



Gender, Labor, and Prime-Age Adult Mortality: Evidence from South Africa

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In Africa, men and women in the prime of life are dying in record numbers, largely as a result of the HIV/AIDS epidemic. According to Statistics South Africa, the number of annual recorded deaths in the 20-to-45-year age group more than doubled between 1997 and 2002, rising from 100,000 to 200,000 in South Africa alone. Assuming that prime-age mortality directly affects the ability of households to obtain adequate income, how does it change the lives of remaining household members?

Impact on Schooling and the Labor Supply

This paper assesses the impact of prime-age mortality on human capital formation and labor markets by examining, first, the impact on adolescents, who may leave school in order to enter the labor market, and second, the impact on adult females who, upon the loss of a breadwinner, may decide to seek a job outside of the home. A woman's decision to join the labor force may, in turn, have adverse effects on the well-being of the household because she may have less time to devote to housework and childcare.

Because the issues raised by prime-age mortality are so important, a number of studies have addressed the subject, particularly the question of how school enrollment and attendance are affected by the ever-growing number of orphans. Parental death is a serious threat to the hard-won efforts to raise school enrollment in most developing countries. When an adult is mortally ill, school attendance decreases for a number of reasons: the need to care for the adult or substitute for the work of the adult, the inability to pay for school when medical bills and funeral costs are high, a lack of

interest in the child's welfare by new caregivers, or emotional distress of the child who has lost a parent. Households must find a way to replace lost labor and income.

Structure of the Study

This study is based on data from the KwaZulu-Natal Income Dynamics Study (KIDS), which was conducted in 1998 and 2004. It uses age-specific pre-AIDS mortality rates for men and women from the Actuarial Society of South Africa as the benchmark against which the increases in mortality are measured. Comparing these data clearly indicates a sharp increase in deaths among adults in their prime. Although more men than women died, increases were significant for both men and women, and those in their prime were more likely to die than other household members.

Many studies have been conducted in countries where labor is largely employed in agriculture; very few have considered the effects on the nonagricultural sector. This paper emphasizes the impact on the labor supply in the South African province of KwaZulu-Natal, which is semi-industrialized. The risk-coping and mitigation strategies of people in that setting are different from

those in Sub-Saharan rural contexts. However, this paper does not distinguish between agricultural and nonagricultural sources of employment. It focuses on

changes in how adolescents and female adults allocate their time when prime-age adults in the household are ill or die. The decision to leave school or home and join the labor force—agricultural or nonagricultural—is the issue.

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Toll on Human Capital Is High

The results support the hypothesis that an increase in prime-age mortality decreases the investment in human capital for young people. The study finds that adolescents often make a transition from school to the labor supply upon the death of a prime-age adult in a household. (Because jobs are scarce, they may drop out of school in order to find work but may in fact be unemployed, though part of the labor supply.) The timing of the impact differs between female and male adolescents. Girls tend to leave school early—before the death in the household occurs—presumably because they are needed to care for the person who is ill or to help with household chores. Both male and female schooling decreases after the death of a prime-age adult. The negative impact of a death in the family is therefore greater for female than for male adolescents.

The study also finds that the death of a prime-age adult male significantly increases the likelihood that an adult female in the household will enter the labor market, while the death of another female has no statistically significant effect. This is reasonable if men's earnings are, on average, higher than those of women, so that the death of an adult male is more

likely to adversely affect the income of the household. If the female who goes to work decreases the time she spends on housework, childcare, and home education, prime-age mortality could indirectly decrease investments in human capital for the next generation.

These results suggest that excess mortality among prime-age adults, caused by the AIDS epidemic, reduces human capital investment not only by disrupting schooling but also by possibly interfering with the care children receive at home. Illness and death of prime-age adults limit household income by reducing earnings, while imposing medical and funeral costs and limiting access to credit. Government, civil society, and communities must meet the challenge of providing for the needs of large numbers of children who are orphaned or living in reduced circumstances.

Keywords: prime-age adult mortality, schooling, labor supply, gender, South Africa

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