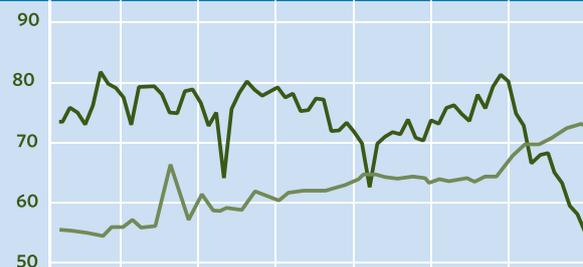




EQUATORIAL GUINEA



Center for Economic and Social Rights

FACT SHEET No. 9

In light of Equatorial Guinea's appearance before the sixth session of UN Human Rights Council's Universal Periodic Review in December 2009, this fact sheet looks at the realization of economic and social rights in Equatorial Guinea. It focuses on the rights to health, education, water and sanitation, and exposes possible policy failures in these areas. Its aim is to graphically illustrate statistical information to help assess Equatorial Guinea's compliance with the International Covenant on Economic, Social and Cultural Rights and other international treaties it has ratified.

Since the discovery of oil and natural gas reserves over a decade ago, Equatorial Guinea has become the richest country in sub-Saharan Africa (measured by GDP per capita). Despite this wealth, the majority of its people remain extremely poor. Retrogression—a decline in rights—is apparent in the realization of the rights to food, health and education. With a tiny population of just 633,000, oil and gas wealth has raised GDP per capita to over \$26,000, making Equatorial Guinea one of the world's high income countries (World Bank 2008). Yet more than 60 percent of the population struggle to survive on less than us\$1 per day (UNDG 2006). One measure of this extreme poverty is the high rate of child mortality, which increased between 1990 and 2006. The proportion of children dying before age five now is higher than some of the poorest countries in sub-Saharan Africa. The vast wealth of Equatorial Guinea appears not to have benefited its people.

The lack of transparency in government expenditure and revenue generation heightens concern that corruption is diverting resources away from economic and social rights fulfillment. Distribution of oil wealth is reportedly considered a "state secret," but numerous studies and several corruption investigations outside the country have alleged misappropriation and secret diversions of billions of dollars in oil and gas revenues by government officials, with the collusion of foreign banks and oil companies (Global Witness 2009; U.S. Senate 2004).

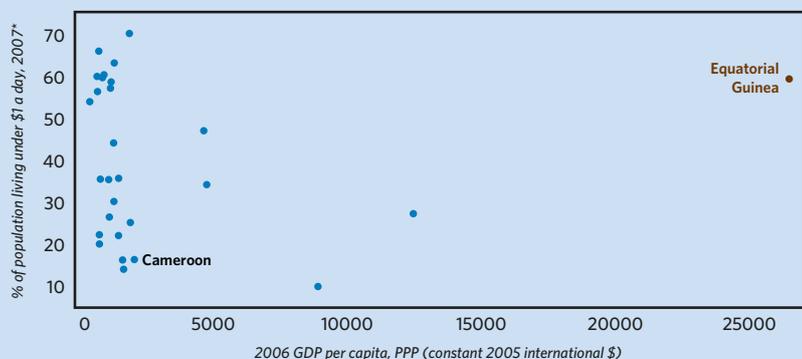
This fact sheet analyzes the country's development outcomes and policies in order to question whether Equatorial Guinea is devoting sufficient effort and maximum available resources to the progressive realization of economic and social rights. Data is from international sources, such as the World Bank and the United Nations Children's Fund (UNICEF), and from the most recent official national statistical sources. The last comprehensive household survey was carried out in 2000, however, and no comprehensive national census has been conducted since 1994. The lack of up-to-date official data is itself an indication of lack of political will to fulfill its economic and social rights obligations.

VISUALIZING RIGHTS

PROGRESSIVE REALIZATION USING

Figure 1

Population Living Under \$1 per Day and GDP per capita, Sub-Saharan Africa



*Equatorial Guinea data from 2006

Source: UNDP 2007/2008, UNGD 2006, and World Bank 2008

“While the Committee welcomes the State party’s commitment made in 1997 to allocate 40 percent of all its oil revenues to the social sector, it regrets that the necessary measures have not been taken to fully meet this commitment. It also regrets the lack of information about the budget allocated to social expenditures.” (CRC Concluding Observations 2004)

Despite the country’s wealth, the majority of Equatoguineans remain extremely poor

Since the discovery of oil and natural gas reserves in the 1990s, Equatorial Guinea has become the richest country in sub-Saharan Africa, with a GDP per capita of over \$26,000. But almost two-thirds of Equatoguineans still live in extreme poverty on less than \$1 a day, unable to achieve an adequate standard of living. Neighboring Cameroon has a GDP per capita less than one-tenth of Equatorial Guinea’s; yet its poverty rate is less than one-third that in Equatorial Guinea.

Even as the country’s wealth has increased, infant and child mortality rates have deteriorated

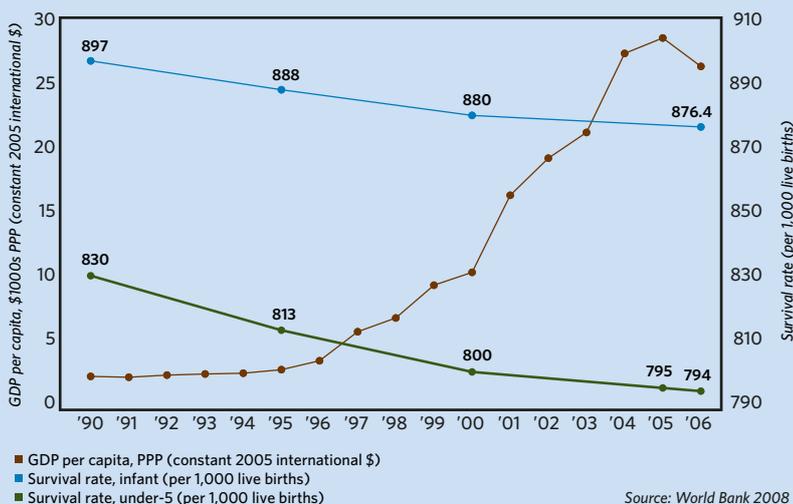
Despite the rapid increase in the country’s wealth since the mid-1990s, fewer children survive their early childhood. Between 1990 and 2006, the number of infants who survived their first year fell from 897 per 1,000 live births to 876 and the under-five survival rate fell from 830 to 794. This suggests a retrogression in the realization of the right to health for Equatorial Guinea’s children.

Primary school enrollment declines

Despite beginning to make progress in 1999, a marked drop in primary school enrollment after 2001 suggests a retrogression in the realization of the right to education. While basic free education is guaranteed in the constitution, in practice school fees are charged and the government budget allocation to education is insufficient to ensure universal access to primary education (Tomaševski 2006 and Special Representative of the Commission 2001).

Figure 2

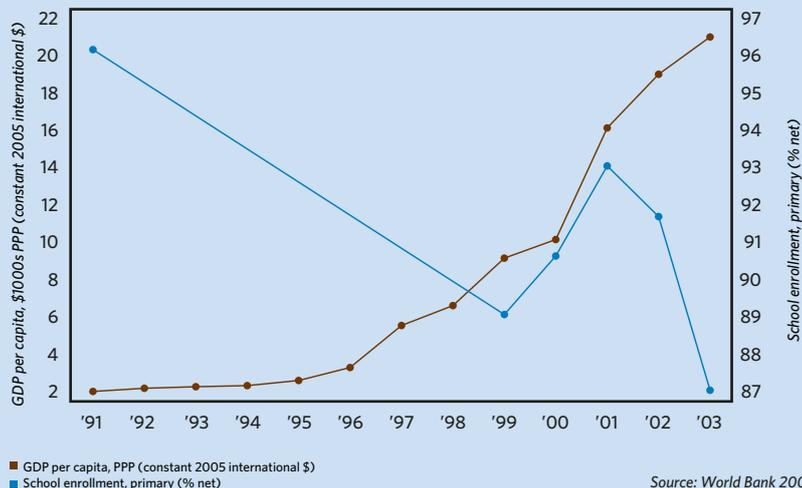
Infant Survival and GDP per capita, Equatorial Guinea, 1990–2006



Source: World Bank 2008

Figure 3

GDP per capita and Primary Enrollment, Equatorial Guinea, 1991–2003



Source: World Bank 2008

... MAXIMUM AVAILABLE RESOURCES

"In order for a State party to be able to attribute its failure to meet at least its minimum core obligations to a lack of available resources it must demonstrate that every effort has been made to use all resources that are at its disposition in an effort to satisfy, as a matter of priority, those minimum obligations." (CESCR General Comment 3)

Public expenditure on education does not prioritize primary education

Equatorial Guinea devotes only 27 percent of its total education expenditure on primary education, one of the lowest proportions in sub-Saharan Africa. Given that fewer than 60 per cent of pupils manage to complete primary school (UNESCO 2009), this suggests that the state is not giving priority to meet its minimum core obligations of ensuring that all citizens receive at least primary education.

Government expenditure on health and education is much lower than the sub-Saharan African average

In 2006, public expenditure on health was seven percent of total government expenditure, compared to the regional average of 10 percent. In 2004, public expenditure on education was four percent of total government expenditure, far lower than the 16 percent regional average (latest available data). This suggests a failure to invest the "maximum of available resources" in the realization of the rights to health and education.

Lack of transparency about oil wealth

The distribution of oil wealth is considered a "state secret" (Global Witness 2009) and transparency in government revenue generation and expenditure is limited. Equatorial Guinea scored zero on the 2008 Open Budget Index of the Open Budget Initiative, which ranks countries according to the transparency of their budget information and systems. It is one of the few countries in the world that did not publish its 2008 annual budget after approval by the Legislature. The lack of transparency heightens concerns that corruption is diverting resources away from the fulfillment of economic and social rights.

Figure 4

Education Expenditure in Primary as % of Total Educational Expenditure, Sub-Saharan Africa, Latest Available Data

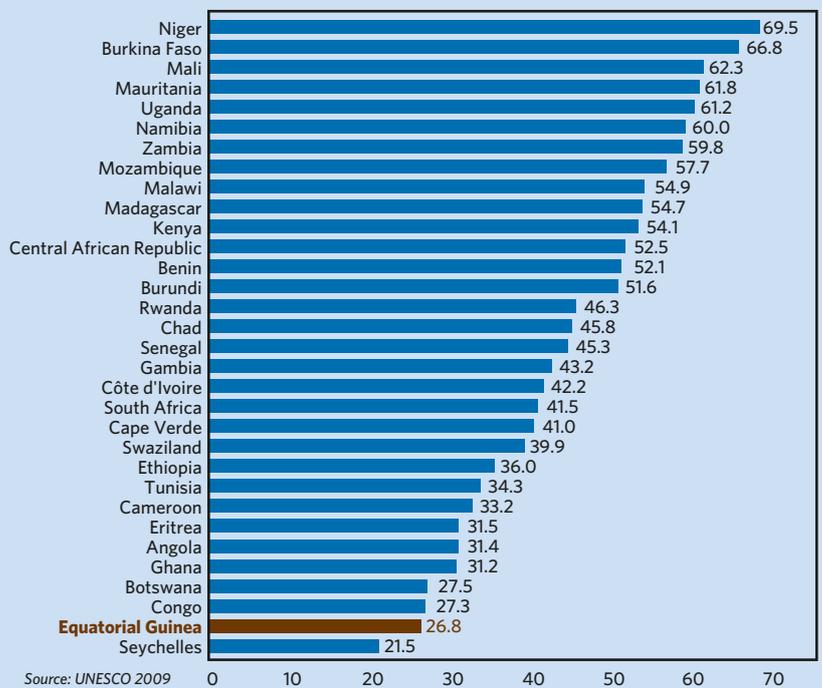


Figure 5

Public Expenditure on Health and Education, Equatorial Guinea and Sub-Saharan African Averages

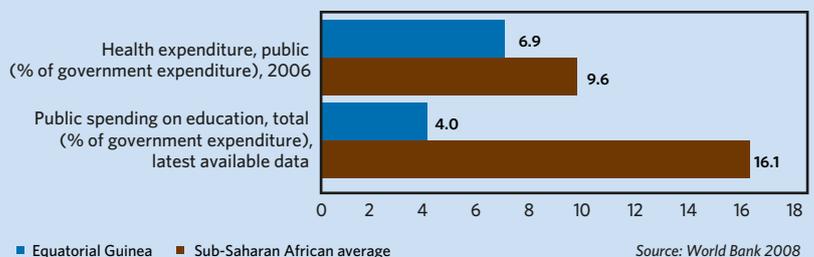
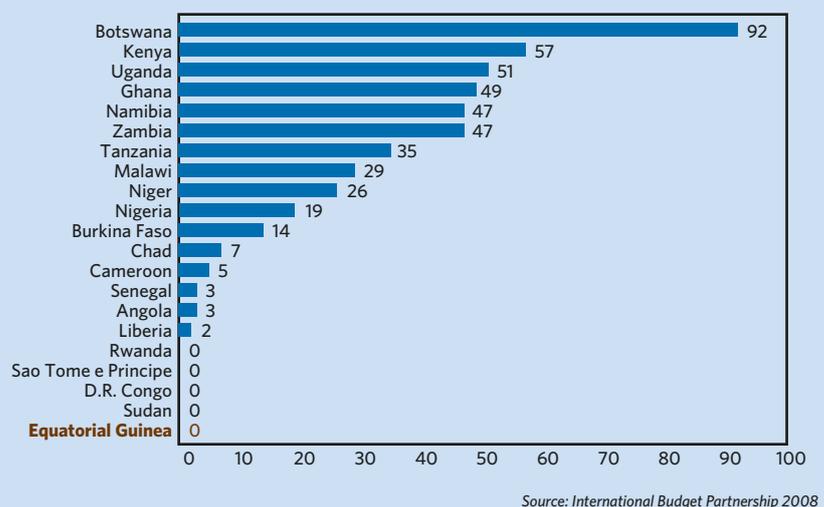


Figure 6

Open Budget Index, Sub-Saharan African Countries, 2008



THE RIGHT TO HEALTH

“The Committee expresses concern about the lack of access of women and girls to adequate health-care services, including pre-natal and post-natal care.” (CEDAW Concluding Observations 2004)

Rising child mortality rates, in contrast with poorer sub-Saharan African countries

Equatorial Guinea now has a higher rate of child mortality than four of sub-Saharan Africa’s poorest countries. The rate of children dying before age five increased from 170 per 1,000 live births in 1990 to 206 in 2006. Much poorer countries than Equatorial Guinea have made significant progress over the same time, raising questions as to why Equatorial Guinea is failing to match this progress.

High infant and maternal mortality rates linked to inadequate access to reproductive health services

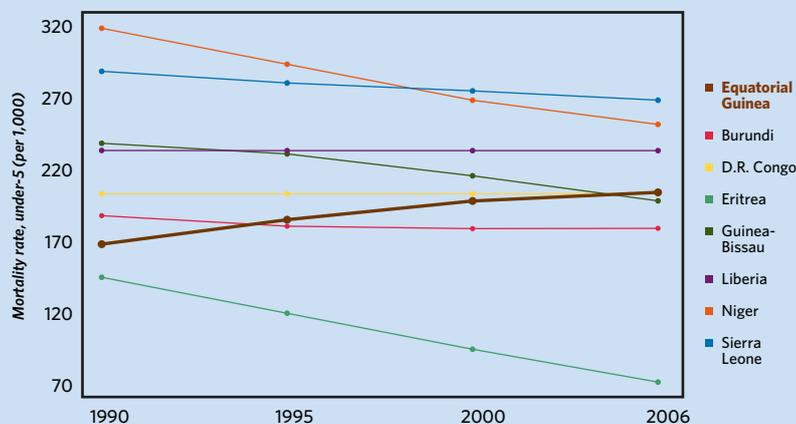
The proportion of babies and infants who die before they reach age one is higher in Equatorial Guinea than in all other sub-Saharan African countries except Chad and Sierra Leone. Skilled assistance when giving birth is key to the survival of mother and child, but only 65 percent of women receive skilled assistance during birth. This also contributes to high maternal mortality: 680 out of 100,000 live births result in the death of the mother. This raises serious concerns about the government’s commitment to the realization of the right to health of women and children.

One-fifth of Equatoguinean children are undernourished

Despite the country’s new wealth, 20 percent of Equatorial Guinea’s children under five are chronically malnourished and stunted in their growth (under height for their age), more than in most neighboring countries. This raises concerns that the distribution of wealth does not allow for the fulfillment of minimum core obligations regarding the rights to food and to health for the country’s children.

Figure 7

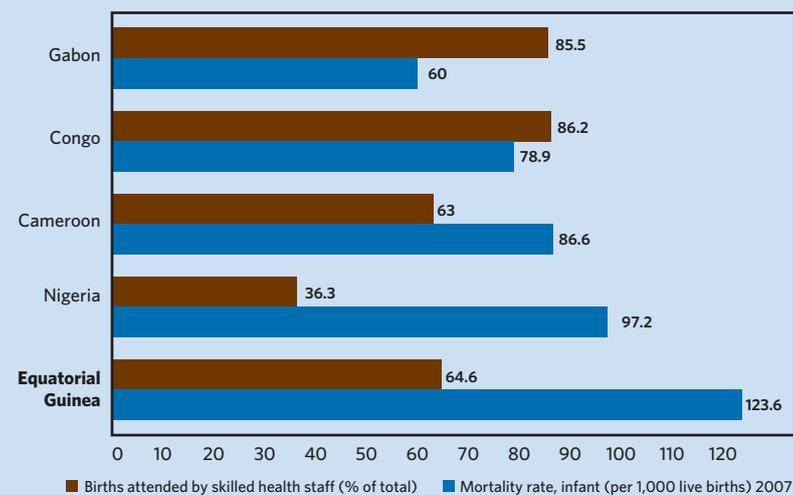
Under-5 Mortality Rate, Equatorial Guinea and the Seven Poorest Countries in Sub-Saharan Africa, 1990–2006



Source: World Bank 2008

Figure 8

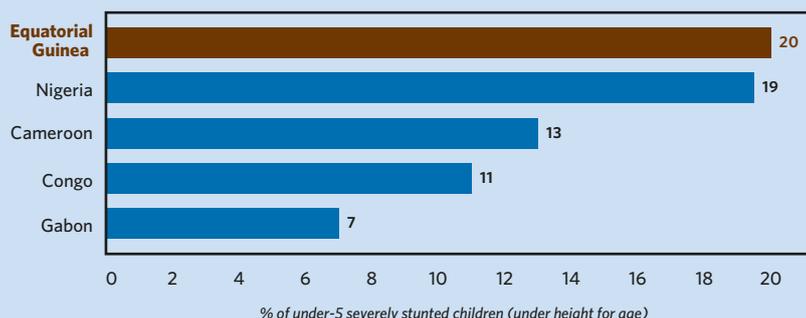
Skilled Birth Attendance and Infant Mortality, Equatorial Guinea and Its Neighbors, Latest Available Data



Source: World Bank 2008

Figure 9

Prevalence of Severely Chronically Malnourished Children, Equatorial Guinea and its Neighbors, Latest Available Data, 2000–2007



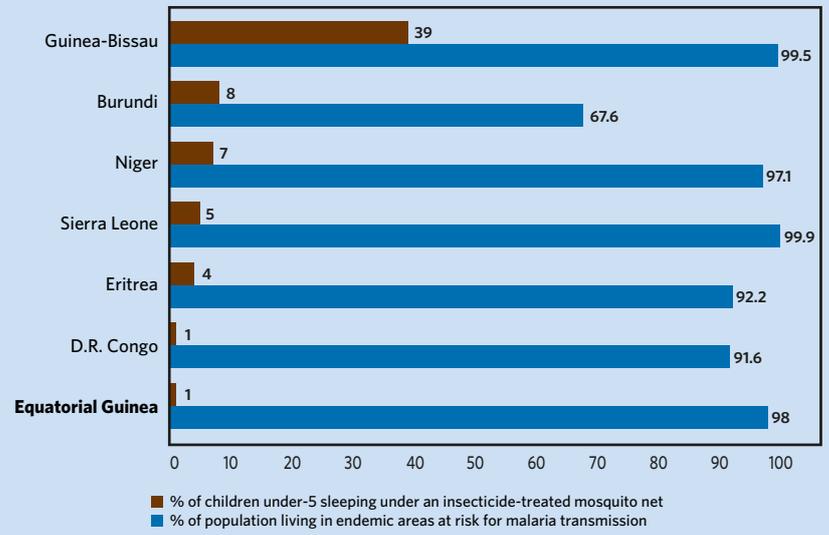
Source: UNICEF 2009

Malaria causes many child deaths, but preventive measures are inadequate

Malaria causes 24 percent of under-five deaths in Equatorial Guinea (UNICEF 2008). Malaria is preventable, if adequate resources are invested in prevention. About 98 percent of Equatoguineans live in areas with endemic risk of malaria but only one percent of children under five sleep under insecticide-treated nets. This is far fewer than in other countries with similar malaria risk. This suggests inadequate efforts to prevent malaria that would contribute to the realization of the right to health of both children and adults.

Figure 10

Population Susceptible to Malaria and Use of Insecticide-treated Nets, Equatorial Guinea and the Poorest Countries in Sub-Saharan Africa, Latest Available Data

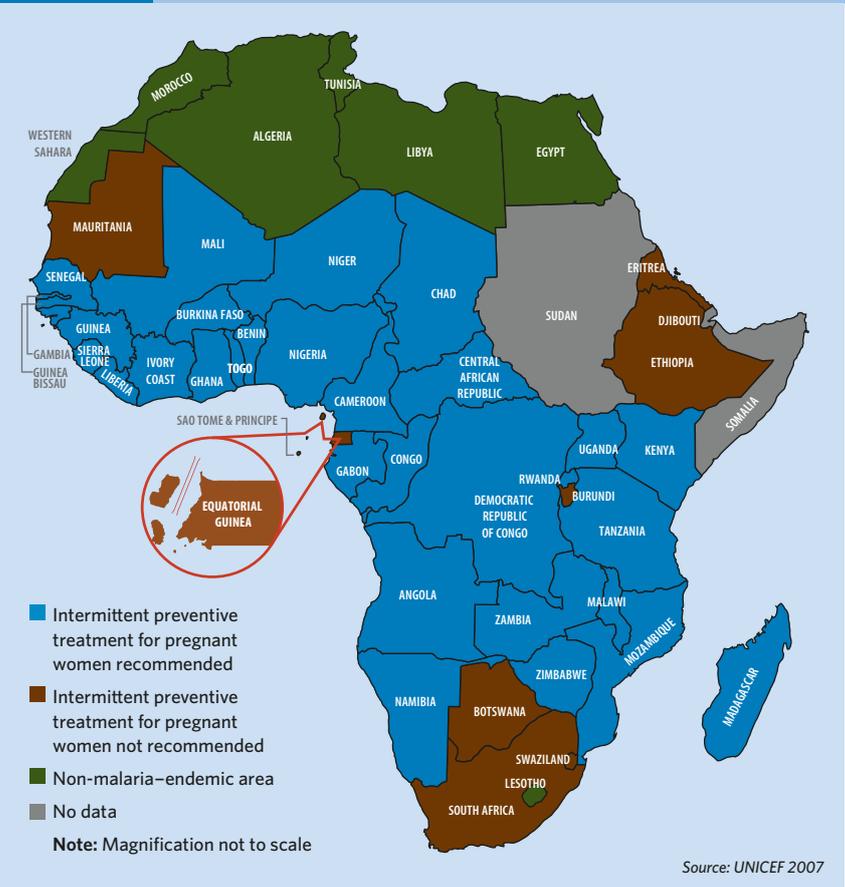


No malaria treatment programs for pregnant women

Despite its high endemic risk, Equatorial Guinea is one of the few sub-Saharan African countries that does not recommend preventative treatment for pregnant women (which entails providing regular doses of anti-malarial drugs during pregnancy), even though this would significantly reduce malaria. This raises further questions as to Equatorial Guinea's efforts to ensure its minimum core obligations in relation to the right to health of women.

Figure 11

Countries Adopting Intermittent Preventive Treatment for Pregnant Women as Part of National Malaria Control Strategies, Sub-Saharan Africa, 2007



THE RIGHT TO WATER

Figure 12 Improved Water Source, Urban (% of Urban Population with Access), Equatorial Guinea and Low-Income Sub-Saharan African Countries, 2006

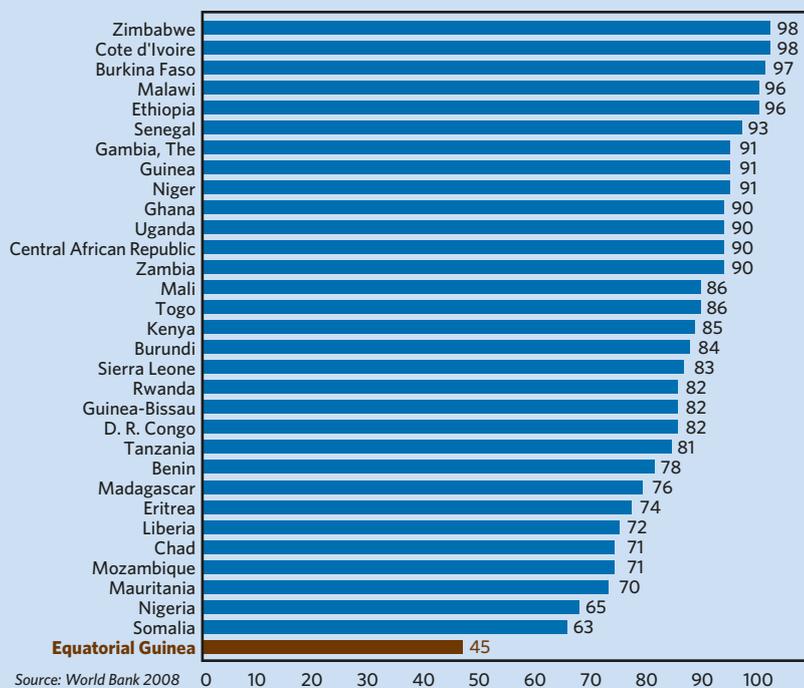
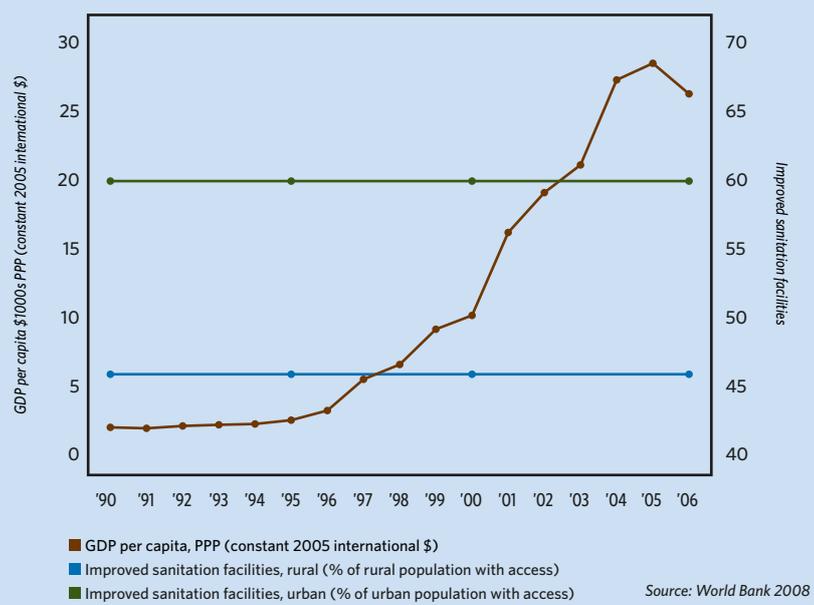


Figure 13 GDP per capita and access to improved sanitation facilities in rural and urban areas, Equatorial Guinea, 1990–2006



“Given the significant growth rate of the gross domestic product in the State party, the Committee is deeply concerned about the persistence of widespread poverty and the still large number of children who do not enjoy the right to an adequate standard of living, including adequate housing and other basic services.” (CRC Concluding Observations 2004)

The realization of the right to water is much lower than comparable countries

Despite having the highest GDP per capita in sub-Saharan Africa, only 45 percent of Equatoguineans living in urban areas have access to an improved water source, the lowest rate among urban populations in sub-Saharan Africa. In rural areas, where the majority of the population live, just 41 percent of the population has access to safe water.

Despite increased wealth, no progress in improving access to sanitation

Only 60 percent of Equatorial Guinea’s urban population and 46 percent of its rural population have access to improved sanitation facilities. There has been no progress in improving access to sanitation since 1990, despite the rapid rise in GDP per capita. This raises questions about the government’s commitments toward its obligations to progressively realize the right to water.

THE RIGHT TO EDUCATION

"[The Committee] is concerned that enrolment and literacy levels are still low, particularly in secondary and pre-primary education, and that there is a significant disparity between the number of boys and girls attending school. . . The Committee is also concerned about the lack of financial and material resources for the implementation of the educational programmes." (CRC Concluding Observations 2004)

Less than 60 per cent of Equatoguinean pupils finish primary school

Less than 60 per cent of Equatoguineans finish primary school. Meanwhile, more than 26 per cent of students have to repeat a year of school, a much higher rate than most sub-Saharan African countries. The majority of primary school teachers (51.5 percent) do not have the necessary training and qualifications to teach (UNDG 2006) which strongly suggests that Equatorial Guinea's children receive an education of inadequate quality, contributing to the failure to complete or the need to repeat school.

Stark gender disparities at secondary school level

Boys are almost twice as likely to enroll in secondary school as girls: for every 100 boys there are just 57 girls. This stark gender disparity raises questions about whether Equatorial Guinea is taking steps to challenge gender discrimination and ensure equal access to education for women and girls.

Marked regional disparities in women's access to education

There are marked disparities among provinces in the number of women who have never attended school in Equatorial Guinea. Almost 20 percent of women in the Centro Sur province have never attended school, compared to three percent of women in Bioko Norte. This raises questions about the state's efforts to address education needs in all areas of the country.

Figure 14

Repetition Rate, Primary (% of Total Enrollment), Sub-Saharan Africa, Latest Available Data

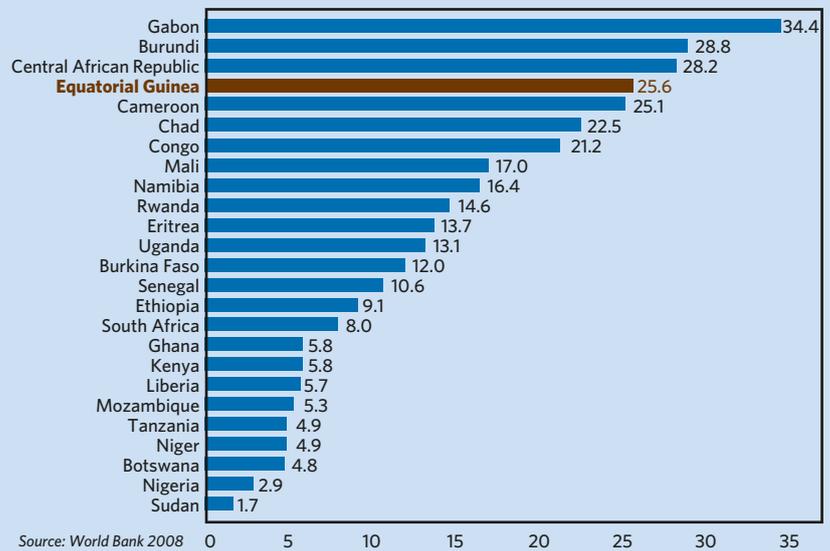


Figure 15

Secondary Gross Enrollment Ratios, Male and Female, Equatorial Guinea, 2002

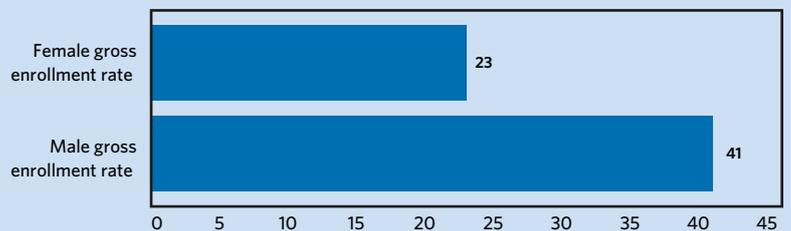
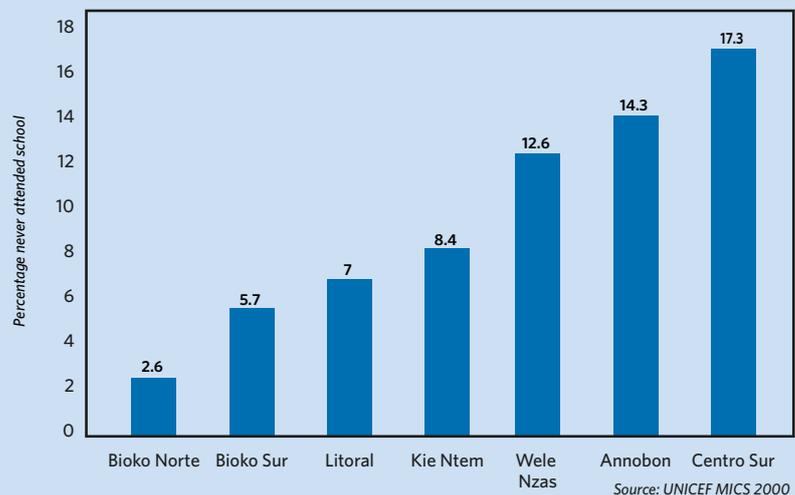


Figure 16

Women Who Have Never Attended School, Equatorial Guinea, by Region, 2000





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ABOUT CESR

The Center for Economic and Social Rights (CESR) was established in 1993 with the mission to work for the recognition and enforcement of economic, social and cultural rights as a powerful tool for promoting social justice and human dignity. CESR exposes violations of economic, social and cultural rights through an interdisciplinary combination of legal and socio-economic analysis. CESR advocates for changes to economic and social policy at the international, national and local levels so as to ensure these comply with international human rights standards.

Fuencarral, 158-1ªA
 28010 Madrid, Spain
 Tel: +34 91 448 3971
 Fax: +34 91 448 3980

162 Montague Street, 3rd Floor
 Brooklyn, NY 11201, USA
 Tel: +1 718 237-9145
 Fax: +1 718 237-9147

We invite your comments and feedback: ssanton@cesr.org

www.cesr.org

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About This Fact Sheet Series

This series is intended to contribute to the ongoing monitoring work of UN and other inter-governmental human rights mechanisms to monitor governments' compliance with their economic, social and cultural rights obligations. It is also intended to contribute to strengthening the monitoring and advocacy capabilities of national and international NGOs. Drawing on the latest available socioeconomic data, the country fact sheets display, analyze and interpret selected human development indicators in the light of three key dimensions of governments' economic and social rights obligations. Firstly, indicators such as maternal mortality or primary completion rates are used to assess the extent to which the population is deprived of minimum essential levels of the right to health, education, food and other economic and social rights. Secondly, data tracking progress over time can help to assess whether a state is complying with its obligation to realize rights progressively according to maximum available resources. Comparisons within the same region provide a useful benchmark of what has been achieved in countries with similar resources. Finally, data disaggregated by gender, ethnicity, geographical location and socioeconomic status is used to identify disparities and assess progress in eliminating discrimination and unequal enjoyment of these rights. The fact sheets are not meant to give a comprehensive picture, nor provide conclusive evidence, of a country's compliance with these obligations. Rather, they flag some possible concerns which arise when development statistics are analyzed and visualized graphically in light of international human rights standards.