Endemic diseases and agricultural productivity: Challenges and policy response
Martine Audibert

To cite this version:

HAL Id: halshs-00563389
https://shs.hal.science/halshs-00563389
Preprint submitted on 4 Feb 2011

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L’archive ouverte pluridisciplinaire HAL, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d’enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.
Endemic diseases and agricultural productivity:
Challenges and policy response

Martine Audibert
CERDI, Auvergne University

Paper presented to AERC Biannual Research Workshop
November 29 – December 4, 2008
Nairobi

48 p.

1 CERDI, 65 Boulevard François Mitterrand, 63000 Clermont-Ferrand, France; m.audibert@u-clermont1.fr.
Abstract:

Contrary to Asian countries, the agricultural sector in Africa had not benefited from the green revolution success. After a long time of disinterest in the agriculture sector in Africa, several voices arise now in favour of greater efforts towards this sector. Several studies tend to show the crucial role of agriculture in African countries’ growth and highlight the huge need of increasing the productivity in this sector. If increase in agriculture productivity requires both an expansion of irrigated areas and the adoption of high yield varieties, those innovations and their high development could be the source of negative health (and environmental) effects.

Using a mega-analysis, this paper highlights first the links between health, disease and development and then agricultural productivity. The literature review shows that the negative effect of bad health was not systematically checked, and that the intensity of this effect depends of the disease, but also of the work productivity and the existence or not of a coping process. The second part of the paper focused on the development of high intensive agriculture as a risk factor for farmers’ and rural inhabitants’ health. This survey shows that whether irrigation and fertilizer and pest intensive use could be considered as highly health (and environmental) risk factors, appropriate control measures (such as for examples systematic maintenance of irrigation canals, alternate wetting and drying of irrigated fields or integrated pest management) considerably reduce this risk, while at the same time, increase the agriculture productivity.

Key-words: agriculture, productivity, endemic disease, health risk factor, Africa
Summary

Introduction

I – The role of agriculture in development

II – The effect of endemic diseases on agricultural sector productivity

Question: are endemic diseases a risk factor for farm productivity?

2.1 Health, disease and development

2.2 Endemic diseases and agriculture productivity

III – Effect of intensive agriculture on endemic diseases

Question: is intensive agriculture a risk factor for health?

3.1 Health risks associated with water resources development: parasitic diseases

3.2 Health risks associated with intensive insecticides and pesticides use: respiratory and parasitic diseases

IV – Policy response

4.1 How to increase farm productivity?

4.2 How to prevent intensive agriculture health effect adverse?

Conclusion
INTRODUCTION

A glance at the Millennium Development Goals underlines the role of agriculture in development. Three of these goals are directly or indirectly focused on agriculture, through the eradication of extreme poverty (goal 1), and the potential consequences of its development through health with endemic diseases (goal 6) and the environment (goal 7, see box 1).

A review of the literature shows that if the development of agriculture is essential for the economy, its expansion could have, through the environment, direct and indirect negative effects on health. Intensive agriculture owing to irrigation systems may cause, for example, water-borne diseases, such as malaria, schistosomiasis or onchocerciasis.

Despite a huge increase in the financing of malaria control programmes, this parasitic disease remains the priority of public health in Africa. It is highly probable that the target of the MDGs will not be reached in 2015. Malaria deaths per 100,000 people have increased between 1970 and 1995, and the proportion of child under-five receiving malaria treatment remains very low among the poor (figures 1 and 2).

Box 1:

**Goal 1: Eradicate extreme poverty and hunger**

*Target 1:* Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day.

*Target 2:* Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

**Goal 6: Combat HIV/AIDS, Malaria and other diseases**

*Target 8:* Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases.

**Goal 7: Ensure environmental sustainability.**

*Target 9:* Integrate the principles of sustainable development into country policies and programmes and reverse the losses of environmental resources.

Source: WHO

Figure 1:

**Malaria deaths**

(per 100,000 people)

Source: http://devdata.worldbank.org/gmis/mdg/images/target%208a.jpg
On the one hand, to eradicate extreme poverty and hunger, we need to increase production and consequently land productivity. On the other hand, increases in land productivity partly result from water resource development and intensive use of agriculture inputs which are considered health risks. For that reason, the fight against rural poverty could be a brake into the health MDG achievement.

Studying the relations between endemic diseases, development and agriculture productivity allows us to discuss, first agriculture’s role in development (section I), then the effect of health in general, and of endemic diseases in particular, on agriculture productivity (section II), before speaking about the effect of the development of agriculture on health and the environment (section III). The fourth section is focused on policy responses.

I – The role of agriculture in development

Historical observation of the agricultural transformation showed a uniform and pervasive decline of agriculture’s importance. This unavoidable decline allowed the misperception that agriculture is unimportant (Timmer, 1995). Consequently, investing in agriculture has not been considered as a priority for several decades. The low productivity in the agricultural sector in Africa highlighted this fact.

In the sixties, the green revolution, by introducing high-yielding varieties of wheat and rice and high technologies, contributed to improving agricultural productivity in Asian countries. This technological revolution was a great success. After that, some of these countries observed a decline of agriculture’s importance, as in the rest of the world. This decrease contributed to the decline of interest in agriculture. In Asia, resources devoted to agriculture decreased and were oriented towards the industrial sector and high technologies as observed in China for example (Nyberg, 2002). Few voices arose in favour of greater efforts towards the agriculture sector in Africa: developments in agriculture should follow as in Asian countries.

But, contrary to Asian region, Africa has not benefited from a green revolution. High yield varieties and irrigation systems were slowly adopted. Numerous studies, focused on the sources of Asian agriculture productivity (Azam, 1996; Bera and Kelley, 1990; David and Otsuka, 1990; Kalirajan and
Shand, 1985), were undertaken in order to draw lessons for African countries. A debate arose in the literature and concerned:

- Crops: should farmers be incentivized to grow cash crops instead of food crops, while price incentives were not verified and risk aversion induced smallholders to insure their food security (Lele, 1989; Lele and Argawal, 1989);

- Production scheme: should totally water control inducing dams building and creation of lakes or large reservoirs be insured in spite of lands salinity (Diemer and van der Laan, 1987), or should partial water control be developed in spite of lower crop yields (Barnett, 1984)?

But, new technologies supply requires to understanding the farm-level decision-makers and creating economic incentives as farmers responded rationally to. Timmer (1995) states that, during the 1970-1980’period, the agricultural adopted policy was a market-liberalization strategy. This strategy should provide adequate price incentives to agricultural producers. For him and for some other authors (Kawagoe, Hayami and Ruttan, 1985), the major constraint limiting agricultural development was when policies impeded, rather induced, appropriate technical and institutional innovations.2

Since the eighties, the World Bank drew the attention for this sector highlighting the role of the agriculture in the nation growth and found a positive and significant links between the agricultural share of GDP, agricultural growth and GDP growth in developing countries (World Bank, 1982). Those links could be found in Benin, Cameroon, Central African Republic, Ghana and Togo, where the growth of the agriculture sector between 1980 and 2005, has been real and higher than the growth of GDP (Table 1). But it was not the case for all countries. The growth of the agriculture sector was weak and sometimes negative for example in Botswana, Namibia, Rwanda and Uganda. If in the 1980s, agriculture growth seems have no link with the GDP growth (figure 3a), after 1990, the relation appears more evident as shown in figures 3b and 3c. One argument for its contribution is that the growth of agriculture productivity may create important demand for the outputs of other sectors (fertilizer, transportation, commercial services, World Bank, 1982, and Timmer, 2002).

More recently, more numerous are those who consider that African agriculture, long neglected, may merge as a constraint to growth. It appears that, despite a higher land and agricultural labour productivity since 2000, the rates of respectively 5% and more than 3%, required for a sustainable growth, have been reached in less than one tier of African countries (World Bank, 2007). The 2008 World Development Report focused on the agriculture sector and asked, for Africa, the questions of:
- the agriculture change in the past 20 years and whether new challenges and opportunities arose;
- how to capture cost effectively new sources of agricultural growth;
- how to contain agriculture ‘s negative environmental effects (World Bank, 2007).

So, the necessity of agricultural productivity growth is recognised both for improving rural household welfare (by increasing incomes and then living conditions) and achieving sustained economic growth. “No country has been able to sustain a rapid transition out of poverty without raising productivity in its agricultural sector. Despite this historical role of agriculture in economic development, both the academic and donor communities lost interest in the sector, starting in the mid-1980s, mostly because of low prices in world markets for basic agricultural commodities. Growth in agricultural productivity not only can increase farm incomes, it also stimulates linkages to the non-farm rural economy, causing economic growth and rapid poverty reduction” (Timmer, 2002).

2 The role of prices was also noted (but with a different effect) by de Souza Filho, Young and Burton (1998) when they worked on the determinants of farmers’ decisions on whether or not to adopt low-external-input and sustainable agriculture technology. They found that changes in relative prices were influential as a decline of output prices allowing incomes’ decrease induced farmers to switch to sustainable technology, more cost-effective.
Table 1: Importance of agriculture in some African countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Year</th>
<th>Agriculture value added (constant prices, 2000$ millions)</th>
<th>Agriculture average annual growth %</th>
<th>GDP average annual growth %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td></td>
<td>316</td>
<td>467</td>
<td>824</td>
</tr>
<tr>
<td>Botswana</td>
<td></td>
<td>132</td>
<td>155</td>
<td>139</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td></td>
<td>410</td>
<td>531</td>
<td>881</td>
</tr>
<tr>
<td>Cameroon</td>
<td></td>
<td>1,023</td>
<td>1,298</td>
<td>2,062</td>
</tr>
<tr>
<td>Central African Republic</td>
<td></td>
<td>298</td>
<td>332</td>
<td>478</td>
</tr>
<tr>
<td>Chad</td>
<td></td>
<td>306</td>
<td>321</td>
<td>563</td>
</tr>
<tr>
<td>Congo, Democratic Republic</td>
<td></td>
<td>1,565</td>
<td>2,011</td>
<td>2,126</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td></td>
<td>1,628</td>
<td>1,756</td>
<td>2,400</td>
</tr>
<tr>
<td>Ghana</td>
<td></td>
<td>1,226</td>
<td>1,268</td>
<td>1,756</td>
</tr>
<tr>
<td>Kenya</td>
<td></td>
<td>2,192</td>
<td>3,138</td>
<td>3,649</td>
</tr>
<tr>
<td>Mali</td>
<td></td>
<td>656</td>
<td>792</td>
<td>938</td>
</tr>
<tr>
<td>Namibia</td>
<td></td>
<td>179</td>
<td>223</td>
<td>338</td>
</tr>
<tr>
<td>Rwanda</td>
<td></td>
<td>535</td>
<td>558</td>
<td>750</td>
</tr>
<tr>
<td>Senegal</td>
<td></td>
<td>506</td>
<td>602</td>
<td>791</td>
</tr>
<tr>
<td>Tanzania</td>
<td></td>
<td>...</td>
<td>2,767</td>
<td>3,773</td>
</tr>
<tr>
<td>Togo</td>
<td></td>
<td>220</td>
<td>342</td>
<td>455</td>
</tr>
<tr>
<td>Uganda</td>
<td></td>
<td>...</td>
<td>1,401</td>
<td>2,014</td>
</tr>
<tr>
<td>Algeria</td>
<td></td>
<td>2459</td>
<td>3246</td>
<td>4600</td>
</tr>
<tr>
<td>Morocco</td>
<td></td>
<td>4094</td>
<td>5925</td>
<td>4610</td>
</tr>
</tbody>
</table>

Figure 3: Agriculture and GDP average annual growth (%) in some African countries

**Source:** Table 1.

![Graph a) 1980-1989](image)

![Graph b) 1990-2000](image)

**Source:** Table 1.
Literature on this topic is growing and links between growth, poverty and agricultural or farm productivity are now again more studied. Above the debate on the role of agricultural productivity on the growth process through non-farm activity or rural migration, agricultural productivity is concerned as a tool in the fight against poverty (Christiaensen, Demery and Kühl, 2006). Except few examples, all countries in the world (OECD countries, Timmer 2005; Asian countries, Huffman and Orazem, 2007) started economic growth by an agricultural transformation based on technical change. If agriculture productivity growth requires both an expansion of irrigated area and adoption of high yield varieties, those innovations or technology and their high development could be the sources of negative health (and environmental) effects. Those risk factors are the topic of the following sections.

---

3 However, there is some debate around the effect of agricultural productivity on the development of non-farm activities (a step in the development process) and then a possible increase of rural out-migration. The debate is whether non-farm activities are highly dependent from agricultural productivity, in which case, investing in agricultural technology allows high returns to investment (Foster and Rosenzweig, 2008; Christiaensen, Demery and Kühl, 2006). Investigations are also done on the role of the liberalization trade (in fertilizer, irrigation equipment, etc.) on crops productivity increase and prices and then on the welfare of the poor (Klytchnikova and Diop, 2006).
Table 2: Importance of agriculture in some African economies

<table>
<thead>
<tr>
<th>Country</th>
<th>Year</th>
<th>Agricultural raw materials</th>
<th>Food</th>
<th>Structure of merchandise exports (% of total exports), 2000-05</th>
<th>Top one export, 2005</th>
<th>Irrigated land (% of cropland) 2001-03</th>
<th>Malaria 2000-05 Deaths due to malaria (per 100,000 people)</th>
<th>Malnutrition 2000-05 (% of children under age 5 stunting)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>61</td>
<td>24.8</td>
<td>cotton</td>
<td>55.3</td>
<td>0.4</td>
<td>177</td>
<td>30.7</td>
<td>23.1</td>
</tr>
<tr>
<td>Botswana</td>
<td>0.1</td>
<td>2.4</td>
<td>diamonds</td>
<td>88.2</td>
<td>0.4</td>
<td>15</td>
<td>23.1</td>
<td>31.7</td>
</tr>
<tr>
<td>Burkina Faso</td>
<td>72.3</td>
<td>16.4</td>
<td>cotton</td>
<td>84.5</td>
<td>0.5</td>
<td>292</td>
<td>38.7</td>
<td>38.7</td>
</tr>
<tr>
<td>Cameroon</td>
<td>13</td>
<td>17.1</td>
<td>Crude petroleum</td>
<td>48.8</td>
<td>0.4</td>
<td>108</td>
<td>31.7</td>
<td>38.9</td>
</tr>
<tr>
<td>Central African Republic</td>
<td>41.2</td>
<td>0.8</td>
<td>diamonds</td>
<td>40</td>
<td>0.1</td>
<td>137</td>
<td>38.9</td>
<td>40.9</td>
</tr>
<tr>
<td>Chad</td>
<td>…</td>
<td>…</td>
<td>crude petroleum</td>
<td>94.9</td>
<td>0.8</td>
<td>207</td>
<td>40.9</td>
<td>38.1</td>
</tr>
<tr>
<td>Congo, Democratic Republic</td>
<td>…</td>
<td>…</td>
<td>diamonds</td>
<td>42.6</td>
<td>0.1</td>
<td>224</td>
<td>38.1</td>
<td>38.1</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>9.2</td>
<td>55.8</td>
<td>cocoa beans</td>
<td>38.2</td>
<td>1.1</td>
<td>76</td>
<td>…</td>
<td>…</td>
</tr>
<tr>
<td>Ghana</td>
<td>5</td>
<td>77.1</td>
<td>cocoa beans</td>
<td>46.1</td>
<td>0.5</td>
<td>70</td>
<td>29.9</td>
<td>38.2</td>
</tr>
<tr>
<td>Kenya</td>
<td>12</td>
<td>39.7</td>
<td>tea</td>
<td>16.8</td>
<td>2.0</td>
<td>63</td>
<td>30.3</td>
<td>23.6</td>
</tr>
<tr>
<td>Mali</td>
<td>22.3</td>
<td>9.6</td>
<td>cotton</td>
<td>81.8</td>
<td>4.9</td>
<td>454</td>
<td>38.2</td>
<td>45.3</td>
</tr>
<tr>
<td>Namibia</td>
<td>1.3</td>
<td>48.3</td>
<td>diamonds</td>
<td>39.1</td>
<td>1.0</td>
<td>52</td>
<td>23.6</td>
<td>45.3</td>
</tr>
<tr>
<td>Rwanda</td>
<td>7.3</td>
<td>52.3</td>
<td>coffee</td>
<td>51.9</td>
<td>0.6</td>
<td>200</td>
<td>25.4</td>
<td>37.7</td>
</tr>
<tr>
<td>Senegal</td>
<td>2.1</td>
<td>28.8</td>
<td>inorganic acid</td>
<td>38.8</td>
<td>4.8</td>
<td>72</td>
<td>25.4</td>
<td>37.7</td>
</tr>
<tr>
<td>Tanzania</td>
<td>16.7</td>
<td>56.7</td>
<td>gold</td>
<td>10.9</td>
<td>3.6</td>
<td>130</td>
<td>37.7</td>
<td>37.7</td>
</tr>
<tr>
<td>Togo</td>
<td>8.9</td>
<td>21.5</td>
<td>cocoa beans</td>
<td>22.4</td>
<td>0.3</td>
<td>47</td>
<td>…</td>
<td>…</td>
</tr>
<tr>
<td>Uganda</td>
<td>11.6</td>
<td>64</td>
<td>coffee</td>
<td>31.1</td>
<td>0.1</td>
<td>152</td>
<td>39.1</td>
<td>19.1</td>
</tr>
<tr>
<td>Algeria</td>
<td>0.0</td>
<td>0.2</td>
<td>crude petroleum</td>
<td>67.2</td>
<td>6.9</td>
<td>…</td>
<td>19.1</td>
<td>18.1</td>
</tr>
<tr>
<td>Morocco</td>
<td>1.9</td>
<td>21.5</td>
<td>Inorganic acid</td>
<td>7.2</td>
<td>15.4</td>
<td>…</td>
<td>…</td>
<td>…</td>
</tr>
</tbody>
</table>

Source: World Bank, 2008, Tables 6.1, 6.2, 8.2
II – Effect of endemic disease on agricultural sector productivity

As for agriculture, the role played by human capital and more specifically, by health in economic growth and development is considered as essential. Beyond the population well-being, the economic benefit of disease control programme or health improvement was considered as one criterion among others for local or national policy-making. The assumption here is that bad health has a cost, both direct and indirect. Direct cost is the financial cost, bound up with curative and preventive care allowing catastrophic costs for the poorest and pushing them into poverty (Xu et al., 2003). Indirect cost is the economic cost, bound up with a decrease in productivity, production or income as a consequence of illness. In this section, we have focused on this last cost. Before tackling the question of diseases effect on agriculture productivity, more general links between disease and development are presented.

2.1 – Health, disease and development

In the fifties, the role of health and more specifically of endemic or parasitological diseases on growth or development was considered as ascertained. Before the World War II, malaria, still a high cause of mortality and morbidity in Europe, Latina America and North Africa, was considered as a root cause of the development and began the public health policy priority. In 1955, the World Health Organization claimed that malaria was an economic disease. Consequently, the financing of malaria control programmes drastically increased, contributing to undertake large scale vector control and preventive treatment distribution (Delacollette and Rietveld, 2006). In the same vein, onchocerciasis (river blind) was considered in the 1970s, as a disease which had forced inhabitants to migrate and then preventing the cultivation of fertile lands in West Africa. Besides people welfare and health, this idea contributed to financing and launching the wide Onchocerciasis Control Programme (OCP), over 11 countries in 1974. And, as for malaria, the true relationship between this disease and development was not really proved for almost two reasons. First, as Gunnar Myrdal pointed out in the early 1950s, economists had paid little attention to health as an economic variable (Packard, 2001). Second, a few studies demonstrated that disease control over the general population or reducing disease prevalence would generate economic growth or could increase worker productivity. More, in 1968, Barlow showed that due to the population increase thank to malaria control, the GDP per capita will decrease at long term.

Consequently, this field research was partly abandoned before knowing interest recrudescence with Sen’s works on human capabilities and with the emergence of AIDS. The international interest for poverty reduction and the proclamation of millennium development goals also contributed since one decade to a re-emergence of studies focusing on the links between health, welfare, and development. In 2001, the Commission on Macroeconomics and Health (WHO, 2001) concluded in its report that diseases are a barrier to economic growth.

Numerous studies, using theoretical such as empirical studies, found that bad health and diseases have negative effects on growth or living conditions. Partly due to the difficulty to measure the multi-dimensions of health and consequently to measure global health5, the economic effects of health have been more often studied through more commonly-use health indicators such as life expectancy, infant mortality, or nutrition indicators. Economic effects of health were also found through the effect on education and on future gains. It is well-known that malnutrition will retard physical (stature) and mental development. Several authors found that a retard in childhood development (height), or low birth weight would have an impact on future wages or labour productivity (Deolalikar, 1988; Sahn and Alderman (1998); Strauss and Thomas, 1998; Huffman and Orazem, Berham, 1999; Behrman and

---

4 The difficulty to assessing health economic effects on farm activity is due to the coping process phenomenon (Conly, 1975 for example) and the underemployment of active population.

5 After the pioneer work of the Ghana Health Team Project (1981), the World Bank and the WHO in 1993 proposed a new health indicator, the Dalys (Disability adjusted life years). Calculated for about 140 diseases and the WHO regions, one expected almost ten years before Dalys was calculated by country (WHO, 2002). And since now, it is the only one year where estimation by country is available.
With the development of national household surveys, (such as the Demographic Health Surveys undertaken in numerous countries), researchers are more likely to lead studies on the economic effect of health at household or individual level. Authors showed that health shocks, based on self-reported functional activity limitation and disability days, make households vulnerable and rush them into poverty. Schultz and Tansel (1997) found that disability days reduce wages by at least 10% and hours by 3%. Gertler and Gruber (2002) found that Indonesian families are unable to insure consumption against major illness shock in the absence of insurance scheme. Christiaensen, Hoffmann and Sarris (2007) estimated that one-third of rural households in Tanzania lost, due to health shock, an eight percent of welfare after using saving and aid. Liu et al. (2008), using data from longitudinal China Health and Nutrition Surveys, found that healthy households have higher income than those in poorer health.

Adverse health economic effects were also studied through endemic and parasitological diseases. Gallup and Sachs (2001), through cross-country regressions for 1965-1990’s period, found a negative relation between malaria and growth. Taking into account among others, initial poverty and tropical location, they found that countries with intensive malaria grew 1.3% less per person per year. They argued that wiping out malaria in sub-Saharan Africa could increase that continent’s per capita growth rate by as much as 2.6% a year. Bell, Devarajan and Gerbasch (2003) showed how AIDS by killing young adults and depriving children to parent’s loving care, knowledge and capacity to finance education, will cause drastic economic damage.

And during the last decade, a consensus in academic and policy circles held “that disease environment and health conditions lie at the root of large income differences across countries today, and argues that improving health will not only improve lives but will by itself spur rapid economic growth” (Acemoglu and Johnson, 2006). However, more recent works contradict this consensus or at least show again that the links between health and development are more complex. In fact, if those links are not really questioned (Bloom, Canning and Sevilla, 2004; Bloom and Sachs, 1998; Gallup, Sachs and Mellinger, 1999, Barro, 1997; Kloos et al. 2008), voices arise against the affirmation of a systematic and universal relation. The example of the AIDS disease illustrates this purpose. Despite the facts that poverty increases the biological susceptibility to HIV, in the same way as all other infectious diseases, absence of instruction is a handicap for the efficiency of HIV prevention (Lachaud, 2007). But, on another way, macroeconomic studies (O’Farrell, 2001; Lachaud, 2007; Tsafack, 2008) such as microeconomic ones (Ainsworth, Semali, 1997; Lachaud, 2007; Tsafack, 2008), underlined a positive link between HIV prevalence and living standard.

In the same vein, the proof of a negative health effect at macroeconomic level was controversy. In their paper, Acemoglu and Johnson (2006), using international data from the epidemiological transition period, do not find that increase in life expectancy at birth (due to drastic decrease in mortality), had a significant economic impact. They find that increase in life expectancy had a small initial positive effect which grows over the post epidemiological transition, but not enough to compensate for the increase in population. Consequently, life expectancy increase do not lead to a significant increase in per capita economic growth. This result joins those of Barlow (1968) with regard to malaria eradication and of Over (1992) with regard to economic effects of AIDS. Bell, Bruhns and Gersbach (2006), using a model with overlapping generations (1950 to 1990) and simulations (ending in 2050), show, contrary to their previous work on this topic, that the economic effect of AIDS will not be so catastrophic as predicted for the economic growth in Kenya.

While this recent literature shed doubt on claims that unfavourable health conditions are the root cause of the poverty of some nations, authors however agree with the fact that global efforts to combat poor health conditions in less developed countries can be highly effective (Acemoglu and Johnson, 2006). Empirical relations between health, growth and poverty are not so clear or at least difficult to evaluate. Some reasons could be put forward and among them the complex interrelations between health, disease, and productivity, as showed in Figure 4. The next paragraph concerns the effects of diseases on agriculture productivity.
Figure 4: The role of health in the cycle of poverty

Poverty
Low income

Low land productivity, low crop yield

Low capacity to investing in human capital
- Bad nutrition
- Bad living conditions
- Bad access to health facilities

Low capacity to investing in physical capital (adopting innovative technology)

Bad health
- Catastrophic expenditures?
  If yes, then
- Need for increasing insurance coverage

Low labour productivity?
If yes, then
- Production lost?
  Income lost?
  if, yes, then

Source: Author
2.2 – *Endemic diseases and agriculture productivity*

We saw that agriculture sector is or should be a priority sector for policy-makers. Investigate on the determinants of agriculture productivity is a step towards the first MDG. As healthy populations are supposed to be more productive, health is one of those determinants. But as we will see, the assessment of diseases impact on agriculture productivity is not obvious.

Literature on the effect of endemic or parasitic diseases on agriculture was relatively important between 1960 and the end of the eighties. Effects of diseases were estimated either on production (Foster, 1967; Barbosa and da Costa, 1981; Audibert, 1986), on productivity (Baldwin and Weisbrod, 1974; Weisbrod and Helminiak, 1977; Workneh *et al*., 1993), reallocation of labour and land (Fenwick and Figenschou, 1972; Conly, 1975), or on reducing physical ability (Collins *et al*., 1976, Spurr *et al*., 1977; Brohult *et al*., 1981; van Ee and Polderman, 1984). Results of those studies were contrasted.

Baldwin and Weisbrod (1974) examined the productivity effects of five parasitic diseases (schistosomiasis, ascariasis, trichuriasis, strongyloidiasis, and hookworm infection) in Santa Lucia. Earnings per week were used as a measure of productivity and the presence of schistosomiasis and each of the other four parasitic infections as measure of disease morbidity. The four hypotheses, tested by regressions where number of diseases entered as explanatory variables, are that diseases:

1. reduce weekly earnings per week;
2. causes workers to shift to physically less demanding jobs;
3. reduces productivity per day;
4. reduces the amount of labour supplied per week

Results are that parasitic infection, but schistosomiasis, appears to cause few statistically significant adverse effects on agricultural labour productivity, but may affect the quality and quantity of leisure time and relationships within the household. Pursuing this study, Weisbrod and Helminiak (1977) found, three years later that schistosomiasis exerted a lower effect on earnings (14 percent of the daily earnings of male workers against 30 percent previously) while ascariasis exerted a higher effect.

Due to coping process and reallocation of intra-household labour, Conly (1975) did not find any malaria effect on Mexican farmers’ production nor Gateff *et al*. (1971) in Cameroon with both malaria and schistosomiasis. On contrary, Audibert (1986), using longitudinal field surveys among rice-growers’ households in North Cameroon, found that urinary schistosomiasis had a negative effect on rice production while malaria had not. Wang’Ombé and Mwabu (1993) also found no direct effects of malaria upon income or agricultural production in Kenya even this result does not imply that malaria has no consequence on household welfare.

Several reasons could be advanced at that time and concerned:

i) lack of data regarding adequate measure of morbidity or invalidity (Guyatt and Evans, 1992; Bennett, 1993);
ii) lack of data on labour substitution (hiring or within family substitution (Wang’Ombé and Mwabu, 1993);
iii) lack of innovation in statistical analysis (Rosenfield *et al*., 1984).

Literature on the effect of endemic diseases on agriculture productivity is less numerous, may be because assessing those links needs multidisciplinary studies. Further, most recent works on this topic mainly concerned malaria and schistosomiasis.

If some authors use indirect approach for assessing potential economic losses due to diseases (Umeh *et al*. 2001; Asare-Afrane *et al*., 2004; Girardin *et al*., 2004), others tried to deal with the above underlined insufficiencies (Audibert and Etard, 1998; Audibert *et al*. 2003a, 2003b; Packard, 2001).

---

*Studies on economic effect of health in the agriculture sector should be found, as for example that of Sarris, Savastano and Christiaensen (2007) in Tanzania. But health indicator do not concern endemic diseases.*
Umeh et al. (2001) working on urinary schistosomiasis in Nigeria, showed that low infection households use on average, other determinants of land use being controlled for, more land than heavy infection households. Asare-Afrane et al. (2004) focused on urban area in Ghana and compared individuals days’ lost due to malaria according to their living place: city locations without irrigated agriculture, city locations with irrigated urban vegetable production, peri-urban locations with rain-fed agriculture. They found that the number of reported malaria episodes and days lost due to illness was significantly higher in urban areas with irrigated agriculture in both seasons (rainy and dry) for all age groups. Concerning malaria again, negative correlations were found between total yield and the number of days prescribed sick due to malaria (Girardin et al., 2004) in Cote d’Ivoire.

Assessing the impact of schistosomiasis among rice-grower households, Audibert and Etard (1998, 2003c) used a quasi-experimental design including health treatment. The effect of the treatment was assessed according to economic output (paddy yield), and five resource variables (family and hired labour productivity, family and hired labour intensity and farm size). Results showed that health improvement has no direct effect on rice production, but affects the household's use of its labour resources and its ability to utilize resources. Relative to the untreated group, the number of family workers-days available increased by 69 per hectare and the size of cultivated land by 0.47 hectare in the treated group. Further investigations, have shown that the net improvement of family labour productivity observed in the treated group has been used, no to increase the yield of the main cash rice-crop, as we might expected, but to extend the cultivation of other more quickly rentable crops, such as market-gardening crops. These results illustrate:

1) the key role of the coping process, yet observed by Conly in the 1975s, in masking the direct economic effects of disease;
2) the economic benefit of reducing the burden of disease by increasing time available for developing agricultural activities or non-farm activity (see the debate on the growth process relatively to non-farm activity).

The economic effect of malaria was again studied but in Cote d’Ivoire (Audibert et al., 2003a, 2003b, 2009). Field data were collected by the authors between 1997 March and 1998 February in the savannah zone of Korhogo and in the 1999 year in the forest zone of Danane. Field surveys were carried out on 700 and 800 respectively rural households living in three rice production irrigation systems among 21 villages. Two malaria morbidity indicators were used: Plasmodium falciparum infection rate and high parasite density infection rate. Methodological approach for estimating malaria economic effect was slightly different according to the papers.

- The first paper (savannah zone) tried to assess the impact of malaria on farm household property (Audibert et al., 2003a). The question was: by weakening individuals, does malaria reduce productive capacities and income workers, and consequently limit their property accumulation? Data on household property (farming equipment, livestock and durable consumer goods) and other household characteristics such as malaria morbidity were collected and introduced into a log linear regression models. Findings showed a significant negative correlation between high density infection rate and the property values. They confirm that by reducing the living standards of households, malaria is a limiting factor for property accumulation.

- The second paper (Audibert et al., 2003b) assessed the effect of malaria on the cotton-crop development (savannah zone) using a production frontier model assuming that unhealthy (due to malaria infection) cotton-grower households should be less efficient than healthy ones. Findings confirmed the assumption, and highlighted a critical threshold above which malaria had a negative effect on technical efficiency in the cotton crop. Farm households in which the proportion of actives with a high density (more than 499 trophozoites/µL of blood) of Plasmodium falciparum was higher or equal to 25%, were less efficient than farm households in which this proportion is lower.

- The third paper (Audibert et al., 2009) assessed the effect of malaria on coffee and cocoa productions and yields. After controlling for malaria endogeneity and village heterogeneity, a two-
stage least square regression analysis on coffee and cocoa production were used. Contrary to results on the cotton-crop, malaria infection seems to have no effect on coffee and cocoa crops, neither directly through the production or indirectly, through a coping process such as the resort to hired labour. Several arguments were advanced, and among them, the fact that coffee and cocoa crops are less labour consuming than rice or cotton crops.

The last paper discussed here is that of Packard (2001). Working on malaria, his control and land cultivation in South Africa, while having adopted an historical point of view, Packard (2001) found that malaria may have been a barrier to economic development in the lowveld regions of South Africa. But, she estimates that its impact on agricultural production varied by race and class. Malaria was more a barrier for poor whites than large-scale white commercial farmers. The benefits of malaria control after World War II were limited in the sense that poorer whites and African did not expand their economic activities such as extend fertile land cultivation.

III – Effect of intensive agriculture on endemic diseases

Increase land productivity needs to adopt new technology or system of culture such as high yield variety crop, fertilizers, pest management use, and irrigation systems and dams construction. Irrigation in allowing double cropping and decreasing the uncertainty of relying on water supplied by rainfall, is the answer into the fight against poverty. Studying the source of growth performance of non-rice crop sectors in India, Janaiah, Achoth and Bantilan (2005), for example confirmed the role of irrigation in total factor productivity. Their findings were that contribution of technological progress was considerably higher in Indian regions where modern varieties (MVs) were adopted under irrigated/semi-irrigated conditions.

Between 1965 and 1995, the percent of irrigated lands in the world increased from 11% in 1965 to 17% in 1995 (Schoengold and Zilberman, 2004) and the percentage change from 1973 to 1988 varied between less than 15% (Nigeria, Sudan, Peru, Chile, Venezuela) and more than 45% (Madagascar, Mali, Brazil, Columbia, Hunter et al., 1993). In Asia, the part of irrigated lands increased a lot (16% in 1965, 31% in 1995, 42% in 2000), contrary to Africa where percentage of irrigated lands, despite of some great projects (Mali, Cote d’Ivoire, Nigeria), was very low (5% in 1965, 6% in 1995, and 2000, Schoengold and Zilberman, 2004; FAO website). More, 70% of irrigated land in Africa was in four countries (Egypt where 98.6% of cropped land is irrigated, Madagascar, Nigeria and Sudan, Hunter et al. 1993). In other terms, Africa would have a great potential for its land productivity by increasing irrigated lands. The use of chemical fertilizer and pesticides is also considered as a mean to significantly increase land productivity.

Agriculture has a role in reaching the first of the eight MDGs (combat extreme poverty). If the transformation of this sector has been less easy in Africa than in Asia (see section I), the green revolution has been more successful in some countries. For example, due to the adoption of HYVs, the agricultural productivity has drastically increased in Zimbabwe (Thirtle et al., 1993).

Water resources development and intensive fertilizer and pesticide use were both considered having several adverse effects:
- as irrigated lands need dam construction and other water resources projects, it concerns about parasitic diseases and inhabitants contamination as well due to migratory movements and population resettlement, migrants contamination;
- as pesticides are applied to food crops, they concern about contamination of farm produce due to residues they can leave (FAO, 2008).

Figure 5 presents and summarizes the motives of an intensive agriculture development and its potential negative effects on health. Argumentation and comments are developed below.
Figure 5: Agricultural policy: Potential consequences of implementing intensive agriculture

- Low land productivity, low crop yield
  - Development of intensive agriculture (dams, irrigation systems, pesticides, fertilisers, etc.)
    - But, irrigation = potential risk for vector-borne diseases
    - But, intensive use of pesticides = potential risk factor for water & soil contaminations, air pollution and then health
    - But, could induce land degradation,
  - Increase of yield and land productivity
  - High income, at short term, increase of income
    - Better nutrition
    - Do income lost due to decrease in labour productive > to income won due to yield increasing?
    - At long term, low income?
    - Production and income lost?
- Low labor productivity?
- Bad health
  - Vector-borne and water endemic diseases, diarrheal diseases; malnutrition cardio-vascular diseases, food-borne disease,
  - Low labor productivity?

Source: author
3.1 – Health risks associated with water resources development: parasitic diseases

As the consequence of the pressure of population increase in developing countries, water impoundment and irrigation systems have been implemented in developing countries. Large, medium and small dams were built in Africa between 1960 and 1980 and irrigated land area increased from 8,261 hectares in 1965 to 11,146 hectares in 1988 (Hunter et al., 1993). With the development of water resources and irrigation systems, numerous voices arose in the literature and criticised dams construction considered as the main responsible of the emergence or re-emergence of parasitic diseases.

Before arguing about health risks of water resources development, it may be useful to quickly present what are the parasitic diseases associated with water resources schemes. Mainly, four parasitic diseases, filariasis, malaria, onchocerciasis and schistosomiasis, are associated with water. Schistosomiasis is linked more closely to human living conditions such as the absence of adequate sanitary facilities. People pollute the environment by unsanitary habits. They acquire schistosomiasis infection through repeated daily contact with water during fishing, farming, swimming and recreational activities. Then, an increase in the density of human population due to migratory movements and population resettlement will exacerbate its transmission. Malaria, filariasis, and oncocerciasis are transmitted to humans through the bite of infected mosquitoes or black flies which breed in staged water, fast-flowing streams and rivers.

Construction of dams (large or small) and development of irrigation systems may modify the habitats, breeding patterns and consequently, the density of intermediate snail hosts (in the case of schistosomiasis) and insect vectors (Hunter et al., 1993). This modification constitutes per se a health risk and explains why so voices arose against dams and irrigated agriculture. But, if examples of health great negative effects were well-known in the past, examples of the absence of health negative effects could be also found.

- Negative health effects of water resources development

Two famous examples have been often cited in the past, as the disaster of dam construction and irrigation systems. They were the Aswan Dam in Egypt and the Diama Dam in Senegal.

The construction of the low dam in the 1930s and the high dam in 1960s allowed the conversion from traditional and intermittently irrigation to perennial irrigation for 300,000 ha, and resulted in increases in the prevalence of urinary schistosomiasis from less than 12% to more than 50% depending of villages and provinces. A sudden increase of intestinal schistosomiasis was also observed (Hunter et al., 1993). The Diama Dam, built in the 1980s, ought to block saltwater intrusion and create a reservoir for irrigation. Studies undertaken before the lake impoundment has showed that the condition of a potential transmission existed as intermediary snail hosts were found in fields. Two years after the dam became operational an outbreak of intestinal schistosomiasis cases was observed (Talla, et al. 1990). The same observation was made with the Selingue am built in 1980 in Mali. Surveys undertaken by the schistosomiasis control national programme in villages around the future dam before and three years after impoundment, showed an increase in the prevalence of urinary schistosomiasis.

More recently, several papers focusing on the effects of dams and irrigation systems on parasitic diseases, concluded to adverse health effects (Table A1). However for all of that, the methodology used is not exempted from bias. As observations of the situation before environment changes and alterations in aquatic systems, has not been made, the authors made comparison of two zones, one with and one without agriculture irrigation. They only could observe that in the irrigated lands zone, the prevalence of schistosomiasis (Dossou-Yovo et al. 1994; de Clercq et al., 2000; Hunter, 2003; Dolo et al., 2004; Yi-Xin and Manderson, 2005), or malaria (Ghebreyesus et al., 1999; Marrama et al. 2004; Mutero, Kabutha et al., 2004; Mutero, N’ganga et al., 2004) is higher than in the non irrigated ones. However for Yapi et al. (2005), irrigated rice cultivation did not increase schistosomiasis risk in the forest zone while it did in the savannah zone.
Studying the causes of malaria resurgence in Azerbaijan, Temel et al. (2004) use an approach based on a linear regression analysis and geographical information system. They found that irrigation water use, but also soil salinity, are determinants of malaria cases.

The conclusions of negative consequences of irrigated lands on malaria transmission or prevalence are less evident for some authors. If Roberts et al. (1992) found that in the Benoue valley (Cameroon), the anopheles density is high in irrigated rice-fields and in the neighborhood; they consider that the effect of irrigation on malaria transmission is much less important that what would be expected. Investigations on schistosomiasis and malaria transmission were completed just before the construction of the dam and the transformation of the environment in the Three Gorges Project (China). It was concluded that schistosomiasis, such as malaria, were not prevalent in the Three Gorges area and therefore did not constitute significant risks to the reservoir site (Gu et al., 1988, cited by Hunter, 1993). But, recommendations were that field studies and surveillance of transmission were necessary. In 2002, Zhen et al. (2005) conducted field surveys and ecologically experiments in the line of those recommendations. Data on human and animal prevalence status and snail habitats’ were collected. Positive and negative impacts were observed depending of the ecology and floods. Less important floods and the exploitation of beach along the Yangtze River contributed to decrease snail habitats’. On the contrary, the flushed beaches and migratory settlements at certain altitude may become snail habitats contributed to consider the reservoir area as a potential transmission area of schistosomiasis. No drastic increase was observed in human prevalence between the two field surveys periods. Recommendations are the same that those made at the end of 1980s (Hunter, 1993), and concern surveillance that should be maintained and effort that must be made to decrease the negative impact.

- No health effects of water resources development

Klinkenberg et al. (2004) investigating the malaria pattern over time and space in Sri-Lanka, studied the role of irrigation canals and natural streams on malaria transmission. Using a multivariate statistical analysis, they found that irrigated rice cultivation areas had a lower risk of malaria than non-irrigated areas. They explained this result by the role of socio-economic factors: due to irrigation development, the higher economic life level allowed households to investing in health and in wealth-being. In the same vein, de Plaen et al. (2004), Audibert et al. (2003b), Henry et al. (2003), Henry et al. (2007) showed that irrigation systems, both in savannah and forest areas of Cote d’Ivoire, had no effect on malaria transmission. In Mali, Sissoko et al. (2004) showed that rice cultivation in the semi-arid sub-Saharan environment altered the transmission pattern from seasonal to perennial, but reduced annual incidence more than two-fold.

If those studies suffer from the same methodological bias that studies which found adverse health effects of dams and irrigation systems (as they compare irrigated areas and non irrigated areas once dam, reservoir, or irrigation systems were built), studies using impact analysis approach were found. Audibert et al. (1983, 1990) undertook a six-year monitoring of a project of irrigated rice lands in the North Cameroon (the SEMRY project). They observed the sanitary and economic situation before and after the impoundment of the reservoir lake and the settlement of the irrigation scheme on both the future irrigated area and the non-irrigated or control area. Prevalence of schistosomiasis and malaria were observed through epidemiological and malacological field surveys. The authors established that as the creation of the lake, as the development of the rice-producing scheme, had not contributed to increase the transmission of malaria or schistosomiasis which remained constant over the six years.

In India, Sharma et al. (2008) also lead a five-year study conducted during and after the construction of a small dam in malaria endemic village. A survey was also conducted in a control village. A gradual decline in malaria incidence among children was observed in the dam site village while in the control area, malaria incidence increased during the corresponding period.
Those examples allowed to do not systematically extrapolate results from specific situations to non comparable situations. And beyond a criticism of the methodology when impact analysis is not used, lessons and useful recommendations for policy could be drawn from those field surveys, as we will see in section IV.

3.2 – *Health risks associated with intensive insecticides and pesticides use: respiratory and parasitic diseases*

If the use of pesticides has been one element of the Green revolution which was on the origin of Asian success, pest mismanagement should have effects on agriculture sustainability. In fact, there exists a conflict between immediate benefits from intensive agricultural systems and long term negative effects either on the environment or on health: soil degradation in areas of which soils are known as fragile ones (Atis, 2006; van der Velde, Green, Vanclooster and Clothier, 2006), ground water pollution (Reddy and Behera, 2006; Zhen, Zoebisch, Chen and Feng, 2006), specific diseases appearance (Pretty, Morison and Hine, 2003). In the same way, insecticides are necessary to increase production but their consumption must be controlled. On one hand, fertilizers, insecticides and pesticides are all required inputs for high agriculture productivity. High agriculture productivity is a step towards hunger disappearance. On the other hand, a mismanagement of those inputs may have negative effects on health (and on environment and sustainability, de Souza Filho, Young and Burton, 1998).

The effect of agriculture inputs overuse or mismanagement on health occurs through at least two channels.

- The first one is direct as prolonged exposure to pesticides can cause chronic diseases such as cardiopulmonary or neurological problems (Dasgupta, Meisner and Huq, 2004). Studying the effects of pesticide use among smallholder cotton growers in Zimbabwe, Maumbea and Swintonb (2003) found that acute pesticide symptoms were determined in large part by pesticide use practices, notably the lack of protective clothing. And if mismanagement of pesticides induces a risk for health, it also induces a cost, both financial and economic. They showed through a field survey of 280 smallholder cotton growers in Zimbabwe that acute symptoms induced direct (healthcare expenses) and indirect (time spent recuperating from illness during the growing season) costs. These costs are equivalent to 45% and 83% of annual household pesticide expenditures in the two surveyed districts. Economic benefits (due to land productivity increase) of pesticides use should then be balanced by financial costs increase (due to adverse health effects).

- The second effect is indirect and twofold. Uncontrolled pesticides use may introduce parasite resistance to insecticides. Several studies have reported severe cotton production decreases in Central American countries or in Thailand. They were attributable to insecticide over consumptions which have developed insects’ resistances (Mc Caffery, 1998; Kranthi et al. 2002). They also have indirect effects on health in areas of endemic malaria. While this resistance extends to the malaria vectors (anopheles), the vector control is made more difficult (Diabate et al., 2002; CREC/IRD/ London School, 2007).

So a mismanagement of insecticides and pesticides use should have, as seen above, several adverse effects:

- on cost-effective agriculture policy adopted (when the costs of health deterioration exceed the economic benefits of land productivity);
- on public health i) due to the apparition of insecticide resistance which is a brake to vector control; ii) due to human exposure by unsafe manipulation of pesticides increasing skin or pulmonary diseases;
- on environment and then sustainability of agriculture when pest mismanagement induces water pollution, soil degradation.
However, here again, some voices arise in order to show the numerous benefits of pesticides use. In their paper, Cooper and Dobson (2007) plead in favour of pesticides or at least proposed a more balanced view. Through a literature survey, they can enumerate:

i) some primary benefits (26) such as crop and livestock yields increase, food safety improvement, quality of life;

ii) and secondary longer term benefits (31) such as increase in children’s education increase or in medical care access, leading to a healthier and better educated population.

The main criticism we could make to the paper of Cooper and Dobson is that the benefits are more presented as an enumerated list rather than evaluated. The given reason is that consequences of the effects have not manifested themselves yet. But, its main interest is that they place the question of the agriculture development into a holistic approach and a societal point of view.

IV – Policy response

The high population growth rates observed after the 1950s in developing countries of Latin America and Africa, allowed to developing the agricultural sector. While the green revolution with the introduction of HYVs and irrigation systems has been a success in Asia, it was not truly the case in Africa and also in Latina America. Despite the development of dams building (for water storage) and irrigation projects in those continents, the per capita agricultural production has increased in Asia, but remained stable in Latin America and declined in Africa (Hunter et al. 1993).

However, as see above, the construction of dams, formation of reservoirs and irrigation systems could cause health degradation as health risks. For that reason, the adoption of water resources development was largely criticized in the literature of the seventies.

After a decline, the interest around intensive agriculture and health risks again increases. A reunion, held in 22 September in New-York, allowed to constitute a steering group which made some recommendations as a call to action. It underlined the need of focused investments in agriculture, in order to launch a green revolution in Africa, as well education, health and infrastructure that are critical to present and future efforts to reach the MDGs.

As resumed by Hawkles and Lee (2001) in a conceptual framework drawn upon a review of the literature, links between health and agriculture lie on:

- The agriculture supply chain such as types of producers (farmers or workers), agricultural systems (intensive including irrigation, fertilizers, pesticides uses; extensive including slash, burn-clearing) and agriculture outputs (quantity, quality, prices);

- Intermediary processes such as labour process, environmental change (water, air, sol), access to food, water, land;

- Health outcomes such as occupational health risks, water and vector-borne diseases, under nutrition and chronic diseases.

Illustrating those links, Figure 6 calls two questions:

- How to increase farm productivity?

- How to cope with health risks?
Figure 6: Water resources development, pest use and health risks

- Need to increase food production
  - Increase land productivity
    - Construction of dams, development of irrigation systems
      - (+)
      - (+)
    - Use of insecticides
      - Conflict?
    - Endemic disease
      - (-)
    - Goal 1
    - Goal 6
    - Health problem
      - Skin disease, food-borne and respiratory diseases
        - (-)
      - Goal 7
    - Integrated pest management (IPM): non-chemical methods, personal protective equipment, recommended pest and fertiliser doses

- Intensive use of fertilisers and pesticides

Modifying and manipulating the environment: drainage, levelling land, alternate wetting and drying irrigated
Introduction of predators

Source: Author
4.1 – How to increase farm productivity in Africa?

Incentives for adopting irrigation scheme and fertilizers use in African agriculture sector have not been really different from incentives use in Asia. Low farm crop prices relatively to the cost of inputs should have been dissuasive (http://www.fao.org/docrep/003/X8827F/x8827f00.HTM).

Beyond the aspect of financial incentives, which could be developed by a better access to credit, the sustainability of agriculture but also farmers health require to adopt better practices in fertilizers and pests use and in water resources management.

The above review of the literature clearly showed that innovations such as irrigation systems and pests use played a huge role in the agricultural productivity and yet in the fight against poverty. The question of how to increase agricultural productivity in Africa is then asked. But, while judicious use of modern technologies is essential for efficient food production, inappropriate uses, such as excessive application rates or imbalances in input combinations, result in serious environmental problems and food safety concerns (Nyberg, 2000).

- How to incite farmers to adopt high yield innovation?

The Malawi experience is often cited as a success story as thanks to government subsidies, smallholder farmers increased land cultivated (http://www.ipsnouvelles.be/news.php?idnews=9913). Giné and Yang (2004) analysed the Malawi experience where 97% of households were engaged in maize production, but only 58% use hybrid maize varieties. They studied the link between insurance and the adoption of credit. It was argued that technology adoption may be hindered when returns are risky and insurance or other financial markets are imperfect (Giné and Yang, 2008). The question was whether production risk suppressed the demand for credit. For the lender, weather insurance is likely to be an attractive way to mitigate default risk and thus, it can become an effective risk management tool with the potential of increasing access to credit in agriculture at lower prices. To check this assertion, they implemented a randomized field experiment to ask whether provision of insurance against a major source of production risk induces farmers to take out loans to adopt a new crop technology. Two groups of farmers were formed. One group was offered credit for purchase high-yield hybrid variety of maize and groundnut. The second group was offered credit plus a weather insurance policy that partially or fully forgave the loan in the event of poor rainfall. They found that if the access to credit allowed smallholder farmers to adopt a better technology, the package credit plus weather insurance do not increase the demand for loan. Conclusion is that increasing the access to credit by microfinance institutions can help farmers to purchase agriculture inputs and adopt higher technology innovation.

- Adverse effect of high agriculture technology, example of China

In the 1960s, the main problem of China was food security. Until the 1980s, the government increased the financing devoted to the agricultural research. During this period, high-yielding and hybrid rice varieties and drought and pest wheat varieties were developed and adopted by farmers (Nyberg, 2002). Irrigation has played a critical role in establishing the highly productive agronomic systems. The proportion of cultivated area under irrigation increased from 18 percent in 1952 to a level at which about half of all cultivated land had been irrigated after the early 1990s. Despite a decline of interest research in agriculture sector, and a breakdown of the extension irrigation system, farmers continued to adopt new varieties produced by researchers. During the 1980s and 1990s China's producers were replacing varieties from about 20 to 25 percent of their sown areas during each cropping season. In other words, about every four to five years, China's farmers are completely turning over their technology portfolios (Nyberg, 2002). The work of Jin et al. (2002) confirms also that innovation and technology are the most important source of TFP growth.
However, rising demand for domestic and industrial water uses poses a serious constraint to irrigated agriculture and increasing water scarcity is being viewed as a major challenge to future food security and the well-being of people especially in the northern region of China. A balanced water management should be an answer to this constraint. For example, Wang et al. (2005) showed that the water management reform has been helping to increase the efficiency of water use in North China, although the scope for such reform in the long term is somewhat limited. The agriculture sector in China recently faces a problem of environmental degradation. China is the world's leader in both chemical fertilizer and pesticide consumption (Huang, Yang, Rozelle, 2006). We saw that intensive fertilizer and pesticide use can have several adverse effects and concerns about contamination of farm produce and endangering people health.

- How to incite smallholder farmers for a more effective use of intensive agriculture: the example of irrigation in the Philippines

Water control and distribution in irrigation systems for crop cultivation is usually ensured by the government as well as the maintenance of canal systems. This maintenance is not systematically done. It is well-known that poor maintenance of existing canals leads to increased amounts of lost water (Schoengold and Zilberman, 2004).

In Philippines, irrigation associations have been created. Bandyopadhyay, Shyamsundar and Xie (2007) have examined the capacity of those associations to lead operations and maintenance activities when management transfer occurs. Their hypothesis is that management transfer leads to local control and improves system performance. Using data from a survey of 1,020 farm households, their investigation underlined three interesting results:

i) system irrigation maintenance increases with the presence of irrigation management transfer (IMT);

ii) irrigation management transfer increases local control over water delivery which significantly increases farm yields and then rice production;

iii) if the farmer is more certain about water delivery (thanks to IMT), this may affect his or her decisions related to other input use which is in relation to better yield;

iv) IMT contributed to a better resolution of conflicts related to illegal use and a most cost-effective water use.

4.2 – How to cope with intensive agriculture health effect adverse?

Water development resources may induce the development or the expansion of water borne diseases. But this risk could drastically be reduced or remain inexistent with appropriate actions. They are:

- Environmental sanitation and health education

A control of schistosomiasis due to S. mansoni was launched in November 1960 in a Brazilian village. Control measures were limited to environmental sanitation and a community health education programme. A seven-year monitoring survey showed that human infection rates were progressively reduced in the project area. Eight years after the beginning of the project, field surveys showed that a successful degree of control of schistosomiasis has been achieved in the project area (Barbosa, Pinto and Souza, 1971).

- Modifying or manipulating the environment (MME)

In the case of irrigated lands, management opportunities appear for controlling vector-borne diseases and at the same time improving the water efficiency and then saving cost irrigation (Schoengold and Zilberman, 2004).
Several examples of the positive effect of those opportunities are showed with the SEMRY project, developed in the 1979s in North Cameroon (Audibert, 1983, Audibert 1990), with the malaria and schistosomiasis control projects in the Sichuan (Liu et al. 2004), with malaria control in India (Tyagi, 2004).

The SEMRY project has, since the beginning, been considered by the management team and the donors (the French Foreign Affairs Ministry, the World Bank, and the Government of Cameroon) as a development project. This point of view conducted to lead this project through a multisectoral approach. If the general goal of the project was to increase the national rice production, specific goals were to improve farmers’ income and households’ wealth-being. With the creation of a lake, the settlement of farmers around the future irrigated lands, several activities were undertaken which resulted to keep low health risks (Audibert, 1983, Audibert 1990). The adopted strategies were:

- to cement the primary irrigation canal and undertake systematic maintenance of secondary canals and drains;
- to supply safe domestic water and to improve sanitation by boring wells and building latrines in the new settled villages;
- to improve health supply by building health facilities and developing health education.

The consequence of those strategies was that the prevalence and the incidence of the two main water borne diseases, schistosomiasis and malaria, remained stable and low in the project area.

Prior to the mid-1960s, malaria in the Sichuan Province was a major public health problem, with the fourth highest level of morbidity in the country (Liu et al., 2004). Over the last three decades, the irrigation network has been gradually extended thus ensuring water security and increasing the area of arable land. Land was farmed by intermittent wet/dry irrigation and rice fields that had been left flooded but fallow throughout the winter are now under an annual cycle of wet crop/dry crop rotation to maximise productivity. Between 1950 and 1960, an integrated malaria control programme approach (cases detection, treatment, indoor-spraying) was established. It contributed to a drastic decrease in malaria severity despite the expansion of irrigated lands, where farmers have traditionally kept flooded all year round to ensure an adequate water supply. Field studies showed that the vector breeding has been greatly reduced. It would appear that vector populations have now fallen below the level required to sustain malaria transmission (Liu et al, 2004).

In the same province, the World Bank loans a project on schistosomiasis control. Early efforts focused on the control of the intermediate host snails by chemical molluscicides and environmental management. Large-scale community participation was a central feature in environmental management. In the 1990s, morbidity control was done through the administration of praziquantel, which had been introduced for large-scale use in the previous decade, coupled with health education. The transmission of schistosomiasis has considerably decreased and is now very low. The strategy adopted was (Wang, Utzinger and Zhou, 2008):

i) improvement of the mechanisation of agriculture, by replacing buff aloes with tractors (in order to achieve the elimination of the animal disease);
ii) installation of sanitation facilities in houses;
iii) provision of toilets for mobile populations.

Tyagi (2004), underlying on a review of the literature between 1930 and 2000, explained the resurgence of malaria in the Tar desert (India) by the mismanagement of irrigation systems. The main incriminated factors are:

- cessation of flow due to heavy sedimentation and profuse growth of hydrophytic plants;
- excessive peeling-off of the canal lining allowing water percolation through embankments;
- vast collections of seepage water along the main canal.

For this author, parasitic diseases could be controlled by using meticulously practised wet and dry irrigation technologies.

---

7 The number of cases was reduced to 10-20 cases/10,000 people.
After a systematic literature review between 1900 and now, on 40 studies examining the effect of environmental management on malaria, Keiser, Singer and Utzinger (2005) reached the same conclusion. Modifying or manipulating the environment could create unfavourable conditions for vector propagation, reduce vector habitats and contribute then to reduce malaria burden.

In conclusion, modifying or manipulating the environment creates unfavourable conditions for vector propagation and reducing vector habitats. It consists in (Prüss-Ustün, Bos, Gore, Bartram, 2008; Dodd and Cassels, 2006; Schoengold and Zilberman, 2004; Tyagi, 2004; Audibert et al.1990):

- reducing vector habitat through infrastructure: drainage, systematic maintenance, levelling land, contouring reservoirs, modifying river boundaries;
- alternate wetting and drying of irrigated paddy fields, synchronization of paddy fields, alternate periodic flushing of natural and human-made waterways;
- introducing predators, such as larvivorous fish;
- improving access to safe water and good sanitation conditions;
- promoting health education.

**Integrated pest management (IPM)**

Dasgupta, Meisner and Huq (2004) studied the health and environment effects of overusing pesticides among farmers in Bangladesh. A survey of smallholder farmers was carried out and showed that 47% of farmers use more than the recommended doses of pesticides. The authors observed that a prolonged exposure to pesticides could cause chronic diseases such as cardiopulmonary or neurological problems (26% of farmers experienced multiple health problems).

While, fertilizers, insecticides and pesticides require to be used with caution, farmers misunderstood pesticide health hazards, and so did little to protect them. Maumbea and Swintontb (2003) found that using simple colour codes for indicating the different degrees of pesticides toxicity is not enough. For those authors, a better farmer education in pesticides exposure and the integrated pest management are needed. Integrated pest management (IPM) allows farmers to producing crops in a cost-effective and sustainable manner helping them to suppress pests by using non-chemical methods.

**Integrated Vector Management (IVM)**

Water resources development plays an important role in farm productivity and consequently in Africa economic development. But, expansion of irrigation systems and irrigated land are not free of health risks. Intensifying pesticides and insecticides use is also important for the development of agriculture. On the other side, insecticides play an important role in the prevention and the control of parasitic diseases in Africa endemic countries. Households use insecticides in order to protect themselves against nuisance vector and disease. They also use pesticides for controlling pest or unwanted species of plant causing harm during the production process. Public professional through ministry of health or ministry of agriculture, but also private professional, use pesticides and insecticides for different objectives. A conflict may arise between insecticides used for public health and insecticides used for agriculture development (Figure 6). The integrated vector management (IVM) approach could conciliate both public health and agriculture development objectives. IVM is a decision-making process for the management (http://www.who.int/malaria/integratedvectormanagement.html) of:

i) vector populations, so as to reduce or interrupt transmission of vector-borne diseases;

ii) pest use, so as to reduce health risks and soil and water degradation
Its characteristic features include:
- Selection of methods based on knowledge of local vector biology, disease transmission and morbidity;
- collaboration within the health sector and with other public and private sectors that impact on vector breeding;
- engagement with local communities and other stakeholders;
- a public health regulatory and legislative framework;
- rational use of insecticides;
- good management practices.

Conclusion

The role of the agriculture on the economic development is well recognized. Increasing agriculture productivity needs to adopt innovation and intensive technology such as irrigation system production, fertilizers, insecticides and pest use. A misuse or mismanagement of those technologies could induce health problems.

However, several activities blocking the development or the occurrence of parasitic diseases and other health problems could be undertaken. They include:
- integrated pest management;
- integrated vector management;
- modification and manipulation of the environment,
- improvement of sanitation conditions;
- health education;
- education on good practices.

Those actions cannot be effective without a multisectoral commitment and an intersectoral negotiation.
References

I – More general references on the topic (role of agriculture on poverty reduction or growth, role of health on growth or wages)


World Bank (1982), World development report 1982,


II – References on health, endemic diseases, agriculture and growth


Conly, G.N. (1975), *The impact of malaria on economic development, a case study*, Scientific Publication, 297, Washington, PAHO.


Wang’Ombé J.K, Mwabu G.M (1993), Agricultural land use patterns and malaria conditions in Kenya, Social Science and Medicine, 37, 9, 1121-1130.


Yi-Xin, H., Manderson. L. (2005), The social and economic context and determinants of *schistosomiasis japonica*, *Acta Tropica* 96, 223–231.


III References on policy


Cooper J, Dobson H (2007), The benefits of pesticides to mankind and the environment, *Crop Protection* 26, 1337–1348


Hosack GR, Rossignol PA, van den Driessche P, The control of vector-borne disease epidemics, Department of Fisheries and Wildlife, Oregon State University.


## Annex

Table A1: Agriculture and endemic diseases: a partial synthesis

<table>
<thead>
<tr>
<th>Author(s), Year</th>
<th>Area covered, Objective, Method,</th>
<th>Type of agricultural activity</th>
<th>Health, Disease variable</th>
<th>Conclusion, observations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Adverse health effects of intensive agriculture</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hunter, J.M., 2003</td>
<td><strong>Areas covered:</strong> Rural Ghana, five districts (1959-1997) <strong>Objective of the study:</strong> To investigate the long-term health consequences of an agricultural development project (dams) and assess the longevity of a disease impact of the original project <strong>Method:</strong> Surveys and comparison between areas with agricultural dams and areas without.</td>
<td>Agricultural dams</td>
<td>Number of cases of <em>Schistosomiasis hematobium</em> among population</td>
<td>Four decades later, the prevalence of <em>hematuria</em> (bloody urine) is still abnormally higher in the regions were dams have been constructed, even though many of them are in a neglected state.</td>
</tr>
<tr>
<td>Mutero, C.M., Kabutha, C., Kimani, V., Kabugoe, L., Gitau, G., Ssennyoonga, J., Githure, J., Muthami, L., Kaida, A., Musyoka,L., Kiariie, E., Oganda, M., 2004</td>
<td><strong>Areas covered:</strong> Mwea Division, Kenya <strong>Objective of the study:</strong> - To document an application of the ecosystem approach to malaria research in Kenya; - To present results on the biophysical and social environments influencing malaria prevalence in villages with and without rice irrigation; - To propose phased actions with potential to facilitate long term solutions to malaria on the basis of agroecosystem management and improved utilization of local resources. <strong>Method:</strong> 5 phases of the study; - Stakeholder consultation and existing area</td>
<td>Rice farms’ irrigation</td>
<td>- Number of <em>Anopheles arabiensis</em>; - Prevalence of malaria</td>
<td>Results of the entomological evaluation showed a 30–300-fold increase in the number of the local malaria vector, <em>Anopheles arabiensis</em>, in villages with rice irrigation compared to those without irrigation yet malaria prevalence was significantly lower in these villages (0–9% versus 17–54%). The prevalence of malaria in Mwea Division was higher in villages located outside the rice irrigation scheme compared to those inside. One of the explanations of this “paddies paradox” is on the basis of differences between the ecological...</td>
</tr>
<tr>
<td>de Clercq D; Vercruysse J; Sene M; Seck I; Sall CS, 2000</td>
<td>Areas covered: First survey in Middle and Upper Valleys of the Senegal River basin. 1445 children aged 7-14 years: 1011 in 10 villages near Matam, and 434 in 4 villages near Bakel Second survey in June 1999, on 755 children from 9 of the study villages near Matam</td>
<td>Objective of the study: Investigate the importance of the increase in irrigated land on the perimeters of the Middle and Upper Valleys of the Senegal River basin on the prevalence and intensity of urinary schistosomiasis. Method: Surveys and statistical analysis</td>
<td>Rice farms’ irrigation</td>
<td>Prevalence and intensity of urinary schistosomiasis</td>
</tr>
<tr>
<td>Temel, T., 2004</td>
<td>Area covered: Azerbaijan (58 districts) Objectives of the study: Investigate the causes of malaria resurgence in Azerbaijan Method: Linear regression analysis and GIS (geographical information system)</td>
<td>Agricultural variables included in the regression among other covariates: - Number of formerly state-owned farms - Number of formerly collective farms - Area of irrigated land - Area of agricultural land with severe salinity - Area of eroded land</td>
<td>Malaria prevalence: the ratio of the number of malaria cases to the population size</td>
<td>Among agricultural variables, only irrigation water use and soil salinity are significant determinants of the number of malaria cases in population. The other determinant of malaria prevalence in Azerbaijan is longitude, a geographical variable.</td>
</tr>
<tr>
<td>Robert, V., van den Broek, A., Stevens, P., Slootweg, R., Petrarca, V., Coluzzi, M., Le Goff, G., Di Decod, M.A., Carnevale P., 1992</td>
<td>Area covered: Benoue Valley, northern Cameroon Objectives of the study: Study the impact of the increase of irrigation in the Benoue Valley of malaria</td>
<td>Irrigated area under cultivation - Number of indoor resting mosquitoes caught by Pyrethrum spray - Biting rate of</td>
<td>The anopheline density is high in irrigated rice-fields and in the neighborhood. However, an analysis of the sources of the blood meals provides evidence for indoor</td>
<td></td>
</tr>
<tr>
<td>Area covered:</td>
<td>Objective of the study:</td>
<td>Method:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------</td>
<td>--------------------------</td>
<td>----------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chimbari, M.J., Chirebvu, E., Ndlela, B., 2004</td>
<td>To undertake a comparative assessment of the malaria and schistosomiasis risks associated with surface and sprinkler irrigation systems in Zimbabwe</td>
<td>Cross-sectional entomological surveys in three irrigated and three non-irrigated villages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dolo, G., Briët O.J.T., Daoa, A., Traoré S.F., Bouaré, M., Sogoba, N., Niaré, O., Bagayogo, M., Sangaré, D., Teuscher, T., Touré, Y.T., 2004</td>
<td>To study whether the extended breeding season and increased mosquito populations caused by irrigated rice cultivation have effects on malaria transmission, as compared to the non-irrigated Sahel</td>
<td>Cross-sectional entomological surveys in three irrigated and three non-irrigated villages</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dossou-yovo, J., Doannio, J., Rivière, F., Duval, J., 1994</td>
<td>To investigate the impact of development of rice-fields in Bouaké city (Côte d’Ivoire) on anophele populations and malaria transmission.</td>
<td>Comparison of districts of the city where low-lying areas are used for rice-fields (with irrigation) with those used for market</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Area covered:</th>
<th>Objective of the study:</th>
<th>Method:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chimbari, M.J., Chirebvu, E., Ndlela, B., 2004</td>
<td>To undertake a comparative assessment of the malaria and schistosomiasis risks associated with surface and sprinkler irrigation systems in Zimbabwe</td>
<td>Cross-sectional entomological surveys in three irrigated and three non-irrigated villages</td>
</tr>
<tr>
<td>Dolo, G., Briët O.J.T., Daoa, A., Traoré S.F., Bouaré, M., Sogoba, N., Niaré, O., Bagayogo, M., Sangaré, D., Teuscher, T., Touré, Y.T., 2004</td>
<td>To study whether the extended breeding season and increased mosquito populations caused by irrigated rice cultivation have effects on malaria transmission, as compared to the non-irrigated Sahel</td>
<td>Cross-sectional entomological surveys in three irrigated and three non-irrigated villages</td>
</tr>
<tr>
<td>Dossou-yovo, J., Doannio, J., Rivière, F., Duval, J., 1994</td>
<td>To investigate the impact of development of rice-fields in Bouaké city (Côte d’Ivoire) on anophele populations and malaria transmission.</td>
<td>Comparison of districts of the city where low-lying areas are used for rice-fields (with irrigation) with those used for market</td>
</tr>
<tr>
<td>Area covered</td>
<td>Objective of the study</td>
<td>Method</td>
</tr>
<tr>
<td>--------------</td>
<td>------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Tigray region (northern Ethiopia)</td>
<td>To assess the impact of construction of micro-dams on the incidence of malaria in nearby communities in terms of possibly increasing peak incidence and prolonging transmission.</td>
<td>Comparison between children in at risk and control villages</td>
</tr>
<tr>
<td>Three villages in Southern Madagascar</td>
<td>- To identify malaria vectors,</td>
<td>Three dummies:</td>
</tr>
<tr>
<td>Mwea rice irrigation scheme, central Kenya</td>
<td>- To evaluate the transmission and</td>
<td>- Natural sub-arid area,</td>
</tr>
<tr>
<td>China</td>
<td>To explore some of the social and contextual factors that influence the epidemiology of Schistosomiasis japonica.</td>
<td>- Irrigated sub-arid area</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Method:</th>
<th>Econometric model with policy environment, economic factors, domestic environment and socio-demographic factors as explanatory variables of <em>schistosomiasis japonica</em> prevalence in China.</th>
<th>with the intermediate host snail, and to rates of the infection in livestock.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Area covered:</td>
<td>Six villages in Northern Cote d’Ivoire (Kaforo, Nambekaha, Naoualakaha, Kohotiery, Fapaha, and Nongotchenekaha)</td>
<td></td>
</tr>
<tr>
<td>Objective of the study:</td>
<td>Explore the interactive role of environmental, social, economic, cultural and biological factors that generate malaria.</td>
<td></td>
</tr>
<tr>
<td>Method:</td>
<td>Data collection (through mapping of agricultural fields, questionnaires, individual (180) and group (24) semi-controlled interviews and detailed, thematic interviews with key informants), followed by statistical analysis.</td>
<td></td>
</tr>
<tr>
<td>Area covered:</td>
<td>Rural North Cameroon, 30 villages, 1979-1985</td>
<td></td>
</tr>
<tr>
<td>Objective of the study:</td>
<td>To investigate the long-term health consequences of an agricultural</td>
<td></td>
</tr>
<tr>
<td>Method:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Areas covered:</td>
<td>Lake and irrigated land</td>
<td></td>
</tr>
<tr>
<td>Prevalence of urinary and intestinal schistosomiasis, Prevalence of malaria Prevalence of malnutrition</td>
<td>Six years after the lake was filled, and the introduction of irrigated lands, the prevalence both of schistosomiasis and malaria remained stable. No changes in the transmission sites were observed.</td>
<td></td>
</tr>
<tr>
<td>Klinkenberg, E., van der Hoek, W., Amerasinghe, F.P., 2004</td>
<td>Area covered:</td>
<td>Presence of irrigation canals, presence of natural streams</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Sharma, S.K., Tyagi, P.K., Upadhyay, A.K., Haque, M.A., Adak, T., Dash. A.P. 2008.</td>
<td>Area covered:</td>
<td>Small dams in the village</td>
</tr>
</tbody>
</table>

**Development project (lake and irrigated lands for rice cropping) and assess both the consequences of this project on endemic diseases and nutrition incidences and the impact of diseases on production**

**Method:**
Impact analysis with comparison between areas with and areas without project, before and after his implementation. Epidemiological, demographic and economic surveys were led during six years, among the same villages and the same inhabitants. Increase of the population in the project area was taken in consideration by including a sample of new migrants, after the third round.

**Area covered:**
Uda Walawe region in south eastern Sri Lanka

**Objectives of the study:**
- To investigate the malaria pattern over time and space
- To correlate this with potential risk factors within land use, socio-economic, and meteorological parameters
- To explore whether an epidemic forecasting system could be developed

**Method:**
Multivariate statistical analysis

**Presence of irrigation canals, presence of natural streams**

**Number of malaria cases**

**Irrigated rice cultivation areas had a lower risk of malaria than non-irrigated areas. This difference could be due to socio-economic factors related to irrigation development and/or transmission dynamics related to vector density or species composition.**

**Small dams in the village**

**Number of new malaria cases among children aged 1–5 years**

**There was a gradual decline in malaria incidence among children in the dam site village. In the control area, there was an increase**
<table>
<thead>
<tr>
<th>Area covered:</th>
<th>Method:</th>
<th>Objectives of the study:</th>
</tr>
</thead>
<tbody>
<tr>
<td>District of Niono, Sahelian Mali</td>
<td>Comparison between study and control villages</td>
<td>To examine whether irrigated rice farming in the Sahel alters the dynamic and magnitude of malaria infection and morbidity</td>
</tr>
<tr>
<td>- Three villages in the irrigated perimeter that practice double rice cropping.</td>
<td>Comparison of malaria transmission patterns between irrigated and non-irrigated villages</td>
<td>To determine the relationship between the changes of environment and the transmission of <em>Schistosomiasis japonica</em> after the construction of the Three Gorge Reservoir, based on the predictive studies on the changes of water level and sediment of silts.</td>
</tr>
<tr>
<td>- Three villages from outside the irrigated perimeter</td>
<td>Data collection (surveys) and analysis and ecologically intimated experiments.</td>
<td>- Positive impact: The way of flush and sediment in the Yangtze River may have both positive and negative impact on schistosomiasis transmission and control.</td>
</tr>
<tr>
<td>Number of malaria cases among children of 0–14 years of age</td>
<td>- Negative impact: the natural conditions of the Three Gorge Reservoir are suitable for snail development and prevalence</td>
<td>- Construction of the Three Gorge Reservoir, a huge dam project</td>
</tr>
</tbody>
</table>


of schistosomiasis. It will form many beaches after the dam construction due to the decrease of velocity of water flow and the sedimentation of silts. In addition, snails may breed in the ditches surrounding migratory settlements.

Tyagi, 2004

**Areas covered:**
Thar desert in India

**Objective of the study:**
Studying the system of canal-based irrigated agriculture in order to understand the underlying factors responsible for the resurgence of malaria, and the possible repercussions of mismanagement of irrigation systems

**Methodology:**
Review of the literature from 1930 to 2000 on malaria in the area, before and after the development of irrigation crops and the built of irrigation canals

Extensive irrigation from three different canal systems in order to develop growing irrigation-intensive crops like paddy, groundnut, cotton, mustard, wheat and sugarcane, and to provide drinking water to the desert dwellers. Actually, 5500 km of distributaries already irrigate 950,000 ha of land.

Density of Anopheline fauna
Prevalence and incidence of *P. vivax* and *P. falciparum*
The mismanagement of irrigation was responsible of the resurgence of malaria. It is: (1) cessation of flow due to heavy sedimentation and profuse growth of hydrophytic plants, (2) excessive peeling-off of the canal lining allowing water percolation through embankments, (3) vast collections of seepage water along the main Indira Gandhi Canal, (4) pilferage of canal water leading to short or long-term pool formations, and (5) delays in construction activity of the main canal and its distributaries resulting in stagnation of canal water for long

Positive association between paddy cultivation and malaria upsurge

**But,** malaria in areas where irrigated lands for intensive crops were developed, could be controlled by using meticulously practised wet and dry irrigation technologies, even if water from canals is available in excess.
<table>
<thead>
<tr>
<th>Study</th>
<th>Areas covered</th>
<th>Objective of the study</th>
<th>Methodology</th>
<th>Data periods</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keiser et al. 2005</td>
<td>All countries concerned by malaria between 1900 and now</td>
<td>Study the effect of environmental management interventions on malaria morbidity and mortality</td>
<td>Systematic literature review (or meta-analysis). 40 studies were identified that emphasised environmental management interventions and reported clinical malaria variables as outcome measures. Among those studies, 16 applied a before-and-after evaluation design (comparing the pre-programme situation with the malaria situation during or after implementation of the interventions), and seven studies (eight datasets) compared an environmental management intervention group with a control group</td>
<td>Malaria of deep forest, as well rural malaria attributable agricultural and non-agricultural man-made activity or habitats and urban malaria</td>
<td>Modifying or manipulating the environment could create unfavourable conditions for vector propagation and reduce vector habitats and contribute then to reduce malaria burden</td>
</tr>
<tr>
<td>Yapi, Y.G., Briët, O.J.T., Diabate, S., Vounatsou, P., Akodo, E., Tanner, M., Teuscher, T., 2005.</td>
<td>Savannah (North) and forest (West) zones of Côte d’Ivoire</td>
<td>- To assess the impact of irrigated rice growing on schistosomiasis transmission in savannah and forest zones of Côte d’Ivoire - To characterize the level of prevalence and intensity of schistosomiasis infection and other helminth infections in these zones</td>
<td>Urine and stool sample collection followed by statistical analysis for a comparison of children in the three agro-ecosystems. Villages classified according to surrounding inland valleys into three agro-ecosystems in both savannah and forest zones: (R2) full or partial water control allowing two rice cycles per year; (R1) no or partial water control allowing one harvest per year; (R0) absence of rice growing.</td>
<td>Prevalence of Schistosoma mansoni and Schistosoma haematobium among children aged between five and 15 years</td>
<td>In the forest zone, inland valley rice cultivation did not increase schistosomiasis risk; intensity of infection was not related to the amount of rice cultivation but to the amount of naturally occurring surface water. In the savannah, intestinal (mansoni) schistosomiasis was significantly more prevalent in the rice cultivating agro-ecosystems than in the control system, and intensity of infection was related to the amount of rice cultivation and not to the amount of naturally occurring surface water.</td>
</tr>
</tbody>
</table>
**Some examples of studies focused on endemic diseases economic impact**

<table>
<thead>
<tr>
<th>Study</th>
<th>Areas covered</th>
<th>Objective of the study</th>
<th>Methodology</th>
<th>Impact of diseases on production</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audibert, 1986</td>
<td>Rural North Cameroon, 40 villages, 1979-1985</td>
<td>To investigate the long-term health consequences of an agricultural development project (lake and irrigated lands for rice crop) and assess both the consequences of this project on endemic diseases and nutrition incidences and the impact of diseases on production</td>
<td>Impact analysis with comparison between areas with and areas without project, before and after its implementation. Epidemiological, demographic and economic surveys were led during six years, among the same villages and the same inhabitants. Increase of the population in the project area was taken in consideration by including a sample of new migrants, after the third round.</td>
<td>Six years after the lake was filled, and the introduction of irrigated rice crops, the prevalence both of irrigated rice crop and rainy traditional crops prevalent.</td>
</tr>
<tr>
<td>Audibert, 2003a</td>
<td>Rural Mali, 30 villages, 1989-1992</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Audibert, 2003b</td>
<td>Cote d'Ivoire, 21 villages, 1989-2001</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dasgupta, Meisner, Wheeler, 2004</td>
<td>Bangladesh</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Packard, 2001 | **Objective of the study:** To compare outcomes and environment and health risks for farming with ecologically integrated pest management and conventional techniques  
**Methodology:** Large survey of Bangladeshi farmers (with IPM and conventional farming), using structured questionnaires | Lowlands | Cases of malaria | Show that wealthy people (such as the white rich) could protect themselves against malaria (better life conditions, availability of drugs)  
The presence of malaria in the lowveld regions of South Africa clearly created a barrier to economic development. However, the impact of malaria on agricultural production varied by race and class. The presence of malaria did not prevent the development of capital-intensive white farming. |
|---|---|---|---|---|
| **Areas covered:** Transvaal province, South Africa  
**Objective of the study:** Check the assumption that malaria was a barrier to economic development in the Transvaal lowlands prior to World War II, as fertile land would not be cultivated.  
**Methodology:** Historical review of literature | | | |
| Umeh C. J., Amali, O., Umeh, E.U, 2001 | **Objective of the study:** To attempt to determine land use differences, if any, between households in Nigeria, based on their level of urinary schistosomiasis  
**Method:** Descriptive statistics and multiple regression analysis. | Rural land use (surface under cultivation) | Level of infection with Schistosomiasis within HH: households are classified as low infection households (LIH) if the infection level is two standard deviations below mean intensity and heavy infection households (HIH) are defined as households with above-mean intensity. | Urinary schistosomiasis has a distortive impact on land use. Low infection households use on average more land than heavy infection households, this conclusion holds when the other determinants of land use are controlled for.|
| **Area covered:** Benue state, Nigeria  
**Objectives of the study:** - To attempt to determine land use differences, if any, between households in Nigeria, based on their level of urinary schistosomiasis  
- To ascertain if land use has any effect on schistosomiasis prevalence and intensity in the study area  
 **Method:** Descriptive statistics and multiple regression analysis. | | | |
<p>| El Karim, M.A, Collins, K.J., | <strong>Area covered:</strong> Physiological | | Moderate infection with | The energy expenditure |</p>
<table>
<thead>
<tr>
<th>Source</th>
<th>Area covered</th>
<th>Objective of the study</th>
<th>Method</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dore C., 1987.</td>
<td>Gezira, Sudan</td>
<td><em>Objectives of the study:</em> Investigate infection with <em>Schistosomiasis mansoni</em> decreases productivity in fields</td>
<td><em>Method:</em> Examine the difference in the energy expenditure between two groups of farm workers (38 infected and 8 non-infected)</td>
<td>Performance: Energy expenditure (as measured by Kofranyi-Michaelis respirometers) in the fields of the non-infected was higher than that of infected villagers. The corresponding relative work level in the non-infected was also higher than in the infected. However, neither of these differences was statistically significant (probably because of the small sample size).</td>
</tr>
<tr>
<td>Asare Afrane, Y., Klinkenberg, E., Drechsel, P., Owusu-Daaku, K., Garms, R., Kruppa, T., 2004</td>
<td>Kumasi, Ghana</td>
<td><em>Objective of the study:</em> To verify the possible impact of irrigated urban agriculture on malaria transmission in cities</td>
<td><em>Method:</em> Mosquito identification, households survey and statistical analysis.</td>
<td>Irrigation in urban areas for agriculture: Comparison between city locations without irrigated agriculture (UW), city locations with irrigated urban vegetable production (UI), and peri-urban (PU) locations with rain-fed agriculture. - Adult anopheline densities (mosquitoes number) - Breeding sites of mosquitoes The number of reported malaria episodes and days lost due to illness was significantly higher in UI than UW in both seasons for all age groups. Individuals living in UI lost about 0.5 (rainy season) to one (dry season) days more due to malaria than those living in city parts without agriculture during the 3 months recall period.</td>
</tr>
<tr>
<td>Girardin, O., Daoa, D., Koudou, B.G., Essé, C., Cissé, G., Yao, T., N’Goran, E.K., Tschannen, A.B., Bordmann, G., Lehmann, B., Nsabimana, C., Keiser, J., Killeen, G.F., Singer, B.H., Tanner, M., Utzinger, J., 2004.</td>
<td>Tiémélékro, located in the district of Dimbokro (Central Côte d’Ivoire)</td>
<td><em>Objective of the study:</em> To assess and quantify the effect of ill health, particularly malaria, on the performance of farm activity, with an emphasis on drip-irrigated vegetable farming in rural Cote d’Ivoire.</td>
<td><em>Method:</em> Comparison of farmers classified according to the number of days prescribed sick due to malaria</td>
<td>Marketed yields of okra and cabbage Number of days prescribed sick due to malaria Negative correlations between total yield and the number of days prescribed sick due to malaria</td>
</tr>
</tbody>
</table>