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EDITORIAL

The AIDS epidemic in developing countries became a leading topic on the international scene in 2001. When the multi-national pharmaceutical companies dropped the court case against South Africa to stop it importing generic drugs, and the WTO conference in Doha authorized local productions under a compulsory licensing system (for Brazil and India), this seemed to indicate a new awareness of the massive scale of the humanitarian catastrophe. In this context, the WHO report co-ordinated by Jeffrey Sachs urged the international community to face up to its responsibilities and show that "*globalisation can be put to the service of all mankind.*"

But 2002 is not living up to these promises. In spite of millions of deaths throughout the world each year and an alarming increase in the numbers of orphans, the Global Fund set up to fight against AIDS (and the two other major killers in developing countries, malaria and tuberculosis) has to date only received firm pledges for contributions of 2 billion dollars, out of the 10 billion originally promised. Treatments are available, but are far too expensive for most of the countries concerned, particularly in Africa. It is quite unacceptable to go on limiting international intervention to support for national information and prevention campaigns, as is mainly the case at present. With immediate effect, aid programmes must be targeted on lowering costs of imported treatments, improving patient care facilities and offering more support to families and orphans.

This will unfortunately not be enough. Whatever we do, the AIDS epidemic will still be with us in ten years and even in twenty years time. It is therefore urgent and absolutely vital to draw up long term programmes to use the available funds in a rational manner and target the most badly hit populations. Another imperative, if we are to fight the virus more effectively and stop it from spreading, is to obtain more information about the populations concerned. More generally speaking, a better assessment of the long term economic and human impact of AIDS will help us identify the most appropriate aid policies.

The first phases of DIAL's research on the case of Côte d'Ivoire confirm that improving the basic information on AIDS is a precondition in Africa, and that it is seriously lacking at present. The study presented here is, to our knowledge, the first to establish a link between the distribution of AIDS and income. Using a micro-simulation model, it combines micro and macro-economic aspects that other studies tend to treat separately. The results qualitatively agree with those obtained by the other studies concerning the considerable impact of the epidemic on households (in terms of income and employment), together with a more limited macro-economic impact, even in terms of income distribution.

The conclusions call for further empirical analyses based on direct information, and also for an assessment as to whether or not they are applicable to other countries. In this perspective, one of the major priorities for the international community should be to set up a vast data collection programme, including HIV tests in the scope of representative surveys.

The AIDS epidemic in the world and in Africa

The AIDS epidemic first appeared at the end of the 1970s. At the end of 2001, 40 million people around the world were already seropositive, that is contaminated by the HIV virus. Africa is by far the worst hit, with 70% of the total. In this article, we look at the economic impact of AIDS on the African continent. In the first part, we explain that the standard macro and micro-economic studies often suffer from a lack of data on the prevalence of the virus, making their findings most uncertain. The second part looks at the case of Côte d'Ivoire. We present the results of a study made with a micro-simulation model combining both the macro and micro-economic approaches. The study found that AIDS has little impact on the average per capita income, or on income inequalities and income poverty.

The economic impact of AIDS in Africa

Over twenty years after the first cases appeared, the epidemic is spreading very quickly in Sub-Saharan Africa, with over 4 million more people infected every year. UNAIDS estimates that AIDS was responsible for 2.4 million deaths in this region in 2001, whereas around 17 million people have died from AIDS since the start of the epidemic. 13 million children have already lost their mothers or both parents due to AIDS. Southern Africa has been most badly hit, with HIV infection rates of over 20% in the 15-49 age range. Life expectancy rates at birth are estimated to have fallen by 20 years in these countries due to the illness. In Eastern and Central African countries, the rates of infection vary between 8 and 16%, and life expectancy rates have fallen by 7 to 15 years. Côte d'Ivoire is the worst hit country in Western Africa, with around 11% of the population infected; men's life expectancy at birth fell to 47 years in 1995-2000, compared with 55 years had AIDS not existed. Political mobilisation is growing in most countries, although often still too slowly. Programmes are focused on prevention, with communication campaigns and distribution of condoms, and on the fight against mother-to-child transmission, for which effective treatments are available at lower cost than for adult treatments.

Data on the AIDS epidemic in Africa is sorely lacking. First, purely medical knowledge about how the virus is transmitted is still limited (behaviour of the two types of virus, HIV1 and HIV2, virus mutations, co-factors in propagation such as STDs, probability of infection from non-protected sex, etc.).

The dynamics of AIDS

Most epidemiologists now believe that the HIV virus (Human Immunodeficiency Virus), discovered in 1983, is the vector of AIDS although there are several conflicting theories on its appearance. AIDS is a fatal illness for which no vaccines or curative treatments are available at present. AIDS does not kill people directly, but destroys their immune defence systems and makes them vulnerable to a number of so-called opportunistic illnesses, such as the main one in Africa, tuberculosis. Some drugs taken separately or combined with others (tri-therapies) can slow the development of the illness and make it more bearable. But the cost of anti-retroviral therapies and the associated medical examinations is still very high indeed.

The virus is transmitted sexually, by blood and also by breast-feeding. In developing countries, particularly in Africa, the epidemic is mainly transmitted by heterosexual intercourse and from mother-to-child, whereas in Europe and North America it is mainly transmitted by homosexuals and drug-addicts (drugs taken by intravenous injection). In Africa, its demographic impact can be compared with the Black Plague that killed a third of the population of Europe in the 14th century. But its epidemiological dynamics are completely different. The plague can be transmitted very quickly by mere contact and breaks out very rapidly, whereas the HIV is transmitted less easily and has a very long incubation period, averaging about ten years. In the same way that relatively simple rules of hygiene help protect against the plague, the use of condoms completely eliminates the main risk of being infected by AIDS. The result is that the AIDS epidemic is spread regularly over a long period, but its dynamics can either explode or implode depending on the extent to which a population changes its behaviour and when this change takes place. For instance, after fifteen years of prevention campaigns that began quite early on, Uganda seems to have managed to reduce the prevalence of HIV in pregnant women by over a half. On the contrary, it is still increasing rapidly in other countries such as South Africa.

On the demographical level, most of the national prevalence rates are calculated from blood tests carried out at prenatal consultations. The estimations are therefore based on a sample of the pregnant women who go to consultations, which is

not representative of pregnant women (in some countries such as Côte d'Ivoire, prenatal consultations are quite common, but in others this is not the case), nor of women in general, and even less so of men. Quality control on the data collected and adjustment methods are still in their infancy. Forecasts for the long term dynamics of the epidemic should therefore be taken with great caution, not only because they are based on fragile data, but also because the epidemic is relatively recent (fifteen or twenty years) compared with the virus' incubation period (ten years). UN forecasts give a relatively optimistic view for most African countries, with life expectancy rates starting to grow slowly from 2005, but it is impossible to know today whether this will prove true.

Beyond its impact in terms of health and demography, the AIDS epidemic obviously has enormous economic and social consequences, in the medium and long term. Any assessment of the long term impact, for example in terms of education, is highly dependent on the demographical projections, although their robustness is not proven. On the other hand, for the medium term, i.e. around 2005-2007, the main economic consequences can be studied in a less uncertain manner. Existing literature broadly offers two types of research: macro-economic studies from applied models and micro-economic studies based on household surveys.

The macro-economic studies attempt to assess the impact of AIDS on growth. The main factors retained are the slowing down in growth of the working age population, the drop in productivity for sick people at work, and the fall in savings and investment due to the increase in private and public spending on health. Some studies also focus on the shortage of certain categories of qualified workers, including teachers, and its long term impact on human capital accumulation. Given the many uncertainties weighing on the basic data and the hypotheses of the models used, the results in terms of loss of growth are given in a very wide range, from 0.3 to 2 percentage points per year. Generally speaking, the models' level of disaggregation is too rough to provide a serious assessment of the impact of AIDS in terms of poverty.

The micro-economic studies seek to assess the consequences of an individual's infection in terms of loss of income and additional expenses incurred by his or her household. From a methodological standpoint, these studies still often have problems with selection: small cohort, lack of representativeness, no control group (households not touched by AIDS), lack of control over time (even when there is a control group, no double differences). These studies are therefore mainly indicative and in fact their results vary widely.

Spatial and temporal extrapolation also raises great difficulties.

Existing studies always suffer from a lack of representative statistical data on the prevalence of the virus. From a theoretical point of view, a large number of factors such as living standards, social standing and spatial mobility can be put forward as generating differences in sexual behaviour and the formation of couples, leading to a heterogeneity of risk of HIV infection and/or death from AIDS. And yet, on an empirical level, practically no information is available on the differential risks relating to place of residence, level of education or profession, except qualitative sources which are often anecdotal. Common knowledge has it that the HIV virus is more widespread in urban areas, but there is little tangible proof to back this up, and the distribution of the virus may vary with the age of the epidemic. A certain number of professions also seem to be particularly exposed, such as lorry drivers, miners, seasonal workers, soldiers or primary school teachers, but once again the data is far too vague for us to be able to extrapolate on it.

The impact of AIDS on income distribution and poverty in Côte d'Ivoire

The research carried out by DIAL on the impact of AIDS in Côte d'Ivoire consisted in an original solution to difficulties encountered by macro and micro-economic studies, obtained by combining the two scales of analysis with demo-economic micro-simulation techniques.

First, the Demographic and Health Surveys (DHS) carried out in 1994 and 1994 were analysed with respect to the three main variables in the transmission of the HIV virus on an individual level, namely (i) the number of sexual partners, (ii) condom use and (iii) the presence of AIDS infection in the family circle. Due to the lack of direct data on individuals, the study is still subject to a number of reservations. However, after examining a number of variables, it is possible to conclude that the epidemic is relatively evenly distributed on a national scale.

In its current state of maturity, the epidemic does not seem to be characterised by the existence of statistically identifiable high risk groups. Although relatively uniform, the risk of HIV infection is slightly higher as the level of education rises. Better educated individuals tend to have more sexual partners, and this risk factor is only partially compensated for by more frequent use of condoms. The risk of infection seems to vary slightly with the place of residence, but in different ways for different age brackets, as it is higher amongst young people in towns and higher amongst old people in the country. Finally, the risk of individual deaths varies little with the size of a household, but this means that extended households are more

likely to be affected by AIDS than smaller ones. Micro-econometric modelling of the risk of infection can be used to draw up tables of AIDS mortality based on the socio-economic variables available in the surveys (level of education, place of residence, marital status, etc.), respecting UN projections by gender and age.

A demo-economic micro-simulation model was then built giving population and income distribution projections for Côte d'Ivoire over the 15-year period from 1993-2007. This dynamic micro-simulation model provides an econometric formalisation of the main demographic events: marriage, fertility, formation of households, migration, mortality, labour supply choices and formation of individual and household income. A wide range of statistical data was used to draw up the econometric estimations and calibrate the model (1). The model starts from an excellent representative survey of living standards carried out in 1992/1993 and goes through to 2007, building up a detailed picture of the population of Côte d'Ivoire for each year. Applying a labour supply and income model also helps identify income distribution and the main inequality and income poverty indicators. Three variations were simulated: (i) without AIDS, (ii) uniform epidemic where AIDS mortality risk depends only on the individuals' gender and age, and (iii) a heterogeneous epidemic where risk depends on previously identified variables (level of education, place of residence, marital status, size of household). Cluster effects were also introduced (when an individual in the household is infected, there is a higher risk of contamination for the other individuals, by hetero-sexual transmission and mother-to-child transmission).

The results of the simulations brought to light the complex interactions between demographic and income formation processes that were often neglected in previous studies. The epidemic seems to be equally present across the income spectrum. Mainly due to the effects of age, and secondarily to heterogeneity, it is slightly more frequent among relatively richer poor people. Quite surprisingly, survivors are faced with limited reductions in income. The most striking result of the simulations is the small variation in dependency ratio, that is the relationship between the working and non-working members of the household. Two main factors explain this result: first, the AIDS epidemic affects a large number of non-working young people (children, students, urban unemployed), particularly in extended households; second, it causes a drop in birth rates due to deaths of women of child-bearing age. Cluster effects increase the impact of each of these main factors. The study therefore challenges the

common idea that AIDS increases the dependency ratio as it affects individuals of working age. Not taking into account the other macro and micro-economic impacts considered by the previous studies, the AIDS epidemic will apparently reduce the size of the Côte d'Ivoire economy by 8% over 15 years, but will have little impact on average per capita income, income inequalities and poverty. On a micro-economic level, if we take into account the fall in labour activity and productivity due to the illness and the health expenditure incurred by the households concerned, the diagnosis is obviously more pessimistic in terms of poverty. On a macro-economic level, if we take into account a fall in public and private investment and a corresponding decrease in labour demand, the diagnosis is once again more dramatic. Further research and other simulations will be done on these two aspects in the future.

Denis Cogneau et Michael Grimm

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(1) DHS Surveys (1994 and 1998), population censuses (1988 and 1998), EIMU migration survey (1993), permanent living standards surveys (1993 and 1998).

Missions and participation in conferences, first semester 2002

Belgium

Jean-Pierre Cling, **Mireille Razafindrakoto** and **François Roubaud** presented the collective work "Les nouvelles stratégies internationales de lutte contre la pauvreté" (published by Economica under their direction) to the European Commission in Brussels (15 May).

Flore Gubert and **Anne-Sophie Robilliard** took part in the conference on food security organised by AEDES-IRAM in Brussels (4 June).

Bénin

Constance Torelli went on a mission from 28 February to 15 March, for the "informal sector" section of the PARSTAT project.

Burkina Faso

Michel Grimm gave executives training on micro-simulations on behalf of GTZ (German development co-operation agency) and helped construct a model designed to analyse the distributive impact of tax reforms (25 May – 2 June).

Sandrine Mesplé-Somps went on a mission on behalf of the ODI, for a study on using program-budgets as budget policy instruments to fight against poverty (23 June – 5 July).

Burundi

Mireille Razafindrakoto went on a mission to Burundi from 24 to 27 April, for the "Parliamentarians in the field" project, co-organised by the network of MPs and the World Bank.

Cameroon

Alain Brilleau went on two missions (10-25 January and 27 May-12 June) to support preparations for a nationwide 1-2-3 survey.

Central African Republic

Alain Brilleau studied the feasibility of setting up an observatory to fight against poverty (3-17 March).

China

Michel Kagan (4-13 June) and **Constance Torelli** (23 May-2 June) went to China as part of a launch programme of pilot 1-2-3 surveys.

Côte d'Ivoire

Denis Cogneau, **Michael Grimm** and **Sandrine Mesplé-Somps** presented at ENSEA, from 21 to 27 January: the book "L'économie ivoirienne: un modèle remis en cause"; the article "La dynamique de la pauvreté urbaine sur 15 ans"; and research on the micro-economic impact of AIDS. They also gave students training on analysing poverty and income dynamics by the micro-simulation method.

Michael Grimm went to the World Bank in Washington to give classes on micro-simulation techniques (19-24 February).

France

Jean-Pierre Cling, **Mireille Razafindrakoto** and **François Roubaud** presented the collective work, "Les nouvelles stratégies internationales de lutte contre la pauvreté", to the French Development Agency (AFD) (26 March), the Ministry for Foreign Affairs (DGCID) (22 May) and at the conference of Development Agencies organised by the AFD and the World Bank in Paris (14 June).

Jean-Pierre Cling was discussant at the conference co-organised by the French Ministry of Foreign Affairs, the OECD Development Centre and "Passages" magazine, on "Taxation of foreign direct investment in developing countries" (28 January). He also opened the debate at a seminar organised by the French international relations institute (IFRI) in Paris on World Inequalities, and spoke at two conferences organised by the association "Confrontations" on the theme "Trade, Development and Poverty" (12 February) and the results of the Monterrey Conference (12 April).

Denis Cogneau and **Michael Grimm** presented a paper analysing the impact of AIDS in Côte d'Ivoire using a micro-simulation model, at a DELTA seminar (3 April).

Flore Gubert presented a paper on "Ceux de Kayes. L'effet des transferts des immigrés sur leurs familles" at a seminar on Development Economics at Toulouse I University (25 April).

Denis Cogneau, **Charlotte Guénard** and **Constance Torelli** presented an article at the seminar "Accumulation de la richesse, inégalité et croissance dans la longue période" organised at ENS-INRA-Paris-Jourdan (8-9 February).

Mohamed Ali Marouani gave a class on computable general equilibrium (CGE) model techniques at the Centre International des Hautes Etudes Agronomiques Méditerranéennes in Montpellier (25-28 March).

Sandrine Mesplé-Somps gave a class at CERDI, Clermont-Ferrand, on measuring and analysing poverty, as part of the "Economic Policy Management" programme (14 February).

Gilles Spielvogel presented an article, "Une modélisation des fonctions des villes dans les pays en développement: l'émergence des villes", at the economic geography seminars at CERDI (15 March) and Pau University (2 – 4 May).

At the conferences on applied micro-economics in Rennes and Saint Malo (6-7 June), **Charlotte Guénard** and **Sandrine Mesplé-Somps** presented their article: "What has happened to the urban population in Côte d'Ivoire since the 1980s? An analysis of monetary poverty and deprivation over 15 years of household data"; and **Philippe De Vreyer** and **Sandrine Mesplé-Somps** presented a paper on "Consumption growth and spatial poverty traps: a theoretical and econometric analysis of the effect of social services and community infrastructure on living standards in Peru".

Gabon

Mireille Razafindrakoto presented the collective work "Les nouvelles stratégies internationales de lutte contre la pauvreté" on 7 June in Libreville.

Germany

François Roubaud took part in a seminar in Munich, organised by the European Commission, the GTZ (German development co-operation agency) and the Munich Centre for Economic Statistics on the theme "Measuring democracy and good governance" (20-23 January). In Berlin, he was rapporteur for a round table, "Methods for assessing good governance and democracy" (27 and 28 May), part of a seminar entitled "Assisting Good Governance and Democracy: a learning Process. Reflections on Development in Africa", organised by the German Ministry for Development Co-operation, the GTZ and IDEA.

Michael Grimm and **Charlotte Guénard** gave classes on measuring poverty and inequalities, at the Munich Centre for Economic Statistics (2 - 3 April).

Anne-Sophie Robilliard presented a paper on the impact of the financial crisis on poverty in Indonesia, at the Development Research Centre in Bonn (15 April).

Great-Britain

Jean-Pierre Cling, **Mireille Razafindrakoto** and **François Roubaud** presented the collective work "Les nouvelles stratégies internationales de lutte contre la pauvreté" at the Overseas Development Institute (ODI) in London (28 February). They then went to Oxford for meetings with the Centre for the Study of African Economies (CSAE) (1 March).

Flore Gubert and **Anne-Sophie Robilliard** presented an article at the CSAE conference "Understanding poverty and growth in Sub-Saharan Africa", in Oxford (18-19 March).

Indonésie

Anne-Sophie Robilliard ran a training workshop on CGE models, in collaboration with IFPRI, as part of a project financed by the World Bank.

Italy

Michel Kagan went to Rome from 6 to 8 February, to present 1-2-3 surveys to the representatives of 9 Mediterranean countries benefiting from the MEDSTAT programme.

Mali

François Roubaud and **Constance Torelli** ran a seminar organised by Afristat to analyse the initial findings of the 1-2-3 surveys in seven WAEMU capitals (3- 15 June).

Maroc

Michel Kagan went on a mission to the Institute of Statistics in Morocco to back up his research on the informal sector (20-29 May).

Mexico

François Roubaud presented a paper, "Indicators and diagnosis on human rights: The case of Torture in Mexico", to the *Comision nacional de los derechos humanos* (3-5 April).

Niger

Alain Brilleau took part in a mission from 20 to 28 June with an expert from Afristat, for the "informal sector" section of the PARSTAT project.

Norway

Jean-Pierre Cling, **Mireille Razafindrakoto** and **François Roubaud** took part in the World Bank's ABCDE conference in Oslo (24-26 June). Mireille Razafindrakoto presented their collective work, "Les nouvelles stratégies internationales de lutte contre la pauvreté", at a round table on PRSPs chaired by François Roubaud.

Peru

Javier Herrera and **David Rosas** took part in a study commissioned by the World Bank and the FAO on the evolution of poverty in the Sierra (2-30 January).

Javier Herrera and **François Roubaud** ran a seminar organised by the *Secretaria general de la Comunidad andina* at which F. Roubaud presented a paper, "Medir la gobernalidad, la democracia y los derechos humanos: el aporte de las encuestas de hogares" (10-12 April).

Senegal

Alain Brilleau took part in a workshop in Dakar, organised by AFRISTAT and the UNDP, on the preparation of a support programme for monitoring PRSPs and implementing the Millennium Declaration (9-10 May).

Spain

Michael Grimm went to Bilbao for the European Society for Population Economics conference (13-15 June) and presented a paper on "Socio-economic status, sexual behaviour, and AIDS mortality risks differentials. Theory and application to Côte d'Ivoire."

Togo

Jean-Baptiste Gros went to Togo to study the export processing zone in Lomé on behalf of the World Bank (3-14 June).

Uganda

Jean-Pierre Cling went on a mission for the "Parliamentarians in the field" project, co-organised by the network of MPs and the World Bank (15-18 April).

USA

Jean-Pierre Cling took part in a conference organised by the World Bank and the IMF on PRSPs (Poverty Reduction Strategy Papers) from 14 to 17 January.

Working papers published in the first semestre 2002

All these papers are available on our site: www.dial.prd.fr/

Grimm M.: *"Modéliser les trajectoires démo-économiques des individus et des ménages dans un pays en développement à l'aide d'un modèle de microsimulation dynamique. Application pour la Côte d'Ivoire."*, March, **Ref.2002-01.**

Micro-simulation is a very powerful instrument for evaluating the distributive impact of macro-economic shocks. This document develops a dynamic model able to account for the temporal dimension of macro-economic shocks and their interaction with demographic change. Using a wide variety of data sources, the model simulates the main demo-economic events, such as mortality, nuptiality – taking into account assortive mating – household formation, fertility, national and international migration, school enrolment of children, expenditure and generation of household income. The dynamics of the model are analysed by comparing the reference simulation with simulations under alternative hypotheses of demographic behaviour.

Cogneau D., Grimm M.: *« The distribution of AIDS over the population in Africa. Hypothesis building from individual answers to a Demographic and Health Survey with an application to Côte d'Ivoire. »*, March, **Ref.2002-02.**

Lack of knowledge about risk differentials regarding AIDS seriously hampers the study of the economic impact of AIDS in developing countries, at both the macro and micro-economic levels. In this paper, we derive what we consider reasonable assumptions on mortality risk differentials by age, education and other individual characteristics obtained from the Demographic & Health Survey for the Côte d'Ivoire. These differentials are then calibrated on the United Nation's demographic projections to obtain disaggregated mortality tables. One of the main results of our model is that educated people have a higher risk of dying of AIDS, because they tend to have more sexual partners. However, this effect is partly offset by a more frequent use of condoms compared with less educated people.

Cogneau D., Guénard C.: *« Les inégalités et la croissance : une relation introuvable. »*, January, **Ref.2002-03.**

This work takes a new look at the econometrics of the national-level macro-economic relationship between inequality and growth. It particularly focuses on the effects of specification choices, estimation method and sample selection.

It concludes that there is no robust relationship between income inequality and growth in per capita product or capital and human investment. There appears to be more grounds for an inverse causal relationship, in keeping with the Kuznets curve philosophy. Whatever the case may be, the national development strategies and structural and historical configurations of each society still play a major role in determining concurrent changes in income and its distribution.

Antoine Ph.: *« L'approche biographique et ses possibilités pour l'analyse des systèmes de genre. »*, April, **Ref.2002-04.**

This text focuses above all on methodology. It aims to demonstrate a number of possibilities offered by a biographical analysis of gender-related issues. Based on biographical data relating the sequence of events concerning matrimony, professional activity and housing in three African cities, the paper studies the various changes that have an impact on the lives of men and women in a dynamic framework. The situation of women and their role in society does not follow a single pattern, even in Africa. Men and women enter adult life in different ways: whereas men begin their working lives before marriage, each of the three cities proposes a different scenario for women. In Dakar, women appear to be mainly limited to reproduction. In Yaoundé, the most common practice is for women to marry before they begin to work, and to give birth to their first child at a later date. In the third case, Antananarivo, work precedes any of the other events.

Antoine Ph.: *« L'approche biographique de la nuptialité. Application à l'Afrique. »*, April, **Ref.2002-05.**

A wealth of information can be obtained by analysing nuptiality using biographical methods (questionnaires and analytical methods). Such methods help us trace the evolution of given phenomena, but also to explain the evolution and understand the relevant demographic, economic, social and even legislative factors involved. This article describes the difficulties involved in perceiving the matrimonial life cycle, the methodology for data collection and the analysis of biographical data. The main finding obtained from the research in Dakar was the major impact that the labour market crisis had on training and the dissolution of unions. Although the type of activity has no impact as such on the marriage rate, or on divorce or emancipation, periods of unemployment

do play a major role: unemployment considerably slows down marriages and accelerates divorces.

Antoine Ph.: « *Les complexités de la nuptialité : de la précocité des unions féminines à la polygamie masculine en Afrique.* », April, **Réf.2002-06.**

Evolutions in matrimonial behaviour reveal profound changes in society. Current transitions in nuptiality in African cities can be mainly accounted for by the increase in schooling for girls, but also by growing economic difficulties that tend to weaken traditional systems governing social life. Transitions in nuptiality concern the age at which unions are entered into, but also the entire dynamics of matrimony, including changes in the age differences of spouses, marriage breakdowns, etc. This study particularly underlines the complexity of polygamy, which is more frequent in West Africa than in the other regions of the continent. A number of changes have taken place within African societies in recent years. In particular, deepening economic difficulties have led to a marked increase in the average age for first marriages, and unions have become more fragile. These changes can result either in an evolution in the practice of polygamy, or in changes to the other factors. If the age difference on marriage is reduced, polygamy can only be maintained by a corresponding growth in definitive male celibacy. On the other hand, giving up polygamy would have an enormous impact on how these societies are organised and run, especially as this would challenge men's power over women, and elder people's over younger people.

Adjamagbo A., Antoine Ph.: « *Le Sénégal face au défi démographique.* », April, **Réf.2002-07.**

Senegal has experienced a period of demographic transition in the past few decades, due to significant progress in lowering mortality rates, increasing life expectancy and reducing fertility rates. Beginning with the urban educated classes, the trend is now visible amongst less educated people and is gradually spreading to rural areas. However, the population is still growing very rapidly and will double in the next 25 years if the current trend continues. The demographic transition took place in a climate of intense economic and social change. Senegal is currently characterised by the interaction of these demographic events and other phenomena such as growing urbanisation, worsening employment conditions, structural adjustment and increasing poverty. Political measures taken at the end of the 1980s to curb population growth have not fully proved their worth, and, although the main impact

is doubtless still to come, the government will continue to face growing demands for action on the social front.

Mesplé-Somps S.: « *Quelques réflexions sur la situation économique et sociale africaine et les politiques économiques préconisées par le NEPAD* », April, **Réf.2002-08.**

The New Partnership for Africa's Development (NEPAD) is an initiative by five African Heads of State (South Africa, Nigeria, Egypt, Algeria, Senegal) to look at ways and means of enhancing development. Our study starts with a rapid review of the economic situation in Africa, pointing to aspects such as the poor economic policy choices made in the 1970s and 1980s, the lack of financial and human capital resources, mediocre productivity from production factors and unfavourable trade specialisation. We also question the way the markets operate, the role offered to state structures and the social and distributive crisis mainly resulting from structural adjustment programmes. We then go on to assess the pertinence of some of the economic policies recommended by the NEPAD: i) with respect to the regional dimension, and the questions this raises in terms of the sovereignty of African States and their responsibilities, ii) to the financing of the initiative and iii) to the very limited importance given to social policies and poverty reduction.

Cling J-P., Razafindrakoto M., Roubaud F.: « *La Banque mondiale et la lutte contre la pauvreté : tout changer pour que tout reste pareil ?* », May, **Réf.2002-09.**

The World Bank and the International Monetary Fund launched a joint initiative at the end of 1999 setting the fight against poverty at the heart of their development policies. Since then, developing countries wishing to apply for financial aid from these organisations at preferential rates or for debt relief under the enhanced HIPC (Heavily Indebted Poor Countries) Initiative, are required to draw up PRSPs (Poverty Reduction Strategy Papers). Nearly all low-income countries are now engaged in this process, and the approach was also quickly adopted by the entire international community. Without neglecting the numerous difficulties and contradictions involved, our analysis underlines the major contributions made by the new strategies: first, a change in policy (at least in principle), as poverty reduction is given priority over structural adjustment; second, a potential strengthening of democracy through the participatory processes used for defining policies; and third, increased coherence between donors.