# AFRICA HUMAN CAPITAL PLAN

POWERING AFRICA'S POTENTIAL THROUGH ITS PEOPLE







### KEY MESSAGES



- Africa's Human Capital Index score of 0.40 puts the region at 40% of its potential:
  - GDP per worker could be 2.5 higher if everyone reached the benchmark of complete education and full health.
- Africa is committed to the human capital agenda and country experiences show that rapid improvement is possible.
- Common drivers of progress in countries on human capital outcomes include strong governance, quality of service delivery, improved financing, and a whole-of-society approach.

#### TO ENABLE EVERY GIRL AND BOY TO FULFILL HER AND HIS POTENTIAL, THE WORLD BANK'S AFRICA HUMAN CAPITAL PLAN:

- Sets ambitious targets to be achieved by 2023 on child survival, reducing stunting, learning, social protection, lowering adolescent fertility, reducing open defecation and an improved Human Capital Index score.
- Identifies game changers for World Bank (WB) support:
  - Increasing WB financing for human capital in Africa, to reach US\$ 15 billion for human development in 2021-23, coupled with more projects that support the human capital agenda by different World Bank Group (WBG) Global Practices.
  - Supporting policy reforms to tackle systemic obstacles to human capital.
  - Accelerating the demographic transition, via a new series of projects empowering women across the region.
  - Preventing and reversing damage to human capital in Fragility, Conflict and Violence (FCV) affected settings.
  - Leveraging technology and innovations in WB projects to further human capital.
  - Advancing research and advocacy to strengthen the knowledge base and the demand side of human capital.
  - Rallying WB country teams and partners around the human capital agenda to enable comprehensive cross-sectoral solutions at scale.
- · Incentivizes action and accountability via a monitoring and results framework.

### OUTLINE

- THE STATE OF HUMAN CAPITAL IN AFRICA
- A HUMAN CAPITAL AGENDA FOR AFRICA
- HOW WILL THE WORLD BANK GROUP SUPPORT THE HUMAN CAPITAL AGENDA IN AFRICA?
  - SCALING UP BANK FINANCING
  - ADVOCACY AND KNOWLEDGE
  - TACKLING THE CRITICAL HUMAN CAPITAL CHALLENGES
     OF DEMOGRAPHICS AND FRAGILITY
  - LEVERAGING TECHNOLOGY AND INNOVATIONS
  - MAKING COUNTRY TEAMS STRONGER AND LEVERAGING PARTNERSHIPS
- TRACKING PROGRESS



### **OUR VISION**

## AREGION IN WHICH ALL GIRLS AND BOYS:



GROW UP WELL-NOURISHED AND READY TO LEARN



ATTAIN REAL LEARNING
IN THE CLASSROOM



ENTER THE JOB MARKET AS
HEALTHY, SKILLED, AND
PRODUCTIVE ADULTS





# THE STATE OF HUMAN CAPITALINAFICA

## THE HUMAN CAPITAL CHALLENGE IN AFRICA



#### **SURVIVAL TO AGE 5**

- 2.9M children under 5 die every year.
- Low coverage and quality of key interventions.



#### **EDUCATION**

- 50M children are out of school.
- Low completion rates and learning outcomes.



#### **HEALTH, NUTRITION, POPULATION**

- 32% of children under 5 are stunted.
- 200,000 maternal deaths annually.
- More than 700,000 deaths annually from TB and HIV/AIDS.
- Total fertility rate of 4.8 twice the global average.

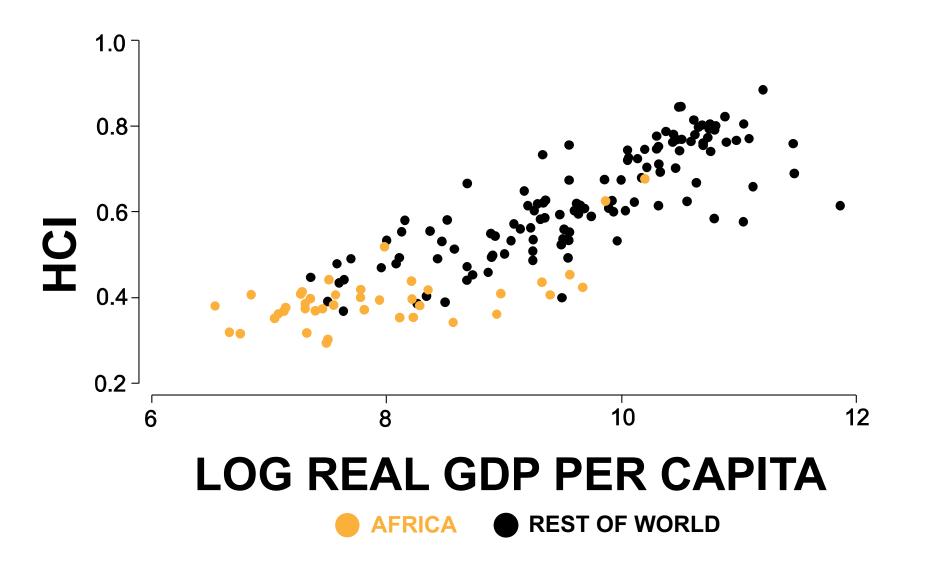


#### **SOCIAL PROTECTION AND JOBS**

- Of Africa's nearly 420 million youth aged 15-35, one-third are unemployed.
- Only 20% of the lowest quintile in low income countries are covered by social protection.

### GDP AND HUMAN CAPITAL ARE HIGHLY CORRELATED





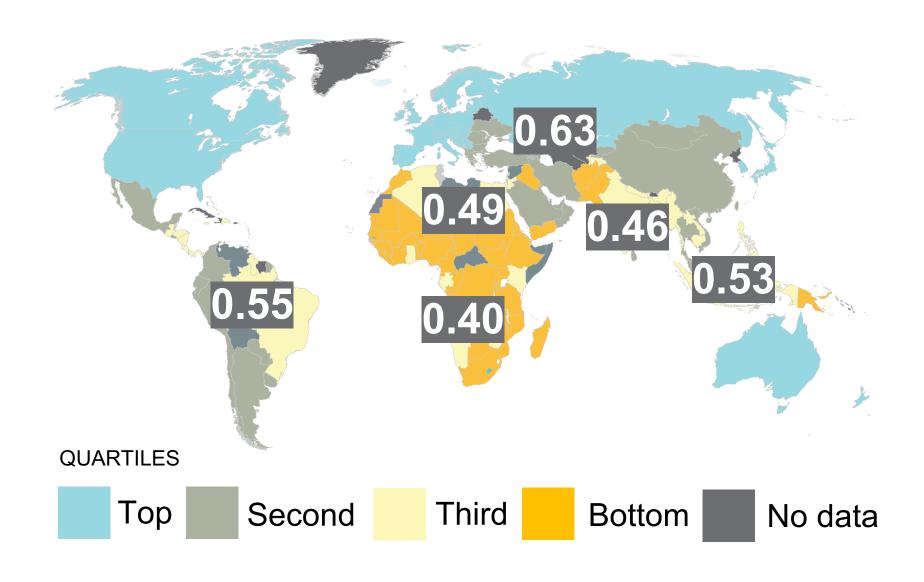
## 25 OF THE BOTTOM 30 COUNTRIES ARE IN AFRICA

The World Bank's Human Capital Index (HCI) measures the human capital that a child born today can expect to achieve by age 18, in view of the risks of poor health and poor education currently prevailing in the country where that child lives.

NOTE: There are seven countries in Africa without complete data to calculate the HCl score: Cabo Verde, CAR, Equatorial Guinea. Eritrea, Guinea-Bissau, Sao Tomé and Principe, Somalia.







WITH AFRICA'S HCI SCORE AT 0.40, GDP PER WORKER COULD BE 2.5 HIGHER IF EVERYONE REACHED THE BENCHMARK OF COMPLETE EDUCATION AND FULL HEALTH – AN EXTRA 1.8% OF ANNUAL GROWTH OVER 50 YEARS

The three measures forming the Human Capital Index are aligned with key Sustainable Development Goals (SDGs):

- Survival to age 5 aligns with SDG 3.2 to reduce neonatal mortality to 12 per 1,000 live births or lower and under 5 mortality to 25 per 1,000 live births or lower.
- Learning-Adjusted Years of School aligns with SDG 4.1- to ensure, among other things, the completion of equitable and good-quality primary and secondary education.
- Health (Stunting and Adult Survival): aligns with SDGs 3.3, 3.4 and 3.6 on reducing mortality and SDG 2.2 on reducing malnutrition.

AFRICA'S HCI SCORE OF 0.40 MEANS THE REGION IS REACHING ONLY 40% OF ITS POTENTIAL

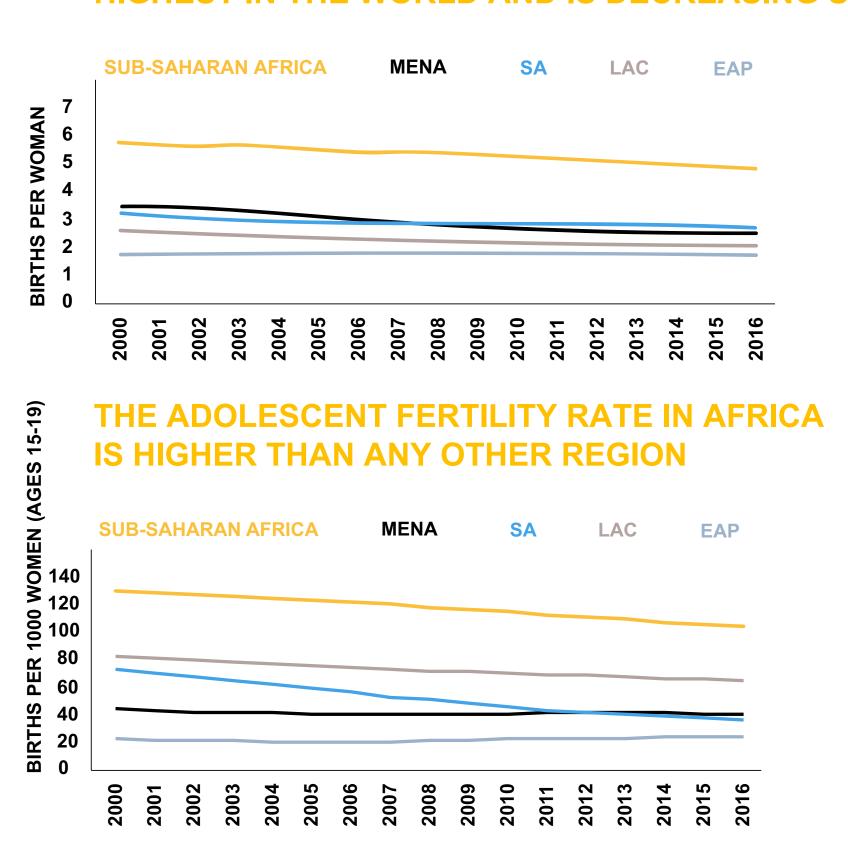


## WOMEN AND GIRLS IN AFRICA FACE PROFOUND CHALLENGES

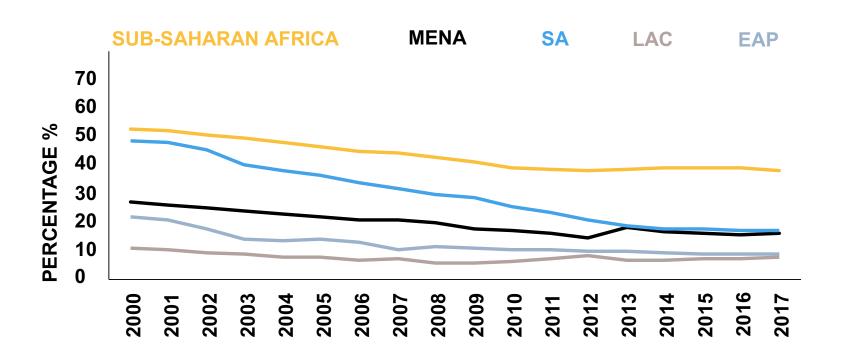


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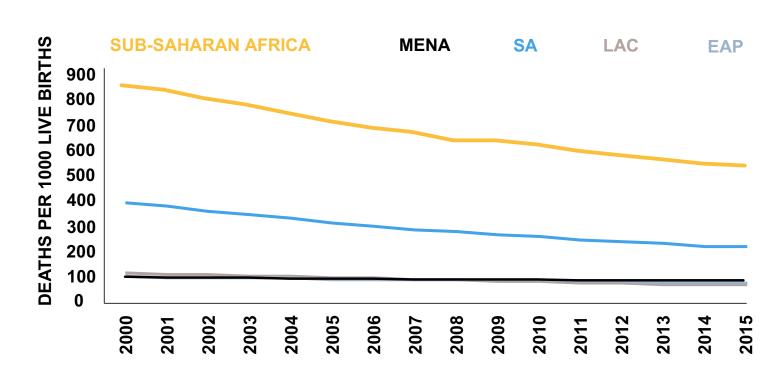
### THE TOTAL FERTILITY RATE IN AFRICA IS THE HIGHEST IN THE WORLD AND IS DECREASING SLOWLY



### THE % OF ADOLESCENT GIRLS OUT OF SCHOOL IS HIGHER IN AFRICA THAN ANY OTHER REGION



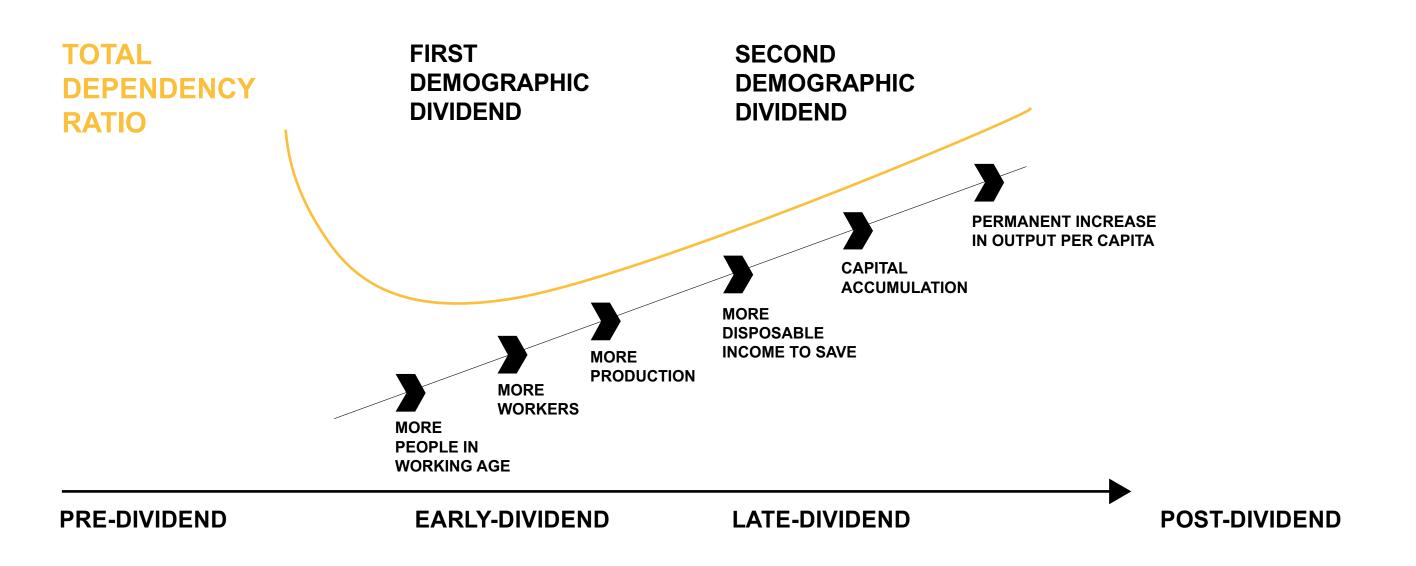
### THE MATERNAL MORTALITY RATIO IN AFRICA IS 2.5 TIMES THE AVERAGE OF THE WORLD







SPEEDING UP THE FERTILITY AND MORTALITY TRANSITION OPENS A DEMOGRAPHIC WINDOW OF OPPORTUNITY FOR AFRICA



DEMOGRAPHIC CHANGE IN AFRICA COULD EXPLAIN 11 TO 15% OF GDP GROWTH BY 2030 AND LEAD TO 40-60 MILLION FEWER PEOPLE IN POVERTY (AHMED ET AL, 2016)

## FERTILITY IS CRITICAL TO THE HUMAN CAPITAL AGENDA

### HIGH FERTILITY PUTS EFFORTS TO IMPROVE HUMAN CAPITAL AT RISK

- Despite a decrease in the poverty rate, the number of poor people is increasing by 5 people per minute.
- 14 million more stunted children in Africa since 1990, despite reductions in stunting rate.
- On current trends, 170 million additional children between now and 2030, putting increased strains on weak health and education systems.

#### FERTILITY IS A DRIVER OF HUMAN CAPITAL OUTCOMES

- Large number of children associated with less (public and household) investment in human capital.
- Very young mothers are more likely to die as a result of childbirth.
- Children born to young mothers are more likely to be stunted, suffer from ill health, and die before the age of 5.

#### FERTILITY IS A CONSEQUENCE OF LOW HUMAN CAPITAL

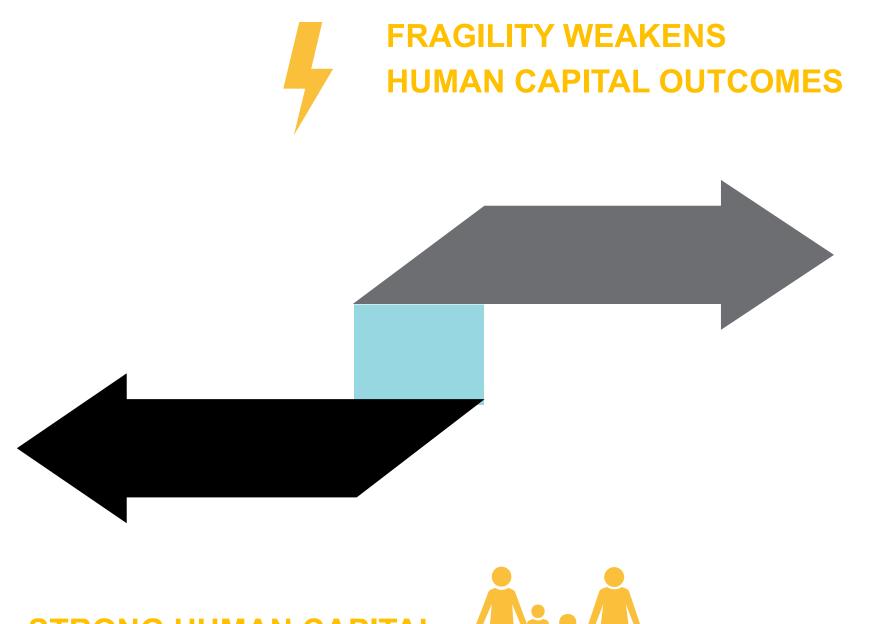
- High child mortality is a key determinant of high fertility.
- Low fertility countries invest significantly in people, especially girls and women.
- Educated women have fewer children.



**INCREASES RESILIENCE** 



- Human capital builds the resilience of citizens and the capacity of the state.
- Educated, employed engaged citizens are foundational to stable societies.
- Empowered women are often peace agents.
- Stability allows parents to invest in children's nurturing care.



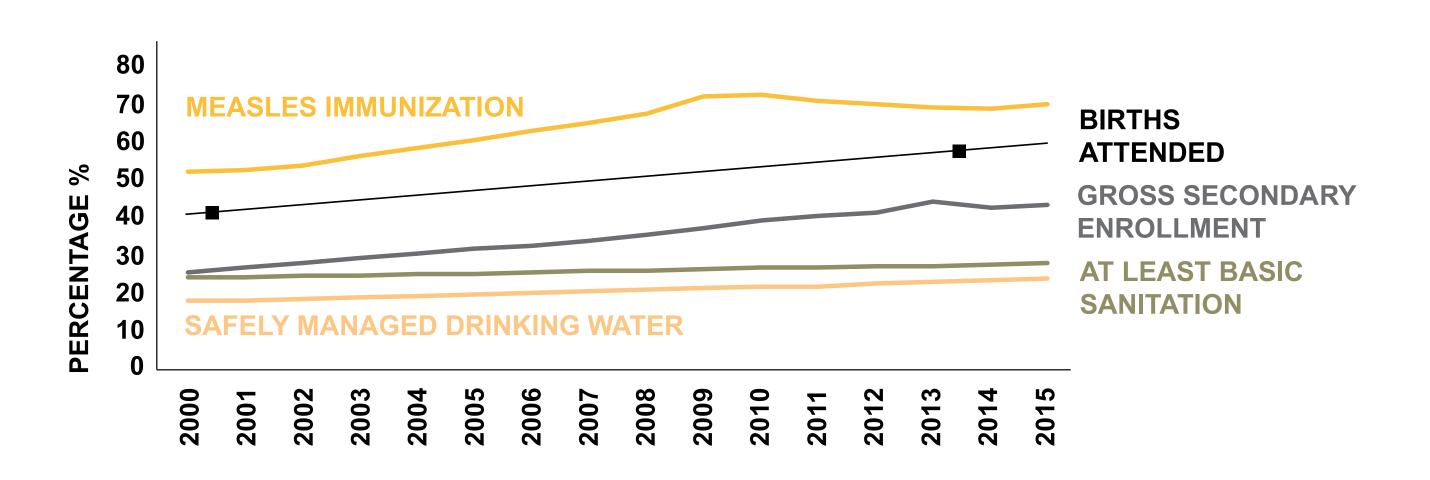
- Fragility, conflict and violence (FCV) increase fatalities and long-term health risks: physical, psychosocial, gender- based violence.
- FCV hinders the delivery of public services, weakens citizens' trust to engage, damages infrastructure.
- Toxic stress disrupts young children's brain, heart and immune system development.
- · Security spending crowds out social spending.
- Displacement depletes human capital.

FRAGILITY AND EXTREME POVERTY CO-CONSPIRE
TO DRIVE DOWN HUMAN CAPITAL - BY 2030, HALF
OF THE WORLD'S EXTREME POOR WILL LIVE IN
FCV COUNTRIES

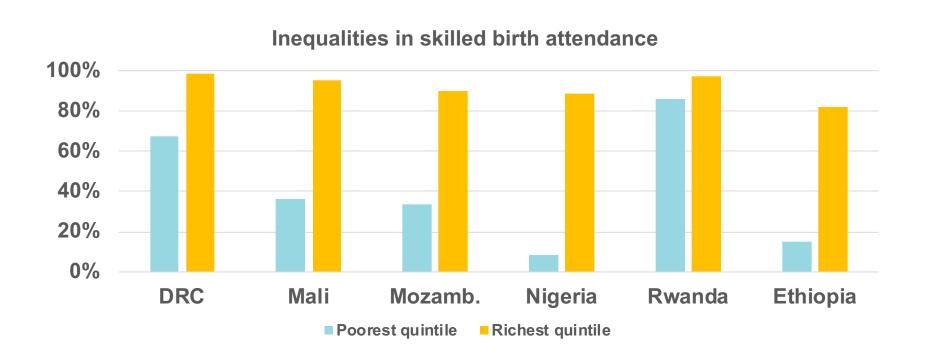


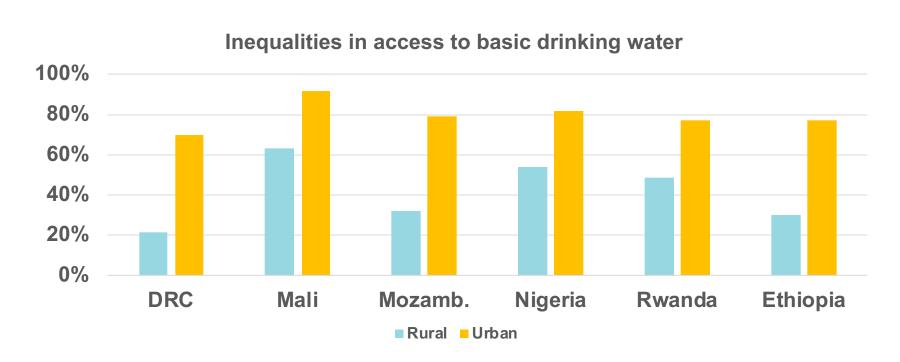


## PROGRESS MADE IN SERVICE COVERAGE IN SUB-SAHARAN AFRICA, BUT LARGE GAPS REMAIN



## THE POOR ARE PARTICULARLY DISADVANTAGED



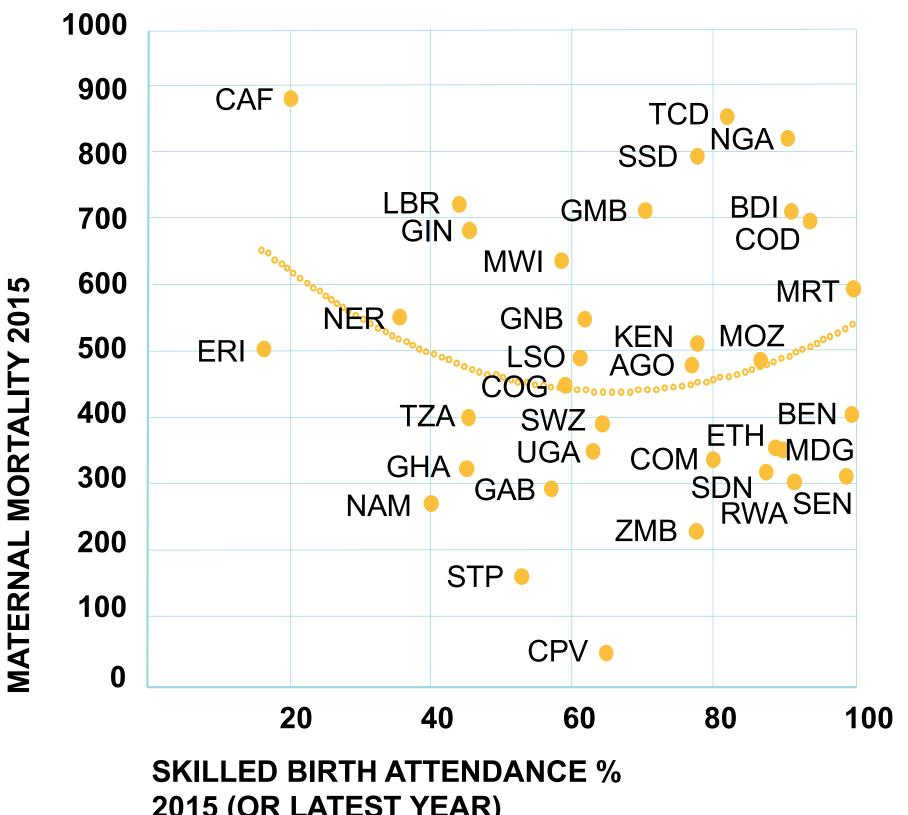


## BEYOND ACCESS, SERVICE QUALITY IS A CRITICAL CONSTRAINT

- Poor state of service delivery network. Infrastructure in disrepair, lack of water, electricity and sanitary facilities.
- Low availability of key inputs and resources that contribute to the functioning of schools and health facilities compared to other regions.
- Poor performance of teachers and health workers in some settings to deliver strong outcomes.
  - In Ghana, Mali and Niger, more than half of schooling time is not translated into learning.
- Weak systems and accountability for delivering essential services.

**COVERAGE OF SKILLED BIRTH** ATTENDANCE DOES NOT ALWAYS TRANSLATE INTO LOWER MATERNAL MORTALITY DUE TO **WEAK CAPACITY OF FACILITIES** TO MANAGE COMPLICATIONS.





## DRIVERS OF HUMAN CAPITAL OUTCOMES ARE COMPLEX



CHALLENGES ACROSS SECTORS IMPACT ON HUMAN CAPITAL IN DIFFERENT WAYS: DIRECT IMPACTS, ENABLING SERVICE DELIVERY, PROMOTING INCLUSION AND EQUITY, AND PROVIDING FOUNDATIONS FOR PROGRESS

#### **SECTORS**

#### **HEALTH AND EDUCATION SERVICES**

Lack of access and poor quality of services directly impact on human capital outcomes.

#### **TRANSPORT**

Poor transport connectivity limits access to essential services and supply of essential inputs to schools and health facilities. Road accidents are a major cause of death and disability.

#### **AGRICULTURE**

Impacts on food availability, diversity and quality, which in turn impacts on households' incomes, food security and diet.

### INFRASTRUCTURE AND CONNECTIVITY

Lack of adequate infrastructure limits access to services; lack of connectivity impedes technological solutions.

#### **WATER AND SANITATION**

Lack of access to clean water and improved sanitation has direct impacts on morbidity, nutritional outcomes and mortality. Water is also a key driver of agricultural productivity.

#### **ENERGY**

Lack of energy undermines service delivery in schools and health facilities, and limits access to water for irrigation and drinking.

#### **SOCIAL PROTECTION**

A lack of safety nets increases poverty and vulnerability, resulting in inequality in access and of outcomes, and increased risks that shocks will have long-lasting impacts.

#### **FOUNDATIONS**

#### **GOVERNANCE**

Governance arrangements are critical for resource mobilization, effective management of financial and human resources, accountability for performance, and policy coordination – hence, impacts on efficiency and effectiveness of public spending to improve human capital outcomes.

#### **ENVIRONMENT AND CLIMATE**

Air, water and soil pollution create health risks. Climate change likely to result in an increased risk of water and vector borne disease, and of disease outbreaks.

#### MACROECONOMIC CONTEXT

Macroeconomic conditions, instability and shocks undermine the economic security of households and government capacity to invest in human capital.

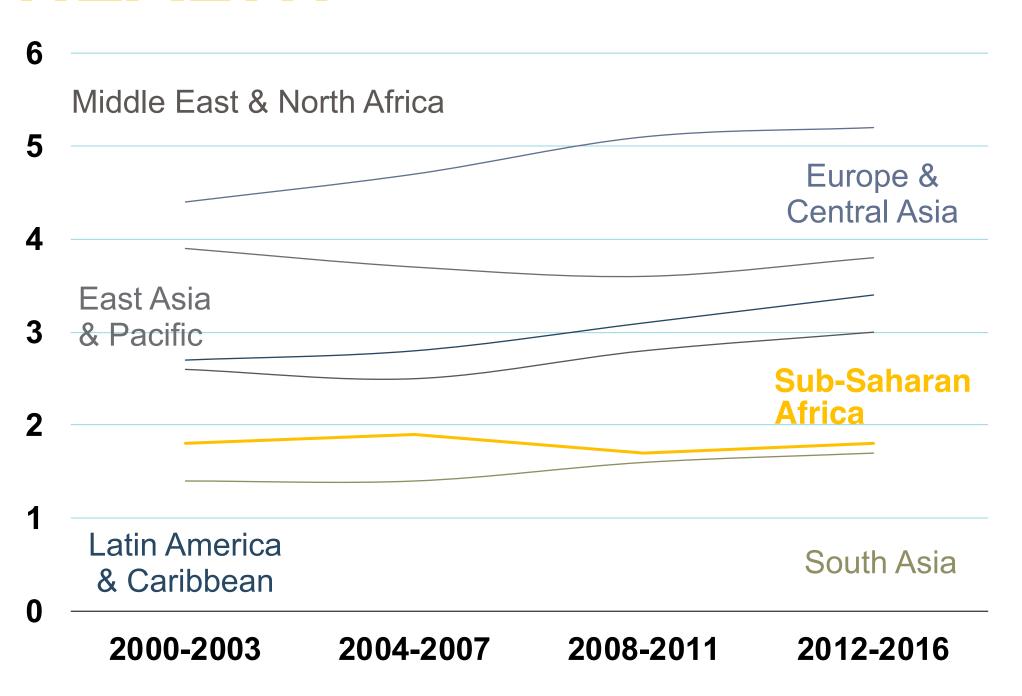
## EXCLUSION, DISCRIMINATION AND DISPLACEMENT

These are major causes of deprivation and inequalities in service access and human capital outcomes.

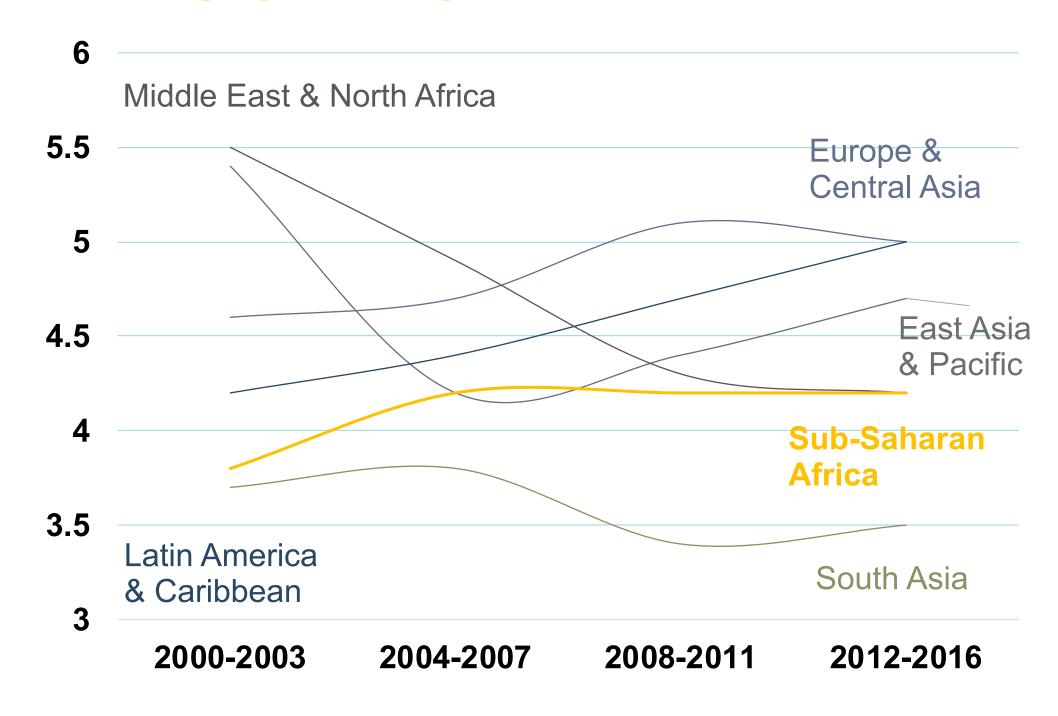


## GOVERNMENT SPENDING ON HEALTH AND EDUCATION IS LOW AND STAGNANT

### HEALTH



### **EDUCATION**



**GOVERNMENT SPENDING IN AFRICA (DOMESTICALLY FINANCED, % OF GDP)** 





## AHUMANCAPIAL AGENDA FOR AFRICA

## AFRICA IS COMMITTED TO THE HUMAN CAPITAL AGENDA



## THROUGH AGENDA 2063, THE AFRICAN UNION PUTS A STRONG FOCUS ON HUMAN CAPITAL

ASPIRATION 1: A high standard of living, quality of life and well being for all citizens.

ASPIRATION 6: An Africa whose development is people driven, relying on the potential offered by African people, especially its women and youth, and caring for children.

Regional sector strategies and accords set out ambitious agendas to transform the region.

Regional commitments are mirrored by country leadership.

Several countries are launching ambitious programs to accelerate progress on the Human Capital agenda.

22 African countries have joined the Human Capital Project. 7 countries have already developed HC acceleration plans.

The WBG is aligning support to regional and country human capital priorities.

#### **KENYA: THE BIG 4**

The Government of Kenya has introduced a flagship 'Big 4' policy agenda for: universal health coverage, food security, access to housing and strengthening manufacturing. A new presidential task force will mainstream human capital within the 'Big 4'.

The World Bank will finance quick wins and high-impact human capital interventions to support the 'Big 4' agenda.

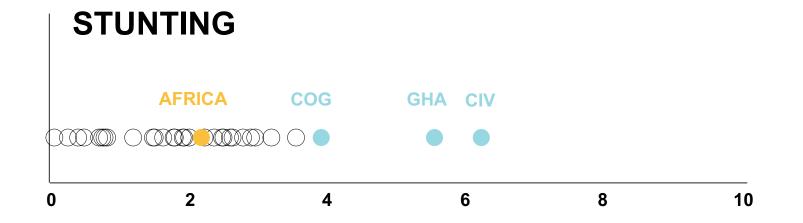
#### **NIGERIA: INVESTING IN OUR PEOPLE**

On December 14, 2018, the Vice President launched Nigeria's Human Capital Development Vision 2030. The vision includes a set of prioritized policy and programmatic actions and ambitious stretch targets.

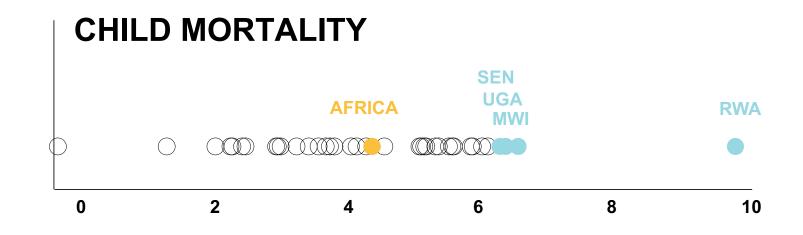
The World Bank, as an active member of the Human Capital Working Group, will support the operationalization of the Government's HC vision though financing and analytical work at the national and state levels.

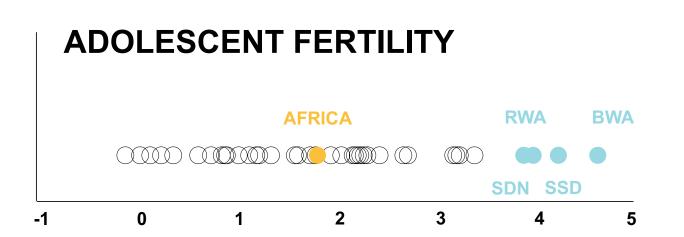
## RAPID PROGRESS IN IMPROVING HUMAN CAPITAL OUTCOMES IS POSSIBLE

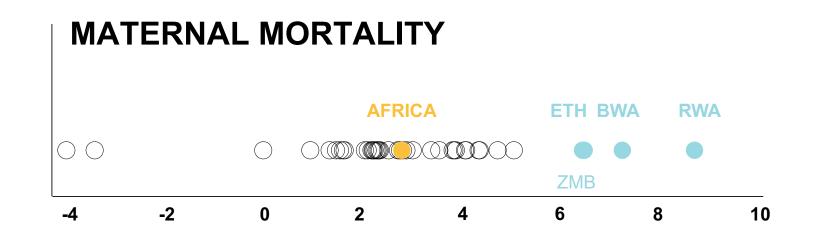


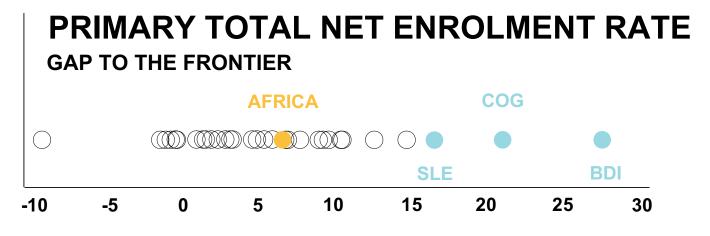


ANNUAL PERCENTAGE
REDUCTION BETWEEN
2000-2017









## REGIONAL EXPERIENCE SHOWS THAT RAPID PROGRESS IS POSSIBLE

- Côte d'Ivoire reduced stunting by more than 6% a year.
- Rwanda reduced child mortality by nearly 10% and maternal mortality by almost 9% a year.
- Botswana reduced adolescent fertility rate by more than 4% a year.
- In terms of primary Total Net Enrolment Rate, Burundi reduced its gap to the frontier by 28% a year.

## SOME COMMON DRIVERS OF PROGRESS

#### STRONG GOVERNANCE

- Commitment and leadership at the highest levels.
- Monitoring and Evaluation and focus on results.
- Evidence-based scale-up.
- Accountability.

#### **QUALITY OF SERVICE DELIVERY MECHANISMS**

- Leverage capacity across public and private sector, and at community level.
- Policy and regulatory reform to address bottlenecks and improve efficiency.
- Use disruptive technologies to address longstanding challenges.
- Focus on frontline and 'leave no one behind'.

#### FINANCING FOR SCALE-UP

- Expand domestic budgets to enable scale-up.
- Increase allocation and efficiency of spending on human capital.
- Align development assistance with priorities and government systems.

#### WHOLE-OF-SOCIETY APPROACH

- Coordinated action across ministries and agencies.
- A role for the private sector, traditional and faith leaders, civil society.



## WHAT DOES IT TAKE TO MAKE PROGRESS ON HUMAN CAPITAL INDEX OUTCOMES?



#### **CHILD SURVIVAL**

**Expansion of key interventions:** 

- family planning.
- care of preterm births.
- treatment of pneumonia, diarrhea, malaria, neonatal sepsis, etc.
- management of severe acute malnutrition.

Investment in frontline delivery platforms.

- Most interventions can be delivered at community and primary level.
- Primary and community services can reduce 75% of maternal, newborn, and child deaths.

Reduce financial barriers to access services.

#### **STUNTING**

- Progress requires strong community platforms for multi-sectoral action.
- Health system: Quality nutrition services and primary health care.
- Safe water and improved sanitation.
- Agriculture: Safe, nutritious diverse and affordable foods.
- Education: Educated and empowered women; early childhood education.

#### **ADULT SURVIVAL**

- Complex causes, requiring multifaceted response:
- HIV/AIDS and TB.
- · Maternal deaths.
- Road accidents.
- Violence and conflict.
- Heart disease, diabetes and cancers.
- Expanding diagnosis, management and treatment of disease through strong health system.
- Mothers deliver in facilities with capacity to manage complications.
- Primary prevention: smoking, diet, road safety, sexual and reproductive health rights.

## ENROLLMENT AND LEARNING

- Reform teaching and teachers' career.
- Reduce financial and other demandside barriers to access (e.g. cash transfers).
- Put in place well-designed student assessments to help teachers, improve management and focus attention on learning.
- Expand support to early stimulation and early childhood education.
- Invest in technologies to drive increased learning outcomes.
- Make schools safe and welcoming spaces for girls.
- Partner with industry to ensure demand-driven skills training.

## IMPROVING HUMAN CAPITAL IS EVERYONE'S BUSINESS



#### **MACROECONOMIC ENVIRONMENT**

Supporting better public spending, improved allocation of resources and tax policy conducive to investments in human capital, as well as reducing informality.

#### **SOCIAL DEVELOPMENT**

Addressing gender gaps, strengthening local capacity to deliver social services, and supporting displaced communities to increase human capital.

#### **GOVERNANCE, INSTITUTIONS**

Improving public financial management, administration, and accountability to improve fund flows to schools and health centers, institutional performance and availability of inputs.

#### **SOCIAL PROTECTION AND JOBS**

Providing social assistance, insurance, skills training, information, and nudges to invest in human capital.

#### **WATER AND SANITATION**

Improving availability of safely managed drinking water, handwashing facilities and promoting behavioral change for better sanitation.













#### **ENERGY**

Increasing electricity access, promoting efficient appliances and productive uses for human capital development.



#### **TRANSPORT AND ICT**

Improving connectivity, addressing gender gaps in mobility, and increasing access to health facilities, schools, and information.



#### **EDUCATION**

Reforming teaching and teachers' career, management of education systems; investing in technology; and developing digital skills.



#### **AGRICULTURE**

Developing agricultural interventions to improve quality, availability and affordability of food and create income sources.



#### **HEALTH**

Developing interventions to reduce communicable and non-communicable diseases and decrease stunting and mortality rates.



## HARNESSING THE POTENTIAL OF AFRICA'S YOUTH



BETTER OPPORTUNITIES FOR PRODUCTIVE EMPLOYMENT CREATE INCENTIVES FOR INCREASED INVESTMENT IN HUMAN CAPITAL

To help economies generate enough productive, good quality jobs to absorb the increasing working age population:

#### **ENHANCE SKILLS AND EMPLOYABILITY**

Workplace learning for better market fit and employability skills; apprenticeships and internships to support job entry; leveraging industry know-how in training curriculum.

#### **CONNECT WORKERS TO JOBS**

Build digital skills now to compete in tomorrow's economy; use digital solutions to connect workers to jobs, firms, training, information and factor and output markets.

#### **CREATE MORE AND BETTER JOBS**

Foster an enabling business environment for wage jobs in firms of all sizes as well as productive, remunerative entrepreneurship activities.

### BOOST LABOR MARKET PARTICIPATION, ESPECIALLY FOR WOMEN

Tailor programs and services to enable the successful labor market participation of youth, particularly the poor, women, and other disadvantaged groups. TO BE EMPLOYABLE AND
PRODUCTIVE, A BROAD RANGE OF
SKILLS ARE NEEDED: TECHNICAL, ICT,
SOFT SKILLS, WORK ATTITUDES

## KENYA YOUTH EMPOWERMENT PROJECT:

Technical and life-skills training, with internships in formal and informal firms for more than 13,000 youth.

#### **RESULTS:**

- 80% of male and 50% of female participants were employed 14 months after completing their internships.
- Significantly higher employment and earnings than the control group.

## IMPROVING HUMAN CAPITAL OUTCOMES REQUIRES MORE AND BETTER SPENDING



### LOWER INCOME COUNTRIES NEED TO SIGNIFICANTLY INCREASE SPENDING TO ACHIEVE SDGS

- Increase in spending of 15 percentage points of GDP on average required to achieve SDGs (health education, roads, energy and water), even with efficiency gains (compared to current spending of 4.9% of GDP on average) (IMF, 2019).
- Role of government in financing critical equity and public goods.

### MORE DOMESTIC REVENUES ARE CRITICAL, BUT WILL NOT BE ENOUGH

- Tax revenues can increase through better tax policy and administration.
- Even with tax increase, only 1/3 of SDG-related investments in Lower Income Countries can be financed from domestic revenues (IMF, 2019).

#### INCREASED EFFICIENCY IN PUBLIC SPENDING IS POSSIBLE

 Between 20 and 40% of health spending wasted due to poor human resource management, inappropriate use of medicines, poor quality of care, corruption and other causes (Chisholm and Evans, 2010).

### DEVELOPMENT ASSISTANCE WILL REMAIN IMPORTANT IN LOWER INCOME COUNTRIES

• Currently, few OECD Development Assistance Committee countries meet 0.7% of GNI for development assistance.

## FINANCING FOR DEVELOPMENT

#### ADDIS ABABA ACTION AGENDA

- A new social compact to provide social protection and essential public services for all.
- A global infrastructure forum to bridge the infrastructure gap.
- Commitment to focus development assistance on the poorest countries.
- Enhanced international tax cooperation to assist in raising resources domestically.
- Mainstreaming women's empowerment.





## HOW WILL THE WORLD BANK GROUP SUPPORT THE HUMAN CAPITAL AGENDAIN AFRICA?

## WHY AN AFRICA HUMAN CAPITAL PLAN FOR THE WORLD BANK?





#### **GUIDE STEPPED-UP EFFORT**

BASED ON CLEAR PRIORITIES AND GAME CHANGERS



#### **MOBILIZE AND ENGAGE**

GALVANIZING A WHOLE-OF-WORLD BANK APPROACH AND RALLYING PARTNERS



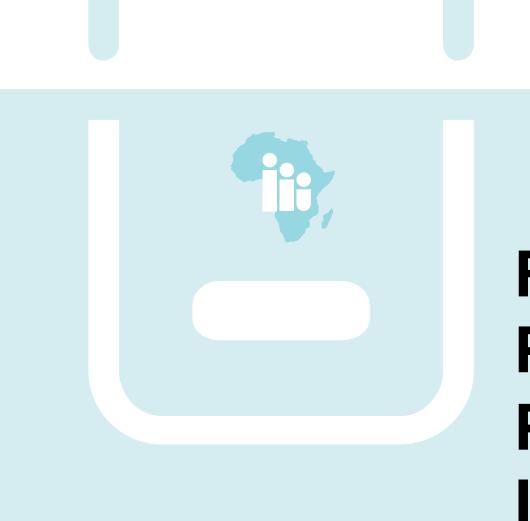
#### **AIM HIGH**

TARGETING
AMBITIOUS GOALS



#### TRACK PROGRESS

INCENTIVIZING ACTION AND ACCOUNTABILITY



RESHAPE
PORTFOLIO TO
PRIORITIZE
IMPACTFUL HUMAN
CAPITAL PROJECTS

## AFRICA HUMAN CAPITAL TARGETS FOR 2023: AIMING HIGH



#### **SURVIVAL**

• Reduce the under-5 mortality rate from 75 to 45 per 1,000 live births, saving approximately 4 million lives by 2023.

#### **HEALTH**

• Reduce the stunting rate from 32% to 26%, saving more than 10.9 million children from stunting by 2023.

#### **EDUCATION**

• Increase learning-adjusted years of school from 4.94 to 5.88, a 20% increase.

#### **SOCIAL PROTECTION**

 Increase social protection coverage of the poorest quintile in Low Income Countries from 20 to 30%, adding coverage for 13.1 million people by 2023.

#### **FERTILITY**

• Reduce the births per 1,000 adolescent women (15-19 years) from 101 to 83.

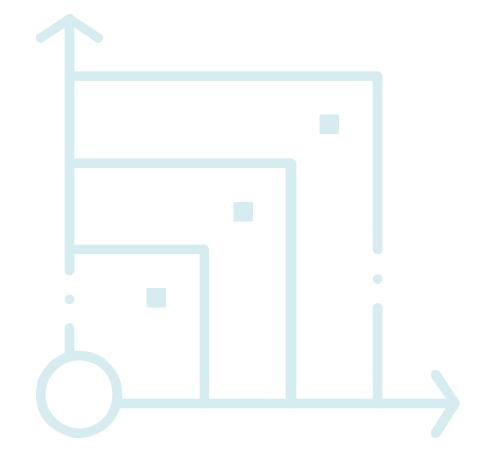
#### **WATER AND SANITATION**

• Reduce open defecation from 22.9% (2015) to 15%.

INCREASE HUMAN CAPITAL INDEX FROM 0.40 TO 0.45

AND THE FUTURE PRODUCTIVITY OF CHILDREN BORN TODAY BY 13%

### GAME CHANGERS



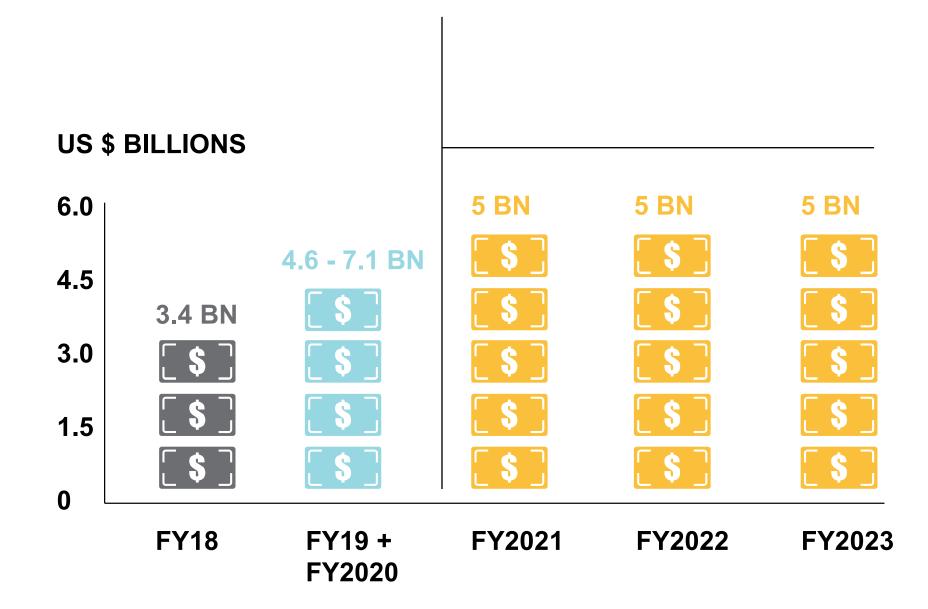
SCALING UP
WORLD BANK
FINANCING FOR
HUMAN CAPITAL
RESULTS





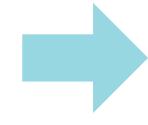
# MORE AND BETTER WORLD BANK INVESTMENT IN HEALTH, EDUCATION AND SOCIAL PROTECTION

WORLD BANK FINANCING FOR HEALTH, EDUCATION AND SOCIAL PROTECTION WILL INCREASE AND REACH US\$ 15 BILLION OVER FY21-23



INCREASE SHARE OF IDA CORE CONCESSIONAL COUNTRY ALLOCATIONS FOR HEALTH, EDUCATION AND SOCIAL PROTECTION AND JOBS

28%



45%

**Current average** 

In 2023

considering that nonconcessional financing is predominantly for other sectors.

#### INCREASE PROJECT SIZE FOR COVERAGE AND IMPACT

- Increased average project size.
- Regional human capital operations e.g. on disease control, higher education.

## REVIEW AND RESTRUCTURE FOR BETTER RESULTS

 Proactive and systematic portfolio reviews to identify opportunities to accelerate results.





**AGRICULTURE** 

IMPROVING HUMAN CAPITAL OUTCOMES REQUIRES THAT ALL WBG GLOBAL PRACTICES (GPS) AND TEAMS ADJUST THEIR PORTFOLIO AND APPROACH

#### WHAT WILL IT TAKE TO DO MORE "HUMAN CAPITAL SENSITIVE" PROJECTS?

- Clear theories of change how different sectors contribute to human capital.
- Explicit filters to assess new projects and monitor progress in expanding Human Capital investments:
  - e.g. the World Banks's Agriculture GP developed a framework to assess if projects not only improve food production but also enhance nutrition and health.
- Sector-specific targets to incentivize and hold different World Bank Group teams accountable for their contributions to Human Capital acceleration e.g.:
  - Transport: 50% of World Bank rural roads interventions are to improve accessibility to schools and/or health centers.
  - Water: an increase in the number of World Bank projects providing schools and/or health care facilities with basic water, sanitation and hygiene.
  - IFC: a minimum of three coordinated World Bank Group initiatives to advance Human Capital that benefit from IFC investments and/or advisory work, modeled on the Health and Kenya initiative.

FRAGILITY, CONFLICT
AND VIOLENCE

MACRO TRADE,
INVESTMENT

SOCIAL, URBAN,
RURAL AND
RESILIENCE

TRANSPORT

HUMAN
CAPITAL

POVERTY

**INFRASTRUCTURE** 

**DIGITAL** 

IFC

**ENVIRONMENT** 

# EXPANDING SUPPORT TO HUMAN CAPITAL ACROSS THE WORLD BANK GROUP: BUILDING ON STRONG FOUNDATIONS



THE EXPANSION OF HUMAN CAPITAL SENSITIVE PROJECTS WILL BUILD ON RICH EXPERIENCES ACROSS THE WORLD BANK GROUP

#### THE IFC-WB HEALTH IN AFRICA INITIATIVE IN KENYA

IFC and the WB joined forces in Kenya to support regulatory reform and to mobilize private sector investment in the health sector. Some achievements under the initiative include a reformed health insurance scheme with increased coverage of low-income families (2.8 million new patients covered) and US\$ 242 million new investments in hospitals and pharma retail outlets.

#### DAKAR BUS RAPID TRANSIT PILOT PROJECT

This WB project (US\$ 300 million) finances an 18-km long Bus Rapid Transit (BRT) line crossing Dakar. The BRT will significantly improve accessibility to health services and education opportunities: 60% of Dakar's residents will be able to reach at least one additional health center within 30 minutes; 59% at least one additional secondary school, and 47% at least one additional college or university. The project will also significantly increase people's ability to reach employment opportunities, particularly for the city's poor.

#### **GHANA SANITATION AND WATER PROJECT**

This project demonstrates the importance of water and sanitation for education, via its impact on school sanitation and menstrual hygiene. With US\$ 24 million of WB financing, the project will ensure new and rehabilitated facilities in 200 schools and improved hygiene management reaching 150,000 students.

#### COTE D'IVOIRE AGRICULTURE SECTOR SUPPORT PROJECT

This project, supported with US\$ 50 million WB financing, improved smallholder farmers' access to technologies and markets and enhanced the governance of selected value chains. Interventions under the project, notably the delivery of subsidized animal traction equipment to cotton producers, increased smallholders' cotton production but also led to a significant improvement in child health and a modest increase in entrepreneurship by women in the household, likely because of the time-savings benefits incurred as a result of the intervention. The project also contributed to the food security of the project beneficiaries and to income diversification.





#### FROM INVESTMENT FINANCING TO SYSTEMIC REFORM

Improvements in Human Capital outcomes are often undermined by policy and institutional bottlenecks - e.g.

- Weak public financial management and budget transparency.
- Ineffective deployment and management of teachers and health workers.
- Lack of quality standards.
- Weak regulatory regimes for private sector service providers.

#### **HOW CAN THE WB SUPPORT SYSTEMIC REFORM?**

- Development Policy Operations (DPOs) helps clients achieve results through a program of policy and institutional actions.
- Program for Results Financing (PforR) disburses based on achievement of government program results.

Share of policy and results-based lending in Africa has increased by

13% in FY13 to 40% in FY18.

#### LOOKING AHEAD, THE WORLD BANK GROUP WILL...

- Increase the share of DPOs that support the Human Capital agenda.
- Expand use of PforRs to address sectoral bottlenecks.







COMPLEMENTARITY BETWEEN DEVELOPMENT POLICY AND INVESTMENT OPERATIONS TO SUPPORT EDUCATION REFORM IN MAURITANIA

MAURITANIA FIRST COMPETITION AND SKILLS DPO (EXPECTED DELIVERY JUNE 2019);

- (UNDER PREPARATION)

MAURITANIA EDUCATION SECTOR SUPPORT PROJECT

#### **AREAS OF DPO SUPPORT**

- · The reduction of teacher absenteeism.
- Regular and comprehensive assessment of teachers.
- Performance-based contracting with the teacher training institutes.

#### COMPLEMENTARY INVESTMENT PROJECT SUPPORT

- Deployment of management information system to provide real-time data.
- Enhancing the quality of new and existing teachers through effective in-service training.
- Provision of technical assistance to conduct teacher evaluation.
- Provision of capacity-building to design and implement performance-based contracts to teacher training institutes.

TWO PforR OPERATIONS IN MOZAMBIQUE THAT STRENGTHEN THE HEALTH SYSTEM THROUGH GOVERNANCE REFORMS

THE PUBLIC FINANCIAL MANAGEMENT FOR RESULTS (PFMforR, 2014-2019, US\$ 50M) AND PRIMARY HEALTH CARE STRENGTHENING PforRS (PHCS, 2018-2023, US\$ 253M)

- The PFMforR addressed key system bottlenecks to ensuring availability of medicines in health facilities. The project focused on challenges across the supply chain, from logistics information systems, warehouse standards, and stockouts, to end user availability at health facilities. It also helped change the way central and local managers identified and resolved problems through coaching, rapid results Initiatives, and strengthening of audit bodies.
- The new PHCS PforR, which is co-led by the HNP and Governance Global Practices and co-financed by five other partners, incentivizes results across the primary care system. This includes geographic equity in financing and human resources, strengthening community health workers, and improved coverage (e.g. institutional deliveries and nutrition in disadvantaged areas). The PHCSP will also support better planning, budgeting and procurement through a mix of results-based financing and technical assistance.
- Overall, the project challenges the Ministry of Health to work differently with the Ministries of Finance, Justice, Education, and Environment.

### GAME CHANGERS



## ADVOCACY AND KNOWLEDGE



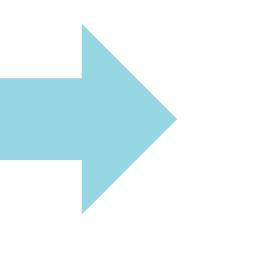
## EXPANDING ANALYTIC AND ADVISORY WORK



SUPPORT TO COUNTRIES
TO DEVELOP PRIORITIZED
HUMAN CAPITAL PLANS

**AND** 

MORE ANALYTIC WORK ON HUMAN CAPITAL IN COUNTRY PROGRAMS



MORE

**HUMAN** 

CAPITAL

KNOWLEDGE

#### **HUMAN CAPITAL INDEX**

Filling in gaps and disaggregating data by region, wealth quintile, and gender.

#### SERVICE DELIVERY INDICATORS

Expansion to more countries, engagement on results.

#### **IMPACT EVALUATIONS**

To assess what works in improving Human Capital.

#### **POLICY AND INSTITUTIONAL ANALYSIS**

Understanding policy space and political incentives, institutional bottlenecks, and accountability arrangements.

#### **HUMAN CAPITAL IN CORE BANK PRODUCTS**

Human Capital will feature in products such as Country Economic Memorandums and Economic Updates.

#### PUBLIC FINANCE-EXPENDITURE REVIEWS

To increase domestic revenues and improve equity and efficiency of expenditures.

## AN ADVOCACY AGENDA TO PROMOTE HUMAN CAPITAL









#### HIGH-LEVEL ENGAGEMENT WITH GOVERNMENTS

- Heads of state meetings e.g. Sierra Leone, Rwanda.
- Cabinet retreats/Finance Ministry events e.g. Angola, Lesotho, Tanzania, Botswana.
- Spring and Annual Meetings events, regional summits.

#### **OUTREACH TO CIVIL SOCIETY AND MEDIA**

- Africa VP outreach to CSOs and parliamentarians, e.g. first session from Ghana to focus on women's empowerment.
- Engagement and training with media.

#### **HUMAN CAPITAL CHAMPIONS**

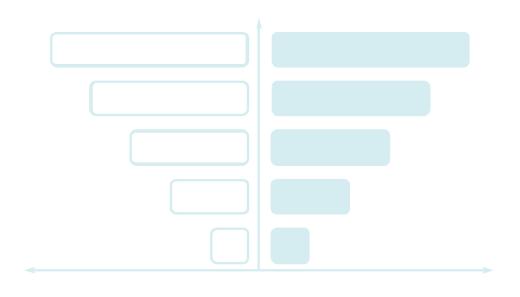
• Three Human Capital Champions are from Africa.

#### **HOW WILL WE MEASURE PROGRESS?**

- Number of partnerships or coalitions supported by the World Bank around the Human Capital agenda in Africa.
- Number of African Human Capital Champions and influencers.
- Level of online engagement (social media and web) on Africa Human Capital Plan communications products.



### GAME CHANGERS



TACKLING CRITICAL HUMAN CAPITAL CHALLENGES: DEMOGRAPHIC CHANGE



# A FRAMEWORK FOR WORLD BANK SUPPORT FOR DEMOGRAPHIC CHANGE



KEEP GIRLS IN SCHOOL AND INCREASE FEMALE EDUCATION

REDUCE CHILD MARRIAGE

ADDRESS SOCIAL NORMS ON FERTILITY

IMPROVE ACCESS TO SEXUAL AND REPRODUCTIVE HEALTHCARE, INCLUDING FOR FAMILY PLANNING PROGRAMS

REDUCE CHILD MORTALITY AND MALNUTRITION

PROMOTE GENDER EQUITY AND FEMALE EMPLOYMENT

**EMPOWER** 

ENHANCE
HEALTH SERVICES

**EMPLOY** 

**EDUCATE** 

4 E'S TO
PROMOTE
WOMEN'S
AGENCY

Interventions should include boys and men who are central to reproductive decisions, leverage families, and mobilize community and religious leaders as agents of change.

## SUSTAINED WORLD BANK SUPPORT TO ACCELERATE DEMOGRAPHIC TRANSITION



#### FOCUSED EFFORT

On adolescents in countries and subnational hotspots with high population growth and fertility rates over 4 births per woman.

### **ANALYTICS**

- Improving date and analysis of demographic trends.
- Building evidence of what works through the World Bank's Africa gender lab.
- Web-based tool to help countries identify the best investments to achieve the demographic dividend.

#### **OPERATIONS**

A new regional program to support a series of national and regional projects grounded in the 4E framework.

#### **PARTNERSHIPS**

Reinforcing partnerships and seeking out the bank's comparative advantages: convening capacity, multisectoral expertise, ability to support long term planning.

BUILDING ON SUCCESS: THE SAHEL WOMEN'S EMPOWERMENT AND DEMOGRAPHIC DIVIDEND PROJECT (SWEDD) IS A REGIONAL, MULTISECTOR PROJECT.

DESIGNED ON THE INITIATIVE OF 7
AFRICAN PRESIDENTS AND
IMPLEMENTED IN PARTNERSHIP WITH
UNFPA, IT INVESTS US\$ 295 MILLION
OF WORLD BANK FINANCING IN THE
SOCIAL AND ECONOMIC
EMPOWERMENT OF ADOLESCENT
GIRLS AND THEIR ENABLING
ENVIRONMENT, TO EXPEDITE THE
FERTILITY TRANSITION IN THE SAHEL

## A NEW REGIONAL PROGRAM TO SUPPORT 4E OPERATIONS



- A SERIES OF OPERATIONS ACROSS THE REGION TO SUPPORT DEMOGRAPHIC TRANSITION VIA A MULTISECTOR OR PORTFOLIO APPROACH
- SUPPORTED BY A REGIONAL PLATFORM TO DEVISE PROTOTYPE PROJECTS, DEVELOP TOOLS, SHARE LESSONS, EVALUATE IMPACT

#### BASED ON ENHANCED APPROACHES BY WORLD BANK GLOBAL PRACTICES:

#### **HEALTH AND NUTRITION**

Front-line financing of primary and community health and nutrition; quality and equity in family planning; campaigns to change behaviors and social norms regarding adolescents' access to services, girls' empowerment, and women's health.

#### **EDUCATION**

Keeping girls in school by addressing social, logistical and cost barriers, including via financial or in-kind incentives.

## SOCIAL PROTECTION AND JOBS

Safety nets and empowerment activities; social registries and IDs to reach the most vulnerable; youth employment and skills; incentives to keep girls in school.

#### **AND MORE**

With supporting interventions by Infrastructure; Water; Agriculture; Finance, Competitiveness and Innovation.

HARNESSING THE DEMOGRAPHIC
DIVIDEND IN MOZAMBIQUE THROUGH
CROSS-SECTORAL COLLABORATION

In Mozambique, a program to support the demographic transition is being developed through close collaboration across Global Practices. A new project called Harnessing the Demographic Dividend Project (IDA, US\$ 55 million), co-led by the World Bank's Social Protection and Jobs and Finance, Competitiveness and Innovation teams, aims to increase empowerment, access to education, and employment opportunities for adolescents and youth.

This project complements existing supply-oriented health and education programs by increasing demand for social services in the same districts where the other operations are active.

## GAME CHANGERS



TACKLING
CRITICAL
HUMAN CAPITAL
CHALLENGES:
FRAGILITY



## KEY ACTIONS IN FRAGILE SETTINGS: PRIORITIZING THE MOST VULNERABLE



### **BUILDING RESILIENCE**

## PROTECTING AND ADVANCING HUMAN CAPITAL OF DISPLACED POPULATIONS

- Designing projects to target displaced populations.
- Working with host and refugee communities.
- Looking beyond short-term solutions: jobs and skills.

## A FOCUS ON IMPROVING SERVICE DELIVERY

- Engaging non-state actors.
- Understanding what works in the context of extreme institutional weakness.
- Understanding trade-offs when service delivery is monopolized by violent actors.
- Having a pragmatic approach.
- Using technology and innovations.

# TARGETED EFFORT TO PROTECT HUMAN CAPITAL OF WOMEN AND CHILDREN IN FRAGILE AND CONFLICT SETTINGS

- Addressing Gender-Based Violence.
- Prioritizing the needs of the youngest given their Human Capital vulnerability.

# MITIGATING NEGATIVE EXTERNALITIES OF VIOLENCE ON HUMAN CAPITAL

- Limiting the impact of violence on schools and health facilities.
- Focus on resilience, and psycho-social support.

## FRAGILE SETTINGS: ADDRESSING DRIVERS, STRENGTHENING RESILIENCE



### WHY?

HUMAN CAPITAL CHALLENGES ARE INCREASINGLY CONCENTRATED IN FRAGILE COUNTRIES. ADDRESSING THE DRIVERS OF FRAGILITY AND DEVELOPING RESILIENCE IS ESSENTIAL TO IMPROVING HUMAN CAPITAL OUTCOMES

### WHAT?

INCREASING
HUMAN CAPITAL
INVESTMENTS IN
FCV SETTINGS

FOCUS ON PREVENTION

REMAINING
ENGAGED DURING
CONFLICTS AND
CRISES

HELPING
COUNTRIES
ESCAPE
FRAGILITY TRAPS

MITIGATING
EXTERNALITIES AND
IMPACT OF FCV ON
HUMAN CAPITAL

### WHERE?

Operating at the regional, country, subnational and community levels

### HOW?

#### **PROGRAMMING**

**Designing FCV sensitive Human Capital projects.** 

**Engaging further in areas** such as mental health, GBV.

#### **PEOPLE**

Increasing staff's knowledge and understanding of FCV risk and factors/drivers of FCV, but also resilience factors; better understand impact of forced displacement on Human Capital.

#### **PARTNERSHIPS**

Systematizing partnerships with humanitarian, security and peacebuilding actors as well as the private sector, especially to address service delivery.

#### **PROCESSES**

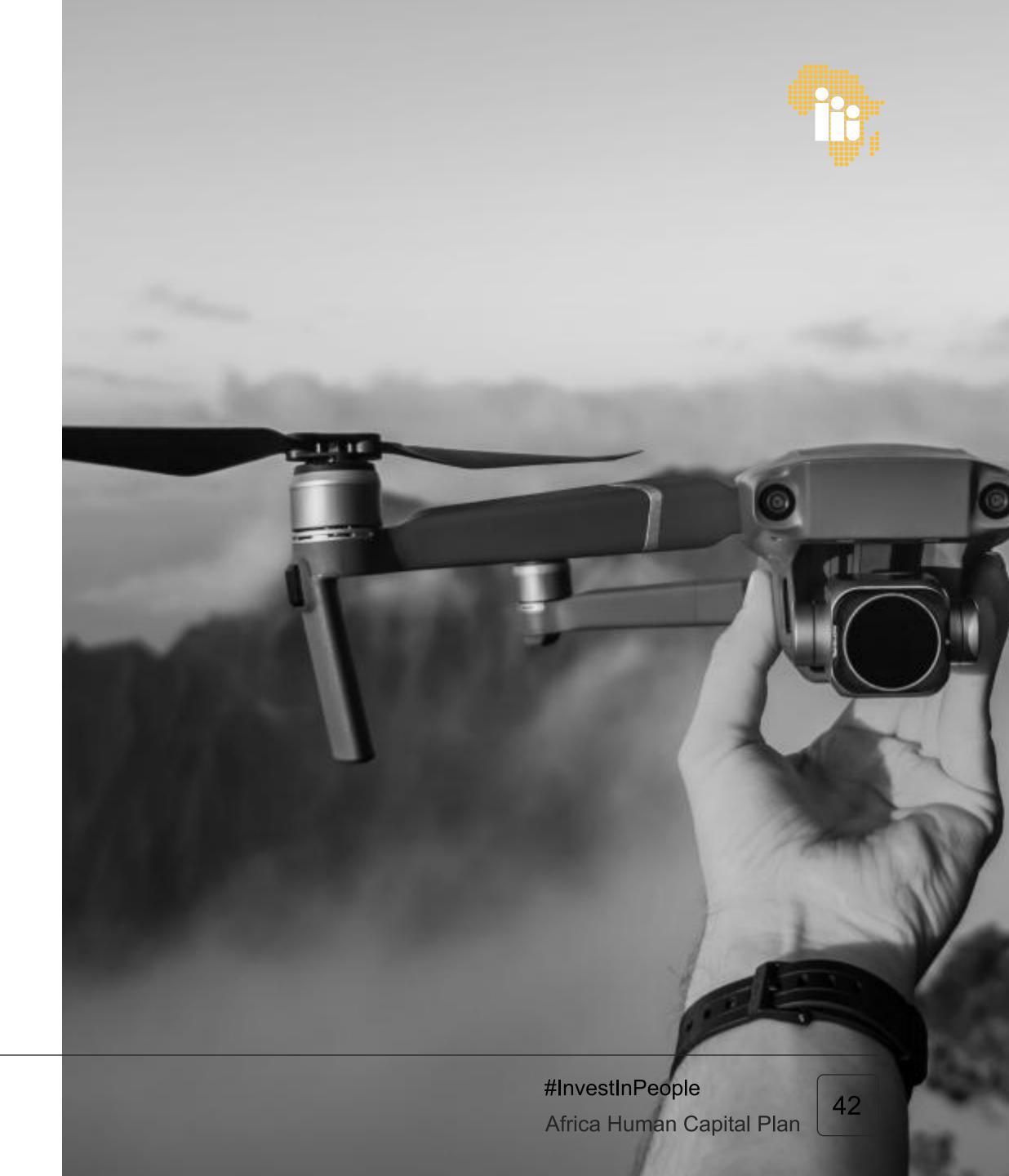
Redefining successes in FCV settings for Human Capital projects; filling the gaps on the research agenda on FCV countries; fostering lessons learned to inform programming; strengthening data; using ICT / smart supervision approaches.

VOLUME OF IBRD/IDA COMMITMENTS FOR HUMAN DEVELOPMENT PROJECTS IN FCV COUNTRIES WILL INCREASE BY 30% -- FROM US\$ 639M TO US\$ 831M

### GAME CHANGERS

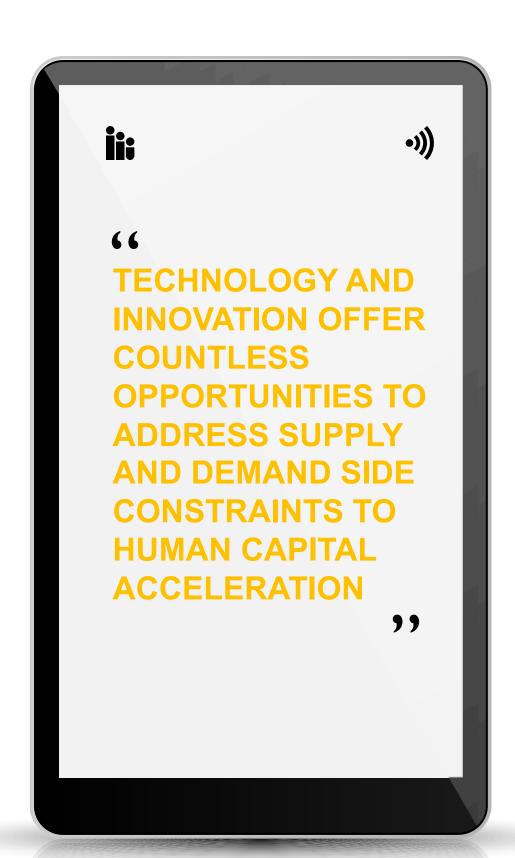


LEVERAGE
TECHNOLOGY AND
INNOVATION IN
SUPPORT OF
HUMAN CAPITAL
OUTCOMES



## THE POTENTIAL OF TECHNOLOGY TO BOOST HUMAN CAPITAL







 Improved access: technologies can increase access to services, for example by using drones to deliver blood to remote areas.



 Improved quality: technologies can increase quality of services, for example by supporting teachers with adaptive learning.



 Higher affordability and efficiency: technologies can reduce the cost of social services, for example by making online tools easily available.



 Better targeting: technologies can help target those who need services the most, by improving registration and enabling geo-referencing, and encouraging people to use social services, for instance through SMS reminders.



• Better management: technology can improve management systems of social services by providing access to systems that measure inputs and outputs.

## LINKING WITH THE DIGITAL MOONSHOT INITIATIVE

- INCREASING DIGITAL SKILLS AND LITERACY THROUGH EDUCATION
- INCREASING ACCESS TO DIGITAL PLATFORMS, INCLUDING IDENTIFICATION AND TECHNOLOGY FOR GOVERNANCE, TO IMPROVE SERVICE DELIVERY
- AUGMENTING DIGITAL INFRASTRUCTURE TO BOOST HUMAN CAPITAL: EVEN SIMPLE TECHNOLOGIES SUCH AS MOBILE PHONES CAN IMPROVE HUMAN CAPITAL

## AN AMBITIOUS APPROACH TO LEVERAGE TECHNOLOGY AND INNOVATIONS



#### **MOVING FORWARD**

#### **SCALING UP**

Increase the portion of investments in human capital that incorporate technological solutions and other innovations, starting with 20 projects in FY20 and reaching 40% of all human capital operations by 2023.

#### **ADVOCACY**

Increase awareness about the role of technology to improve human capital.

#### **ANALYTICS**

Produce success stories and promote evaluations to improve the applications of technological solutions to human capital challenges.

#### **GUIDING PRINCIPLES**

#### PEOPLE AT THE CENTER

Focus on providers and how to improve their ability to deliver services through to a recognition of the central role of people, families, and communities.

#### **PLURALITY**

From top-down vision of the systems to adapting the role of the governments to recognize and harness the actions of diverse actors, including the private sector, CSOs, and others.

#### **CONTEXT-SPECIFICITY**

From one-size-fits-all approach to frontline delivery to tailored and targeted Human Capital Project agenda, backed up by country leadership and ownership.

#### START IN THE MOST CHALLENGING ENVIRONMENTS

Start projects in less advantaged communities, and then expand to more privileged ones, where the projects will more easily work.

#### **MITIGATE RISKS**

Technologies present many risks, including increased inequality and data protection issues. It is important to generate mitigation mechanisms, including social protection for those who might be jeopardized.

#### PRIORITIZE WORK-ENHANCING TECHNOLOGIES

Prioritize technologies that support workers instead of technologies that replace workers.







BEHAVIORAL SCIENCES PROVIDE AN OPPORTUNITY TO MAXIMIZE THE IMPACT OF INVESTMENTS BY FOCUSING ON HOW PEOPLE MAKE DECISIONS, AFFECTING THE DEMAND SIDE, FOR INSTANCE:

- Use behavioral approaches to reduce gender-based violence.
- Design programs to increase reading habits.
- Increase quality and quantity of agricultural outputs for smallholder farmers.
- Use behavioral approaches to reduce gender-based violence.
- Increase quality and quantity of agricultural outputs for smallholder farmers through behavioral interventions and agricultural finance.

#### **SOME INITIAL EXAMPLES:**

- In Ethiopia, 17% of the urban population is unemployed, and one in three is not searching for a job. <a href="mailto:eMBeD">eMBeD</a> is studying the effects of providing idle youth with psychological support on job search and employment outcomes.
- The <u>Behavioral Design for Cash Transfer Programs</u> will bring behavioral innovations to cash transfers in at least 6 countries in the region to enhance the Human Capital impacts, with a focus on early childhood development and women.

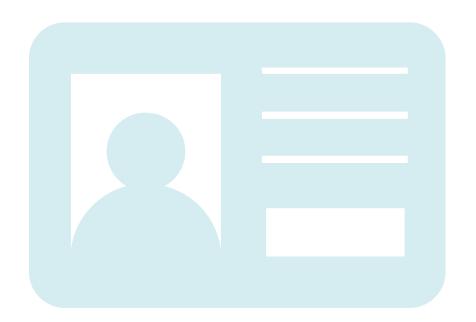
## THE POWER OF INNOVATION: 1940





#### THE CHALLENGE

- The births of 57% of Sub-Saharan African children have never been recorded.
- Without proof of identity, people face major challenges to access basic rights and services (including school enrollment, healthcare, social welfare and financial services).
- Identification is key to effective targeting, monitoring and service delivery.



#### WHAT WILL BE DONE

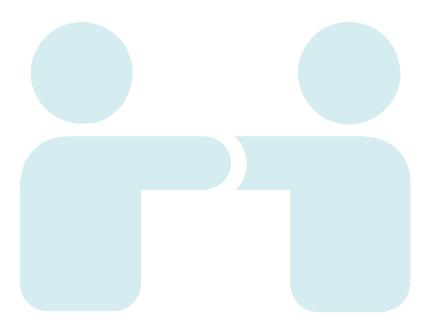
- Using digital and biometric technology and mobile devices to reach scale and lower costs.
- Coupling birth registration with social service delivery.
- Adapting policies and legal and regulatory frameworks.
- Ensuring privacy and data security.
- Financing and building country capacity to design, deploy, and maintain ID systems.
- Global advocacy and coordinated partnerships.

#### **BUILDING ON EXPERIENCE**

- Diagnostic work completed in 15
   African countries.
- West Africa Unique Identification for Regional Integration and Inclusion Project (US\$ 317 million): increasing persons with government-recognized proof of unique identity to facilitate access to services.

THE ID4D AFRICA
BUSINESS PLAN AIMS
TO INCREASE ACCESS
TO IDENTIFICATION FOR
150 MILLION PEOPLE

## GAME CHANGERS



## MAKING COUNTRY TEAMS STRONGER AND LEVERAGING PARTNERSHIPS



# EXPANDING COLLABORATION ACROSS WORLD BANK GROUP GLOBAL PRACTICES AND MAKING COUNTRY TEAMS STRONGER

ADDRESSING COMPLEX HUMAN CAPITAL CHALLENGES REQUIRES COORDINATED ACTION ACROSS SECTORS

**PROJECT FOCUS** 

**>>>** 

PROBLEM AND SOLUTION FOCUS

**GLOBAL PRACTICE SILOS** 

**>>>** 

**CLOSER COLLABORATION AND COORDINATION IN COUNTRY TEAMS** 

#### WHAT WILL IT TAKE?



#### **REGION AND COUNTRY MANAGEMENT UNITS**

- Set expectations: solutions-oriented collaboration.
- Create the right incentives through budgets.

#### **GLOBAL PRACTICES**

- Regional directors in strategic and coordinating role.
- Deepening culture of coordination.

#### **COUNTRY TEAM PROCESSES**

- Internal multi-GP engagement and portfolio workshops.
- Dialogue with client to identify key bottlenecks.

#### WHAT WILL IT LEAD TO?

- Shared, cross-GP understanding of country context and challenges.
- Coordinated dialogue with client.
- More cross-GP collaboration on project design and implementation.
- Greater convergence of project financing:
  - Coordinated interventions to solve complex problems such as stunting and high fertility.
  - Geographic convergence of interventions (e.g. same provinces).
  - Common implementation platforms (e.g. community level).
- Multi-GP analytic work (e.g. Human Capital Public Finance/Expenditure Reviews).





#### ILLUSTRATIONS FROM THREE COUNTRY ENGAGEMENTS

CAMEROON: CROSS SECTORAL
COLLABORATION ON REFUGEE CRISIS TO
SUPPORT REFUGEES AND HOST COMMUNITIES

used the Refugee Sub-Window to develop an integrated approach across five World Bank Global Practices. It supported:

- Access to basic services (ECD: health, education, water, sanitation)
- Food security
- Nutrition
- Livelihoods.

### THE ETHIOPIA ONE WASH PROJECT (IDA, US \$300 MILLION)

This project intends to promote access to improved water and sanitation, along with nutrition-sensitive behaviors such as hand washing and promoting open-defection free communities.

The project also aims to contribute to increased girls' school attendance and learning at target schools through improved latrines, hygiene promotion, and menstrual hygiene management.

The project was designed by 5 World Bank Global Practices (GPs), who decided on a coordinated effort in the most affected parts of the country, while also seeking geographic convergence with other World Bank (e.g. education) projects.

## THE RWANDA STUNTING PREVENTION AND REDUCTION PROGRAM (US\$ 176 MILLION IDA, GFF AND PRIVATE SECTOR POWER OF NUTRITION GRANTS)

This five-year program aims to tackle chronic malnutrition with a focus on children's first 1,000 days. The program will operate in 13 districts with the highest stunting rates and aims for a geographical overlap of interventions under different projects. Its design is based on a One World Bank approach and seeks out synergies and linkages between health, social protection, agriculture and water/sanitation projects.

It supports a community health worker platform and results-based approach to shift focus from treatment to prevention of stunting; mass media and behavior-change campaigns.

In addition, nutrition-sensitive social protection uses targeted cash transfers to the most vulnerable households, as well as gender and child-sensitive public works. Agriculture interventions seek to improve food adequacy and food security.

## CLOSER COORDINATION WITH PARTNERS



## REPLICATING SUCCESSFUL CASES OF COLLABORATION

The Madagascar Improving Nutrition Outcomes using the Multiphase Programmatic Approach Program is a 10-year program with up to US\$ 200M IDA and US\$ 10M financing from The Power of Nutrition. The 10-year time horizon of the program stimulated a high level of interaction with development partners, including:

- Complementary financing with USAID in one overlapping region supported by both the World Bank and USAID to ensure the roll out of a full package of health/nutrition interventions.
- Agreements with UNICEF in several technical areas.
- Coordination with WHO to support facility and community-based HMIS/NMIS reform in coordination with Government subcommittees.
- . Complementary financing with GAVI and Global Fund.

The Government introduced a quarterly coordination meeting between the key development partners.

## THE VALUE OF PARTNERSHIPS ON THE HUMAN CAPITAL PROJECT



- To increase coverage and impact.
- To enable comprehensive solutions.
- To reinforce client dialogue.
- To bring innovative solutions.
- To share knowledge of what works.

#### SOME EXISTING AND PROSPECTIVE PARTNERS











## GLOBAL FINANCING FACILITY: PARTNERSHIP FOR RESULTS





#### HOW THE GLOBAL FINANCING FACILITY WORKS

- Brings partners together around country-led prioritized investment case to end preventable deaths and improve health outcomes for women, children and adolescents.
- Catalyzes financing with modest Trust Fund grants to increase domestic resources alongside IDA/IBRD, aligned external financing and private sector resources.
- Supports multisectoral solutions and financing leading towards Universal Health Coverage.
- Leverages private sector and innovative financing tools.

#### VALUE ADD FOR HUMAN CAPITAL DEVELOPMENT IN AFRICA

- Technical agendas of GFF and Africa Human Capital Plan are aligned around common topics: improving coverage and access to quality reproductive, maternal, newborn, child, and adolescent health and nutrition services, sexual and reproductive health and rights, and education of adolescent girls.
- GFF's partnership under government leadership can be leveraged to support the implementation of the Africa Human Capital Plan.
- Current GFF investment in AFR = US\$ 488m grant funding linked to US\$ 3,353m IDA/IBRD resources.

## GLOBAL FINANCING FACILITY COUNTRIES IN AFRICA

#### **CURRENT**

Burkina Faso\*
Cameroon\*

CAR

Cote d'Ivoire\*

DRC

Ethiopia\*

Guinea\*

Kenya\*

Liberia

Madagascar

Malawi\* Mali\*

Mozambique

Nigeria\* Rwanda\*

Senegal\*

Sierra Leone\*

Tanzania Uganda Angola\*

**ELIGIBLE** 

Benin\*
Burundi\*

Chad

Comoros

Congo, Rep.\*

**Eritrea** 

The Gambia

Ghana

**Guinea-Bissau** 

Lesotho\*
Mauritania
Niger\*

São Tomé and Principe\*

Somalia

**South Sudan** 

Sudan Swaziland

Togo\*

Zambia Zimbabwe

\*HCP COUNTRIES







## A RESULTS FRAMEWORK TO TRACK PROGRESS AND WORLD BANK PERFORMANCE BY 2023

#### **LONG-TERM OUTCOMES**

OUTCOME INDICATORS (AVERAGE FOR SUB-SAHARAN AFRICA)	BASELINE (2018)	<b>TARGET (2023)</b>
Reduced child mortality (under 5 years; per 1,000 live births)	<b>75</b> (2017)	45
Reduced stunting rate	32%	26%
Increased adult survival rate	0.73	0.81
Increased learning-adjusted years of school	4.94	5.88
Increased social protection coverage of the poorest quintile in Lower Income Countries	20%	30%
Reduced adolescent fertility (births per 1,000 women)	101	83
Reduced open defecation	22.9% (2015)	15%
Improved Human Capital Index score	0.40	0.45

## INTERMEDIATE RESULTS



	INDICATORS FOR THE WORLD BANK AFRICA REGION	BASELINE 2018	<b>TARGET (2023)</b>
SCALING UP BANK FINANCING FOR HUMAN CAPITAL RESULTS	Volume of IBRD/IDA commitments for human development sectors.	US\$ 3.8 BILLION	US\$ 15 BILLION IN FY2021-23
	Share of operations under the WBG's Global Practice Groups that include significant Human Capital sensitive components as per GP-defined criteria or filter.	TBD by Q1 FY20	TBD by Q1 FY20
	Number of WBG Global Practices with targets on human capital in the region.	4	7
	Share of concessional core IDA commitments for HD in country portfolios.	28%	45%
	Share of Development Policy Operations with a significant Human Capital focus.	61%	AT LEAST 70%
TACKLING CRITICAL HUMAN CAPITAL CHALLENGES: DEMOGRAPHIC CHANGE	Number of high-fertility countries (TFR>4) countries with integrated or coordinated projects across sectors to support women empowerment and the demographic transition.	7	20
TACKLING CRITICAL HUMAN CAPITAL CHALLENGES: FRAGILITY	Volume of IBRD/IDA commitments for human development projects in FCV countries.	US\$ 639 MILLION	US\$ 831 MILLION
LEVERAGING TECHNOLOGY AND INNOVATION IN SUPPORT OF HUMAN CAPITAL OUTCOMES	Percentage of operations with a Human Capital focus making use of technology to improve outcomes.	LESS THAN 15%	40%

## INTERMEDIATE RESULTS



### CONTINUED

		<b>BASELINE 2018</b>	<b>TARGET (2023)</b>
	Number of human capital project countries with prioritized human capital plans	7	30
ADVOCACY, KNOWLEDGE AND COMMUNICATIONS	Share of country work programs that include Advisory Services and Analytic tasks with a human capital focus.		90%
	Number of partnerships or coalitions supported by the WB around the Human Capital agenda in Africa, including with development partners, CSOs, faith organizations, traditional leaders.	0	10
	Number of African Human Capital Champions and influencers mobilized on the Human Capital agenda.	5	15
	Level of online engagement (social media and web) on Africa Human Capital Plan communications products.	TBD by Q1 FY20	TBD by Q1 FY20
MAKING COUNTRY TEAMS STRONGER AND LEVERAGING PARTNERSHIPS	Near term: Number of countries in which the World Bank has undertaken a portfolio review to identify opportunities for increased coordination and convergence (e.g. geographic) to advance the Human Capital agenda longer term: indicator to be developed.	0	20

## ACKNOWLEDGEMENTS

#### **CREDITS**

The Africa Human Capital Plan and this slide deck were prepared by a large group that included a core team: Magnus Lindelow and Katelyn Jison Yoo (Health, Nutrition and Population), Laura Rawlings and Julieta Trias (Social Protection and Jobs), Muna Salih Meky (Human Development) and Feda Kebede (Education), Jozefien Van Damme, Martin De Simone and Oluwaseyi Somefun (Africa Region Front Office), Zelalem Yilma Debebe and Kavita Watsa (Global Human Capital Project Team). The extended team included representatives from Global Practices and IFC: Shomikho Raha (Governance), Luis Andres (Water), Claire Chase (Water), Varalakshmi Vemuru (SURR), Nabil Chaherli (Agriculture), Caroline Vagneron (FCV), Christine Richaud (MTI), Cecilia Briceno (Transport), Aiga Stokenberga (Transport), Emmanuel Skoufias (Poverty), Raihan Elahi (Energy), Pedro Sanchez (Energy), Ruxandra Floroiu (Environment), Phillippe Ambrosi (Environment), Markus Goldstein (Gender), Kathleen Beegle (Gender) Andrew Myburgh (IFC), Veronica Navas (IFC).

There was close collaboration with Practice Managers and staff in Human Development and other Global Practices in the Africa Region, the Global Human Capital Project team, the Africa Chief Economist's office, the Africa External Communications team, and all the Country Management Units in Africa, each of whom provided valuable comments and inputs.

#### PHOTOGRAPHY CREDITS:

Front cover/Page 26: Dominic Chavez/World Bank. Page 4: ranplett/iStock.

#### **DEEP DIVES**

For some of the content included in this Africa Human Capital Plan, additional "deep dives" with extra information, a more detailed diagnosis, and guidelines for engagement have been prepared. These deep dives include the following topics:

- The State of Human Capital in Africa
- Financing the Human Capital Agenda
- Accelerating the Demographic Transition
- Leveraging Innovations and Technology
- Health, Nutrition and Population
- Education
- Social Protection and Jobs
- Youth Skills and Employment
- Mobilizing all World Bank teams to support the HC agenda

All the deep dives can be found on the Africa Human Capital Plan webpage: www.worldbank.org/ahcp

