Social protection systems

in Latin America and the Caribbean

Haiti

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**Project Document** 

# Social protection systems in Latin America and the Caribbean: Haiti

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Economic Commission for Latin America and the Caribbean (ECLAC)

This document was prepared by Nathalie Lamaute-Brisson, consultant with the Social Development Division of the Economic Commission for Latin America and the Caribbean (ECLAC), and is part of a series of studies on "Social protection systems in Latin America and the Caribbean", edited by Simone Cecchini, Social Affairs Officer, and Claudia Robles, consultant with the same Division. The author thanks Randolph Gilbert for his comments. Milena Lavigne, consultant, provided editorial assistance. Heidi Ullmann provided valuable comments to the English version of the document.

The document was produced as part of the activities of the projects "Strengthening social protection" (ROA/149-7) and "Strengthening regional knowledge networks to promote the effective implementation of the United Nations development agenda and to assess progress" (ROA 161-7), financed by the United Nations Development Account.

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## Foreword

### Simone Cecchini Claudia Robles

This report is part of a series of national case studies aimed at disseminating knowledge on the current status of social protection systems in Latin American and Caribbean countries, and at discussing their main challenges in terms of realizing of the economic and social rights of the population and achieving key development goals, such as combating poverty and hunger.

Given that, in 2011, 174 million Latin Americans were living in poverty —73 million of which in extreme poverty— and that the region continues being characterized by an extremely unequal income distribution (ECLAC, 2012), the case studies place particular emphasis on the inclusion of the poor and vulnerable population into social protection systems, as well as on the distributional impact of social protection policies.

Social protection has emerged in recent years as a key concept which seeks to integrate a variety of measures for building fairer and more inclusive societies, and guaranteeing a minimum standard of living for all. While social protection can be geared to meeting the specific needs of certain population groups —including people living in poverty or extreme poverty and highly vulnerable groups such as indigenous peoples—, it must be available to all citizens. In particular, social protection is seen a fundamental mechanism for contributing to the full realization of the economic and social rights of the population, which are laid out in a series of national and international legal instruments, such as the United Nations' 1948 Universal Declaration of Human Rights or the 1966 International Covenant on Economic, Social and Cultural Rights (ICESCR). These normative instruments recognize the rights to social security, labour, the protection of adequate standards of living for individuals and families, as well as the enjoyment of greater physical and mental health and education.

The responsibility of guaranteeing such rights lies primarily with the State, which has to play a leading role in social protection —for it to be seen as a right and not a privilege—, in collaboration with three other major stakeholders: families, the market and social and community organizations. Albeit with some differences due to their history and degree of economic development, many Latin American and Caribbean countries are at now the forefront of developing countries' efforts to establish these guarantees, by implementing various types of transfers, including conditional cash transfer programmes

and social pensions, and expanding health protection. One of the key challenges that the countries of the region face, however, is integrating the various initiatives within social protection systems capable of coordinating the different programmes and State institutions responsible for designing, financing, implementing, regulating, monitoring and evaluating programmes, with a view to achieving positive impacts on living conditions (Cecchini and Martínez, 2011).

Social protection is central to social policy but is distinctive in terms of the social problems it addresses. Consequently, it does not cover all the areas of social policy, but rather it is one of its components, together with sectoral policies —such as health, education or housing— and social promotion policies —such as training, labour intermediation, promotion of production, financing and technical assistance to micro-and small enterprises. While sectoral policies are concerned with the delivery of social services that aim at enhancing human development, and promotion policies with capacity building for the improvement of people's autonomous income generation, social protection aims at providing a basic level of economic and social welfare to all members of society. In particular, social protection should ensure a level of welfare sufficient to maintain a minimum quality of life for people's development; facilitate access to social services; and secure decent work (Cecchini and Martínez, 2011).

Accordingly, the national case studies characterize two major components of social protection systems –non-contributory (traditionally known as "social assistance", which can include both universal and targeted measures) and contributory social protection (or "social security"). The case studies also discuss employment policies as well as social sectors such as education, health and housing, as their comprehension is needed to understand the challenges for people's access to those sectors in each country.

Furthermore, the case studies include a brief overview of socio-economic and development trends, with a particular focus on poverty and inequality. At this regard, we wish to note that the statistics presented in the case studies —be they on poverty, inequality, employment or social expenditure— do not necessarily correspond to official data validated by the Economic Commission for Latin America and the Caribbean (ECLAC).

## I. Introduction

The figure of the predatory State (Evans, 1992; Lundahl, 1992a; Fass, 1988; Trouillot, 1986), which extracts but does not invest or redistributes, and which is indifferent to the social needs of the population (Cadet, 1996), is a constant in social analyses of Haiti. Lundahl (1992b) thus focuses on the lack of protection from the State, also highlighting those "informal initiatives in a State without well-being" which contribute to organizing solidarity among families and among individuals.

However, it is necessary, firstly, to clarify what is meant by lack of protection, in order to elucidate its forms as well as the measures that counteract it or tend to create new areas of protection. Lack of protection can be thought of as the absence of mechanisms that allow facing social risks or ensuring the realization of social and economic rights. It arises from the exclusion of population groups —to varying degrees— from the provision of protection, be it in the form of goods, services, transfers, or through the regulatory mechanisms of provision itself. There is also a lack of protection when the existing mechanisms of protection are not adequate for a specific reality, or when services are of poor quality. Lack of protection also arises from the implementation of mechanisms that, instead of correcting existing inequalities, reinforce certain groups and weaken others in the short, medium or long term.

Secondly, in order to understand the lack of protection as well as the instances of protection, the historicity of the State in the social protection system must be considered (Théret, 1997). The social protection system is understood as the set of actors and relationships in charge of providing households and people the collective means to prevent, mitigate and overcome social risks and to access broader human development opportunities. The system involves the State, international organizations and bilateral cooperation institutions, non-profit organizations, businesses and families, both as recipients and providers of social protection.

The crucial question is thus the following: how does the Haitian State organize social protection for the population? That is, how does it relate with the other actors? Even if the State can assume the role of direct provider of social protection through specialized public institutions, it can also delegate that function. Delegation can be done with privatization policies or by transferring the responsibility of protection to families. Another type of delegation is transferring responsibilities to non-profit private organizations, including tacit *laissez-faire* agreements.

Historically, Haiti never had a social movement to significantly question the predatory State on the specific issue of social protection, neither from trade unions nor from socio-political movements.<sup>1</sup> The salary issue includes *primum vivere* and working conditions and both have paramount importance. However, in the context of growing wages and the emergence of a middle class, the first steps towards creating social assistance mechanisms were taken in the forties (Farman, 1947b; Department of Labour and Welfare of Haiti, 1967),<sup>2</sup> after more than half a century of social care through charity work by religious orders and women of middle or upper class (Mérat, 2011).

Created in the late sixties, public social security organizations (insurance and social assistance) have been weakly developed. After the dictatorship period (1986), new institutions and programmes were created. The creation of the social investment fund called the Economic and Social Assistance Fund (*Fond d'Assistance Economique et Social*-FAES) in 1990 stands out. Then, an extension and diversification of social protection mechanisms took place. Similarly, social promotion policies in education, health, food security, housing and employment have been developed.

The purpose of this document is to outline the situation of current public policies in social protection and promotion, acknowledging that the earthquake of 2010 exposed the structural weaknesses of Haiti's development model, creating a humanitarian emergency situation that still exists but that also gave the opportunity for innovations in public policies.

The analysis will be developed considering social and gender inequalities, including the issue of care as it has been shown that the linkage between women and care is a central issue both in gender relations —as a general institutional order— and in social protection systems in Latin America (Martínez Franzoni, 2008; Lamaute-Brisson, 2011).

<sup>&</sup>lt;sup>1</sup> The Duvalier dictatorship (1957-1986) left no space for the development of trade unions. Since 1986, the main demands have revolved around the level of real wages, a pressing issue with little influence on public policy. However, trade unions have recently begun to take a position regarding social protection (see Lambeau, 2008). In 2010, a dozen Haitian trade unions approved a roadmap that includes recommendations on strategic orientations for social protection (gender equality, inclusion of vulnerable groups and workers in the informal economy, contributory and non-contributory mechanisms, system control by a tripartite body, etc). See CSA and CSI (2012).

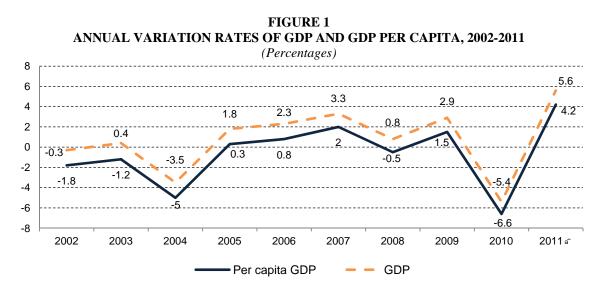
<sup>&</sup>lt;sup>2</sup> Previous State initiatives should be verified. For example, the Department of Labor and Welfare of Haiti (1967) points out that the 1807 Constitution guarantees free education at all levels and establishes a code of Assistance and Public Health urging the provision of compulsory medical aid to low-income individuals or families for maternity, old age, or in case of high dependency ratios.

## II. Main economic and social indicators

## A. Economic growth and decline of GDP per capita

In the last ten years, economic growth has been weak (1.8% per year on average) and unstable, with falls due to socio-political factors (2004) or natural disasters (2004, 2008 and 2010) (see figure 1). This, coupled with the dynamism of population growth, has led in the same period to a decline in GDP per capita (-0.89% per year) being the continuation of a long-term trend since 1987 (Montas, 2005a).

The weakening of productive capacities due to trade liberalization policies initiated in 1987 —which were not accompanied by a strengthening in supply— (Couharde, 2005) has led to a restructuring of economic activity. The agricultural sector has lost a lot of weight in value added, while outsourcing has been accentuated in an economy that is unable to satisfy domestic demand. Imports represented more than 50% of global supply at constant prices in 2000 and almost 60% in 2011. After labour income, the second pillar of household incomes are remittances, that have not stopped growing since 1994 and they accounted for double of the country's exports and more than 30% of GDP, at current prices, in 2011.



Source: Economic Commission for Latin America and the Caribbean (ECLAC). <sup>a</sup> Preliminary figures.

## **B.** Unemployment and informal employment

According to the last national employment survey carried out in 2007 (IHSI, 2010), employment systems<sup>3</sup> have registered remarkable transformations, both in urban and in rural areas. The earthquake also caused changes, directly or indirectly, in the configuration of employment systems in affected areas, especially in Port-au-Prince where the main formal activities of the country are concentrated (Meissner et al, 2010). But we can consider that, beyond the emergency situation caused by the earthquake, the findings of the last survey of employment are crucial to contextualize public policies in social protection and promotion and they are still relevant.<sup>4</sup>

Among the results of that survey, it is necessary to stress the followings points:

- (i) Low rates of economic activity of the population in working age (10 years and more) because the country was still in the stage before the demographic dividend. Women's activity rates were even lower (40.8% compared to 55.3% of men);
- (ii) A very high unemployment rate among young people (more than 30% of people aged 20-24) and in urban areas (33% in the metropolitan area of Port-au-Prince). By taking into account inactive people who were available to work, it has been estimated that the expanded unemployment rate was particularly high among women (48.7% versus 32.3% among men) and young people (nearly 60% of people aged 20-24 years). Inactive women available to work are especially concentrated among housewives, 41.17% of them would prefer to work part-time;
- (iii) Extensive informality of employment, especially in urban areas. Using the definition of the International Conference of Labour Statisticians (2003),<sup>5</sup> it was estimated that, in 2007, 57.1% of the jobs at national level and almost 90% in the metropolitan area of Port-au-Prince were informal (see table 1). Nationally, there is a larger concentration of women employed in the informal sector (60.2%) and household chores (76.2%). Symmetrically, 75% of working women are in the informal sector, in comparison with 38.9% of men;
- (iv) The predominance of informal activities to survive, with very low average income compared with the hours worked;
- (v) A very strong presence of self-employed both in rural areas (over 70%) and urban areas (over 50%). They are mainly concentrated in the informal sector (71%) and in agriculture or related industries (84.5%).

In this context, the two main challenges are a massive creation of jobs and an improvement in their quality from a decent work perspective. Related to social protection, linking the realization of socio-economic rights to the insertion in employment systems is problematic, considering that people in open unemployment —who are numerous— are mostly new members of the employment system.

<sup>&</sup>lt;sup>3</sup> The notion of an employment system (Lautier, 1990) covers all social and occupational categories, wage earners and self-employed persons who are distinct from wage earners because in their situation there is no separation between supply and demand of labour/employment. See also IHSI (2010).

<sup>&</sup>lt;sup>4</sup> The 2007 employment survey confirms the results of previous surveys (Lamaute, 2000; IHSI, 2001; IHSI, 2005a; Lamaute-Brisson, 2005b). A survey on the living conditions of households after the earthquake of 2010 is underway at the Haitian Institute of Statistics (IHSI).

<sup>&</sup>lt;sup>5</sup> This definition includes jobs created in unregistered economic establishments (the informal sector) and employment in registered establishments that lack the protections prescribed by the law. It excludes agricultural employment. See CIST (2003).

	Residence area			Sex		
Indicators	Metropolitan area of Port-au-Prince	Others cities	Rural areas	Men	Women	Total
Activity rate	48.1	43.0	49.0	55.3	40.8	47.7
Unemployment rate	33.3	20.1	9.4	14.9	19.2	16.8
Extended unemployment rate <sup>a</sup>	52.1	46.5	34.2	32.3	48.7	40.6
Informality rate	88.4	76.0	43.2	39.6 <sup>b</sup>	78.2	57.1

# TABLE 1 MAIN EMPLOYMENT INDICATORS, POPULATION AGED 10 AND ABOVE, 2007 (Percentages)

Source: Haitian Institute of Statistics and Informatics (IHSI), Survey on employment and the informal economy in Haiti (2007), 2010.

<sup>a</sup> Extended unemployment rate:

<u>Open unemployed + Available inactives</u> X 100 Active population + Available inactives

<sup>b</sup> More than half of men (53.6%) are working in agriculture in comparison with 18.2% of women.

#### C. Monetary poverty and inequality

Even if they are disparate in their methodologies, different estimates of the monetary poverty incidence published in the last 20 years agree in representing Haiti as a country of mass poverty (Pedersen and Lockwood, 2001; Sletten and Egset, 2004; Montas, 2005a). The last estimate on the basis of the Haiti Living Conditions Survey 2001 (ECVH, 2001) indicates that 79% of the population was living on less than two PPA dollars a day, and 55% was living in extreme poverty (Sletten and Egset, 2004).

The rural population was the most affected because they represented 77% of the national population living in poverty. This figure reflects the historical exclusion of small farmers (Lundahl, 1979; Cadet, 1991; Trouillot, 1986; Lamaute-Brisson, Damais and Egset, 2005), as well as economic policies that are unfavourable to agriculture (Couharde, 2005) and the structural weaknesses of smallholder farming. Even if the precise impact of the earthquake of 2010 on the incidence of poverty<sup>6</sup> is unknown, damages and losses suffered in affected urban areas, as well as the migration to rural areas in the first months after the catastrophe have probably modified the distribution of poverty by place of residence. It is also likely that inequalities have intensified —in 2001 they were already important when the Gini coefficient stood at 0.56—, as a consequence, unless the increase in remittances, growing since that date, could partially compensate for inequalities in earned income.

<sup>&</sup>lt;sup>6</sup> Based on assumptions that were not made explicit, the Government of Haiti (2010) estimated that the incidence of monetary poverty decreased 8% between 2001 and 2007 at the national level with an increase of 13% in Port au Prince. This trend is unconvincing because it means that there was a significant reduction in rural areas and in other cities. There is however no evidence of a significant rise in economic activity in rural areas in 2000. It may be then that remittances have played a significant role but it remains to be proven, considering inequalities in the distribution of remittances by region of residence.

# III. Social protection and promotion from the State: institutions and social spending

### A. Fragmented institutions

Social security is the concern of two institutions: the Office of Old Age Insurance (*Office National d'Assurance Vieillesse*-ONA), which manages the pensions for the private sector workers, and the Office of Labour Accidents, Sickness and Maternity (*Office d'Accident du Travail, Maladie et Maternité*-OFATMA) that, since its creation (1967), provides health care and insurance for work-related accidents for the private sector workers. Also, since the second half of the decade of the 2000s, it offers insurance and maternity services too.

This contributory pillar, which is under the general authority of the Ministry of Social Affairs and Labour (*Ministère des Affaires Sociales et du Travail*-MAST), is complemented by the Director's office of Civil Pension of the Ministry of Economy and Finance (*Ministère de l'Économie et des Finances*-MEF), which manages pensions for civil servants and former military. Regarding health for civil servants, temporary employees and pensioners of the State, the MEF hires a private company (Groupe Santé Plus), since 2000, in charge of providing health insurance, instead of resorting to the OFATMA. This is an *ad hoc* programme that operates under the supervision of an inter-ministerial Board of Management<sup>7</sup> and with the monitoring of the MEF. Technical and administrative management of the programme is the responsibility of *Groupe Santé Plus*, which also participates in financial administration under the supervision of another private company.

The social assistance pillar comprises three axes, under the coordination of the MAST:

(i) Social housing which is managed by the Public Enterprise of Social Housing Production (*Entreprise Publique de Production de Logement Social*-EPPLS). The recently created Housing and Public Buildings Construction Unit (*Unité de Construction de Logement et Bâtiments Publics*-UCLBP) has a similar mission, under the supervision of the Prime Minister, as well as the coordination mandate of infrastructure financing, whose aim is to

<sup>&</sup>lt;sup>7</sup> This council comprises the Ministers of Finance, Social Affairs and Labour, Health and Population, National Education and Professional Training, the Status of Women and Women's Rights.

optimize its strategic role in development.<sup>8</sup> ONA also manages programmes for access to housing and housing provision for the middle class;

- (ii) Direct monetary transfers to disadvantaged people managed by the Social Assistance Fund (*Caisse d'Assistance Sociale*);
- (iii) Support for disabled people through the National Council for the rehabilitation of disabled persons (*Conseil National pour la Réhabilitation des Handicapés*-CONARHAN).<sup>9</sup>

In the pillar of social assistance it is also possible to consider the Economic and Social Assistance Fund (*Fond d'Assistance Economique et Sociale*-FAES) acting under the authority of the MEF. The FAES is responsible for channelling funds from multilateral donors to community projects in order to expand the population's access to social, economic and financial services, as well as to strengthen local and national capacities in governance (FAES 2010).<sup>10</sup> It also oversees social assistance projects and attends to emergencies caused by natural disasters, and it is involved in social promotion supporting productive activities and microfinance institutions.

In parallel and under the auspices of the MEF, the Office of Monetization of Development Aid Programmes (*Bureau de Monétisation des Programmes d'Aide au Développement*-BMPAD) assumes similar functions to those of the FAES, albeit with a different history.<sup>11</sup> This office channels bilateral cooperation funds to projects in public works, agriculture, health infrastructure and education in order to generate temporary jobs and reduce food insecurity.<sup>12</sup>

The border between social assistance and promotion is tenuous in the context of food security where the *ad hoc* programme against hunger and malnutrition *Aba Grangou* ("down with hunger!") created in 2012 operates. Under the leadership of the First Lady, who heads the National Coordination of the Fight against Hunger and Malnutrition (*Coordination Nationale de la Lutte contre la Faim et la Malnutrition*-COLFAM) established in January 2012, *Aba Grangou* seeks programmatic coherence of those projects scattered among nine ministries, seven autonomous public organizations, the Haitian Red Cross and 21 government programmes.<sup>13</sup>

In terms of social promotion, there are programmes of the Ministry of Public Health and Population (*Ministère de la Santé Publique et de la Population-MSPP*), the Ministry of National Education and Professional Training (*Ministère de l'Education Nationale et de la Formation Professionnelle-MENFP*) and the Ministry of Women Status and Women's Rights (*Ministère à la Condition Féminine et aux Droits de la Femme-MCFDF*). These ministries also develop social assistance programmes as is the case of MENFP with school canteens for reducing food insecurity.

Regarding the generation of employment opportunities, there is no specialized body. Labourintensive projects cut across different ministries or autonomous public bodies. The same goes for credit or microcredit programs hosted on the ONA, the MCFDF and FAES.

<sup>&</sup>lt;sup>8</sup> It should be noted that, regarding the housing sector in general, the UCLBP was added to a quite fragmented institutional scenario where the Ministry of Public Works, Transport and Communications (MTPTC)-responsible for the regulation of construction-the Ministry of Territorial Collectivities, the MAST and the MPCE-in the field of development of small-scale projects, and the Interministerial Commission Land Management (CIAT), which assumes different roles, including the role to carry out the reform in land tenure all coexist.

<sup>&</sup>lt;sup>9</sup> The OFATMA now manages a program of health services for victims of the earthquake and other persons with disabilities.

<sup>&</sup>lt;sup>10</sup> In this sense, FAES provides social and economic infrastructure.

<sup>&</sup>lt;sup>11</sup> The BMPAD replaces the monetizing office of United States food aid (PL-480).

<sup>&</sup>lt;sup>12</sup> The BMPAD partner countries are the United States, Japan, Spain, France, Italy and the Bolivarian Republic of Venezuela.

<sup>&</sup>lt;sup>13</sup> It is expected also to influence in the design of macroeconomic policies.

From this we can deduce the configuration of a heterogeneous and fragmented system, where different institutions overlap and where projects on the same pillar (social security, social assistance, social promotion) or same sectorial area (food security, housing, employment) are dispersed (see table 2).

To address this situation, there are some streamlining efforts. In the *Aba Grangou* programme, the COLFAM must coordinate on-going projects, defining a national strategy to combat hunger and malnutrition, ensuring coherence between sectorial policies for the most vulnerable and to mobilize international funding. However, *Aba Grangou* still has no institutional anchor within the executive branch. In addition, they are considering the creation of new commissions<sup>14</sup> that will probably overload the existing institutions.

	Ministry/ institution	Social protection and promotion pillar	Institution/programme	Main functions	Target population/ beneficiaries
	Ministry of Social Affairs and Labour (MAST)	Social security and social promotion	Office of Labour Accident Insurance, Sickness and Maternity (OFATMA)	1) Work-related accident insurance; 2) Maternity insurance and services; 3) Services for disabled people	Private sector workers
			Office of Old Age Insurance (ONA)	1) Pensions (old age, disability and incapacity), 2) Housing access (mortgage credit, social housing project), 3) small and micro-enterprises	1) Private sector workers o 2) Micro and small business- workers
		Social assistance	Social Assistance Fund (CAS)	Direct public transfers for people, community canteens, social works, health and social services	The elderly and disabled people
Prime Minister			Public Enterprise of Social Housing Production (EPPLS)	1) Housing policy; 2) Social housing construction	Poor population
Prime			National Migration Office (ONM)	Support for repatriated migrants	Repatriated migrants
		Social action	Institute of Social Welfare and Research (IBESR)	Protection of minors, social service, control of prostitution	Minors
			National Council for Disabled Persons Rehabilitation (CONAHRAN)	Support for disabled people	Disabled people
		Social promotion	National Office of Crafts (ONART)	Support for small producers (crafts)	Small producers/ artisans
	Ministry of Economy and	Social security	Directorate of Civil Pension (DPC)	Civil servant and military pensions	The elderly
	Finances (MEF)		Self-insurance programme managed by "Groupe Santé Plus" (GSP)	Health insurance for Public Administration	Civil servants, State temporary employees and public pensioners

# TABLE 2A REPRESENTATION OF THE SOCIAL PROTECTION AND PROMOTIONSYSTEM FROM THE STATE

(continued)

<sup>&</sup>lt;sup>14</sup> According to the action plan of *Aba Grangou*, it is expected to install a national coordinating council of school feeding, a national council of social protection, a national commission relating to the production and marketing of seeds, a national commission on fertilizer and a national commission for strengthening food (UNAG, 2012).

	Ministry/ Social institution protection and promotion pillar		Institution/programme	Main functions	Target population/ beneficiaries	
	Ministry of Economy and Finances (MEF)	Social assistance and promotion	Fund for Economic and Social Assistance (FAES)	1) Health assistance (including <i>Kore Fanni</i> ); 2) Promotion of employment (support for productive projects and microfinance); 3) Conditional cash transfers and enrolment in schools ( <i>Ti Manman Cheri</i> )	1) Poor communities and base organizations, population affected by disasters; 2) <i>Ti</i> <i>Manman Cheri</i> : 100 000 mothers of students in precarious neighbourhoods in Port-au-Prince	
			Office of Monetization of Development Aid Programmes (BMPAD)	Employment promotion (high labour intensity) and assistance in food security	Communities and neighbourhood demanding funding	
	Ministry of National Education and Professional Training (MENFP)	Social promotion	Universal, Free and Compulsory Schooling Programme, (PSUGO) - Lekòl Timoun yo	Education subsidies in public and private schools	Children never enrolled in school, students in public and private primary schools in poor urban neighbourhoods	
		Social assistance	National Programme of school canteens (PNCS) <sup>a</sup>	1) Meal distribution in public schools; 2) Regulation of meal distribution by associated external donors	Students in public schools	
Prime Minister	Ministry of Public Health and Population (MSPP)	Social assistance	Project Free Obstetric Care (SOG)	Subsidy for universal labour/delivery care allowance and pre- and post-natal motoring	Pregnant women	
Pr			Initiative Polyvalent Community Agent - (IACP)-Kore Fanmi <sup>a</sup>	Personal attention in health and nutrition for families	Poor communities in the Centre Department	
	Ministry of Agriculture, Natural Resources and Rural Development (MARNDR)	Social promotion	<ol> <li>Projects of support for small producers against food insecurity <sup>a</sup>;</li> <li>Employment Projects</li> </ol>	<ol> <li>Support in food production;</li> <li>Employment promotion (high labour intensity)</li> </ol>	Small farmers and residents of rural areas	
	Ministry of Women's Condition and Rights (MCFDF)	Social promotion	Micro-credit programme for rural women: <i>Kredi</i> Wòz pou Fanm Lakay	Employment promotion (support for productive projects)	10 000 women in rural areas in agro-industry	
	Housing Construction and Public Buildings Unit (UCLBP)	Social assistance	National Housing Policy	Coordination of funding flows destined for infrastructure and joint planning	-	
	Minister delegated in charge of human rights and the combat against extreme poverty	Social promotion	Institutionalization of human rights and poverty reduction approach	1) Human rights protection, combat extreme poverty and search of socially innovative solutions; 2) Coherence of government action	-	

#### Table 2 (concluded)

Source: Prepared by the author. <sup>a</sup> Programmes or projects under the supervision of the *Aba Grangou* programme (2012).

Another recent streamlining initiative (2012) is the creation of the post of Deputy Minister for human rights and the combat against extreme poverty, under the authority of the Prime Minister. His mission is to watch over the organization of social protection programmes and ensure, in this area and in the fight against poverty, coherence in government action and the inter-institutional support required.

In the other hand, the operation of the system is based on various links between the State and other actors in social protection and promotion:

- The financial and operational support from bilateral and multilateral donors is crucial, although accurate evaluations are missing. This support allows the Haitian government to take social protection and promotion functions, otherwise, these would not exist or they would be extremely limited, particularly after the earthquake of 2010;
- Likewise, the delegation of functions to the private sector has been one of the strategies of the State to avoid their own inefficacy or inertia. This is illustrated by the hiring of a private enterprise in charge of providing health insurance to civil servants that by law is the responsibility of OFATMA;
- While non-governmental organizations have been installed since the seventies in order to remedy the deficiencies of the State, with the support of external donors, many of these organizations today play the role of contractors for the State's work on social assistance and promotion. This is the case, for example, of projects to combat food insecurity or community projects to improve access to basic services.

NGOs have become a key partner, especially since the earthquake, due to their attention to the basic needs of the poor population (Ramachandran and Walz, 2012) and it is estimated that they account for two thirds of the national expenditure on economic and social development, and they provide 50% of the currency (IMF, 2012B).

This new relationship, which emerged in the nineties, has long coexisted with the *laissez-faire* that the State only recently tried to revert. The State is trying to assume some leadership, considering three lines of action: recording and monitoring NGOs, guiding their actions in the context of public sectorial programs and promoting the regular report of registered NGOs (IMF, 2012b).

## B. Trends in public social spending

Data on social spending in Haiti are dispersed. The spending of the social ministries (Social Affairs and Labour, Education, Women Health and Status) funded by the Treasury,<sup>15</sup> of social security agencies (ONA, OFATMA) and the contribution of bilateral and multilateral donors to public investment<sup>16</sup> in the economic, social and political sectors, are accounted for separately.<sup>17</sup> The following analysis is focused on social spending of the ministries funded by the Treasury and then in the funding of reconstruction projects managed by the Interim Haiti Recovery Commission (IHRC).

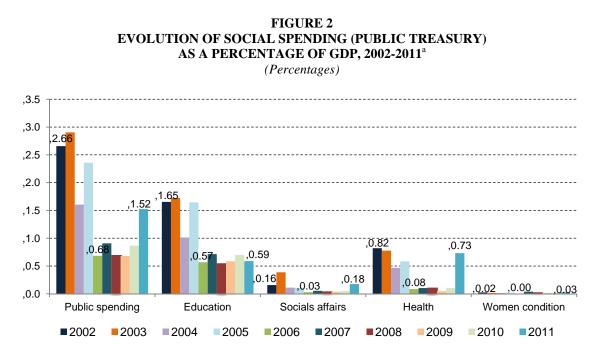
Social spending was reduced between 2002 and 2011, from 2.7% to 1.5% of GDP (see figure 2). Its evolution was erratic between 2002 and 2005 and then it collapsed in 2006 until 2011, when it picked up. This volatility is associated with the fragile political situation and the volatility of GDP growth itself.

<sup>&</sup>lt;sup>15</sup> Public authorities have agreed with the IMF, in the context of the "Poverty Reduction Strategy", to highlight, starting in October 2009, information about spending on poverty reduction. This is the spending of the Ministries of Agriculture, Health and Education financed by the Treasury.

<sup>&</sup>lt;sup>16</sup> Data on social spending funded and run directly by bilateral donors and international agencies are not collected at the level of public authorities, making it difficult to model the economy and hence the decision making.

<sup>&</sup>lt;sup>17</sup> In the typology of public spending, the political sector encompasses the Ministries of Justice, Interior and local authorities, External Affairs, Emigrants and the office of the Prime Minister.

The recovery in 2011 was insufficient, as it did not return to the highest levels reached between 2002 and 2003, nor was there an adequate response to the effects of the earthquake.



Source: Ministry of Economy and Finance (MEF), Haiti.

<sup>a</sup> Central government data. Social expenditure comprises both operating expenditure and investment of social ministries (MENFP, MSPP, MAST and MCFDF). It does not include expenses of autonomous institutions specialized in social insurance (ONA, OFATMA), in social assistance and promotion (FAES, BMPAD). It is only financed by the Public Treasury.

The distribution of total public expenditure funded by the Treasury shows that the social sector (17.5% in 2011) —whose weight varies considerably over time— is not among the top priorities (see figure 3). The debt service and the public interventions (32.4% in 2011) —including specific allowances in exceptional situations and more permanent subsidies to public enterprises— impose their rhythm.

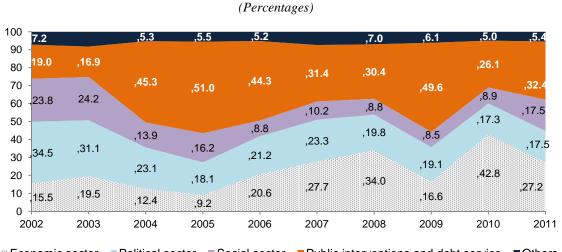
Regarding the response to the emergency, FAES received US\$ 4.8 million of funding from the Treasury for the post-quake programme. Several programmes were also added in order to rebuild educational infrastructure (more than US\$ 11 million from Inter-American Development Bank, IDB), to support the reconstruction of the city of Léogâne, that was very affected by the earthquake (US\$ 13.4 million from KfW, the German Bank for Development) and for minor repairs to the Teachers Training Institutes (US\$ 255,000).

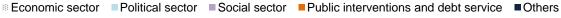
Social spending authorized by the IHRC on the basis of projects examination and approval according to the funds received from bilateral and multilateral donors (IHRC, 2011) amounted to US\$ 1,100 million.<sup>18</sup> Of this amount, the education sector received 55%, while housing —being undoubtedly, the most affected sector by the earthquake, is in second place with 24%. Most of the funding for education (US\$ 500 million) concerned the reconstruction of schools, while the remainder

<sup>&</sup>lt;sup>18</sup> This total was calculated based on a compilation of the initiatives from the Interim Haiti Recovery Commission (IHRC, 2011) in the social sectors (education, health, housing, water and sanitation), and agriculture.

was used to expand school feeding programmes. In the context of housing, several projects were proposed for new settlements, rebuilding homes and neighbourhoods, and also in order to develop financing mechanisms for access to housing.

FIGURE 3 EVOLUTION OF DISTRIBUTION IN TOTAL PUBLIC SPENDING BY AREA, 2002-2011<sup>a</sup>





Source: Source: Ministry of Economy and Finance (MEF), Haiti.

<sup>a</sup> The economic sector includes the following ministries: MEF, MARNDR, Planning and External Cooperation (MPCE), Public Works, Transportation and Communications (MTPTC), Trade and Industry (MCI), Tourism.

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## **IV. Social security**

The heart of the social security subsystem is composed of the National Security Office for Old Age (ONA) and the Office of Insurances in Labour Accidents, Health and Maternity (OFATMA); that cover private sector wage-earning employees, as well as Direction of Civil Pension and Self-insurance Programme focused on public civil servants.

## A. The National Insurance Office for Old Age (ONA): pensions and social benefits

The ONA, created in 1965, is firstly an old age and disability pension regime based on a pay-as-yougo system. Contributions amount to 12% of the employee's salary and the employer is required to pay half of this amount (6% of the salary). The old age pension is granted at age 55, after having a minimum of 20 years of contributions, and it is equivalent to one third of the average salary over the last 10 years; the amount is not adjusted according to inflation.

The same calculation rule is applied for both sexes, but is likely to be more difficult for women to meet the required contribution period, as a result of their care obligations. While the pension is reverted to the spouse (married or not) when the beneficiary dies, spouses are only entitled to half of the amount if they enter a new union. These provisions take as a model the framework of the male breadwinner, which is also strengthened with the death of a beneficiary woman who is in a union. Indeed, the widower is entitled to a pension from his spouse or partner only if it is proven that he was financially dependent on her before she died.

According to the ONA's law (Salès, 2008), membership is mandatory for a number of sociooccupational categories, excluding public civil servants because they already have access to the Civil Pension. Voluntary membership is allowed for the rest of the workers. However, there is no principle of universality. Family workers of both sexes working for their spouses and children under 18 working for their parents<sup>19</sup> are excluded from both compulsory and voluntary affiliation.

<sup>&</sup>lt;sup>19</sup> Enacted in 1967, ONA's reference law probably alludes to the farm household model where women and children were serving as family helpers in home economics. Since 1950, year of the first modern census, the category of family workers, mainly made up of women in rural areas, has been declining in the working population statistics (Lamaute, 2000). According to the Employment Survey of 2007, they represented less than 10% of workers with a greater presence in the primary sector.

Effective coverage is limited, as can be assumed from the data on informal employment. Workers in formal enterprises, not being declared by their employers, are excluded. Similarly, the selfemployed in the formal sector and small farming production are excluded. Then, they would be the first suitable group to use the voluntary membership.

It is worth mentioning that today the issue of receiving a pension in old age is becoming a more acute and urgent necessity in the Haitian farming world. The traditional socio-demographic regulation based on the notion of a son/daughter as labour force for farming and for domestic work, representing the old-age insurance for their parents is already at risk due to the crisis in agriculture and the lack of employment opportunities revealed by data on involuntary inactivity and extended unemployment (Lamaute-Brisson, 2012; IHSI, 2010).

Over the years, ONA has deployed a network of joined offices in Port-au-Prince and other Haitian cities. Five years ago, it undertook an expansion process of its coverage that resulted in a doubling of contributions between 2006 and 2011 to reach nearly US\$ 60 million. The institution then reached a total of 260,000 registered contributors (volunteer members are marginal) since its inception, more than 70,000 current contributors and just over 2,000 pensioners. The minimum pension is US\$ 32 per month, equivalent to 6.5 days of work at the legal minimum wage (US\$ 5 per day). The median is between US\$ 73 and 97 per month. A pension increase is foreseen: pensioners will receive at least 70% of minimum wage or 50% of the average salary from the last 10 years of contributions.

The low number of pensioners is explained by several factors, in addition to the demography of a young population with a very limited life expectancy (58 years):

- The liquidation of the old age pension requires by law, that members request and have the ONA individual membership card and submit a formal application to the institution. This formality contrasts with the situation and the practices of the majority of the working population;
- It is very likely that most of the members accumulated since the creation of ONA have not met the requirement of 20 years of contributions, as there are relatively few long and uninterrupted professional careers in an employment system that has had many changes since 1965.<sup>20</sup> Labour mobility is not scarce, taking place between formal and informal employment, but mainly in the informal context (Lamaute-Brisson, 2000). In recent years temporary jobs of short duration have also been generated in high intensity labour force projects that do not fit into the framework of ONA;
- There is also a legal provision to refund contributions to people with a disability to work without achieving the minimum time required for old age pension. There are also restitutions when member dies or after his definitive departure from the country.<sup>21</sup> Refunds represent over 34% of the total amount of pensions settled or paid in 2010.

Even if distribution of retired people by sex is unknown, it is reasonable to consider that the *de facto* exclusion of independent workers overlaps with gender inequalities that structure the employment system, concentrating women in the informal sector. According to data from ONA published in 2000 by the IHSI, less than a quarter of pensioners accumulated between 1986 and 1997 (1,027) were women. It is unlikely that parity has been reached at the current date.

<sup>&</sup>lt;sup>20</sup> It is important to note the shocks that were suffered by manufacturing industries oriented to the local market and the *maquiladoras* that were the main industry of ONA members in the eighties and nineties. Between 1985-1986 and 1996-1997, the total number of members of the ONA dropped from 60,000 to 43,000, reflecting marked declines in membership in manufacturing during sensitive political situations (1986, 1991-1994) (IHSI, 2000).

<sup>&</sup>lt;sup>21</sup> Between 1965 and 1997, there were nearly 12,000 refunds, among which the majority were due to work disability (71%) followed by death (24%).

In view of the unproductive accumulation of contributions, ONA expanded its range of services comprising transport, credit for consumption, allocations to resume studies, financial assistance for funerals, medical assistance and prevention through a network of health services, bonds for members' birthdays and even a monetary allowance for unemployed members. Recently established, these benefits do not involve an increase in contributions. In this way, it allows members, whose retirement prevision is distant, to have access to benefits. Expenses associated to such benefits only amount to 10% of total benefits in 2011. The target population is also marginal among members, particularly among pensioners.

This strategy of approach to affiliates is laudable because it seeks to provide greater protection but it is focused on a small population, leaving out huge challenges. ONA is a network of various forms of vulnerability. In terms of coverage, exclusion is twofold: whole groups suffer the lack of access to old age pensions and the bumpy career profile of members is ignored. In terms of access, it is very urgent to change the mechanisms for reporting affiliation and payment of pensions, at least for new members, in order to achieve an adequate ratio of contributors/pensioners. Regarding to the quality of services, the lack of mechanisms to guarantee members an adequate standard of living after years of savings is a key challenge. It is also necessary to consider mechanisms to offset income gaps and career paths of men and women when calculating the amount of pension.

Finally, the challenge of using accumulated contributions without properly identified beneficiaries for the community is proposed. Creation of credit programmes for micro, small and medium enterprises is now the option chosen by ONA (see table 2).

# B. Labour accidents, sickness and maternity insurance of OFATMA

OFATMA is responsible, firstly, to provide insurance for work-related accidents, sickness and maternity, and secondly, to manage the corresponding health services. Since its creation in 1967 and until 1999, OFATMA only offered benefits to its members when work-related accidents occurred.<sup>22</sup> In 1999, a reform process began. Since then, health care is provided through non-contributory mechanisms by external consultation, in addition to care at the Hospital of OFATMA.

Insurance coverage for work-related accidents was extended due to the efforts of the new marketing and to the improvement of accident prevention services and medical care. In 1997, OFATMA had nearly 44,000 affiliates in 1,822 companies, concentrated in manufacturing, trade and restoration, and community services. In 2012, OFATMA covered 96,000 members, among them 17,000 working in *maquilas*. The increase was quite fast between 2006 and 2012, as the number of members increased 1.5 times.<sup>23</sup>

This coverage is still limited compared to the total employed population. It does not cover civil servants, who never received payment for accident insurance from the State employer, although OFATMA law stipulates that membership is compulsory in those case (Salès, 2008). Also, informality in labour relationships in formal enterprises and in self-employment distances most of the employed population away from OFATMA, regardless of the principle of voluntary membership.

<sup>&</sup>lt;sup>22</sup> The work injury benefits include free medical care, monetary allowances during the period of incapacity to work (2/3 of the salary starting the fourth day after the accident), income replacement by level of disability, and help with the funeral in case of the death of the employee.

<sup>&</sup>lt;sup>23</sup> According to financial reports available for the years 2008-2009 to 2010-2011, there was a significant increase (+46%) in membership contributions.

Maternity insurance was established in 2001, i.e. 26 years after the enactment of the relevant legislation (1975). Contributions are equal to 6% of the worker's salary, the employer pays half. Even if there are progressively more formal enterprises that pay and collect contributions for work-related accident insurance, it does not happen the same in the case of maternity insurance. Moreover, according to testimony from OFATMA nurses, the employers in the *maquila* sector do not give time off for pregnant women to attend pre-natal consultations. In sum, the maternity unit, which opened in the early 2000s in the hospital run by the OFATMA, attends mainly women who are not affiliated.<sup>24</sup>

In the same line as the first reforms, the creation of mechanisms for health insurance was also contemplated. The institution is implementing a pilot project in order to study costs and terms on the base of a population of 400 households, among which are taxi drivers from the international airport, 100 households headed by women and workers from the new Caracol Industrial Park (*Parc Industriel de Caracol*) located in the north of the country. This project was launched under the name of "Carte rose" (Pink card) and the expected duration is one year.

It should to be pointed out that this project is run in a context where many companies already pay private health insurance for their employees. Regarding *maquiladoras*, a total of 20,000 workers are covered by a Haitian NGO called "Development of Health Activities in Haiti" (DASH).<sup>25</sup> This NGO provides free medical consultations to employees of companies that pay US\$ 500 per month for a set of 500 employees.

With the reforms, OFATMA is gradually heading towards achieving the principle of universality in the right of health, trying to close the gap between what is said by law and its benefits. But the lack of protection is still important due to insufficient coverage and unfinished reform in maternity insurance. OFATMA specific efforts are necessary to encourage employers, because of the reduced capacity of the State to enforce the law.

In addition, the integration of informal workers, wage earners or self-employed is a huge challenge. Besides informality, it is important to consider the specific protection mechanisms in a context of low incomes and its variability, and the disastrous implications of disease and maternity for the activity of the self-employed who operate in highly competitive and volatile markets.<sup>26</sup> The risks of a health insurance scheme that is divided by type of affiliate, not resolving the guidelines of inequality, should be considered.

## C. Social security aimed at public officials

Civil pension is received at 55 years of age, after 25 years of service and contributions in the public administration. This coverage is much more extensive than ONA's, with 10,538 pensioners in 2011-2012, together with military pensioners (3,087).<sup>27</sup>

<sup>&</sup>lt;sup>24</sup> ILO and IFC (2012) indicate another mechanism of discrimination against women in the *maquiladoras*. Employers tend to assume only the payment of the maternity leave, leaving aside the sick leave when women get sick during pregnancy. Whereupon, they do not have access to the same sick leave as men.

<sup>&</sup>lt;sup>25</sup> The DASH has a total coverage of 40,000 direct beneficiaries and 200,000 indirect beneficiaries in the metropolitan area of Port au Prince. This coverage includes formal sector employees (mainly of *maquiladoras*), employees of employment programs like "cash for work" and clients of microfinance institutions (Laroche, 2011).

<sup>&</sup>lt;sup>26</sup> In the case of self-employed women, motherhood involves a loss or absence of income of their own for a few months (Fass, 1988).

At the end of July 2012, a little before the end of the 2011-2012 fiscal exercise there were 11,000 civil servants and 2,973 former military receiving pensions. The total amount of the Civil servant pensions increased in 2010-2011 to nearly 730 million gourds (16% of social spending funded by the Treasury) and the amount of military pensions was 105,5 million gourds (2,3% of social spending).

The self-insurance health programme covered, in an initial stage, the whole group of civil servants (45,000). In 2007, State pensioners were included (14,000) and, then, one part of the contractual employees of public institutions, such that at the end of September 2009, the Groupe Santé Plus affiliates numbered 60,134 (Groupe Santé Plus, 2010).

Civil servants and State contribute to the payment of premiums. The programme includes several benefits: life insurance, accident insurance (loss of family members), health and accident insurance, maternity insurance for women civil servants and spouses of civil servants depending on the gap in coverage (MEF, 2001). Besides this wide range, the options for accessing health care are more diversified through a network of health services in Haiti and abroad.

## **V. Food security**

### A. The food issue

Food is a key issue in Haiti and it is strongly linked to poverty. Food expenditure ranks first in household total spending. In 1999-2000, the proportion of food expenditure (Engel coefficient) amounted to 55.1% of total effective household consumption at the national level and it was the highest among rural households (64.2%) and the poorest ones (first quintile of consumption per capita) in urban areas (58%) (IHSI, 2001; Lamaute-Brisson, 2007). Even more recent surveys continue to show quite high Engel coefficients, although it is not comparable with previous data<sup>28</sup> (Lamaute-Brisson, 2008).

Moreover, before the earthquake, the prevalence of global malnutrition (underweight) among children under five years was quite high: in 2005-2006 it stood at 22.2%, after having declined from 27.5% to 17.3% between 1995 and 2000 (Cayemittes and others, 1995; 2001; 2007). The gender gap on this indicator is only half percentage point (22.4% among boys versus 21.9% among girls). However, inequalities between regions and levels of welfare are important. On the one hand, between 2000 and 2006, in rural areas, the percentage of underweight children increased significantly (19.5% to 25.5%), at the same time that it decreased in Puerto Principe (from 12.5% to 10.2%). On the other hand, in 2006, the prevalence of underweight among the poorest households was equivalent to 6.3 times the prevalence observed in the richest households.

According to UNICEF (2012), the nutritional status of children improved thanks to many interventions that took place after the quake. The latest nutritional survey indicates a prevalence of 10.2% of global malnutrition in 2012 among children under five years of age. However, this result is fragile as it depends on the durability of foreign aid, whose levels have already started to decrease (OCHA, 2012a).

<sup>&</sup>lt;sup>28</sup> The methodologies of the surveys subsequent to the EBCM 1999-2000 conducted by the IHSI (IHSI, 2001) differ considerably from the EBCM which is an annual survey (12 months) based on the capture of all acts of monetary expenditure and consumption.

## **B.** School canteens and subsidies for food purchases

Since the nineties, the Haitian State has added both to its discourse and institutions the notion of food security. The CNSA is responsible for proposing the strategic framework to combat food insecurity, designing public policies (National Food Security and Nutrition Plan, National Plan of school canteens, etc.), measuring the incidence of food insecurity, promoting and driving the monitoring for early warning, among other actions.

CNSA endorse the Millennium Development Goals (MDGs) to combat hunger proposing, optimistically, a 50% reduction in the number of people living in food insecurity in 2015 and a 100% reduction by 2025. Specific objectives refer to improving health and nutrition levels of the population, especially in vulnerable groups, and increasing the added value in agriculture and in farmers' incomes (CNSA, 2010).

Regarding the protection of vulnerable people, the leading programme is undoubtedly the National School Canteens Programme (PNCS), created in 1997 and installed under the supervision of MENFP. The PNCS's mission is double: firstly, managing canteens in public schools and, secondly, coordinating and regulating all the interventions of donors and NGOs. The first mission receives funding from Treasury and external donors, for example the World Bank that funds the programme Education For All (EPT) and NGOs manage the running of school canteens funded by the World Bank.

The PNCS has experienced difficult years as a consequence of instability in public financing of their own school canteens (CCI, 2004). However, the programme, providing a hot meal per day,<sup>29</sup> could survive by increasing its own coverage that went from more than 150,000 students in 2007-2008 to just over 330,000 students in 2010-2011. In 2012, the PNCS and its partners (World Bank, PMA and USAID) achieve a nationwide coverage of 1.1 million of students from 3,200 schools (United Nations, 2012), more than double the population covered in 2002-2003 and half of the students in the country.

#### BOX 1

#### SUBSIDIES IN A CONTEXT OF RISING IN FOOD PRICES (2008)

Recent public policies on food insecurity address specific situations, such as rising food prices. After hunger riots that took place in April 2008, a rice consumption subsidy was established. The subsidy, financed by the World Bank (US\$ 19 million), was combined with a 15% of reduction in the commercial profit of rice importers, provoking a decrease in the price of rice for consumers for a few months. Concurrently, a subsidy for the price gasoline, which had risen in late 2007 and early 2008, was established. Since April 2008, it was decided that the State should absorb the rise in the price, which remained fixed between June and October 2008, when these special measures were abandoned.

The redistributive impact of these measures was not evaluated. In any case, the significant rise in the price of food (mainly rice) and fuel was a new shock for households, which could have neutralized the positive effects of temporary price reduction.

Source: Prepared by the author, based on Lamaute-Brisson (2008).

Impact of evaluations of the PNCS and partner school canteens were scarce and had different conclusions, very positive for PNCS and quite critical for the school canteens funded by USAID (CCI, 2004). In the first case, increases in school attendance, decreases in dropout rates, an improvement in health status and student achievement were mentioned. In the second case, it was

<sup>&</sup>lt;sup>29</sup> The cost varies according to the funding agency. In 2010, it was 22 cents per child per day in the case of the PMA, but amounted to approximately one dollar in the case of the PNCS (PAM, 2010).

stated that the impact on educational achievement was marginal because other specific conditions in the education system were not achieved. Moreover, the poorest populations were outside the scope of school canteens because their children were not in school (CCI, 2004). Other evaluations identified the poor organization of the canteens that impacted the amount of time devoted to learning by the students (Locher, 2001).

## C. Cash transfers to access food

*Aba Grangou* broadened the perspective as regards protection of the most vulnerable people. The action plan of the programme includes, firstly, an increase in school feeding programmes coverage (2.2 million children) —a goal stated since 2010, after the quake— and, secondly, an increase in the scope of nutrition programmes (one million children under five years of age). On the other hand, it is expected to implement cash transfers and food distribution for one million mothers and vulnerable people (UNAG, 2012).

This public recognition of cash transfers to individuals or households is an important innovation. The Social Assistance Fund of MAST has been in charge of transfers for a long time, but it is mainly a perspective of public charity clientelism for poor people, with a reduced coverage.<sup>30</sup> Here, it is explained the introduction of the experience of NGOs after the quake to the public policy. This experience was prompted by the Haitian government's decision to cease the distribution of food and implement employment projects such as "cash for work".<sup>31</sup>

In this line, *Aba Grangou* recently included a cash transfer programme to vulnerable households to buy food in the department of Grande-Anse. Several shocks took place there (hurricane, cholera outbreak, drought)<sup>32</sup> between 2010 and 2011, that resulted in response strategies that were harmful to the health and wealth of affected households.

This project, conceived and implemented by two NGOs, *Catholic Relief Services* (CRS) and *Care*, starting in March 2012 with funding from USAID, is complex as well as innovative. It reconciles the beneficiary households' food demand with the supply of a network of selected merchants, under a close monitoring of food fairs organized according to a precise timetable. The food basket, that can be purchased with the transfers, includes local food produced in the Department of the Grande-Anse and imported food as well (rice and oil), all fundamental to the diet of households.<sup>33</sup>

In the component conducted by CRS (US\$ 4 million), 7,081 rural and urban households were classified on the basis of criteria related to household poverty (access to land) and characteristics that made them vulnerable (the presence of widows as household heads, people with HIV, people displaced by the earthquake of 2010, pregnant or lactating women, etc.). The oldest woman in the household was registered as primary recipient of the transfers, because of their role in the preparation and distribution of food. In fact, 74% of households were represented by women.

These households received a cash transfer of US\$ 50 per month for six months, which is equivalent to about 50% of food needs, according to CRS. In urban areas, households had access to the transfer through new technology based on mobile phones; while in rural areas, vouchers were distributed to identified households. On-the-spot teams were also deployed in order to clarify for all

<sup>&</sup>lt;sup>30</sup> According to IHSI (2000), the CAS assisted 13,000 people in 2000, of whom 45% were "youth at risk", followed by seniors (20.6%), single women (17.2%) and people with disabilities (15.6%).

<sup>&</sup>lt;sup>31</sup> After the quake, NGOs implemented cash transfer projects, due to the limitations of food distribution in urban areas with monetized economies, in contrast with the situation in rural areas (Kauffman, 2012).

<sup>&</sup>lt;sup>32</sup> According to the ex-ante evaluation of the CRS, Hurricane Tomas (November 2010) caused the loss of crops in 25,469 hectares. The cholera outbreak (almost 15,000 cases) generated adjustments in household expenditure in detriment of food expenses, loss of earnings and reduced capacity to conduct agricultural activities (CRS, 2011).

 $<sup>^{33}</sup>$  No more than 50% of the transfer could be used to buy rice and oil.

that women and girls did not have to provide services or favours in return for vouchers. This measure refers to the principle of anti-exploitation, defending the need to live without any form of economic dependence that makes women vulnerable to improper use of their bodies by others (Fraser, 1997).

Because of its recent implementation, the project does not have an *ex post* evaluation. However, it is possible to make some comments regarding its design. Firstly, as the transfer is flat, it does not take into account the size of households, which implies an additional constraint in large households (with more than the observed average of 6.5 persons per household). This has possible implications for intra-household food distribution according to age and sex.

Secondly, once the project is completed, it is likely that some of the beneficiary households will relapse into food insecurity again if, in the meantime, they cannot access new sources of income. It was expected that the project would continue focused on households with characteristic behaviours of food insecurity, referring them to multi-year programmes in health, nutrition and education. Then the logic of the intervention changes from support to the demand for food to support for the management of eating habits.

# D. *Kore Fanmi*: personalized support against hunger and malnutrition

Besides protection of vulnerable populations and investment in agriculture that appear in the strategic framework of the CNSA,<sup>34</sup> *Aba Grangou* adds a third axis which refers to broadening access to basic social services with an emphasis, in a first stage, on nutrition and health services to benefit the most vulnerable.<sup>35</sup> The project, the multipurpose community agent initiative (IACP), also called *Kore Fanmi* (family support), highlights three elements: health-nutrition-hygiene, and includes an emergency response system for families affected by catastrophic events.<sup>36</sup>

Funded by the World Bank and supervised by FAES, this project is in a 13 month pilot phase, with the goal of covering 15,000 families in four districts of the Department of the Centre (Boucan Carré, Saut d'Eau, Maïssade, Thomassique) classified among the poorest according to the official poverty map (MPCE, 2004).<sup>37</sup>

This project refers to a decentralized social protection model, based on direct and personal support for vulnerable households.<sup>38</sup> The aim is to promote "positive behaviour" according to "life goals",<sup>39</sup> distribution of goods and services required by adoption of these behaviours, and use of basic social services already available. The household vulnerability is related to non-performance of "life goals", including a broad set of variables ranging from demography to environment.

<sup>&</sup>lt;sup>34</sup> The Grangou Aba action plan provides support to 1 million of small farmers specialized in the production of food and also 500 private investors for the development of agricultural activities with growth potential (UNAG, 2012).

<sup>&</sup>lt;sup>35</sup> In this sense, nutrition, which was mainly related to health policy, becomes a more forceful part of a food security perspective.

<sup>&</sup>lt;sup>36</sup> This project is a proposal of the World Bank responding to the failures of previous initiatives, the proliferation of small and scattered ad hoc projects, the absence of targeting to the poorest and most vulnerable populations (IACP, 2011). The agreement was signed in 2010 by the Haitian government and the World Bank.

<sup>&</sup>lt;sup>37</sup> This map actually reflects the lack of availability of basic services (education, health, water, sanitation).

<sup>&</sup>lt;sup>38</sup> The idea is not new but its incorporation into public policy is novel. Similar models already exist in NGOs working in Haiti. One of the most interesting cases is that of the Albert Schweitzer Hospital (HAS) which is based on a highly structured network of health workers and community volunteers that allow close care and accurate monitoring of the health status of the covered population. See Perry and others (2007a, 2007b).

<sup>&</sup>lt;sup>39</sup> The long list of "life goals" is made up of the features of a decent life (having sufficient financial resources, schooling for all children, having food security, being familiar with and using family planning, access to assisted delivery, a life free of domestic violence). In symbolic terms, this approach of "life goals" and "positive behavior" could lead well to a "recognition with contempt" (Renault, 2004) regarding families which the programme aims to support.

At the heart of this model is the versatile agent who knows the household well and is able to support it in proportion to their needs, guiding and referring them to available basic social services. The project can be understood as the link between vulnerable households on the one hand, and public institutions and NGOs services, on the other. This is a key role because it is considered that, beside the difficulties in financial and geographical accessibility, vulnerable populations are unaware of available services and there is a cultural gap that prevents them from seeking care (IACP, 2011).

However, there is no explicit reference to a gender perspective. The direct and personal support for families is, nevertheless, an ideal channel to start applying a change in the representations and involving men in care, based on participation, which is still low but notable among Haitian men in the care of children, particularly in rural areas (Menon and others, 2003; Devin and Erickson, 1996).

## **VI. Education**

#### A. Challenges in education

Universal access to education, especially in primary education, remains a challenge for Haiti. According to the last census (2003), fewer than half of the population aged 6-24 years (45.9%) attended school in 2001-2002. It is likely that this rate has risen since then,<sup>40</sup> reaching 76%, according to Working Group on Education and Training (GTEF) called on to create an operational plan for refounding the Haitian education system (GTEF, 2011).<sup>41</sup>

Inequalities in net enrolment rates by per capita income evidenced from ECVH 2001 were very important. Only 62% of young poor people aged 6-11 years attended primary school in 2001, in contrast to 79% of young non-poor people (Lamaute-Brisson and others, 2005).<sup>42</sup> With the expansion of schooling, this gap is likely to be reduced. No gaps were found to the detriment of women, but rather a women/men parity index of slightly more than 100, both among poor and non-poor households.

Regarding primary education completion, there is no standard indicator used by UNESCO. However, an approximation of the deficit in universal completion of basic school (i.e. nine years of schooling including primary school) indicates that, in 2001, 49.5% of young people aged 15-24 had not completed primary school. The percentage was much higher in poor households (56.6%) than in non-poor households (30.7%). Gender inequalities were marked at the expense of women. The deficit was 51.8% in women, compared to 47.2% among men, with a larger gap in non-poor households (Lamaute-Brisson and others, 2005).

At the centre of this dual problem of limited access to education and truncated results, there is a historically poor educational system on the supply side. School infrastructure is insufficient and its

<sup>&</sup>lt;sup>40</sup> In fact, some subsequent surveys indicate higher levels of the school attendance. For example, in the survey which was conducted in 2007 about food security and vulnerability (Lamaute-Brisson, 2008), it was found that more than two-thirds of the school-aged population (6-24) went to school in rural areas.

<sup>&</sup>lt;sup>41</sup> This is a Commission convened by President of the Republic in 2007 in order to develop recommendations in view of the conclusion of a National Pact on Education and Training (PANEF) for 25 years. The mandate of the Commission was modified after the quake, in order to take into consideration the impact of the disaster on the education sector.

<sup>&</sup>lt;sup>42</sup> It should also be noted that late enrollment-a phenomenon observed in the statistics at least since the seventies, was very marked among poor people in 2001. The school attendance rate of children 6 years of age from poor households was 41%, much lower than the rate recorded among non-poor children (69%).

distribution is very unequal. Unquestionably a segmented non-public supply predominates,<sup>43</sup> with poor quality and high levels of internal and external inefficiency (GTEF, 2011).

This system suffered a severe blow with the earthquake of 2010. More than 4,000 schools (4,268) were destroyed or damaged, 77% of public school infrastructure and 79% of non-public schools (GTEF, 2011). FAES was in charge of light infrastructure implementation to facilitate the return to school on the basis of external financing from the IDB (US\$ 11 million) and domestic public resources (US\$ 2.4 million) from MENFP (FAES, 2010).<sup>44</sup>

## B. Universal, Free and Compulsory Schooling Programme (PSUGO)

Beyond the response to the emergency situation, the principle of universal access to primary education, according to the MDGs for education and the National Strategy on Education for All (SNA-EPT, 2007) was reiterated in the operational plan for founding the Haitian education system (2010-2015). To achieve it, free education and compulsory school attendance in primary education are expected. This recommendation finds its translation in the Programme of Free and Compulsory Universal Schooling (PSUGO) —also called *Lekol timoun yo*— released in 2011.<sup>45</sup>

PSUGO's aims are schooling children (6-12 years) who were always left out of the school system and free school attendance in public and private schools in disadvantaged neighbourhoods. The subsidy for schooling in private schools is US\$ 90 per student a year, while in the public schools there is no payment for enrolment (US\$ 2.5) and new teachers were recruited.

In public schools, the programme is managed by MENFP on the basis of Treasury funding (US\$ 12 million). The National Strategy on Education for All (EPT) manages the component pertaining to non-public schools based on the devolution of an outstanding debt to the International Monetary Fund (IMF), that amounts to US\$ 12 million.

In August 2012, the coverage of the programme was around one million students (1,021,144), favouring those studying in the public sector (63% of total).<sup>46</sup> The distribution of beneficiaries by sex is unknown.

PSUGO faces a major challenge in terms of funding sustainability. The purpose is maintaining the subsidy benefiting groups already covered according to their trajectories in the educational system and extending coverage in order to achieve, at least, all children never enrolled (500,000 according to the official estimates).

To finance PSUGO, it was initially foreseen to establish a tax on international telephone calls and current international transfers, including remittances; which was done without the authorization of Parliament.<sup>47</sup> The draft law on the National Fund for Education (FNE) —recently submitted to the

<sup>44</sup> The FAES also funded minor repairs for the infrastructure of the Institutes of Teacher Training (IFM).

<sup>&</sup>lt;sup>43</sup> The public supply comprises private for-profit schools, religious congregation schools, and community schools.

<sup>&</sup>lt;sup>45</sup> In 1999 a Universal Schooling Program (PSU) was launched which was implemented in four departments. This program aimed at the integration of children and young people who have never attended school and to strengthen the learning of students who lag. In an assessment of the MDGs, the creation of a solidarity fund for universal schooling was suggested on the basis of this experience (Système des Nations-Unies, 2003).

<sup>&</sup>lt;sup>46</sup> On average, PSUGO covers 270 students per each public school served versus 50 per each non-public school that is selected. An assessment is lacking on the effects of the program on families' strategies regarding gratuity and their own choice criteria for schools as well as the strategies of private schools with the subsidy.

<sup>&</sup>lt;sup>47</sup> In 2011the Central Bank and the National Council of Telecommunications (CONATEL) began to raise a fixed amount respectively on the basis of current transfers declared by money transfer businesses and banks, and spending per minute in international phone calls. The Central Bank established a payment for operations related to the use of the payment platform provision of banking and financial agents (BRH, 2011).

Haitian Parliament for its vote<sup>48</sup> brings new sources of funding. In addition to the sources mentioned above,<sup>49</sup> it considers an imposition on all imported foodstuffs and taxation of rights to casinos and gambling, as well as on the Central Bank and public commercial banks incomes. It also provides other taxes on grants/transfers or subsidies from the State and local collectivities, grants or loans from foreign donors, local loans or loans from abroad, income from investment of FNE resources.

It raises the question of fairness in taxation, regarding three of the bases already taxed or expected to be taxed, i.e. international telephone communications, remittances and imported food.

Both in case of telephone communications as in imported food, it is an indirect tax, in line with the history of the Haitian tax system (Fass, 1988; Lundahl, 1992a). Choosing imported foods as taxable, ignores some structural facts in the country's economy and particularly in the economics of poverty: the importance of food imports in meeting food demand (50%, according to CNSA) in urban and rural areas, the centrality of food in household consumption and the small informal trade specialization in food distribution (IHSI, 2010). Duty on food imports would thus imply reducing the purchasing power of the poor households.

In the case of remittances, it is a fixed direct tax on household income,<sup>50</sup> regardless of their living level and needs. Even if the total amount of remittances has increased significantly since the 2000s, probably reaching more households,<sup>51</sup> it can be assumed that their distribution is very uneven. The poorest households, including those headed by women, -receive smaller amounts (Lamaute-Brisson, 2003; Manigat and others, 2005; Lamaute-Brisson, 2005b). It also ignores that one of the main destinations of remittances is precisely education spending, as evidenced by the fact that one of the peaks in the receipt of remittances is the period of resumption of classes.

## C. Ti Manman Cheri: conditional transfers for school retention

Launched in May 2012, the *Ti Manman Cheri* programme aims to facilitate retention of students from disadvantaged neighbourhoods in primary school, by reducing the price of education. A related objective is the empowerment of women, as mothers of the students, being the receptors of money transfers, which amounts to US\$ 10, 15 and 20 per month for one, two and three or more children, respectively.

In the absence of recent data, the programme's focus is mainly geographical. Four neighbourhoods in Port-au-Prince (Belair, Cité Soleil, Fort National and Carrefour-Feuilles) were selected. Secondly, it pursues the participation of schools in these neighbourhoods in order to identify students and, through them, identify mothers too. It is expected to cover 100,000 mothers (or guardians if children are orphans) for the academic year 2012-2013.<sup>52</sup>

*Ti Manman Cheri* is also characterized by the Conditional transfer programmes' maternalist approach established in Latin America (Molyneux, 2006; Molyneux and Rodriguez Enriquez, 2011; Montaño and Calderon, 2010). The name of the programme itself is symbolically eloquent in that regard. The explicit justification of this approach is that Haitian families are matrifocal type, meaning

<sup>&</sup>lt;sup>48</sup> It should be noted that the FNE was thought not only to finance PSUGO but for other programs or projects related to the construction of shelters and protection of children under 5 years, vocational and technical training, school infrastructure and the purchase of pedagogical materials.

<sup>&</sup>lt;sup>49</sup> According to the final provisions of the bill, the sums already collected should be part of the financial resources of the FNE in its first year of operation.

 $<sup>^{50}</sup>$  To date, it consists of US\$ 1.50 per transfer.

<sup>&</sup>lt;sup>51</sup> In 2001, 30% of Haitian households were receiving remittances (IHSI, 2003).

<sup>&</sup>lt;sup>52</sup> The distribution of transfers is made using mobile technologies, which raises a concern about equity. While in urban areas owning a cell phone is pretty widespread among households (87% of households), it is much less so among the poor (70% of households in the first quintile) (FAFO/AIS, 2010) and also among poor women.

that the mother is the authority in the domestic sphere (FAES, 2012).<sup>53</sup>In real terms, besides the matrifocality, it's an issue of gender: aiming to mobilize women as care-givers according to their assignment in domestic sphere.

At the same time, it opens a space for the empowerment of women in the public sphere, as the monitoring and evaluation of programme performance is the responsibility of committees of mothers —supported by *Ti Manman Cheri* social workers— as spokespersons of the schools directors and of the programme itself. The support of social workers is key. It is essential that they become aware of gender approach, away from maternalism.

It is also necessary that these social workers have a vision to bridge the social barriers between women with low educational levels in these slums and the people responsible for the schools. The reason is that the programme monitoring includes, among other issues, potential income seeking behaviour (rent-seeking) by schools. There is indeed a risk that schools will increase their prices, eliminating the impact of the transfer. Committees will have to ensure that any price increase would be as a consequence of investments in school infrastructure or quality of education. Then, in order to make the control of the committees effective, transparency in schools is crucial to minimize the information asymmetry between the actors.

Funding for the pilot phase of *Ti Manman Cheri* (US\$ 15 million, of which US\$ 13 million will be distributed as transfers) comes from the *PetroCaribe* agreement signed with the Bolivarian Republic of Venezuela.<sup>54</sup> The challenge of sustainable funding is posed, as a *sine qua non* condition for a lasting impact. It would be desirable to link this programme with the National Education Fund. This would relate two close approaches: free education and financial support for education paid for by families.

The effort to encourage social promotion by *Ti Manman Cheri* and PSUGO faces the problem of the poor quality of education. Both programmes aim to increase and sustain demand for education with immediate effects, while the change in quality is slower. Here, lack of protection consists in limited opportunities for social promotion, particularly for poor students enrolled in public or private schools, which do not accomplish basic conditions for ensuring a good quality of service, particularly with qualified teachers.<sup>55</sup> The risk of a further parallelism between "poor students/poor schools" is even more important in the *Ti Manman Cheri* programme, as it targets are schools in poor neighbourhoods. It is worth remembering that, even if the intergenerational progress in education will be more tangible, intergenerational progress in educational attainment follows the original inequalities, without closing the gap in living standards (Lamaute-Brisson and others, 2005).

Another challenge is the incorporation of an integrated gender approach. Although indicators relating to access to education are favourable, gender inequalities in educational attainment may not be ignored. However, it is not mentioned in PSUGO or *Ti Manman Cheri*, nor in the Plan of the GTEF.

<sup>&</sup>lt;sup>53</sup> The argument is illustrated by the high percentage of female-headed households in Haiti. However, the definition of head of household adopted by the IHSI leaves space for a variety of situations for women to declare themselves heads of household. In fact, in 2001 ECVH, found a large group of female heads of household in a union with a spouse present in the household (Lamaute-Brisson, 2012). Moreover, in making decisions about the education of children of women in unions, it became clear that the final decision is up to the two partners in most cases (52.6%). See Cayemittes and others (2006).

<sup>&</sup>lt;sup>54</sup> This agreement authorizes the Haitian State to assign the monetary equivalent of half of the oil imported from the Bolivarian Republic of Venezuela to economic and social projects, being the counterpart to the long-term repayment of the debt. Although the interest rate is low, there is a risk that the debt burden will become higher in the short and medium term, if the path of weak growth continues.

<sup>&</sup>lt;sup>55</sup> It should be recognized that the issue of quality is extended to the whole education system: the formation of significant cohorts of well qualified teachers is still a challenge in itself despite the efforts that have been initiated.

### VII. Health

#### A. Health challenges

In health, the indicators that reflect the level of human development —i.e. maternal and infant mortality rates, and child and adolescent mortality rates— registered contrasting trends. On the one hand, the maternal mortality rate increased between 1975 and 2006, from 380 to 630 maternal deaths per 100,000 live births.<sup>56</sup> On the other hand, the infant mortality rate dropped (from 141 in 1970 to 57 per 1,000 in 2006) and the child and adolescents mortality rate declined (221 to 86 per 1,000 between 1960 and 2006).

Behind advances in the health of children, the level of welfare inequalities are important. In 2006, the infant mortality rate was 78 per 1,000, among the poorest households, 1.73 times higher than among the richest households. The gap was even greater in the case of the child and adolescent mortality rate, as the rate observed in the poorest households (125 per 1,000) was equivalent to 2.27 times higher than the rate in the richest households (Cayemittes and others, 2006).

Health system comprises three levels of intervention: the first one includes 600 primary health care institutions and 45 community reference hospitals, the second one has ten departmental hospitals, and in the third level there are six university hospitals in Port au Prince. The system is organized into Community Health Units (UCS). Only some UCS are functional in some departments in the country, with non-public installations and health services run by NGOs. The departmental directors' office of the Ministry of Health (MSPP) ensures governance of the system when there is no UCS.

The public component is small and it is estimated that 75% of health services are provided by NGOs and religious groups that do not follow the rules and guidelines of the MSPP (de Ville de Goyet

<sup>&</sup>lt;sup>56</sup> The estimates of maternal mortality have fairly wide confidence intervals. It indicates that the actual value of the calculated rate in 2000 (523 deaths per one hundred thousand live births) is between 361 and 686. Similarly, the real value of the estimated rate in 2006 (630 deaths per one hundred thousand live births) is between 479 and 789. Cayemittes and others (2007) consider that, despite the uncertainty associated with the amplitude of these confidence intervals, the difference between the two estimates reflect an increase in maternal mortality between 2000 and 2006 although it cannot be measured. However, the estimated levels are very high, indicating poor access to health care among women.

and others, 2011).<sup>57</sup> In the 2000s the physical accessibility of health facilities had different profiles by area of residence: in rural areas health centres predominated, while in urban areas there were hospitals (Cayemittes and others, 2000).

The coverage of the health system is limited,<sup>58</sup> with a very uneven territorial and socioeconomic distribution. Underutilization of available services is mainly attributable to financial barriers. At the same time, the participation of household in health spending is very important. Between 1995 and 2008, out-of-pocket spending was on average 71.5% of private health expenditure, which increased, also on average to 72% of total expenditure on health (WHO, 2010).

#### B. Combating maternal and child mortality: free care

In 2005, it was decided by decree to establish free obstetric care, from prenatal to postnatal consultations. In symbolic terms, this decision is very important because it recognizes the weight of the financial barriers documented by different surveys (MSF, 2005; Cayemittes and others, 2006; MDM, 2008).<sup>59</sup>

In 2008, this measure was completed through the SOG project (*Soins Obstétricaux Gratuits* or free obstetric care), that it is managed by PAHO-WHO with Canadian cooperation funding and it has three axes: (i) overcoming financial barriers through a subsidy to health institution benefits, (ii) improving geographical accessibility, on the basis of a transportation subsidy from home to hospital, and (iii) raising awareness among women about the benefits of institutional delivery through a network of community midwives.

Between 2008 and 2010, over 70,000 women have benefited from the SOG project, which had a network of health institutions (63 in 2010) in all the departments of the country. The number of assisted deliveries increased by 66%, in 69% of the health institutions included in this network. This fact reflects the emergence of new behaviours, since most of the women who were delivering said that their previous deliveries took place at home. According to the monitoring conducted in 2010-2011,<sup>60</sup> this change corresponds, as well, to a demand for medical competencies by pregnant women interviewed (96.1%) and to minimizing the risks associated with home delivery (85%) (ICIESA, 2011).

Free delivery assistance was provided in the majority of deliveries (79%). However, the figures are less encouraging in terms of access to free medicines (65%) and disastrous in the case of the transportation subsidy (2%), thus leaving a hidden cost for the families (ICIESA, 2011). The impact on maternal health is also remarkable, with a maternal mortality rate of 150 per 100,000 live births among institutional deliveries under the project, i.e. four times lower than the estimated national rate (PAHO, 2012).

The success of the project allowed raising new funds (US\$ 20 million)<sup>61</sup> in order to increase its coverage and expand it by integrating a new component in children's health, called SIG (*Soins Infantiles Gratuits*, or free (health) care for children). The SIG was launched in 2010 and more than

<sup>&</sup>lt;sup>57</sup> This estimate includes the Cuban medical brigades, despite the fact that they refer to the public sector because they are part of an agreement between Cuba and Haiti.

Available statistics reflect a reduced coverage: three doctors per 10,000 inhabitants and 13 hospital beds per 10,000 inhabitants (WHO, 2009).

<sup>&</sup>lt;sup>59</sup> Some NGOs such as Médecins du Monde followed the guidelines of the MSPP, providing free obstetric care (MDM, 2008).

<sup>&</sup>lt;sup>60</sup> Monitoring of pregnant women was conducted for a year (2010-2011) from a sample of 9,500 women equivalent to 17.5% of attended births that year registered in the network of health institutions (ICIESA, 2011).

<sup>&</sup>lt;sup>61</sup> The donors of the SOF are the Canadian Cooperation (CIDA), the World Bank, and the European Union. USAID and the Government of Japan fund the SIG.

50,000 children under five have already received the benefits from free care, which represents an increase by 50% in the number of children served by the network of health institutions.

The elimination of financial barriers, even if only partial, involves opening a decision making space for women regarding their health. Some studies showed that, in rural areas, pregnant women delay seeking health services or do not use said services, because the spouse had the last word in this decision, as the main provider (White and others, 2006).

### C. Responses to emergency situations

The impact of the earthquake was devastating, because of the number of deceased or injured victims and the number of people displaced (1.5 million). Furthermore, it was estimated that more than 30 hospitals —out of the 49 existing ones— were damaged or destroyed in the affected area (Government of Haiti, 2010).  $^{62}$ 

The response of the public health system to the consequences of the 2010 earthquake was quite late, and medical care to victims of the earthquake was disorganized and came from many humanitarian groups (States, NGOs). <sup>63</sup> Many of them left the country two weeks after the earthquake. At that time, the MSPP decree free care and the provision of medicines for the emergency period. With the construction of camps for displaced people, the Minister also recommended installing mobile clinics in these camps<sup>64</sup> and gave instructions on the required contents of the minimum care package (de Ville de Goyet and others, 2011). However, a survey in 206 camps (among the 400 registered by the International Organization for Migration, IOM) conducted at the end of March 2010, concluded that only 35% of the camps had access to health care and only 10% of the health posts offered a full minimum care package (de Ville de Goyet and others, 2011). <sup>65</sup> In addition, health care for women was hampered by the lack of privacy in the camps.

Two and a half years after the earthquake, the needs are still significant regarding pregnancy, as most of them are unwanted (MSPP, 2010, Human Rights Watch, 2011), and the greater demand for family planning, due to very poor conditions and life prospects. Three delays that make difficult or impossible to access obstetric care were observed: a lack of information, distance and transportation costs, and a lack of own financial resources or health facility resources (Human Rights Watch, 2011). In this regard, it was argued that women were neglected in health care (Human Rights Watch, 2011).

In October 2010, an epidemic outbreak of cholera —a disease previously unknown in the country— created a new emergency situation, in a context where access to drinkable water is limited. The disease spread rapidly and, from October 2010 to the end of July 2012, 581,952 people were infected and approximately 7,455 people died (OCHA, 2012b).<sup>66</sup> National capacities to respond to new outbreaks, especially in rainy seasons, are scarce (OCHA, 2012B), among other causes, due to the volatility of external financing, despite the endemic nature of the disease.

<sup>&</sup>lt;sup>62</sup> The infrastructure of certain NGOs also suffered major damage or was destroyed, such as the Doctors Without Borders installations dedicated to emergency obstetric care.

<sup>&</sup>lt;sup>63</sup> The proliferation of non-public health actors —already important before the earthquake— increased considerably afterwards. Among the 396 foreign organizations registered with the Health Cluster of the United Nations after the earthquake, only 50 were registered with the MSPP before the earthquake (de Ville de Goyet et al, 2011).

<sup>&</sup>lt;sup>64</sup> At first these clinics-or-mobile brigades are understood as an extension of health services at the first level of the system.

<sup>&</sup>lt;sup>65</sup> The package included the following services: general consultation, prenatal care, pediatric consultation, newborn care, family planning and immunization.

<sup>&</sup>lt;sup>66</sup> Excluded from this count of the cholera victims are those who could not make it in time to health services, which occurs in rural areas where access to clean water is even more limited.

### VIII. Public policies for housing access

# A. Housing access: from restricted interventions to the 2010 earthquake

The concern for social housing has been tangible in public institutions since the fifties. In 1951, the Office of Workers City Management (OACO) was created, replaced in 1966 by the National Housing Office (ONL), with a broader mandate in charge of managing all public housing projects. Then, in 1982 the ONL turned into the Public Enterprise of Social Housing Production (EPPLS), in order to formulate a national policy on housing and provide housing solutions for low-income households. Since 1974, the Security Office on Ageing (ONA) grants mortgage loans to its members, mainly those belonging to the middle class.<sup>67</sup>

However, the country did not have a real housing policy, but there were several analyses, especially since the eighties, on urbanization, land use and housing. All of them were conducted by or with international technical cooperation.

Furthermore, due to budget constraints the ONL did not manage more than 2,000 housing units, from the year of its creation to 1979. Between 1980 and 1982, with United Nations funding, the ONL was responsible for the management of approximately 1,500 housing units. The EPPLS meanwhile built a total of 2,210 units with funding from the World Bank (US\$ 7 million) and distributed between Port au Prince and two other large cities, Cap Haitien in the north and Les Cayes in the south (Chilson and Olsen, 1983).

Definitively, the small number of public projects is minimal in comparison with the needs, especially in Port au Prince where informal housing investment —supported in part by remittances (Godard, 1984)— responded to the growing demand from internal migrants, with housing quality that is well below the accepted standards. In parallel, several banks that specialized in funding for access to housing were created after 1985, in order to attend to the expanding middle class.

<sup>&</sup>lt;sup>67</sup> In 1980 there were already 500 loans in its portfolio. The cumulative number of loans between 1983 and 1995 amounted to 1,415 (IHSI, 2000). Furthermore, the ONA has participated in the construction of social housing. In 2003, a set of 34 units of housing were opened for purchase by members with a long-term loan (20 years) with an interest rate lower than the one available through the market. However, this project failed.

According to the Government of Haiti (2010), housing was the sector most affected by the earthquake of 2010. It was estimated that approximately 10,500 houses were destroyed and more than 208,000 were damaged. It was calculated that damages to houses amounted to US\$ 2,300 million and losses in this sector accounted for 40% of total losses. In terms of the affected population, the number of displaced people reached 1.5 million at the end of January 2010, 80% of them came from precarious neighbourhoods.

Responding to the emergency situation, which clearly exceeded the capabilities of the State, the government did not designate the EPPLS, nor another State institution, to be in charge of international aid coordination (donors and NGOs). In September 2010, the Interim Haiti Recovery Commission presented a project for people returning to their neighbourhoods and for housing reconstruction.

The axes of the emergency response were: cleaning and treatment of the rubble, and destruction of badly damaged houses and buildings; construction and distribution of transitional shelters; repair and construction of houses and buildings; allowance provision for families in order to rebuild their homes; and finally, the relocation of displaced families.

The IHRC did not maintain a database of approved projects for the housing sector. However, it is remarkable that 94,879 temporary (rather than transitional) shelters were available in late August 2011, with a total cost of approximately US\$ 500 million, as a result of donors and NGOs initiatives, and it was expected that 18,520 more would be built (IHRC, 2011). It was estimated that 15,000 homes were repaired and 10,000 were rebuilt by their owners and with their own resources.

In order to facilitate the voluntary return of displaced persons from six shelters to their neighbourhoods of origin, in July 2011 the IHRC approved a rehabilitation project for 16 neighbourhoods. Called 16/6, this project has a funding of US\$ 98 million from the Fund for the Reconstruction of Haiti (FRH) and it was implemented by the new Housing and Public Buildings Construction Unit (UCLBP) along with various agencies of the United Nations system (UNDP, IOM, UNOPS, ILO). A subsidy of US\$ 500 was distributed per family to fund their return. Then, shelters set up in public spaces (squares, etc.) were gradually closed. <sup>68</sup>

Also, under the 400/100 project (400 homes in 100 days) —that had a funding of US\$ 30 million from the IDB and contributions from the NGO Food for the Poor—, permanent houses were built in Croix-des-Bouquets, on the outskirts of the Port-au-Prince metropolitan area. The 400 homes available will be rented for a reasonable amount (US\$ 62 per month) and will be subsidized, with the exception of a group reserved for the poorest whose in kind contribution will be participating in community work. Recipients must be on the IOM watch list of displaced individuals and families. <sup>69</sup>

Moreover, it was also decided to facilitate access to individual housing for middle class people affected by the loss of capital as a result of destruction or damage to their property. The National Credit Bank, a public institution, launched the programme *Kay Pa m* (My house) that has a fund of US\$ 100 million.

<sup>&</sup>lt;sup>68</sup> However, the outcome of the return of displaced persons to their home districts are unknown for the moment in terms of access to housing on the basis of the subsidy that was granted.

<sup>&</sup>lt;sup>69</sup> 12.5% of the homes will be allocated to civil servants and their families (IADB, 2012).

### B. Regarding the guidelines for a new policy on access to housing

The UCLBP is developing a national housing, habitat and urban development policy. The main guidelines, not yet confirmed, refer on the one hand, to equity and balanced development in both institutional and spatial terms and, on the other hand, seek protection of the most vulnerable households (UCLBP, 2012).

It is argued that, in a context of scarcity of public resources, the State should exclusively orient actions to reduce risks, security of tenure and infrastructure investment. Instead, families will have to bear the cost of housing access, as they have different funding sources: income, savings, returns from private insurance, remittances and formal and informal credit.

Therefore, a very narrow vision is presented in relation to social protection and the most vulnerable people. The aim is to ensure the implementation of "social protection measures" in building projects, i.e. ensuring that the selection of beneficiaries is sanctioned by the communities.<sup>70</sup> Also, limited financial assistance is anticipated, as a form of giving a head start, benefiting a small number of households looking for access to home ownership.

Nonetheless, the central challenge consists in allowing the majority of the displaced population to occupy a decent and financially affordable house. At the end of July 2012, there were 575 camps sheltering 97,913 displaced families, i.e. 390,276 people (OCHA, 2012c). The vast majority of the displaced are among the lowest incomes groups and they lack access to formal financial markets. Also, it is possible to assume that at least 50% of them were renters before the quake.

Therefore, the goal is to provide housing solutions for most of the renters, in order to make the best use of the available resources or those that can be mobilized. It should be noted that most of the buildings and houses built or re-built by informal housing businesses or families after the earthquake, were done according to the lowest quality standards. Reconstruction with better standards requires State intervention and the implementation of financial mechanisms appropriate for the profile of low incomes groups.

<sup>&</sup>lt;sup>70</sup> Additionally, the UCLBP will be responsible, along with the MAST and other organizations, for defining social protection measures.

# IX. Employment public policies

Historically, labour institutionalism has been non-existent or very weak, and employment public policies were scarce and scattered. Since the end of the sixties, between public and private decision makers it was considered that the absorption of the labour-force should be done through the development of *maquilas*. From speeches to the facts there is still an abyss: *maquilas* have not exceeded the threshold of 50,000 jobs during their history in Haiti. However, the expansion of maquiladoras —whose goal is to generate 200,000 jobs— is now one of the priorities of the public authorities.

Labour intensive projects (HIMO) have emerged as a palliative alternative in the last 30 years. Also, the support of microenterprises is, in a context of informalization of urban and rural employment systems, the second area of employment public policies.

### A. Labour intensive projects

It is difficult to re-build the history of labour intensive projects in Haiti: corresponding information is not collected consistently for various reasons. One of them is the absence of political goals, according to established standards. Also, the laissez-faire attitude towards NGOs resulted in many projects being funded by external donors and implemented by NGOs since the seventies without collecting relevant information.

The impact of the earthquake on the dynamics of local employment systems has forced the State, through the MARNDR and the Ministry of Public Works (MTPTC), to launch new projects of this type with funding from UNDP and other United Nations agencies.<sup>71</sup> These projects have represented a double response to the emergency situation: while debris was removed or precarious urban spaces were rehabilitated, they sought to improve the fulfilment of basic needs through the distribution of new income. It also included the development of new skills within communities (Cluster Relèvement immédiat/Groupe de travail Moyens of subsistance, 2011).

<sup>&</sup>lt;sup>71</sup> WFP, OCHA, ILO, UN HABITAT, UNOPS among others.

Modality	Project	Employment indicators			
		Total number of working days	Total number of workers	Percentage of women	Results
"Cash for work" (165 projects in 43 municipalities from 6 departments with 110 institutions). Daily individual salary: US\$ 5 (equivalent to the official minimum salary of 200 gourdas per day)	"Cash for work" "Cash for work" broadened with PMA and OCHA	2 451 915 1 570 650	163 461 104.71	35	In total, 92,313 m <sup>3</sup> of rubble and 148,793 m <sup>3</sup> of solid waste were removed from streets. Also, 165 km of agricultural paths were restored or opened; 355 works developed, rehabilitating or constructing reservoirs, irrigation and drainage channels. Furthermore, 10 community infrastructures were built
<i>"Cash for production".</i> Workers paid by output (1m <sup>3</sup> of rubble removed)	"Debris Léogâne" project (removing rubble in Léogâne)	138 285	9 219	50	200,000 m <sup>3</sup> of rubble was removed
	"Debris PAP 2" project (removing rubble in Port-au- Prince)	122.61	8 174	40	287,328 m <sup>3</sup> of rubble removed
	"Debris PAP 1" project (removing rubble in Port-au- Prince)	31.5	2.1	40	240,000 m <sup>3</sup> of rubble removed, 6 community rehabilitation projects for restoring paths, staircases, etc., in vulnerable neighbourhoods
"Cash for work" on the basis of community contracts. Infrastructure projects and house reparations. Daily payment for workers	Project 16/6 <sup>a</sup>	4.68	312	40	0.185 km of routes and 0.350 km of drainage, 148 damaged houses. Electrification through solar energy of places with high risk for the safety of women and children according to communities (243 solar lamps ready to be installed in 7 of 8 neighbourhoods)
	Total	4 319 640	287 976	36	

TABLE 3HAITI: MAIN LABOUR-INTENSIVE PROJECTS, 2010-2012

Source: United Nations Programme for Development (UNDP), Haiti.

<sup>a</sup> This is a renovation project of 16 neighbourhoods, from which displaced people living in six camps came.

From January 2010 to June 2012, several projects generated approximately 290,000 jobs, 36% of them were assigned to women, beyond the 30% rule established by the Haitian government. These projects were deployed in some regions of the country with a total cost of US\$ 53 million. The jobs were very short term (15 days on average) and with variations on the method of payment. In some projects, workers were paid daily (*cash for work*) on the basis of the official minimum wage (five dollars per day), while others were paid by output in order to increase productivity (*cash for production*).

The first projects were based on individual contracts of temporary workers for removing rubble. Later, collective hiring of associations as "master builder" was established for local public authorities for the construction or rehabilitation of community infrastructure.<sup>72</sup>

<sup>&</sup>lt;sup>72</sup> Among the risks associated with this approach is the creation of associations without legal recognition by opportunistic leaders seeking access to international aid (Cluster Relèvement immédiat/Groupe de travail Moyens de subsistance, 2011). Another risk, no smaller, is the emergence of intermediary renters who receive a commission from workers who "helped" them get a job.

The impact on the functioning of local employment systems remains to be assessed, with respect to the duration of employment, labour opportunity regarding the seasonality of activities, price setting for the labour-force and the (dis) articulations between paid and unpaid work.

It is also imperative to adopt a long-term strategic vision, where labour intensive projects fit. Recognizing the need to overcome the humanitarian approach, UNDP has initiated a reflection on this regard, in support of the Haitian government, especially the Ministry of Commerce and Industry (MCI). It proposes a National Employment Pact on four strategic areas: (i) guide macroeconomic management towards job creation and economic growth; (ii) develop the capacity of the labour-force; (iii) identify priority economic sectors and areas; and (iv) stimulate productivity in micro, small and medium enterprises (UNDP, 2012).

A guaranteed public employment programme would be aimed at the unskilled or low-skilled labour-force through projects, such as "*cash for production*" in the fields of infrastructure, environmental and social activities, in parallel with training and savings programmes. This employment programme will be based on other programmes implemented in countries like India.

One of the challenges regarding this type of programme consists in encouraging the integration of a gender perspective, beyond an increase in the rate of jobs assigned to women. It is necessary to promote the participation of women in the definition of the priorities in the selected projects. It requires changing the technology of household work —which forces women to dedicate much of their time to non paid work— in order to free up time for paid work<sup>73</sup> and other activities. It is also necessary to improve the economic infrastructure that now affects women causing them to spend a lot of time working in small trading or processing of agricultural products. Expanding opportunities for women also requires designing training activities that do not confine them to traditional roles.

Another challenge is related with the articulation between access to employment under HIMO projects and access to social protection. It seeks to establish mixed mechanisms (contributory and non-contributory) that allow workers to benefit themselves, at least, of an adequate health insurance and coverage from the SOG/SIG project.

### **B.** Microcredit for informal enterprises

The formal microfinance market was developed in the last 30 years reaching a non-negligible size.<sup>74</sup> François (2011a) indicates that, at the end of fiscal year 2008-2009, the securities portfolio of this market —which excludes agricultural sector— amounted to 12% of the Haitian banking system, that is US\$ 111 million.<sup>75</sup> There were 200 microfinance institutions (MFIs), 233,000 debtors —five times more than in the banking system— predominantly women (75%) and 952,000 savers (2 million in the banking system). It is estimated that 70% of debtors never had access to a credit before (François, 2011b).

This sector suffered loss and damages as a result of the earthquake of 2010. The National Association of Microfinance Institutions of Haiti (ANIMH), the main association of MFIs, estimated that members lost US\$ 16.5 million (27% of total loans) and assessed the amount necessary to rebuild

<sup>&</sup>lt;sup>73</sup> It would also aim to break the chain of delegation of care tasks to other women.

<sup>&</sup>lt;sup>74</sup> Regardless of the credit or saving cooperatives (or credit unions) that emerged in the forties.

<sup>&</sup>lt;sup>75</sup> It includes private for profit institutions (agency banking groups, microfinance institutions) and NGOs and foundations specialized in lending to micro, small and medium enterprises, as well as credit unions. According to François (2011a), there are 175 credit unions, 20 NGOs/Associations/Foundations and four branches and units of big banking/financial groups in the country. This count does not take into account the Rural Savings and Loans Funds (CREP) launched by the FAES during fiscal year 2009-2010. The credit union, bank branches and foundations have 40%, 30% and 25%, respectively, of the total portfolio of the formal microfinance market.

the MFIs infrastructure and the support to customers affected by the earthquake (who represented at least 20% of the debtors) at US\$ 48 million, as well as for the provision of new funding (ANIMH, 2010; François, 2011b).

Currently, in the absence of a general policy to support micro, small and medium enterprises, three public institutions provide microcredit or other forms of support: (i) the FAES, giving financial support to small productive activities in rural areas since 2003, thanks to IFAD and IDB loans (Lamaute-Brisson and Ibarrarán, 2009); (ii) the Security Office on Ageing (see box 2); and (iii) the MCFDF with a microcredit programme aimed at women (see box 2).

#### BOX 2

#### PUBLIC PROJECTS TO OFFER FINANCIAL SUPPORT FOR MICRO, SMALL AND MEDIUM ENTERPRISES

In 2012 two programmes were launched, one microcredit programme called *ONA Pa m* (My ONA), under the responsibility of the National Security Office on Ageing (ONA), and another called *Kredi Wòz pou Fanm Lakay* (Pink credit for women in Haiti) managed by the MCFDF.

*ONA Pa m* (My ONA) is aimed at micro-enterprises with a maximum loan amount of US\$ 625, and an interest rate of 7% per year. Another project of the ONA, *Biznis Pa m* (My business), will be launched soon in order to benefit small and medium enterprises, with loans between US\$ 1,250 and 25,000. The interest rate would be 8% per year.

*Kredi Wòz pou Fanm Lakay*'s goal is the financial empowerment of rural women. It receives US\$ 1.5 million in funding which includes a contribution from the Treasury. It is expected to reach 10,000 women producers selected by groups and cooperatives specialized in trade and processing of agricultural products, by the MCFDF headquarters and by those responsible from departmental offices. This project is highlighted due to the bonus interest rate that is considered (1.5% per year).

Source: Prepared by the author.

The FAES support occurs at different times in the production processes (access to inputs, processing equipment and units in the agro-industry and fisheries, development of new crop varieties), and in the capitalization of small producers.

Between 2003 and 2007, the corresponding projects occupied a minor place in the allocation of FAES resources, with a strong geographic dispersion (Lamaute-Brisson and Ibarrarán, 2009). The coverage of productive projects financed by the IDB under the FAES Local Development Programme was restricted according to the households surveyed at the end of the programme (ACT Consultants, 2009). This is mainly due to the implementation of the projects through producer groups but an impact assessment on such groups is still lacking.

The FAES also supported the establishment of Deposit Solidarity Groups (GCS) in 2009 in order to facilitate access to credit in rural areas and the creation of Rural Savings and Loans Funds (CREP) in three regions of the country (Northeast, Northwest and Central), amounting to US\$ 1.13 million (FAES, 2010).

The support or support intentions, of the FAES and MCFDF (see box 2), to productive activities in rural areas, which are relatively neglected by the microfinance formal market and by branches of banking groups is noteworthy (Boisson, 2011). But the magnitude of the public programmes is small, almost insignificant, when compared with the size of the securities portfolio of the formal microfinance market, which is insufficient anyway given the potential demand for credit, including the demand from farmers (François, 2011b).

The discussion then centres on defining the respective roles of the State, business and other non-profit institutions and NGOs. Some stakeholders think that the State should only assume the role of market protector (Boisson, 2011), an essential role since State regulation is insufficient *vis á vis* the specific risks faced by micro and small enterprises and MFIs. Also, the State should invest more in economic and technological infrastructure, as the expansion of microfinance services to rural areas is hampered by deficits in these areas (Boisson, 2011).

However, a strategic vision that defines the place of support for micro and small enterprises in the public employment policy is needed, taking into account levels of unemployment and the dominance of new entrants in the unemployed population. It is necessary to design and implement mechanisms for young people interested in entrepreneurship, since MFIs do not take risks in this area. It is also important to define the respective spheres of public and non-public interventions, starting, for example, with a classification of firms by size and potential growth.

Coordination between employment policy and other policies is a critical issue because microcredit is not a panacea, as it also produces negative effects: thanks to credit, strengthened firms gain market share at the expense of the most vulnerable enterprises, especially if an increase in demand (local and external) is not sought in parallel.

Full implementation of a gender perspective is also at stake. That women are the main clients of MFIs or the target population of public programmes refers to only one of the dimensions of a gender equality policy. Regarding gender relations, it was demonstrated, first, that power relations within households are adapted to the trend of MFIs giving credit to women. Indeed, there are known cases where the beneficiary woman of the credit is only the figurehead of her spouse, with the obligation to be responsible for the refund if the investment fails, which can lead to a loss of capital of the woman's company (Clermont, 2011). On the other hand, microcredit programmes ignore the double shift of paid and unpaid work that women assume, even though care obligations and work overload limit the potential growth of their businesses (ECLAC, 2010).

### X. Conclusion

In this review —which is far from exhaustive—<sup>76</sup>, of the Haitian government action in the area of social protection and promotion the figure of a State appears that is very different from the "antithesis of the welfare State" (Lundahl, 1992b). This transformation —gradual and targeted— is mainly related to actions and speeches of international organizations, bilateral cooperation agencies and NGOs that, in one way or another, were aimed at combating poverty.

The incorporation, albeit by trial and error and in dispersed order, of the referential framework on vulnerable populations as objects of attention in the context of structural adjustment and the spread of the notion of equity has affected the effective roles of the State in social areas. Somehow, the graft was successful, although the predatory logic has not disappeared (Lundahl and Silié, 1998).

A non-contributory pillar emerged that surpasses the initial frontiers of social assistance and incorporates major innovations: school canteens and, more recently, free obstetric care, free schooling, monetary transfers —whether conditional or not— and support to families. Social promotion was expanded through investment in social infrastructure, temporary job creation projects and support for micro-enterprises. Progress was made, especially through the FAES and BMPAD, in supporting rural areas, generally the "poor relatives" in public policy.

However, limitations of social protection and promotion in terms of coverage, both in extent and magnitude as well as in social and territorial deployment, imply that beneficiaries of the State social policy are mainly a few "poor privileged people" (Lautier , 1999), dispersed in a society where the "no man's land" of unprotected people by State dominates and also where completely helpless people and those who have access to the NGOs services coexist.<sup>77</sup> Moreover, even with the protection

<sup>&</sup>lt;sup>76</sup> A very important issue that was not addressed here is the situation of social protection against disasters. It is important to remember that in the past decade, in addition to the earthquake of 2010, several disasters occurred due to hurricanes and tropical storms that caused significant damage and economic loss, increases in the prevalence of food insecurity and setbacks in income-generating capacity. It would be important to analyze the public policies, that along with international support, attended to the affected populations and private initiatives that provide disaster insurance to informal microenterprises (Murphy, 2012; Fonkoze, 2012).

<sup>&</sup>lt;sup>77</sup> Data are urgently missing on the profiles of the populations that have access to mechanisms of social protection and promotion as well as on possible overlaps between beneficiaries of various public and non-public policies.

of these "poor privileged people" forms of vulnerability emerge derived from the profile and quality of the allowances or from the ways of funding and the lack of regulation.

On the other hand, the vulnerability of public policies in social protection and promotion to the volatility of external financing is exacerbated by institutional fragmentation that was fed by processes of adding new institutions to existing institutions, as is the case of the FAES (Thelen, 2003; Brisson and Ibarrarán Lamaute, 2009) or UCLBP, while at the same time leaving pockets of inertia in public institutions.

This fragmentation could be read as a "balkanization" that unfolds simultaneously in three areas: (i) in the institutions; (ii) in the ideas and models that actors and institutions promote, beyond a shared core with three axes: primacy of the law of the market, focus on the poorest and most vulnerable, and project management; and (iii) in the interests of the various actors of the aid and international cooperation "market". Under this triple balkanization, small scattered islands are conformed of populations that benefit from State policies and of populations protected by insurance companies or some NGOs.

Faced with these multiple balkanizations, coordination initiatives by donors and NGOs, as a result of State and civil society<sup>78</sup> demands, have not become continual. The obstacles are different (Kauffman, 2012, de Ville de Goyet and others, 2011) but all refer to a central weakness of the State in terms of its ability to create and manage a global model of social protection.

The search for coherence is arduous due to the diversity of activities, approaches, organizations and small bureaucracies that coexist, and even, delineation of very different target populations because of the various definitions of vulnerability. Moving the boundaries is paramount when what prevails is the management per project, i.e. an operational logic, above a more programmatic logic that anticipates the coordination between areas (such as health/nutrition, food safety and production), goals (emergency/occasional support/development), mechanisms, covered populations and achievement of results in the medium and long term, beyond the horizon of each of the projects.

A national debate is essential, from the principles of justice that allow the coordination of redistribution and recognition (Fraser, 1997) in order to deal with following challenges, with a gender perspective:

- Definition of a universal minimum level of social protection and promotion including the provision of free maternal and child health care and the generation of guaranteed public employment;
- Extension, beyond the focus on the poorest and most vulnerable, of the social security perimeter, which could be achieved by adapting protection mechanisms on the one hand, to employment systems that are marked by the strong presence of self-employment (Bertranou 2009; Bertranou and Casali, 2007) and frequent labour displacements/mobility and on the other hand, by adapting the protection mechanisms to situations of vulnerability as a consequence of a gradual depletion in the traditional mechanisms of intergenerational solidarity;
- Coordination between social protection and promotion and economic development. In the context of massive poverty, resulting from the weakening of the Haitian economy and the widening of the gaps (Montas, 2005b), the focus on the poorest and most vulnerable is obviously insufficient. This implies a reflection on the (greater and better) integration of poor and vulnerable people in production circuits, using mechanisms of social protection as a gateway into production. In addition, beyond regular programmes of guaranteed

<sup>&</sup>lt;sup>78</sup> This is the Interim Cooperation Framework (CCI) established in 2004 with the creation of thematic or sectoral groups, and then the *Clusters* of humanitarian response following the earthquake of 2012.

employment, the creation of care services should be added, encouraging a greater employment insertion of women in order to invigorate local economies (Lamaute-Brisson, 2011);

- The dimension of non-contributory mechanisms. Even if targeting is understood as the strict delimitation of beneficiary populations restricted by the availability of financial resources and the almost exact identification of needs, the impact on the living conditions of beneficiaries is based —if the provision is in kind— on the size of the support it provides, both in terms of amount or quantity, and in its duration as well. A greater cooperation by donors in unique projects with significant size, becomes, then, imperative;
- Equity and sustainability of domestic funding. It is imperative to negotiate a fiscal pact to increase State revenues, in a country where the tax burden does not exceed 10%, and to correct the injustices inherent in indirect taxation;
- Regulation of the social protection system as a whole. The gap between reality and constitutional and legal provisions relating to social and economic rights is formidable (Mérat, 2011) but today there is nowhere to resort to.<sup>79</sup> The special court of social protection, envisaged in the 1968 law was never created (Mérat, 2011). Similarly, a tripartite management of social security agencies (government, employers and unions) could not be created, although there was a law from 1983 that envisage the creation of a tripartite Board of Management for the supervision of such bodies. In any case, regulation is perhaps one of the most complex challenges that needs to be resolved when facing processes of State building and formation characterized by tensions between the logics of institutionalization and private interests.

<sup>&</sup>lt;sup>79</sup> The Office of the Protector of Citizens is focused on the defense of civil and political rights.

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This report is part of a series of national case studies aimed at disseminating knowledge on the current status of social protection systems in Latin American and Caribbean countries, and at discussing their main challenges in terms of realizing the economic and social rights of the population and achieving key development goals, such as combating poverty and hunger.

Social protection has emerged in recent years as a key concept which seeks to integrate a variety of measures for building fairer and more inclusive societies, and guaranteeing a minimum standard of living for all. In particular, social protection is seen a fundamental mechanism for contributing to the full realization of the economic and social rights of the population—to social security, labour, the protection of adequate standards of living for individuals and families, as well as the enjoyment of greater physical and mental health and education.

Albeit with some differences due to their history and degree of economic development, many Latin American and Caribbean countries are at now the forefront of efforts to establish these guarantees by implementing various types of transfers, including conditional cash transfer programmes and social pensions, and expanding health protection. One of the key challenges that the countries of the region face, however, is integrating the various initiatives within social protection systems capable of coordinating the different programmes and State institutions responsible for designing, financing, implementing, regulating, monitoring and evaluating programmes, with a view to achieving positive impacts on living conditions.





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