to national development goals.

3.4. Conclusion

Gap analysis is a crucial step in the policy cycle to reap optimum benefits from the DD. It represents the comparison of a current situation with the desired state of the problem or issue being analysed. This sets the ground for the elaboration of a theory of change that will establish a path to fill the identified gaps by a chain of interventions leading to the expected outcomes (see Step V). It is recommended that African countries adopt a common methodology to carry out this task, even if the hierarchy of gaps to close varies from one country to the next.

Prerequisites for the execution of a gap analysis

In order to build the country profile, countries must:

1. Define their specific challenges in terms of detected gaps, especially with respect to the phase of the demographic transition in which the country is situated and its degree of capture of the DD; this is the central objective of the country profile.

2. Take into account specific and targeted policies, especially the key investment pillars in youth as stipulated by the AU Roadmap, the 17 SDGs (SDG horizon 2030) and Development Agenda 2063.
3. Define a set of key variables (see Step I) that are directly and indirectly related to the DD in order to quantify the most important gaps to be filled in terms of the DD and the SDGs. The indicators used by CREFAT should be complemented with variables related to, among other things, family planning, gender equality, governance, youth empowerment and the socioeconomic environment.

4. Define critical values (numerical targets to achieve) for the above selected indicators in order to quantify their deviations. This can be implemented by either choosing an emerging reference country or group of countries or by giving a precise ex-ante threshold for each one of the selected indicators. The measurement of the gaps depends on the option retained in terms of the definition of the critical values. In both cases, the results quantify the way forward for the country to fulfil each necessary condition to obtain a given objective.

**Operational steps for the gap analysis**

**Action 1:** Selecting the reference criterion (two possible options);

**Action 2:** Measuring the gaps;

**Action 3:** Prioritizing the gaps (and possibly redefining the expected objectives);

**Action 4:** Detecting investments to reap the benefits of the DD;

**Action 5:** Evaluating ex-post; and

**Action 6:** Constructing a common tool.

Once the gaps have been quantified, it will be necessary to prioritize the gaps to better target policy priorities and to eventually redefine the goals and/or the time horizons. This will contribute to better detecting investment needs in such a way as to reap optimum benefits from the DD.

Finally, it is necessary to proceed to a quantification of gaps over time in accordance with ex-post evaluation logic. This monitoring process will ensure the visualization and follow-up of the degree to which the DD is being captured.
In order to carry out an effective policy to achieve the DD, it is necessary to identify the potential partners that can provide support to the government in policy formulation, implementation and monitoring and evaluation. National and local institutions, international institutions and bilateral cooperation agencies, non-governmental and civil society organizations and the private sector have roles to play and should contribute to attaining the first DD. Each country must perform a mapping of potential partners. The objective of this chapter is to guide this work, proposing a methodology for stakeholders and partnership identification and coordination.

4.1. Partnership-building Methodology

Action 1: Conduct an existing partnerships asset mapping

Putting in place a policy to achieve the DD entails the involvement of many government sectors. Some countries have started implementing measures related to a DD policy and have started building partnerships to support those policies. As a first step, therefore, each country should conduct an asset mapping of existing partnerships. Table 4.1 provides a list of ministerial and public sector partners to associate. In the second phase of partnership asset mapping, public sector ministries should be tasked with conducting their own partnerships asset mapping.

Action 2: Identify stakeholders

It is important to use the policy declaration and roadmap to guide partnership identification in support of a national DD policy. Those documents will contain the main national priorities and objectives to focus on. Due to the degree of consensus needed by a DD policy, the process of defining objectives should be as participatory as possible (particularly with stakeholders that will benefit or be affected during DD policy implementation). Stakeholders should be engaged from the early stages of DD policy definition, as their participation will be useful to support government actions throughout the process; stakeholders should be considered as partners. A stakeholder mapping must be clear from the policy definition stage.
**Action 3: Tailor partnerships around the national DD roadmap priorities**

One method to recognize possible partnerships consists of a process-driven partner identification, with the objective to detect partners for different stages of the process.\(^\text{13}\) Once a national policy declaration on harnessing the DD exists, a country has a roadmap that has established the priorities of action. Logically, these priorities point to the strategic partners to target.

The ‘Kenya Demographic Dividend Roadmap’ shows how Kenya decided to tailor partnerships around the four pillars of investment in order to harness a DD. For each pillar, the Roadmap identifies specific activities and partners. Table 4.1 presents a summary of partners per pillar as they appear on the Kenyan Roadmap (National Council, Kenya, 2017, Chapter 5, pp 6-24).\(^\text{14}\)

If a country has a decentralized governance structure, it should assign the responsibilities at all relevant levels: regional, province, and municipal. Each country should adapt this list to the national nomenclature, corresponding to their specific institutional attributions and to the partners present in their territory.

Some strategic partners that should be involved in the process have not yet been mentioned, as they do not play a sector-specific role. It is, however, important to involve these institutions as they are responsible for operationalizing public policies. Example strategic partners include the ministry of budget and finance, the ministry of planning and the prime minister. In terms of monitoring progress and expanding state action on the DD, example partners include the ministry of population, the national statistics institute, national Universities and research Centres that specialize in population issues.

Step II (Action 3) highlighted the importance of considering gender equity and equality as cross-cutting in all pillars. In Table 4.1, this has been operationalized by putting the ministry in charge of gender equality as a partner in each pillar.

The link with gender equity and equality is not visible in Table 4.2. It is a cross-cutting issue that was taken into consideration in the choice of partners cited, which all have explicitly adopted gender equality as a fundamental component of their development interventions.

**Action 4: Association of partners and stakeholders to the national action plan on harnessing the DD**

A multi-stakeholder and multi-partner analysis should be conducted with the aim of reinforcing the democratic ownership of the PDHDD.

Involving the direct beneficiaries of the policies involved is a ground-laying strategy to facilitate acceptance and promotion of foreseen actions. A good practice example is found in the definition process of the Mali Roadmap for the Demographic Dividend, where the involvement of youth was a key
Table 4.1
Kenyan Roadmap Partnership-building around Four DD Pillars

<table>
<thead>
<tr>
<th>Pillar I</th>
<th>Pillar II</th>
<th>Pillar III</th>
<th>Pillar IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and well-being</td>
<td>Education and Skills Development</td>
<td>Employment and entrepreneurship</td>
<td>Rights, governance and youth empowerment</td>
</tr>
<tr>
<td>Ministry of Health</td>
<td>Ministry of Education</td>
<td>Ministry of West African Community, Labour and Social Services</td>
<td>Ministry of Education</td>
</tr>
<tr>
<td>County or provincial governments</td>
<td>Ministry of Public Service, Youth and Gender Affairs</td>
<td>Ministry of West African Community, Labour and Social Services</td>
<td>Ministry of West African Community, Labour and Social Services</td>
</tr>
<tr>
<td>Ministry of Education</td>
<td>Ministry of Foreign Affairs</td>
<td>Ministry of Economy and Finance</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>Ministry of West African Community, Labour and Social Services</td>
<td>Ministry of West African Community, Labour and Social Services</td>
<td>Ministry of Sports and Culture</td>
<td>Ministry of Interior and Coordination of National Government</td>
</tr>
<tr>
<td>Ministry of Coordination of National government</td>
<td>Ministry of Coordination of National Government</td>
<td>National Association of Manufacturers</td>
<td>Ministry of Coordination of National Government</td>
</tr>
<tr>
<td>Ministry of Public Service, Youth and Gender Affairs</td>
<td>National Council for Population and Development</td>
<td>Ministry of Coordination of National Government</td>
<td>Ministry of Public Service, Youth and Gender Affairs</td>
</tr>
<tr>
<td>National Council for Population and Development</td>
<td>Ministry of Information and Communication Technology</td>
<td>National Private-sector Alliance</td>
<td>Ministry of Sports and Culture</td>
</tr>
<tr>
<td>Partners in Population and Development</td>
<td>National treasury</td>
<td>Ministry of Education</td>
<td>Secretariat of New Partnership for African Development (NEPAD)</td>
</tr>
<tr>
<td>The World Bank</td>
<td>County or provincial governments</td>
<td>County or provincial governments</td>
<td>County or provincial governments</td>
</tr>
<tr>
<td>UNFPA and UN System Agencies: UN Women</td>
<td>UNFPA and UN System Agencies: UNICEF, UNESCO, UN Women</td>
<td>National treasury</td>
<td>State law office</td>
</tr>
<tr>
<td>International foundations</td>
<td>International foundations</td>
<td>National labour unions</td>
<td>Civil society</td>
</tr>
<tr>
<td>Bilateral partners</td>
<td>Bilateral partners</td>
<td>Ministry of Agriculture</td>
<td>UNFPA and UN System Agencies: UNDP, UN Women</td>
</tr>
<tr>
<td>Civil society</td>
<td></td>
<td>UNFPA and UN System Agencies: UNDP, UN Women</td>
<td>Bilateral partners</td>
</tr>
<tr>
<td>USAID</td>
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</tbody>
</table>
Table 4.2
Additional Non-governmental Partners

<table>
<thead>
<tr>
<th>Pillar I</th>
<th>Pillar II</th>
<th>Pillar III</th>
<th>Pillar IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and well-being</td>
<td>Education and Skills Development</td>
<td>Employment and entrepreneurship</td>
<td>Rights, governance and youth empowerment</td>
</tr>
<tr>
<td>International, national, and local</td>
<td>International, regional national, and local</td>
<td>International, regional national, and local</td>
<td>International, regional national, and local</td>
</tr>
<tr>
<td>Civil Society Organizations</td>
<td>Civil Society Organizations</td>
<td>Civil Society Organizations</td>
<td>Civil Society Organizations</td>
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<tr>
<td>Members of International Planned</td>
<td>Plan International</td>
<td>Members of International Trade Union Confederation</td>
<td>Members of International Trade Union Confederation</td>
</tr>
<tr>
<td>Parenthood Federation</td>
<td>Global Partnership for Education (GPE)</td>
<td>International Cooperatives Association - regional</td>
<td>International Cooperatives Association - regional</td>
</tr>
<tr>
<td>Global Health South</td>
<td>The private sector</td>
<td>or national federations members</td>
<td>or national federations members</td>
</tr>
<tr>
<td>Marie Stopes International</td>
<td>International businesses - Social</td>
<td>Regional Network of Farmers Organizations and</td>
<td>Regional Network of Farmers Organizations and</td>
</tr>
<tr>
<td>Pathfinder International</td>
<td>corporation responsibility</td>
<td>Agricultural Producers in West Africa - ROPPA</td>
<td>Agricultural Producers in West Africa - ROPPA</td>
</tr>
<tr>
<td>Private Sector</td>
<td>Bill and Melina Gates Foundation</td>
<td>Other rural and farmers organizations, such as</td>
<td>Other rural and farmers organizations, such as</td>
</tr>
<tr>
<td>GBC Health Coalition</td>
<td>William and Flora Hewlett Foundation – Education Programme</td>
<td>PAFO (Pan African Farmers’ Organizations)</td>
<td>PAFO (Pan African Farmers’ Organizations)</td>
</tr>
<tr>
<td>Bill and Melina Gates Foundation</td>
<td>David and Lucile Packard Foundation – Advancing Reproductive Health Programme</td>
<td>The private sector</td>
<td>The private sector</td>
</tr>
<tr>
<td>William and Flora Hewlett Foundation</td>
<td></td>
<td>Members of international business networks</td>
<td>Members of international business networks</td>
</tr>
<tr>
<td>Global Development and Population</td>
<td></td>
<td>Members of RYPESS (International Network for the Promotion of Social Solidarity Economy)</td>
<td>Members of RYPESS (International Network for the Promotion of Social Solidarity Economy)</td>
</tr>
<tr>
<td>Programme</td>
<td></td>
<td>David and Lucile Packard Foundation – Helping Farmers Protect our Planet and Nourish the World Programme</td>
<td>David and Lucile Packard Foundation – Helping Farmers Protect our Planet and Nourish the World Programme</td>
</tr>
<tr>
<td>David and Lucile Packard Foundation</td>
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<td>National businesses coalition</td>
<td>National businesses coalition</td>
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<tr>
<td>– Advancing Reproductive Health</td>
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<td>Programme</td>
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</tbody>
</table>

15. Examples of African IPPF’s members: Burkina Faso, Association burkinabé pour le bien-être familial; Côte d’Ivoire, Association ivoirienne pour le bien-être familial; Mali, Association malienne pour la protection et la promotion de la famille; Niger, Association nigérienne pour le bien-être familial; Chad, Association tchadienne pour le bien-être familial.
16. Example of REPAOC’s members: the Permanent Secretariat of Non-governmental Organizations (SPONG – Burkina Faso); the Federation of Malian Non-governmental Organizations Coalitions (FECONG – Mali); the Network of Development Non-governmental Organizations and Human Rights Defense and Democracy Associations (RGAADHD – Niger). For information on other national development NGO platforms, see http://ifp-fip.org/en/sections/platforms/.  
17. Other REPAOC’s members: Centre d’information et de liaison des ONG (CILDONG – Tchad). 
19. Marie Stopes is active in 16 African countries, including Burkina Faso and Niger.
20. Pathfinder is active in Burkina Faso, Côte d’Ivoire and Niger.
aspect: “the national forum ‘Youth, SDGs and the Demographic Dividend’ (Bamako, December 2016) and many other advocacy sessions with young people (e.g. G5 Youth) have enabled highlighting the need to benefit from a DD in Mali.”

At the institutional level, the attention that parliamentarians are giving to the question illustrates high interest on the subject; it is crucial to harness the interest of policy makers at the national level.

In July 2017, the West-African Health Organization and the National Assembly of Burkina Faso co-organized a high-level meeting of parliamentarians from 17 countries in Ouagadougou, Burkina Faso. The meeting focused on the “adequate financing of health, the DD, population policies and development in the ECOWAS area, in Mauritania and in Chad.” The involvement of many other partners shows large support for DD policymaking and signifies how much it represents for those stakeholders.

Other conferences have been organized to raise awareness and to discuss the concrete involvement of parliamentarians. For example, in 2016, the Africa Parliamentary Forum on Population and Development produced ‘Parliamentarians 2017 – 2018 Action Plan on The AU Roadmap on Harnessing the Demographic Dividend through Investments in Youth’, which identified areas to be involved in.

4.2. Additional Tips for Building Partnerships

National authorities’ crucial coordination role in mobilizing partners

Policies to achieve the DD must be strongly aligned with the national development policy. Since both require a multisectoral approach, the role of central national authorities is to coordinate this process and to build partnerships in order to coordinate non-governmental and public efforts. National authorities should also aim at rationalizing investments and avoiding duplication of efforts.

The case study of Kenya (Taddese, Gandolfo and Carano, 2017), gives some insight on the requirements of such a policy in terms of implementation and association of partners. Among the lessons drawn from the Kenyan experience is that evidence-based information is not enough to engage policy- and legislation makers’ support for the DD agenda. Further, informal relationships among actors did not prove to be an efficient way to engage in action for the DD agenda. In contrast, collaboration and structured partnerships between evidence producers and policymakers were effective in achieving long-term and multipronged commitments to the DD agenda. Its conclusion points out three main guidelines for the DD policy coordination: “[Strong] collaboration between decision makers and evidence producers is necessary to advance a policy agenda; research should be aligned with policymaker priorities; and structured knowledge exchange opportunities could help elevate policy issues.”

Drawing from this experience, the effective implementation of the DD agenda depends on the role of a formal animating and coordinating entity.
In addition to the coordination aspect, governments play a role in setting the path, making clear what the steps are to reach a DD. Policies to achieve the DD will only be effective if the government is also in charge of creating all favourable conditions, such as accelerating a demographic transition, increasing education rates (especially of girls), increasing employment opportunities and passing needed legislation. This means associating the legislative institutions and involving them in the process of harnessing a DD.

After conducting the country analysis, it is necessary for the government to decide on the top priority on which to focus the national policy in order to achieve the DD at a given time. In addition, as a policy to achieve the DD usually comes after other national development policies are already in place (especially regarding areas such as health, education and economics), it is the government’s role to reorganize ongoing policies related to that top priority and with the DD policy in general.

The wide variety of involved stakeholders and partners warrants a solid convening and coordinating entity. The entity chosen should have the full support of the presidency and the government in order to have the political legitimacy required to play its role. In turn, this legitimacy should be reinforced by the methodology used to make all partners work in the same direction.

4.3. Conclusion

Operational steps to build partnerships around the PDHDD

**Action 1:** Carry out a partnership asset mapping based on existing or ongoing partnerships in the priority sectors involved in the PDHDD;

**Action 2:** Identify policy stakeholders and their potential to participate and collaborate in PDHDD implementation;

**Action 3:** Tailor partnerships around the national DD roadmap priorities; and

**Action 4:** Associate partners and stakeholders with the national action plan on harnessing the DD in a coordinated manner.

Because harnessing a DD requires sustained policy implementation over a time-span of decades, the process requires technical guidance to establish the policy and monitor its progress, strong institutional coordination to implement it and the association of stakeholders and partners. National and local institutions, international institutions and bilateral cooperation agencies, non-governmental organizations, civil society, the private sector and academia, should all be called on to contribute. Each country must do its own mapping of potential partners, tailored around the priorities identified in the national roadmap to capture a DD. Along with the AU pillars, it is crucial to pay attention to cultural transformation and gender equality. Governments must rally all forces — public, private and coming from civil society — in order to ensure the implementation of policies and the promotion of change over time.

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25. According to Canning et al. (2015), “to harness the demographic dividend, policies are required that both hasten the transition to smaller cohorts and enable cohorts to be productive. The number of policies and their prioritization will need to be nuanced for each country, depending on the state of its transition and its economic environment.”
STEP V

Theory of change

Building a theory of change is at the centre of this nine-Step process; it builds upon the first four Steps and lays the groundwork for the four Steps ahead.

5.1. What is a Theory of Change?

A theory of change is a central tool at the disposal of all stakeholders involved in formalizing the expected impacts, outcomes, interventions and underlying assumptions. A theory of change is particularly well-suited in the context of the DD, as it illustrates the pathways of change from a contribution perspective rather than from a purely attributional perspective.

Fundamentally, a theory of change describes an initiative or programme logic. It sets long-term goals and then maps backward, from long-term impacts to short-term interventions in order to identify changes that need to happen earlier (also known as preconditions). A theory of change is a graphic representation of changes in causal chains of outcomes, showing each outcome in a logical relationship to the others (Taplin, Clark, Collins and Colby, 2013).

Interventions represent activities and outputs of any sort and are linked to the outcomes chain in order to illustrate what stakeholders anticipate is required to achieve the outcomes. A theory of change provides an operational tool that allows testing hypotheses and assumptions regarding the interventions that will lead to the expected outcomes. It will also help to define the measurable indicators of success that will frame monitoring and evaluation.

Work on a theory of change is about both the process and the product. The process of working out the theory is mostly participatory with stakeholders and experts. The product of that process is a document of the change model that demonstrates how and why a goal will be reached. In the development context, a theory of change differentiates itself from the traditional programming approach in that it does not use the so-called ‘so that’ causation model. The ‘so that’ concept’s attributional nature limits the possibility of several interventions contributing to one output. In contrast, working backwards with a theory of change approach allows an easier identification of all necessary preconditions for change to happen.

In practice, a theory of change folds into four main types, depending on how broad or narrow, deep or shallow they are. For example, a broad and shallow theory of change will look at a wide scope of outcomes while not looking too deeply into outputs and interventions; a narrow and deep theory of
change will dig deep into the outcomes chains. The type of theory of change required for a specific theme depends on the audience it is targeted to, its scope and its purpose. In large-scale policy frameworks (such as UNFPA’s Strategic Plan 2014–2017), it is customary to limit the number of levels to three: the overall goal; the main components required to achieve the overall goal or outcomes; and the outputs or concrete short- and medium-term objectives that the organization can be held accountable for.

In what follows, a narrow and shallow representation of a possible theory of change for the DD will be presented; it can be used for advocacy purposes to illustrate the broad principles of the theory to policymakers.

Apart from the different levels of outcomes that need to be realized in order to achieve the overall goal, a fully structured theory of change also needs to specify seven elements:

1. The **rationales** that justify the expectation that outcomes at one level will bring about the results expected at the next level. For example, in the case of the DD, what is the justification for expecting that raising girls’ educational levels will lead to a faster decline of fertility or to the postponement of the age of marriage? The rationale will link up with the intervention and the assumption.

2. The specific **interventions** that will be required to ensure that the next level in the outcome chain is achieved. For example, possible interventions to raise girls’ educational levels is raising the minimum age the law requires children to be in school for or advocating to families for higher school enrolment rates for girls.

3. The **actors** responsible for carrying out the interventions (in the example case the ministry of education).

4. The **indicators** that are required to verify whether the expected result has indeed been achieved. In the education example, it would be relevant to measure both the increase in female enrolment in the appropriate ages and the effect that it is having on young girls’ fertility levels.

5. The key **assumptions** that have to be made for the desired effect to become reality. For example, in a situation where most girls do not go to school at all, raising the legal minimum age at which they may leave school is unlikely to have a major effect; a better strategy would be to first advocate that more girls go to school. This also illustrates how assumptions, interventions and rationales tie in together.

6. The **risks and barriers** that may be encountered in the process. For example, in situations where young girls fulfil many essential tasks in the household economy, parents may actually resist attempts to require them to spend more time in school.

7. The **narrative** that summarizes the theory of change, explains the overall logic putting the major assumptions in perspective and demonstrates how the initiative is expected to work. The narrative works in tandem with the graphic visualization.

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26. Although the exact results may vary from country to country, the rule-of-thumb in the context of West and Central Africa is that two years of additional education for girls leads to a one-year postponement of the age at marriage. Canning et al. (2013) find that increasing a woman’s schooling by one year reduced her completed fertility by 0.1 child, while raising average schooling in the country by one year reduced average completed fertility by about 0.3 child.
Figure 5.1, based on a detail of the theory of change for the DD, shows how rationales and intervention can be added to an outcome chain: a rationale is shown in grey, an intervention in orange and the outcomes are in green and red. Interventions and rationales are related to the connectors (arrows).

5.2. How to Build a Theory of Change for the DD?

Action 1: Define the sectors that should participate in formulating the theory of change and set up an organizational modality for the consultation process

A process as complex as the DD requires a participatory, holistic and coordinated approach from a broad array of stakeholders. Although the basic components of a shallow theory of change will be presented below, the purpose of this section is not to fully develop a theory of change (with outcomes at all levels) to achieve the benefits of the DD for several reasons. Formulating a theory of change is a participatory process in which all relevant actors, stakeholders and partners need to be involved (thus creating national ownership). Further, although the highest layers of the theory of change for the DD are fairly universal, the lower levels may be country-specific and the interventions and actions even more so. In particular, the assignment of responsibilities (e.g. who are the actors?) will likely vary according to the institutional setup in each country, including the degree of organization of civil society and its capacities for contributing to certain outcomes in the results chain. Similarly, the indicator framework may vary depending on nationally available data. The theoretical literature may support some interventions that are controversial in the local political context, particularly those related to economic reforms intended to make the economy more open and competitive. Lastly, several of the main outcomes that make up the theory of change for the DD fall outside the scope of UNFPA’s mandate and necessarily require the participation of other actors.

Figure 5.1
Example of a Theory of Change for Achieving the Benefits of the DD of how Rationales and Interventions can be Added to the Outcomes

Rationale: Increasing the age of marriage will change cultural notions about the role of women in society and the value of taking conscious fertility decisions

Intervention: Engaging families, communities and young people to change attitudes and behaviours related to child marriage

Changed Cultural Norms

Increasing age of marriage
Instead, this section provides guidance about how to engage in the process of developing a theory of change by using the highest levels of the results chain, which will normally not vary greatly between countries. In addition, it will illustrate the process with an outcome — expanded comprehensive family planning services — that is closely related to the UNFPA mandate.

The following are generally considered to be the main preconditions for each of the major outcome components:

**Acceleration of the DD:**
- Reduced child mortality, morbidity and malnutrition;
- Increased female education;
- Increased gender equity;
- Changed social norms on fertility;
- Reduced child marriage; and
- Expanded comprehensive family planning programmes.

**Reaping the Benefits of the DD:**
- Improved education and human capital;
- Greater level of foreign direct investments;
- Greater domestic savings and investment;
- Improved business environment to build demand for labour;
- Reduced trade barriers; and
- Increased female employment outside the home.

This list is based on the work of several authors\(^\text{27}\) who have carried out research on the DD in many different countries.

\(^{27}\) Bloom, Canning and Sevilla, 2003; Canning, Raja and Yalbeck, 2015; Guenguant, 2011; Mehrotra, 2015.
Table 5.1 details and prioritizes the main policies and interventions according to the stage of the demographic transition, classified in terms of the percentage of the population under age 15.

### Table 5.1
Policy Priorities for the DD Depending on the Stage of the Demographic Transition in each Country

<table>
<thead>
<tr>
<th>Adult mortality</th>
<th>High</th>
<th>No change</th>
<th>Declining</th>
<th>Rising</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sector Policy % of the population under age 15</td>
<td>-45%</td>
<td>-40%</td>
<td>-35%</td>
<td>-25%</td>
</tr>
</tbody>
</table>

#### Sector Policy Priorities

**Economic**
- Support subsistence economy, small farm production
- Promote free trade
- Stabilize financial markets to attract investors
- Fight corruption
- Invest in infrastructure
- Promote free trade
- Promote household savings
- Diversify trade by good and destination
- Invest in infrastructure
- Focus on high-value, tech driven economic growth
- Promote savings

**Labor**
- Support agricultural employment
- Promote creation of jobs in urban centers
- Create productive jobs
- Promote job flexibility
- Promote gender-equal hiring practices
- Create productive jobs (more rapidly)
- Favor the creation of jobs in high value sectors
- Support development of indigenous entrepreneurs
- Lengthen working-age period
- Invest in programs to employ older populations

**Health**
- Invest in child health
- Invest in family planning to reduce fertility
- Expand/improve reproductive health and family planning outreach to reduce fertility
- Meet contraceptive demand
- Promote later marriage
- Invest in child health
- Invest savings from fewer dependents in MCH
- Meet contraceptive demand
- Sustain health of the workforce
- Sustain contraceptive and MCH progresses

**Education**
- Invest in education
- Promote expansion of school enrolment & attainment
- Target female education, including adult female education
- Promote vocational
- Improve quality of education and ensure match between skills taught and skills in demand
- Invest savings from fewer dependents in higher education
- Focus on high-value, tech driven economic growth
- Promote savings
- Invest in adult education and job-retraining
- Focus education towards skills needed for technology sector

<table>
<thead>
<tr>
<th>Type of DD</th>
<th>None</th>
<th>None</th>
<th>DD1</th>
<th>DD1</th>
</tr>
</thead>
</table>

Source: ECA, 2013, Table 1.
The shallow theory of change outlined in Figure 5.2 is based on these broken down and rearranged elements. Other major elements considered in configuring Figure 5.2 include:

- The four thematic pillars as defined in the AU Roadmap on Harnessing the Demographic Dividend (health and well-being; education and skills development; employment and entrepreneurship; and rights governance and youth empowerment);

- The five ‘thematic wheels’ of the DD as suggested by the Population Reference Bureau (family planning; education; health; economic reforms and job creation; and governance).

- The five areas of interventions and policies recommended by the African Institute for Development Policy (AFIDEP): accelerate fertility reduction to open the window of opportunity; improve health status of the population and labour force; fast-track education reforms to have a skilled and innovative labour force; enhance economic productivity and job creation; and enhance governance and accountability.28

Because the four thematic pillars of the AU Roadmap are necessary — but not sufficient — to attain the benefits of the DD, Figure 5.2 has six main outcome areas (going beyond the four pillars of the AU Roadmap or the five thematic wheels proposed by the Population Reference Bureau).

The red arrows in Figure 5.2 represent outcome areas’ contributions to the goal of accelerating the demographic transition; blue arrows represent outcome areas’ and the goal of accelerating the demographic transition’s contributions to the goal of realizing the potential benefits of the DD. Thus far, the boxes in the Figure refer to outcomes, not to interventions. This is because the items that make up the diagram are either definitions or causal relationships that are expected to happen on theoretical grounds. For example, the “changed cultural norms” box consists of two precondition outcomes and, together with the other three major outcomes at the same level, lead to the two major goals (at the impact level).

The interventions, situated at the lower levels, should specify how each of the items will be achieved. Figure 5.2 also features an accountability threshold, represented by the dotted line showing the limit of where the initiative can account for.
All of these outcomes and the interventions that make them possible should be developed while taking into account the humanitarian context of the region, which is characterized by particular vulnerabilities that should continue to be addressed through the five pillars of the humanitarian intervention framework in the region:

1. Provide life-saving sexual and reproductive health assistance to affected populations through the implementation of the Minimum Initial Service Package;

2. Improve gender dimension considerations, especially multisectoral prevention and response to gender-based violence during crisis, including leadership and coordination of the gender-based violence sub-cluster;

3. Support setting up consistent data and knowledge management systems for decision-making during preparedness, response and in post-crisis contexts;

4. Improve disaster preparedness through its inclusion in country programmes; and

5. Build the resilience of vulnerable populations by bridging the gap between humanitarian and development interventions.

Figure 5.2
Shallow Outline of a Theory of Change for the DD
5.3. Examples of Partial Theories of Change for Sub-components of the DD

Action 2: Analyse the broad framework for the theory of change and determine which local particularities need to be taken into account in its reformulation or further development

Thus far, no country has elaborated a comprehensive, nationally agreed theory of change for the DD that considers all of the intermediate outcomes listed above. There are, however, partial theories of change that have been elaborated for some of the chains shown in Figure 5.2. For example, UNICEF has developed a detailed theory of change for the outcome on reduced child mortality, morbidity and malnutrition. Girls Not Brides, a worldwide conglomerate of 900 non-governmental organizations in 95 countries, developed a detailed partial theory of change for increasing the age at marriage and reducing child marriage. This partial theory of change includes an extensive indicator framework.

These lines of action need to be further developed and brought down to the level of actual interventions. Figure 5.3 is an illustrative example of a more detailed theory of change for the expanded comprehensive family planning services outcome. It is based on a well-known set of outputs and key interventions developed by UNFPA in Choices not Chance, UNFPA Family Planning Strategy 2012-2020 (UNFPA, 2013). In other cases, such as the strategic lines of action listed above, the theory of change is less well established and will have to be articulated in the course of the participatory process undertaken by the countries.

Note also that there is more than one way to define the strategies. For example, the seven strategic components of the Ouagadougou Partnership (see Step VII) are:

1. Prioritizing the leadership and commitment of country governments;
2. Aligning donor investments and resources in the region;
3. Using data to track progress and make decisions;
4. Engaging religious leaders;
5. Cultivating youth advocates;
6. Galvanizing the family planning community and leveraging global initiatives such as Family Planning 2020 (FP2020); and
7. Fostering conversations among West Africans.

While some of these (e.g. point 3) directly correspond to the scheme shown in Figure 5.3, other points (e.g. 4 and 5) fall under other outcomes as conceptualized in Figure 5.2.

Action 3: Develop the lower-level outcome framework for the theory of change, including possible interventions and the actors responsible for them

Along with the actions, the actors responsible for carrying out the interventions need to be explicitly identified (see Section IV on building relevant partnerships).

Action 4: Determine the logical flow between outcomes at all levels

Unlike the example in Figure 5.1, the interventions in Figure 5.3 have been added as a separate layer rather than as modifiers of each stipulated relationship. This is often a better option when there are many interventions because the alternative can become very cluttered and confusing.
The rationales that justify the expectation that outcomes at one level will bring about the results expected at the next level must be indicated. For example, what is the justification for expecting that supporting the participation of national stakeholders in programme and policy development will ultimately lead to expanded comprehensive family planning services of the kind that are being proposed?

**Action 5: Develop the indicator framework and identify potential assumptions and risks at all levels**

The following would also have to be added to Figure 5.3:

- The indicators that are required to verify whether the expected result has indeed been achieved. In the previous example, it would be relevant to have some measure of stakeholder participation and some way to measure the existence of an enabling environment;

- The key assumptions that have to be made for the desired effect to become reality. For example, peace and security will improve; favourable political environment and full civil society engagement; human and financial resources will be available and donor support is sustained; the legislative framework is in accordance with the 1994 International Conference on Population and Development; and there is a common understanding of human rights standards for delivering quality family planning services;

- The risks and barriers that may be encountered in the process. For example, social instability, conflicts or a financial crisis may occur. Sociocultural and legal barriers may increase, as may national human resources turnover. National ownership of the programmes may decrease. Vertical, non-coordinated programmes among development partners may become more common. Infrastructure may deteriorate, affecting service delivery, including procurement delays; and

- The narrative that summarizes the theory of change and explains the overall logic.

**5.4. Conclusion**

**Operational steps for defining the theory of change**

**Action 1:** Define the sectors that should participate in formulating the theory of change and set up an organizational modality for the consultation process;

**Action 2:** Analyse the broad framework for the theory of change presented in this Step and determine what local particularities need to be taken into account in its reformulation or further development;

**Action 3:** Develop the lower-level outcome framework of the theory of change, including possible interventions and the actors responsible for them;

**Action 4:** Determine the logical flow among outcomes at all levels; and

**Action 5:** Develop the indicator framework and identify potential assumptions and risks at all levels.
Thus far, no country has elaborated a comprehensive, nationally agreed theory of change for the DD that considers all of the intermediate relevant outcomes. It is a complex and participatory process that requires a holistic and coordinated approach from a broad array of stakeholders from a variety of substantive areas, particularly at the lower levels of the outcome hierarchy where specific interventions need to be considered. There is likely to be little variance in the structure of the theory of change among countries at the higher level of impacts and at higher-level outcomes. This is why this presentation has limited itself to a ‘shallow’ theory of change, with impacts and one level of outcomes.

Based on the main elements mentioned in the literature, the four thematic pillars defined in the AU Roadmap on Harnessing the Demographic Dividend, and the five thematic wheels of the Population Reference Bureau, the following high-level outcomes are proposed:

- Changed social and cultural norms on fertility;
- Increased age at marriage;
- Increased levels of education, particularly among girls;
- Increased relevance of education for productive employment;
- Expanded comprehensive family planning services that are gender-responsive and meet human rights standards for quality and access;
- Reduced child mortality, morbidity and malnutrition;
- Increased women’s economic empowerment and employment;
- Removed barriers that hamper women’s ability to work outside the home;
- Peace, justice and strong institutions;
- Empowerment of young people;
- More employment and entrepreneurship among young people;
- More foreign direct investment;
- More domestic savings and investment; and
- Reduced trade barriers.

Only one of these high-level outcomes is further developed in this Programming Guide; it serves as an illustrative example based on existing programmatic guidelines (the expanded comprehensive family planning services that are gender-responsive and meet human rights standards for quality and access).
SIGNES DE DANGER CHEZ LA FEMME ENCEINTE

Lorsque vous sentez ces signes, faites-vous consulter rapidement dans un centre de santé.

- Toux
- Fièvre
- Mal de gorge
- Douleurs abdominales
- Douleurs musculaires
- Fatigue
- Saignement vaginal
- Nausées
- Douleur à l'abdomen
The previous Step addressed the strategic thinking that underlies the choice of a connected series of interventions to guide policymakers on the path towards the realization of and capitalization of the DD. Step VI addresses more practical concerns about the implementation of the proposed actions in terms of the structure and formulation of the policies emanating from them. It examines the Step from a generic action plan to a specific implementation plan. In formulating such an implementation plan, a number of questions need to be considered.

6.1. The Action Framework

**Action 1: Set priorities**

The theory of change provides guidance on the different levels of outcomes to be achieved in order to reach a final goal. It also provides the rationale for expecting one outcome to lead to another and the indicators to be used to verify the achievement of the expected results. Access to family planning must be expanded, cultural norms regarding fertility must be changed and the age at marriage must be increased — but in what order? The theory of change provides a first approximation of the order of execution, as (in general) the outcomes that are higher up in the theory of change will depend on achieving lower-level outcomes first.

However, there are considerations that relate to the urgency of certain interventions, such as the feasibility of executing them quickly and other factors. These considerations are likely to be country-specific. In countries that have a relatively high unmet demand for contraception, such as Côte d’Ivoire and Mauritania, expanding access to family planning may be a high priority issue. In contrast, this is not true in Niger, where unmet demand is only about 15 per cent. The entry point for action in Niger and Chad would more likely be changing cultural norms on child marriage, as median ages at first marriage in those countries are extreme low. A good gap analysis can provide some clues as to the prioritization of different policy objectives (see Step III).

A number of criteria can be brought to bear on the issue of priority setting. A common challenge in this context is not confusing urgency with importance. A government could spend all of its resources in the area of child health combating epidemics and investing in oral rehydration therapy without ever addressing the more important long-term challenge of solving the underlying public health issues that cause these problems. A heuristic device planners use to make these distinctions is the so-called importance-urgency
matrix that specifies how to react to each possible situation classified by whether it is important or not and urgent or not.

Reconciling the need for emergency assistance with long-term development goals is particularly important in the context of the SWEDD countries, where humanitarian crises frequently demand priority attention. The challenge in this regard is to build the resilience of vulnerable populations by bridging the gap between humanitarian and development interventions (the fifth pillar in UNFPA's humanitarian intervention framework for the region).

Presuming that decision makers have a clear sense of how much of their resources should be dedicated to urgent issues and how much to important long-term policy questions, one of the criteria that can be used is effective demand. In order to start building consensus, it is best to choose an element central to DD that most of the population already considers as a priority, either because it is directly benefited by the results or because it fits into a political perception of the 'right thing to do'. Unmet demand for contraception is for example much higher in Cote d'Ivoire than in Niger, i.e. the women in Côte d'Ivoire want access to contraception, but in practice they do not have access to it. Youth employment is an issue around which it is easy to build political consensus, even among those who have no direct stake in the matter.

Another important criterion is the number of upward and downward linkages presented by a policy action. Ideally one would want to prioritize actions that have many upward linkages and few downward linkages (i.e. actions that benefit a variety of desirable outcomes and that do not depend on a lot of preconditions that must be realized first). It is best to focus on one or a few elements that will become the entry point or the hinge on which all other elements involved in DD achievement will take support.

Efficiency is another major consideration; preference is normally given to policy actions with low costs relative to their potential benefits (the so-called 'low hanging fruits'). For example, investing in mobile family planning units in remote rural areas may be more efficient than making sure that each village has its own permanent clinic.

Priority-setting based on efficiency considerations has its dangers, however. A poverty reduction programme aimed at raising the incomes of families just under the poverty line enough not to be considered poor anymore may be a low-cost way to reduce poverty statistics, but it does very little to resolve the deeper causes of the problem.

Finally, to the extent that more than one policy action is considered a priority, coherence may be an issue. Actions should be chosen in ways that mutually reinforce each other, rather than dividing policy implementers' attention or risking contradictory lines of action. For example, there is the widely recognized need to increase vocational training among African youth. There is also the need to increase the enrolment of girls (irrespective of their chosen type of education). Attempts to show progress on both fronts may result in conflicts resulting from a tendency to steer girls towards vocational training more than would be appropriate.
**Action 2: Strengthen technical capacity for execution**

In its Key Action 39, the AU *Roadmap on Harnessing the Demographic Dividend* calls for countries to “strengthen the capacity of planning authorities, sector and district planning units, to integrate DD priorities into sectoral, local and national development plans and actions based on analytical evidence.” Several of the National Development Plans in the SWEDD countries mention the weak capacity for technical analysis of the costs and benefits of particular development projects. This is likely to also apply to projects in the population area. To address this problem, some countries in the region have introduced rigorous programme management tools into their National Development Plans (for example, Mali introduced Results Based Management). However, the problem is not limited to the kind of management adopted; it also depends on the capacity to generate the knowledge required to effectively apply these techniques.

Step V referred to the issue that raising the education of girls can take several forms that need to be carefully analysed in terms of their feasibility, cost and likely impact. In a situation where a high percentage of girls already frequent school and where school enrolment rates are relatively homogeneous throughout the nation, a strategy of raising the minimum age for leaving school may be effective. This may require hiring teachers with higher levels of qualification since there will be an increase in the number of girls being taught advanced subjects. These teachers have to be available.

Countries have to be prepared for the unintended consequences of the DD. Training new teachers may be necessary for realizing the DD, but once the intended fertility decline gets underway countries may find themselves with a surplus of teachers due to smaller birth cohorts of children. In the Occupied Palestine Territories, for example, unemployment among teaching professionals is the highest (50.8 per cent) of any major occupational group. Countries must have a plan for how to deal with this situation once it becomes relevant.

A different strategy is needed in a situation where the main problem is that many girls do not frequent school at all. If the deficit of school attendance is clearly linked to regional inequalities, the problem must be addressed regionally. If it is linked to characteristics that have a clear ethnic or religious component, a different strategy is necessary. In some areas, the problems may be associated with the low density of schools, long walking distances, lack of security or to the poor material conditions of the schools themselves. If the local infrastructure is lacking, this problem has to be addressed before demand-side interventions stand any reasonable chance of success. Yet another strategy is called for if poverty is the main determinant of poor school attendance by girls (or boys).

Conditional transfer programmes have been implemented in many Latin American and Asian countries. The objectives of the programmes are to reduce poverty, to expand the use of essential services and to increase school attendance. The basic mechanism is that families receive a modest cash benefit to ensure that their children attend school. This is particularly important for poor families that depend on their female children to help with basic household tasks.
Programmes of this kind have been implemented in sub-Saharan African countries such as Ethiopia and Tanzania. In Burkina Faso, the Nahouri Cash Transfer Pilot Project was funded and evaluated by the World Bank (Akresh, de Walque and Kazianga, 2013) in terms of its impact on the school attendance of 7- to 15-year-old children. Over two years, some households received transfers on the condition that their children attending school regularly. This group was compared with an unconditional programme (i.e. with no requirements for cash transfers). Girls’ attendance increased by 20.3 per cent; younger children’s rate of attendance increased by 37.3 per cent; and low-ability children’s attendance rate increased by 36.2 per cent. The researchers found little effect on the attendance of boys.

These results emphasize that rational policy formulation requires considerable technical capacity in order to avoid the waste of valuable resources. Conditional transfer programmes have produced good results in middle-income countries, but they may be too expensive for the poorest countries, making them dependent on sustained donor funding. Further, they generally require a considerable technical capacity for implementation that may not be available in those countries, especially at the local level.

Some national development plans explicitly recognize the need to strengthen technical capacities for evaluation of investment alternatives. For example, “Mali should adequately fund project studies. To this end, the government is considering a strategic investment master plan. The aim is to provide the country with an operational strategic framework that guides the programming of strategic investments over the period 2016-2025. This master plan will make it possible to identify and bring together the structuring investment projects covering the needs of the main economic sectors and the levers of competitiveness (infrastructures, energy, human capital, living environment).”
Strengthening technical capacities and carrying out operational research is not only the government’s responsibility. The local research community needs to align its priorities with the country’s. The AU Roadmap on Harnessing the Demographic Dividend, in its Key Action 38, mentions the need to “work with academia, research institutions and think tanks to generate needed research and evidence toward harnessing the DD and provide technical support towards building country expertise.” In their paper, Taddese, Gandolfo and Carano (2017) said “research should be aligned with policymaker priorities. Evidence producers are prone to framing their findings in a way that best reflects their own priorities rather than the needs of policymakers. Being explicit about more concrete, numerical funding targets or outcome-level goals would make their recommendations more useful for policymakers in creating a vision of success and tracking progress. Policymakers can also do a better job of reaching out to evidence producers for help in breaking down high-level political priorities into properly sequenced actions and explicitly requesting needed research for policymaking.”

In many cases, required policy studies will entail improving the training of government personnel or, if no relevant staff is available, hiring new staff to carry out specific studies. All of these needs must be assessed in a staff development plan, which should be part of a master plan.

Box 6.1 - Example of Policy Studies

An example of a detailed policy study is the work done by UNFPA Niger in collaboration with the National Statistics Institute to develop eight regional monographs on adolescents to improve the visibility of girls aged 10-19, which will provide an evidence base to include them as a target group in future policies and programmes.

Action 3: Ensure transversality and determine coordination mechanisms

In Step II provided an analysis of why traditional population policies in sub-Saharan Africa have not had the expected results. One of the reasons relates to the problem of how to ensure inter-sectoral coordination of this theme — that in the past, sectoral policies’ weak coordination mechanisms and insufficient consideration of demographics often resulted in these aspects being ignored (either due to a lack of efficient mechanisms to ensure transversality or due to a lack of conviction as to the importance of demographics).
In sub-Saharan Africa, population policies have generally been the responsibility of the ministry of economics and finance, planning or of an independent population ministry. In the six SWEDD countries, the institutional arrangements are as follows:

Burkina Faso: Ministry of Economics and Finance;
Chad: Ministry of Economics, Planning and International Cooperation;
Côte d'Ivoire: National Population Office within the Ministry of Planning and Development;
Mali: Ministry of Territorial Management and Population;
Mauritania: Ministry of Economics and Finance; and
Niger: Ministry of Population and Social Action.

Other regions face the challenge of determining the most effective organizational structure. In implementing population policies, Latin American countries faced similar difficulties in setting up institutional mechanisms to deal with a wide range of issues, including providing reproductive health services for adolescents, promoting family planning, empowering women, regulating urbanization processes and controlling international migration.

Solutions found in sub-Saharan Africa differ from those typically adopted in Latin America, where national population policies tend to fall under the ministry of health or under the responsibility of an inter-sectoral national population council. The country where the latter solution has worked best is Mexico, with its CONAPO, coordinated by the Ministry of Governance. Similar entities have been set up in other countries of Latin America, but they have not been as effective.

Determining the best solution for guaranteeing inter-sectoral coordination and transversality of population issues remains a very open question. For population issues and policies intended to capitalize on the DD, *Harnessing the Demographic Dividend to Accelerate Socioeconomic Transformation and Economic Development in Malawi* (AFIDEP/Government of Malawi, 2016) recommends that countries “strengthen the coordination and governance of population issues to ensure that they are central to the development processes and is managed in an inter-sectoral manner. This could include the creation of a national population council or equivalent vibrant department within the national planning commission that the government is planning to institute.”

This question is again of the utmost importance because achieving the DD will require a broader set of actions than those that have traditionally been developed under the aegis of a national population policy. Step II suggests that these new-style, broadened ‘population policies’ should not be managed in the same manner as the old population policies. Because the DD has an important action component in the economic area, those countries where the national population policy falls under the responsibility of the ministry of economics and finance or planning may be at an advantage compared to countries where the population policy falls under an autonomous ministry.
However, this may not be enough. New solutions will have to be explored, maybe along the lines of an inter-ministerial council, possibly coordinated by the Prime Minister’s Office, to coordinate Population Units in each of the key ministries involved in policy formulation regarding the DD. Some countries already engaged in producing Roadmaps for the Demographic Dividend, such as Kenya and Mali, have decided to charge national governmental or para-state entities with this coordination.

In addition to formal policies, enacted through laws or decrees, the role of the governmental entity in charge of the issue may have to include internal advocacy in order to change existing perceptions about the nature and importance of population trends and the realization of the DD. This is explicitly recognized, for example, by the National Development Plan of Mauritania (SCAPP), which has allocated one-third of its budget in the strategic work area of capturing the DD 2016-2020 to political engagement in favour of the DD.

At the international level, parliamentarians from the region have shown an interest in supporting DD initiatives in their countries, as manifested by the July 2017 high-level meeting of parliamentarians in Ouagadougou, Burkina Faso. This activity could evolve into a more permanent structure, such as an inter-parliamentarian council, where members of regional parliaments could monitor the policies being developed, coordinate legislative actions in their respective countries in order to learn from experiences being developed elsewhere, and to ensure consistency in the approaches used in different countries.

**Action 4: Costing and budgeting**

Underfunding has been suggested as a reason for the failure of traditional population policies in sub-Saharan Africa to deliver on the promise of effective performance. Hopefully, the fact that the DD offers a clear and quantifiable economic rationale for investing in population change will become an incentive for realistically costing and budgeting population programmes and policies. Among other things, this will involve more detailed technical analysis of the costs of the proposed measures, through detailed functional projections of various sectors such as education and the labour market. It will also require that these results be compared to the potential benefits that can be obtained by accelerating and harnessing the DD. Although similar estimates have been carried out in the past, the NTA methodology, accompanied by detailed functional population projections, provides a more convincing and technically superior instrument to this end than other approaches.

Not all national development plans contain explicit information about costing and budgeting. In most cases, this is because the activities contemplated under the population heading are part of broader budgetary categories that have not been broken down into individual budget lines. Two national development plans that offer this information are those of Mauritania and Niger. Mauritania’s National Development Plan (SCAPP) budgets $25 million over a five-year period. One-third of this budget is destined for political advocacy; the remaining two-thirds to the acceleration of policies in favour of the DD. Taken together, these values represent about 0.1 per cent of Mauritania’s GDP, which seems a rather modest investment considering the potential
benefits to be expected. In the case of Niger, the draft National Development Plan (PDES) sets apart $3.87 billion for the axis entitled ‘Social Development and the Demographic Transition’. Of this total, $0.65 billion have been specifically budgeted for the programme on the demographic transition. Given that this amount is divided over a five-year period, this represents a significant investment for the government of Niger, in the order of 1.7 per cent of its GDP.

A good costing and budget plan should foresee all categories of costs, including personnel, materials, premises, transportation and communication. Budgetary responsibilities should be clearly established by sector and by level of government (national, provincial, local). In addition, it is necessary to study in detail how the activities and infrastructure of existing programmes can be used to advance the objectives of the proposed policy. For example, the expansion of family planning programmes might be accommodated within the existing primary health care infrastructure. The infrastructure may have to be reinforced, rather than requiring the organization of an entirely new programme structure. The organizational and budgetary implications of each of these options needs to be studied in detail before policy implementation can take place.

**Action 5: Consider the broader policy context**

As part of transversality, efforts should be made to ensure that policies to promote the achievement of the DD are articulated not only in national population policies, but also in all relevant national policy frameworks. Like several countries in East Africa, the SWEDD countries (particularly Mauritania and Niger) have integrated the notion of the DD into their national development plans. The same effort must also be made with regards to sectoral policies beyond the health sector; the policy areas most directly involved are those having to do with youth and education. The economic sectors must also incorporate a DD perspective into their planning, particularly with respect to agricultural and industrial development.

This integration should not be limited to the national government. Efforts must be made to cooperate with the private sector, particularly regarding issues such as youth employment creation and in-house skills acquisition. Finally, it is important to advocate for the inclusion of a DD in the international context. The governments of the region, with the support of UNFPA, should actively advocate for the inclusion of a DD perspective in the frameworks that guide international cooperation, such as the UN Development Assistance Framework and the World Bank’s Country Partnership Framework. UNFPA should also ensure that UN system sister agencies (particularly ILO, UNDP, UNICEF, UN Women and UNESCO) consider their responsibilities in the promotion of policies and programmes in support of the DD. Finally, the government should actively promote due consideration of DD issues in intergovernmental UN bodies such as the Commission on Population and Development, the Statistical Commission and the UN Commission on the Status of Women.  

34 Please refer to Annex 1 for a classification of partners in the UN System.
An example of this kind of work with development partners is the regular dialogue brokered by UNFPA with key ministries and technical and financial partners (e.g. Germany, France) in Niger, which relies on UNFPA’s demonstrated leadership in the areas of population and the DD. To create an opportunity for political dialogue around population issues, in particular the DD, UNFPA established a mini-Davos with a regular series of meetings around a lunch. The information gathered and discussed in the meetings was used to begin a political dialogue about the issues of DD, population development and the SDGs. This was an innovative method to bring many partners together to discuss an important issue.

6.2. Wholesale or Gradual/Selective Implementation

The example of the conditional transfer programmes discussed above illustrates that the wholesale adoption of a policy measure is not always the best strategy. Some policy measures are better implemented gradually, using pilot projects to test their viability. This may be because there are doubts about their effectiveness that are best assessed by a small-scale pilot; the measures are too expensive to be adopted immediately at the national level; the measures require preconditions that do not exist in some parts of the country; or the selection of intervention areas is part of a deliberate ex-ante evaluation design in order to assess whether the areas where the programme was implemented obtained significantly better results than areas where it was not.

The example of the Health Extension Worker programme in Ethiopia (see section 9.6) demonstrates that some ambitiously scaled actions can succeed without first going through a pilot phase.

6.3. Top-down or Bottom-up Implementation Strategies

A widely used concept in the policy implementation (and change) literature distinguishes between top-down and bottom-up approaches, which vary with respect to the role of actors and their relationships and the type of policies they can be applied to (OECD, 2013).

Top-down approach

In a top-down or vertical approach, the policy designers are the central actors. They therefore focus on factors that can be manipulated at the central level (Matland 1995) in terms of two essential areas: the policy intention and the administrative action. Policies are formulated upstream and then executed by lower-level officials who answer to their central-level superiors rather than to local-level communities. An advantage is that this develops generalizable policy advice and consistent behaviour patterns across different policy areas. This advantage is crucial in some areas, such as combating major epidemics or enforcing a uniform national teaching curriculum. This approach sees implementation as an administrative process and tends to ignore political or local cultural aspects and local actors and beneficiaries.
Bottom-up approach

In the bottom-up approach, policy is made at the local level by target groups and service deliverers (Matland, 1995). Identifying the networks of actors who are involved in service delivery in one or more local areas reveals their goals, strategies, activities and contacts. This information is used to develop a networking technique to identify the local, regional and national actors involved in the planning, financing and execution of relevant governmental and non-governmental programmes. This allows local actors and decision makers, such as teachers or doctors, based on their direct contacts with the beneficiaries, to make their voices heard with the top policymakers. This does not mean that decentralized policies of this kind cannot be accountable to national-level public scrutiny.

The draft National Development Plan (PDES) of Niger 2017-2021 contains an interesting line of action to draw on traditional local chiefs to provide civics education, including information on demography and reproduction. This may be an excellent mechanism for changing cultural norms on fertility, but given the ethnic and other cultural diversities existing in most African countries, it is a programme that must be developed from the bottom up. Centralized implementation strategies will not work.

Although decentralization and bottom-up approach are not synonymous, they are related. Most of the national development plans in the region recognize the need for greater decentralization. Some, like Mauritania's National Development Plan, analyse the reasons why efforts in this regard have thus far been insufficient: ‘despite these efforts, the functioning of the ‘communes’ remains inadequate due to multiple factors, including: (i) weak financial resources, (ii) weak project management and project management capabilities linked to an enormous deficit of qualified human resources, (iii) the lack of training of local elected officials, (iv) the lack of technical supervision of the State, (v) the malfunctioning of the intercommunality set up in Nouakchott and (vi) socio-political constraints that undermine the balance of power between the mayor and municipal council and limit collegiality within municipal councils.”

The two approaches are not incompatible. Increasingly, there have been attempts to combine (micro-level variables of) bottom-up and (macro-level variables of) top-down approaches. Suggett (2011) developed a typology that captures how top-down and bottom-up approaches can vary according to policy area. For example, strategies that use bottom-up approaches (e.g. networks and devolution) are more common in areas of low conflict but high uncertainty and lack of consensus about the means to achieve a goal – such as educational disadvantage. In contrast, strategies that use top-down approaches for strong political direction and sound governance are more likely to be used in areas of potential conflict about the goal but relatively high certainty on how it might be implemented (e.g. raising the minimum age for leaving school).
6.4. Implicit and Explicit Policy Implementations to Promote the DD

Many of the existing policies that contribute to achieving the DD have ostensibly been designed to achieve certain stated goals and outcomes that are not explicitly linked to this objective. In many cases, this is because the formulation of the relevant policy frameworks predates the current programmatic focus on the DD as a policy goal. For example, there is a plethora of policy initiatives and programmes in sub-Saharan Africa aimed at promoting youth employment and entrepreneurship. Most of these initiatives are important in their own right as mechanisms for creating employment, reducing poverty and reducing the risk of political radicalization that accompanies the frustrated expectations of young people. The roles that they may play in creating the preconditions for capitalizing on the DD are not always part of their rationale.

However, it is important that such implicit policy actions be identified as such and incorporated into the general framework for achieving the DD for at least two reasons.

- **Coherence and coordination**: There has to be broad coordination between the different policies and interventions in the area of the DD in order to ensure that the different interventions reinforce each other, do not duplicate each other and that they are part of a unified theory of change; and

- **Evaluation**: Implicit policies may have to be evaluated in broader terms than originally planned in order to measure not only their impact on the specific goals for which they were originally formulated, but also their more indirect impacts on the goals of the policy to promote the DD. This point will be developed in Step VIII, Monitoring and Evaluation.
6.5. Conclusion

Operational steps for implementation planning

**Action 1:** Set priorities for the execution of the policy in order to promote the DD based on the urgency of the actions to be undertaken and the hierarchy of outcomes to be achieved according to the theory of change;

**Action 2:** Strengthen technical capacities for execution based on an assessment of the tasks to be executed and the existing capacity for execution;

**Action 3:** Ensure transversality and determine the coordination mechanisms, including the institutional setup of the policy;

**Action 4:** Costing and budgeting, including personnel costs, material costs, costs of premises and transportation, and taking into account the degree to which the activities are undertaken and existing programmes’ infrastructures can be used; and

**Action 5:** Consider the broader policy context in order to ensure that the policy will continue to receive the support of all relevant partners.

Formulating an implementation plan for policies that seek to speed up and reap the benefits of the DD involves a number of different processes:

- **Setting priorities:** A particular problem in some countries, including those that make up the SWEDD initiative, is the fact that they are prone to natural and man-made emergencies that continually confront governments with the choice between short-term emergency priorities and investments in long-term development;

- **Strengthening technical capacity for execution:** The CREFAT project and the national observatories are an important step in this direction, but more has to be done to address all the areas of expertise that need to be represented;

- **Choosing between wholesale or gradual/ selective implementation;**

- **Choosing between a top-down or a bottom-up implementation;**

- **Giving due consideration** to implicit and explicit policy implementations. This is important in that there are likely to be several policies being executed in the country whose rationale is not explicitly linked to the DD, but that need to be coordinated with the DD framework and whose monitoring and evaluation framework may have to be broadened to include elements relevant to the DD;

- **Establishing transversality and coordination in the institutional context:** This is a crucial aspect of the implementation process where traditional population policies have often failed because they were assigned to government agencies with insufficient capacity to ensure implementation across all relevant government sectors; and

- **Considering the broader policy context:** This is important in that the importance of the issue should be continually reaffirmed in the national policy context and in the agendas of the bilateral and multilateral cooperation agencies.
Implementation is the most important phase of the elaboration process of public policies, i.e. the stage at which the policy succeeds or fails. Implementation is the conversion process of the human and material inputs, including information, technique, human inputs, the demand and support into products in the form of goods and services (Eminue, 2009).

7.1. Preconditions and Essential Capacities for a Successful Implementation

The actions presented below are based on the Successful Implementation of Policy Initiatives. Better Practice Guide (Government of Australia, 2014). The first requirement is that each stage of policy development should take implementation into account. Addressing implementation issues only after the policy has been determined implies important risks and can compromise its successful implementation. The entity in charge of the execution must also have sufficient capacity to appropriately manage policy initiatives. This requires strong and permanent leadership, an inclusive approach and solid processes of resource use.

Action 1: Ensure Proper Governance Structures

‘Governance’ refers to the arrangements and practices that enable an entity to set its direction, manage its operations in order to discharge its accountability obligations, and assist in the achievement of expected outcomes. Governance encompasses many facets, including leadership, policies, relationships and control and accountability measures.

A critical prerequisite for successful implementation — especially implementations involving significant changes to an entity’s structures, processes or culture — is an executive that is committed to, supports and models best practices. Without strong and visible leadership, any underlying changes will be ineffective.

The size and complexity of many initiatives are such that it is difficult for one senior responsible officer to be sufficiently well informed about every aspect of the initiative’s implementation. One approach in these circumstances is to establish a steering committee that is responsible for business issues associated with the initiative (business issues include budget strategies; monitoring risks, quality and timelines; and resourcing decisions).
**Action 2: Put Mechanisms in Place to Manage Risks**

The systematic practice of risk management allows the responsible parties to ensure that the implementation has been conceived to achieve the results and objectives in the most efficient way possible. Good risk management practices reduce the probability or the negative consequences of undesirable events that can cause delays, increase costs or compromise the achievement of the objectives.

Risk management entails identifying potential risks, determining the probability of their occurrence and assessing the possible impacts on a project. Combining the probability of occurrence and the potential impacts allows risks to be classified according to their importance. For example, a risk that has a low probability of occurrence and has limited impacts will be classified as minor, while a risk with a high probability of occurrence and high impacts will be considered major. One or more preventive or corrective actions must be determined for each risk identified.

The risks must be reviewed or reevaluated during each phase of policy implementation. The risks and the approaches taken to address them must be actively managed to account for the evolution of the situation during the different phases of implementation. This could mean reevaluating the earlier assessments and modifying or fine-tuning the different treatment strategies.
**Action 3: Create Mechanisms to Involve Stakeholders**

The nature and means of consultation of the interested parties partly reflect their participation during the policy implementation phase. Stakeholders may not have been consulted during the elaboration of policies for several reasons, including the sensitivity of the initiative or the lack of time. In order to facilitate numerous aspects of implementation planning, stakeholder involvement should occur as soon as possible. It is important that the stakeholders understand why they are being consulted and that they have realistic expectations with respect to their ability to influence the implementation.

For some initiatives, engagement with key interest groups (or those directly affected by the change) should be done through interactions with the community as a whole. A wider involvement of stakeholders is useful to inform the community about what is happening, as well as for ensuring a greater level of support. A large community involvement can also help to overcome an overly narrow concentration on problem management, and can potentially provide important information to help shape the policy and guide its implementation.

The Internet and modern information and communication technologies have opened the way for new mechanisms (e.g. web-casting and social media) that can be used to involve the stakeholders. These mechanisms can facilitate the consultation, communication and participation of a much larger number of persons than in the past, and can include people who may be directly affected by the policy initiative.

An important first step is to clearly define the objectives of stakeholder interactions. The most common objectives include obtaining support to widely test community attitudes and raising awareness with respect to the intended action. After determining the reasons for involving the stakeholders, it is possible to define the target group.

The target group can be a part or the totality of those who know the problem best, those who are likely to be most affected by the policy response or those who are interested in the viability of the solution. Stakeholder opinions and judgements often reflect their own interests and approaches. Nevertheless, considering stakeholder contributions, taking into account the conflicting interests, and understanding different viewpoints can improve the practical knowledge of what can work in the field. This will help to think in a purposeful manner, including the viewpoint of the final user, i.e. based on the perspective of the consumer.

Otherwise, it is important to determine if there is stakeholder resistance to the implementation of the intended policy. If this is considered probable, it will be important to work with the stakeholders. Involvement can take many different forms, such as information meetings, discussion groups, the provision of documentation for comments, surveys, consultation services or committees or working groups. The responsible parties must elaborate strategies to overcome resistance to change and gain stakeholder support.
7.2. Historical Examples of Successes and Failures in the Implementation of Policies to Harness the DD

The most clear-cut examples of policies that have been implemented to enable the DD come from the East Asian economies after the 1960s. However, these policies were largely implicit because there was no systematic theoretical framework regarding the DD at the time. Such a framework might have guided countries in formulating explicit actions and implementation plans based on the intent to reap the benefits of the DD. The process was rather the reverse, with the theory arising out of the experiences of those pioneering countries.

Canning et al. (2015) summarize some of the factors that allowed several East Asian countries to capitalize on their DD:

- Several governments promulgated far-sighted education, health, labour and economic policies, including fiscal discipline, relatively open and competitive markets and substantial public investment in basic education, yielding both a high return on human and physical capital and high labour force participation.

- The demographic transition in the region was relatively quick. Infant mortality, for example, fell from 181 per 1,000 live births in 1950 to 34 per 1,000 by 2000.

- In the 1950s, these countries had launched voluntary population policies that incentivized families to have fewer children, accelerating the fertility decline.

- Youth dependency rates declined quickly, and the increase in labour supply per capita was fuelled by the increase in female labour force participation.

- Even though the fertility decline was rapid, the population grew during the transition because death rates fell ahead of birth rates, lifting both the share and the size of the working-age population.

- Governments responded by expanding their manufacturing and service sectors and adjusting political and economic institutions by changing policies and markets to absorb the increased labour supply.

- Other responses included increasing research capacities, building infrastructure (for labour-intensive manufacturing/services), providing incentives and subsidies, and expanding access to credit.

- Facilitated by policies that promoted savings and investments, the savings dividend of these East Asian economies was even larger than the labour dividend.
By contrast, they list several factors that were responsible for the lost opportunity that the DD represented in most of Latin America:

- Similar to the trends in Southeast Asia and to an extent in East Asia, under-five mortality in Latin America tumbled from 131 per 1,000 live births in 1965 to 32 per 1,000 in 2000, followed by a decline in fertility from 5.0 in 1975 to 2.5 in 2000.

- Latin America’s dependency ratio closely followed that of Southeast Asia. The lower youth dependency ratio created an opportunity for economic growth.

- The demographic bonus was expected to appear in the 1990s, but fast-growing international and domestic debt led to economic stagnation and high inflation.

- If Latin America’s economy had been as open as East Asia’s was between 1965 and 1990, it is estimated that per capita income would have reached $4,000 instead of $2,950, and poverty would have been substantially lower (Bloom, Canning and Sevilla, 2003; Inter-American Development Bank, 2000).

- Brazil attempted to move in the right direction by liberalizing trade, privatizing corporations, and floating the exchange rate, which did attract foreign direct investment. However, the country was unable to meet the demand for jobs, and the economy was unable to harness the potential of the changed age structure.

### 7.3. Some Contemporary Examples of the Implementation of Policies to Harness the DD

The most clear-cut examples of successes in implementing policies to favour the DD come from countries that did so without any explicit strategic framework to that effect. This is opposite to the situation that faces countries currently trying to implement policies to harness the DD. Many countries have elaborate action plans, some of which go down to the level of implementation plans, but few of these policies have been effectively implemented (apart from relatively isolated policy initiatives that are being developed without necessarily being tied to the DD rationale).

**The Plan Sénégal Émergent**

This Plan, which seeks to convert Senegal into an emergent country by 2035, gives ample consideration to the importance of the DD. A policy document published by UNFPA (2016) in the context of the Plan Sénégal Émergent contains a fairly elaborate blueprint for the policy options needed to accelerate and enable the benefits of the DD. The policy options are organized into actions in the areas of health, education, economic growth and employment, governance and accountability and gender and women’s empowerment. Key highlights of the policy proposals include:
• Leverage networks of religious leaders and national and local champions to advocate for family planning;

• Generalize the distribution of family planning services at the community level in order to bring family planning to the most vulnerable and isolated areas;

• Combat early marriage and teenage pregnancy by developing school infrastructure, promoting school transition beyond primary school and increasing access to family planning services for adolescents;

• Raise the legal age of marriage to make early marriage illegal;

• Encourage the Ministry of Education’s efforts to improve girls’ education by keeping them in school longer and to facilitate their reintegration into school in the event of abandonment due to pregnancy or early marriage;

• Integrate practical approaches into school curricula to address the inadequacy of trained skills with the needs of the productive sector. Emphasis should be placed on innovation, science and technology, entrepreneurship development and leadership skills to make young people actors of change in socioeconomic development;

• Substantially improve the employment content of economic growth by targeting economic sectors with high added value and high job creation;

• Accelerate the bold measures taken since 2014 to actively promote employment, and put in place direct job creation measures (e.g. PRODAC, PAPEJF, ANPEJ projects, the State-Employers’ Convention for the promotion of youth employment, and labour market reforms with internships and apprenticeships);

• Strengthen incentive mechanisms for hiring through attractive tax measures for companies;

• Accelerate reforms and investments that promote quality human resources, particularly through technical education, vocational training and higher education;

• Invest in developing economic infrastructure, including energy, transport and communication to reduce production costs and attract domestic and foreign investment;

• Strengthen governance, national security, the rule of law and the fight against corruption in order to foster investor confidence and ensure that all public resources are used for national development;

• Strengthen the capacity and autonomy of institutions to ensure, inter alia, that long-term development plans are not compromised by short-term political cycles and rivalries;

• Strengthen technical and managerial capacities for developing women’s entrepreneurship, taking into account new economic opportunities;

• Strengthen the skills of women entrepreneurs in information and communications technologies in order to foster interconnection and innovation; and

• Strengthen the production units of women’s enterprises.
Several countries in East Africa have similar blueprints, with many of the same policy recommendations. The blueprints were inspired by the collaboration with AFIDEP, which has collaborated with these countries to produce national reports on harnessing the DD. These proposed interventions cover a broad range of policy sectors, but are — at least for now — not more than proposals. Further, most of them still need to be operationalized in terms of areas such as specific target groups, budgets, executing agencies and duration of the specific programme or intervention.

Promotion of family planning by the Ouagadougou Partnership

In 2011, nine francophone West African countries (the SWEDD countries, with the exception of Chad, plus Benin, Guinea, Senegal and Togo) formed the Ouagadougou Partnership to create a major push towards family planning in the region. The countries are also ‘focus countries’ of the Track20 initiative, which aims to achieve the same objectives for a broader set of countries. Through the efforts of the Ouagadougou Partnership, an additional 1.18 million women are using modern contraceptives today. The goal is to raise this number to 2.2 million by 2020, using the following seven strategies:

1. Prioritizing the leadership and commitment of country governments: Country governments made a commitment to the Partnership by agreeing to the goal, setting national objectives and developing costed implementation plans at national level. They worked quickly to develop these plans and have reported progress and challenges at each partnership annual meeting.

2. Aligning donor investments and resources in the region: Donors have worked closely to share their funding strategies, discuss potential investments and align their funding across the countries, looking for opportunities to complement each other and fund needs as prioritized by the countries in their costed implementation plans. Between 2012 and 2014, donors invested an additional $29 million in the region — a 36 per cent increase in funding.

3. Using data to track progress and make decisions: Donors, the Ouagadougou Partnership Coordination Unit, and the countries agreed to adopt a methodology set forth by Track20, which provides reliable, comparable data. The partnership uses data to assess progress and monitor country contributions to the overall goal.

4. Engaging religious leaders: Across the region, religious leaders are emerging as champions and speaking in favour of family planning in order to ensure the healthy timing and spacing of pregnancies. Champions from Burkina Faso, Cote d’Ivoire, Guinea, Mali, Mauritania, Niger, Senegal and Togo worked together at the annual meeting to issue a declaration in support of the partnership.

5. Cultivating youth advocates: Young voices are increasing in volume across the region; youth advocates are mobilizing their peers to promote family planning and to hold governments accountable. The partnership has cultivated youth ambassadors, who presented their advocacy efforts at last month’s meeting and coined the meeting’s refrain, “the contraceptive revolution has begun.”
6. **Galvanizing the family planning community and leveraging global initiatives, such as FP2020**: There is a sense that francophone West Africa is on the move, and the number of agencies, projects and initiatives in the region that want to be part of the partnership continues to increase. The established collaborations between the partnership and FP2020 permit the region to have a stronger connection to global family planning and reproductive health movements. The partnership’s coordination unit provides a mechanism for aligning efforts and partners.

7. **Fostering conversations among West Africans**: The partnership and the annual meetings provide space for West Africans who are passionate about family planning to engage in dialogue and discuss, among other things, how they can collectively work together to bring about positive development in their countries. In December, members were particularly eager to explore how family planning can help their countries achieve and benefit from the DD.

The Ouagadougou Partnership includes donors (including USAID, the French Ministry of Foreign Affairs and Agency for Development, the Bill & Melinda Gates Foundation and the William and Flora Hewlett Foundation); key partners, (such as FP2020, UNFPA, the West African Health Organization and the WHO); and civil society and private-sector representatives. Based in Dakar, Senegal, the Ouagadougou Partnership Coordination Unit is primarily funded by the William and Flora Hewlett Foundation and by the Bill & Melinda Gates Foundation and is managed by IntraHealth International.

**Kenya roadmap for DD**

The Kenya Roadmap for the DD derives its pillars from the UA Roadmap (health and well-being; education and skills development; employment and entrepreneurship; and rights, governance and the empowerment of young people). The Kenya Roadmap includes both a calendar and the institutions in charge of implementing the recommended actions in the short (one to three years), medium (four to five years) and long term (six or more years).

One of the key actions is to guarantee universal access to family planning services. This action comprises central components to increase the availability and access to family planning products and services. It significantly increased advocacy aimed at counties with a low contraceptive prevalence rate. To promote family planning, it involved stakeholders through communication and advocacy with religious and community leaders at every level.

**Interventions in education in Ethiopia**

As described by Canning et al. (2015: 80), in Ethiopia, 61 per cent of women with no schooling have a child before turning 20, compared with only 16 per cent of women with eight years of schooling. The 1994 Education Reform removed school fees, instituted school lunches in rural areas, increased the education budget and allowed classes to be taught in the local language rather than in Amharic. The 1987 birth cohort was the first to be exposed to the reform; the 1986 birth cohort was still subject to the old system.
The reform led to a substantial jump in female education, increasing female schooling of the cohorts born in or after 1987 by 0.8 years. Pradhan and Canning (2013) estimate that each additional year of schooling leads to a 7 per cent reduction in the probability of teenage birth and a 6 per cent decrease in the probability of teenage marriage. These affects suggest that women with eight years of schooling should have a fertility rate of 53 per cent, lower than that of women with no schooling. Reductions in early childbearing indicate that overall, fertility rates in this cohort will be lower and that the direct benefits of avoiding early childbearing, such as improved maternal and child health, will be greater.

**Women empowerment in Cabo Verde**

Cabo Verde has been recognized for its actions to reach gender equality. Although the government is making an important effort to fight discrimination against women and girls, there are still gaps and inequalities between men and women, especially regarding the protections foreseen by law. In order to advance further in women’s empowerment and the fight against discrimination and violence against women, Cabo Verde has started a proactive policy seeking to increase women’s participation in the security and police forces. It is an example of the implementation of a policy (empower women and fight violence against women) based on a bottom-up approach. Increasing women’s participation in the security and police forces leads to a fuller consideration of violent acts against women; police women are likely more inclined to follow through on such complaints than their male counterparts. Further, the presence of police women serves to increase the confidence of victims to denounce such acts.

**Youth employment programmes in Africa**

There are many youth employment initiatives on the continent, but most are small in scale and few have been systematically evaluated. An International Labour Organization (ILO, 2012) report by the members of the subgroup on work and employment of the regional coordination mechanism for Africa analyses the current responses to the challenge of youth employment in Africa. It also underlines good practices with regard to replicability for future actions. The following paragraphs refer to some of the projects analysed in this report.

The innovative Local Resources and Experiences for Local Needs project in Guinea addresses the challenges of youth employment from the angle of organizations managed by young people themselves. The ‘Youth-to-Youth’ fund provides subsidies and support to the strengthening of young people’s skills so that they can implement innovative projects — projects that are then managed by young people and create employment for other young people. A competition is held to select the project ideas most likely to lead to new and viable businesses, which are then funded. The project supports the development of young people by funding only proposals directed to young people (aged 15 to 34 years) and created and implemented by young people.
In Côte d’Ivoire, a project seeks to address the challenge of youth unemployment by fostering entrepreneurship. It is innovative with respect to the combination of financial and non-financial resources provided to the young entrepreneurs. Combining skills development with access to funding, young people receive the necessary means to start or to develop their businesses.

The Government of Côte d’Ivoire is establishing a system to monitor the job profiles requested by businesses, elaborating a directory on jobs and skills, promoting a training and employment matching process and introducing incentives for the recruitment of first-time job applicants. This involves introducing an entrepreneurship module in the education/training system, promoting business and self-employment success models, and supporting business creation by young people, women and handicapped people.

In Mali, the Youth Employment Promotion Agency implemented a national programme that includes a youth professional integration component by means of labour-intensive investments (PEJLIP). The Government of Mali and the Grand Duchy of Luxemburg funded the PEJLIP project in its first phase. The project is executed by the Youth Employment Promotion Agency, with the technical assistance of ILO. A new income tax of 2 per cent has been earmarked to resource the National Youth Employment Fund.

The PEJLIP project has created more than 70,517 working days and contributed directly to 700 young workers’ access to the labour market. The project accomplished this through a variety of activities, including irrigation work; agricultural produce commercialization; renovation and maintenance of rural roads; and quarry stone extraction for road surfacing.

Techniques for using paving stones and other domestic materials are taught in vocational training programmes and in all youth camps in the country. Training on manual construction techniques is progressively extended to all other investment programmes (for example, the Support Programme to the Agricultural Sector and the National Roads Construction Project). Also in Mali, UNFPA is helping to implement a small initiative with a private IT firm to build IT skills in girls, skills that may help them find employment in this sector. There are training centres in Bamako, Mopti and Segou. 45 girls have received training in IT maintenance, receiving instruction in the basic competences required to that end. The experience is being documented in collaboration with the non-governmental organization AGIR in order to evaluate the results and to study if the initiative can be scaled up to the national level.

In Mauritania, ILO is supporting the government implement the Worksite School under the Institutional Adjustment Project of the transport sector (PAIST), funded by the European Union. The main objective is to develop a vocational training branch of studies in road maintenance in order to increase the employability of young men and women and to foster their professional integration in road maintenance in rural and urban areas. The project is being implemented over 30 months, alternating through theoretical training in technical and vocational training centres, practical training on a worksite and professional internships in companies.
7.4. Conclusion

Operational steps for Implementation

- **Action 1:** Ensure a proper governance structure to handle tasks such as developing budget strategies; monitoring risks, quality and timelines; and resourcing decisions;
- **Action 2:** Put mechanisms in place to manage risks based on identifying potential risks, determining the probability of occurrence and assessing possible impacts; and
- **Action 3:** Create mechanisms to involve stakeholders, both those directly affected by the policy actions and the wider community.

Successful implementation of public policies requires solid governance, risk management and stakeholder involvement. Adequate governance should provide leadership and efficient decision-making, for example through a steering committee responsible for policy implementation. By identifying potential risks, determining the probability of their occurrence and assessing their possible impacts on the project, risk management reduces the negative consequences of undesirable events that can delay implementation, increase costs or even compromise the achievements of the objectives. Finally, the involvement of stakeholders, such as key established interest groups or populations directly affected by the change, is critical to inform the community about what is happening, to ensure a greater level of support and to provide important information to help shape the policy and guide its implementation.
STEP VIII

Monitoring and evaluation

8.1. Introduction

The complex, cross-cutting nature of policies and programmes aimed at accelerating and enhancing the DD will require that experts and policymakers use innovative tools and methods for policy design, implementation and monitoring and evaluation. The AU Roadmap underscores these needs, noting “it is important to put in place measures that would guide countries, anticipate proper monitoring, evaluation and reporting and enable the active participation of all stakeholders at all levels.”

The 17 SDGs offer a set of relevant indicators that need to be taken into account by public policies seeking to accelerate and harness the DD. Other instruments have been established, such as the Addis Ababa Declaration on Population and Development beyond 2014 and its accountability, monitoring and reporting mechanism to measure the progress achieved.

This Step summarizes the roles and complementarities of results-based monitoring and evaluation. It presents eight essential areas of monitoring and evaluation and establishes their links with the main axes of the AU Roadmap and the SDGs. It refers to the timetable of key activities that should contribute to establishing relevant monitoring and evaluation mechanisms, as set out in the Roadmap. Finally, it concludes with a list of priority actions to establish a national-level monitoring-evaluation system.

36. The eight essential areas are: demography and human development, cultural evolution, education, health and family planning, youth empowerment, gender equity, rights and governance and the socioeconomic environment.
8.2. From Monitoring to Evaluation

Monitoring: purposes and types of monitoring activities

Monitoring is the continuous process of tracking the progress of a programme, project or policy. Monitoring builds on data collected to improve the implementation, management and day-to-day decision-making of policies or projects. This process relies on collected data in order to compare the performance of the programme with the expected results, to compare projects with each other and to analyse trends over time. Monitoring generally focuses on inputs, activities and outputs, and occasionally on intermediate outcomes, such as progress towards national development goals. In general, monitoring indicates whether the activities carried out are going in the right direction and at the right pace. It provides project managers and stakeholders with the information needed to:

- Follow the allocation and use of resources (physical, material, financial);
- Assess the achievements (products, services, etc.) obtained and measure the degree of results achievement in relation to initial expectations;
- Detect any deviations recorded in the implementation; and
- Facilitate decision-making on the continuation of the policy, programme or project (technical reorientation, reallocation of funds and adjustment of the programmed objectives).

Monitoring is based on a coherent system of information and analysis. Follow-up activities include:

- Centralization of periodic reports (generally at monthly or quarterly intervals) prepared by the various project managers and reporting project progress;
- Conducting field missions to verify the conditions for implementing activities and to review immediately verifiable progress;
- Follow-up surveys, which may include discussions with all stakeholders in the programme(s), including intervention beneficiaries;
- Regular updating of databases that centralize follow-up information;
- Production of periodic summary reports for decision makers; and
- Rapid specific analyses, such as an assessment of the strengths, weaknesses, opportunities and risks of the intervention.
Definition of the concept of evaluation

Evaluation is a periodic and objective assessment of planned, ongoing or completed policies, programmes and projects. Evaluations are used to answer specific questions related to the design, implementation or outcomes of policies/programmes. Unlike monitoring, which is a continuous process, evaluations are periodic and carried out at a particular time, usually by experts independent of the policy/programme. Thus evaluation makes it possible to assess the efficiency, effectiveness, impact, relevance and sustainability of policies or programmes and, if possible, to explain them. Evaluation design, methodology and costs vary greatly, often depending on the type of questions being answered. In general, evaluations address three types of questions:

- **Descriptive questions**: At this level, the evaluation aims to show what is happening by describing the processes, prevailing conditions, organizational links and perspectives of project or policy stakeholders;

- **Normative issues**: Evaluation compares what did happen to what should have happened. It consists of studying activities and estimating whether or not the objectives have been achieved. Normative questions may relate to inputs, activities and outputs (intermediate outcomes); and

- **Issues of cause and effect**: Evaluation focuses on outcomes and seeks to determine the extent to which the intervention leads to change.

### Table 8.1
**Roles and Complementarities of Result-based Monitoring and Evaluation**

<table>
<thead>
<tr>
<th>Monitoring</th>
<th>Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clarifies programme objectives</td>
<td>Investigate why the targeted results were or were not met</td>
</tr>
<tr>
<td>Links the activities and related resources to the objectives</td>
<td>Evaluates the specific contributions of certain activities and their impacts on results</td>
</tr>
<tr>
<td>Formulates objectives in terms of performance indicators and defines targets</td>
<td>Reviews implementation processes</td>
</tr>
<tr>
<td>Systematically collects data on indicators and compares the results obtained with the targets</td>
<td>Considers unwanted results</td>
</tr>
<tr>
<td>Reports the programme/project progress to managers and notifies them of problems</td>
<td>Identifies lessons learned, highlights significant accomplishments or potentials for a programme, and suggests recommendations for improvements</td>
</tr>
</tbody>
</table>
8.3. Results-based Monitoring

Action 1: Perform impact assessments

The cross-cutting complexity of policies and programmes to accelerate and take full advantage of the DD requires impact assessments that:

- **Guide policy decisions**: Impact assessments inform policymakers when they take several types of decisions, such as disrupting ineffective programmes; expanding well-proven interventions; adjusting benefits; and selecting between several programme options. Impact assessments are particularly useful in pilot programmes that are experiencing new and promising approaches but have not yet proved their value.

- **Analyse the different types of public policy issues**: In their basic form, impact assessments can test the effectiveness of a given programme. This type of impact assessment estimates the effectiveness of the given programme by comparing a subset of the target population (treatment group that has benefited from the programme) with another category (comparison group) that has not been part of the programme.

- **Measure the effectiveness of various options for policy/programme implementation**: Impact assessments also help determine the relative effectiveness of various implementation methods and approaches. Taking into account the limited means available, the project alternative with the greatest impact (effectiveness) should then be chosen.

The Health and Demographic Monitoring sites in several countries provide an example of an impact assessment that is limited to a narrow and localized area. These sites provide valuable health monitoring information to policymakers in a manner that functions well at the level of a few carefully selected project areas, but that would be prohibitively expensive at the national level. Such existing monitoring systems could also be used in the framework of DD policies.

Impact assessments thus facilitate making selective choices on the priorities of the policies to be implemented and, therefore, insure a better conception of policies and programmes. Impact assessments can also be used to test the relevance of innovations or adjustments to be considered in reformulating a policy/programme.
MONITORING AND EVALUATION

8.4. Pillars, “wheels”, axes and indicators

Action 2: Structure the monitoring and evaluation mechanism around the DD

A mechanism for monitoring and evaluating national DD policies should also include basic data related to demography, governance and human development. The SDGs offer a series of relevant indicators that public policies aimed at harnessing the DD need to take into account. The five ‘thematic wheels’ of the scheme proposed by the Population Reference Bureau have been linked to the SDGs (see Figure 2.1). The synoptic table of a DD policy monitoring mechanism (based on the AU roadmap), the theory of change of this Programming Guide and the thematic wheels of the Population Reference Bureau present the following eight axes:

1. Demography and human development;
2. Cultural evolution;
3. Education;
4. Health and family planning;
5. Youth empowerment;
6. Gender equity;
7. Rights and governance; and
8. Socioeconomic environment.

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39. These include the Human Development Index (HDI), the average annual HDI growth rate, the extreme poverty rate, the proportion of the population using a source of clean drinking water and the proportion of the population with improved sanitation facilities are necessarily a prerequisite for any monitoring and evaluation of policies aimed at accelerating and harnessing the demographic dividend.
40. The five thematic wheels are family planning, education, health, economic reforms and job creation, and governance.
Table 8.2
Linkage between the theory of Change of this Programming Guide, the AU Roadmap and the SDG Framework

<table>
<thead>
<tr>
<th>Axes</th>
<th>AU Roadmap</th>
<th>SDGs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demography and human development</td>
<td></td>
<td>SDGs: 1, 2, 13, 14, 15</td>
</tr>
<tr>
<td>Cultural evolution</td>
<td>Pillar 1: Employment and Entrepreneurship</td>
<td>SDGs: 3, 5</td>
</tr>
<tr>
<td></td>
<td>Pillar 3: Health and Well-being</td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td>Pillar 2: Education and Skills Development</td>
<td>SDGs: 4, 5</td>
</tr>
<tr>
<td>Health and family planning</td>
<td>Pillar 3: Health and Well-being</td>
<td>SDGs: 3, 6</td>
</tr>
<tr>
<td>Youth empowerment</td>
<td>Pillar 4: Rights, Governance and Youth Empowerment</td>
<td></td>
</tr>
<tr>
<td>Gender equity</td>
<td>Pillar 4: Rights, Governance and Youth Empowerment</td>
<td>SDG: 5</td>
</tr>
<tr>
<td>Rights and governance</td>
<td>Pillar 4: Rights, Governance and Youth Empowerment</td>
<td>SDGs: 10, 16</td>
</tr>
<tr>
<td>Socioeconomic environment</td>
<td>Pillar 1: Employment and Entrepreneurship</td>
<td>SDGs: 1, 2, 5, 7, 8, 9, 10</td>
</tr>
</tbody>
</table>

Monitoring actions planned for each axis requires the compilation of data on precise and objectively verifiable indicators. Many of the indicators have become traditional and are available in national statistical offices and in the multilateral system agencies (e.g. ADB, UNDESA, UNDP, UNFPA, UNICEF, UNSD and the World Bank). Nevertheless, the over-abundance of data collected by the United Nations system and its relative fragmentation and dispersion will require significant support from the UN system to the observatories proposed by the AU. The list of indicators has to be complemented with the input of the relevant indicators of the 17 SDGs.

There are two other key areas: Partnerships and Financing (both under SDG 17) are essential for the proper implementation of the process. They are, however, only a means of implementation and do not need to be part of the main axes. A monitoring mechanism should be implemented for them, as well as for the key actions planned by the Roadmap.
8.5. A Composite Index for DD Monitoring?

**Action 3: Identify and collect related indicators**

The African Commission calls for the creation of a comprehensive monitoring index based on a set of indicators specific to each pillar of the Roadmap. Although some of the 35 listed key actions incorporate objectively verifiable indicators, most still require the subsequent identification of relevant indicators.

The SWEDD countries, with CREFAT technical support, have developed a composite indicator for monitoring the DD (I2S2D). Obtained from five summary indicators, it measures dimensions of life cycle deficit, quality of living conditions, transition from poverty, extended human development and networks and territories. I2S2D is the geometric mean of the five summary indicators previously listed (see Annex 2). This effort must be highlighted and should inspire the national observatories for gap analysis and for monitoring and evaluation. However, as was indicated in Step I, this is only one example of how to progress with respect to the DD can be measured. Other countries may choose different indicators.

**Box 8.2 - Best practice**

In collaboration with CREFAT and the UNFPA WCARO, several SWEDD countries are currently in the process of establishing national observatories for the DD. The observatories will be in charge of collecting and analysing data and monitoring and evaluating national endeavours.

Table 8.2 presents eight distinct areas of monitoring. While these areas can contribute to establishing a composite index, the risk of any composite index is that it produces a score that does not adequately reflect the efforts and results of monitoring a policy as complex as DD capture.

Monitoring and evaluation of DD policies is a matter of on-the-ground primary data collection and networking and triangulation of secondary data. Accordingly, it is necessary to work on regular, localized impact assessments to verify the implementation of programmes contributing to the capture of the DD.
### Table 8.3

**Key Actions of the AU Roadmap**

<table>
<thead>
<tr>
<th>Category</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishing national profiles</td>
<td>36. Analyse and understand the socioeconomic and political situation through the preparation of national DD profiles with the objective of facilitating evidence-based development planning processes with regard to the challenges and opportunities to harnessing the DD in countries in order to define country-specific responses.</td>
</tr>
<tr>
<td>Establishing multisectoral observatories of the demographic dividend</td>
<td>37. Strengthen the capacity to coordinate, monitor and report on progress in implementing DD priorities (including strengthening national data systems to ensure timely and quality data for planning and decision-making). This may include the establishment of a multisectoral DD observatory under the leadership of the National Statistics, Planning and/or Population Agencies, as appropriate.</td>
</tr>
<tr>
<td>Data quality</td>
<td>38. Work with academia, research institutions and think tanks to generate needed research and evidence towards harnessing the DD and provide technical support towards building country expertise.</td>
</tr>
<tr>
<td>Planning</td>
<td>39. Strengthen the capacity of planning authorities, sector and district planning units to integrate DD priorities into sectoral, local and national development plans and actions based on analytical evidence.</td>
</tr>
<tr>
<td>Monitoring</td>
<td>40. Develop and implement a robust performance monitoring and accountability mechanism for DD initiatives and strategies at the national, regional and continental levels, including for youth-focused investment policies and programmes.</td>
</tr>
<tr>
<td>Capitalization and partnership</td>
<td>41. Build on the successes of key regional initiatives around the continent on DD and women’s empowerment and scale them up to cover more countries across Africa, including to facilitate access to funding. Convene multiple stakeholders and partners for advocacy, resource mobilization and strategic partnerships around harnessing the DD.</td>
</tr>
<tr>
<td>Funding</td>
<td>42. Establish continental and national funds for youth development to support implementation towards the DD including through increasing and allocating special funds to implement the 2017 theme of the year and engaging regional and other development banks (e.g. AfDB, EADB, BOAD, BCEAO, BEEAC) to increase their youth portfolio to facilitate access to credit and support to entrepreneurship initiatives of youth</td>
</tr>
<tr>
<td>Funding</td>
<td>43. Mobilize support, particularly through AU and partners Bilateral Forums (e.g. TICAD, Africa-China, Africa-EU, Africa-Korea, Africa-India, Africa-USA, G20), for youth empowerment and increased investments in education and skills development, entrepreneurial skills and jobs creation, health in order to harness DD.</td>
</tr>
</tbody>
</table>
8.6. Key Activities of the Roadmap (August 2016 to December 2017)

The African Commission proposed a timetable of key activities (August 2016 to December 2017) with clear time frames to facilitate and accelerate implementation and to measure the progress of the Roadmap. The proposed key actions should be rigorously monitored because they are prerequisites for establishing monitoring and evaluation mechanisms for the Roadmap (see Table 8.3; key actions are in bold).

8.7. Conclusion

Operational steps for Monitoring and Evaluation

Following the recommendations of the AU Roadmap, following provisions should be taken:

Action 1. Envision monitoring and evaluation systems while launching the DD theme at the national level, and broadly consult national, regional and international stakeholders;

Action 2. Develop comprehensive national DD profiles based on, for example, the eight proposed axes, to establish a ‘baseline 2017’ for future evaluations;

Action 3. Establish partnerships with academia, research institutions and think tanks to produce evidence-based research;

Action 4. Develop national roadmaps on harnessing the DD;

Action 5. Finalize a synoptic table of national axes and indicators in order to construct a relevant composite index of the kind suggested by CREFAT, possibly with the addition or substitution of other dimensions;

Action 6. Establish a regional observatory and national multisectoral observatories of the DD under the guidance of national statistical, planning and population agencies;

Action 7. Announce the implementation, starting from December 2017, of a robust performance monitoring and accountability mechanism within the framework of DD initiatives and strategies at the national, regional and continental levels; and

Action 8. Ensure that all policy axes are closely monitored at the national level, including data on partnership and funding.

Monitoring and evaluation, key aspects to implement in a DD policy framework, are closely linked to Step I of this Programming Guide. This issue should already have been considered at the early level of the policy declaration, foreseeing that a monitoring and evaluation mechanism would need to be put in place. These mechanisms should also be defined with more details during implementation planning and should be used throughout the implementation processes of specific programmes. The outcomes of monitoring and evaluation mechanisms will also determine how to proceed to achieve Step IX: Scale-up.
9.1. Concept

This Programming Guide has proposed eight distinct Steps to consider when putting in place a national strategy to harness a DD. Step IX focuses on bringing to the national scale the vision and policies needed to harness a DD.

The concept of scaling-up is often used to describe a process by which larger groups of people are benefited by the application of a previously tested, successful pilot programme or project. Although there is evidence of a DD happening in East Asian countries, there is as yet no replicable pilot experience in West African countries of the full application of a DD-harnessing programme. However, there are sub-Saharan African countries that have implemented policies with the intent of modifying their population structure, improving the health of women and children and increasing the quality and access to health and family planning.

All of the above programmes have had a great impact on the probability of harnessing a DD. Therefore, scaling-up in this section will be more closely defined as “the process of reaching larger numbers of a targeted audience in a broader geographic area by institutionalizing effective programmes.”

Scaling-up policies to harness a DD and reach the whole population means adjusting all policies described in previous chapters of this Programming Guide to the national scale. The success of this operation depends on how a country will set up, organize and implement the policies necessary to have an impact in all corners of its national territory.

This section proposes some concrete actions, presents examples of scaling-up in sub-Saharan African countries and provides some resources to get familiar with scaling up policies to harness a DD.
9.2. Scale-up Model

**Action 1: Adopt a scale-up model and adapt national DD-harnessing policies**

Many of the scaling-up manuals are in accord with the notion that the amount of effort put in to planning a scale-up operation is proportionately reflected in the programme’s impacts. Figure 9.1 presents the Three-step, Ten-task approach to scaling up (Management Systems International, 2012).

In a way, this Programming Guide is about accomplishing a scale-up plan for a DD-harnessing programme. Some of the tasks and steps have been covered in previous chapters in detail. Therefore, the actions proposed below will not explain steps and tasks mentioned above in depth, but rather will discuss the tasks, making reference to the Step in which it was discussed in this Programming Guide. It will then point to two main actions to take in order to ensure that harnessing a DD is considered a strategic part of the public policy agenda, and it will highlight some yet-to-be explained components of the above-mentioned approach.

**Task 1: Create a vision**

This task focuses on creating a vision of what the country would look like if DD-harnessing policies were successfully scaled-up nationally. Step II, Actions 1 and 2 focus on establishing this vision in an informed, evidence-based way. The PDHDD or national DD roadmap (Step II) is the instrument condensing this vision.

This task also involves clarifying the rationale of the PDHDD. This was also discussed in the Introduction and in Step II in order to show that the application of a DD-harnessing policy package has proven successful in multiple countries.

**Task 2: Assess scalability**

This task is done simultaneously with Task 1. It points to the need to ensure that the vision and plan condensed in the PDHDD are informed by the country’s reality. Step II of this Programming Guide pointed to an action related to this task: linking the DD harnessing with the national development plan, where the national development situation is examined.

Another tool that is useful for a DD-harnessing scale-up is the spatial disparity analysis showing internal differences within the countries (i.e. urban/rural, between regions). An objective of national development plans is to harmonize the situations so as to homogenize the levels of development.
The following method checks whether a scale-up plan will be adopted by verifying that the proposed innovation model is “C.O.R.R.E.C.T.” (Simmons and Shiffman, 2005):

1. Credible, based on sound evidence or espoused by respected persons or institutions;
2. Observable to ensure that potential users can see the results in practice;
3. Relevant for addressing persistent or sharply felt problems;
4. Relative advantage over existing practices;
5. Easy to transfer and adopt;
6. Compatible with existing users’ established values, norms and facilities; and
7. Able to be tested or tried.

Verifying the ‘correctness’ of a package of programmes to harness a DD:

1. There is evidence coming from international, continental or academic institutions backing up its application;
2. Potential users will be able to see the results of its application in their quality of life;
3. It is relevant to addressing poverty reduction and sustainable development and to preventing potential risks linked to high youth unemployment rates and high population increase rates.
4. It presents a relative advantage to a national development plan that does not take the population variable into account.
5. Judging by previous chapters of this Programming Guide, applying a DD-harnessing package may be considered a complex process. The relative ease in adopting a policy package will depend on how well-established the preconditions for scale-up will be and how thoroughly the work on tasks 5 and 6 of the Three-step, Ten-task approach is performed. This is a particularly challenging element; it will be further developed below.
6. Although some policies to harness a DD may find obstacles in existing cultural practices and beliefs, the package is compatible with belief systems calling for a more democratic- and human rights-driven development vision shared in the African continent. The shared AU 2030 vision is a clear testament to this drive.
7. While it has not been tested, there is evidence that some countries managed to capture the benefits related to modifying the population structure and investing in human capital.
Task 3: Fill information gaps

Steps I and III of this Guide proposed methods to analyse the country situation and identify gaps to be filled with respect to plans to harness a DD.

Task 4: Prepare a scaling-up plan

This is what the PDHDD proposes. Kenya, Mali, Tanzania and Uganda have produced roadmaps to harness their DD. Experts suggest that the PDHDD should be written with both external and internal audiences in mind because it summarizes a DD-harnessing plan in practical terms and presents the thought processes and analysis used to arrive at it.

Task 5: Legitimize change

This task is part of a series of measures to be taken in order to set up the favourable environment necessary for DD-harnessing policies. This task is particularly important for implementing a DD-harnessing plan at the national scale. Although it is time-consuming, it is critical; some call it ‘go slow to go fast’, because proceeding without it risks backsliding or delaying policy implementation. Steps I, V and VIII of this Guide clearly explained the cultural change dimension of those policies. To recall the proposed outcomes for a DD-harnessing theory of change chart:

- Changed social and cultural norms on fertility;
- Increased age at marriage;
- Increased levels of education, particularly for girls;
- Increased relevance of education for productive employment;
- Expanded comprehensive family planning services that are gender-responsive and meet human rights standards for quality and access;
- Reduced child mortality, morbidity and malnutrition;
- Increased economic empowerment and employment of women;
- Barriers that make it difficult for women to work outside the home removed;
- Peace, justice and strong institutions;
- Empowerment of young people;
- More employment and entrepreneurship among young people;
- More foreign direct investment;
- More domestic savings and investment; and
- Reduced trade barriers.
The majority of the outcomes (italicized above) refer to achieving change in cultural patterns that are related to current practices concerning reproductive health, contraception, ideal family size, family planning, girls’ well-being, girls’ and women’s rights and gender equality.

As this element is vital to successfully scaling-up a DD-harnessing plan, it is important to highlight an example of an action put in place to prevent backsliding. In July 2017, UNFPA organized the regional symposium ‘Islam, the Demographic Dividend and Family Well-being’ for Central and West African countries. The result was the N’Djamena Declaration of regional religious leaders who affirmed the compatibility of Islam and the policies needed to harness a DD.

Box 9.1 - The N’Djamena Declaration

“Recognizing also that Islam accepts family planning for birth spacing, maternal and child health in order to adapt it to the resources available, improve quality of life for families, and ensure each individual makes a deliberate and voluntary choice.

Recommend that a strategic partnership, compliant with the principles and teachings of Islam, be established with various national and international actors to consolidate current gains, promote innovative approaches and scale up good practices and successful experiences on initiatives for the demographic dividend.”

More specifically, the participants in the symposium recommended:

Engagement in awareness-raising and information campaigns to create an enabling environment conducive to promoting family well-being, in particular, through a policy of promoting maternal health, including family planning, in line with the precepts of Islam and the eradication of all forms of violence.

Easier means of sharing experience and promoting good practices at the regional level through South-South cooperation on initiatives for harnessing the demographic dividend, especially those on birth spacing for family planning, women empowerment, keeping girls in school, and promoting decent work for young people and women.

The improvement of technical skills for imams, religious leaders and Islamic media outlets to promote social and behaviour change communication that is conducive to the demographic dividend and universal access to health, including reproductive health and family planning, the prevention of radicalization and violent extremism, harmonized training in Koranic schools and better social and professional integration of women and young people.”

Extract from the N’Djamena Declaration (27 July 2017) following the Regional Symposium organized by the UNFPA on ‘Islam, Demographic Dividend and Family Well-being’.
Task 6: Build a Constituency

The methodology proposed in Step IV to map partners and stakeholders is particularly relevant for this task. Identifying the points through which proposed change passes is key to facilitating the adoption of new practices. This task is complementary to the legitimating process started in Task 5. The constituency is the group of supporters that will encourage policymakers to keep going with the DD-package of policies as their implementation faces obstacles. Some tips to build constituencies are:

- Organizing multi-stakeholder coalitions;
- Working through one or more political parties;
- Conducting advocacy campaigns with legislators and legislative committees;
- Direct outreach to business, religious, labour or other civil society groups; and

It is worth highlighting UNFPA efforts to launch a Regional Communication Campaign on Social Change and Change of Behaviours in Western and Central African Countries in October 2017. It is also worth noting that the Campaign launch was enhanced by commitments to promote social change signed by the first ladies of the same countries.46

Another strategy is to create ‘champions’ as described in Figure 9.2.

Figure 9.2
Effects of DD-policy ‘Champions’

<table>
<thead>
<tr>
<th>Type</th>
<th>Effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘Champions’ or ‘legitimizers’, enjoying widespread credibility, coming from public, non-profit or private sectors</td>
<td>Facilitate acceptance of a significant break from tradition; shift in attitude and actions.</td>
</tr>
<tr>
<td>High-level government ‘legitimizer’</td>
<td>Facilitate acceptance of innovative policy adoption, especially if engaged early in the process</td>
</tr>
</tbody>
</table>
Other recent examples include UNFPA Senegal recruiting the francophone singer Maitre Gims as a goodwill ambassador in order to promote youth reproductive health and to fight female genital mutilation (UNFPA Senegal, 2016). An example of high-level government support was articulated by Rwanda’s Prime Minister: “we, with the President and Prime Minister, came to a consensus at the very highest level around 2005. We agreed that the rapid population growth rate was an issue that needed to be dealt with. If we didn’t deal with it, we most certainly would have problems with achieving our vision. After that, every leader began advocating for family planning.”

This facilitated Rwanda’s contraceptive prevalence rate to rise from 10 per cent in 2005 to 45 per cent in 2010. During this period, Rwanda, the country with the second highest population density in Africa, lowered its total fertility rate from 6.1 in 2005 to 4.6 in 2010.

**Task 7: Realign and mobilize resources**

After producing a DD-harnessing plan completing all previous tasks, it is important for the plan to realign existing resources and mobilize new ones. This is, in part, discussed in Steps IV and VI of this Programming Guide.

Regarding public policies, it is important to realize that past priorities do not simply disappear with the onset of new priorities related to installing the DD-harnessing strategic objective. There will be a transition period during which past policies need to continue to be financed; new policies will need new resources; and the scale-up process itself will need resources.

The resource question is not only financial. As has been mentioned in earlier Steps, managing DD-harnessing scale-up processes will be a crucial task (see Steps IV and VI). Particularly during the transition period, a management body (for example, a multi-sector steering committee, managed by a national technical population unit) will be needed to coordinate sectoral efforts. In order for it to be efficient, such a management unit will need political backing across political parties, trained human resources, and means to set-up coordination mechanisms.

**Task 8: Modify and strengthen organizations**

Task 8 points to the need to realize that implementing a national-scale DD-harnessing programme almost always means creating new organizational structures and/or making changes to existing ones; increasing needs for sharing information and resources; more concerted coordination than in the past; and new challenges to leadership and management.

A variety of methods can be used to phase these in, such as leadership and development coaching, comprehensive staff retraining and trainings on re-engineering processes (see Section 9.3).

**Task 9: Coordinate action**

In addition to the discussions in sections 4.2 and 6.1, scaling-up a national DD-harnessing plan calls for putting in place multisectoral government coordination, a multi-organization management process and accountability procedures to ensure that decisions are converted into concrete actions. The idea is to organize, at different implementing levels, the processes of sharing information and resources, joint planning, and action.

Task 10: Track performance and maintain momentum

This task has been largely described in Step VIII, where a monitoring mechanism for a DD-harnessing policy should track eight axes:

1. Demography and human development;
2. Cultural changes;
3. Education;
4. Health and family planning;
5. Youth empowerment;
6. Gender equity;
7. Rights and governance; and
8. Socioeconomic environment.

Step VIII also points to the example of the IS2D2, a composite indicator developed by CREFAT for monitoring the DD (see Step I).

In addition to checking on the results of DD-harnessing policies, monitoring the scale-up process itself is also useful. The idea is to maintain the momentum, correct faulty elements and to keep the process on track. It is recommended to have non-partisan third parties be involved at this time.

9.3. Inserting the DD in the National Development Plan

Action 2: Integrate harnessing the DD as a strategic cross-cutting axis in the national development plan

In general, the purpose of a DD-harnessing set of policies is to increase a country’s chances to boost its national economic and human capital growth in a determined ‘demographic window of opportunity’. Therefore, bringing to scale a DD-harnessing set of policies means, by definition, applying it to the national scale. Step VI presented several options to choose from in order to plan the implementation of policies involved in a DD-harnessing national plan, including wholesale or gradual/selective implementation and top-down or bottom-up implementation strategies. It also emphasized the need to consider the broader policy context and to ensure ‘transversality’ and coordination with sectoral policies.

After having adapted the Three-step, Ten-task approach to bring to scale a national DD-harnessing plan, a few key elements that are related to the DD-harnessing process remain. One of them is the need to look for all possible synergies with the DD-harnessing plan, with other sector policies and with the existing development plan in the national territory. The exercise should not be solely directed to the national development plan, as communes and regions also have development plans.

Ethiopia successfully scaled-up a family planning policy in the health sector, bringing reproductive health services ‘to the doorstep’ of every family down to the community level (see section 9.6).
It is possible to plan the interconnection of DD-harnessing and national development plans by phases:

1. Ensure that existing national development plans consider DD-harnessing as much as possible in the existing priority axes, specific objectives and indicators;

2. As national development plans expire, increase the weight of DD-harnessing analysis and evidence to show the benefits of applying policies to increase the benefits for the country; and

3. Once the national PDHDD or roadmap is established and is part of the national development plan, it should be mainstreamed to all subnational levels.

The Burkina Faso National Development Plan 2016-2020 (PNDES) already contains some DD-harnessing targets. “Objective 2 – Develop human capital” has two specific objectives:

1. Promoting health for the population and accelerating the demographic transition. Among the indicators to measure improvements are maternal mortality rate and the composite fertility index.

2. Increasing access to and improving the quality of education, higher education and training corresponding to the economy’s needs. DD-harnessing indicators include primary education completion rate and the post-primary education completion rate.

While it is positive that the national development plan already has envisioned DD-harnessing elements, in order to scale-up a DD-harnessing plan, some of the indicators will have to be segregated by sex, for example post-primary education completion rate. Others will have to be added, such as contraceptive prevalence rate.

Burkina Faso will need to make sure that the benefits in its PDHDD or roadmap trickle down to local development realities. Passing from national to subnational levels of government is a challenge to any scale-up on a DD-harnessing exercise.

One approach is to identify existing mechanisms for multi-policy management, such as those established in national development plans, whose effectiveness depends on benefits reaching the community level. For example, the PNDES contains a chart explaining its monitoring and evaluation mechanism (see Table 9.1).

Every country must evaluate how to adjust this mechanism to fit DD-harnessing coordination and monitoring.
9.4. Capacity Development

**Action 3: Develop the capacities of national, regional and local levels of governance**

After the national policy declaration to harness a DD is launched, a plan to bring it to scale at the national level should contain implementation guidelines that facilitate its enactment. Recalling the chart in Step VIII, the African Commission proposed key activities to facilitate and accelerate DD roadmap implementation. Table 9.2 presents three activities relevant to DD-harnessing policy scale-up.

Table 9.1

<table>
<thead>
<tr>
<th>Level</th>
<th>Monitoring responsibility</th>
</tr>
</thead>
</table>
| 1. National Steering Committee for the PNDES and a permanent secretariat | Annual review  
Global performance framework  
Strategic reform and structural investment Monitoring framework |
| 2. Inter-sector Dialogue Entity (ministers and institutions, the private sector, civil society) | Sector review: sector performance framework |
| 3. Regional Dialogue Entity (decentralized services, local authorities, local private sector, local civil society) | Regional review: regional performance framework |
| 4. Beneficiaries/Population | Acceptance and participation |

**Table 9.2**

**Relevant Activities for Scaling-up DD Policy**

| Planning | Strengthen the capacities of planning authorities and sector and district planning units to integrate DD priorities into sectoral, local and national development plans and actions based on analytical evidence. |
| Monitoring | Develop and implement a robust performance monitoring and accountability mechanism for DD initiatives and strategies at the national, regional and continental levels, including for youth-focused investment policies and programmes. |
| Capitalization and partnership | Build on the successes of key regional initiatives around the continent on DD and women’s empowerment, facilitate their access to funding, and scale them up to cover more countries. Convene multiple stakeholders and partners for advocacy, resource mobilization and strategic partnerships around harnessing the DD. |
A common denominator underlying the success of these activities is the need to train and develop the capacities of authorities at all levels. These authorities will be the implementing agents who manage and produce the relevant information related to the scale-up. Section 6.3 of this Programming Guide described how Mauritania’s National Development Plan recognizes capacity gaps that led to malfunctioning decentralization.

The DD-harnessing scale-up plan should, therefore, include national, regional and local capacity development efforts. Supporting change agents gives them credibility and the confidence to lead. Motivating and supporting staff throughout the change process will help maintain their dedication and will create a support system for the change network.

9.5. Interrelation between Scale-up and Change

Action 4: Do not underestimate the link between scale-up and change

A systematic approach to address the interrelations between change and scale-up is key to a successful DD-harnessing programme. Table 9.3 provides a set of ideas to integrate before scaling up. This list is drawn from a scale-up model for reproductive health (ExpandNet and Knowledge for Health Project, 2014).

Table 9.3
Reminder on Change and Scaling up

<table>
<thead>
<tr>
<th>Keep in mind:</th>
<th>Do not make the following wrong assumptions:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Achieving desired health impact will require improving (thus changing) the way services are delivered across country populations.</td>
<td>• As long as innovation is evidence-based in other settings, people will adopt it.</td>
</tr>
<tr>
<td>• Improving services and scaling up those improvements requires changing practices.</td>
<td>• If policies and plans change, the services will change automatically.</td>
</tr>
<tr>
<td>• Change and Scale-up are not easy. To systematically link change and scaling-up improves success rates.</td>
<td>• Scale-up means replicating things that work, so it is not to be considered as ‘change’.</td>
</tr>
<tr>
<td></td>
<td>• The design and cost of innovation pilots should not include planning for scale-up.</td>
</tr>
<tr>
<td></td>
<td>• Stakeholders will support replicating a successful pilot.</td>
</tr>
<tr>
<td></td>
<td>• Scale-up is similar to routine management, so there is no need for additional support for planning and implementation.</td>
</tr>
</tbody>
</table>
Niger’s DD country profile recommends “coordinated and multi-sector awareness-raising for social and behavioural change,” reflecting the pervasive need for cultural change. It follows that raising awareness on the advantages of changes in cultural practices will have for individuals and the population as a whole would help in scaling up efforts to harness the DD. Partnering with media outlets is a particularly effective way to promote cultural change.

Mali’s Demographic Dividend Roadmap concludes with a calendar of special events to be held for raising awareness and popularizing the promotion of the DD and its pillars. Events include the World Population Day, Pan-African Women’s Day, International Youth Day, International Literacy Day, World Food Day and the International Day of Rural Women. In order to continuously raise awareness, such awareness-raising events could be organized by the government-assigned coordination entity in each country every year.

9.6. Examples of Scaling up Family Planning Services

In recent years, Ethiopia, Malawi and Rwanda have dramatically scaled up their family planning services (USAID Africa Bureau et al., 2012). The most dramatic contribution of this kind occurred in Ethiopia, where the family planning programme is ‘packaged’ into the Health Extension Worker programme, one of 16 community-level health services. From the beginning, the Health Extension Worker programme was designed as a large-scale system, not a pilot programme. The emphasis on task-shifting was also a critical element, with some 34,000 health extension workers receiving training. These auxiliary health personnel provide injectables and, in recent years, have begun to insert implants. The government supports the salaries of the Health Extension Worker staff from its treasury and has drawn on other funding sources for in-service training and logistics system improvements. The Federal Ministry of Health ensures that development partners are coordinated in financing and supporting the Health Extension Worker programme.

In Rwanda, a similar vision of scale-up has driven the plan for providing injectables and other methods by some 30,000 community health workers in villages nationwide and to expand access to vasectomy, postpartum IUDs, and other methods beyond major hospitals.

In Malawi, the Ministry of Health is training and supporting health surveillance assistants to provide family planning information and services, including injectables, although sufficient funding remains a challenge. Clinical officers provide female sterilization in the public and private sectors, creating greater access and use. All three countries have developed systems that promote a referral process through community health workers for long-acting and permanent methods.

Operationally, this remains challenging in many ways. Obstacles include ready access to clinics, sufficient numbers of trained providers in those clinics, and client awareness and demand for long-acting and permanent methods.
9.7. Conclusion

Operational Steps to set up a Scale-up Strategy

**Action 1:** Study the Three-step, Ten-task scale-up model and complete it with your national DD-harnessing strategy. The result will be a sharper DD-harnessing policy document.

**Action 2:** After finishing Action 1, integrate harnessing a DD as a strategic cross-cutting axis in the national development plan.

**Action 3:** Develop the capacities of national, regional and local governance levels and sector policies to rally for a development model that takes into account population dynamics.

**Action 4:** Do not underestimate the link between scale-up and change, especially the need for changes in cultural patterns that a DD-strategy requires.

Bringing the DD-harnessing plan to the national scale requires a plan. It involves a series of steps and tasks for the plan to be stronger and to respond more efficiently to eventual difficulties and resistances that may arise. Some of those measures have been developed in earlier Steps of this Programming Guide. However, some elements are specific to the scale-up process itself.

Linking a DD-harnessing plan to national, regional and local development priorities is a major endeavour to achieve scale-up of the DD-harnessing policies. This must be done at the same time that change agents are informed, trained and convinced of the value of applying the plan at their level.

Examples of scaling up family planning policies illustrate that bringing about change on this subject at all levels, including community level, is not only desirable but possible in sub-Saharan Africa. While high-level government commitment, partner collaboration, community involvement were all part of the success stories, the strategic component binding all accomplishments is the consciousness that implementing the scale-up is a way of injecting innovation and change into existing policies. A plan for harnessing the DD introduces a new dynamic to national development plans.
References


ExpandNet (public health professionals’ network) and Knowledge for Health Project (2014). Guide to fostering change, managing change and scaling up (pdf and online toolkit).


Office national de la population (ONP) de la République de la Côte d’Ivoire (2016). *Profil du dividende démographique de la Côte d’Ivoire en 2014 (avec l’appui technique de l’UNFPA et CREFAT)*.


Population Change (web site): *Singapore Case Study*. https://sites.google.com/site/populationchangep2wp/singapore


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REFERENCES


Annexes

Annex 1  Policy declaration template
Annex 2  Components of the CREFAT Indicators
Annex 3  Steps undertaken thus far in the case of Mauritania
UNFPA provided technical and financial support to respond to the 2016 African Union assembly decision (Assembly/AU/Dec.591 (XXVI) to “expedite the implementation of a continental initiative on Demographic Dividend for Africa” and to “develop a roadmap with key deliverables and milestones to guide Member States and the Regional Communities on concrete actions to be undertaken in 2017 and beyond.”

The following policy declaration template is part of the effort to propose concrete guiding tools for African States to put on paper tangible, measurable and attainable objectives to design and implement a multisectoral national policy to harness the demographic dividend.

**Introduction**

“In recent years, the DD, which is defined as the temporary opportunity to achieve rapid socioeconomic development occasioned by a decline in fertility levels and strategic investments in key sectors, has been fronted as a solution to the myriad of problems being experienced by developing countries. This is drawn from the experience of the ‘Asian Tigers’ and the newly industrialized countries in Asia that have successfully achieved high levels of income and a much better quality of life for its citizens. In response to these experiences, the African Union has recognized the harnessing of the DD as an opportunity for African countries to address its development challenges which include high unemployment levels, high incidence of poverty, forced migration by inhabitants of the continent in search for better opportunities abroad, low education levels, high mortality and morbidity incidences, and criminal activities among the youth.”

**1. Background**

This section is an overview of the national potential for a DD.

In a few paragraphs, briefly explain:

- From when did the country engage in a DD harnessing dynamic;
- The shape that the efforts to harness a DD have taken in the country so far; and
- The evidence-based approach using NTA or DemDiv.

Conclude with a paragraph showing how these efforts have created a concrete planning or coordination national entity to steer the process from now on.

**2. Development of the National Policy Declaration to Harness a DD - methodology and acknowledgements**

Describe the methodology used to arrive at the policy document: the process (workshops, national fora, etc.).

Equally describe the actors: under whose guidance was it developed; the following steering committee members; with whom was the draft policy validated?

---

**Policy Declaration Template**

**Annex 1**

**Start by defining the demographic dividend concept. Then, adapt this section to your national situation and introduce other elements such as:**

- How The African Union Agenda 2063 seeks to position the continent towards realizing the ‘Africa We Want’, and the place harnessing a demographic dividend has for the 2063 Agenda;
- The role the national DD roadmap as a domestication of the African Union roadmap in relation to the National Development Plan.

---

3. General Objective

The General Objective of the National Policy Declaration to Harness a Demographic Dividend is to:
- Adopt the African Union DD Roadmap, and adapt it to the national context;
- Highlight priority actions needed for our country to harness a DD;
- Provide a guide to local government on specific DD measures to put in place at municipal and regional levels; and
- Provide basic guidelines for an implementation and monitoring frameworks to harness a DD.

4. Guiding frameworks

The National Constitution. Cite national values and principles of governance directly related with development and population, such as social justice, protection of the marginalized, integrity, transparency and accountability, sustainable development, rights to health care services, adequate housing and sanitation, social security and education.

The National Development Plan. Make reference to the national objectives to make economic, cultural, social and political progress.

Describe how the following continental and international guidelines are a reference for the DD-harnessing policy:
- Agenda 2063, “the Africa we want”. Cite paragraphs that best relate the DD opportunity with the national development objectives.
- The African Youth Charter;
- The common position on the Post 2015 Development Agenda and the 2030 Development Agenda;
- The Transforming our world: the 2030 Agenda for Sustainable Development;
- The 1994 International Conference on Population and Development (ICPD) Action Plan; and
- The Report on the ICPD.

5. National demographic Dividend priority/thematic pillars and corresponding activities

**Health and well-being**

**Planning**

<table>
<thead>
<tr>
<th>Key Actions (Africa Road Map)</th>
<th>Current situation/status</th>
<th>Key Actions (National Road Map)</th>
<th>Time frame</th>
<th>National Entity involved/responsible</th>
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**Costing**

<table>
<thead>
<tr>
<th>Actions (Area)</th>
<th>Key activities</th>
<th>Implementation period (in years)</th>
<th>Estimated annual cost</th>
<th>Overall</th>
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</table>

Adapt this section to specific national objectives.

The pillars cited here correspond to those cited by the Africa Road Map. Adapt the order of the pillars according to national priorities. The Africa Road Map proposes “key actions”.

For each pillar, adapt those actions to the national context. Once national activities have been singled out, implementation time frame and costing can be more specifically defined. Costing planning facilitates decision making. Reminder: cultural transformation and gender equality are cross-cutting to all pillars.
# Education and skills development

**Planning**

<table>
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<tr>
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<th>Overall</th>
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# Employment and entrepreneurship

**Planning**

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<th>Current situation/status</th>
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**Costing**

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<th>Implementation period (in years)</th>
<th>Estimated annual cost</th>
<th>Overall</th>
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# Rights, governance and youth empowerment

**Planning**

<table>
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<tr>
<th>Key Actions (Africa Road Map)</th>
<th>Current situation/status</th>
<th>Key Actions (National Road Map)</th>
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**Costing**

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<thead>
<tr>
<th>Actions (Area)</th>
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<th>Estimated annual cost</th>
<th>Overall</th>
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</tbody>
</table>
6. Implementation, monitoring and evaluation mechanisms

Partners in the implementation of the various axes of the DD policy framework

<table>
<thead>
<tr>
<th>Objective</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increased age at marriage</td>
<td>Girls Not Brides, UNICEF</td>
</tr>
<tr>
<td>Increased levels of education, particularly for girls</td>
<td>UNESCO, UNICEF</td>
</tr>
<tr>
<td>Increased relevance of education for productive employment</td>
<td>UNESCO</td>
</tr>
<tr>
<td>Expanded comprehensive family planning services that are gender</td>
<td>IPPF</td>
</tr>
<tr>
<td>responsive and meet human rights standards for quality and access</td>
<td></td>
</tr>
<tr>
<td>Reduced child mortality and malnutrition</td>
<td>UNICEF, WHO</td>
</tr>
<tr>
<td>Increased economic empowerment of women</td>
<td>UN Women</td>
</tr>
<tr>
<td>Barriers that make it difficult for women to work outside the home</td>
<td>UN Women, ILO</td>
</tr>
<tr>
<td>removed</td>
<td></td>
</tr>
<tr>
<td>Peace, justice and strong institutions</td>
<td>UNDP</td>
</tr>
<tr>
<td>Empowerment of young people</td>
<td>UNICEF</td>
</tr>
<tr>
<td>More employment and entrepreneurship among young people</td>
<td>UNESCO, ILO</td>
</tr>
<tr>
<td>More foreign direct investment</td>
<td>World Bank</td>
</tr>
<tr>
<td>More domestic savings and investment</td>
<td>UNDP, World Bank</td>
</tr>
<tr>
<td>Reduced trade barriers</td>
<td>WTO</td>
</tr>
</tbody>
</table>

Describe the overall implementation scheme, emphasizing the role of the entity in charge of the multisectoral coordination and oversight. Equally describe monitoring and evaluation mechanisms put in place to evaluate the progress of the implementation plan.
**Components of the CREFAT Indicators**

<table>
<thead>
<tr>
<th>Dimension 1 (ICDE)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Private consumption in Education</td>
<td>Household final consumption expenditure related to fees for the education of their members</td>
</tr>
<tr>
<td>Private consumption in Health</td>
<td>Household final consumption expenditure related to the health costs of their members</td>
</tr>
<tr>
<td>Other private consumptions</td>
<td>Household final consumption expenditure related to expenses of their members other than education and health</td>
</tr>
<tr>
<td>Public consumption in Education</td>
<td>Value of household consumption expenditure in education received via the public sector</td>
</tr>
<tr>
<td>Public consumption in Health</td>
<td>Value of household consumption expenditure in health received via the public sector</td>
</tr>
<tr>
<td>Other public consumptions</td>
<td>Value of consumption expenditure of households other than education and health received via the public sector</td>
</tr>
<tr>
<td>Wage income</td>
<td>Salary and treatment received by individuals plus net taxes subsidies on production</td>
</tr>
<tr>
<td>Non-wage income</td>
<td>Remuneration of self-employed individuals</td>
</tr>
<tr>
<td>Average profile</td>
<td>The average by age and by individual of the indicator concerned (gender/background)</td>
</tr>
<tr>
<td>Aggregated profile</td>
<td>The accumulation of the average profile at the national level (average profile multiplied by the population size by age) (gender/background)</td>
</tr>
<tr>
<td>Dependent group</td>
<td>Age group whose consumption exceeds labour income (Life Cycle Deficit positive) (gender/background)</td>
</tr>
<tr>
<td>Surplus-generating Group</td>
<td>Group whose labour income exceeds consumption (Life Cycle Deficit negative) (gender/background)</td>
</tr>
<tr>
<td>Economic support ration</td>
<td>Number of effective workers per actual consumer</td>
</tr>
<tr>
<td>Demographic dependency ratio</td>
<td>Number of people of working age on total population</td>
</tr>
<tr>
<td>Measure of the DD</td>
<td></td>
</tr>
<tr>
<td>Inequality index of the profiles according to gender</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dimension 2 (IQCV)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing cost</td>
<td>Housing weight in the household budget, in percentages</td>
</tr>
<tr>
<td>Access to basic sanitary facilities</td>
<td>Percentage of people with indoor toilets for household use only</td>
</tr>
<tr>
<td>Number of persons per room</td>
<td>Average number of individuals per room</td>
</tr>
<tr>
<td>Quality of the social network</td>
<td>Percentage of individuals with relatives or friends they can count on if needed</td>
</tr>
<tr>
<td>Quality of water</td>
<td>Percentage of individuals satisfied with the quality of their water</td>
</tr>
<tr>
<td>Atmospheric pollution</td>
<td>Average annual concentration, in micrograms per cubic meter, of fine particulate matter (PM2.5) in residential areas of cities</td>
</tr>
<tr>
<td>Stakeholder participation in developing regulations</td>
<td>Government Transparency in Regulatory Development Processes</td>
</tr>
<tr>
<td>Voting turnout</td>
<td>Percentage of registered voters who voted in the recent election</td>
</tr>
<tr>
<td>Life-satisfaction</td>
<td>Overall judgement that individuals bear on their lives, rather than their feelings of the moment. Satisfaction with existence, on a scale of 0 to 10</td>
</tr>
<tr>
<td>Homicide rate</td>
<td>Annual number of intentional homicides per 100,000 individuals</td>
</tr>
<tr>
<td>Sense of security of people walking alone at night</td>
<td>Percentage of people who report feeling safe walking alone at night</td>
</tr>
<tr>
<td>Time dedicated to leisure activities and personal concerns</td>
<td>Average number of minutes per day devoted to leisure and personal concerns such as sleeping and eating</td>
</tr>
<tr>
<td>Heavy working hours</td>
<td>Percentage of employees working at least 50 hours per week on average</td>
</tr>
<tr>
<td>Dimension 3 (ISSP)</td>
<td>Dimension 4 (IDHE)</td>
</tr>
<tr>
<td>-------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td><strong>Entries in poverty</strong></td>
<td>Population of non-poor individuals in t who became poor in t + 1</td>
</tr>
<tr>
<td><strong>Exits of poverty</strong></td>
<td>Population of poor individuals in t who became non-poor in t + 1</td>
</tr>
<tr>
<td><strong>Time of crossings from one state to the other</strong></td>
<td>Number of times an individual stays in one situation before moving to another poverty situation</td>
</tr>
<tr>
<td><strong>Time spent in a given state</strong></td>
<td>Number of times an individual stays in a given state</td>
</tr>
<tr>
<td><strong>Importance of chronic poverty</strong></td>
<td>Number of people who remain in poverty during a given period</td>
</tr>
<tr>
<td><strong>Importance of transient poverty</strong></td>
<td>Number of people who remain only part of the time in a situation of poverty during a selected period</td>
</tr>
<tr>
<td><strong>Importance of pure non-poverty</strong></td>
<td>Number of people who remain in the situation of non-poverty during a given period</td>
</tr>
<tr>
<td><strong>Gender inequality index</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Gross school enrolment rate (GER)</strong></td>
<td>GER measures the ratio of total enrolment to the school-age population</td>
</tr>
<tr>
<td><strong>Alphabetization rate</strong></td>
<td>According to UNESCO, the rate of illiteracy is “the proportion of people in a given population, unable to read and write, including a simple and brief statement of facts in relation to daily life.”</td>
</tr>
<tr>
<td><strong>GER informal education</strong></td>
<td>The ratio of total enrolments in informal education to the school-age population</td>
</tr>
<tr>
<td><strong>Private expenses in education</strong></td>
<td>(preschool, elementary, higher, non-formal education)</td>
</tr>
<tr>
<td><strong>Public expenses in education</strong></td>
<td>(preschool, elementary, higher, non-formal education)</td>
</tr>
<tr>
<td><strong>Life expectancy at birth</strong></td>
<td>For a given year, life expectancy at birth is the average age of death of a fictitious generation of people at each age, considering the risks of death observed that year by age.</td>
</tr>
<tr>
<td><strong>Number of individuals per doctor</strong></td>
<td>(traditional and non-traditional medicine) Total number of individuals divided by the number of doctors</td>
</tr>
<tr>
<td><strong>Private health expenses</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Public health expenses</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Income per head</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Overall fertility rate</strong></td>
<td>It measures for a given year n, the number of live births during year n on the number of women of fertile age (15-49 years) of the same year.</td>
</tr>
<tr>
<td><strong>Fertility rate per age</strong></td>
<td>It measures for a given year n, the number of live births during year n for women of age x on the number of women of age x of the same year.</td>
</tr>
<tr>
<td><strong>Total fertility rate</strong></td>
<td>The Total fertility rate indicates the average number of children a woman would have throughout her life, in the fertility conditions of the moment – that is, if the fertility rates observed in the year considered at each age remained unchanged.</td>
</tr>
<tr>
<td><strong>Fertility rate for teenagers</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Maternal mortality rate</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Prevalence of HIV in the population group of 15-24 years old.</strong></td>
<td></td>
</tr>
<tr>
<td>Dimension 5 (ISRT)</td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------</td>
</tr>
<tr>
<td>Entry index of an area</td>
<td>Ratio entries lifetimes on total population</td>
</tr>
<tr>
<td>Exit index of an area</td>
<td>Ratio entries for a period on total population</td>
</tr>
<tr>
<td>Retention index of an area</td>
<td>Number of non-migrant residents in the total population</td>
</tr>
<tr>
<td>Migration growth index</td>
<td>Population growth due to migration</td>
</tr>
<tr>
<td>Average density of the population of the area</td>
<td>Average number of individuals per area</td>
</tr>
<tr>
<td>Average size of housings</td>
<td>Average number of housings per area</td>
</tr>
<tr>
<td>Density of housing</td>
<td>Average number of individuals per housings</td>
</tr>
<tr>
<td>Urbanization rate</td>
<td>Part of urban population in total population of the area</td>
</tr>
<tr>
<td>Consumption of natural and agricultural areas</td>
<td>Number of destroyed area per year for urban constructions</td>
</tr>
<tr>
<td>Average price of land</td>
<td>Variation in urban land prices</td>
</tr>
<tr>
<td>Density of urban population</td>
<td>Number of individuals per urban area</td>
</tr>
<tr>
<td>Average size of urban housings</td>
<td>Average number of individuals per urban housing</td>
</tr>
<tr>
<td>Average number of housings per urban area</td>
<td></td>
</tr>
<tr>
<td>Number of vacant housings</td>
<td>Number of unoccupied housings that can be used as habitat</td>
</tr>
<tr>
<td>Number of renter households per owner households</td>
<td></td>
</tr>
<tr>
<td>Access rate to basic social services (water, electricity, health...)</td>
<td></td>
</tr>
<tr>
<td>Quality index of basic social services (education, electricity, water, sanitation...)</td>
<td></td>
</tr>
<tr>
<td>Proportion of deliveries assisted by qualified health care providers for the poorest quintile of the population</td>
<td>Number of women per gynaecologist</td>
</tr>
<tr>
<td>Proportion of satisfied contraceptive demand by modern means by area</td>
<td></td>
</tr>
<tr>
<td>Index of remittances by area</td>
<td></td>
</tr>
<tr>
<td>Access rate to formal transfer services</td>
<td>Proportion of individuals or households that have access to a transfer service in their habitat area or at a given distance from it</td>
</tr>
<tr>
<td>Consumption of the area</td>
<td></td>
</tr>
<tr>
<td>Cost of the household basket</td>
<td>Cost of the basket of the most consumed goods</td>
</tr>
</tbody>
</table>
Steps undertaken thus far in the case of Mauritania

Mauritania is one of the SWEDD countries that have advanced furthest in implementing the framework outlined in this Programming Guide. This includes the following steps:


3. Integration of DD concerns into the National Development Plan (SCAPP) for 2016-2030, published by the Ministry of Economy and Finance. It shows the existing window of opportunity for a DD in Mauritania, and it makes the links to the various sectors of government that should be involved to achieve it, including a preliminary budget exercise.

4. April 2017 Ceremony in Nouakchott to launch the national campaign “How to fully benefit from the demographic dividend by investing in the youth.”

5. A Roadmap to harness the DD has been developed.

6. Some advances have been made in implementation. ILO is supporting the government in the implementation of the Worksite school under the Institutional Adjustment Project of the transport sector (PAIST) funded by the European Union. The main objective is to develop a vocational training branch of studies in road maintenance to increase the employability of young men and women and foster their professional integration in road maintenance in rural and urban areas.

7. Work on a new National Population Policy reflecting the DD perspective is currently underway.
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Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled.