Sustainable Development in Pre-Colonial, Colonial, and Post-Colonial Africa: Issues and Contexts

OLOPADE C.O. and N. KARA

The Center for Global Health, University of Chicago, Chicago, Illinois
Email: solopade@bsd.uchicago.edu, nkara@bsd.uchicago.edu

Abstract

Primitive, uncivilized, the Third World—these are current and common ways in which Africa is described. As the second largest and second most populous continent, Africa is consistently home to the highest ranked “failed states” along the global index. As compared to the rest of the termed “Third World,” including Asia and Latin America, Africa’s economies have been lagging behind in the race to becoming emerging markets. Yet Africa’s failure is waved away as fact, its foundation not often questioned. As Professor of Economics Paul Collier has addressed, a society can climb out of poverty unless it gets “trapped” (Collier, 2008). This paper will outline what has trapped African societies over a historical sketch of development in pre-colonial, colonial, and post-colonial contexts. Although Africa may be the ancient origin of human civilization, “civilization” has since been a concept rooted in and reused by the West. Thus, Africa’s true strength, its ingenuity for survival, must emerge from the shadows behind imperial discourse to successfully attain and sustain development.

Keywords: Sustainable development; “bottom billion;” ecological imperialism
Introduction

A Socio-historical sketch

Development in pre-colonial theory

Prior to European colonialism, Africa experienced a degree of development comparable to Western standards (Rodney, 1981). While the Middle Ages in Europe was marked by disease, fear, and oppression, African empires flourished. The Ghana Empire in West Africa, the earliest known empire of Western Sudan, was rich in culture and famous as a center of learning and trade. From about 750 to 1076, the empire thrived on trade of gold and salt, and was therefore known as the “Land of Gold.” The administration and taxation systems were further sophisticated for their time, leading to a well-maintained economy and monopoly over goldmines, with reinforcement by a large army (Green, 1998).

Similarly, the pre-colonial Mali, Mwanemutapa, Songhai, and Swahili Kingdoms were common stop points for merchants and traders—spanning across Arab, Persian, and Indian immigrant lines. Through commercial and cultural traffic, the east coast of Africa became important and strategic for investment. The region was able to reserve this leading status via an adept, hierarchical form of governance (Boon and Eyong, 2010).

Nigeria, too, cannot be forgotten, having had the Oyo and Benin Empires in the 14th and 15th centuries. Located in the savanna to the north of the forest, Oyo established itself as the exchange emporium for goods between the north and south—including rock salt, copper, textiles, leather goods, and horses from the north, as well as kola nuts, indigo, parrots, and cowries from the south. By the 17th century, Oyo had built a cavalry force that dominated western Yorubaland. Benin’s strength was its monarchy, with a complex structure of chiefs and palace officials presiding over the Edo-speaking peoples to the north and south, the area eastward to the Niger, the coast to Lagos, and part of present-day Ghana. Benin is additionally characterized by its bronze sculptures and door panels, which covered the royal palace.
Due in large part to European colonization, marked by a redesign of Africa’s economies to suit the needs of their colonizers, these once-prosperous polities are now viewed as “failed.” Beginning in the 15th century, rapid Western incursions brought Africa under capitalist purview. A wave of Enlightenment in the 1800s further led to human exploitation in Africa, as Western Europe demanded Africa’s raw materials to drive production and consumption. These Western modes of modernity slowly led to the subjugation of African societies, not only economically, but also socially and ecologically. Two of the most consequential illustrations of this come in the form of the slave trade and behaviours of “ecological imperialism” (Farmer et. al., 2014).

The slave trade represents one of the first crucial periods of unsustainable development in Africa. In the 17th century, European attention focused on black Africa, as early European and Native American slaves escaped and blended among the local populations. The first captured African slaves were then taken to North America to serve on labour plantations like those in Jamestown, Virginia, and Louisiana. Human traffickers from Portugal and neighboring European countries also came to West Africa in order to gather slaves for auction as chattel. Such auctions increased political and social instability, with kingdoms and city-states fighting wars to obtain captives.

By 1870, 11.4 million Africans were enslaved and transported across the Atlantic Ocean (Farmer et. al., 2014). The remaining locals were either the weak and old, or the very young, left to fend for themselves in light of family displacement and death—from slave raids and accidents across the Atlantic. African slaves also lost citizenship at home and were denied citizenship in the New World. Exporting Africans to build the economy of the Americas and fragmenting African civilizations at home led the West to call Africa a “backwards” and “savage” continent. In the eyes of Western political leaders, anthropologists, and missionaries, Africa was and still is a land to be educated, civilized, and evangelized.

A second frontrunner to unsustainable development in Africa has been termed “ecological imperialism”—which anthropologist Paul
Farmer has described as the exchange of organisms, triggered by exploration and conquest, that accounts for differences in disease susceptibility among the colonizers and those colonized (Farmer, et. al., 2014). Ecological imperialism involves the study of colonial medicine and occupation, in order to aid or threaten plans for imperial expansion. Sites of occupation, such as tropical African societies, served as laboratories that gathered test subjects for primitive medical strategies. This is where the term “tropical medicine” originates (Farmer, et. al., 2014). For example, colonial management ordered the continuous movement of people and livestock, orchestrating the sleeping sickness epidemics that struck East Africa during the 20th century (Lyons, 1992). Colonizers further propagated statistics to prove that the black body was better suited for labour in hot climates than the white body, so as to justify and institutionalize the slave trade, as well as solidify the label on blacks as “vectors of disease” (Farmer et. al., 2014). The imperial racial slurs of “uncivilized” and “unclean” have since endured among black African subjects.

**Development in post-colonial theory**

Yet even now, in the wake of sovereignty and as a curse of globalization, Africa’s development trajectory is worsening. With political, economic, social, cultural, and technological dimensions, globalization has easily enabled the interconnectedness of national boundaries and peoples (Croucher, 2004). Goods, services, people, ideas, and traditions can now be transmitted, fluidly, between country borders through various channels. As a result of such embedment, Western thought is subsuming dominant African cultures and values. Just as capitalism is understood as a mode of production, in order to make profits, globalization goes hand in hand with profit-maximization—evolving mechanisms for product distribution across national and socio-cultural borders.

Internal attempts for remedy have also proved futile in Africa, as it is the West that predominantly dictates the international development arena. Production is internationalized, communication is transformed by novel technology, and existing networks are reformed to bear the facilitation of new ones. The eight Millennium Development Goals (MDGs) and related Millennium Villages provide a precise example of
Sustainable Development in Pre-Colonial, Colonial, and Post-Colonial...

This notion. Built across 10 countries in sub-Saharan Africa, the MDGs aim to eradicate extreme poverty, achieve universal primary education, promote gender equality and empower women, reduce child mortality, improve maternal health, combat HIV/AIDS, malaria, and other diseases, ensure environmental sustainability, and develop a global partnership for development. Such promises, however, allow for disparate spheres of the ‘rich and powerful’ and the ‘poor and powerless’ to subsist, while African nations are “othered” in comparison to the West. Globalization is intended to aid the developing world to grow faster than the developed world, but is instead causing the bottom countries to fall further behind—resources are depleted by multinational corporations, capital flows outwards, and, consequentially, the local population and manpower migrates to Western lands for better economic opportunities.

Given healthcare as an example, the resources needed to provide adequate services to developing populations instead flow towards Western, developed lands. Sub-Saharan Africa bears up to 25 percent of the global burden of disease, despite having only about 3 percent of the world’s trained health workers to meet its needs and less than 1 percent of financial commitment to healthcare (Aid for Africa). Yet 95 percent of global research investment is directed at medical problems affecting only 5 percent of the world’s population, mainly in developed economies. This situation is worsened by the brain drain of African healthcare professionals who relocate to the United States and Europe in search of better employment opportunities. The net effect is two worlds growing apart in wealth creation and life expectancy.

Africa’s “Bottom Billion”

By 2000, Africa was home to about 70 percent of the world’s “bottom billion”—a phrase famously coined by Professor of Economics, Paul Collier (Collier, 2008). This term connotes the 60 such economies whose almost one billion residents experienced little, if any, income growth since the 1980s and 1990s. Despite receipt of international aid and support, these societies were unable to rise from impoverished conditions due to falling into the following four development “traps”: country conflict, being landlocked with bad neighbours, mismanagement of natural resources, and executing poor governance.
The idea behind the conflict trap is cyclical, in that civil war reduces income and low income increases the risk of civil war. Low income and low growth leads to a weak economy, which also renders the state weak and encourages rebel movements to acquire finances from resource exporters in return for future deals. Such indebtedness to outside commodity exporters heightens the chances for further civil wars, providing a territory outside government control in which illegal activities are conducted.

Similarly, when landlocked countries are dependent upon their neighbours, they can only become as wealthy as their neighbouring countries allow—each additional 1 percent that the neighbours grow usually raises a landlocked, dependent country’s growth by 0.7 percent (Collier, 2008). For example, although both countries rely on their neighbours for export and import, Uganda is poor and Switzerland is wealthy. While all countries should theoretically benefit in turn from the growth of their neighbours, Africa’s case is different. Africa’s landlocked countries have either had inward looking or world market oriented policies, accounting for zero growth spillover between their neighbours and landlocked countries. About 30 percent of Africa’s population live in landlocked and resource-scarce countries (Collier, 2008).

Societies at the bottom can often be rich in natural resources, however, and alternately fall into the natural resource trap. The discovery of valuable natural resources in an impoverished context can result in their misuse and, therefore, economic stagnation. Resource management is linked to government capacity, whereby an abundance of resources reduces the need to tax, erodes checks and balances, and disables electoral competition. Parties compete by voting through patronage, reducing the returns on investment. Intertwined with the economic climate is the poor governance trap. Should countries wish to increase growth, their governments must avoid doing civilian harm, enable an environment with moderate taxation, and provide a few transport facilities for export, so as to foster macroeconomic stability and an impetus for change.
Sustainable development: looking ahead to change from within

While it is valuable to understand Africa’s development trajectory and possible “traps,” pre- and post-colonialism, it is vital to extend the narrative further, in order to pursue positive action for a developed Africa. There is a new “bottom billion,” according to recent studies undertaken by the Center for Global Development. Most of the world’s poor no longer live in low-income countries. As of 2011, 72 percent of the world’s poor shifted to middle-income country status, with most of these countries in stable, non-fragile states (Chandy and Gertz, 2011).

Figure 1: Most of the world’s poor live in just a few countries
(Sumner and Kanbur)

Two decades ago, 93 percent of the world’s poor lived in low-income countries, though now the total number of low-income countries has fallen from 63 in 2000 to around 40 (Chandy and Gertz, 2011). Nigeria has graduated to be among these middle-income countries, but is still considered fragile. Since poverty reduction is still a priority, this transfer in country income status calls upon a need to reassess forms of official development assistance. Better governance and domestic taxation and redistribution policies are becoming more important than traditional forms of aid, as middle-income countries are less likely to need resource and monetary transfers over time. Instead, designing
coherent policies on remittances and migration, trade, climate negotiations, and tax havens would better direct equity and progressive, internal change. The poor often lack a voice, and in the frequent case in which governments also lack political will, supporting inclusive policy implementation among the media, social movements, and civil society organizations could also sustain development.

A relatively new term, “sustainable development,” denotes a method of resourcefulness, a method for recycling what one has had to create what one will have. It is a plan for social, economic, and environmental change to “meet the needs of the present generation without compromising the ability of future generations to meet theirs” (Boon and Eyong, 2010). Ideally, behaviours of sustainable development would involve using a nation’s current supply base to meet similar, generational needs (Boon and Eyong, 2010). Moreover, sustainable development is a long-term product of communication and cooperation among stakeholders, promoting inter- and intra-generational relationships. It does not “foul the air, nor poison the water, pollute and degrade land” (Weaver et. al., 1997). In line with this concept, Collier’s advice holds true and wise along the arduous path towards development: the West cannot rescue Africa. “The societies of the bottom billion can only be rescued from within” (Collier, 2008). In terms of redefining development assistance, there are four specific remedies with which countries can commence.

Monetary aid, diminishing returns, and healthcare dependency

Firstly, statistical evidence has suggested that monetary aid is subject to diminishing returns (Collier, 2008). So, although Africa’s countries may be receiving foreign aid, they are getting ‘less bang for their buck.’ When the amount of aid reaches about 16 percent of the Gross Domestic Product (GDP), it ceases to be effective (Collier, 2008). It has been suggested that technical aid, rather than solely monetary aid, may be more effective in implementing reform. This involves a government receiving aid in the form of skilled foreigners to work for it, funded by donor agencies (Collier, 2008).
Figure 2: Gross domestic product per capita for newly industrialized countries

South Korea and Nigeria had similar GDP per capita in 1960, but by 1975, the GDP per capita of South Korea was $1,310 while that of Nigeria was $360. In 2002, the GDP per capita of South Korea was $16,950 while that of Nigeria was $860. By 2007, the comparable numbers were $20,045 for South Korea and $1,158 for Nigeria. China had a GDP of $230 in 1975, $4,580 in 2002 and $7,800 in (Akinwande, 2007). Figure 2 summarizes the GDP per capita for newly industrialized countries—China, India, and South Korea—and some sub-Saharan African countries—South Africa, Ghana, and Nigeria—from 1990 to 2013. The question then has to be asked, why has the GDP per capita for South Korea and China moved rapidly, while the GPD per capita for Nigeria has not grown at a comparable rate?

Some have blamed the relative stagnation in growth on the failure to transform into a knowledge-based economy and shift the distribution of the labour force away from that focused solely on the production of primary commodities. There is a need to pivot to a new
economy that will expand manufacturing and develop secondary sectors through research in science and engineering. This would only be possible if the right science, engineering, technology infrastructure, and manpower existed to catalyze the development of a knowledge-based economy. Over a span of three decades, South Korea, China, and India invested significant resources in science and technology education to develop the work force, science and engineering research, and development infrastructure to drive a knowledge-based economy. These countries effectively migrated productive capacity from agriculture to sectors in which value is significantly added per capita. At the same time, Nigeria, and most other African countries, depended upon and effectively relegated themselves to the production of primary commodities, which are more susceptible to market conditions. As a result, there is no predictable income for the government to meet obligations to the people.

Zoning in on Nigeria’s context, it is the most populous country in Africa with the second largest crude oil reserves on the continent. Over a 30-year period, Nigeria received $280 billion in aid, which mostly supported oil revenue (Collier, 2008). Yet despite such monetary assistance, Nigeria underperformed: as of 2005, the average per capita GDP in Africa was $3,918, but only $1,400 for Nigeria. In 2006, the average infant mortality rate in Africa was 74 deaths per every 1,000, but 97 deaths per 1,000 in Nigeria. Furthermore, the average life expectancy as of 2006 in Africa was 53 years, but merely 47 years in Nigeria (Kaba, 2007).

Presently, even though Nigeria has managed to attain middle-income country status, with its GDP currently worth more than $500 billion—the largest in Africa—the country still has its fair share of unfair systems (Ohuocha, 2014). For instance, the World Bank has estimated that 95.7 percent of Nigeria’s health expenditure is out-of-pocket, meaning that it is paid for by households and individuals to health practitioners and suppliers (WHO). This system has grave consequences, especially now during West Africa’s largest, most severe, and most complex outbreak of the Ebola virus in history. Previous Ebola outbreaks have been contained by early detection and isolation, contact tracing and monitoring, and rigorous adherence to procedures for
infection prevention and control. Currently, however, more effective treatments and vaccines are needed to curb the epidemic.

On August 11th, 2014, the World Health Organization convened a consultation to consider the use of unregistered medical interventions, which have shown promising results among animals, but have not been tested for safety and effectiveness in humans. The conclusion was that it would be acceptable “on ethical and evidential grounds” to use these lab-based interventions for treatment or prevention, so long as there is transparency about care, fair distribution, patient confidentiality upon request, and that the data is collected and shared. The National Health Research Ethics Committee of Nigeria has also agreed that such treatment is ethical and legal for use without needing to submit an application for prior approval to the National, State, or Institutional Health Research Ethics Committee.

While this is a positive step towards combatting the Ebola crisis and would allow for more immediate attempts at treatment, we must remember that this decree was greatly delayed by two things: first, African countries’ deficiencies in government-funded healthcare, which has led to dependency upon US manufacturers for the ZMapp drug, and second, Farmer’s “ecological imperialism” is still in play, with the first three recipients of ZMapp having been from the West. If aid were to be better proportioned among a nation’s needs, underperformance and dependency could potentially be avoided.

Consequences of aid and lack of policy protections

A second remedy for development assistance is global acknowledgment that not all aid is good. Around 40 percent of Africa’s military spending is financed by monetary aid and the typical civil war is estimated to cost $64 billion (Collier, 103-105). Although a strong military is necessary to restore order, maintain post-conflict peace, and prevent coups, the militaries of low and middle-income countries often extort more money in the form of aid because the risk for coups in these countries is higher. Somalia’s context is relevant, as the country maintains a failed-state status due to government inefficiency, famine, disease, piracy, and frequent external intervention, while militant extremist groups consume monetary aid to instead finance conflict.
A third solution, at lesser cost than the previous two involves bolstering country laws and charters, in order to give them standing within the international arena and ensure that they outline concrete demands. If the language is clear and implementation certain, then societies may better follow codified norms among their interactions. Unfortunately, current political incentives promote staying in office over delivering rights, and laws that are written in the finest constitutions on the continent—South Africa being an example—rarely find robust defense among the ruling parties and ministries in Africa.

Lastly, Africa’s trade policies lack protections and securities. Composed of small, domestic markets with little to no internal or external competition, the rate of productivity growth hovers around zero. Yet local money is still spent to subsidize the production of crops, only to be used for global consumption—depleting domestic consumption—through liberal trade routes. A reform of aid, military, laws and charters, and trade policy could prove poverty-efficient, as beacons of hope and change that come from within and without external control.

Conclusion

As Dayo Olopade has so aptly written in her recent book, *The Bright Continent*, African creativity is born out of difficulty (Olopade, 2014). It is clear that Africa’s greatest strength over the centuries has been to invent methods for survival, proving that the tenacity and capacity to survive exists within and permeates through its communities. The “bottom billion” countries in Africa have managed to withstand collapsing infrastructure, corrupt bureaucracies, and costly civil conflicts. Africa has braved hunger, HIV/AIDS, malaria, and maternal mortality. And above all, Africa has picked itself up and dusted itself off each time it has been trodden upon as an open market. But Africa is not homogenous and should not be seen as such. Each distinct people from each unique polity carry with them a brand of resilience, cheek, and spirit that contributes to this greater survival. Should Africa wish to embark upon a path towards sustainable development, its people must pool together for progress, containing their ingenuity within country and continent borders.
There are two achievable investments African countries can make that would lead to more sustainable and developed national economies. Firstly, quality education deserves urgent priority. As examples, Nigeria’s average youth literacy rate by 2012 was only 66 percent. Furthermore, almost 70 percent of the 1.7 million children who took the West African Senior School Certificate examination in June 2014 failed—this is the lowest recorded rate, and is dismal and alarming. Such mediocrity in the pipeline cannot power a knowledge-based driven economy. Improvements in education, however, can be sought through aggressive investment in teacher training and curricula from the primary school level onwards, funding graduate education through research and knowledge creation, promoting excellence and scholarship in science and engineering, and linking academia to industry and policy implementation. Innovation is not possible without a strong focus on the sciences and expanding technology. Secondly, should African countries wish to be prepared at the onset of health outbreaks, individual governments must make more strategic investments in developing effective primary healthcare systems that provide basic health coverage for all citizens. University health systems that promote tertiary care and conduct rigorous health research require equal investment, so that countries are not left behind in the new world of personalized or precision medicine. The genetic makeup and environment in which one lives are key factors in determining how patients will be managed and how future treatments will be administered. Despite Ebola, chronic non-communicable diseases such as cancer, cardiovascular diseases, diabetes, strokes, and respiratory diseases are projected to be the leading causes of mortality and disability across the globe in the next 15-20 years. Africa cannot be caught unprepared. The time to invest in developing a comprehensive healthcare system with research capabilities is now.

While Africa is inventive, it does not need to reinvent. It could be beneficial for the continent’s countries to look to its global neighbours, not as replicas to imitate, but as nations that have similarly struggled and somehow risen. Newly industrialized countries like Brazil, Singapore, South Korea, and Vietnam have existing development frameworks, from which we can learn and work. Africa’s 1.1 billion do not merit being positioned towards the bottom. It is now up to Africans,
themselves, to look for ways to flip this orientation and reclaim the continent’s rightful height as the origin and innovator of human civilization.

References


“Statement on the use of innovative or non-validated medical treatment in Nigeria.” National Health Research Ethics Committee, Nigeria, August 9, 2014.


“World Health Day: How can Sub-saharan Africa have 25 percent of the disease burden but only 3 percent of the world’s trained health workers?” aid for Africa, April 6, 2012, http://www.aidforafrica.org/blog/world-health-day-how-can-sub-saharan-africa-have-25-percent-of-the-disease-burden-but-only-3-percent-of-the-worlds-trained-health-workers/.