

4th Wits/Brown/Colorado/APHRC Colloquium
on Emerging Population Issues
Nairobi, Kenya, May 21st – 25th, 2006

Dear Colleagues,

On behalf of the African Population and Health Research Center (APHRC), I wish to welcome you to the **4th Annual WBCA** (University of Witwatersrand, Brown University, University of Colorado and APHRC) **Colloquium** in Nairobi, Kenya. We have worked together with all WBCA partner institutions to develop a program for the next 3-4 days that we hope will be both exciting and practical and offer us unique opportunities to deepen our collaborations.

One of the key highlights of this year's colloquium is a round-table discussion with external participation on *Strengthening Doctoral Level Training in sub-Saharan African Universities: Modalities, Constraints and Challenges*. We are particularly delighted by the level of interest this roundtable has generated among leaders of academe in the region and the opportunity it offers the Colloquium partners to interact with these significant others. Given the range of experience and expertise represented in our Colloquium, we have no doubt that, together, we will contribute in a meaningful way to this discourse. It is my sincere hope that the activities of this colloquium will not only enrich individual scholarly development, but will also lead to new collaborations and comparative work, and strengthen future research and training collaborations among scholars in our various institutions.

Nairobi and Kenya offer a host of opportunities for sightseeing and non-academic pursuits. We hope you will take a moment to enjoy some of these. Our staff will be on hand to provide any assistance or help you may require. May I take this early opportunity to wish you a pleasant and memorable stay in Nairobi. *Karibuni sana.*

Sincerely,

Alex Ezeh, Ph.D.

Executive Director, APHRC

Dear Colleagues,

We are delighted to all be together again for the 4th Wits-Brown-Colorado-APHRC Colloquium, the first in Nairobi, Kenya and the first hosted by APHRC. As in the past, the goals of the Colloquium are fourfold:

- ◆ to inform the group of ongoing research, recent findings, and plans for the future;
- ◆ to provide opportunity for discussion geared toward developing new collaborations;
- ◆ to strengthen advanced academic training in demography and population studies in sub-Saharan Africa; and
- ◆ to extend and strengthen our academic partnerships.

To serve these goals the Colloquium is designed to encourage both formal and informal discussions among participants; and we ask you to present very briefly – only 10 minutes with a few slides. We would like you to focus on the questions you are addressing; the data you are currently using or acquiring; and the questions on which you would welcome advice.

If you have a paper on which your presentation is based that you would like to make available during the colloquium, please email it or give the file to Lilian Okoth (lokoth@aphrc.org) and she'll do her best to make copies available. With your permission, we will also make presentations and/or papers available on the Colloquium website for downloading at a later date (please email these to jill.williams@colorado.edu upon your return home). The address for this website is: <http://www.colorado.edu/ibs/aps/colloquia.html>.

The Organizing Committee:

Alex Ezeh, JC Fotso, Lilian Okoth, Julia Ombasyi (APHRC)
Steve Graham, Jane Menken, Enid Schatz, Jill Williams (CU)

Program

Sunday, May 21: Arrival: Airport to the Grand Regency Hotel

Monday, May 22:

- 08:45 – 12:00: Field visit to the NUHDSS (Pick up at hotel)
- 12:00 – 14:00: Lunch (Fairview Hotel)
- 14:00 – 16:00: Visit to APHRC's office
- 17:30 – 19:00: Opening session & Cocktail (Grand Regency)

Tuesday, May 23:

- 09:00 – 10:30: Session 1: DSS Data Use: Challenges & Opportunities (Presentations 1-5)
- 10:30 – 11:00: Tea/Coffee break
- 11:00 – 12:30: Session 2: Migration, Urbanization & Social Networks (Presentations 6-10)
- 12:30 – 13:30: Lunch
- 13:30 – 15:00: Session 3: Marriage, Fertility & Reproductive Health (Presentations #11-16)
- 15:00 – 15:30: Tea/Coffee break
- 15:30 – 17:15: Session 4: HIV/AIDS (Presentations 17-22)

Wednesday, May 24:

- 09:00 – 10:30: Round-table discussion 1: *Strengthening Doctoral level Training in sub-Saharan African Universities: Modalities, Constraints and Challenges*
- 10:30 – 11:00: Tea/Coffee break
- 11:00 – 13:00: Round-table discussion 1 (Cont'd)
- 13:00 – 14:00: Lunch
- 14:00 – 15:30: Session 5: Economics of Health & Education (Presentations 23-27)
- 15:30 – 16:00: Tea/Coffee break
- 16:00 – 17:30: Session 6: Innovations in Data Collection and Use (Presentations 28-32)
- 18:30 – 22:30: Group dinner and entertainment

Thursday, May 25:

- 08:30 – 10:30: Round-table discussion 2: *Deepening effective collaboration in research, training and academic development: Going beyond the annual colloquium*
- 10:30 – 11:00: Tea/Coffee break
- 11:00 – 13:00: The Way Forward: Commitments for Action
 - Wits – Stephen Tollman
 - Brown – Mark Pitt & Michael White
 - CU – Jane Menken
 - APHRC – Alex Ezeh
- 13:00 – 14:00: Lunch
- 14:00 – onwards: Free time until departure

OPENING SESSION & COCKTAIL: MONDAY, MAY 22, 17:30-19:00

Welcoming remarks:

Alex Ezeh - APHRC
Jane Menken - CU
Mark Pitt - BROWN
Steve Tollman - WITS

Response:

Lawrence Ikamari - Population Studies and Research Institute (PSRI), University of Nairobi, Kenya
Richard Muga - National Coordinating Agency for Population and Development (NCPD), Kenya -

Overview of the Colloquium:

Jean Christophe Fotso - APHRC

SESSION 1: TUESDAY, MAY 23, 09:00 – 10:30

DSS DATA USE: CHALLENGES AND OPPORTUNITIES

DISCUSSION LEADER: ELIYA ZULU

1. Challenges and Strategies of Managing an Urban DSS: A Case Study of the Nairobi Urban Health and Demographic Surveillance System (NUHDSS)

Kennedy Otsola, APHRC

Zewdu Woubalem, APHRC

The importance of effective management of data collection to improve data quality has been acknowledged. Management of data collection is complex in the sense that it involves interactions between the study population, field staff and researchers. Maintaining scientific standards and designing feasible field operation strategies to smoothly run data collection activities are real challenges. These challenges become more complex in longitudinal research designs where frequent visits to the same respondents are required. Often such studies suffer from a high level of fatigue, refusal and attrition of individuals and households. The limited experience available in running an urban DSS restricts the sharing of experiences in addressing these problems. Moreover, because most DSS sites in the world are rural-based, lessons learnt from these sites are not adequate for emerging urban DSS sites. Focusing on experiences from the NUHDSS, this paper seeks to identify and document the challenges of longitudinal data collection in urban informal settings and APHRC's response to these challenges. The NUHDSS was set up in August 2002. Numerous procedures and strategies have been implemented to mobilize the study population and run the DSS. Weekly field reports are compiled to document work progress and challenges faced in actual data collection activities. This paper reviews reports prepared since the commencement of the DSS and the minutes of a series of DSS meetings held since then for the purpose of summarizing and reflecting on experiences obtained from running an urban DSS. The results demonstrate a unique pattern in the NUHDSS: converse to common expectations in longitudinal surveys, we see a diminishing trend of respondent fatigue, an increasing trend of field staff morale, a continued improvement in data quality and an increasing support of the DSS initiative by the study population.

2. Realities of Formal Schools in the Slums of Nairobi and the Lure to Informal Schools

Chi-Chi Undie, APHRC

Frederick Mugisha, APHRC

In 2003, the Kenyan government launched a Free Primary Education (FPE) policy, which propelled a notable increase in school enrolment. The country's capital city of Nairobi, however, lagged behind the rest of the nation with an enrolment rate of 62% compared to 104% gross enrolment rate country-wide. Links have often been made between Nairobi's poor enrolment rates and the high proportion of children living in the city's slums. In this paper, we use a case-study approach to examine slum-based informal primary schools as a site of remarkable creativity in which parents, teachers, and administrators attempt to bridge implementation gaps between educational policy and local realities in the informal settlements of Nairobi, Kenya. Drawing on audio-taped in-depth interviews with parents, pupils, and school personnel, and longitudinal and demographic data from one slum setting, the paper thickly describes reasons behind the local popularity of cost-incurring, informal schools in the slums of Nairobi among a low-income population despite Kenya's recently introduced FPE policy. The paper employs an emic perspective for understanding poor formal school enrolment among the urban poor and informal schools as a 'third space' of empowerment for slum-dwellers.

3. Making a DSS “Training” Database

Enid Schatz, University of Colorado

Benjamin Clark, University of the Witwatersrand

Jill Williams, University of Colorado

Creating an anonymised, user-friendly database from longitudinal census data collected and stored in a relational data-base is a challenge. The Agincourt team has begun to explore ways of making Agincourt data available to students at the University of the Witwatersrand. In the past, students had to access Agincourt data in the same way as researchers, by submitting a proposal and requesting a tailored data set. This put undue burdens on both the student (who was unlikely to be able to articulate such a plan without ever handling the data) and on the Agincourt Team (who had to dedicate time and energy to extract and fashion each tailored data set separately). In order to make Agincourt data more accessible to students at Wits (and eventually more broadly available), Enid Schatz, Benjamin Clark and Jill Williams have been working together to design, build and document a 1 in 10 sub-sample of households from Agincourt to make available to advisors, students, and, eventually, more broadly. The tool being designed is a SQL viewer that will both provide pre-made “views” (flat files) and the opportunity for users to create their own tailor-made data sets. The tool also includes a person-year calculator and the ability to create different age-groupings and period-groupings in order to restrict the data output. Because the database only contains 1 in 10 households from the site, anyone working off this database must request a full tailored data set, thus creating a relationship with Agincourt, and rerun all analyses before publishing the work.

4. Assessing the value of Scientific Research Feedback to Rural Communities in Agincourt after 10 years of Demographic Surveillance

Mildred Shabangu, University of the Witwatersrand

Enid Schatz, University of Colorado

Rhian Twine, University of the Witwatersrand

In 1992 the Agincourt Health and Demographic Surveillance System was established in a former ‘homeland’ of South Africa to examine demographic and health transition in an area where vital registration was poor. Like most demographic surveillance systems, households in the community are visited regularly by fieldworkers to elicit information on health and demographic events. Given the role of the community in the provision of the required data, it is imperative to develop and maintain a good working relationship with this community. Key to this relationship in Agincourt are annual community feedback meetings. The results of scientific activities conducted in the site are used to help communities understand the health and social issues affecting them, to empower the community through this knowledge, and to help them plan development activities. This paper discusses the usefulness of community feedback meetings as a means of disseminating research findings and outgrowths of this program. To assess the value of these meetings, documentary analysis was conducted on annual reports written on the community feedback sessions of 2001-2005. The reports were analysed to review the changes in methods used to conduct the community feedback meetings; categorise and note changes in the questions asked by the community members in each meeting; and note suggestions and comments from community members who were interviewed at the end of each community feedback meeting. The documentary analysis revealed that attendance at community feedback meetings improved over the first years observed, but then declined in 2004 and 2005. Although attendance declined, people’s understanding of research findings improved. This active engagement with targeted community leaders in interrogating research data and its possible use in development has led to a new arm of the DSS, LINC. The LINC office (Linking Research with the Community) aims to help communities benefit more from the research undertaken.

5. Enrollment rates in Nairobi and the achievement of universal primary education by 2015: The value of a demographic surveillance system

Charles E. Epari, APHRC

The second millennium development goal calls for achieving universal primary education (UPE) by 2015 by ensuring that children everywhere, boys and girls alike, will be able to complete a full course of primary school. Progress towards UPE is monitored by primary school enrolment, survival rates to grade 5 and youth literacy rates. Available data show that for 2003, Nairobi posted a 55.7% net enrolment ratio for its public primary schools, 71.6% for boys and 41.6% for girls. While this paper seeks to document primary school enrolment ratios in Nairobi’s slum and non-slum areas as an indicator for the progress being made in these settlements towards the achievement of UPE by 2015, it also highlights the value of a demographic surveillance system (DSS) in generating data appropriate for this purpose. We use household longitudinal data from the Nairobi Urban Health Demographic Surveillance System (NUHDSS) for both slum and non-slum settlements with respect to children aged 6-13 (the official primary school-going age) to show trends in enrolment ratios before and after the introduction of free primary education in Kenya in 2003. Although both slum and non slum areas indicate an upward trend in net enrolment ratios for the period 2000-2005, results show the slum areas as having consistently lower gross, net and age specific enrolment ratios compared to non-slum settlements. Despite steady improvement, there is variation in the enrolment ratios within the informal settlements. Since the slum communities post lower enrolment ratios compared to the non-slum areas, it is imperative upon stakeholders in education, both at national and local level, to bridge this gap and provide equitable opportunities and interventions for slum children to fully participate in education if children in slum settlements are to meet the 2015 goal.

SESSION 2: TUESDAY, MAY 23, 11:00 – 12:30
MIGRATION, URBANIZATION & SOCIAL NETWORKS
DISCUSSION LEADER: MARK LURIE

6. Shaping Urban Futures in an Era of Migration: Human Mobility and Poverty in Africa's Globalizing Cities

Loren Landau, University of the Witwatersrand

Movements of people are transforming Africa's urban centres. Although visible and widely politicised, we know little about how urbanisation and international migration are affecting African cities' socio-economic and political composition. Based on secondary and primary sources, this paper conceptually explores potential relationships between mobility and urban poverty. In doing so, it draws particular attention to issues of security, public health, economic investment, urban planning, and political accountability. It argues that as cities are increasingly empowered to lead local development initiatives, they must reconsider models of urban planning and poverty reduction in ways that account for human mobility. This means reconceptualising sedentarist understandings of urban community to include people who do not—and will not—see their city of residence as their home. Doing otherwise risks heightening health and security risks, infrastructure degeneration, corruption, and poverty.

7. Migration, Social Networks and Development in South Africa

Holly Reed, Brown University

I will present my dissertation proposal along with some preliminary results from the quantitative analysis for the dissertation. The research will use a mixed methods approach to investigate the relationship between rural-to-urban migration, social networks, and development in South Africa, particularly as it relates to the changing socio-political context. Using nationally-representative survey data on migration among black South Africans (from the 1999-2000 South African Migration and Health Survey), I will examine how patterns of internal migration have changed and/or persevered since democratization and what the key social, political, and economic determinants of migration have been in different time periods. I will also explore if and how migrants form and maintain social network ties in their origin and destination communities. The quantitative aspect of the research will give guidance to further qualitative research to explore the mechanisms through which migrants create and use social networks. I plan to conduct in-depth interviews with migrants in at least two communities of Johannesburg in the fall of 2006. These interviews will illuminate how migrants use social networks as resources to improve their living standards, to find jobs and housing, to send remittances to their rural families and communities, and to participate in community associations and broader political processes. Ultimately, this dissertation will contribute to a fuller understanding of historical changes in migration patterns in South Africa, contribute to the empirical literature on internal migration and social networks in transitioning societies, and add to our understanding of the inter-linkage between processes of migration and development.

8. Health and Social Policy Implications of Changing Population Settlement Patterns, in Particular Migration and Urbanisation, in South Africa's Rural Northeast

Mark Collinson, University of the Witwatersrand

Stephen Tollman, University of the Witwatersrand

Kathleen Kahn, University of the Witwatersrand

South Africa is experiencing an increasing rate of urbanisation. To understand the policy implications of these changes planners are given data by province and rural/urban classification. This does not allow an adequate analysis of settlement type as a factor impacting on health and social development. The aim of the study is first to present a more refined view on urbanisation for policy makers, moving beyond the rural-urban dichotomy and provincial classification systems; and second to discuss the impact of migration and urbanisation on population health and well-being. We conduct a multilevel analysis of migration and changing settlement patterns, at national, sub-provincial and household levels. The analysis uses two data sources, namely the Census 2001 of Statistics South Africa and the Agincourt Health and Demographic Surveillance System of the University of the Witwatersrand. The findings can be summarized as follows: the metropolitan populations are growing from migration, but not all the growth is permanent. Strong links exist between a large proportion of city and rural dwellers. These may be unusually enduring due to the history of segregationist settlement policies of the past and the entrenched patterns of labour migration. Small towns emerged as key development nodes in the urbanisation process. National level reporting tends to obscure the reality of the temporary migration. There can be unexpected negative effects of this highly important social phenomenon in the domains of health, household or district-level economics and family unity. For example, it is affirmed in scientific literature that temporary migration is associated with increasing incidence of HIV infection in southern Africa and other parts of sub-Saharan Africa. Policy initiatives should focus on creating alternatives to temporary migration and enhancing the public sector response to poverty and burden of disease. Attention should be paid to the needs of temporary migrants and their families.

9. The Role of Social Networks in the Aging Process of the Urban Poor in Nairobi

Salome Wawire, Brown University

In the 1960s, many African countries began to experience an upsurge in rural-urban migration, most of which was driven by the opportunity for wage employment and trade in expanding urban economies. Since the 1980s, these countries have been experiencing a downturn in their economic performance, yet rural-urban migration has continued to increase. As such, many cities in sub-Saharan Africa have been unable to cope with their growing populations, and slums and shanty towns have become common features of these cities, and home to many migrants from rural areas. While the migrants are mainly young, many of those who migrated and settled in the cities in the 1960s are now old. The existence of the older people in these settlements raises a number of issues that are unique to slum settings and reflect the changes in demographic and social situations in sub-Saharan Africa. In the face of urbanization/modernization, cultural expectations and norms that have for long guided the care for the elderly in a community have changed. However, they still play a role in determining ways in which the elderly live and interact with other members of the community. Social support networks, especially the family, are important in organizing and fulfilling the elderly individual's needs. But with the ongoing changes in developing countries' social and economic contexts; and changes in the family and its roles, the social support system for the elderly has been affected. Using qualitative data collected from two slums in Nairobi, this paper examines the kinds of social support networks that exist and the role they play in the lives of the elderly in a multicultural, poor urban environment. In particular, the paper explores the elderly individual's kinship ties with both rural and urban kin, living arrangements, interactions with both elderly and younger individuals in the slums, and their participation in community-level social activities. Further, the paper examines the gender dynamics in these social interactions. Understanding these issues will shed light on the general well-being of this marginal group in an already marginalized slum community.

10. Individual Pursuits and Community Ties: New Theory and Evidence on Remittances in Western Kenya

Nancy Luke, Brown University

Remittances from international and internal migrants serve as significant sources of income for origin communities. In sub-Saharan Africa, such support has increased in importance in recent decades, as rural households suffer from declining agricultural output and the burden of caretaking for ill relatives and orphans in light of the HIV/AIDS epidemic. Although urbanization is thought to alienate migrants from traditional community beliefs and institutions, such alienation appears to be rather weak in Africa, and past research has found that migrants maintain strong ties to their rural places of origin. Nevertheless, cities boast new attractions that migrants could not otherwise find or afford in their rural homes. Much research has considered nonmarital sexual relationships as particular "individual pursuits" that African men engage in the city, and recent attention has focused on men's involvement in the exchange of money and gifts for sex as a major factor fueling the continuing HIV/AIDS epidemic. These nonmarital sexual partners may compete for migrants' attention and resources, which could reduce remittances sent to rural relations. This paper investigates the conflicting notions of individual pursuits and community ties as determinants of remittances. We use data collected from male Luo migrants in Kisumu, Kenya, a city that is the site of a mature HIV/AIDS epidemic. The survey gathered information about remittances to rural families and communities, ties to rural households and kinship groups, and involvement in nonmarital sexual relationships and the financial transfers given to these partners. Preliminary results find that 88% of male migrants remitted to their rural families in the last year, and 66% sent financial transfers to their rural communities. Family remittances made up 25% of migrants' yearly incomes of those who remitted and 6% of yearly incomes went to rural communities. Transfers to sexual partners were substantial and made up 19% of men's income of those who gave a transfer.

SESSION 3: TUESDAY, MAY 23, 13:30 – 15:00

MARRIAGE, FERTILITY & REPRODUCTIVE HEALTH

DISCUSSION LEADER: SUSAN SHORT

11. Change in Marital Prospects Following a Wealth Shock: A Flood Protection Embankment and the Marriage Market in Bangladesh

A. Mushfiq Mobarak, University of Colorado

Randall Kuhn, University of Colorado

Christina Peters, University of Colorado

Marriage is an important socio-economic institution in South Asia. Research has documented that conditions of marriage such as dowries, consanguinity, early marriage or spousal age gaps can affect life outcomes for women and their children. However, research on the determinants of these conditions of marriage has remained relatively sparse, and is largely descriptive. Since a variety of determinants (such as the bride's health status, education or income) can co-vary with each other and with other unobservable characteristics, drawing causal inferences has been difficult. This paper uses the construction of a flood protection embankment in the Matlab district in rural Bangladesh to address these issues. Using data from the Matlab Health and Demographic Surveillance System and Matlab Health and Socioeconomic Survey, we examine whether marital prospects for

protected households improved after embankment construction, relative to unprotected households. We show that protected households commanded larger dowries, married into families with more land and were less likely to marry biological relatives after embankment construction, relative to those that remained unprotected. Estimates based on the subset of families with multiple marriages on either side of the embankment (where we can include household fixed effects) indicate that the same family is 33% less likely to marry a child to a biological relative after they are protected by embankment, compared to those who married prior to embankment construction. Marrying consanguineously reduces the need for dowry payments, which seems to be the main mechanism driving this result. Changes in socio-economic status following embankment construction do not seem to affect age at marriage or spousal age gaps, which is supportive of some descriptive accounts of marriage markets in rural Bangladesh that suggest that social norms regarding the "proper age" at marriage are relatively inelastic.

12. Violence against Women (VAW) and Sexual and Reproductive Health Outcomes: A Proposal for Research among Slum Dwellers in Nairobi, Kenya

Johannes John-Langba, APHRC

Chi-chi Undie, APHRC

Joanna Crichton, APHRC

Researchers and policy makers alike have increasingly cited violence against women and gender inequalities as essential determinants of women's poor sexual and reproductive health outcomes in sub-Saharan Africa. However, little is known about the sexual and reproductive health impact of violence among vulnerable women in poor urban informal settlements and the level of unmet need for health services among survivors of violence. The proposed research is a three-year study aimed at understanding the linkages between violence against women and sexual and reproductive health outcomes among women in the slums of Nairobi, Kenya. It will also explore the ways in which the impacts of violence are mediated by gender roles and expectations. This study will employ a prospective research design by utilizing longitudinal data from the Nairobi Urban Health and Demographic Surveillance System (NUHDSS) that is being routinely implemented by the African Population and Health Research Center (APHRC) in the Korogocho and Viwandani slums of Nairobi. Additional data will be collected through the incorporation of nested modules into the NUDSS routine data collection system. Quantitative and qualitative data collection methodologies will be employed to generate the required data on a yearly basis.

13. Fertility Patterns Among the Never Married Women in Kenya

Latifat Ibisomi, University of the Witwatersrand

Clifford Odimegwu, University of the Witwatersrand

This study examines trends in the fertility of never-married women in Kenya by their background characteristics and associated factors. We use data on women aged 15-49 who have ever given birth from the 1989, 1993, 1998 and 2003 Kenya Demographic and Health Surveys (KDHS). Bivariate analyses of respondent background characteristics, contraceptive use and fertility variables by marital status were carried out. Multivariate logistic regression models examined the magnitude of the associated variables while controlling for others. The results show that in general, childbearing among never-married women is decreasing in Kenya and that there is variation in its incidence and prevalence. The odds of the incidence and prevalence of births among never-married women were found to be higher among respondents ages 15-19; in Nairobi Province, educated; living in urban areas; Catholic; in the domestic/services job category; and using no method of contraception. This study has implications for policies and programmes that are designed to reverse the current upward trend in fertility in Kenya. Further studies on never married fertility incorporating qualitative data and exploring the marriage intention of respondents are recommended.

14. Sharing the Burden of Death: Implicit Family Insurance, Mortality Shocks and Fertility and Child Health

Olumide Taiwo, Brown University

This paper studies the network effects of kinship-based informal insurance on fertility and child health. Using demographic data from Malawi and exploiting differences between patrilineal and matrilineal kinship in the composition of family network groups, this paper finds that the death of an adult in an insurance network significantly reduces fertility through the substitution effects of orphans on the demand for children. With discrimination against orphans in human capital investment and on-farm labour supply, regression results suggest positive effects of orphans on child health, but these are still subject to econometric investigation. However, the fertility effects found in the paper imply that household demand decisions are not independent of insuring network effects when formal insurance markets are missing.

15. Preliminary Findings from the Jimma Longitudinal Family Survey of Youth (JLFSY), Ethiopia

David Lindstrom, Brown University

The Jimma Longitudinal Family Survey of Youth (JLFSY) is a collaborative study conducted by the Population Studies and Training Center, Brown University and the Department of Population and Family Health, Jimma University. The purpose of the study is to document how youth develop aspirations, life strategies and plans, and to identify individual, family and community resources that lead to successful early life course transitions and factors that contribute to risky behaviours. The survey uses a

household questionnaire that is conducted with the household head and spouse of the head, and an adolescent questionnaire that is conducted in a separate session with one randomly selected adolescent boy and one adolescent girl from the household. The household interviews are conducted once a year and the adolescent interviews are conducted every six months. Eligible adolescents are age 13-17 at the start of the study and will be followed for 5 years. The JLFSY includes approximately 3,500 households and 2,100 adolescents in the city of Jimma (southwestern Ethiopia), three nearby towns, and the rural areas adjacent to the towns. Interviewing for first round of household and adolescent questionnaires is now complete. In this session I will describe the study design and research infrastructure that has been created for this project, and I will present preliminary results from the first round.

This abstract will not be presented, it is included as information

16. Using Relationship Calendars to Improve Sexual Behavior Data among Kenyan Couples

Nancy Luke, Brown University

Shelley Clark, McGill University

Eliya Zulu, APHRC

Throughout sub-Saharan Africa, adolescent girls and young women engage in risky sexual behaviours that lead to poor reproductive and sexual health outcomes. The period from adolescence to early adulthood is characterized by the formation, evolution, and dissolution of diverse types of relationships with male partners—from one-time encounters to marital unions—coinciding with similarly complex changes in sexual behaviours and risk. Survey data on sexual behaviours within these diverse partnerships tend to be quite limited, however, and continue to suffer from measurement error, including recall and social desirability biases. New data collection approaches are urgently needed to improve both the scope and the quality of these data. This presentation describes a new collaborative project that will test two innovative methods to meet these aims: First, a *matched partner data set* will be created by interviewing a random sample of women (aged 18-24) and men (aged 18-29) in Kisumu, Kenya, and by refining a strategy to recruit and interview their recent (in the last year) *marital and non-marital* sexual partners. Second, a new survey method, the *Relationship History Calendar (RHC)*, will be designed, which collects detailed, retrospective data on the romantic and sexual relationships of female and male respondents for up to 10 years prior to the survey. Respondents and their matched sexual partners will be randomly assigned to receive the experimental RHC instrument or a comparison standard Sexual Partnership Questionnaire (SPQ), such as the one used in the Demographic and Health Surveys, thereby allowing the assessment across instrument type and by sex of respondents. Fieldwork will take place in summer 2007. The ultimate goal of the project is to provide researchers with proven methods to collect highly contextualized, time-varying data. These data can be analyzed to understand how relationship histories and couple dynamics affect the sexual risk behaviours and extremely poor reproductive health outcomes of young women and men in sub-Saharan Africa.

SESSION 4: TUESDAY MAY 23, 15:30 – 17:15

HIV/AIDS

DISCUSSION LEADER: NYOVANI MADISE

17. Assessing the Impact of Male Circumcision as an HIV Intervention Strategy

Samuel Clark, University of Washington

Jeff Eaton, University of Washington

Several observational studies over the last 15 years in southern and eastern African countries have identified lack of male circumcision as a risk factor for female-to-male HIV-1 transmission. More recently, laboratory studies have demonstrated that the inner surface of human male foreskin is highly susceptible to HIV-1 infection, having four times as many CD4⁺ target cells as the female cervix and a controlled clinical trial found that circumcised males are 60% less likely to contract HIV compared to uncircumcised males. However such an individual level effect does not guarantee the efficacy of male circumcision as an intervention method at the population level. As interventions often have a large upfront cost but only expect returns several years in the future, the target and scale of the program must be carefully chosen. Only through population level modelling can the impact of various intervention programs be accurately assessed. We use the Structured Population Event History Simulator (SPEHS), a stochastic simulation model of an HIV epidemic in a sub-Saharan African population, to investigate the impact of circumcision-based interventions on population HIV prevalence. In particular we seek to (i) define the subpopulation of males in which a circumcision-based intervention is most effective, (ii) identify the threshold number of circumcisions in order produce a substantial decrease in HIV prevalence, and (iii) assess the indirect effect of a male circumcision intervention on HIV incidence and prevalence in women and children.

18. The Addis Ababa Mortality Project: mortality surveillance based at burial sites for monitoring the population-level impact of antiretroviral treatment

Georges Reniers, University of Colorado

Tekebash Araya, Addis Ababa University

Yemane Berhane, Addis Ababa University

Vital registration-type data will become an essential tool for monitoring the HIV/AIDS epidemic in the years to come. Following the introduction of antiretroviral treatment (ART), HIV prevalence data increasingly convolute the extent of the epidemic and the success in providing treatment and are thus no longer informative. Population level trends in AIDS mortality are the ultimate standard against which to judge the efficacy of treatment programs, but these data are notoriously difficult to obtain for resource-poor settings. Ethiopia is no exception. The Addis Ababa Mortality Project (AAMP) is centred on an ongoing surveillance of burials at all cemeteries in Addis Ababa. The burial surveillance has been operational since 2001 and is an important urban observatory in sub-Saharan Africa for assessing mortality trends, and hence, the impact of ART. Other data collected under the auspices of the AAMP include verbal autopsy interviews (carried out for a random sample of burial records) and a surveillance of hospital deaths that were subsequently linked with cemetery records. In this contribution, we present some of the methodological issues involved in the burial surveillance and discuss how AAMP data have been used in the past and what other research opportunities they offer. We finish with an illustration of estimated trends in adult AIDS mortality over the 5 year period since the initiation of the burial surveillance. Of particular interest is the impact of a governmental ART program that was introduced via a co-pay scheme in the summer of 2003.

19. Migration and HIV/AIDS in Mozambique: Exploring myth and reality

Inês M. Raimundo, University of the Witwatersrand

Data on the HIV/AIDS epidemic in Mozambique suggest an increasing infection rate, but in different ways and rhythms throughout the country. This has provoked debate about possible causes and patterns of HIV distribution, as well as strategies of prevention and cure. Starting with one case in 1986, now more than 250,000 people have died of AIDS in Mozambique. According to the National Institute for Statistics, projections indicate that by the year of 2008 more than a million Mozambicans will have died from AIDS. Various hypotheses have posited the causes and patterns of infection, amongst them population mobility. Yet, researchers have not collected life histories, which could explain under what circumstances somebody was infected and may reveal a multi-faceted relationship between population mobility and the growing epidemic. This paper attempts to establish the relationship between population mobility and infection by exploring the patterns of spatial distribution of the disease in Mozambique. I use published statistics, results from the Demographic Health Surveys and some empirical evidence from fieldwork. The fieldwork took place in the “Corridor of Transport,” namely Limpopo, Beira and Nacala, where the assumption amongst scholars is that “the HIV/AIDS diffusion is high because of the mobility of truck-drivers, sex-sellers, informal vendors and militaries.” The central region of Mozambique crossed by the Beira corridor of transport has high HIV/AIDS rates. This corridor links several districts with Zimbabwe, Zambia and Malawi where the HIV prevalence is high. On the other hand, there is a lower rate of infection in Maputo and Nacala-Porto, both of which are crossed by the transport corridors, linking the area to South Africa, Zimbabwe and Malawi. Are these disparities due to the reliability of data or a misconception of the factors promoting infection?

20. Confronting HIV/AIDS in a South African Village: The Impact of Health-seeking Behaviour

Frederick Golooba-Mutebi, Makerere University

Stephen M. Tollman, University of the Witwatersrand

Much research on HIV/AIDS in the social sciences focuses on its social impact within affected communities and how people try to cope with its consequences. Based on fieldwork in rural South Africa, this article shows the ways in which the inhabitants of one village, Tiko (not real name), generally react to illness, and the role their reactions play in facilitating the spread of communicable diseases such as HIV/AIDS. It shows that there is potentially a strong connection between the manner in which people respond to illness in general, and transmission of infection. By influencing the way villagers react to episodes of ill-health, folk beliefs about illness and illness causation may create avenues for more people to be infected. This suggests that efforts to combat the HIV/AIDS pandemic cannot succeed without tackling the effect of folk beliefs. Therefore, in thinking about addressing the problem of HIV/AIDS, experts need to focus on more than simply disseminating information about cause and transmission, and promoting abstinence, safe sex, and other technocratic fixes. Our findings suggest that there is need for people to be equipped with information to facilitate not only decision making about how to self-protect against infection, but also about appropriate responses where infection has occurred.

21. Does HIV/AIDS Mortality Impact Household Composition and Structure in Rural South Africa?

Enid Schatz, University of Colorado

Sangeetha Madhavan, Tulane University

In this paper, we investigate the affects of HIV/AIDS-related mortality on households in rural South Africa. Our hypothesis is that HIV/AIDS related mortality affects household structure and composition differently from other causes of death due to age

and gender distribution of mortality. We conduct secondary analyses of data from the Agincourt Health and Demographic Surveillance System (AHDSS), which has collected data annually since 1992 in 21 villages with a population of approximately 72,000 people in 11,600 households. Each update includes 1) household census, 2) vital events and 3) verbal autopsy (VA). Using VAs to identify cause of death, this analysis seeks to identify associations between the occurrence of at least one HIV/AIDS adult death in the household in the period 1992-2003 and household structure and composition in 2003. We compare these results with results for households with an adult death from another cause over the same period and households that have experienced no death over the period. Measures of household structure and composition include size, age distribution, gender distribution and both traditional and new dependency ratios, age and gender of household head, multi-generational residential arrangements, number of temporary migrants in the household, number of foster children in the household and number of maternal orphans in the household. Controlling for socioeconomic status and nativity (Mozambican/South African), preliminary results show that there are some significant differences between households that had a death and those where no death occurred. Households that had a death were likely to be larger, have a female household head, an older household head, more generations in a household, and an increased likelihood of a fostered or orphaned child living in the household. There were no significant differences between households that had had an HIV/AIDS death and those that experienced another kind of death.

22. “It’s Difficult..... I Didn’t Recover”: The Socio-economic Impact of Adult Morbidity and Mortality on Female Pensioners in the HIV/AIDS Era

Catherine Ogunmefun, University of the Witwatersrand

Enid Schatz, University of Colorado

This paper explores the impact of adult morbidity and mortality on the economic well-being of older women in the HIV/AIDS era. It focuses specifically on the financial impact of adult sickness and death on female pensioners during crises such as caregiving for the sick, mourning and funerals. Semi-structured interviews were conducted with 30 women aged 60-75 in rural South Africa, stratified by household mortality experience. In order to determine their socio-economic status, households were ranked using a wealth index based on household size and appearance. Using the household mortality experience stratification and wealth index, we found that households in the HIV/AIDS and other death strata were more likely to be categorized as poor, while those in the no death stratum were categorized as average. Despite the fact that we stratified by mortality experience of the household, many more households were affected by adult sickness and death than those in the HIV/AIDS stratum. However we found that adult morbidity and mortality, whether due to HIV/AIDS or another cause, affect the socio-economic well-being of the respondents and their households. As caregivers, when their patient dies, they are responsible for mourning and burial expenses, which often turn into lingering debts. One impact of caregiving are forgone opportunities of older women’s in economic activities such as farming and trading, which could have helped to improve their standard of living. Though respondents adopted some coping strategies by borrowing from money lenders and selling assets, these led to further disadvantage. Most of these households were unable to recover afterwards. Regardless of whether respondents were rich, poor or average by local standard, they all felt the financial impact of caregiving. These respondents found their own needs unmet as a result of obligations to take care of adult children who were sick or dying, as well as fostered and orphaned children.

ROUND-TABLE DISCUSSION 1: WEDNESDAY, MAY 24, 8:30-13:00

STRENGTHENING DOCTORAL LEVEL TRAINING IN SUB-SAHARAN AFRICAN UNIVERSITIES: MODALITIES, CONSTRAINTS AND CHALLENGES

Background and Rationale for Strengthening Ph.D. Training in Sub-Saharan Africa

Economic stagnation or decline in most countries of sub-Saharan Africa (SSA) has led to drastic reductions in government funding of social services including public support to higher education. Across higher institutions in many sub-Saharan African countries, unprecedented growth in student enrollments and the expansion of training programs, especially at the undergraduate level, have occurred amidst declines in real income of university faculty and staff, and inadequate support for learning resources and maintenance. Most of the once-promising doctoral training programs in the region have gradually faded due to the huge demand undergraduate programs place on faculty, the limited availability of facilities and funding for research, and general budgetary decline. One of the many consequences of these trends is the steady loss of university staff - often the most talented - to local non-university/non-research employment or to the West. Even where staff remain in the university, there is an increasing tendency to limit university commitments in order to engage in consultancies and other income-generating activities. Consequently, the most salient responsibility of faculty often receive the least attention in most universities including effective preparation of lectures, research, interaction with students, and participation in university administration and policy making, among others. As these adverse trends continue to gain momentum, the capability of universities to produce well-trained scholars, even at the undergraduate level, is now in doubt in many countries in the region.

The current stock of African lecturers and researchers are largely the product of fellowship programmes for overseas training which was reasonably available from the 1970s to the early 1990s. Such opportunities are much rarer today. In addition, only a minority of those trained overseas in the recent past return to the region. Among those who return, many drift away from

teaching and research, disheartened by the low levels of remuneration, continued intellectual isolation, poor working conditions and official indifference to their work. Besides, the costs of postgraduate training abroad has continued to escalate, while the relevance of some of the overseas training is now source of concern. One of the implications of these trends is that the majority of the next generation of academic leaders in sub-Saharan Africa will be trained at local institutions. This, coupled with a growing interest among some donors to invest their training resources in local institutions, provide unique opportunity to position the issues of doctoral-level training on the agenda, not only in terms of quality, but also in terms of relevance.

It is notable that most countries south of the Sahara (and their bilateral and multilateral development partners) increasingly depend on expatriate consultants as technical advisors for local policy formulation and program design and implementation. With the continued lack of progress in improving several social and economic indicators across the region, the importance of the engagement of local experts in the design of appropriate policy paradigms on some of the key economic and social issues facing the region cannot be over-emphasized. Since postgraduate training programmes are essential elements in any long-term capacity-building strategy for the region, the recommendation that funds devoted for overseas training be used to mount or strengthen and sustain effective PhD level training in the region, have started to arise. An equally important discourse in this regard is the question of the modalities and institutional environment in which such programmes might take root and develop.

Key Questions for the Roundtable to consider

Against this background, the roundtable discussion seeks to ignite discussions and action among selected institutions in east and southern Africa and donors on how to strengthen doctoral level training in the region, with focus on the social sciences. Some key questions of interest include, among others, the following:

- What are the challenges facing doctoral training in the social sciences in sub-Saharan African universities?
- What are the preconditions for setting up sustained, effective and efficient doctoral-level training in African universities? More precisely, how can we overcome some of the disincentives mentioned above (e.g. poor working conditions) and ensure recruitment and retention of qualified staff, development of effective teaching and research programmes, and financial sustainability?
- In addressing the issue of developing high quality graduate programmes in SSA, should human and material resources be concentrated in a few institutions with a regional outlook, or should focus be given to strengthening national universities and institutions?
- What types of North-South and South-South institutional collaborations and linkages are essential for such strong doctoral programs to develop and be sustained; and how should these linkages be promoted?
- How to develop and strengthen research culture and large-scale research programs within doctoral-training programmes to ensure doctoral candidates are well grounded in research?

While the meeting is not expected to provide definitive answers to these and other questions relating to PhD training in SSA, it is expected to constitute an important step towards wider intra- and inter-university consultations on strengthening PhD level training in sub-Saharan Africa.

ROUND-TABLE 1: AGENDA

9:00-9:30

Welcome Remarks: Dr Alex Ezeh, Executive Director, African Population & Health Research Center (APHRC)

Opening Address: Hon. (Prof.) Kilemi Mwiria, Assistant Minister of Education, Kenya.

9:30-10:45

Presentations by Key Speakers:

1. Prof. George Magoha, Vice-Chancellor, University of Nairobi
2. Prof. Thandwa Mthembu, Deputy Vice-Chancellor (DVC), University of Witwatersrand
3. Prof. Jane Menken, Director, Institute of Behavioral Science, University of Colorado at Boulder, USA
4. Prof. Bob W'Shitemi, DVC, Moi University
5. Dr William Lyakurwa, Executive Director, African Economic Research Consortium (AERC)
6. Dr Katherine Namuddu, Associate Director, Africa Regional Program, Rockefeller Foundation & Partnership for Higher Education in Africa (PHEA)

10:45-11:00 Tea/Coffee Break

11:00 – 11:30

Reflections on the presentations:

1. Prof. Jude Ongong'a, DVC, Kenyatta University
2. Prof. Michael J. White, In-coming Director, Population Studies and Training Center, Brown University
3. Prof. Florence Lenga, Director, Post-graduate Studies, Jomo Kenyatta University

4. Dr Christine Dranzoa, Deputy Director, School of Graduate Studies, Makerere University, Uganda
5. Prof. M.H. Nkunya, Chief Academic Officer, University of Dar es Salaam, Tanzania

11:30-13:00

Questions and Answers and General Discussion

Conclusion and Recommendation: Dr Tamara Fox, Program Officer, Population, Hewlett Foundation & PHEA

Closing Remarks: Dr Alex Ezeh, Executive Director, African Population & Health Research Center (APHRC)

SESSION 5: WEDNESDAY, MAY 24, 14:00– 15:30

ECONOMICS OF HEALTH AND EDUCATION

DISCUSSION LEADER: RICK ROGERS

23. Social and Economic Impacts of Electricity Provision: Evidence from the Quasi-Random Placement of Hydro-electric Plants in Brazil

Tania Barham, University of Colorado

A. Mushfiq Mobarak, University of Colorado

Limited budgets often force governments to choose between allocating the extra dollar of public funds to health or education programs, to build roads, or to extend electricity coverage. It is therefore important for social scientists to inform policy-makers about the returns to each type of public investment, so that money is spent effectively to reduce poverty and stimulate economic growth. The aim of this study is to use a natural experiment that exploits *quasi-random* variation in hydro-power generation in Brazil to determine the *causal impact* of electricity provision on a range of socio-economic outcomes such as poverty, inequality, and infant mortality. In particular, we will take advantage of exogenous variation in geographic characteristics of a region (such as, river gradient, water velocity, and type of bedrock) to predict the presence of a hydro-electric plant. To the extent that the physical slope of a river is uncorrelated with socio-economic characteristics of the population surrounding that location, this creates a “natural experiment” where observationally similar households are either more or less likely to be endowed with electricity access depending on their distance to an appropriately sloped river. We will create a county-level database covering the period 1960-2000 and use instrumental variables (or two-stage least squares) to statistically measure the impact of electricity availability on socio-economic outcomes.

24. Economic Effects of Malaria Eradication: Evidence from the Malarial Periphery

Adrienne Lucas, Brown University

Between 1940 and 1960, a massive international campaign largely eliminated malaria from an area that was home to one-fifth of the world's population. I use this intervention as a quasi-experiment to estimate malaria's effect on lifetime human capital accumulation. By combining pre-existing geographic variations in malarial intensity and the national anti-malaria public health interventions, I identify malaria's effect on female educational attainment. Separate estimates using data from Paraguay, Sri Lanka, and Trinidad indicate that every ten percentage point decrease in the malaria incidence rate leads to an increase of 0.07 to 0.12 years of education and a 0.7 to 1.7 percentage point increase in the probability of being literate. During the period under study, the decline in malaria explains between 53% and 90% of the increase in the years of female education in the malarious regions and 35% to 62% of the increase in female literacy. Based on these estimates and current malaria incidence, I predict increases in human capital and GDP per capita if malaria eradication occurred in thirteen African countries with the highest reported malaria endemicity. Gains in years of completed education are predicted to be between 0.11 (Zimbabwe) and 0.56 (Uganda) with corresponding increases in steady state per capita GDP of 1.2% to 7.5%

25. Is poverty a driver for risky sexual behaviour? Evidence from surveys of adolescents in four African countries

Nyovani Janet Madise, APHRC

Eliya Msiyaphazi Zulu, APHRC

James Ciera, APHRC

Recent evidence has found a positive association between wealth and HIV prevalence, thus challenging the belief that poverty is a driver for risky sexual behaviour and HIV/AIDS. In this paper, we analyse data of adolescents aged 12-19 years from Burkina Faso, Ghana, Malawi, and Uganda to examine differentials, using wealth quintiles, of the average age at sexual debut, number of sexual partners, and condom use at last sex after adjusting for factors such as ethnicity, religion, rural/urban residence and age. The results show that a positive association between poverty and early sexual debut is observed in Burkina Faso but not in the other countries and the mean number of sexual partners in Ghana is highest among the wealthiest and lowest among the poorest. The results underscore the need to re-examine the assumption that poverty drives risky sexual behaviour so that policies/programs to halt the spread of HIV/AIDS are evidence-based.

26. Accounting for the Effect of Health on Economic Growth

David Weil, Brown University

I use microeconomic estimates of the effect of health on individual outcomes to construct macroeconomic estimates of the proximate effect of health on GDP per capita. I use a variety of methods to construct estimates of the return to health, which I combine with cross-country and historical data on several health indicators including height, adult survival, and age at menarche. Using my preferred estimate, the effect of eliminating health differences among countries would be to reduce the variance of log GDP per worker by 9.9 percent, and would reduce the ratio of income at the 90th percentile to income at the 10th percentile from 20.5 to 17.9. While this effect is economically significant, it is also substantially smaller than estimates of the effect of health on economic growth that are derived from cross-country regressions.

27. School choice: comparison of slum and low-low-income non-slum communities prior and post implementation of Free Primary Education, Nairobi, Kenya

Frederick Mugisha

With the implementation of free primary education (FPE) in Kenya in 2003, it was expected that more parents would take their children to government schools. Did they do this, and if they did was it sustained? The paper explores whether the introduction of FPE enhanced school enrolment in government schools relative to informal schools, and explores whether this was sustained in years following its implementation. We use data collected on 5-19 year olds for 6 years, three years prior to and two years after the implementation of FPE. The data were collected on children in three slum communities (Grogan 4,237; Viwandani 7,634 and Nyayo 10,014) and two low-income-non-slum communities (Harambee 1,462 and Jericho 3,112). The survey data were supplemented by focus group discussions and indepth interviews conducted to understand the conditions and circumstances of implementing FPE. The results suggest that overall, the decline in the percentage of children attending government schools that started prior to FPE continued after FPE, albeit with a slight increase in 2003, the year of implementation. The results also suggest that government schools were already operating at full capacity prior to FPE. In addition, though school fees were scrapped, there were expenses that in some cases exceeded the school fees itself; for example the requirement to purchase a desk for new students. The study also revealed that parents consider the quality of education to be better in informal than in government schools. The fact that private provision of education continued to figure predominantly even after the introduction of FPE suggests the need for strengthening government oversight and identifying options and opportunities for private-public partnership in education provision.

SESSION 6: WEDNESDAY, MAY 24, 16:00 – 17:30

INNOVATIONS IN DATA COLLECTION AND USE

DISCUSSION LEADER: CLIFFORD ODIMEGWU

28. Adult Mortality, Household Use of Natural Resources and Maintenance of Food Security: An Ongoing Research Agenda at the Agincourt Health and Population Unit

Lori Hunter, University of Colorado

Wayne Twine, University of the Witwatersrand

There is a significant lack of research as to how demographic dynamics interact to shape household use of natural resources in less developed regions. This information is, however, key to understanding the complex interactions between humans and the environment, particularly given the centrality of the natural environment within rural livelihoods. Within the rural African context, natural resources also act as a buffer against household shocks, offering, for example, a potential means of generating income and/or meeting dietary needs. In this study, we focus on adult mortality as a particular household shock, examining natural resource use, specifically fuel wood strategies, as shaped by households' mortality experience. We also offer early exploration of mortality-impacted households' reliance on local resources for food security. Quantitative analyses of survey data suggest the importance of socioeconomic status and local resource availability in shaping household resource use after adult mortality, while interviews provide more nuanced stories of coping strategies following the loss of an adult household member, including issues related to time allocation and food security. In general, the study's results begin to shed light more generally on the environmental dimensions of the HIV/AIDS pandemic, while also providing an important foundation for future analyses.

29. Challenges in collecting data on Pregnancy in NUDHSS

Zewdu Woubalem, APHRC

Eluid Wekesa, APHRC

Alex Ezeh, APHRC

Eliya Zulu, APHRC

Using data from the Nairobi Urban Health and Demographic Surveillance System (NUHDSS), this paper will examine factors that affect reporting of pregnancy in the Demographic Surveillance Sites (DSS) of the African Population and Health Research Center (APHRC). Pregnancy registration is one of the core questionnaires regularly administered in the DSS to collect data on

pregnancy episodes. Monitoring pregnancy is one strategy to improve the coverage of birth and death registration. Data from pregnancy registration forms are also crucial to the study of foetal wastage in the DSS area. The form has been administered since October 2002. Although fieldworkers have gone through a series of training exercises on how to solicit data about pregnancy and pregnancy outcomes, preliminary analysis shows that pregnancy registration failed to capture pregnancy episodes for about half of the women who reported their pregnancy outcomes. This raises questions about why we failed to capture pregnancy episodes. Why do women tend to report more about their pregnancy outcomes than their pregnancies? What factors are responsible for poor coverage of pregnancy registration? Are these factors related to data collection strategies? Or do any cultural barriers encourage women not to reveal pregnancy before delivery? This paper will attempt to address these research questions using data for all women who had pregnancy outcome since October 2002. Results from this study will highlight challenges in pregnancy data collection activities and strategies to better deal with these challenges.

30. Collecting genetic information in social surveys: intellectual merit versus cost, respondent burden, and respondent vulnerability

Jason Boardman, University of Colorado

This session will focus on the opportunities afforded researchers by the inclusion of genetic information into demographic and health surveys. I will review the current techniques and corresponding costs of collecting and storing bucal swab and 'mouthwash' samples. I will also describe the modelling strategies currently used to describe gene-environment interactions as related to health and well-being.

31. Deterministic information in questionnaires in the Social Sciences

David Sherwell, University of the Witwatersrand

Charles Kimpolo, University of the Witwatersrand

The state of a family (health, economic, social, etc.) is described by a set of questions. The answers change with time, so that the state changes, and the reasons for the changes are evident from answers that change. A given, mature, longitudinal questionnaire is deterministic to this extent, just as a given path of a gas particle is deterministic. Both may however move randomly, the particle in ordinary space, the family in a suitable (sequence) space, and the state at any *future* time be in doubt. In this case it is possible that a deterministic diffusion equation applies for all families in a population, as for all gas particles in a vessel. We have developed the mathematics to so describe a population of families. In this talk we will, without the maths and before we have examined real data, illustrate how migration might be described by 'diffusion' of the state of a family rather than by simple spatial pattern.

32. Black - White Employment Differences over the Business Cycle (US)

Yusuf Soner Baskaya, Brown University

Isaac M. Mbiti, Brown University

Data from the US labour market shows that over the last four decades, not only have the unemployment rates of blacks been substantially higher compared to that of whites, but these differences have been particularly amplified during recessions. Using Current Population Survey March Supplement and National Longitudinal Survey of Youth, we compare employment outcomes over business cycles for black and white workers, using wages observed in previous year as a skill measure. We find that blacks have higher increases in the probability of unemployment and in unemployment durations during recessions compared to equally paid whites. We further find that such differences do not exist for individuals in higher part of the wage distribution. Finally, we find that the blacks benefit from expansions with a significant delay compared to whites. We argue that our results provide a better estimate of black-white differences in employment outcomes over business cycles by mitigating the problems related to unobserved individual productive skills.

This abstract will not be presented, it is included as information

33. Reconceptualizing the Epidemiologic Transition Theory: Cause-Specific Trends in Developing Countries

Rick Rogers, University of Colorado

Sabu Padmadas, University of Southampton

In this paper, we present the classic epidemiologic transition theory, which is generally based on mortality patterns among Western developed countries, and discuss how this theory can be revised to address changes in developing countries, including sub-Saharan African countries. We (1) review the classic theory, including the major stages, (2) consider strengths and weaknesses of the stages as presented, and (3) show how the theory can be reconceptualized and expanded to encompass developing countries. We argue that one central difference from the classic theory is that today, developing societies are contending with diseases of the both the developed and developing world; they are simultaneously dealing with such chronic conditions as cancer and heart disease, and such health conditions as obesity, while they still grapple with the control and treatment of infectious and parasitic diseases. We provide examples that highlight differences between developed and developing countries based on the timing of the transition, changes in causes of death, and important social and structural factors.

ROUND-TABLE DISCUSSION 2: THURSDAY, MAY 25, 8:30 – 10:30

***DEEPENING EFFECTIVE COLLABORATION IN RESEARCH, TRAINING, AND ACADEMIC DEVELOPMENT:
GOING BEYOND THE ANNUAL COLLOQUIUM***

MODERATOR: TAMARA FOX

OPENING REMARKS (10 minutes each):

Jane Menken

Eliya Zulu

Mark Pitt

Steve Tollman

The focus of the remarks will include the core areas of work, possible areas of collaboration, and the challenges in setting up the proposed collaborations. The opening remarks will be followed by general discussion.

CLOSING SESSION: THURSDAY, MAY 25, 11:00 – 13:00

THE WAY FORWARD – DISCUSSION & COMMITMENTS FOR ACTION

MODERATOR AND FINAL COMMENTS: ALEX EZEH

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- * Wellcome Trust
- * World Bank
- * World Health Organization (WHO)

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