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WOMEN AS THE RECIPIENTS OF SERVICES FROM RESOURCES
ALLOCATED IN THE NATIONAL BUDGET OF JAMAICA

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The views expressed in this document are those of the Consultant and do not necessarily coincide with those of ECLAC.

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P R E F A C E

This study on "Women as Recipients of Services from Resources Allocated in the National Budget of Jamaica", continues a series of similar studies being conducted in other Caribbean countries as part of the ECLAC/CDCC project "Women as Recipients of Services from Resources allocated in the National Budget" in the field of Women and Development Planning.

The objectives of the study are two-fold. In the short term they are:

- to document, monitor and report on the degree of equity in the distribution of government funded services between the sexes so as to suggest to government an instrument which can assist on a regular basis the efforts being made to meet the demands of the female population,

and in the long term:

- to provide hard data contributing to regional efforts aimed at a), integrating women at an early stage of the social planning process and b), establishing a data base on women with respect to their participating in planning as beneficiaries of government social services.

The study is presented in four parts. These include two background sections on the legal rights of Jamaican women and the structure of the Jamaican population emphasizing the situation of females within the population.

The third and main part of the study is concerned with describing the range of social services provided through the national budget and analysing

the status of women as recipients of these services. Where services are provided in the exclusive interest of women this is indicated. In preparing this section, the methodology involved:

- a) Identifying all government Ministries which allocate funds from their budgets to provide various social services directly benefitting the population.
- b) Selecting from the recurrent and capital budgets of the Ministries identified the items of expenditure from which the population receives the most direct and tangible benefits. It was considered necessary to do this to prevent the information from becoming unwieldy, excessive and vague, thus defeating the primary purpose of zeroing in on the specific services that benefit the population as a whole and women in particular. For these reasons, nine out of seventeen Ministries were identified. The items of expenditure selected for each Ministry do not include costs for Central Government administration and such administrative support services as these represent more indirect benefits to the population. Moreover, the section of the study which looks at the employed labour force, takes into account the benefits from employment in Central and Local Government.
- c) Describing in a fair amount of detail the social services provided for the population through each of the Ministries included. The description of services also involves an examination of the present state of the various services in the light of severe budgetary constraints which have resulted from the government's efforts in recent years to deal with an economy in crisis. Comparisons of levels of expenditure in

current dollars for 1981/82 and 1984/85 are given for the different social service sectors in order to show the effects of devaluation of the national currency within this period, on maintaining or increasing levels of actual expenditure on social services.

- d) Analysing the status of women as beneficiaries of the services described, providing the most recent data available to support the observations.

The fourth part of the study provides a review and analysis of the situation of women with regard to their participation in the labour force. The issue of female unemployment, under-representation in the employed labour force and wage levels are given special focus.

The presentation ends with a summary of the findings presented and some concluding comments.

INTRODUCTION

Jamaica gained its independence from Britain in 1962. As for the many other Caribbean countries that have taken that route since then, Jamaica entered independence with the attendant excitement which comes from knowing that there was now freedom for autonomous decision-making in charting the course of national development. During the 1970s Jamaica's increased earnings from a levy on bauxite, the country's chief export, improved the status of the national economy.

The unprecedented increase in revenue from bauxite, led the government of the day to embark on a programme of rapid expansion of the public sector, especially the social services, which were still very inadequate to satisfactorily meet the needs of the population. Programmes in the health, education and social welfare sectors expanded. Women were singled out as an exploited group deserving of special attention. The establishment of the Women's Bureau in 1975 marked the beginning of Jamaica's observation of the United Nations Decade for Women. Many significant developments to improve the status of the country's women occurred during the Decade. Included among these were the establishment of the Women's Bureau and the Family Court which is the only institution of its kind in the Caribbean, the launching of the National Day Care Programme, the passing of legislation on several issues affecting women in family life, e.g., the Status of Children Act, and the introduction of a number of social schemes and programmes meant to increase the benefits and privileges of the general population e.g., the Special Employment Programme.

The unanticipated OPEC oil crisis and subsequent recession of worldwide economies jolted the economic fortunes of Jamaica. The combination of greatly increased social services expenditure and a growing foreign debt, turned the

tables and saw Jamaica entering into various agreements with the International Monetary Fund, in efforts to deal with the downturn in the economy.

The dislocations experienced in the late 1970s as Jamaica attempted to fulfill the required adjustment policies of the IMF, led to serious political turmoil in the country.

A change of Government in 1980 saw policy changes influenced by the terms of IMF conditions for structural adjustment of Jamaica's economy. Devaluation of the Jamaican dollar and a very large foreign debt burden, have forced the Government to adjust the national budget. The Social Services as could be expected have been severely affected as a result of the adjustment policies. Education and health services have been reduced to very unsatisfactory and inadequate levels of service delivery and overall public sector expenditure has been cut, leading to staff lay-offs, freeze on wages and the reduction or containment to size of several social welfare services.

By virtue of having been the principal beneficiaries of the expanded social services thrust of the early 1970s, Jamaican women are now the hardest hit by the reduced investment in public sector services, resulting from the country's economic difficulties. Hence, although the government still expresses a commitment to the development of the country's human resources inclusive of all women, and the full participation of this most valuable resource in the process of national development, budget constraints limit these possibilities.

In the face of decreasing financial resources to adequately provide the range of services needed by the population, it is inevitable that competition will increase for access to that which is available. It is a sad admission that where this competition involves males vs females of the population, it is the women who are usually those deprived. The study presented in this document shows clearly the deprived situation of the majority of Jamaican

women in this atmosphere of competition.

This study makes no claim to having covered in totality the wide range of issues that might be considered in a discussion of the status of Jamaican women as beneficiaries of public sector services. Nevertheless, it is hoped that the information will focus the attention of decision-makers in development planning, on some of the special problems which today confront Jamaican women especially the poor who form the majority. It is further anticipated that this document will serve as an information base for a renewal of national efforts to check the rapidly deteriorating circumstances of women and to devise ways of advancing the gains made during the United Nations Decade for Women.

PART I

THE STATUS OF WOMEN IN JAMAICA: THEIR LEGAL RIGHTS

The activities of the United Nations Decade for Women (1975-85) contributed significantly to improving the status of women in Jamaica with respect to their legal rights. Long before the decade, the Constitution which is the Supreme Law of the Land, guaranteed to all individuals certain fundamental rights and freedoms regardless of race, place of origin, political opinions, colour, creed or sex. By law, women have enjoyed equal status with men in a number of important areas. Women have had equal rights with men to participate in the political process both as electors and elected. In the area of Civil Law, the Married Women's Property Act of 1887, has accorded to married women, full capacity to acquire, administer and dispose of property and also to enter into contracts in her own right. In the area of employment, the Sex Disqualification Act of 1944 made it unlawful for a woman to be disqualified from appointment to public, civil or judicial office or position on the grounds of sex or marriage. The Offences Against the Person Act provides protection for women and girls against exploitation, prostitution, and physical and sexual abuse.

During the Decade for Women, there were further achievements in the area of legal reform benefitting women, as legislative measures sought to amend some existing Acts to make them more specific and also introduced entirely new Acts in the interest of women. These were mainly in the areas of employment, education and the family. In 1975 the Equal Pay for Men and Women Act came into effect. This Act makes it an offence for the employer

to discriminate between male and female employees by failing to pay equal pay for equal work. The Maternity Leave Act of 1979 safeguards the position of the female worker when pregnancy and consequent confinement interrupts her employment by giving her a right to three months' maternity leave (provided she meets qualification requirements), two months of which must be with full pay. The Act also gives her the right to return to work after the baby is born without any prejudice to her work position. Although female domestic helpers are excluded from the Maternity Leave Act, they are provided for by an amendment to the National Insurance Act which allows payment of an amount equivalent to the National Minimum Wage for eight weeks. The National Minimum Wage Order was brought into operation in 1975. Although this order benefits men and women alike, the effects have been greater for women who traditionally have been the more exploited category of workers, especially as "household helpers". Minimum wage rates have been revised on five occasions since inception, in reaction to increases in the cost of living.

Women have equal access with men to education, although in some instances, there is subtle discrimination in the form of sex-based biases which will be discussed later in this study. Prior to 1981, the existing Education Act made no allowance for the continuing education of pregnant students. The practice was to exclude such students who then dropped out of school permanently. The regulation was amended in 1981 to a policy whereby the pregnant student is excluded from school during the period of pregnancy, but may continue her education at the same institution or any other, at the termination of pregnancy. Arrangements can also be made to enable students who have been excluded from school for pregnancy, to sit examinations in connection with the completion of their education.

In the area of Family Law, several reforms were made during the decade for women. However, for purposes of this study only those of greatest significance will be cited. The Family Court Act became effective in 1975. The Family Court is a specialised Court dealing exclusively with matters relating to affiliation, adoption, custody, married women's property, offending juveniles and juveniles in need of care and protection. Its jurisdiction covers most matters of concern to families excluding divorce and other marital problems. The establishment of this institution is undoubtedly a major development in support of women's rights in family related issues. In 1975 also, amendments were made to the Maintenance and Affiliation Acts. The Maintenance Act imposes reciprocal obligations on parents, children, grandparents and grand-children to maintain each other. The Affiliation Act deals with the maintenance of children born out of wedlock by their fathers. Amendments to the above Acts were related to the removal of the limits of payments for support, and also to the extension of the age limit for children from 16 years to 18 years.

The Status of Children Act passed in 1976, abolished the status of illegitimacy in Jamaica so that the child of an unmarried woman now enjoys the same legal status as the child born in wedlock. This piece of legislation is admittedly of great importance to unmarried women with off-springs, in that as long as paternity has been established, they have the legal right to demand support for their children from the father.

In spite of the gains in legal reform benefitting women, there are still areas in which amended or new legislation could advance the status of women further. Legislation is being drafted to change the existing law whereby a person is not obligated to make any provision for his/her family

or dependents in the event of his/her death. Thus a wife, child or other dependents who are left unprovided for have no legal recourse. Legislation is also being considered for clarifying the issue of abortion which presently is illegal in Jamaica. It has been proposed that abortions should be considered legal in cases where there is likely impairment of the unborn child, where pregnancy is by rape or other forms of criminal intercourse and where the birth of the child would have a detrimental effect upon existing members of the family.

The present law relating to matrimonial property is also under review. The existing law operates unfairly against women as it is usually difficult for the wife to establish a share in property held in her husband's name although she may have made substantial contribution to its purchase or improvement in money or money's worth. Still needing to be considered for reform are the following issues affecting women as recommended by the Committee for Legal Reform:⁽¹⁾

1. Access to the same curricula, support systems of teaching staff, standard of school facilities etc., especially at the Secondary and Tertiary levels.
2. Examinations or systems of assessment to determine the eligibility of students for admission to public educational institutions should not discriminate against girls showing disproportionate entry to such institutions.

(1) The Committee for Legal Reform prepared the Report on Legal Reform which formed a part of Jamaica's Report to the UN End of Decade Conference for Women in Nairobi.

3. Sex role stereotyping should be eliminated from the curricula.
4. Sexual offences against women and children.
5. Discrimination against women in general e.g. there are reported instances of women being denied facilities for banking, insurance, loans, credit and finance on equal terms with men.

As can be seen from instances previously cited, inspite of the gains made during the Decade for Women, there are many areas relating to specific concerns of women, where legal reform is still needed. There is a positive movement towards achievement of these goals as the problems and concerns of women in the society continue to receive greater recognition. In 1985 a Women's Crisis Centre was established. The aim of this Centre is to deal more sympathetically with victims of rape and of such violence, and to offer support to battered women. This Centre and the Family Court can be satisfactorily cited as examples of efforts to institutionalize very necessary support services for women in Jamaica.

PART 2

THE POPULATION STRUCTURE OF JAMAICA

The population of Jamaica at the end of 1985 was estimated at 2,325,500 showing an increase of 1.3 percent over that of 1984. The crude birth rate per 1,000 population continued a steady decline moving from 25.2 in 1984 to 24.3 in 1985. In contrast, the crude death rate per 1,000 population showed a slight increase from 5.9 in 1984 to 6.0 in 1985. At the 1982 Census, females comprised 51% of the total population. This is typical of the trend over the years for females to outnumber males in the population by a small percentage margin.

Table I presents data on the composition of the population by age group and sex for the Census Surveys of 1970 and 1982. An examination of this data reveals that over the intercensal years, Jamaica's population has experienced a shift in the age composition structure. The most significant change in proportionate distribution is the decline in the population under 10 years of age. For the age group 0-4 years the decline during the years 1970 and 1982, was 6.5 percent for males and 6.9 percent for females. For the age group 5-9, the decline was 5.5 percent for males and 5.5 percent for females. The decrease in the size of the youngest age groups of the population is not surprising and reflects the declining birth and fertility rates which have been in evidence throughout the 1970s to the present time. Between 1975 and 1985, Jamaica's crude birth rate fell from 30.5 (1975) to 24.3 (1985). The Total Fertility Rate for females between 10 and 49 years also declined from 5.5 children per woman in 1970 to 3.6 in 1982 and further

TABLE 1

The Population of Jamaica by Age Group and Sex and Percentage Distribution
1970 and 1982

Age Group	1970 Census Distribution*				1982 Census Distribution				Percentage Change	
	Number		Percent		Number		Percent		1982 and 1970	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
0 - 4	144679	142427	7.98	7.85	134648	133112	6.15	6.08	-6.9	-6.5
5 - 9	151092	149807	8.33	8.26	142740	141609	6.52	6.47	-5.5	-5.5
10 - 14	122755	121356	6.77	6.69	145759	142510	6.65	6.51	18.7	17.4
15 - 19	81176	84692	4.48	4.67	130748	132375	5.97	6.04	61.1	56.3
20 - 24	59440	66630	3.28	3.67	102148	110726	4.66	5.06	71.8	66.2
25 - 29	48872	52794	2.69	2.91	74432	81348	3.40	3.71	52.3	54.1
30 - 34	38517	42484	2.12	2.34	59095	61712	2.70	2.82	53.4	45.2
35 - 39	37495	43113	2.07	2.38	47466	49793	2.17	2.27	26.9	15.5
40 - 44	37013	40489	2.04	2.23	41869	43335	1.91	1.98	13.2	7.0
45 - 49	33274	35832	1.83	1.98	34565	37001	1.58	1.69	3.9	3.3
50 - 54	32337	35028	1.78	1.93	36028	38823	1.64	1.77	11.4	10.8
55 - 59	29207	29614	1.61	1.63	29277	30327	1.34	1.38	0.2	2.4
60 - 64	25352	27250	1.40	1.50	26620	30864	1.22	1.41	5.0	13.3
65 - 69	18893	20234	1.04	1.12	24602	25656	1.12	1.17	30.2	26.8
70 - 74	12286	14322	.68	.79	20879	22931	.95	1.05	69.9	60.1
75 - 79	6963	8989	.38	.50	12618	14932	.58	.68	81.2	66.1
80+	6527	12661	.36	.70	11139	18670	.51	.85	70.7	47.5
TOTAL	885878	927716			1074633	1115724				

* Unadjusted Census results

Source: Economic and Social Survey, Jamaica, 1985, Planning Institute of Jamaica.

to 3.27 in 1983 (see Table 2). It is clear from these trends in the structure of the population that national Family Planning policies and increased emphasis on fertility regulation methods have been having the desired effect of decreasing the birth rate which has resulted in changes in the overall population structure.

TABLE 2

Fertility Levels - Births per 1,000 women by Five Year Age Group
10-49, 1970 and 1982 and Percentage Difference Between 1970 and
1982

Age Group	Births Per 1,000 Women		% -age Difference Between 1970 and 1982
	1970	1982	
10 - 14	n.a.	2.6	
15 - 19	167.4	117.3	- 30
20 - 24	301.8	177.4	- 41
25 - 29	268.1	149.7	- 44
30 - 34	190.2	111.2	- 42
35 - 39	127.3	66.7	- 48
40 - 44	46.8	24.5	- 48
45 - 49	7.8	3.2	- 59
Total Fertility Rate	5.5	3.6	- 41

Source: Economic and Social Survey, Jamaica, 1984
Planning Institute of Jamaica.

It must be noted that all age groups registered decreased fertility, ranging from 30 percent for the 15-19 age group to 59 percent for the 45-49 age group. Although the rate of decline for teenagers was less than for other age groups it is nonetheless a significant development, given the problem of teenage pregnancies.

For all age groups besides the 0-4 and 5-9, the population has increased. In some instances the increase is quite large, whereas for others there is only marginal change. For the 10-14 age group the male population increased by 18.7 percent and the female population by 17.4 percent. For the 15-19 age group, increases were 61.1 percent for males and 56.3 percent for females. For the 20-24 age group, males increased by 71 percent and females by 66.2 percent. For the 25-29 age group, males increased by 52.3 percent and females registered a 54.1 percent increase. The trend to this point has been towards larger percentage increases among males than females, with the exception of the 25-29 age group. This trend of higher percentage increases among males compared with females continues through to the 50-54 age group. Within the 40-44 age group the percentage increase in the male population is twice as large as that for females. This could possibly be attributed to the effects of migration as more females in this age group migrate than males. The small increases for both males and females in the 55-59 age group perhaps reflect the combined effects of death and migration among this group.

An interesting observation is the high proportion of males and females between 65 and 80+ presently represented in the population. This can be attributed no doubt to increased life expectancy rates in the population and the decreasing birth rate. Another point worthy of note is that for

all the age groups under 15, males outnumber females in the population and for all age groups over 15, the reverse situation is true. This although surprising is no real cause for alarm, as it is to be expected that higher mortality rates among young males account for their dwindling numbers which eventually become less than totals for females in the Jamaican population structure. There is documented evidence in Jamaica that very high numbers of young males in the 14 to 25 age group die each year through violence and motor vehicle accidents often linked to heavy consumption of alcohol.

In addition to the decreasing fertility and birth rates, migration from Jamaica to the U.S.A., Canada and the United Kingdom has also contributed to the relative stabilization of population growth in Jamaica in recent years. Over the period 1980 to 1985 net migration figures for Jamaica have ranged from a low of 4,300 in 1983 to a high of 24,000 in 1980 (See Table 3a).⁽¹⁾ It is interesting to note that since 1983, out-migration is once again on the increase, perhaps reflecting the effects of an increasingly harsh economic environment. Females have consistently outnumbered males among emigrants and the number of emigrating females has been increasing. Table 3b provides an example of male/female distribution among emigrants to Canada. The largest group of emigrants is found in the 10-29 year age group for both males and females. The proportion of this age group among total emigrants ranges between 23.0% and 38.8% compared to a percentage range of 3.7% to 16.7% for the other age groups.⁽²⁾ It is very likely that most of the emigrants

(1) Data not tabled. Source: Economic and Social Survey, Jamaica, 1985.

(2) These figures are suspect as evidence now suggests that data for years 1981, 1982 and 1983 have not been fully reported.

Table 3(a)

Net Migration from Jamaica, 1980 - 1985

<u>Year</u>	<u>No. of Emigrants (M & F)</u>
1980	24,300
1981	5,900
1982	9,800
1983	4,300
1984	10,494
1985	13,425

Table 3(b)

Migrants to Canada by Sex, 1982 - 1985

<u>Year</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
1982	1,244	1,349	2,593
1983	1,022	1,401	2,423
1984	987	1,497	2,479
1985	1,179	1,732	2,911

Source of Tables 3(a) and 3(b): Economic and Social Survey, Jamaica, 1984 and 1985 Editions, Planning Institute of Jamaica.

in the 10-29 age group include individuals who are frustrated by the difficulty of access to further educational or employment opportunities and opt for migration to try their fortunes elsewhere. The situation for females in this group is even more critical as the problems that they face in terms of inadequate training and employment opportunities are quite extensive. (This will be further discussed in another section of this study). In this regard it is not unexpected that larger numbers of females than males would seek to emigrate in search of better opportunities for personal development, such as are denied them in Jamaica. From a sociological perspective also, their efforts to survive through emigration might be considered more a need than a desire in the light of factors discussed below.

The Jamaican society typifies that of other Caribbean countries in the high percentage of female household heads. The 1985 Labour Force Survey puts the total number of household heads in Jamaica at 547,500. Of this number, 39% are females. Illegitimacy rates are high and it is not uncommon to find situations where an unmarried unemployed female household head bears the full responsibility of caring for herself and her children whose father(s) provide her with no financial or emotional support. Usually her skill and educational levels are too inadequate for her to gain meaningful employment, hence for her it becomes essential to migrate overseas where she will have more employment opportunities and be better able to support her children and whoever remains as their guardian.

Marriage in Jamaica is not the norm and is regarded rather as a middle/upper class phenomenon and as a status symbol among lower socio-economic groups. Data derived from the 1982 Population Census, as presented in Table 4, show that only a relatively small proportion of Jamaican women live in married unions (if we rightly assume that the majority of those in the "not stated" category are unmarried). The numbers given in Table 4 for the various

categories suggest that quite a large number of women over 14 years do not in fact have the stable support of a male partner. The fact that these women are not attending primary or secondary school (at least those between 14 and 19 years) also suggest that many are unskilled and under-educated.

TABLE 4

Female Population 14 Years and Over Not Attending Primary
or Secondary School by Union Status

<u>Union Status</u>	<u>Total</u>
Total	619,452
Married	156,950
Common-Law	100,015
Visiting	17,618
Not Living with Husband	24,986
Not Living with Common Law Partner	45,955
Never had Husband or Partner	17,043
Not Stated	256,975

Source: Population Census 1982, Volume I, Statistical
Institute of Jamaica.

In a situation where there exists a high percentage of females who are largely unskilled and self-supporting with few opportunities for employment, it is critical that the benefits to be derived from services provided by the national budget be fully accessible to them. The section of this study which follow will more specifically examine the present status of women as beneficiaries of those services provided from resources of the National Budget of Jamaica.

PART 3

PUBLIC SECTOR EXPENDITURE ON SERVICES BENEFITTING THE
POPULATION IN GENERAL AND THE STATUS OF WOMEN AS
BENEFICIARIES OF THESE SERVICES

This section identifies and briefly describes a range of services provided for the population from the resources of the national budget of Jamaica. Although the activities of all Government Ministries and departments are ultimately intended to benefit the country's population, only selected services provided through some of the Ministries will be discussed in this study. Selection will be based on those services which are considered to be of most direct benefit to the country's population. Consequently, Table 5 which presents the budget expenditures for the Ministries selected, will exclude amounts for Central Administration and other supports to the Central Government machinery and will rather focus on the expenditures for services and programmes received most directly by the population.

The Government of Jamaica is comprised of seventeen Ministries and a number of special departments e.g. Office of the Prime Minister, among others. The nine Ministries selected for discussion in this study include those of: Education, Health, Youth and Community Development, Social Security, Justice, the Public Service, Construction, Agriculture and Labour. The tables on expenditure cover the five year period from 1981 to 1985 so as to provide an overview of the movement in the levels of expenditure relative to the impact of the country's devalued currency, high rates of inflation and increased cost of living over the years. The figures are derived from the documents on Estimates of Expenditure of the Government of Jamaica for the various

Table 5

Budget Expenditures For Selected Items in Some Government Ministries
1981 - 1985

(in \$ '000)

Ministry	Selected Budget Items	Budget Years				
		1981-82	1982-83	1983-84	1984-85	1985-86
Ministry of Education	(Recurrent)					
	1. Infant & Primary Education	108.5	118.7	142.0	160.3	167.2
	2. Secondary Education	114.0	129.0	150.0	164.3	174.2
	3. Tertiary & Continuing Education	36.6	36.7	38.4	42.7	44.7
	4. Higher Education Services	47.5	55.6	53.4	60.5	67.5
	5. Student Support Services	5.6	11.5	9.1	11.0	13.2
	6. Capital Expenditure for various categories	8.2	17.4	15.1	17.0	29.3
	7. TOTALS	320.4	368.9	408.	455.5	496.
Ministry of Health	(Recurrent)					
	1. Central Administration	.05	.05	.04	.02	.05
	2. Primary Health Care	24.3	26.6	33.9	12.0	43.5
	3. Secondary & Tertiary Health Care	89.2	90.0	148.0	146.0	166.0
	4. Maintenance of Health Service Facilities	2.0	3.2	3.2	3.5	4.1
	5. Medical Support Services	3.0	3.7	4.0	4.2	5.2
	6. Hospital Services	11.1	12.2	13.4	16.0	17.3
	7. Capital Expenditure for various categories	24.4	25.0	10.0	13.6	20.4
	8. TOTALS	154.1	160.8	212.5	225.4	256.5

Table 5 (continued)

Budget Expenditures for Selected Items in Some Government Ministries
1981 - 1985

(in \$ '000)

Ministry	Selected Budget Items	Budget Years				
		1981-82	1982-83	1983-84	1984-85	1985-86
	(Recurrent)					
Ministry of Youth & Community Development	1. Child Welfare	8.1	8.8	10.0	13.3	14.1
	2. Vocational Training	4.1	4.6	4.2	5.2	5.2
	3. Community Development Services	9.3	10.6	10.5	9.7	9.2
	4. Development of Human Resources	0.3	0.4	0.4	0.5	0.6
	5. Capital Expenditure for various categories	3.5	7.5	2.7	3.4	3.0
	6. TOTALS	25.3	31.9	27.8	32.1	32.1
	(Recurrent)					
Ministry of Social Security	1. Social Security	3.9	4.5	4.5	5.8	6.6
	2. Public Assistance Services	10.3	10.6	10.6	10.9	51.3
	3. Social Welfare	1.2	1.5	1.4	2.7	3.5
	4. Emergency Relief Services	1.2	1.5	1.4	2.5	1.3
	5. Capital Expenditure for various cate- gories	-	0.8	3.0	3.1	0.7
	6. TOTALS	16.6	18.9	20.9	25.0	63.4

Table 5 (continued)

Budget Expenditures for Selected Items in Some Government Ministries
1981 - 1985

(\$ '000)

Ministry	Selected Budget Items	Budget Years				
	Recurrent & Capital	1981-82	1982-83	1983-84	1984-85	1985-86
Ministry of Justice	(Recurrent)					
	1. Family Court & Support Services	0.8	0.9	1.1	1.2	1.3
	2. Attendance Centre	0.06	0.1	1.2	0.1	0.1
	3. Courts	6.0	7.1	8.2	10.0	10.2
	4. Adult & Juvenile Institutions	19.7	21.9	20.7	25.7	26.0
	5. Capital Expenditure for construction of buildings	-	-	2.1	1.6	1.1
	6. TOTALS	26.6	30.0	33.3	38.6	38.7
Ministry of Public Services	(Recurrent)					
	1. Pensions	19.5	26.5	27.5	29.6	29.4
	2. Capital Expenditure for Human Resources Development	-	-	7.1	8.4	11.5
	3. TOTALS	19.5	26.5	34.6	38.	41.0
Ministry of Agriculture	(Recurrent)					
	1. Operation of Training Centres	0.4	0.3	0.5	0.6	0.4
	2. Capital Expenditure for Marketing Development	1.5	6.0	10.0	6.3	1.4
	3. TOTALS	1.9	6.3	10.5	6.9	1.8

Table 5 (continued)

Budget Expenditures for Selected Items in Some Government Ministries
1981 - 1985

(\$ ' 000)

Ministry	Selected Budget Items	Budget Years				
	Recurrent & Capital	1981-82	1982-83	1983-84	1984-85	1985-86
Ministry of Construction	(Capital)					
	1. Government & Private Housing Promotion & Management	-	-	5.6	5.9	5.9
	2. Community Amenities & Facilities	-	-	2.7	2.7	2.5
	3. Government Housing Development	-	-	17.2	5.0	9.0
	4. TOTALS			25.5	13.6	17.4
Ministry of Labour	(Recurrent)					
	1. Manpower Services	-	-	2.0	2.3	2.3
	2. TOTALS			2.0	2.3	2.3

Source: Estimates of Expenditure - Government of Jamaica for years 1981 - 1986. Planning Institute of Jamaica.

Table 6

Selected Services: Changes in Expenditure Levels Comparing 1980-81 and 1984-85*

Ministry	Expenditure in J\$ m.		% Age Change 84/85 vs. 81/82	1984/85 Expendi- ture in Constant 1981/82 J\$ m.	% Age Increase (decrease)
	1981-82	1984-85			
1. Education	320.4	455.5	42.1	323.0	0.8
2. Health	154.1	225.4	46.3	160.0	3.8
3. Youth and Community Development	25.3	32.1	26.8	22.8	(-0.9)
4. Social Security	16.6	25.0	50.6	17.7	6.6
5. Justice	26.6	38.6	45.1	27.4	3.0
6. Public Service	19.5	38.0	94.8	27.0	38.5
7. Agriculture	1.9	6.9	357.9	4.9	258.
8. Construction	n.a	13.6	n.a	9.6	n.a
9. Labour	n.a	2.3	n.a	1.6	n.a

* Totals of expenditure for selected items as they appear in Table 5, were used in the preparation of Table 6.

years. For the most part, the figures represent the actual expenditure for the budget year in question. Only in the case of the 1985-1986 budget year are estimated expenditure figures used. The rest of this section will describe selected social services for which provision is made in the recurrent and capital budget allocations of the Ministries mentioned above.

MINISTRY OF EDUCATION

The Ministry of Education receives the second largest allocation from the national budget of Jamaica, next to the Ministry of Finance and Planning. In the period 1981-1982, this Ministry received 19.88% of the total national budget.⁽¹⁾ The Ministry's total budget for recurrent and capital expenditure has moved from \$345,832,000 for 1981/1982⁽²⁾ to \$482,608,000 for the period 1984-1985.⁽³⁾ This shows a 39.56% increase in four years. Although this sum appears to be quite sizeable, real increase or decrease in expenditure levels over the years can only be meaningfully assessed in the context of changes in the economic situation of Jamaica for the same period. Table 6 represents a comparative analysis of budget expenditures for the years 1981-1982 and 1984-1985 in constant 1981/82 dollars, for selected services of the Ministries being covered in this review. The table shows that whereas for the items selected the Ministry of Education realised a 42.1% increase in expenditure for 1984/1985 over 1981/1982, in real terms the effects of inflation during this period rendered this increase to be only 0.8% in constant 1981/1982 dollars. The Ministry's total budget for 1984/1985 actually decreased by 3.6% compared to the 1981/1982 amount. This suggests that there was very little change in actual

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- (1) Sources: a) Education Statistics 1981-1982 - Ministry of Education.
b) Jamaica - Estimates for Expenditure for the Year Ending 31st March, 1986. Planning Institute of Jamaica
- (2) Source: Education Statistics 1981-1982 - Ministry of Education.
- (3) Source: Jamaica - Estimates for Expenditure for the Year Ending 31st March, 1986. Planning Institute of Jamaica.

levels of expenditure between 1981 and 1985. In fact, the education services of the country have experienced a gradual deterioration which is manifest in increasing problems such as shortage of school spaces, overcrowding, shortage of furniture and general school supplies, poor maintenance of physical facilities and closure of some schools. It is within this context of overall inadequacy of the existing education system that the programmes provided for the population through the Ministry are described.

The population (as a whole) benefits from educational services provided by the Government through the Ministry's expenditure on programmes offered at levels of Infant and Primary, Secondary, Tertiary and Continuing Education and Higher Education. Males and females share equal rights to the educational system, which although limited, is free and available across the island. Only since June 1986 has Higher Education been removed from the "free education" category, as a result of the recent imposition of a cess on tuition fees payable by students at the U.W.I. and C.A.S.T., effective October 1986. The total recurrent expenditure shown in Table 5 for the Infant and Primary levels represent the cost of administration and supervision of Early Childhood and Primary Education programmes throughout the Island. This includes payment of salaries for teachers and recurrent expenses for the 30 infant schools, 264 primary schools and 520 all-age schools in the island. The budget also provides grants to Basic Schools which cover subsidies for staff salaries, nutrition subsidies for children, and funding assistance for nine schools for handicapped children, catering for the deaf, blind and mentally retarded. A special Diagnostic and Therapeutic Centre for early detection and treatment of disabilities in children was established at the Mico Teachers' College in 1981.

Expenditure shown in Table 5 in the category of secondary education provide for the administration and supervision of the country's 81 New Secondary Schools, 46 traditional High (Grammar) Schools, 7 Technical High Schools, 6 Comprehensive High Schools and 3 Trade and Vocational Schools. The New Secondary High, Technical High and Comprehensive High Schools prepare students for external examinations, e.g. C.X.C. and/or G.C.E. The Trade and Vocational Schools cater for students mainly between the ages of 15-19 years. They are primarily concerned with providing students with concentrated programmes for training in particular skills as preparation for employment in specific occupations. Mention must be made here of the Human Employment and Resource Training (HEART) programme which was initiated in 1982. This programme receives funding through the Office of the Prime Minister and provides advanced vocational training of youth in cooperation with private organizations. Training is offered in the fields of Garment Industry, Construction, Agriculture, Commercial Skills, Cosmetology and Tourism. Records of expenditure for the Office of the Prime Minister show amounts of \$3,046,000 for 1983-84, \$9,932,000 for 1984-85 and estimates \$10,000,000 for 1986, for the H.E.A.R.T. Programme. The budget allocation for secondary education also makes provision for financial assistance to needy students. This provision is the source from which grants are made to needy students attending High, Secondary, Technical High and Comprehensive High Schools who on the basis of means test are considered to be in need of assistance to ensure that basic requirements are supplied. Males and females have equal access to this facility.

At the Tertiary and Continuing Education Level, the recurrent budget allocation represents expenditure for the administration and supervision of 8 Teachers' Colleges which offer free tuition, board and lodging to students.

The budget also reflects similar costs for the Agricultural College, 4 Community Colleges and the College of Arts, Science and Technology (CAST). These institutions combined, offer a wide range of vocational, technical and professional training programmes. Also included in the allocation are expenditures for the training of Basic School teachers throughout the island; scholarships for teachers for advanced institutional training and for participation in teacher exchange programmes; grants to the Jamaica Movement for the Advancement of Literacy Limited (JAMAL); and boarding grants to U.W.I. and C.A.S.T. students.

The recurrent expenditures for the category of Higher Education cover the grant to the University of the West Indies (UWI) which is Jamaica's contribution to the expenses of U.W.I. on the basis of a formula agreed on by the participating territories. Provision is also made for scholarships and tuition fees (which were free to students up until October, 1986) for U.W.I. students. Expenditures in the category of Student Support Services relate to the School Feeding Programme; operations of Nutrition Products Limited and the provision of school uniforms. The aim of the School Feeding Programme is to provide a daily hot^o and nutritious meal for pupils of Primary, All-age, Secondary, Infant and Basic Schools whose diet might otherwise be deficient. Nutrition Products Limited is a company which produces milk and high protein cakes and buns which are supplied at minimal cost to children of Government-sponsored day care centres, basic schools, and other government schools for children aged 4-15 years. In 1985, approximately 94,000 children were benefitting on a daily basis from this programme. The School Uniform project involves the supplying of material for one uniform to all children of Primary Schools Grades 1-6, free of cost.

Capital expenditure in education for the period under discussion has focussed principally on repair and refurbishing of facilities and the expansion and construction of some new facilities at all levels but more so at the primary level. At the primary level also, new classrooms were constructed to accomodate handicapped children. At other levels, the Agricultural College and the College of Arts, Science and Technology were expanded and facilities and equipment upgraded. In summary, the services described represent ambitious efforts to provide a wide range of programmes meant to maximize the benefits of the education system to the population. Unfortunately, however, it is clear that the budget resources are very inadequate to meet the needs of a large proportion of the general population who rightly have access to the education system. This has led to a situation where members of the population must compete for access to education services which are inadequate, both in the quality and quantity required to satisfactorily meet their needs.

Status of Women as Recipients of Education Services

The educational services previously described are in theory, equally accessible to males and females of the population, as education is free, at least to the secondary level. However, it has been pointed out that there are limits to the extent of this equal and free access - due to the inadequacy of the budget to provide satisfactory levels of service for the whole population. In such a situation, competition for the scarce services have resulted in reduced accessibility for some groups in the population. It will be seen from the data presented in this section that females are in fact denied full access to the total education system in its present form.

TABLE 7

Summary of Student Enrolment by Type of Educational Institution

	Number of Schools	ENROLMENT		
		Male	Female	Total
Basic Schools (Recognized)	1108	40938*	42860*	83798
Basic Schools (Unrecognized)	354	7827	8151	15978
Infant Schools	29	5361	5475	10836
Primary Schools	284	84916	86293	171209
Infant Departments (Primary)	45	2277	2271	4548
All-Age Schools	501	126071	122504	248575
Infant Departments (All Age)	40	1397	1645	3042
Special Schools	6	1260*	1056*	2316
New Secondary Schools	80	48272	45645	93917
Secondary High Schools	46	21558	31001	52559
Comprehensive High Schools	6	3595	4030	7625
Technical High Schools	7	3997	4093	8090
Vocational and Agricultural Schools	4	763
Kindergarten and Preparatory (Independent)	105	8548	10038	18586
Independent Secondary Schools	52	3307	5900	9207
Other Independent Schools	67	3342	8038	11380
Community Colleges	4	4947
Teachers' Colleges	8	3648
College of Arts, Science and Technology	1	1943	1489	3432
University of the West Indies	1	2103*	2442	4545

Source: Education Statistics 1981-1982 - Ministry of Education

* Estimated

The data provided in Table 7 show a pattern of equal or larger numbers of females than males enrolled at institutions at different levels of the education system. This trend obtains generally except in the case of Special Schools and C.A.S.T. The fact that more females than males participate in the education system realistically reflects the structure of the population which has approximately 1% more females than males (1982 census data) and should not be misinterpreted to mean that females have better access or benefit more from the system, compared to males. The equitability of the system for males and females obtains at the Basic and Infant through Primary levels

of education as children qualify for places only on the basis of age. It is at the secondary level that closer examination of statistics raises questions about the fairness of the system for females.

The secondary level of education comprises the following types of institutions: New Secondary Schools, Traditional High (Grammar) Schools, Technical High Schools, Comprehensive High Schools, Trade and Vocational Schools. Students gain entry to Traditional High, Comprehensive High and Technical High Schools by sitting one of the following three entry exams: (a) The Common Entrance or 11 Plus Exams for ages 10-11 years; (b) the Technical Entrance Exams for ages 13-15 years and (c) the Grade Nine Achievement Test for All Age and New Secondary students who try for a second chance to enter various types of High Schools. Children who are unsuccessful in the 11 plus exams can enter Grade 7 of the All Age or New Secondary Schools on the basis of their age. Gillings and Knight (1986) point out that approximately 48% of school entrants in this latter category are girls and that there is an underlying feeling in the society that this category of student represents the "failures" of the primary system based on their inability to pass the entry exams to the High Schools.⁽¹⁾

A look at the Common Entrance Examination results reveal figures that confirm that girls at this stage are not given equal chance as boys to enter High Schools. Table 8 shows the number of entries for females and males who sat the Common Entrance for the years 1980-81 and 1981-82, and the number of awards made.

(1) S. Gillings and P. Knight, 1986 - "Education, The Young Girl, Technical Vocational Preparation for the World of Work". (UNESCO Report) May, 1986.

TABLE 8

Common Entrance Examination to Secondary High School
By Sex 1981-1982

YEAR	ENTRIES			AWARDS		
	Total	Males	Females	Total	Males	Females
1980-81	38,106	13,796	24,310	8,766	3,735	5,031
1981-82	42,467	15,534	26,933	9,389	4,200	5,189

Source: "End of Decade Report for Education - Jamaica" by
Dahlia Repole, April, 1985.
Bureau of Women's Affairs

The exam results for both 1980-81 and 1981-82 show that more awards were made to boys than girls in proportion to entries made for the exams. In 1980-81, 27% of boys who entered received awards whereas 21% of girls who entered were awarded. Similarly in 1981-82, 27% of boys who entered received awards compared to 19% awards to girls who entered. This biased pattern of allotment of Common Entrance awards has prevailed over the years and has been the subject of much speculation and controversial discussion. Repole (1985) cites Leo-Rhynie (1984) who points out the denial of the Ministry of Education to charges that low-performing boys receive places over higher performing girls. The suggestion is made that there is some discrimination against girls who usually perform better, in the allocation of free places to High Schools.

Discrepancies also exist in awards for the Technical Entrance exams and the Grade Nine Achievement Test. This is apparent from the data provided in Tables 9(a) and 9(b).

TABLE 9(a)

Technical Entrance Exams 1981-82
Number of Entries and Awards By Sex

ENTRIES			AWARDS		
Total	Males	Females	Total	Males	Females
14,557	4,938	9,619	925	478	477

% males receiving awards = 9.7

% females receiving awards 4.7

TABLE 9(b)

Grade Nine Achievement Test 1980-81
Number of Entries and Awards By Sex

ENTRIES			AWARDS		
Total	Males	Females	Total	Males	Females
11,433	4,040	7,393	1,002	407	595

% males receiving awards = 10

% females receiving awards = 8

The overall percentage of awards given for the Technical Entrance Exams is very low for both males and females, however, males have the better advantage. Whereas approximately 10% of male entries receive awards, only 5% of female entries are awarded places. Although somewhat more favourable for females, the Grade Nine Achievement Test results show similar inconsistencies.

One explanation which has been proffered for the discrepancy in making awards in the three exams described, is the deliberate intervention by decision-makers to maintain the male/female balance in institutions, given the population structure of female predominance. In spite of this, however, it must be pointed out that proportionately more girls than boys benefit from the best secondary academic education available. Table 7 shows a very high level of enrolment of girls compared to boys in the much favoured traditional High Schools whereas the enrolment level of boys in the less prestigious New Secondary Schools is greater than that for girls.

In the area of vocational training Table 7 does not give disaggregated numbers for male and female participation. It is assumed, however, that there is equitability of access to those institutions. The real disadvantage from the standpoint of females is their poor showing in selection of traditional non-female subjects and occupations. A complex number of issues may be at work here in discouraging female participation in male dominated vocational subjects offered by schools at the secondary level. The sample of vocational subjects selected by New Secondary School students (Table 10) demonstrate a strong inclination of girls to select traditionally female occupations and boys to select traditionally male areas of vocational interest. Prevailing attitudes in the society among teachers and parents, and existing school curricula, no doubt reinforce the sex-stereotyping which influence students selection of subjects. This implies a more subtle form of discrimination against females who would no doubt perform very well in the non-traditional female subject areas, if given the opportunity and encouragement to do so. The H.E.A.R.T. Programme previously described also has a predominance of females in traditional female occupations with a very small percentage opting for non-traditional occupations (see Table 11). It is a positive

development that in the H. E. A. R. T. Programme efforts are being made to encourage the participation of girls in Construction and Agricultural Technology.

TABLE 10

Enrolment of Girls in Grade 11 of New Secondary Schools 1981/82

<u>Vocational Area</u>	<u>Distribution of Girls</u>
<u>Business Education</u>	<u>21.6%</u>
Accounts Clerk	8.3%
Clerk/Typist	10.5%
Sales Clerk	0.6%
Steno Typist	2.2%
<u>Home Economics</u>	<u>67.4%</u>
Beauty Culture	2.2%
Child Care	21.4%
Clothing and Textiles	20.4%
Food and Nutrition	23.4%
<u>Industrial Arts</u>	<u>1.4%</u>
Auto Mechanics	0.6%
Carpentry and Cabinet Making	-
Drafting	-
Electrical Installation	0.8%
Farm Mechanics	-
Machine Shop and Welding	-
Plumbing and Pipe Fitting	-
<u>Arts and Crafts</u>	<u>5.4%</u>
<u>Agriculture</u>	<u>4.1%</u>
TOTAL	<u>100.0%</u>

Source: UNESCO Study: "Education, the Young Girl, Technical/Vocational Preparation for the World of Work - Jamaica", S. Gillings and P.A. Knight (May 1986).

TABLE 11

Vocational Choices of Females
in H.E.A.R.T. Programme

Programme	Target Age Group	ENROLMENT			Skills Imparted
		1983-84	1984-85	% Females	
School Leavers	17-20	3-4,000 p.a.		50%	On the job training in range of skills. Continuing Education.
Apparel, Sewn Products & Craft	17+	548	N/A	95%	Handicraft Skills
School of Cosmetology	17+	23	100	95%	Cosmetology
Commercial Skills Academy	17-25	129	298	85%	Advanced Business Secretarial
Building Skills Academy	17-25	-	555	3%	Advanced Building Skills

Source: UNESCO Study: "Education, the Young Girl, Technical/Vocational Preparation for the World of Work - Jamaica", S. Gillings and P. A. Knight (May, 1986).

At the Tertiary and Higher Levels of Education females have equal access to most institutions and certainly outnumber males in significant proportions in such areas as teaching and nursing (see Table 12). Males outnumber females at those institutions which offer training in vocational areas traditionally dominated by men. The School of Agriculture and C.A.S.T. are regarded as two such institutions. As for the secondary level, the major obstacles to females benefitting more completely from tertiary level educational opportunities are the existing societal attitudes which reinforce sex-role stereotyping in the occupations pursued by men and women in the society.

Other services provided through the Ministry of Education e.g. school feeding programme, provision of uniforms, boarding grants for tertiary level students and other student support facilities are administered without any apparent bias towards males or females. Females do derive greater benefit from participation in teacher training programmes, including those for Basic school teachers. This is so as many more females than males enter the teaching profession in Jamaica and thus predominate in those training institutions. With regard to the JAMAL programme fewer women than men have participated. JAMAL in its present form has been scaled down tremendously from its level of performance during the mid seventies on account of severe budget cuts. However, during the peak years (circ 1975-78) surveys conducted showed that 44% females and 56% males were enrolled in the literacy classes.⁽¹⁾ The surveys further showed that the principal reasons for the poor showing of women embraced a range of domestic problems which affected their ability to attend classes. Some of the problems cited were: hours of work; responsibilities for family and domestic chores at home; lack of reliable transport; costliness of transport; lack of encouragement from employers re attendance at classes. In spite of this, 51% of the graduates of JAMAL were women, signifying that more men dropped out of the programme than women.

In summary, it can be said that although females of the population theoretically have equal rights as men to education, in reality they are somewhat disadvantaged in certain aspects of the education process in that structures exist which deny them equal access with males to secondary

(1) Source: "Information on JAMAL and Basic Education for Women"
Jamal Foundation Booklet - Bureau of Women's Affairs.

education and prevailing attitudes reinforce sex-role stereotyping in the society limiting the career choices of females. Responsibilities of home and family which are mainly shouldered by women - also prevent many from benefitting from adult remedial programmes such as JAMAL.

MINISTRY OF HEALTH

The budget allocation for the Ministry of Health is comparatively larger than that received by several other Ministries. The allocation is usually about 6% of the total national budget. Table 12 below shows that allocations to the Health Ministry since 1982 have gradually declined as a percentage of the national budget, from 6.9% in 1982-83 to 5.9% in 1985-86.

TABLE 12

Budget Allocations to Ministry of Health 1982-1986
as % of the National Budget

Year	Ministry of Health Budget \$m	National Budget \$m	Health Budget as % of National Budget
1982-1983	200.5	2,920.2	6.9
1983-1984	203.4	3,226.5	6.3
1984-1985	231.6	3,754.0	6.2
1985-1986	279.7	4,732.0	5.9

Source: Economic and Social Survey Jamaica 1985
(Planning Institute of Jamaica)

The Ministry's responsibility is the surveillance, monitoring and security of the nation's health. Over the years, the Ministry has made

efforts to improve and increase the effectiveness and success of health care services islandwide through a programme aimed at decentralizing the administrative machinery for health service delivery at the Primary and Secondary levels of health care. In this review, no attempt is made to describe all the services of the Ministry. Items of budget expenditure are selected for discussion relative to their importance to the provision of health services that are of most benefit to the population. With the exception of one item, expenditures for Central Administration at the Ministry are not tabled. Similarly, programmes that relate to overall Environmental Health concerns, although ultimately of benefit to the general population, will not be given coverage here. The budget items selected for discussion are relevant to the categories of Primary Health Care, Secondary and Tertiary Health Care Services, Maintenance of Health Service Facilities, Medical Support Services and Hospital Services. These selected items are now briefly described in the order they appear in Table 5.

1. Central Administration: A small allocation is provided from this budget category for grants to private individuals for medical treatment abroad. This allows for assistance to needy persons to receive treatment overseas where such treatment is not available in Jamaica.

2. Primary Health Care Services: The Budget allocation provides for the operations of the Health Administration Boards, Clinics and Health Centres in two counties and six parishes in the island. These facilities offer a range of services in the areas of General Health, Maternal and Child Health, Family Planning, Family Life Education, Nutrition, Immunization, Environmental Health, Good Hygiene, Health Education of the public, School Health Services, Public Health Dental Services, Curative Services at the primary level and programmes for the eradication of such diseases as tuberculosis, Hansen's Disease and

sexually transmitted diseases. Expenditures for Primary Health Care Services also include the National Nutrition Programme and the activities of the National Family Planning Board. The Nutrition Programme expenditures reflect the cost of such activities as the monitoring of the nutritional status of the population, nutrition intervention programmes, nutrition education programmes and provision of dietetic services in health institutions. Funds allocated to the Family Planning Board provide for the administration and activities of the Board. Family Planning activities benefit the population as a whole but undoubtedly women as childbearers are the chief beneficiaries.

3. Secondary and Tertiary Health Care Services: By far the largest proportion of the Health Budget is allotted to this category which provides for the operations, maintenance, and administration of twenty-seven (27) hospitals islandwide. A decentralized approach to administration of these Hospitals has resulted in the establishment of 10 regional administrative systems which function to improve the population's access to the available public sector health services.

4. Maintenance of Health Service Facilities: Expenditures are made for the upkeep of clinics and hospitals across the island.

5. Medical Support Services: Expenditures pertain to maintenance of a Central Blood Bank, blood transfusion and laboratory services that are accessible to the general public.

6. Hospital Services: Expenditures in this category are for the maintenance of the main mental hospital (Bellevue) in the island.

7. Capital expenditure for the Ministry of Health for the period in review was mainly for the restoration and upgrading of hospitals, health

centres and clinics, the construction of additional children and female wards at some hospitals and the purchase of medical equipment.

The services described above benefit the population in direct ways. However, the extent of actual coverage and the quality of coverage must be seen in terms of other economic and social factors which have affected health services in recent years. Health services in Jamaica have never been completely satisfactory in terms of accessibility to the majority of the population. Primary Health Care and decentralization of health administration are two strategies that have been put to work to improve health care delivery to more of the population. These strategies have had a fair measure of success and Jamaica has been able to maintain a reasonably high standard of health care, as current health indices show (see Table 13). Nevertheless, this reasonably high standard of health which has obtained for years, is presently in danger of rapid deterioration because of the negative effect of the country's state of economic depression on the provision of health services. Expenditures for health have not kept pace with the increasing demand by the population. Devaluation and inflation in the economy have meant actual reduction in levels of expenditure relative to what goods and services the Jamaican dollar could buy in 1980. Table 6 shows that for selected items from the Ministry of Health's budget, allocations increased by 46.3%, from \$154m for 1981-82 to \$225.4m for 1984-85. However, when calculated in constant 1981/82 J\$m the amount of expenditure for 1984-1985 converts to \$160m representing a real increase over 1981-1982 of only 3.8 percent.

TABLE 13

Status of Health of Population - Jamaica

National Health Indices	Reference Year for Available Data	Percentage/Rate
1. Crude Birth Rate (Births per 1000 population)	1985	24.3
2. Crude Death Rate (Deaths per 1000 population)	1985	6.0
3. General Fertility Rate (Live Births per 1,000 females 15 to 44 years)	1983	3.3
4. Infant Mortality Rate (Deaths per 1000 infants under 5 years)	1985	28.0
5. Maternal Mortality Rate (Per 10,000 maternities)	1981-1983	10.8
6. Life Expectancy Rate (Females and Males)	1985	72.6(F) 68.1(M)

Sources: a) Economic and Social Survey Jamaica 1985. Planning Institute of Jamaica .

b) A Profile of Maternity and Child Health and Family Planning in Jamaica 1984 - Ministry of Health.

c) "Equality, Development and Peace Through Health For All" - by C. Bowen-Wright (1985), Jamaica's Report to United Nations End of Decade Conference for Women. (Bureau of Women's Affairs).

As for education, the result of Jamaica's economic crisis on the health services has been drastic cuts and reductions or phasing out of some facilities and staff, poor maintenance of health facilities, lack of equipment and basic medical supplies, high cost of drugs, and a shortage of doctors and other medical specialists. In 1984, the situation became so desperate that the

Government sought to rationalize the health services through closure of several hospital wards, and laying off of about 50% of Community Health Aids, mostly females who engage in a vitally necessary programme of intervention in the home through regular visits for monitoring of Maternal and Child Health. There were also lay-offs in several other staff categories. Secondary Health Care was reduced while Primary Health Care Services were increased. Eight of the island's hospitals were converted to Health Centres. Staff reduction affected efficiency in all the major areas of health services to the population. The situation has continued to worsen as the economic problems have intensified. Fees have recently been introduced for public sector health services, which were formerly offered at no charge to users, e.g. registration, beds, delivery, surgery and investigation. The downturn in the use of Government hospitals as seen in Table 14, may be a reflection of the potential users' inability to pay for, and therefore use, the services since the introduction of fees.

TABLE 14

In-Patient and Out-Patient Attendance at Government Hospitals (including University Hospital) 1984-1985

	1985	1984	% Change
In-Patient Discharges	132,181	147,437	-10.3
Out-Patient Attendances	462,437	551,844	-16.2
Casualty Attendances	395,171	530,879	-25.6

Source: Economic and Social Survey 1985
Planning Institute of Jamaica.

In summary, Jamaica now faces a situation where health services are being maintained under very stressful conditions for both health service staff and users of health services in the population. In some areas, although the present level of service delivery leaves much to be desired, there is

paradoxically a growing trend of underutilization through inability to pay for those services provided. Speculation is that, faced with pressures of economic survival, people put less priority on their health and only use the services when the need becomes desperate.

Status of Women as Recipients of Health Services

In Jamaica, women are the majority of recipients as well as providers of health services. They have equal access as men to all health services and they are the principal beneficiaries of special services that benefit women e.g. Maternal and Child Health, Family Planning. The areas of specialised health care provided for women relate to their unique role of child-bearing and do not represent any other areas related to their "womanhood" independent of child bearing. Bowen-Wright (1985) observes the following:

"Generally speaking, all women in Jamaica presently have access to health care. However, this health care is limited and addresses traditional areas. The End of Decade finds Jamaican women sensitized to the fact that the services that they normally receive are more intended to meet other objectives than the need of woman herself as a person. For example, massive efforts have been made to improve antenatal coverage as well as quality of care. As a spin-off, pre-decade maternal mortality rates have been reduced, but in fact quality of the infant has been the prime objective. Similarly, the efforts to ensure that the birthing process is attended by a professional in a "correct" environment gives prime consideration to the infant. To date, little attention is paid to the comfort and self-esteem of the woman".(1)

Baseline data is being gathered on non-traditional areas of health care delivery for women. This exercise has in some instances unearthed new

(1) Source: "Equality, Development and Peace Through Health for All" - C. Bowen-Wright (1985), Jamaica's Report to United Nations End of Decade Conference for Women. (Bureau of Women's Affairs).

information about the health of women. A longstanding belief was that women were not as subject to chronic diseases (e.g. diabetes) as men. New data show that more Jamaican women have diabetes and hypertension than men. They also live longer than men - with their illnesses. More work is presently being done on women's health with a view to establishing a base for instituting new services for women other than those related to child bearing.

With regards to the coverage for maternal services, women have benefitted more from some aspects of maternal care than others. Table 15 shows the age specific fertility rates for women in Jamaica in 1960, 1970 and 1982. The total fertility rate for Jamaica in 1982 was 3.2. This represents a significant decline from a 5.7 rate in 1960 and 5.5 rate in 1970. It is clear that women are changing their child bearing habits and limiting the number of pregnancies and children they have as a result of better access to Family Planning Programmes.

TABLE 15

Age Specific Fertility Rates, With Percentage Change 1960-1970
And 1970-1982 and Total Fertility Rates 1960, 1970 and 1982

AGE GROUP	AGE SPECIFIC FERTILITY RATES			% Change	
	1960 (1)	1970 (2)	1982 (3)	1960-1970	1970-1982
15-19	152.4	167.4	116.7	+9.8	-30.3
20-24	302.7	301.8	176.5	-0.3	-41.5
25-29	271.2	268.1	148.9	-1.1	-44.5
30-34	216.7	190.2	110.6	-12.2	-41.9
35-39	134.2	127.3	66.3	-5.1	-47.9
40-44	50.3	46.8	24.4	-7.0	-47.9
45-49	7.5	7.8	3.2	+4.0	-59.0
TOTAL FERTILITY RATE	5.7	5.5	3.2		

Source: A Profile of Maternity and Child Health and Family Planning in Jamaica 1984 - Ministry of Health.

The decline in the fertility rates reflect the impact of Family Planning activities which have intensified over the years. Table 16 represents attendance at Family Planning Clinics by both men and women, for the years 1983, 1984 and 1985. It is significant that the total number of acceptors increased by 3% in 1985 compared to 1984. Females far outnumbered males as acceptors in all years. 1985 saw a slight reduction over 1984 of male acceptors and also a slight decrease in number of first visits. Females continued to show increases in number of users in 1985, registering a 4% increase in revisits over 1984. Although Family Planning is reaching more of the population in general, a recent survey⁽¹⁾ revealed that only 69% of fecund and sexually active women now use family planning methods. One reason given for the less than desirable level of usage is the advertised dangerous side effects associated with the various methods.

TABLE 16

Attendance at Family Planning Clinics
By Type of Visit and By Sex

Year	TYPE OF VISIT			SEX		
	First Visits	Revisits	Total	Female	Male	Total
1983	41,219	228,297	269,516	n.a.	n.a.	269,516
1984	58,282	292,521	350,803	290,529	60,274	350,803
1985	58,169	304,494	362,663	310,977	58,966	362,663

Source: a) Social and Economic Survey 1985 - Planning Institute of Jamaica

b) A Profile of Maternal and Child Health and Family Planning in Jamaica, 1984 - Ministry of Health.

(1) Contraceptive Prevalence Survey 1983 - Ministry of Health

With regards to maternity there has been much improvement in the use of antenatal and intranatal services by women over the years. However, the rate of post-natal revisits remains below the target of 80 per 100 females. Table 17 gives an idea of coverage in these three areas mentioned.

TABLE 17

Coverage of Antenatal, Intra-Natal and
Post-Natal Services for Women

Year	% Antenatal	% Intra-Natal	% Post-Natal
1983	80.2	88.3	33.4
1984	93.0	90.1	58.6

Source: A Profile of Maternal and Child Health and Family Planning in Jamaica, 1984 - Ministry of Health.

The data in Table 17 indicate an increase of 13.2% for 1984, over 1983, in coverage of women benefitting from antenatal care. More women are also making use of hospitals for delivery of their babies. In 1984, 90.1% of women had hospital deliveries compared to 88.3% in 1983. In spite of the recent imposition of fees for use of public health facilities, the Government has agreed that Primary Health Care services will continue to be free as well as all secondary care services and investigations relevant to basic health needs of women and their children. This fact has indeed realized positive results in the areas of antenatal and intra-natal coverage. Post-natal coverage has not been as successful with only about 58.6% coverage in 1984. One explanation for the low level of coverage is the fact that economic pressures and competition at the work place make many women afraid

to take time from work to attend to their own needs. This has had a negative impact on the ability of many women to make use of postnatal services which are free and available.

The inadequate distribution of resources for the delivery of health care render some very vital services inaccessible to a large proportion of the female population. This is evident in the case of anaemia testing for Hb levels and the Papanicolaou (PAP) smear test for detection of cervical cancer. In the former case just over one-third of pregnant women receive this test at first visit. Of those tested for 1983 and 1984, roughly 33% were found to be anaemic (Hb levels below 10). In nine out of thirteen parishes, there was notable increase in the number of anaemic women.⁽¹⁾ In 1985, only one in five pregnant women were tested for anaemia at first visit. Of those tested 36% were found to be anaemic and treated. The serious implication here is that of the 64% of women who do not receive the test, a significant number are possibly anaemic, according to the trends in incidence of anaemia. The coverage is below desirable levels, however, a major problem which has contributed to the low level of testing is the absence of copper sulphate and test-tube supplies to do the tests. In the case of the PAP Smear Test, all women should have access to this test, which is a simple intervention for detecting and intercepting cervical cancer early. However, because of shortage of supplies and resources, only select women in the public sector and women who pay for private health care, presently benefit from these services. It must be pointed out that Jamaica has a very high incidence rate for cervical cancer. This area needs to be addressed urgently if health conditions affecting women are to be further improved.

(1) Source: "Equality, Development and Peace Through Health for All"-
C. Bowen-Wright (1985). Jamaica's Report to U.N. End of Decade
Conference for Women.

Another development related to decreasing levels of health care services which must be viewed with concern is the increasing rate of maternal mortality in Jamaica. In the period 1979 to 1982, the computed maternal mortality rate was 4 per 10,000 live births (25 in 1979, 30 in 1980, 17 in 1981, 22 in 1982). In a confidential study undertaken by Walker et al for the period 1981 to 1983, there were 190 maternal deaths, a rate of 10.8 per 10,000 live births. This represents an increase of 6.8 over the period 1979 to 1982.⁽¹⁾ This increase is worrisome as the study suggests that all the deaths for the period were avoidable. Causes of deaths in these cases were hypertensive diseases of pregnancy, haemorrhage, ectopic pregnancy, pulmonary embolism and sepsis, abortion, sickle cell disease, ruptured uterus and anaesthesia. The implication is that quality of care during deliveries needs to be more closely monitored in order to prevent the unnecessary death of women at childbirth.

The principal causes of generalized mortality in the population and among women for the years 1979 through 1982 are given in Tables 18 and 19. It is observed that the five leading causes of mortality in the population which rank in order: cerebrovascular disease, heart disease, malignant neoplasms, hypertensive disease, diabetes mellitus, have the same rank order for causes of mortality in women. This suggests that the number of women with afflictions in the abovementioned categories bears more influence than the number of overall health status of the total population, i.e. more women suffer from these chronic diseases than men. Bowen-Wright (1985) suggests that it is not surprising that more women in the society have chronic ailments, as the socio-cultural traditions which place the woman in the position of shouldering the burden of the home and child bearing in addition to full-time work and career

(1) Source: A Profile of Maternity and Child Health and Family Planning in Jamaica 1983 - Ministry of Health.

commitments, are certain to impact negatively on women's physical, mental and emotional health and well-being. She also indicates that health care providers have expressed the view, even in the absence of research data, that the greater use of health care facilities by women for various minor complaints is indeed a reflection of stress. It might be concluded that more women than men find it difficult to spend time on themselves to pursue activities that promote health and improved self esteem. The fact that in a study by Richards in 1973, 63% of women compared to 9% men were found to be obese could be an indication that women have fewer opportunities than men to engage in physical exercise programmes etc. that lead to weight control.

One very positive development which has benefitted teenaged women is the establishment of the Women's Centres for Adolescent Mothers. These centres are further described elsewhere in this study. Although the incidence of teenaged pregnancies still remains high, the decline in rates of pregnancy in that age group is encouraging (see Table 2). Pregnant teenagers who are forced to leave the regular school system, have a second chance to complete their education while their infants are properly cared for through the activities of the Women's Centres. It is also to be noted that the second pregnancy rate among the beneficiaries of the programme is very low. Since the inception of the programme in 1978 to December 1984 only 29 or 2.2% of second pregnancies were recorded.

A negative development which has affected the health of women and children is the drastic reduction in the complement of Community Health Aids. These are paraprofessionals who, through home visits in very depressed communities, are able to help women develop skills to improve the nutritional and overall health situation of their families. Several

studies have documented the role of the CHAs in improving the nutritional status of children under 5 years. The fact that malnutrition among children is slowly on the rise, in Jamaica once more is very likely related to the drastic scaling down of this vital community service. Whereas malnourished children accounted for 3.1% of under three year olds in six hospitals in 1979, a study by Rainford in 1984 showed that the number of malnourished children increased to 6.0% in 1981/82. The island's leading children hospital - The Bustamante Hospital for Children has also recorded a similar trend as patient discharge data show that 1.9% of all admissions in 1978 were for malnutrition compared to 3.7% in 1985. (1)

(1) Information derived from - "Discussion Paper on the effect of Food Availability, Consumption and Economic Factors in Nutrition and Health Status on the Jamaican Population" by Ashley, D. and Fox, K.C., 1986.

TABLE 18

Number and Rates for Leading Causes of Death
In 1982 with Comparative Rates for 1971-1981*

Rank	Cause	Number	Rate			
			1982	1981	1980	1979
	All Causes	10,861	493.7	581.7	559.9	580.8
1.	Cerebrovascular Disease	1,772	80.5	91.0	85.1	87.4
2.	Heart Disease	1,703	77.1	89.4	84.7	86.2
3.	Malignant Neoplasms	1,657	75.3	76.2	69.5	81.6
4.	Hypertensive Disease	653	39.3	35.2	29.9	33.7
5.	Diabetes Mellitus	482	21.9	22.4	22.8	33.6
6.	Infectious Intestinal Disease	336	15.3	16.9	18.1	17.9
7.	Pneumonia and Influenza	287	13.1	18.5	17.5	20.7
8.	Certain conditions Originating in the perinatal period	185	8.4	8.7	10.3	17.5
9.	Nephritis, Nephrotic Syndrome and Nephrosis	176	8.0	10.2	9.0	9.8
10.	Bronchitis, Emphysema and Asthma	159	7.2	8.1	8.0	9.6
11.	Nutritional Deficiencies	154	7.0	8.5	6.4	7.5
12.	Accidents and Adverse effects	119	5.1	9.6	13.1	12.7
13.	Chronic Liver Disease and Cirrhosis	89	4.0	4.7	4.9	6.4
14.	Ulcer of the stomach and Duodenum	83	3.8	5.5	6.7	6.9
15.	Congenital Anomalies	63	2.9	3.4	5.3	5.0
	All Other Causes	2,943	133.9	173.4	168.8	144.1

* Rates expressed per 100,000 population based on Registrar General Tabulations of deaths by cause and by year of occurrence.

Source: A Profile of Maternal and Child Health and Family Planning in Jamaica, 1984 - Ministry of Health

TABLE 19

Number and Rates for Leading Causes of Death of Females
in 1982 With Comparative Rates for 1979-1982

Rank	Cause of Death	(1)	(2)			
		Number	Rate			
1982		1982		1981	1980	1979
	All Causes	5,444	485.8	558.7	523.5	555.4
1.	Cerebrovascular Disease	1,015	90.6	101.2	94.2	97.6
2.	Heart Disease	807	72.0	87.3	77.1	81.6
3.	Malignant Neoplasms	800	71.4	73.0	65.6	78.1
4.	Hypertensive disease	404	36.1	40.3	31.1	37.5
5.	Diabetes Mellitus	307	27.4	27.3	28.8	43.8
6.	Infectious intestinal diseases	166	14.8	16.9	15.9	15.5
7.	Pneumonia and Influenza	147	13.1	18.8	10.4	19.1
8.	Certain conditions Originating in the perinatal period	76	6.8	7.4	10.0	14.8
9.	Nutritional deficiencies	71	6.3	6.8	6.2	6.1
10.	Bronchitis, emphysema and Asthma	59	5.3	5.4	5.9	6.2
	All Other Causes	1,592	142.0	174.3	170.3	155.1

Source: A Profile of Maternal and Child Health and Family Planning in Jamaica, 1984.
Ministry of Health.

SOCIAL WELFARE AND OTHER SERVICES

The Ministries which will be given coverage under the above heading include the following: Youth and Community Development, Social Security, Justice, the Public Service, Agriculture, Construction and Labour. Brief descriptions of selected services provided by these Ministries as shown in Table 5 are now presented.

Ministry of Youth and Community Development

The services offered through this Ministry are of particular benefit to children, youth and women. The recurrent budget in the category of Child Welfare, reflects expenditure for the general administration of the Children's Services Division which has statutory responsibility for the protection and welfare of children in need of care and protection or who are beyond parental control. The Children's Services Division allocates grants from its budget for operations and maintenance of 31 children's homes and 6 places of safety for juvenile delinquents. The foster care and adoption programmes through which children can be placed with foster parents in private homes, and/or given for adoption are also financed through the Division's budget. The budget allows for the provision of Day Care Services to help family providers assure adequate care of their children while they are engaged in gainful employment outside of the home. An annual allocation is given for upkeep and maintenance to the Child Development Centre located on the campus of the University of the West Indies, Mona, Jamaica. This centre is concerned with maintaining acceptable standards of care through its training programmes for day care staff and the development and production of support materials for use in these facilities. The Food Aid Programme whereby food supplies are received from the World Food Programme (WFP) and the European

Economic Community (EEC) is also administered from this Ministry's budget resources. The Food Aid Programme benefits children and women in particular through their attendance at schools and ante and postnatal clinics.

Recurrent Expenditures in the category of vocational training relate to the operational costs of the Vocational Training Development Institute (VTDI) a number of youth centres for 16-18 year old males and females and 4H clubs throughout the island. The programmes offered at these centres are geared to improving the educational skills level of young people in specific vocations including Home Economics, Agriculture and Behavioural Training. Grants are made in this category to the Social Development Commission which is a statutory body charged with the promotion of all matters related to the cultural, social and economic development of the island. The G.C. Foster College of Physical Education which receives a budget allocation was established in 1983. It offers a three year diploma course for physical education teachers aimed at preparing individuals with high performance levels and potential, as teachers and coaches, thereby facilitating a national physical education and sports programme. The category of Development of Human Resources provides funding for the Bureau of Women's Affairs which was established in 1975 to promote the welfare of women in the society. The main objectives of the Bureau are

- a) to identify the present status and condition of women in the Jamaican society
- and b) to assist in promoting policies and programmes to integrate women into the whole process of national development.

The amounts shown in Table 5 for capital expenditure for this Ministry generally represent for the years under review, costs of refurbishing and repairing child welfare institutions, construction of a home for boys and expansion of the Vocational Training Division Institute. Of special interest

to the cause of women, was the establishment of two Women's Centres, one in Kingston and one in Mandeville to provide training for and facilitate the continuing education of pregnant teenagers and adolescent mothers. The Government also has channelled special funding grants and loans received from the United Nations Voluntary Fund (UNVF), the United Nations Children Fund (UNICEF), the World Bank and the Inter-American Development Bank (IDB) and USAID into the following projects:

- a) Projects for Women in Rural Areas involving sundry economic projects designed to create employment opportunities for unemployed rural women,
- b) Urban Upgrading Projects - aimed at improving sanitation, maternal and child health programmes and promoting day care centres and income generating activities for women in depressed urban areas,
- c) Basic Services for Children Project which aimed to improve their quality of life within the context of family and community,
- d) Upgrading and expansion of 4-H Clubs activities in Jamaica,
- e) Family Life and Family Planning Project - aimed at introducing Family Life and Family Planning programmes in youth institutions, towards the reduction of teenage fertility.

The constraints of the National Budget which impacted negatively on Education and Health Services as previously described, also seriously affected the Ministry of Youth's recurrent and capital budget levels of expenditure between 1981 and 1985. Several of the programmes of the Ministry have been reduced or contained to size. Table 6 shows that for the selected items of expenditure, the total allocations increased only slightly, i.e. from \$25.3m in 1981/82 to \$32.1m in 1984/85, an increase of 26.8%. The situation

is even worse than is apparent when the 1984/85 allocation is calculated in constant 1981/82 dollars. Table 6 provides this information. Actual expenditure for 1984/85 in constant 1981/82 dollars converts to \$22.8m which represents an actual reduction of 0.9% from the level of expenditure attained in 1981/82. The actual shrinkage of the Ministry's budget is evidenced in a number of areas. The Children's Services Division experienced a cut in its complement of staff. This has resulted in the reduction of such activities as handling of new child care cases. Whereas in 1984 3,139 new cases were handled, the number was reduced to 2,752 in 1985. Children's Homes and Places of Safety had underutilization of capacity because of lack of equipment to service a full complement of resident children.

Day care services which from the outset have been woefully inadequate for coverage of children 0-4 years (which population stood at 26,7760 at the 1982 census count) were further cut, resulting in a smaller number of children served. The number of Government Day Care centres have decreased from 26 serving 482 children in January 1984 to 20 centres serving 250 children in December 1985. Youth Clubs and 4-H Clubs also experienced a reduction in membership due to inadequate staff for promotion and supervision of programmes. Between 1984 and 1985 4-H membership decreased by 7.5% while Youth Club membership decreased by 3.6%. The G.C. Foster Sports College although relatively new, faces serious maintenance problems of the various sports facilities because of the inadequacy of budget resources. The Bureau of Women's Affairs has been able in spite of budgetary limitations to expand its services for Jamaican Women, mainly through community resources, support groups and external funding. USAID has provided funding through the "Working Group on Women" to implement a number of projects aimed at improving the

economic and social status of approximately 200 women in low-income households. These include garment-making, construction, fruit drying, urban farming and video technology skills. The Crisis Centre for Women is another project established in 1985 by a community support group - "Women Incorporated" with the help of the Women's Bureau. The Crisis Centre provides counselling, information and legal advice to female victims of incest, domestic violence and rape. The two existing Women's Centres for adolescent mothers have had such positive results in the rehabilitation of pregnant teenagers that the Government intends to expand the number of centres in the island over a five year period with funding acquired from the Bernard Van Leer Foundation and the Norwegian Red Cross Society.

The Status of Women as Beneficiaries of Services Provided through
The Ministry of Youth

It is obvious from the programmes described that women are the principal beneficiaries of services provided through the budget of the Ministry of Youth. The fact that this Ministry attends to such needs as residential homes and day care for children and food assistance to needy families, is, by implication, a valuable source of assistance for women who traditionally have primary responsibility for the child rearing and food provision aspects of home and family life. The various special projects e.g. the Urban Upgrading project, the Basic Services for Children Project, Projects for Rural Women and Family Life and Family Planning Projects benefit women primarily as they often combine concern for women's health and personal development through fertility control, with specific activities for improving their capacity to earn an independent income, and reduce the burden of domestic responsibilities in the home.

The Women's Centres, the Women's Bureau and its support services are certainly the most significant among the special services earmarked for

women of the population. This assessment is based on the fact that these institutions are not only concerned with women's traditional role of child bearer and mother, but seek to help their development through continuing education and the moral and emotional support which are forthcoming from such an establishment as the Women's Crisis Centre. Given the vast number of women who require these special support services, it is unfortunate that they are so limited in number at present. Nevertheless a positive start has been made and it is hoped that eventually women throughout rural and urban Jamaica who need such services will have access to them as a result of increased government interest and input.

The Ministry of Social Security

The services provided for the population through this Ministry benefit a wide age range from infants to the old and incapacitated. Many of the programmes are directed at the less privileged of the country's population. Reference is made to Table 5 in describing the selected services provided through the Ministry's budget. Recurrent expenditure for the category "Social Security" covers the administration of the National Insurance Scheme throughout Jamaica's 14 parishes. The scheme provides compensatory payments e.g., unemployment, illness, maternity leave etc., to all category of workers and retired persons who contributed to the scheme when they were employed. The budget item "Public Assistance Services" refers to the cost of administration and supervision of the following schemes: Rehabilitation Grants, Old Age and Incapacity Allowance, Poor Relief Services; Food Aid Plan. These schemes benefit the population as described.

1) Rehabilitation Grants: Funds are for making grants to persons for the purposes of establishing some gainful occupation, e.g., higglering,

dressmaking etc. Ad hoc grants are also made to individuals or families who have suffered some sort of personal misfortune, or to the breadwinner of a family who has a serious illness.

2) Old Age and Incapacity Assistance: Funds provide weekly assistance to near destitute, aged persons who do not qualify for NIS payments and who have no other means of support.

3) Poor Relief Services: This scheme provides for persons who are destitute due to mental or physical causes and are unable to work and earn the means of subsistence. Temporary relief is given in exceptional circumstances of destitution arising from drought, epidemic diseases and like causes.

4) Food Aid Plan: This scheme provides for the benefit of the Food Aid Plan to reach needy persons in the categories of:

- a) The aged who are in receipt of public assistance and Poor Relief allowances;
- b) Families whose total income is \$50 or less weekly;
- c) Pregnant and lactating women and children aged 0-3 years who are in attendance at Health Centres and Clinics;
- d) School children in attendance at Basic schools, Primary, All-Age and New Secondary Schools.

In 1984, the Food Aid Plan was expanded to reach a larger proportion of the population and is now referred to as the Food Security Plan, embracing all the food aid services provided under different ministries. The Food Security Plan is geared at protecting approximately a half of the country's population comprising 600,000 school children, 200,000 pregnant and lactating

mothers and 200,000 elderly or very poor persons. Food supplements are provided through a system of food stamp booklets issued twice per month to eligible persons mentioned previously. Each booklet is valued at J\$20.00 and can be used to purchase rice, cornmeal and skimmed milk powder from any grocery store.

Recurrent expenditure in the category "Social Welfare Services" provide for a) Grants to Private, social welfare organizations which offer valuable services to the needy areas of various communities. Organizations such as the Red Cross Society, Jamaica Save the Children Fund, the Salvation Army, the Council for Voluntary Social Services (CVSS), the Voluntary Organization for the Upliftment of Children (VOUCH), among others, are included; b) operational costs of the national Vocational Rehabilitation Service for the Handicapped, administered through the Ministry on the advice of the Jamaica Council for the Handicapped; c) administration of Golden Age Clubs and Feeding Programme which involves the organization and establishment of several golden age clubs for senior citizens across the island and a special feeding programme which provides a daily hot meal five days per week to approximately 900 aged persons; d) A grant to the newly established (1984-85) Golden Age Home in Kingston. The grant is a contribution towards the administrative and operational costs of the home, which offers residential care, meals and other welfare services to about 500 partially or wholly destitute senior citizens.

Expenditures for the category "Emergency Relief Services" relate to the administration of relief assistance to persons in the event of localized disasters in the island, e.g. floods, fires, droughts. The recurrent

administrative costs of all Food Aid Programmes are accounted for in the Ministry's recurrent budget. The main item of capital expenditure by this Ministry for the period under review was the construction of the new Golden Age Home which was completed in 1984-85.

As in the case of other Ministries already discussed, the services described above were also negatively affected due to the overall situation of the national budget. For the selected services of this Ministry, itemized in Table 6, the recurrent expenditure moved from \$16.6m in 1981-82 to \$25.0m in 1984-85, an increase of 50.6%. However, calculated in constant 1981-82 dollars, the actual expenditure for 1984-85 translates to \$17.7m or an increase of 6.6% over the 1981-82 amount. It should be noted that the vast increase in estimated expenditure for 1985-86 in the category "Public Assistance Services" for this Ministry (see Table 5) is associated with the expanded programme of the Food Security Plan.

It has been shown that there was no significant expansion of this Ministry's Budget between 1981 and 1985 and in fact the services provided for the population have been affected in two ways:

- 1) Services that are generally available to certain groups in the population, e.g., the aged, have been reduced.
- 2). Services which benefit the economically deprived, e.g., persons dislocated through loss of employment, have been expanded. Table 20 provides data on the trends of increase or decrease in service provision for some of the schemes previously described.

TABLE 20

No. of Beneficiaries of Selected Social Welfare
Services 1981-1985

Type of Service	1981	1982	1983	1984	1985
1. National Insurance Scheme	34781	38355	40902	43811	45996
2. Food Aid Programme (Food Security Plan)	-	-	-	242,000	353,921
3. Poor Relief (Indoor & Outdoor)	20,635	21,355	20,920	19,813	19,555
4. Old Age and Incapacity Allowance	n.a	32,653	34,329	32,526	30,223
5. Rehabilitation Grants (No. of families)	n.a	n.a	890	515	337
6. Senior Citizens Feeding Programme (No. of Meals)	n.a.	n.a	72,513	79,392	69,348

Source: Economic and Social Survey, Jamaica 1985 -
Planning Institute of Jamaica.

Data in Table 20 show that the number of persons applying for benefits from the National Insurance Scheme has increased by 6.4%, from 34,781 persons in 1981 to 45,996 in 1985. The expansion of the Food Aid Programme has also allowed for increased number of beneficiaries between 1984 and 1985. A total of 242,000 elderly, poor and needy persons, pregnant and lactating mothers and young children benefitted in 1984 compared with 353,921 in 1986. When school age children are included into this programme the increased assistance levels will be even more notable. While the two abovementioned schemes have expanded, other programmes have contracted. Some of the long

standing programmes for the need of the population have been cut back thereby reducing the number of beneficiaries. Included among this latter category are schemes such as: Poor Relief Assistance, Old Age and Incapacity Allowance, Rehabilitation Grants and Senior Citizens Feeding Programme (see Table 20).

One conclusion that can justly be drawn from the trends discussed above, is that the increase in the number of persons applying for National Insurance benefits and the increase in the number of persons requiring food assistance between 1981 and 1985, reflect the developments in the national economy for the same period. Staff retrenchment and lay-offs in both public and private sectors have increased the ranks of the unemployed who therefore need to rely on National Insurance (NIS) payments and Food Aid to survive. The contraction of the other programmes follow logically with the necessity to shift some funds to those schemes where demand for assistance is most urgent.

The Status of Women as Beneficiaries of Services Provided Through Ministry of Social Security:

In the absence of disaggregated data for males and females benefiting from some of the Ministry's programmes described, it can be reasonably assumed that equitability exists in the opportunity of men and women in the population benefit from such programmes as the National Insurance Scheme, Rehabilitation Grants and Poor Relief assistance. By design the Food Aid Programme is of benefit to more females and males. Aid is received directly by women in their capacity of pregnant and lactating mothers, and indirectly in their capacity of food providers for children and other members of the family.

Many of the island's private social welfare organizations seek to assist needy families through day care and health services. It can be affirmed that because of their unique role of mother and primary care giver of children, women are the principal beneficiaries of such services. In many instances, the mother is also the head of her household and therefore benefits from assistance programmes on an equal basis with male household heads. Table 21 presents disaggregated data for males and females receiving old age and incapacity allowance in Jamaica between 1982 and 1985. The table shows that women outnumber men two to one as recipients of this benefit for all years tabled. Although this situation favours women, it is difficult to take comfort in this fact as there is indeed the implication that there are many more females than males among the country's senior citizens who are in a destitute condition and requiring public assistance (even allowing for the overall higher proportion of females to males in the population).

TABLE 21

Persons Receiving Old Age and Incapacity Allowance
in Jamaica 1982-1985

Year	Male	Female	Total
1982	10,699	21,954	32,653
1983	10,742	23,587	34,329
1984	10,176	22,350	32,526
1985	10,107	20,116	30,223

Source: Economic and Social Survey, Jamaica, 1985.

Planning Institute of Jamaica.

The Ministry of Justice

The services of this Ministry which directly benefit the population include those of the Prisons, the Courts inclusive of the Family Court, and the attendance Centre. Prisons or Adult Correctional Centres benefit the population as far as they provide protection against dangerous criminals by their incarceration. Prisons in Jamaica were recently renamed Adult Correctional Centres, reflecting a new emphasis on the rehabilitation of inmates. As such, prisoners themselves benefit from more educational and vocational training programmes and income generating projects aimed at facilitating their re-entry into society at the end of their prison term. Males account for the majority of inmates at the Adult Correctional Centres and also outnumber females in committing criminal offences which are brought before the Courts. In 1984 a total of 21,998 males appeared before the Courts for a variety of criminal offences, compared with a total of 3,478 females. In 1985, new inmates admitted to the correctional centres numbered 2,890 males compared to 117 females.⁽¹⁾

The Courts which comprise the Resident Magistrate Court, the Revenue Court and the Supreme Court provide a valuable service to the population as they seek to protect the rights and privileges of males and females in various circumstances and events or occurrences where justice is questionable. The Family Court was established in 1978 as a special institution to deal solely with family affairs e.g., probation, child care, adoption, public assistance, marriage, family counselling and legal aid.

The Attendance Centre is a support arm of the Family Court. It serves delinquent children in the age group 14-17 years through a non-residential programme designed to a) upgrade their academic levels, b) develop these

(1) Source: Economic and Social Survey, Jamaica 1984 and 1985 editions.
Planning Institute of Jamaica.

children's aptitude and equip them with skills to earn a living, c) provide a counselling service to parents and children.

The recurrent budget of the Ministry of Justice supports the services described above. Capital expenditure for the period 1983-1985 emphasized the repair and refurbishing of Court Houses, Adult Correctional Centres and Approved Schools. The overall level of expenditures for the selected items of this Ministry's budget (Table 5) achieved only a marginal increase between budget years 1981-82 and 1984-85. The amount of \$26.6m for 1981-82 increased by 45.1% to \$38.6m for 1984-85. The real increase measured in constant 1981-82 dollars is a marginal 3.0% (see Table 6), which suggests that in spite of inflation there was for the period 1981-85, insufficient budgetary input to improve or at least maintain the services at satisfactory levels. Evidence of this is the deterioration in the physical condition of many of the country's Court Houses and Adult Correctional Centres. Capital expenditure inputs since 1983 have started to make an impact on the problem but much still remains to be done before these facilities can be considered to be in satisfactory condition.

The Family Court offers a very vital service especially for women. It is here that hundreds of females who are also heads of household are able to seek solutions to problems of child maintenance and myriad other difficulties that affect them and their families. However, only two such institutions exist in Jamaica and these are overloaded with family related cases. Unfortunately, because budget allocations for these institutions have not been adequate, the much needed services have had to be severely curtailed. The two existing Family Courts have reported increased usage and demand per number of cases presenting annually. Yet, because of staff shortages, the Court has had to reduce the services provided in some areas of its operation viz, the Children's Services and Child Abuse Sections.

Regarding the status of women as beneficiaries of the services described, the Family Court and Attendance Centres cater to the needs of more of the country's women than men. This is so because it is principally women who need support in claiming such rights as child maintenance, paternity etc. The deterioration and reduced levels of services provided by the Family Court are certainly not in the interest of the growing number of women who are claiming assistance from this institution.

Ministry of the Public Service:

The Ministry of the Public Service is primarily responsible for the organization, management and supervision of the Central government machinery. It deals with matters concerning Central Government staff relations and conditions of service, including Pay and Benefits, Training and Manpower Development. Direct benefits are received by the population mainly through the Human Resources Development programmes and pension schemes for present and past government employees respectively.

The Ministry's pension schemes (recurrent budget item in Table 5) provide for the payment of retiring benefits to public officers and teachers who retire in pensionable circumstances. There is also a scheme known as Widow/Widowers and Orphans' Pension which allows for payment of pensions to the families of Civil Servants who fall in the above categories.

In the area of Human Resources Development, the budget finances several scholarships from which public officers can benefit. This provision meets the cost of In-Service training and educational development of public sector personnel at all levels and also accounts for scholarships and fellowships at Institutions of higher learning which facilitate professional development at overseas institutions. The Administrative Staff College was

was established in 1978 with the aim of strengthening administrative and management skills of senior and executive public sector managers to high levels of leadership. A Language Training Centre which was established in 1974-75 offers courses in Spanish, French and German.

The Ministry's budget expenditure increased from \$19.5m in 1981/82 to \$38m in 1984/85, reflecting a 94.8% change. In constant 1981/82 \$m, the change is more modest as the 1984/85 allocation translates into \$27m or 38.5% of actual increase over 1981/82. Although this puts the Ministry in a slightly more favourable position than several others, it must be noted that the increases primarily reflect increased payments to pensioners which was effected during this period. Compensation for pensioners has been traditionally very inadequate and even with the increases several pensioners have found it difficult to survive on the amounts they receive. The majority of pensioners are women as they represent a large proportion of the country's teachers and nurses.

More opportunities for training of public sector workers have been provided through the Ministry's training schemes. The types of training schemes and distribution awards to men and women are shown in Table 22.

TABLE 22

Public Sector Training Schemes - Awards
To Males and Females 1981-82 and 1983-84

Scholarship Award Scheme	1981-82			1983-84		
	Males	Females	Total	Males	Females	Total
1. Overseas Scholarships to Caribbean Countries	92	81	173	70	144	184
2. Overseas Scholarships to U.S.A.	33	21	54	10	14	24
3. Overseas Scholarships to U.K.	16	7	23	12	6	18
4. Individual Sponsorship by various Technical Assistance Agencies and Foreign Govts.	74	31	105	134	140	274
5. Short Courses at Overseas locations	146	100	246	26	12	38
6. Local In-Service Training for Civil Servants	-	-	-	657	1183	1840
	361	240	601	909	1469	2378

The training scheme covers a vast number of courses in a wide variety of professional and technical skill areas inclusive of Management and Human Resources Development Training.

A comparison ^{of} data for 1981-82 and 1983-84 (Table 22) indicate a trend in favour of increasing awards to women. Whereas in 1981-82 more men received awards than women in all categories (361 males to 240 females), the trend was markedly reversed in 1983-84. Females outnumbered males in all but two categories in the allocation of awards for training. This could be due to

the fact that more awards were given in the areas of health services and teacher training and women comprise the majority of those sectors. More hopefully it might reflect a greater recognition and support of women in the development process, by the government. It must be noted also that the drastic reduction in awards for short courses overseas, between 1981/82 and 1983/84, is the result of the availability of more short-term local courses provided by the Ministry's staff administration college and other local training institutions.

The Ministries of Agriculture, Construction, and Labour

Because of the small number of selected budget items these four Ministries will be considered jointly for the description of services directly benefitting the population. With reference to Table 5, the recurrent budget of the Ministry of Agriculture supports the operation of 5 training centres. These centres offer training for farmers and Agricultural Extension Officers in modern scientific agricultural practices. They also offer Home Economics training to the wives of farmers. Capital expenditure projects embarked on during the period 1981-1985 focussed on:

- 1) Strengthening of the Rural Farm Family: a three year project financed by the Government of Jamaica, Government of Norway and the FAO. The objectives of the project were; a) to assist the rural population, in particular women, to acquire skills necessary to increase production and make the best use of agricultural products, thus increasing their income and standard of living, and b) to make rural women more knowledgeable on Family Planning, Family Health and nutrition.

- 2) Marketing development: concerned with completing the construction of 10 rural markets across the island to serve vendors in their marketing of

domestically produced agricultural commodities. Although no specific data is available for the proportion of male to female market vendors, observations by market clientele readily attest to the predominance of females in this area of activity.

3) Agricultural Marketing Development: A six-year project aimed at improvement of overall marketing services as they influence the living standards of farmers and consumers.

The increased levels of expenditure in agriculture (see Table 6) for selected items are consistent with the Government's thrust to extend and expand the agricultural sector of the economy as a means of boosting foreign exchange earnings and satisfying local demand for food supplies. Rural women have benefitted particularly from efforts to train special groups in simple food technology to support the production aspects of agriculture. The improvement of markets must also be regarded as being of particular benefit to women since they constitute the majority of market vendors in the country.

The budget items presented in Table 5 for the Ministry of Construction relate to capital expenditure inputs only for the period 1983-1986. The main area of direct benefits from this Ministry to the population is the construction of low cost government housing units especially for low-income groups and the promotion and regulation of private housing development to meet housing needs at other levels. The table shows that capital expenditure on housing development decreased from \$25.506 to \$17.4 between 1983 and 1986. The reduction in real terms is even greater when consideration is given to the rates of inflation and their effects on housing costs for the same period. Reduced public sector expenditure on housing has been evidenced in recent years in the absence of construction of new low-income housing projects resulting in a severe shortage

of accomodation for persons in the lower socio-economic bracket. Again as such a high percentage of household heads in this social category are females, the hardships faced in not being able to secure affordable accomodation for rental or purchase have seriously increased the burden of such women in the society.

The Ministry of Labour engages in the administration of manpower services in the island. Men and women who make up the labour force may derive benefit from the Ministry's Local Employment Services and the Overseas Employment and Migration Services. The Local Employment Service seeks to facilitate the guidance of young people into suitable jobs through training and proper placing. The unit carries out the functions of registering and classifying persons seeking employment; promoting job opportunities, skill-testing workers, placing workers in jobs, administering unemployment benefits and maintaining a youth employment service. The Overseas Employment Service assists in providing contractual employment for Jamaicans overseas and also regulates the conditions under which Jamaicans work during these contracts. Efforts are made to ensure as far as practicable that maintenance of the families of these workers is fulfilled. Men benefit significantly more than women from overseas employment as the greatest need by the participating countries is for male farm workers. Between 1983 and 1986, the allocations for Local Employment decreased from \$660.0 to \$535.5 whereas allocations for overseas employment increased moderately from \$1,371.4 to \$1,794.5 for the same period. It is possible that local contraction of the labour force contributed to the increased expenditure on the Overseas Employment Programme.

PART 4

THE PARTICIPATION OF WOMEN IN THE LABOUR FORCE

As mentioned previously in this study, the United Nations Decade for Women realized important gains for women in the area of employment. Although theoretically women have always had the same rights as men to seek and obtain employment, before the decade, discrimination against them existed with regards to equal pay for equal work. Women consistently received lower rates of compensation for similar work done by men. Women had few rights in issues such as maternity leave with pay, as frequently maternity leave was tantamount to permanent dismissal from the job without any form of compensation. Additionally, in the absence of a minimum wage structure, a vast number of unskilled females in certain jobs, e.g., household helpers, were seriously exploited, receiving for wages very paltry sums, determined entirely at the employers discretion.

In 1975, the Equal Pay for Men and Women Act and the Minimum Wage Order came into effect as measures to redress the existing inequities of the system. These were followed in 1979 by the Maternity Leave Act which now safeguards the position of women when pregnancy and related confinement interrupt employment. All employed women are now entitled to at least two months maternity leave with pay and guarantee that they can return to their job at the end of the leave. In spite of these advances, a more in-depth examination of women's overall participation in the labour force reveals that women are still largely a disadvantaged group. They hold a relatively small proportion of higher paying skilled jobs compared to men and indeed the

proportion of young women in Jamaica who are unskilled and untrained is frighteningly high. As a result, women occupy the majority of jobs requiring little or no skill and therefore the average wage structure for women is noticeably low compared to that for men.

In general, unemployment of both males and females in Jamaica is a chronic problem and has been so for many years. Overall unemployment rates for the period 1980-85 have ranged from a low of 25% to a high of 27.3% (See Table 23).

TABLE 23

Unemployment Rates by Sex 1980-1985

Year	Overall Rate	Female	Male	Ratio (Male/Female)
1980	27.3	39.6	16.3	2.9
1981	25.9	38.9	14.4	2.7
1982	27.6	40.6	16.2	2.5
1983	26.4	38.4	16.2	2.4
1984	25.5	36.6	15.8	2.3
1985	25.0	36.0	15.6	2.3

Source: The Impact of the Recession and Adjustment Policies on Poor Urban Women in Jamaica - Omar Davies 1986 (UNICEF Study).

Table 23 clearly demonstrates the situation of women with regards to their non-participation in the work force. Unemployment rates for women are twice as high as for men throughout all the years 1980-1985. Whereas the rates for women fluctuated between 40.6% and 36.0%, the rates for men

remained almost constant, ranging between 14.4% and 16.3%. Although the Table reflects a 2% decrease in overall unemployment rate for 1985 compared with 1980, it is not to be interpreted as increased employment of women during this period, in keeping with the reduction of their unemployment rate from 39.6 in 1980 to 36.0% in 1985. It will be shown further in this section that the total labour force and in particular the female component has in fact been contracting gradually as "several" adult women 25 and over are not accounted for in deriving work force statistics since they are no longer interested in entering the job market. This development is no doubt the result of the frustration and futility of the job-seeking exercise in the depressed state of the country's economy.

An analysis of Table 24 which presents unemployment data disaggregated by age for females 14 to 65 years indicates even greater cause for concern about the status of young females in Jamaica.

Table 24 shows that female unemployment is generally undesirably high, but unemployment among the youngest age groups entering the work force, 14-24 years, has reached crisis proportions.

In the 14-19 age group unemployment over the five years has ranged between 73.8% and 81.4% (approximately 4 out of 5). In the 20-24 age group unemployment rates for the same period ranged between 58.2% and 63.9%. These figures confirm the severity of the problem as the persistency over time of the high percentage of unemployed in the 14-19 group in particular leads to an interpretation that many of these young females have never been employed since leaving school.

TABLE 24

Female Unemployment by Age Groups: 1980-1985

(Percentages)

YEAR	OVERALL	AGE GROUPS						
		14-19	20-24	25-34	35-44	45-55	55-64	65+
1980	A 39.9	80.5	58.8	38.6	29.4	24.7	17.7	15.6
	N 38.9	81.4	59.3	36.4	27.9	22.3	13.0	17.1
1981	A 40.0	78.4	60.1	38.2	13.7	22.4	16.6	16.7
	N 38.7	81.4	61.1	35.6	23.6	19.2	17.9	12.9
1982	A 40.3	81.4	63.9	38.9	25.1	18.5	18.2	12.7
	O 40.9	80.0	61.8	39.5	28.2	19.0	17.6	15.1
1983	A 37.7	73.8	56.9	36.6	25.8	20.4	19.8	14.6
	O 39.0	76.6	58.2	36.8	25.7	21.1	17.6	15.6
1984	A 36.6	78.8	58.8	36.5	23.1	16.2	15.6	9.4
	O 36.5	76.4	58.2	35.3	23.0	19.6	12.9	11.3
1985	A 35.3	73.9	58.7	33.1	20.7	15.1	14.7	7.9
	O 36.6	78.6	58.6	35.3	22.7	14.4	11.9	12.1

A: April Survey O: October Survey N: November Survey

Source: The Impact of the Recession and Adjustment Policies on Poor Urban Women in Jamaica - Omar Davies, 1986. (UNICEF Study).

In general, unemployment usually poses a greater problem for rural women than for those in urban areas. Urban is defined as the Kingston and St. Andrew area while rural refers to the other 12 parishes. Since 1985 there has been a developing trend of higher unemployment rates among urban women. The Labour Force Survey of 1985 shows that at October 1983, unemployment among rural women stood at 40.4% and this rate declined to 36.1% at October 1985.

Among urban women the reverse situation is true, whereas at October 1983 the unemployment rate for this latter group was 36.1%, at October 1985 it increased to 37.8%. Two contributing factors have been cited for the development - one is the contraction of the rural female labour force as fewer rural women continue to actively seek employment, discouraged by the sheer futility of the exercise. The second factor is the growth in absolute numbers of urban females in 1985 compared with 1984.

Another area of concern, given the generally high unemployment rates among women, must be the effects of unemployment on the families of female household heads. It will be seen from the discussion of the situation of women in the employed labour force that disparities exist in the ratio of female to male household heads in the labour force.

The labour force in 1985 showed a decline from the size attained in the previous year (from 1,045,800 in 1984 to 1,042,000 in 1985). The average employment level increased from 778,900 in 1984 to 781,700 in 1985. These developments combined to marginally reduce the unemployment rate from 25.5% in 1984 to 25% in 1985. Tables 25 (a) and 25 (b) provide data on the employed labour force by age and sex and by household status and sex for the period 1983-1985.

TABLE 25a

Employment by Age and Sex, 1983-1985

(000)

SEX AND AGE	1983		1984		1985	
	April	October	April	October	April	October
MEN	449.1	463.5	471.2	464.8	476.6	473.3
Youth (14-24 years)	106.6	114.2	112.7	114.3	121.0	121.3
Adult (25 years and over)	342.5	349.3	358.5	350.5	355.6	352.0
25-34 years	109.3	110.3	115.8	114.9	121.4	116.8
35-44 years	77.0	77.9	79.8	78.8	77.6	77.9
45 years and over	156.2	161.1	162.9	156.8	156.6	157.3
WOMEN	285.2	286.9	307.2	314.7	305.7	307.7
Youth (14-24 years)	50.9	51.3	48.8	49.9	53.5	51.5
Adult (25 years and over)	234.3	235.6	258.4	264.8	252.2	256.2
25-34 years	72.5	72.9	76.6	88.4	79.7	80.2
35-44 years	59.0	59.4	64.0	71.0	62.9	62.0
45 years and over	102.8	103.3	117.8	105.4	109.6	114.0

Source: The Labour Force, 1985. Statistical Institute of Jamaica.

TABLE 25b

Employed Labour Force by Household Status and Sex,
1983-1985

('000)

Relationship to Head of Household	1983		1984		1985	
	April	October	April	October	April	October
MALE						
Total	449.1	463.5	471.2	464.8	476.6	473.3
Head	271.2	278.7	278.3	272.0	283.4	275.9
Spouse	34.3	34.2	34.3	31.8	26.6	27.2
Child	86.7	95.4	103.4	103.4	107.8	112.0
Other Relative	42.6	43.6	44.4	44.9	48.0	49.3
Other	14.3	11.6	10.8	12.7	10.8	8.9
FEMALE						
Total	285.2	286.9	307.2	314.7	305.7	307.7
Head	114.3	114.0	124.9	120.2	118.0	116.9
Spouse	93.9	96.7	105.7	107.9	105.4	106.7
Child	39.4	40.9	41.9	49.2	48.6	49.1
Other Relative	21.8	22.6	21.6	24.7	22.1	29.6
Other	15.8	12.7	13.1	12.7	11.6	5.4

Source: Economic and Social Survey, Jamaica 1984.
Planning Institute of Jamaica.

Although in the total population of Jamaica females outnumber males by 1%, (the ratio is higher for the 15 and over age group) this distribution is not reflected in the employed labour force. Table 25a shows that at October 1985, 473,000 males were employed compared to 307,700 females in an employed labour force which averaged 781,700 for 1985. Although this represents an improvement over 1983 regarding the situation of female employment, the levels achieved in 1984 have again decreased for 1985. This may be attributed to the fact that adult women 25 years and over experienced a decline of 3.2% in their employment level for 1985 compared with 1984 (see Table 25a). The decline is possibly related to the contraction in employment in public administration and other service sectors, e.g., teaching, nursing, which are traditionally female dominated. Women who are household heads continue to be at a disadvantage in employment rates, when compared with men. From Table 25b, it is observed that 392,800 household heads were employed at October 1985. Of this number, 116,900 or 29.8 percent were women, showing a decrease in the percentage for 1984. Male household heads had an employment rate of 92.3% compared with 78.3 percent for female household heads. The assumption here is that in a population where so many households are headed by women, the relatively low rate of employment in this group certainly places many families in a very precarious position even in terms of meeting such basic needs as food, shelter and clothing. What is even more worrisome is the fact that among employed female household heads who are largely from the lower socio-economic group the wages received are so inadequate that they may not be significantly better off than their unemployed counterparts.

As public sector employees, women fare no better than their overall status as the deprived of the labour force. In addition, males vastly outnumber females in the higher salaried professional and managerial job

categories. Table 26 provides data on employees in the Central and Local Government by occupation and by sex for 1984. Data is based on a survey which was carried out by the Planning Institute of Jamaica entitled "The Establishment Survey of Manpower Utilization and Training". The survey involved a census of public sector establishments including Central and Local Government Departments and Statutory Bodies. Figures given in Table 26 do not include Statutory Bodies.

TABLE 26

Employees in Central and Local Government
By Occupation and by Sex 1984:

Occupation	Male	Female	Total
1. Professional	22,346	7,352	29,698
2. Administrative-Executive Managerial	4,049	1,722	5,771
3. Clerical and Sales	3,815	8,137	11,952
4. Service (Maintenance)	11,629	5,965	17,594
5. Unskilled (Manual)	3,102	310	3,412
6. Other (Craftsmen etc.)	4,909	119	5,028
7. SUB-TOTALS	49,850	23,605	73,455

Source: 1984 Establishment Survey - Planning Institute of Jamaica.

From the table it is seen that in the professional category, males outnumber females in a ratio of approximately 3.1 (22,346 males vs 7,352 females). A similar situation obtains in the Administrative, Executive and Managerial category which show 4,049 males to 1,722 females. Males also outnumber female by high margins in the Service (Maintenance), Unskilled (manual) and other categories. Females outnumber males in one category only - that of Clerical and Sales. In summary, of the 73,455 government employees, 23,605 (about one-third) are females and 49,850 are males. This suggests that the Government Service which is the largest and presumably the most stable single employer of persons in the population, fails to give recognition to the particular plight of women with regards to alleviating unemployment. It is instructive that except for one category, even the unskilled job categories favour the employment of more males than females. It is not surprising therefore that the problem of overall female unemployment, previously discussed in this section, is as large as it presently is.

The majority of employed females in the labour force faces the problem of low wages, which is consistent with the fact that there is a predominance of women in the lower paying jobs of the Service sectors, e.g., teaching, nursing etc.). Although a small proportion of women do enjoy the benefits of high status and high salaried managerial jobs, the average national earnings for women is very much lower than for men. Table 27 provides information on average weekly earnings for males and females for the years 1983, 1984, 1985 in current dollars and in 1975 dollars.

TABLE 27

Average Weekly Earnings, in Current Jamaican Dollars and 1975 Dollars, by Sex, 1983-1985

Average Weekly Earnings	YEARS		
	1983	1984	1985
<u>MALE</u>			
In Current Dollars	72.3	86.9	86.9
In 1975 Dollars	18.7	17.6	14.0
<u>FEMALE</u>			
In Current Dollars	49.2	65.4	68.3
In 1975 Dollars	12.7	13.2	11.0

Source: Economic and Social Survey, Jamaica, 1985
Planning Institute of Jamaica.

In spite of the fact that the wages earned by females increased by a larger percentage than wages earned by males between 1983 and 1985, females are still much below the national average weekly earnings received by males. In summary, it can be stated that females are indeed at a serious disadvantage not only in prevailing high national levels of unemployment, but also with respect to inadequate training for skilled jobs and the low wage levels which presently exist in all areas of employment where women predominate. It must also be noted that, in addition to those problems, women face others such as poor working conditions and day to day frustrations of duty as experienced in such professions as teaching and nursing.

SUMMARY OF FINDINGS AND CONCLUSIONS

Summary

The United Nations Decade for Women realized several gains in improving the status of women in Jamaica with respect to their legal rights and privileges in many areas of social and family life. The activities of the Decade increased awareness and concern for the special difficulties faced by the women of the population and led to some tangible efforts to provide them with support services to alleviate their problems. Examples of these national efforts are seen in the establishment of institutions like, the Women's Bureau, the Family Court, the Women's Crisis Centre and the Women's Centres for Pregnant Teenagers.

In spite of the achievements of the Decade, several areas relating to women's legal rights, employment and access to a broader-based education and training are yet to be addressed. There is need for reform to adjust the imbalances of a system which still denies females an equal share of employment in the Labour Force, and which limit their educational and career choices to traditionally female vocations which generally represent the lower paying income earning jobs.

Females form 51% of Jamaica's population, but this proportion is not reflected in their contribution to the national development process as many able females through unemployment are excluded from participation. It is not surprising therefore that an increasing number of women in the 10-29 age group are opting to migrate overseas in search of better fortunes.

Given this situation the fact that 39% of Jamaican women are heads of households, indicates an urgent need to address the problem of unemployment

among women and moreso among the sizeable proportion of those who have no stable partner to provide them and their off-springs with the financial and emotional support needed. It is vital that the government provides through the national budget, a range of services that benefit and are accessible to the deprived groups of the population. The extent to which women (who qualify as the deprived of the deprived) benefit from various social services provided through public sector expenditure constitutes the major focus of the remaining sections of the study.

Education services receive the second largest allocation of the national budget. Increasing constraints on the budget have affected expenditure on education in recent years and the negative results have been a noticeable deterioration in both the quality and the extent of coverage of these services to the population. Education is free to the population from infant through secondary levels of education. At the tertiary level, education was free up until October 1986 when a cess on tuition payable by students was introduced. In theory, males and females have equal access to the full education system. Although this is true for Infant and Primary levels, at the secondary level evidence exists that there is a sex-based bias in allocation of government awards for entry to the various high schools, as demonstrated in the results of the three secondary level entry examinations, viz, the Common Entrance Exams, the Technical High Schools Exams and the Grade Nine Achievement Test Exams. Discrimination also exists in more subtle forms in the curriculum and choice of subjects among females in secondary, tertiary level educational/vocational programmes. Subject choices among girls, based on what is offered in such institutions as the New Secondary Schools, the Vocational Training Schools and the HEART programme, show a strong tendency towards traditionally female areas of activity. Very little encouragement is provided overall for girls to enter non-traditional areas, as attitudes of teachers and

the society at large perpetuate the sex-role biases that influence career choices. Other services e.g., student support, school feeding etc. are administered without bias. More women benefit from Teacher Training as they dominate the profession. The more informal programmes such as JAMAL show higher enrolment of males, but a higher percentage of females graduating.

The Ministry of Health has suffered a decline in levels of expenditure from 6.9% of the national budget in 1982 to 5.9% in 1985. The Ministry has sought to improve the level of service delivery to the population by placing emphasis on decentralization of the secondary Health Care system throughout the island and the expansion of Primary Health Care services. This strategy has been fairly successful in spite of reduced levels of expenditure on health and has helped to maintain a relatively high standard of health care in Jamaica as national health indices suggest.

Women, as the principal users and providers of health care services, are the chief beneficiaries of expenditures on health. The focus in women's health however is still largely related to their child bearing functions and maternal role, and little is offered in consideration of the woman herself independent of those functions. Women have improved their own status and health through greater use of Primary Health Care Services as observed in the increased percentages of women benefitting from family planning and ante, intra and post natal care. More needs to be done however to arrest the disturbing trend of increase in the rate of maternal mortality. Similarly, efforts need to be made to increase the accessibility of the simple but important screening tests for anaemia and cervical cancer which threaten the health of many Jamaican women. In general, women deserve more consideration in the reassessment and reassignment of their wide ranging responsibilities.

These often place them under stress as is manifest in the higher proportions of women compared to men who suffer from stress related chronic illnesses and conditions stemming from personal neglect, e.g., obesity.

The Social Welfare Services provided through the budgets of various Ministries, are of particular benefit to women, youth and children. As for Education and Health, these services have been negatively affected by the decreasing levels of expenditure on social services. The Children's Services Division of the Ministry of Youth has drastically reduced the number of beneficiaries of Day Care Centres, Children's Homes, and Child Care and Adoption Services because of programme cuts. Other services funded through this Ministry have also been scaled down. The Women's Bureau however, through community support efforts, has been able to maintain its level of service to women in some areas and to actually increase services in others e.g., expansion of the Women's Centres Project for Pregnant Teenagers. The Government has secured special funding through international agencies for the financing of special projects of benefit to women e.g., 1) Projects for Women in Rural Areas, 2) Urban Upgrading Project, 3) Basic Services for Children Project, 4) Family Life and Family Planning Project.

The Ministry of Social Security allocates funds from its budget for a variety of social welfare programmes spanning the age range of infancy to the aged and incapacitated. These include the National Insurance Scheme and such Public Assistance Services as the Rehabilitation Grants, Old Age and Incapacity Allowance, Poor Relief and the Food Aid Plan (expanded and renamed Food Security Plan since 1985). Women benefit significantly from the above services and especially from their inclusion in the Food Security Plan. Although twice the number of women as men benefit from the Old Age and Incapacity Allowance, it is a sad reminder that women are indeed the deprived among the

deprived. The relative increase in numbers of persons receiving National Insurance Benefits, at a time when other services have shown signs of reduction, could be interpreted as more persons becoming unemployed and therefore needing NIS assistance.

Besides the services provided to the population through the Courts and the Adult Correctional Centres, the Family Court is the most valuable contribution of the Ministry of Justice to advancing the cause of women in Jamaica. This special Court deals solely with family affairs, e.g., probation, child care, adoption, public assistance, marriage, family counselling and legal aid. The Attendance Centre is a support area of the Family Court and offers specialized services to children who have been before the Court and who can benefit from non-residential treatment. Although the attrition of staff has forced the curtailment of some of the services offered by the Family Court, all indications are that there is greater demand for the services based on the increasing numbers of cases coming before the Court for attention.

The Ministry of the Public Service is concerned with the development and deployment of manpower within Central and Local Government. This is done principally through the training and placement of personnel in a wide range of professional and technical areas. It appears from available data that women have improved their position as beneficiaries of scholarships and awards received through the Ministry's training schemes. Whereas in 1981-82 more men received awards than women for all categories, in 1983-84, the situation was reversed as several more women than men were recipients of awards. Although this change could be linked with the greater number of awards in 1983-84 to the teaching and nursing professions - traditionally female dominated areas - it is nonetheless a positive movement in recognition of women's role in the national development process.

The Ministry of Agriculture has emphasized the development of markets and the marketing of agricultural produce islandwide. The efforts made to complete 10 rural markets to serve vendors is a positive development for all market vendors but moreso for the female vendors who outnumber male vendors in significant proportions. Funds have also been allocated to strengthening of rural farm families through training of farmers in improved agricultural skills and training of farmers wives in food preservation techniques.

The Ministry of Construction has the responsibility to provide low-income housing for the less privileged of the population. The Ministry has fared poorly in making available new units for those in need. This has resulted from decreasing budget allocations to the Ministry and has given rise to a shortage of housing units especially for low income groups. This has serious implications for female household heads who presently face severe hardships in finding accomodation for their families as their generally low wages preclude them from obtaining any but the least expensive units available on the market - and these are in very short supply.

Men benefit more than women from the employment services provided through the Ministry of Labour. The contraction of the labour force has reduced activities of the Ministry's Local Employment Service. On the other hand, the Overseas Employment Service registered increased budget expenditure possibly reflecting some expansion of the benefits from overseas employment. Male farm workers constitute the largest number of persons involved in this type of programme.

With regards to women's participation in the labour force, an analysis of available data points to disproportionate representation of women. Although the high rate of unemployment (25.0) in Jamaica in 1985 is cause for concern, the problem is far more serious among women, especially those

in the 14-19 age group. The overall female unemployment rate in 1985 was 36.0 compared to 15.6 among males. The age specific unemployment rate for the 14-19 age group was 78.6 at October 1985. The situation regarding unemployment is generally worse for rural women but an increase in the overall unemployment rate for urban women was noted in 1985.

With regard to employment, disparities exist in the distribution of males and females in the overall employed labour force and in the Central and Local Government sector in particular. Women are under-represented in the employed labour force. Of the total employed household heads, women comprise only 29.8%.

Within Central and Local Government, the difference between the number of female employees and male employees is overwhelming. This is particularly so in the professional and managerial categories where men also outnumber women even in the unskilled job categories. In addition to the problem of unemployment and underemployment women are also faced with poor working conditions in some female dominated occupations (teaching, nursing) and generally low-wage levels.

Conclusions

This study has sought to provide up-to-date information on Public Sector Expenditure on a range of Social Services directly benefitting the population in general. It has also aimed to establish, through presentation of hard data, the current status of women as beneficiaries of the services described. It has been observed that although the Government through the national budget makes commendable efforts to provide a range of social programmes to meet the needs of the majority of the country's population, the deteriorating state of the economy has forced the curtailment or cessation of some of these services because of financial constraints.

These constraints have been caused by a), the increasing debt servicing requirements resulting from devaluation of the Jamaican dollar and b), the Government's efforts to reduce the national budget deficit through curtailment of recurrent and capital expenditure.

A major problem of Social Services is that in times of financial crises, they are the areas of the budget that are hit most heavily. Hence, the overall negative effect of such crises is usually deterioration of the already limited social programmes, and inevitable reduction in the number of beneficiaries as a consequence of reduced ability to deliver the services. The greatest impact is almost always felt by women, especially the young women. Deterioration in the general economy poses serious problems for poor women. Generally, they are the first to be laid off when staff attrition occurs. Their labour which is usually unskilled is easy to forgo in the production process. Women in Jamaica face the greatest difficulties in obtaining meaningful employment as so many of them are not trained in any specific career skills. Furthermore, many employers are still prejudiced with regard to employment of young females for fear of the consequences to the job of pregnancy and motherhood. Poor women who are household heads face the additional burden of providing for the family from meagre or non-existent resources with no male counterpart to provide assistance. The majority of these women who need to work must be content with inadequate returns for their labour as they are not equipped to attract better paying jobs.

Therefore, in difficult times more poor women are forced to compromise themselves as a method of survival. They enter into very unsatisfactory relationships with men motivated by the critical need to ensure their survival and that of their offsprings. They accept menial and often degrading tasks as long as the minimum wage is assured.

The dimensions of the problems of women in Jamaica but moreso of poor women, do not suggest any likelihood of satisfactory solutions in the immediate future. Meaningful employment opportunities and greater representation of females in the labour force is the only answer to improvement of the overall status of women in Jamaica. As the national budget allows little scope for providing opportunities through increased training and generation of more employment projects, institutions like the 807 Garment Manufacturing factories must be seen as providing necessary solutions to the problems in the short term - in spite of the existing controversies about conditions of work. It is far better to aim at improving the conditions than to reject in entirety a programme which provides much needed employment for several hundred Jamaican women.

In the long run, there will have to be a concerted drive to remove the limitations placed on women in the realization of their full educational and professional potentials. This will require the gradual elimination of sex-role influences which now direct the majority of women into career choices which make it difficult for them to compete with men for the more lucrative opportunities in the job market.

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