

Gender

Annexure

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The report was done using IFS 7.96

All interventions in Gender scenario and Gender Equality scenario start in 2024, interpolate to 2033 and are maintained thereafter to 2043 unless indicated otherwise.

Interventions and Parameter Name in IFs	Country or Group	Adjustments within IFs 7.96	Benchmark/Justification/No
Increase female labour participation rate (Labparm)	Algeria, Morocco, Mauritania, Tunisia, Egypt	To 1.25	North of Africa has the highest gender gap in labour participation among African regions.
	Somalia, Eswatini, Sudan, São Tomé and Príncipe, Seychelles, Libya Mauritius	To 1.18	Between 1975 and 1984, female labour participation in North Africa increased by about 10 percentage
	Senegal, Gabon, Niger, Comoros, Côte d'Ivoire Djibouti, Gambia, Mali, Burkina Faso Cabo Verde		points. In this scenario, the female labour participation rate will increase by about 10 percentage points between 2024 and 2033 in North
	Lesotho, Central African Republic, Equatorial		Africa.
	Guinea, Chad, Eritrea, Guinea Bissau Nigeria, South Africa	To 1.15	Between 2005 and 2015, female labour participation rate increased by about 10 percentage points in the Dominican Republic.
	Botswana, Ethiopia, Cameroon, Zimbabwe, Ghana,		Between 1990 and 2000, the female labour participation rate increased by about 10 percentage
	Namibia, Zambia, Liberia, Malawi	To 1.1	In this intervention female labour participation rate increased by about five
	Uganda, Tanzania, Congo, Kenya, Madagascar, Benin, DR Congo, South Sudan, Angola, Togo, Mozambique, Sierra Leone		percentage points between 2024 and 2033 in Africa compared to two percentage points and
	Sierra Leorie	To 1.05	

		To 1.03	three percentage points in South America and South Asia, respectively.
Increase male labour participation rate (Labparm)	Rwanda, Burundi, Guinea	To 1.01	In Rwanda, Burundi and Guinea, female labour participation rate is higher than men's. The gender gap affects males.
Reduce gender gaps in wage (labwagesexratm)	Africa	To 1.15	The average gender wage gap in South Africa declined from about 40% in 1993 to about 16% in 2014 (a 24 percentage point decline over 22 years).
Increase gender empowerment (gemm)	Uganda South Africa, Botswana,	To 1.03 To 1.05	To reduce the gender gap in political participation, decision making and power over economic resources.
	Seychelles, Mauritius, Namibia Zambia, Gabon, Libya, Madagascar, Mozambique, Zimbabwe, Guinea Bissau, Cabo Verde, Kenya, Eritrea,	To 1.1	Zambia improved its gender empowerment score by nearly 57% between 1995 and 2009. Ethiopia's score increased by more than 126% over the same period.

Equatorial Guinea, Lesotho, Ethiopia, Tanzania, Eswatini, São Tomé and Príncipe, Cameroon, Morocco, Niger, Rwanda, Djibouti, Ghana, Burkina Faso Senegal, Chad Comoros, Algeria, Egypt Benin, Malawi Mali, Angola, Tunisia, Sudan, DR Congo, Congo, Nigeria, Côte d'Ivoire Togo, Mauritania, Somalia Gambia, Guinea Bissau, Guinea Sierra Leone, Liberia, South Sudan, Central African	To 1.25	These interventions increase Africa's score on the Gender Empowerment Index by 29% between 2024 and 2033. The score by 2043 is below the average for South America (0.6) but on par with the world average (0.5).
Republic, Burundi	To 1.35 To 1.4	

Increase access to contraceptive (contrusm)	Rwanda, Eswatini Egypt, Namibia, South Africa, Kenya, Zimbabwe, Malawi, Morocco, Botswana, Lesotho	To 1.05 To 1.1	To reduce gender inequality in reproductive health, which includes access, without discrimination, to affordable, quality contraception, including emergency contraception.
	Cabo Verde Algeria, Benin, Cameroon, Comoros, Rep of Congo, Côte d'Ivoire, Djibouti, Ghana, Kenya, Mauritania, São Tomé and Príncipe, Senegal, Tanzania, Tunisia, Zambia, Gabon, Malawi, Madagascar, DR Congo,	To 1.18 To 1.28	In countries such as the UK, Spain and Brazil, access to safe contraception is universal. Between 1992 and 2003, contraceptive use increased by more than 40% in Egypt.
	Uganda Burkina Faso, Burundi,		Between 2000 and 2005, the contraceptive use rate doubled in Ethiopia.
	Eritrea, Ethiopia, Gambia, Guinea, Guinea Bissau, Mali, Mozambique, Somalia, Sudan, Togo, Angola, Equatorial Guinea		Contraception access rates in Africa are much lower than for other comparable regions. The interventions move Africa closer to South
	Chad, Niger, Nigeria, Burundi, Central African Republic, Liberia, Sierra Leone, South Sudan No intervention for		Asia by 2043. Contraception access rate will be about 65% by 2043 (five percentage points below the rate for South Asia).
	Seychelles, and Mauritius	To 1.35	No intervention for countries where contraception use is above the current world average of 63%.

		To 1.4	
Reduces maternal mortality (matmortratiom)	Chad, South Sudan, Sierra Leone, Nigeria, Central African Republic, Mauritania, Somalia Liberia, Guinea, Bissau, Guinea Gambia, Côte d'Ivoire, Cameroon, Mali, Burundi Equatorial Guinea, Tanzania, Lesotho, Niger, Eritrea, Congo, Zimbabwe, Eswatini, Gabon, Sudan, Benin, DR Congo, Ethiopia, Madagascar, Togo Uganda, Malawi, Ghana, Comoros, Kenya, Burkina Faso, Angola, Senegal, Mozambique, Rwanda, Zambia, Djibouti Namibia, South Africa, Mauritius, Algeria	To 0.6 To 0.7	A proxy for improvement in access to better reproductive healthcare and reduction in health-related gender inequality. Between 2005 and 2014, Angola reduced maternal mortality by about 50%. In this scenario, maternal mortality in Africa will decline by 49% between 2024 and 2033. These interventions reduce maternal mortality to 116 deaths per 100 000 live births in Africa compared to 190 on the Current Path in 2043. This is still far above the projected average for South Asia (60 deaths per 100 000 live births) and South America (36 deaths per 100 000 live births).
	No interventions for Botswana, Egypt, Tunisia, Cabo Verde, Seychelles, Morocco, São Tomé and Príncipe, Libya as the Current Path is aggressive	To 0.85	

		To 0.9	
Reduce the share of females aged 15-19 in marriage or union (married femshrm)	Central African Republic, Niger, Chad Madagascar, Mozambique, Mali, Guinea, Burkina, Eritrea, South Sudan, Nigeria, Tanzania, Equatorial Guinea, Somalia, Mauritania, Malawi, Cameroon, Angola.	To 0.7	To reduce girl-child marriage, which is also considered a form of gender-based violence. Girl child marriage is still a widespread practice in many African countries.
	Côte d'Ivoire, Senegal, Uganda, Ethiopia, DR Congo, Zimbabwe, Congo, Sudan, Gambia, Zambia, Comoros, Lesotho, Liberia, Benin Sierra Leone, Egypt, São Tomé and Príncipe, Djibouti, Cabo Verde, Togo, Gabon, Guinea Bissau, Kenya, Botswana, Seychelles, Libya, Eswatini, Morocco. Mauritius, Burundi, South Africa, Ghana No interventions for Algeria, Namibia, Rwanda,	To 0.85	From 2009 to 2018, the prevalence of child marriage declined by seven percentage points in Africa. Between 2003 and 2018, Guinea Bissau and Zambia reduced child marriage by 20 and 15 percentage points, respectively. The magnitude of the intervention is incremental from countries with low child marriage rates to countries with high child marriage rates. With these interventions, the share of females aged 15–19 in marriage or union in Africa is 12%, on par with

	Tunisia	To 0.9	slightly above South America at 10%.
Reduce food insecurity (food insecuritym) (female)	Niger, Namibia, Uganda, Somalia, Botswana, Tanzania, Eswatini, Libya, Ethiopia, South Africa, Djibouti	To 0.95	To reduce gender inequality in nutrition.
Reduce food insecurity (food insecuritym) (male)	São Tomé and Príncipe, Cabo Verde, Guinea Bissau Central African Republic, Chad, Madagascar, Mozambique, Mali, Guinea, Burkina, Eritrea, South Sudan, Nigeria, Equatorial Guinea, Mauritania, Malawi Cameroon, Angola, Côte d'Ivoire, Senegal, DR Congo, Zimbabwe, Congo, Sudan, Gambia, Zambia, Comoros, Lesotho, Liberia, Benin, Sierra Leone, Egypt, Togo, Gabon, Mauritius, Burundi,	To 0.95	The magnitude of the intervention is incremental from countries with low gender gap in food insecurity to countries with high gender gap. With these interventions, the ratio of the percentage of females experiencing moderate food insecurity to males' is 0.94 by 2043 (with 1 being full parity) compared to a ratio of 0.84 on the Current Path in the same year.

	Ghana, Algeria, Rwanda, Tunisia Bissau, Kenya, Seychelles, Morocco		
Increase primary net intake (female) (edpriintnm)	Angola, Nigeria, Somalia, Cameroon, Chad, Benin	To 1.15	Between 1996 and 2006, Laos increased its female primary net intake by 68.5%.
	DR Congo, Niger, Guinea Bissau		Between 1999 and 2009, Morocco increased its female primary net intake by 49%.
	Guinea, Côte d'Ivoire, São Tomé and Príncipe	To 1.1	
	Djibouti, Ethiopia, Togo, Mozambique		
		To 1.03	
		To 1.02	
Increase primary net intake (male) (Edpriintnm)	Eritrea, Burkina Faso, Comoros, Zambia, Malawi	To 1.15	Between 1999 and 2009, Nepal increased its male primary net intake by 33%.
	Madagascar, Mauritania, Senegal, Congo, Central		With these interventions, the female-to-male ratio of primary net intake (97%) is
	African Republic, Tanzania, South Africa, Zimbabwe, Burundi.	To 1.03	on par with South Asia and South America by 2043. Between 1994 and 2005,
	Mauritius, Kenya, Liberia, Eswatini, Sudan		the primary survival rate in South Asia increased by 67%.
	Ghana, Equatorial Guinea, Gabon, Lesotho, Namibia, Rwanda, Uganda, Cabo, Verde, Sierra Leone		The magnitude of the intervention is incremental from countries with a low gender gap in primary survival rate to countries with a high gender gap.
			With these interventions,

	No intervention for Botswana, Algeria, Morocco, Egypt, Tunisia, Libya, Mali, South Sudan Seychelles). They achieve parity in the Current Path forecast.	To 1.02 To 1.01	the ratio of the female primary survival rate to males is on par with South Asia and World average by 2043.
Increase primary survival rate (female)	São Tomé and Príncipe Malawi, Djibouti, Côte	To 1.1	
	d'Ivoire Comoros, DR Congo,	To 1.03	
	Burundi	To 1.2	
Increase primary survival rate (male)	Mali, Burkina Faso	To 1.15	
	Ethiopia, Mauritania, Sierra Leone, Gambia, Lesotho, South Africa, Senegal, Rwanda, Madagascar, Somalia, Niger, Sudan, South Sudan, Uganda, Central African Republic, Guinea Bissau, Tanzania, Liberia, Zimbabwe, Eritrea, Nigeria, Cameroon, Mozambique, Namibia, Congo, Chad, Ghana, Cabo Verde, Zambia, Benin, Gabon, Eswatini, Libya.	To 1.08	
	No intervention for Botswana, Algeria, Morocco, Egypt, Tunisia, Mauritius, and Seychelles		
Increase Lower secondary	Guinea Bissau,	To 1.15	Between 2000 and 2007,

transition rate (female)			female lower secondary
	Senegal, Central African Republic, Niger, Chad, Equatorial Guinea, Côte d'Ivoire, Sierra Leone Congo, Somalia, Gabon Uganda, South Sudan	To 1.05	transition rate increased by 39% in Uganda. The magnitude of the intervention is incremental from countries with low gender gap in lower secondary transition rate to countries with high gender gap.
		To 1.01	
Increase Lower secondary transition rate (male)	Djibouti, Lesotho Liberia, Sudan, Ghana, Malawi, Egypt No intervention for other countries since they achieve or are close to parity in the Current Path forecast.	To 1.05	Between 2006 and 2015, the male lower secondary transition rate increased by 32% in Côte d'Ivoire. With these interventions, the ratio of the lower secondary transition rate of the females to males (99%) is on par with South Asia, South America and the world average by 2043.
Increase upper secondary transition rate (female)	Togo, Benin, Guinea Mali, Gabon, Tanzania, Guinea Bissau, Congo, Madagascar, Burkina Faso Sierra Leone, Mozambique, Uganda, Zambia, Egypt, Malawi	To 1.15 To 1.15 To 1.05	Between 2001 and 2011, female upper secondary transition rate increased by 20% in Benin.

Gambia, Eritrea	To 1.15	Between 1998 and 2010, male upper secondary transition rate increased by
Senegal, Eswatini	To 1.1	53% in Burkina Faso.
Mauritius, Seychelles, Lesotho, Equatorial Guinea, Liberia	To 1.03	
No intervention for other countries as they achieve or are close to parity in the Current Path forecast horizon.		
Togo, Gambia, DR Congo, Eritrea, Zimbabwe	To 1.15	With this intervention, the female-to-male ratio of lower secondary school graduation is on par with
Central African Republic, Burundi	T- 1.1	South Asia at 0.98 (98%) in 2043.
Chad, South Sudan, Liberia, Egypt, Somalia, Guinea	10 1.1	
	To 1.05	
Mali, Benin, Niger, Mozambique, Guinea Bissau, Madagascar, Eswatini		
	To 1.02	
Lesotho, Malawi	To 1.15	
Cabo Verde, Tunisia, South Africa	To 1.1	
São Tomé and Príncipe, Mauritius	To 1.05	
	Senegal, Eswatini Mauritius, Seychelles, Lesotho, Equatorial Guinea, Liberia No intervention for other countries as they achieve or are close to parity in the Current Path forecast horizon. Togo, Gambia, DR Congo, Eritrea, Zimbabwe Central African Republic, Burundi Chad, South Sudan, Liberia, Egypt, Somalia, Guinea Mali, Benin, Niger, Mozambique, Guinea Bissau, Madagascar, Eswatini Lesotho, Malawi Cabo Verde, Tunisia, South Africa	Senegal, Eswatini Mauritius, Seychelles, Lesotho, Equatorial Guinea, Liberia No intervention for other countries as they achieve or are close to parity in the Current Path forecast horizon. Togo, Gambia, DR Congo, Eritrea, Zimbabwe Central African Republic, Burundi To 1.1 Chad, South Sudan, Liberia, Egypt, Somalia, Guinea Bissau, Madagascar, Eswatini To 1.02 Lesotho, Malawi To 1.15 Cabo Verde, Tunisia, South Africa São Tomé and Príncipe, Mauritius

	Sierra Leone, Namibia, Seychelles, Botswana, Tanzania, Equatorial Guinea	To 1.02	
Increase upper secondary graduation rate (female)	Central African Republic, Togo, Burundi, Chad, RDC	To 1.15	
	Congo, Liberia, Mali, Sierra Leone, Somalia	To 1.05	Between 2015 and 2019,
	Malawi, Niger, Burkina Faso, Guinea, Uganda, Tanzania		the upper secondary school graduation rate increased by 29% in Uganda.
	No intervention for the rest of the countries as they achieve or are close to parity in the Current Path forecast horizon.	To 1.02	
Increase upper secondary graduation rate (male)	São Tomé and Príncipe, Algeria, Tunisia, Cabo, Verde, South Africa, Seychelles, Mauritius	To 1.15	
	Egypt, Botswana, Equatorial Guinea, Libya, Namibia, Eswatini, Comoros, Morocco, Côte d'Ivoire	To 1.1	
	Cameroon, Rwanda, Mauritania, Eritrea, Sudan		
	Djibouti, Angola, Senegal, Nigeria, Ethiopia, Zimbabwe, Lesotho, Kenya		

		To 1.05	
Tertiary intake rate (female)	Chad Guinea Central African Republic, Gabon, Liberia, Togo, Gambia.	To 1.18 To 1.15 To 1.1	Between 2009 and 2018 Algeria increased tertiary intake for females by 81%. Between 2009 and 2018 Bangladesh increased tertiary intake for females by 77%.
	Burundi, Nigeria, Benin, Somalia	To 1.03	
Tertiary intake rate (male)	Equatorial Guinea, Guinea Bissau, Namibia, Sierra Leone, Seychelles, Tunisia, Djibouti, Algeria Lesotho, Cabo Verde,	To 1.2	
	Mauritius, South Africa Eswatini, Botswana, Côte d'Ivoire, Rwanda, São Tomé and Príncipe, Malawi, Zambia, Egypt, Madagascar, Eritrea, Kenya	To 1.15	Between 2008 and 2017 Cameroon increased
	Senegal, Congo, Mozambique, Morocco, Comoros, Libya, Mauritania, Tanzania,	To 1.1	tertiary intake for male by 60%.

	Niger, Angola, Cameroon, Ghana, Sudan, Mali Ethiopia, South Sudan, DR Congo, Burkina Faso, Zimbabwe		
		To 1.05	
		To 1.02	
Tertiary graduation rate (female)	Guinea	To 1.3	Between 2000 and 2010, enrolment in tertiary institutions nearly increased by 100% in Ukraine.
	Burundi, Chad, Central African Republic	To 1.15	
	Nigeria, Ethiopia		
	Eq. Guinea, Sierra Leone, Tunisia, Djibouti, Algeria,	To 1.02	
	Namibia, Seychelles, Botswana, South Africa, Malawi, Niger.	To 1.5	
	Madagascar, Zimbabwe, Rwanda, São Tomé and Príncipe, Senegal, DR Congo		

		To 1.3	
Tertiary graduation rate (male)	Mauritius, Eswatini, Mozambique, Eritrea, Lesotho, Côte d'Ivoire, Libya, Egypt, Cabo Verde, Uganda, Morocco, Sudan, Comoros, Benin, Angola, Cameroon, South Sudan, Congo, Tanzania, Togo, Kenya, Gabon, Somalia, Burkina Faso, Zambia Ghana, Gambia, Mauritania Liberia, Mali	To 1.2	
		To 1.15 To 1.05	
Increase lower secondary vocational share (female)	Algeria, Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Comoros, DR Congo, Djibouti, Egypt, Eq. Guinea, Eswatini, Gabon Libya, Madagascar, Mauritius, Morocco, Mozambique,	The magnitude of the intervention is different for each country.	Lower secondary vocational enrolment for females increased by 23% in Algeria between 1999 and 2008.

	Niger, Rwanda, Togo, Tunisia, Uganda		
Increase lower secondary vocational share (male)	Angola, Congo, Côte d'Ivoire Guinea No interventions for Botswana, Burundi, Cabo Verde, Eritrea, Ethiopia, Gambia, Ghana, Guinea Bissau, Kenya, Malawi, Mali, Mauritania, Namibia, Nigeria, São Tomé and Príncipe, Seychelles, Sierra Leone Somalia, South Africa, Sudan, South Sudan, Zambia, Zimbabwe.	The magnitude of the intervention is different for each country.	Lower secondary vocational enrolment for male increased by 21.5% in Cameroon between 2004 and 2014.
Increase upper secondary vocational share (female)	Angola, Botswana, Cabo Verde, Cameroon, Comoros, Congo, DR Congo, Djibouti, Egypt, Eq. Guinea, Eswatini, Ethiopia, Gabon, Ghana, Madagascar, Mauritania, Mauritius, Morocco, Mozambique, Rwanda, Seychelles, South Africa, Sudan, Tanzania, Togo, Tunisia, Uganda	The magnitude of the intervention is different for each country.	Upper secondary vocational enrolment for females increased by 79% in Niger between 2011 and 2017.
Increase upper secondary vocational share (male)	Burkina Faso, Burundi, Central African Republic, Chad, Guinea, Kenya, Liberia, Niger, Lesotho, Côte d'Ivoire No interventions for Namibia, Nigeria, Somalia, South Sudan, Zambia, Zimbabwe as there is no difference between male and female.	The magnitude of the intervention is different for each country.	Upper secondary vocational enrolment for male increased by 29% in Burundi between 2009 and 2018.
Increase primary education quality (male)	Morocco, Mauritius, Tunisia, Tanzania, South Africa, Botswana	To 1.02	Chad improved its primary education quality score by 15% between 1995 and

	Kenya, Côte d'Ivoire, Mauritania, Mozambique, Cameroon, Niger No intervention for the rest of the countries as they achieve parity in the Current Path forecast	To 1.01	2005.
Increase secondary education quality (male)	Algeria, Botswana, Mauritius, Egypt, Tunisia, South Africa. No intervention for other countries as they achieve parity in the Current Path forecast	To 1.02	Between 2000 and 2005, the secondary education quality score in Morocco increased by about 17%.

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Dr Jakkie Cilliers is the ISS's founder and former executive director of the ISS. He currently serves as chair of the ISS Board of Trustees and head of the African Futures and Innovation (AFI) programme at the Pretoria oce of the ISS. His 2017 best-seller Fate of the Nation addresses South Africa's futures from political, economic and social perspectives. His three most recent books, Africa First! Igniting a Growth Revolution (March 2020), The Future of Africa: Challenges and Opportunities (April 2021), and Africa Tomorrow: Pathways to Prosperity (June 2022) take a rigorous look at the continent as a whole.

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