FEEDBACK TUTORIAL LETTER

2ND SEMESTER 2020

ASSIGNMENT 1 & 2

Governance and Politics in Africa (GPA621S)
Course Name: GOVERNANCE AND POLITICS IN AFRICA
Course Code: GPA621S
Department: SOCIAL SCIENCES
Course Duration: ONE SEMESTER
NQF Level and Credit: LEVEL 7; 15 CREDITS

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Mrs N.N. Puleinge would like to use this opportunity to thank all Governance and Politics in Africa students for submitting Assignment 1. The overall performance is good but there is still room for improvement.

The following are common mistakes identified during marking:

- Most of the materials/ sources listed under the reference page are not cited anywhere in the body of assignment.
- Some students did not use neither the American Psychological Association (APA) nor Harvard referencing style, in text citation is not done correctly. Please all students must acquire the APA referencing manual.
• Some assignments papers do not contain a table of contents, introduction, Conclusion or Reference page.
• Practical and relevant examples are not provided by some students; therefore, general information about the topic was presented.

ASSIGNMENT 1 (MEMO)

The impact of health and nutrition on the lower-class society

The unequal distribution of power, money and resources also creates health inequities. Nowhere is this clearer to witness in Australia than in the fact that the richest 20% of the population can expect to live an average of six years longer than the poorest 20%.

Australians who are socially disadvantaged by income, employment status, education and place of residence, and Indigenous Australians, also have a higher risk of chronic diseases, such as diabetes, heart disease and cancers, and depression.

Things don’t have to be this way. Differences in health outcomes at the population level are not explained by genetic variation or because of some mythical deviant behaviour particular to people in lower social class groups. Indeed, the existence of systematic social differences in health outcomes show there’s something in our society creating an unequal distribution of opportunity to be healthy. These health differences are both avoidable and unfair.

Embracing complexity
People need the basic material requisites for a decent life, they need to have control over their lives, and they need a voice in decision-making processes and implementation of policy and programs that affect them. Economic and social policies generate and distribute political power, income, goods, and services. And who you are will affect your access to quality and affordable education and health care, sufficient nutritious food, good work and leisure conditions, among other things.

Together these factors constitute what determines your health and social health inequities. A first glance, the “social determinants of health” approach suggests that health inequities are produced (and prevented) by policies and actions within the health sector. The possible $6 co-payment for a visit to the doctor touted by the health minister, for instance, would undoubtedly affect lower income groups more than others.

But much of the responsibility of the social inequity that leads to different health outcomes lies elsewhere. Health is affected by policies in other sectors, such as education, taxation, transport, and agriculture too.

Education, for example, equips people with the resources needed throughout life to achieve a secure income, provide for family, and cope with disease. Children from poor backgrounds are more likely to do poorly in school and drop out early.

They usually grow up to be adults with lower incomes and are less empowered to provide good health care, nutrition, and stimulation to their own children. This is how disadvantage is transmitted through generations.

Decent work, including wages that reflect the real cost of living, is also important for health. Work can provide financial security, social status, personal development, social relations and self-esteem, and protection from physical and psychosocial hazards. In Australia, the wages of a worker in the bottom 10% of income earners has risen by 15% since 1975, while wages of people in the top 10% have risen by 59% in the same period. In 2009, the top 20 CEOs in Australia earned more than 100 times the average wage.
What’s more, the number of factors affecting health may be growing. Because we live in a rapidly globalising world, we now need to consider the effects of trade on lives and health as well. We need to ensure trade policy doesn’t undermine governments’ capacity to regulate in favour of health; and that deregulation of working conditions doesn’t widen the gap between good and poor quality jobs, which can be worse for health than no job at all. Australian data show adverse job conditions (high job demands and complexity, low job control, job insecurity and unfair pay) are worse for mental health.

A person’s social class has a significant impact on their physical health, their ability to receive adequate medical care and nutrition, and their life expectancy. While gender and race play significant roles in explaining healthcare inequality in the United States, socioeconomic status (SES) is the greatest social determinant of an individual’s health outcome. Social determinants of health are the economic and social conditions that influence individual and group differences in health status. Social determinants are environmental, meaning that they are risk factors found in one’s living and working conditions (including the distribution of income, wealth, influence, and power), rather than individual factors (such as behavioural risk factors or genetics). Social determinants can be used to predict one’s risk of contracting a disease or sustaining an injury and can also indicate how vulnerable one is to the consequences of a disease or injury. Individuals of lower socioeconomic status have lower levels of overall health, less insurance coverage, and less access to adequate healthcare than those of higher SES.

Optimal childhood growth and development rely upon proper nutrition. Some nutrient deficiencies in young children are relatively common. Up to 33 percent of children under 4 years old suffer from iron deficiency anaemia, according to Dr. Maureen Black of the University of Maryland School of Medicine. Sufficient iron helps ensure ideal learning, attention and memory, proper development of motor skills, appropriate emotional expression, and resilience to stress. Children who receive proper nutrition tend to be more energetic and playful and score higher on intelligence tests, according to Wisconsin's Early Childhood Excellence Initiative.
Max Weber’s view on ethnicity

An untitled draft found among Weber's posthumous papers was published. In English translation it was given the title ‘Ethnic Groups’. In the Max Weber Gesamtausgabe it is titled ‘Ethnic Communities’. In this manuscript, Weber treated the feeling of belonging together because of shared ethnic origin as a social construct, underlain by a desire to monopolise power and status. Subsequently, Weber determined to put an end to the use of collectivist concepts, but at the time of writing he treated groups as real entities, instead of using the concept of group as an aid in the explanation of behaviour. The causal connections in ethnic group formation and maintenance have been more closely identified in subsequent sociological analysis.

*Students should provide relevant examples throughout the discussion*
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Mrs N.N. Puleinge would like to use this opportunity to thank all Governance and Politics in Africa students for submitting Assignment 2. The overall performance is very good.

The following are common mistakes identified during marking:

- Some students did not use neither the American Psychological Association (APA) nor Harvard referencing style, in text citation is not done correctly. Please all students must acquire the APA referencing manual
- Some assignments papers do not contain headings, sub-headings, table of contents, introduction, Conclusion or Reference page.
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ASSIGNMENT 2 (Memo)

NEPAD’s four primary objectives are: to eradicate poverty, promote sustainable growth and development, integrate Africa in the world economy, and accelerate the empowerment of women. It is based on underlying principles of a commitment to good governance, democracy, human rights and conflict resolution; and the recognition that maintenance of these standards is fundamental to the creation of an environment conducive to investment and long-term economic growth. NEPAD seeks to attract increased investment, capital flows and funding, providing an African-owned framework for development as the foundation for partnership at regional and international levels.

In July 2002, the Durban AU summit supplemented NEPAD with a Declaration on Democracy, Political, Economic and Corporate Governance. According to the Declaration, states participating
in NEPAD ‘believe in just, honest, transparent, accountable and participatory government and probity in public life’. Accordingly, they ‘undertake to work with renewed determination to enforce’, among other things, the rule of law; the equality of all citizens before the law; individual and collective freedoms; the right to participate in free, credible, and democratic political processes; and adherence to the separation of powers, including protection for the independence of the judiciary and the effectiveness of parliaments.

The Declaration on Democracy, Political, Economic and Corporate Governance also committed participating states to establish an African Peer Review Mechanism (APRM) to promote adherence to and fulfilment of its commitments. The Durban summit adopted a document setting out the stages of peer review and the principles by which the APRM should operate; further core documents were adopted at a meeting in Abuja in March 2003, including a Memorandum of Understanding to be signed by governments wishing to undertake the peer review.

Status

Ever since it was set up there has been some tension over the place of NEPAD within the African Union, given its origins outside the AU, and the continuing dominant role of South Africa—symbolised by the location of the secretariat in South Africa.

Successive AU summits and meetings of the HSGIC have proposed the greater integration of NEPAD into the AU’s structures and processes. In March 2007 there was a "brainstorming session" on NEPAD held in Algeria at which the future of NEPAD and its relationship with the AU was discussed by an ad hoc committee of heads of state. The committee again recommended the fuller integration of NEPAD with the AU. In April 2008, a review summit of five heads of state Presidents Mbeki of South Africa, Wade of Senegal, Bouteflika of Algeria, Mubarak of Egypt and Yar'Adua of Nigeria met in Senegal with a mandate to consider the progress in implementing NEPAD and report to the next AU summit to be held in Egypt in July 2008.

Structure
The HSGIC to which the NEPAD secretariat reports comprises three states for each region of the African Union, with former President Obasanjo (Nigeria) as elected chair, and Presidents Bouteflika (Algeria) and Wade (Senegal) as deputy chairmen. The HSGIC meets several times a year and reports to the AU Assembly of Heads of State and Government. There is also a Steering Committee, comprising 20 AU member states, to oversee the development of policies, programs, and projects-this committee reports to the HSGIC.

The NEPAD Secretariat, now the NEPAD Planning and Coordinating Agency, is based in Midrand, South Africa. The first CEO was Wiseman Nkuhlu of South Africa (2001–2005), and the second Mozambican Firmino Mucavele (2005–2008). On April 1, 2009, Ibrahim Hassane Mayaki accepted the position as the 3rd CEO.[5]

The NEPAD Secretariat is not responsible for the implementation of development programs itself, but works with the African Regional Economic Communities- the building blocks of the African Union. [6] The role of the NEPAD Secretariat is one of coordination and resource mobilisation. Many individual African states have also established national NEPAD structures responsible for liaison with the continental initiatives on economic reform and development programs.

The eight priority areas of NEPAD are: political, economic, and corporate governance; agriculture; infrastructure; education; health; science and technology; market access and tourism; and environment.

During the first few years of its existence, the main task of the NEPAD Secretariat and key supporters was the popularisation of NEPAD's key principles, as well as the development of action plans for each of the sectoral priorities. NEPAD also worked to develop partnerships with international development finance institutions-including the World Bank, G8, European Commission, UNECA and others-and with the private sector.

After this initial phase, more concrete programs were developed, including:
• The Comprehensive Africa Agriculture Development Programme (CAADP), aimed at assisting the launching of a 'green revolution' in Africa, based on a belief in the key role of agriculture in development.

• The Programme for Infrastructure Development in Africa (PIDA), which comprises numerous trans-boundary infrastructure projects in the four sectors transport, energy, water, and ICT, aimed at boosting intra-African trade and interconnecting the continent.

• The NEPAD Science and Technology programme, including an emphasis on research in areas such as water science and energy.

• The "e-schools programme", adopted by the HSGIC in 2003 as an initiative to equip all 600,000 primary and secondary schools in Africa with IT equipment and internet access within 10 years, in partnership with several large IT companies. See NEPAD E-School program

• The launch of a Pan African Infrastructure Development Fund (PAIDF) by the Public Investment Corporation of South Africa, to finance high priority cross-border infrastructure projects.

• Capacity building for continental institutions, working with the African Capacity Building Foundation, the Southern Africa Trust, UNECA, the African Development Bank, and other development partners. One of NEPAD's priorities has been to strengthen the capacity of and linkages among the Regional Economic Communities.

• NEPAD was involved with the Timbuktu Manuscripts Project although it is not entirely clear to what extent.

Total Marks: 100 %

End of Feedback Tutorial Letter