



Impact of Street restauration on the populations of Bouaké (Côte d'Ivoire)

*¹ Akmel Meless Siméon, ² Mazou Gnazegbo Hilaire, ³ Yaro Issa, ⁴ Akmel Meless Essim Alida Lizette

^{1,2} Université Alassane Ouattara (Bouaké), Maître-Assistant, 01 BP V18 Bouaké, Côte d'Ivoire

³ Maître-Assistant, Université Alassane Ouattara, Bouaké, Côte d'Ivoire

⁴ Doctorant, Université Alassane Ouattara, Bouaké, Côte d'Ivoire

Abstract

This paper essentially analyses the sanitary constraints associated with street restauration (catering), an informal sector in Bouaké. To achieve this, the work is carried out at Air France, district of the said commune, field of investigation. A both qualitative and quantitative, the study presents the results of the field. It identifies the determinants of street catering (economic value, sociocultural value) and explains the diseases (typhoid, migraine, hearing disorder) caused by the activity and taken over by the actors (treatment by plants, Biomedicine). The existence of health problems related to work in Air France shows the need for a critical analysis of street restauration.

Keywords: Street restauration, economic importance, sociocultural value, disease, critical analysis

Introduction

This study is part of environmental health and is particularly concerned with the health constraints associated with the management of the Maquis in the town of Bouaké. In addition to the issue of political governance of States, the economic crisis in sub-saharan African countries is a major concern for many actors, including administrative and political authorities, organizations Of civil society, researchers. Since the independence, economies have mainly been based on annuity crops. This is the rationale for the assertion of Berthelie and Lipchitz (3) : «Agriculture was considered a major element in the modification and improvement of the structuring of economies». In the 1980 years, African countries suffered a financial hemorrhage, as many observers and actors attributed to the sales of agricultural products. In the Face of the economic crisis, austerity measures have been imposed by the International Monetary Fund and the World Bank (donors). This cure has resulted in the privatization of State societies, redundancies and their corollaries, unemployment and poverty. Côte d'Ivoire is not spared, as essential enterprises (water, electricity) have been redeemed by multinational companies. The living conditions of low-income people have deteriorated dramatically. Kramo (9) attests that:

Ivorian growth is not inclusive enough. Today, almost half of the population is in poverty, almost five times more than in 1985. Since 2012, poverty has fallen by just 0.3% for each point of growth earned. It's too weak! As long as the fruits of growth are not shared, the poor will continue to remain poor.

The commune of Bouaké, à cosmopolitan city that lives in the rhythm of the large agglomerations, is also affected by unemployment and poverty. Street restauration has appeared in populations with modest incomes as a response to misery. The Quartier Air France is interested in the study for various reasons:

-Street restauration, an important activity. In the Face of

precarious living conditions due to unemployment and poverty, people have embarked on the informal sector, through the creation of ' maquis ' and restaurants, sources of wealth (incomes) and a factor of social integration.

-Street restauration has caused health problems. It's about migraine and hearing problems caused by noise nuisance. It is also about typhoid fever related to food consumption. In the Face of the disease, the actors react through the treatments. These findings stem from the issues that are the main one: "How does street restauration, an essential activity, cause health problems that are being addressed by people"? To this question is related to the secondary questions: "Why do people engage in street restauration"? "What are the health risks associated with the activity and the therapeutic routes"? The objective of this study is to analyse the determinants of street restauration and population-treated diseases. The thesis of the study is as follows: "The restauration of street, essential activity causes diseases treated by the populations". The work is articulated around three parts. The first one exposes the research methodology. The second part presents the results of the field. The third analyzes the data collected.

Material and Methods

The investigation site is Bouaké. This commune has about 1500 000 inhabitants and covers 71788 km² (INS, 2014). For the study, Air France located in the southeast of the city, and which comprises three districts (Air France 1, Air France 2, Air France 3) has particularly attracted our attention. The choice of this study area is linked to the existence of ' Scrub', restaurants and noise nuisances. The individuals involved in the study are those who practice street restauration, customers and residents. The respondents are selected according to criteria including the size of the company and the sound intensity, the proximity of the "Scrub" of the dwelling places, the rate of attendance. Through the snowball technique (from

mouth to ear) we have identified 300 people (men and women). In the inability to interview all the people, we decided to question a third (1/3) of the population. A total of 100 individuals (men, women, youth, adults) aged between 19 and 60 years, affected by the activities, are selected. Investigations began from December 2016 to June 2017. Four (4) focus group made up of six individuals allowed the actors to freely discuss the activities of 24 individuals. In order to capture the health risks, a questionnaire is sent directly to seventy-six (76) respondents. For the deepening of the data, we used dialectic analysis. It has made it possible to detect the contradictions related to street restoration. These are noise nuisances and diseases that people suffer from. Resilience has shown how actors circumvent unemployment and poverty through street restoration. The functionalist analysis made it possible to understand the causes of the involvement of the population in the activities. The data helped to get results.

Results

Street restauration, an essential activity

The social categories and types of activities

Information about the restauration collected from resource persons through the focus group and the questionnaire has been grouped together, which we present. In order to do so, we asked the respondents the question: "What are the social categories and types of activities that Air France has met?" The responses collected are presented in this table:

Table 1: social actors

Social categories	Quantities	Number of persons	Percentage (%)
Restauration and Scrub managers		30	30
Customs		25	25
Inhabitants		45	45
Full		100	100

Source : From our studies, february, 2017

Out of One hundred (100) respondents, thirty (30) or 30% are managers of scrub or restaurants. Twenty-five (25) approximately 25% attend the restaurants located in Air France; When forty five (45) individuals, or 45% live close to the scrubs and restaurants. The data show three categories of actors related to street restauration. They are the managers of scrub or restaurants, customers and residents. Several activities listed are presented in this table:

Table 2: Category of activities

Activities	Quantity	Number of persons	Percentage (%)
Scrub, Restaurants		30	30
No activity		70	70
Full		100	100

Source : From our study, february, 2017

Out of One hundred (100) people surveyed, thirty (30) about 30% are managers of scrub and restaurants. Seventy-five (70) individuals, or 70%, consisting of residents on the one hand, and customers who attend food places on the other hand. We offer different services to the customers. Varied food is made available to them. Prices fluctuate between five hundred (500)

FCFA for people with modest incomes and five thousand (5000) FCFA for the most affluent. This is in addition to the availability of the populations of different beverages. All of them lent them selves to the questions.

The determinants of street restauration

Several factors explain the involvement of people in street restauration, which is attested by the following:

I was unemployed. It's been a long time. I found that friends with whom I have been fired are exercising in the restauration. They told me they were doing well. I had no money. So they have contributed to lend me money. When I moved in, things were moving well. Customers were flocking from everywhere. I was able to return to my friends the money they lent me. Today I have hired people who work in my scrubs and who are paid. I was able to acquire land. Soon I'll start building a house for my children. When the parents ask me, I always give them the support. I take good care of the family. In terms of food, all clothing is insured (A. M, 50 years).

I am in the restauration, there are from this years. I have a scrub. I went through some difficult times, because I had the diplomas, but I couldn't find a job. I have filed applications to work in the companies of the place. Unfortunately, I was not recruited. So I started with the sale of the tuna garb. The revenues of this activity allowed me to open a maquis. Then I enlarged it. At the moment, the restaurant offers guests all kinds of food and beverages. I'm doing well and I'm not complaining. Several people make orders. I started investing in real estate (N. P, 40 years).

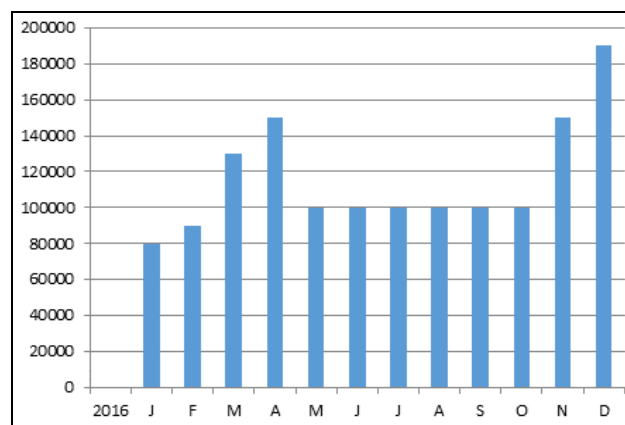
The following table sum up the informations provide by the interviewed persons :

Table 3: Reasons of street restauration

Reasons	Quantities	Number of persons	Percentage (%)
Sources of income		60	60
Jobless, Poverty		40	40
Full		100	100

Source : From our study, march 2017

Out of One hundred (100) respondents, sixty (60) or 60% argue that the activity is a source of wealth. The following table shows the monthly income of the actors:



Source : From our study, 2016

Fig 1: Monthly income

Forty (40) individuals around 40% argue that they have invested in street restoration, because of unemployment and poverty. These respondents (all ages) are composed of individuals who have acquired experience in the management of the "Maquis" and restaurants, those accustomed to attending them, or living near the workplace (waterfront). Despite this importance, the activity causes discomfort situations.

Health risks

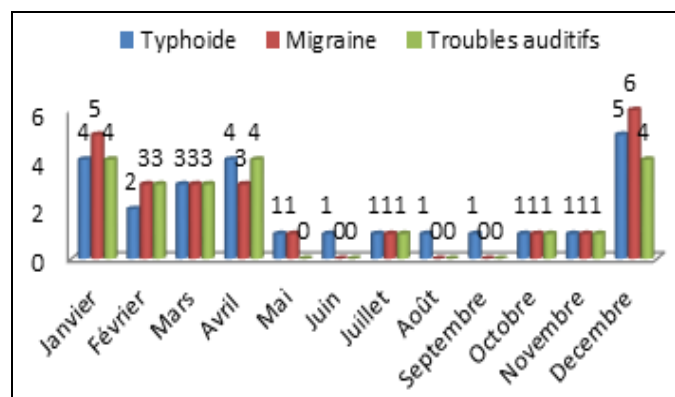
Types of diseases

Street restoration exposes social categories to health risks. On the question of the consequences of activity among the population, here are some of the answers obtained:

«We who live close to the scrubs and restaurants suffer a lot. There are too many noises, so you can't sleep. You understand that we are exposed to insomnia and migraine. People also complain about illnesses, since hygiene is not always ensured» (K. Y, 38 years).

Typhoid fever is what many people suffer. Doctors say it is the disease of unsanitary. We do not know the conditions in which people cook food. So after eating the food, some found themselves in the hospital to receive care. I say this because I have already accompanied a parent to heal. And the diagnosis is clear: typhoid (K. P, 35 years).

People are confronted with situations of discomfort. From Air France 1, Air France 2, Air France 3, they complain about noise nuisance, which has caused different illnesses (migraine, hearing disorders), but also has typhoid fever in actors. The data are presented in the following figure:



Source : From our study, Air France 2016

Fig 2: Health risks

We mentioned that thirty (30) people are managers of maquis and restaurants. Only seventy-five (70) individuals represented by patrons who attend food places and residents claim to be victims of health problems. Thus, of the Seventy (70) respondents, twenty-five (25) respondents were affected by typhoid fever; When twenty-four (24) contracted migraine and twenty-one (21), victims of hearing impairment. Among the diseases suffered by populations, typhoid fever ranks first in morbid states (36%), followed by migraine (34%) and hearing disorders (30%).

Therapeutic Itineraries

In the Face of the disease, the Seventy (70) respondents to health risks use the treatment:

Table 4: Therapeutic itineraries

Types of treatment	Quantities	Number of persons	Percentage (%)
Traditionnals		20	29
Moderns		50	71
Full		70	100

Source : From our study, july 2017

The datas indicate that of the seventy (70) respondents, twenty (20) People or 29% use traditional medicine in essence. These are medicinal plants intended for the care of the sick. This social category is composed of the defectors of rural areas, which still retain the ways of feeling and acting according to the Expression of Durkheim (6), inherited from their social environment. Fifty (50) individuals, about 71% are engaged in modern treatments. These actors lived their childhood in the city. Clearly, two therapeutic pathways are involved in health care. The different data were analyzed

Discussions

The challenges of street restoration

The literature on this reality in Africa is abundant. Informal food activity, it is defined by FAO (7) as "the sector producing food and beverages ready to be consumed, prepared and/or sold by sellers, especially on the streets and other public places Similar ". Exercised by both women and men, it remains an essential activity for the population.

Economic importance

Street restoration is now a major activity in Africa, especially in Côte d'ivoire. Thus, this activity is scattered in the cities, even the most remote hamlets. Bouaké, a field of investigation, is not spared, as street restoration is seen as a source of wealth. The data compiled in the graph shows an evolutionary downward trend. In fact, from January to April, incomes rose from eighty (80000) FCFA to one hundred and fifty (150000) FCFA, an increase of seventy-five (70000) FCFA. The geographical and sociological factors explain this reality. In fact, from January to April the weather becomes lenient. We are in the great dry season. Men, women, young people and the elderly go about their occupations. For workers away from their homes, restaurants and maquis remain the preferred places for the consumption of prepared foods. This period is characterized by festivities, including the new Year and the Passover. From May to October, we are in a rainy season. Incomes are falling because of the weather. The moments of rejoicing (feasts) are also scarce. As a result, the crowding is slowing down. From November to December, the trend is evolving. It's the dry season and the school year. À This is added the Feast of the Nativity (Christmas), the New Year's Eve. During this period, the Maquis and restaurants are invaded by the guests. The economic importance of the informal sector is supported by the World Bank (2). A study carried out by this institution in Senegal shows that this sector generates about 97% of job creation very affected by unemployment, and represents 12% of the country's gross domestic product. Indeed, a significant fraction of the Senegalese population lives on what would otherwise be called "small jobs". The literature shows that this activity is shared by many companies in sub-saharan Africa. À like

Abidjan, where the diversity of places of consumption is remarkable according to Leimdorfer (10), street restauration exists in Senegal. Thus, Mainet and Mainet (11) describe the men of the Tangana, "owners des sidewalks" who offer breakfasts in Dakar.

The use of this activity is linked to the precarious living conditions of the population. We mentioned above that austerity measures have been applied to all countries in sub-saharan Africa confronted with the economic crisis of the 1980 years. Thus, devaluation, privatization of state-owned companies (mainly economic-oriented measures) have resulted in workers' redundancies, unemployment and poverty in vulnerable social categories. Delivered to themselves, the populations have found in informal activities, including street restauration, a means of circumventing misery, because "economic cancer" according to the expression of Moustapha (14). This is the rationale for the assertion of Malikwisha (12). The author considers this sector to be a popular response to the realities of the environment, an adaptation to the problems of the economic and social environment. This situation must lead people to take their destiny into their own hands, by inventing appropriate solutions to the problems of unemployment and poverty. The implication of precarious living conditions in the creation of restaurants is attested by Diouf (5). It analyses the activities of the restorative of Dakar, relocating the existence of street vendors in the overall context of economic misery and the low of the means of workers. The restaurant owners of the Dakar industrial zone is an example, among many others, of how hundreds of women in the third World cities are engaged in an economic battle where their main weapon will be the pot. Kouakou (8) also situates the creation of the "Scrub" in the economic context of the economic crisis faced by Africans.

Sociocultural value

The literature on the informal sector shows that it is essential because of its functions. We therefore understand that Cuonzo (4) says: «The activities of the informal sector enable economic self-sufficiency to be attained, and give rise to sustainable development of Africa». Thus, it is essential to the evolution of the African city, because it is a purveyor of jobs. If street restoration, informal activity is a source of wealth (income), it also fulfils a social function, perceptible through the destination of income from work. The sums of money provided by the activity are in the satisfaction of social needs (feeding, dressing, lodging, healing), physiological needs (primary) according to Maslow (13). À this is in addition to other needs developed by the author, including the needs of membership. The individual is looking for the affection of close relatives or friends. He wants to be an integral part of his community because he is marginalized because of his financial situation. The actor therefore needs esteem, consideration. Frequently taken up, because it makes 'savings from candle ends', the actor seeks to be respected. So the street restoration becomes a springboard for him. In other words, this activity allows it to accomplish itself, to realize itself or to develop itself (needs of self-realization according to Maslow (13)).

Yesterday stigmatized because of his precarious living conditions, he is now financially stable, even autonomous.

The incomes of the restauration are reinvested in profitable economic projects including the construction of houses, the purchase of transport vehicles (vehicle, motorcycle). Through this activity, the actor experienced a social ascent, or even upward vertical social mobility. The theory of resilience helps us to understand how unemployment, the misery of financial means, the stigma has allowed the actor to use strategies to circumvent poverty and integrate into his social environment. The socio-cultural value of street restauration is attested by Kouakou (8). For the author, the origin of the Maquis in Côte d'Ivoire rhymes with the economic context of the economic crisis faced by Africans. The creation of the Maquis is a triple response to questions of restoration, African food and reasonable prices; The ensemble pertaining to the average city dwellers still deeply attached to their culinary habits of the village and unable to find any possibility to satisfy their gastronomic desires in the great city without great expense. It was therefore to solve one of the problems of the purchasing power of the "Petit Abidjanis" by allowing it access to cheap dishes from the territory. Nesting in the footsteps of Kouakou (8), Vidal (16) shows how the street restoration concentrates a very large number of women's jobs, and ensures a vital function, by feeding at cheap the working population at the workplace, while there is no Kind of canteens in schools, offices, factories or hospitals. Income also comes into the spiritual. During the Christian religious festivals (Christmas, Passover) and Muslim (Ramadan, Tabaski), the managers of maquis and restaurants of Air France are engaged in ceremonies through offerings to God and gifts in kind (food) to people As the Holy Scriptures have indicated. As a result, Africa of the revealed great religions makes its Appearance in the street restoration. Certainly this activity is essential. However it caused discomfort situations.

Sanitary constraints

The determinants of disease.

The data of the graph show the actual existence of pathologies contracted by the populations of Air France. Two types of diseases are to be distinguished. The first category includes migraine and hearing disorders that are related to noise nuisance. Indeed, every day, from 7 p.m. to 2 a.m. the Maquis produce noises preventing the residents from enjoying a "sleep of just ". These respondents confirm:

I was wrong to rent my house in this neighborhood. I'm going to work early in the morning to get home by 5:00. Very exhausted by a hard work, I am a victim of noise nuisance at nightfall. From the music to the end I weigh the eardrums. I complained in vain. Currently I feel headaches that extend. I also feel a buzz in my ears. The medical consultations confirmed the existence of a benign hearing disorder (K. Y, 47 years).

In a clear sense, noise nuisances are dangerous for current generations, as they will be the hearing impaired of tomorrow. ENT specialists attest that a person subject to 100 DB for 40 hours per week for 20 years has a hearing loss probability of 48%. How does the disease occur? Allodocteurs (1) enlightens us more. Indeed, when sound waves are picked up by the ear pavilion, they pass through the hearing duct to the eardrum. This membrane amplifies the waves to vibrate a chain of jacks: The Hammer, the anvil and the stirrup. The latter passes

the information to the inner ear by sinking like a piston into the cochlea that houses sensory cells. Their surface is covered with cilia eyelashes. Their role is to transform vibrations into nerve influx so that the hearing nerve can transmit them to the brain. The ear picks up sounds, then the brain analyzes and identifies them, determines the type of sound (music, speech or noise), its sound intensity (low or high) and its frequency (acute or severe). Noise has a health impact and, as a result, a significant economic weight. Shouts of quarrels, footsteps, loud music, work noises. Living with noise nuisance can lead to problems with hearing events, hearing fatigue, or, in rarer cases, deafness. The noise experienced and sustained daily, mainly causes sleep problems, which will have an impact on the development of more serious health problems, particularly affecting the cardiovascular system, as well as changes in hormonal secretions, Stress-related. According to a survey of the CIDB conducted in 2010, 35% of respondents reported noise from disturbing their sleep, 26% saw it as a source of stress, 22% fatigue and nervous tension, 10% would take drugs because of noise, and 7% would even become depressed. 15% would move because of noise nuisance. The noises that cause insomnia cause migraine in people.

The second category concerns typhoid fever. We have mentioned, that it is a disease related to the unsanitary, caused by the consumption of food, because the hygienic conditions are not met. The controls on the quality of the food are almost unavailable, thus giving way to unsavory practices. As a result, consumers are exposed to diseases including typhoid fever. For Padilla (15), the quality of the urban food is such that the terms of use and consumption are "time bombs" for the health of individuals. Contamination and poisoning are common places. Ensuring greater control over the quality of food (raw, processed, local or imported) becomes an urgent need in all countries. On the one hand, this public health problem is not enshrined in the priorities of the ministries of Health, which carry out a more than preventive curative policy and which are not sensitized to nutrition and its relationship with the state of health of consumers; On the other hand, the examination of the devices existing in the various countries reveals that the quality control actions are, in general, scattered among various structures without any coordination between them. Lastly, the absence of legislation specifically devoted to the question of food quality and adapted to the African context should be noted. The data show that typhoid fever ranks first in morbid states, as food quality is not subject to control. The actors respond to the pathology.

Treatments as a response to the disease

The information collected indicates two social categories using two types of treatment. Thus, when the actors feel a state of physical impairment (typhoid fever), some are moving towards traditional medicine. The first reaction is to obtain medicinal plants. Barks, leaves, roots, fruits are used in the treatment of typhoid fever for the study. Different techniques are used by the populations to treat the disease. Thus, the dry leaves of teak, those of bamboo from China, sliced pineapple quarters are arranged in a saucepan and brought to a boil. The liquid collected is consumed either orally (orally) or used by an anus (enema) or as a vapour bath. Here, the social environment of the terroir (Africa Magico-religious) is sought

to recover health. In clear, the individual tries to regain his physical well-being affected by the disease through the plants. The second treatment that is modern rhymes with hearing disorders and migraine. The affected actors orient themselves directly to the health centres (clinics, CHU, clinics) to receive care, because the nature of the evil (hearing impairment) requires medical examinations. As a result, a diagnosis is made to detect the pathology, which allows them to treat the disease. In a clear way, they are appealing to modern medicine (tablets, capsules, eye drops) to recover health. The use of these practices to circumvent the state of disability in the individual justifies the theory of resilience. Street restoration-related illnesses are particularly challenging to decision-makers, as they raise the issue of food security on the one hand. They show the existence of a failure related to food quality control, which explains typhoid fever. Pathologies pose the problem of regulating professional activities on the other hand. Certainly texts may exist, but they are not applied. The presence of a morbid state is an indicator and a teaching that invites a deconstruction of the policy of creating the activities of the informal sector.

Conclusion

At the end of this study, it should be remembered that street restoration, an informal sector characterized by the management of maquis and restaurants, is an essential activity for the actors. The work gives them income, thus justifying its economic value. The activity also fulfils a socio-cultural function, because the sums of money are intended to satisfy the daily social needs (food, clothing, housing, health care, social integration). In spite of this importance, street restoration has caused the populations of diseases (typhoid, migraine, hearing disorders) that they treat according to their worldview. If the activity participates in the well-being of the actors and causes pathologies, a deconstruction of this informal sector is necessary to reconcile "work and habitat".

Thanks

We would like to sincerely thank the journal "International Journal of Academic Research and Development" for the call for contributions. Our infinite gratitude also goes to all those whose help has made it possible to carry out this study.

Référencé

1. Allodocteurs. Nuisances sonores: le bruit nuit gravement à la santé. https://www.allodocteurs.fr/bien-etre-psycho/environnement-et-sante/nuisances-sonores-au-quotidien-le-bruit-nuit-gravement-a-la-sante_3341.html, 2016.
2. Banque Mondiale. Rapport sur l'emploi au Sénégal. Banque Mondiale, Octobre, 2007.
3. Berthelie P, Lipchitz A. Quel rôle joue l'agriculture dans la croissance et le développement ? *Revue-Tiers Monde*. 2005; 46(183):603-624.
4. Cuonzo TM. Les petits métiers: le secteur de l'économie informelle en Afrique. In: Camarda D. ed, Grassin L. ed. *Local resources and global trades : Environments and agriculture in the Mediterranean region*. Bari : CIHEAM, n°57, Italie, 2003, 271-276.
5. Diouf MB. Les restauratrices de la zone industrielle de

- Dakar, ou la guerre des marmites. Cahiers d'Etudes africaines. 1981; 21(81):237-250.
6. Dukheim E. Les règles de la méthode sociologique. PUF, Paris, 2010, 256.
 7. Fao. Les aliments vendus sur la voie publique. Rapport d'une consultation FAO d'experts, 5-9 décembre 1988, Yogyakarta, 1990.
 8. Kouakou NF. Les maquis d'Abidjan. Abidjan au coin de la rue. Eléments de la vie citadine dans la métropole ivoirienne. Cah. ORSTOM, sér. Sci., Hum. 1983 ; 6(4):545-550.
 9. Kramo G. Le principal défi de la Côte d'Ivoire est d'assurer un emploi de qualité pour tous. https://www.google.com/search?source=hp&ei=-f0XWvGeCsXOgAbLtIzQBA&q=KRAMO%2C+Germain%2C+2016%2C+%C2%ABLe+principale++d%C3%A9fi+de+la+C%C3%B4te+d%E2%80%99Ivoire+est+d%E2%80%99assurer+un+emploi+de+qualit%C3%A9+pour+tous%C2%BB%2C+Le+Monde+Afrique%2C+2+mai%2C+Abidjan.&oq=KRAMO%2C+Germain%2C+2016%2C+%C2%ABLe+principale++d%C3%A9fi+de+la+C%C3%B4te+d%E2%80%99Ivoire+est+d%E2%80%99assurer+un+emploi+de+qualit%C3%A9+pour+tous%C2%BB%2C+Le+Monde+Afrique%2C+2+mai%2C+Abidjan.&gs_l=psy-ab..1.0.0...0.2+mai+2016.
 10. Leimdorfer F. Dans les maquis d'Abidjan. in: Les restaurants dans le monde et à travers les âges, sous la dir. de Huetz de Lempis A, Pitte J.R. éd. Glénat, Grenoble, 1990, 325-336.
 11. Mainet N, Mainet G. Dans les rues de Dakar. in : Les restaurants dans le monde et à travers les âges, sous la dir. De Huetz de Lempis, Pitte J.R. éd. Glénat, Grenoble, 1990, 319-323.
 12. Malikwisha M. L'importance du secteur informel en RDC. Bulletin de l'ANSD, 2000, 1:21-40.
 13. Maslow AH. A theory of human motivation. *Psychologica Review*. 1943 ; (50):370-396.
 14. Moustapha D. L'indicamétrie capacitaire. Cumerfi, Bouaké, 1999, 22.
 15. Padilla M, Allaya M, Mallassis L. Que mangeons-nous ? Agropolis Museum/CIHEAM, Montpellier, 1997.
 16. Vidal C. L'artisanat féminin et la restauration populaire à Abidjan, in *Femme et politique alimentaire*. Actes du séminaire ORSTOM-CIE, Paris, 1985, 548-556.