

Editor • Rédacteur

John Hoey (john.hoey@cma.ca)

Senior Deputy Editor • Rédactrice adjointe principale

Anne Marie Todkill (annemarie.todkill@cma.ca)

Deputy Editor (Scientific) • Rédactrice adjointe, Sciences

Jennifer Douglas (jennifer.douglas@cma.ca)

Associate Editors • Rédacteurs associés

Tom Elmslie (telmslie@scohs.on.ca)

Ken Flegel (ken.flegel@muhc.mcgill.ca)

Anita Palepu (anita@hivnet.ubc.ca)

Erica Weir (erica.weir@utoronto.ca)

Nick Barrowman (Biostatistics • Biostatistique)

Editorial Fellow • Boursier en rédaction médicale

Eric Wooltorton (eric.wooltorton@cma.ca)

Ombudsman—Ethicist • Ombudsman-éthicien

John Dosssetor (ombudsman@cma.ca)

Managing Editor • Rédacteur administratif

Randy Chafy (randy.chafy@cma.ca)

News Editor

Rédacteur, informations générales

Patrick Sullivan (patrick.sullivan@cma.ca)

Editors • Rédacteurs

Patricia Lightfoot (patricia.lightfoot@cma.ca)

Jennifer Raiche (jennifer.raiche@cma.ca)

Kate Schissler (kate.schissler@cma.ca)

Barbara Sibbald (barbara.sibbald@cma.ca)

Steven Wharry (steve.wharry@cma.ca)

Editorial Administrator • Administratrice de rédaction

Carole Corkery (carole.corkery@cma.ca)

Editorial Assistants • Assistantes à la rédaction

Erin Archibald (erin.archibald@cma.ca)

Wilma Fatica (wilma.fatica@cma.ca)

Melanie Mooy (melanie.mooy@cma.ca)

Joyce Quintal (joyce.quintal@cma.ca)

Translation Coordinator

Coordonnatrice de la traduction

Marie Saumure

Contributing Editors • Rédactrices invitées

Gloria Baker; Charlotte Gray; Peggy Robinson;

Lori Anderson; Ann Bolster

Editorial Board • Conseil de rédaction

Paul W. Armstrong (Edmonton)

Neil R. Cashman (Toronto)

Deborah J. Cook (Hamilton)

David H. Feeny (Edmonton)

William Ghali (Calgary)

Frank R. de Grujil (Utrecht, the Netherlands)

Judith G. Hall (Vancouver)

Carol P. Herbert (London)

Neill Iscoe (Toronto)

Alejandro R. Jadad (Toronto)

Jerome P. Kassirer (Boston)

Finlay A. McAlister (Edmonton)

Allison J. McGeer (Toronto)

Harriet L. MacMillan (Hamilton)

David Moher (Ottawa)

Susan Phillips (Kingston)

André Picard (Montreal)

Donald A. Redelmeier (Toronto)

Martin T. Schechter (Vancouver)

Sander J.O. Veldhuyzen van Zanten (Halifax)

Salim Yusuf (Hamilton)

All editorial matter in *CMAJ* represents the opinions of the authors and not necessarily those of the Canadian Medical Association (CMA). The CMA assumes no responsibility or liability for damages arising from any error or omission or from the use of any information or advice contained in *CMAJ* including editorials, studies, reports, letters and advertisements.

Tous les articles à caractère éditorial dans le *JAMC* représentent les opinions de leurs auteurs et n'engagent pas l'Association médicale canadienne (AMC). L'AMC décline toute responsabilité civile ou autre quant à toute erreur ou omission ou à l'usage de tout conseil ou information figurant dans le *JAMC* et les éditoriaux, études, rapports, lettres et publicités y paraissant.

Failure to thrive: aid and Africa

Leaving scandals and shuffles behind him in darkest Ottawa, Prime Minister Jean Chrétien is occupied with better things at the G8 Summit this month as he tries to seal an action plan for the New Partnership for Africa's Development (NEPAD), conceived by African leaders last year in Abuja, Nigeria. It is a sorry fact that the world's aid to sub-Saharan Africa declined in the last decade — Canadian aid fell by 40%¹ — despite the worsening humanitarian crisis wrought by infectious disease, political upheaval and war. The 818 million people in Africa have the lowest average life expectancy in the world (54 years, to Canada's 79) and the highest infant mortality rate (88 per 1000 live births, to Canada's 5.5).² Every year, 90% of the 300 to 500 million clinical cases of malaria worldwide occur in sub-Saharan Africa, along with 1.5 million cases of tuberculosis. HIV is now the leading cause of death in sub-Saharan Africa, where 28 million people are infected.²

Although disease is often an effect of impoverishment, the economic consequences of disease are also "pernicious."³ Reduced productivity and income, loss of human capital, accentuated social inequities, curtailed opportunities for youth and other societal debilitations reduce "state capacity" not only for health and prosperity, but also with respect to good governance and political order. The lower a state's capacity to begin with, the weaker its ability to withstand stresses such as environmental degradation, conflict and emerging infectious disease. Many African countries are in this perilous condition.

The NEPAD strategy is to develop in "partnership" with developed nations — and the World Bank — a capacity for recovery and growth rather than to persist with the "aid first" approach that never provides much more than temporary relief. Goals selected for fast-track-

ing are disease control, development of information technology, debt reduction and market access. If these sound "global," the stated intention is for change to be directed by elected governments, by Africans and for Africans. In NEPAD's vocabulary, democracy and development are cognates.⁴ For that matter, only democracies with open markets need apply.⁵

Canada's pledge of \$500 million for a trust fund for Africa, premised on the anticipation of budget surpluses over the next 3 years, is a laudable but smallish step toward closing Africa's estimated "resource gap" of \$64 billion. We wish the Prime Minister well as he tries to ensure that NEPAD is played as the main theme at Kananaskis. But there are some discordant notes. Will the political and economic prerequisites for aid entrenched in NEPAD's top-down approach ultimately serve those in Africa who are most disadvantaged by political instability and economic ruin? If only democratic governments qualify for a helping hand, and if privatization and the liberalization of trade are unquestioned values under NEPAD, where will this leave embryonic democracies and local economies struggling at the grass roots, in women's groups and local workers' collectives and human rights associations?¹ Not even the best intentions are simple. — *CMAJ*

References

1. Canadian Council for International Cooperation. Africa—Canada Forum. *The New Partnership for Africa's Development (NEPAD): a commentary*. Apr. 2002.
2. Government of Canada 2002 Summit Web site. *Africa — facts and figures*. Available: www.g8.gc.ca/summitafrica_fact-e.asp (accessed 2002 May 29).
3. Price-Smith AT. *The health of nations: infectious disease, environmental change, and their effects on national security and development*. Cambridge (MA): MIT Press; 2002.
4. Kanbur R. *The New Partnership for Africa's Development (NEPAD): and initial commentary*. Nov. 2001. Available: www.people.cornell.edu/pages/sk145/papers.htm (accessed 2002 May 29).
5. Leblanc D. Chrétien visits Africa in effort to boost aid. *Globe and Mail* [Toronto] 2002 Apr 3;Sect A:7.