## CONTENTS

<table>
<thead>
<tr>
<th>Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women in the region: major changes</td>
<td>7</td>
</tr>
<tr>
<td>Miriam Krawczyk</td>
<td></td>
</tr>
<tr>
<td>The Pacific Basin and Latin America</td>
<td>21</td>
</tr>
<tr>
<td>Dae Won Choi</td>
<td></td>
</tr>
<tr>
<td>Strategic management, planning and budgets</td>
<td>41</td>
</tr>
<tr>
<td>Juan M. F. Martin P. and Arturo Núñez del Prado</td>
<td></td>
</tr>
<tr>
<td>The internationalization of Latin American industrial firms</td>
<td>55</td>
</tr>
<tr>
<td>Wilson Peres Núñez</td>
<td></td>
</tr>
<tr>
<td>Water property rights and the State: The United States experience</td>
<td>75</td>
</tr>
<tr>
<td>Carl J. Bauer</td>
<td></td>
</tr>
<tr>
<td>Poverty and adjustment: the case of Honduras</td>
<td>91</td>
</tr>
<tr>
<td>Jorge Navarro</td>
<td></td>
</tr>
<tr>
<td>The trade union system: its background and future prospects</td>
<td>103</td>
</tr>
<tr>
<td>Fernando Calderón G.</td>
<td></td>
</tr>
<tr>
<td>Shaping competitiveness in the Chilean wood-processing industry</td>
<td>117</td>
</tr>
<tr>
<td>Dirk Messner</td>
<td></td>
</tr>
<tr>
<td>Improving urban transport for the poor</td>
<td>139</td>
</tr>
<tr>
<td>Ian Thomson</td>
<td></td>
</tr>
<tr>
<td>Privatizations and social welfare</td>
<td>155</td>
</tr>
<tr>
<td>Robert Devlin</td>
<td></td>
</tr>
<tr>
<td>Guidelines for contributors to CEPAL Review</td>
<td>181</td>
</tr>
<tr>
<td>Recent ECLAC publications</td>
<td>183</td>
</tr>
</tbody>
</table>
Women

in the region:

major changes

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This article addresses concerns relating to the promotion of the advancement of women within the framework of ECLAC's proposal for changing production patterns with social equity. Virtually all the countries of the region have ratified the mechanisms set up by the United Nations to help attain truly equal treatment for women. Women have already been integrated into society, but their position is it needs to be improved, bearing in mind the social role which most cultures assign to them as women. As a means of illustrating some of the ways in which the status of women in the region has changed, the author analyses their participation in the spheres of employment, education and health. It is noted that women's growing participation in gainful employment is part of a structural trend that will continue to grow more marked in the future, despite the striking differences between the contexts in which women perform their productive and reproductive roles. In the field of education, enrolment continues to rise and male and female enrolment rates are starting to converge, but the distribution of women among the various fields of study has changed very little. Wage discrimination persists (women need to have had about four more years of formal education than men to earn as much) and most school textbooks continue to transmit images that militate against participation by men and women on a more equal footing. With regard to reproduction, the conscious separation of sexuality from reproduction, which until recently was not possible for women, is associated with free choice and the search for more effective birth control methods. Although most women in the region do not have access to contraceptives—due to lack of information and the cost involved—the average number of children per woman has dropped from 5.9 in 1950-1955 to 3.4 in 1985-1990. The modernization process inherent in today's new development styles has opened up new vistas for women through education, gainful employment, shared codes of communication and the spread of pro-choice models. The question which arises is whether all this will help to alter traditional power relationships, permit the formation of new types of links between the public and private spheres of activity, and promote more equitable interpersonal relationships, especially between men and women.
I

Women and changing production patterns with social equity

Strictly speaking, the status of women should no longer be studied as a separate topic within the broader subject of population, since all population variables affect women and vice versa: human reproduction, population shifts, economic and social development, and the cultural, ethnic and generational aspects of population. In practice, however, there are at least two reasons for doing so: to heighten concern for Latin American and Caribbean women in areas that are essential to the aim of greater social equity and in which women occupy a subordinate position despite their obviously central role; and to ensure that attitudes that take due account of gender begin to permeate all the various aspects of development, including population.

Today, in addition to sweeping technological change, we are witnessing thorough-going changes in the way our societies—incuding, of course, women and the roles they play—are being perceived. Our thinking and the way we look at things are apparently starting to change. The weakening of the major ideologies that had served up cosmo-visions of the world and the secularization accompanying modern-day life, at least in the Western model, are making room for new theories, cultural models and forms of interpersonal interaction, for a different kind of relationship between the public and private spheres and between economics and ethical considerations, and for a notion of democracy that involves a broader concept of citizenship. Within this new framework, it is essential that we redefine the relationship between gender, modernity and culture.

Any attempt to conduct research on the status of women runs up against well-known problems with regard to the availability of statistical information and the persistent gaps in that information. As long ago as 1979, C. Borsotti asserted that the pivotal questions involved in the formation of an appropriate conceptual framework for analysis and action relating to the status of women and their integration into development were: the exact definition of the type of social entity that women constitute; the links between domestic units and the overall socioeconomic structure; sexual stereotypes, and cultural patterns (ECLAC, 1979). Although there has been a good deal of progress in each of these areas, much work remains to be done in order to link them up to one another and thereby get to the root of the problems associated with the positions that people—both men and women—occupy in society, including their empowerment or lack thereof within a context of changing production patterns with social equity.

There is a great difference between the de jure and de facto situations with regard to equality for women in the region, despite the fact that the instruments and mechanisms established by the United Nations for the advancement of women have been ratified by all the countries of the region except one.

By definition, ECLAC’s proposal for changing production patterns with social equity, which advocates the concertation of strategies and consensus-building as an avenue to development within a democratic framework, incorporates the principle of respect for individuals’ civil rights, including, of course, women’s rights to participate in society and in the sharing of power on an equal footing and to have children or not, according to their own personal convictions. The effort to change production patterns with social equity, including cross-gender equity, takes the most innovative schools of current thought and incorporates into them ethical considerations which will contribute to the formation of the desired types of societies.

In this setting, population policies and gender-based considerations can play a new and different role in the region whereby they may help ensure that the long-standing tension—and even conflict—between State policy and the rights of the individual gives way to a form of complementarity. Progress in this regard has not come easily. Although it is generally agreed that rapid population growth hinders development, policies designed to regulate that growth—and especially those relating to fertility—have always involved certain political, ideological and religious values. In
fact, human reproduction is perhaps the subject in which we see the most complex entanglement of the most intimate and private affairs of the individual with the overall views of society.

The way in which women's issues have evolved has also entailed similar tensions at various points along the way; at present, a debate is in progress on the limitations of the concept of the "integration of women into development", which seemed a natural framework for consideration of these issues. Some contend that there has been no conceptual integration and that women's issues have, as a rule, been an "add-on" to the main development issues. It is also asserted that measures designed to "integrate" women have often only increased the marginalization both of the subject and of women themselves, and furthermore it is noted that, although the approach used thus far has indeed brought out many essential aspects of the situation, it suffers from major theoretical shortcomings: no matter how broadly the concept of development may be defined, the economic indicators used to measure it will invariably refer to the production of goods, and women's preponderant contribution to reproduction and to such other unpaid "services" as health care, food preparation and child-rearing will therefore remain invisible (Elson, 1991).

The predominant line of reasoning on this point today is that women are in fact an integral part of society, so that what must be done now is to improve their status in it, not only in terms of the position they occupy within society by virtue of the socioeconomic stratum to which they belong, but also as regards their culturally-assigned social role as women. It is now recognized that it will not be possible to achieve development, in the broad sense of the word (i.e., in ways that go beyond economic growth), unless an improvement is made in the social status of women (United Nations, 1992).

Although we cannot yet say that gender-based analysis now constitutes an adequately systematized body of theory, the large number and wide variety of studies conducted in recent years have generated new information about the status of women and their position within society. Studies specifically on women, as well as the attempts being made to formulate a theory of society capable of describing and explaining subordination as a cultural trait, have made significant contributions (although much remains to be done) to our pool of information on the status of women and our understanding of this subject. For example, gender concepts and categories are sometimes used with reference to both men and women alike, while on other occasions they are used merely as synonyms for "sex" or "women" rather than to refer to a complex social construct. However, studies of social status from a gender perspective as well as analyses of social relations or the theory of power structures have helped not only to provide more information about women but also to identify more significant types of links between this subject and the more general aspects of society and to delineate those links more clearly. Today, the idea that development affects (either positively or negatively) men and women differently is much more widely accepted and easier to grasp (Portocarrero, 1990).

Organizations within the United Nations system, especially those with mandates that specifically concern women, have also been making major theoretical and practical efforts in recent years to incorporate the gender dimension into their activities.

Emphasis has been placed on the above aspects here because they have played such an important role in the conceptual maturation of the approach taken to women's issues and in the consensus that is being built in this regard. The variety and depth of the proposals put forward, the sum of the activities conducted, the strengths and weaknesses of the concept of women's integration into development, the incorporation of the dimension of gender, and the idea that women's issues should be included in more global processes provide a solid foundation for efforts to begin designing more fully integrated policies. This emphasis on the importance of examining the agreements reached in respect of women's issues and seeking to strengthen them still further should not, however, be construed as an attempt to play down the theoretical, political, value-based, religious, ethnic or other types of differences that undoubtedly exist and will inevitably continue to do so in the future.

Finally, the great majority of women who are in vulnerable positions within society should be accorded priority attention. Women heads of household, teenage mothers, refugee and displaced women, women migrants and older women are perhaps the most vulnerable of these groups, as they live under conditions of poverty, are open to all types of harassment and discrimination, and are unable—either in relative or absolute terms—to obtain proper education, suitable jobs or training or, in most cases, to exercise their reproductive rights.
II
The regional setting

The changes which have taken place in the region in the space of just a few decades have totally transformed Latin America’s economic, sociopolitical and cultural profile as well as its patterns of personal and political relations. We might say that there has been a change not only in the objective situation but also in the way we look at it. The long, severe crisis of the 1980s made it necessary to “re-think” the future, which was seen to be fragile and uncertain, and to interpret reality on a new basis. Within this context, the ECLAC proposal for changing production patterns with social equity has provided a framework that is flexible enough to incorporate due consideration for matters of concern to women, including the issue of equity between the sexes and the need for more solidly-based measures, more fully integrated into general and sectoral public policy (ECLAC, 1990b).

These changes have significantly affected the status of women in Latin America and the Caribbean. Women’s increasing presence in education and the labour force, the legal consolidation of their citizenship through women’s suffrage, and the growing social acceptance of women in politics and public life are changes whose impact transcends economics and politics and is beginning to be reflected in new cultural patterns. The increase in life expectancy—which gives women what almost amounts to another whole “lifetime” after their child-bearing and child-rearing days are over— and the greater availability of birth control methods have given Latin American women new life choices and opportunities for exercising their rights more fully than in the past. Although the Latin American and Caribbean region is very heterogeneous and exhibits striking national differences that have a significant effect both on the status of women and on the pace of change, the direction of change appears irreversible (ECLAC, 1990a), and its impact on the women of the region goes far beyond what the figures have to tell us. The possibility of separating sexuality from reproduction and choosing, with some degree of certainty, whether or not to have children is still a very recent development on the Latin American scene. Although these changes are more apparent among educated, urban middle- and upper-income groups, the pro-choice model has begun to make its influence felt in all sectors of society (CELADE, 1992).

The heterogeneity of the region and the implications this has for democracy pose one of the most formidable and urgent challenges that must be faced today. Although the countries have certain elements in common, each of them has gone through its own particular development process. The coexistence of different ethnic and cultural groups, the different types of policies applied and the varying degrees of modernization attained at more or less early stages of the process have served to form individual profiles and have created a wide range of situations in the region which will surely have to be resolved in different ways by each country.

This heterogeneity is also reflected in varying forms of participation by women. One aspect which should be studied in greater depth is the type of relationship that must exist between women and democracy in order to uphold the rights of the individual and, hence, social equity. Time and time again, the region has seen women band together in opposition to authoritarian governments through social movements and women’s organizations which, however, then tend to become diluted in the course of the democratic process as it is channeled through political parties.

Given the region’s structural heterogeneity, the wave of modernization that is increasingly permeating the regional model is not necessarily linked to democracy or economic growth. New options may lead to more freedom or less freedom; they may heighten economic problems and destabilize democratic processes. Nevertheless, the modernization implicit in those options has at the same time triggered the large-scale entry of women into education, gainful employment, shared codes of communication and the dissemination of pro-choice—or at least different—models. The question arises, however, as to whether modernity helps alter traditional power relationships, whether it makes possible new types of links between the public and private spheres, and whether it contributes to the emergence of more equitable interpersonal relationships, especially between men and women.
III

Women and employment

Employment, together with education and health, has been one of the highest-priority issues for women ever since the United Nations Decade for Women. In addition to placing women within a more global context, these issues influence women's behavior, conditions and position within society and have a major impact on demographic variables, particularly fertility.

The analyses conducted in recent years show that women's increasing participation in gainful forms of employment has become a structural trend that will continue its upward path in the future. During the 1980s, women's participation in the labour market jumped from 18.83% to 22.03%, and they accounted for 37% of the growth in the economically active population during that decade (CIALDE, 1992).

The increased economic activity of women has been a significant factor in the expansion of employment in lower-productivity activities, both in small businesses and in informal enterprises; this is largely a result of the big and mid-sized companies' tendency to subcontract work to small businesses, rather than hiring permanent or temporary staff, as a way of getting round labour laws.

In La Paz, for example, a growing number of women are engaging in own-account commercial microenterprises as part of their survival strategies; these businesses are often run out of their own homes or in open-air markets and city streets, and they mainly involve the sale of products (especially food) included in the basic shopping basket; the intense competition within this sector tends to hold down income levels, particularly in the case of most street vendors (Silva, 1988). In Jamaica, a very large percentage of own-account workers are women who work as vendors of farm produce, street vendors or illegal traders; the women of Jamaica's informal sector are generally middle-aged, of rural origin (although they are becoming increasingly urbanized), and work alone, with very little help from their families (Mesa-Lago, 1990).

It is often said that employment influences women's fertility rates, gives them greater autonomy, boosts their self-esteem, helps to make them economically independent, gives them a sense of their worth as individuals and permits them to exert control over their own bodies. The foregoing is true in conceptual, theoretical terms, within the context of what Marshall Wolfe called "significant activities"; but in the case of Latin American and Caribbean women, the difficulties entailed in the types of employment to which they have access must not be underestimated.

Moreover, some authors contend that in the developing world there are enormous differences between the environments in which women perform their productive and reproductive roles, and this plays a part in determining how they will interact. A woman's educational level - especially if it is high - has a strong influence on the types of job opportunities open to her. In heavily biased societies, women mainly participate at the two extremes of the spectrum: in the modern sector, and in the most poorly paid segments of the domestic-service and informal sectors. Another highly influential factor in terms of the options open to women has been the fact that their work outside the home must be compatible with their child-rearing responsibilities, and this also continues to influence (although to a diminishing extent as time goes by) cultural attitudes to working women.

The work performed by women - whether paid or not - continues to be underestimated by official statistics because of the types of positions occupied by women in the labour force, the way in which economic activities are defined, and certain aspects of census-taking procedures, all of which are linked to cultural assumptions regarding the sexual division of labour. Although efforts have been made to rectify this state of affairs since the very outset of the United Nations Decade for Women, little has been achieved in this connection except a greater awareness of the problem. A recent study on the subject found that the types of censuses usually conducted in Latin America provide reliable data on the male labour force but that much of the information they supply regarding the female labour force is unreliable, especially in rural areas of the least developed countries. Using the same
definitions of economic activity as those used by the censuses, but with certain procedural modifications, this study was able to show that five-sixths of peasant women and one-half of urban women were under-represented, while only one-tenth of the men were affected by this statistical flaw. Other studies based on the number of hours worked have found that women in developing countries work between 12 and 13 hours per week than men (Wainermann, 1992).

On the subject of wage discrimination, the most recent household surveys for six countries of the region indicate that during the second half of the 1980s the incomes of women with nine years of schooling were lower than those of men who had attended school for only five years. Another study found that, although economically active women in Latin America and the Caribbean have had more schooling than their male counterparts, their rising levels of education and of employment in non-manual activities have not brought any improvement in their incomes (Sojo, 1992). The same author also asserts that women's higher employment rates should be considered in the light of striking differences in wages and discrimination, and that these factors are more marked among older women and, in every case studied, increase in severity as one moves up the educational scale.

IV

Women and education

The region's enrolment rates continue to rise, and the male and female rates are tending towards parity. At present, over half of the young women between 15 and 19 years of age have completed their elementary education. In 1985, women accounted for about 45% of enrolment in institutions of higher education, and they outnumbered men in this respect in 45% of the countries, but in contrast, illiteracy among the female population in rural areas continued to fluctuate between 19.2% and 48% in that same year. The distribution of women among the various fields of study has changed very little; although the percentage of women in engineering-related courses of study climbed to 8% in 1985, the figure for the social sciences and teaching fields still ranged from 60% to 70%. Women have less chance of attaining high academic positions, and they must have had more years of formal education than men in order to gain access to the same jobs. As mentioned earlier, wage discrimination is reflected in the fact that in order for a woman to earn as much as a man, she will need to have about four more years of formal education than her male counterpart; this wage gap narrows as one moves down the educational scale. Finally, despite the many changes that have occurred, school textbooks continue to transmit images that highlight women's role in the home, thereby working against the formation of a broader perception of women's roles and, hence, discouraging women from attempting to participate on an equal footing with men.

The figures still show in no uncertain terms that education exerts a very strong influence upon demographic trends, since it affects the variables which produce demographic changes. The population's rising level of education and the improvement of its living conditions have played a pivotal role in bringing down the rate of infant mortality. Studies on the link between a mother's educational level and the variables of fertility and infant mortality have found an inverse relationship in every case. It is generally agreed that education affects reproductive behaviour by, in particular, influencing the formation and spread of attitudes, values and beliefs having to do with what is viewed as being a desirable family size. In the region it has been observed that more highly educated women tend to marry later and usually have fewer children. Education must not, however, be regarded as the only policy tool in this field, because its immediate effects are not known, depending as they do on the content of the instruction received and on interactions with the rest of the social system.

There are some indications that the influence of education may be declining, while at the same time the significance of education in itself and its efficacy as a factor of upward social mobility seem to be changing. As the educational system's coverage...
expands, higher and higher levels of education are needed in order to open the door to a better job and standard of living. Education’s influence on fertility may also have been weakened by such factors as increased knowledge of and access to contraceptives and the information provided by the social media. It must also be borne in mind that the region has already experienced a very substantial decrease in women’s fertility rates, and that education has probably had a great deal to do with that drop. What is happening is that the fertility rates of less educated women are now falling as well, which makes the differences of magnitude seem less striking.

It should be remembered that, in the region, the large-scale entry of women into education took place between 1950 and 1980. During this period, there was a steady expansion of the formal educational system, scientific and technological research capabilities, and vocational training, side by side with rapid urbanization and a huge increase in women’s participation in the labour market. Even though the expansion of the formal educational system was a regionwide phenomenon, it only heightened the existing heterogeneity and was not accompanied by any improvement in the quality of instruction; this was reflected in some of the highest repetition rates in the entire world (46% in first grade). The decline in the quality of education, which became even more marked in the 1980s, was due, inter alia, to poor living conditions, a deterioration in the supply of teaching services, cuts in government spending on education, and the use of outdated curricula.

All this indicates that a major effort should certainly be mounted to upgrade the quality of education in the region. This initiative should go beyond the mere question of coverage and seek to determine just how suitable the type of education being given today will be for the kind of society that will take shape in the near future. Changes in production paradigms and our increasingly globalized world view call for a very different type of education from that given today, which is mainly geared to the needs of the past rather than the needs that are likely to exist in the twenty-first century. Flexibility, know-how, mental breadth, continuing education, independence and creativity will be essential components of this new kind of education.

The new educational strategy proposed by ECLAC and UNESCO calls for educational reform, the building of a consensus among all the relevant actors in the public and private sectors, strategic coordination in combination with decentralization and, as regards content, a guarantee that future generations will enjoy universal access to the codes of the modern-day world, the formation of an open institutional structure and the promotion of creativity. In order to accomplish this, the whole of society will have to make a financial commitment and accord high priority to the promotion of regional cooperation in the field of education (Ottone, 1991).

Within this context, education is a key factor in helping women to gain a different kind of place for themselves in society, and it is essential that the substance of the educational process should be redesigned so as to promote more equitable interpersonal relations. The influence of women’s educational level on their fertility rates, the quality of their children’s lives and their job opportunities has been well documented. However, thus far little thought has been devoted to the type of education demanded by the models of the future—i.e., a participatory, flexible, non-hierarchical, non-authoritarian form of education capable of eliciting change and inspiring creativity, innovative thinking and initiative. Latin American and Caribbean women have had experiences of this type only in the context of women’s movements, women’s organizations or psychological counseling. An education of the sort proposed by ECLAC and UNESCO could prepare them much better not only to obtain new types of jobs, but also to develop greater decision-taking capabilities and attain greater autonomy and freedom in all areas of their civic and family lives.

In seeking to improve the status of women, two very important aspects must not be overlooked: although during its early stages the content of education as it now stands does encourage the participation of women by giving them access to shared, universal codes, later on it reinforces existing stereotypes regarding women’s role in society and distorts their role within the labour market. Consequently, changing the educational process so that it will not perpetuate sexual discrimination is an essential step in improving women’s place in society.
Health and women’s right to control their own fertility

Women’s health is influenced by their socioeconomic status, biological factors and elements relating to their position and role in society. Their rights should therefore include effective access to health services and to reproductive health aid – i.e., the right to avoid unwanted pregnancies and, on the other hand, to be pregnant and give birth under the safest possible conditions. These rights, which relate to the most intimate aspects of life, must be set forth in public policies and, as part of the democratic process, provision must be made for the people who will be affected by those policies to have a say in their formulation. Demographic changes and a recognition of women’s right to control their own fertility therefore have important implications when health is defined as a harmonious balance of an individual’s physical and psychological functions that is closely related to the basic conditions under which that individual lives.

1. Demographic change

Demographic statistics have perhaps been the clearest indicators of one of the major changes that occurred in women’s lives during the 1980s: notwithstanding the existence of differences between and within countries, these figures show that, in general, during that period women were in the midst of a phase of demographic transition marked by declining fertility and mortality. The average annual population growth rate during the 1980s was 2.0%, and estimates show it falling to 1.7% during the 1990s; this means that the average number of children per woman dropped from 5.9 in 1950-1955 to 3.4 in 1985-1990, with the lowest fertility rates being those of the most highly educated urban women (CELADE, 1992).

Sharp differences have also been observed among subregions. The lowest fertility rates overall were found in the Caribbean, while the highest were registered in Central America, although Central America also experienced the steepest decrease in fertility rates between 1965-1970 and 1985-1990. The exceptions to the above were the rates for Costa Rica and Panama in the Central American subregion, for Uruguay, Argentina and Chile in South America, and for Haiti in the Caribbean.

The incidence of pregnancy is becoming increasingly concentrated (70%) in the 20-35 year age group. The high-risk groups still form a significant proportion of the whole (25%-30%), with a particularly notable increase among adolescents but a reduction in fertility among older women. In the Caribbean, teenage pregnancies climbed from about 20% of the total at the start of the 1950s to 30% in the early 1980s, but then declined to between 15% and 20% by the end of that decade. It has not yet been determined whether these figures constitute a trend or not, however (Boland, 1992). Multiparity has decreased in the region as a whole, but 50% of all women still have more than four children. There is little reliable information on birth spacing, since figures on abortions are not available (PAHO/WHO, 1990).

It is impossible to determine the precise causes of these changes, since we do not have detailed information about the unwritten rules governing preceding models. The above figures are probably the outcome of a number of different factors, including: i) the birth control policies and programmes implemented in the region over the past few decades; ii) the different form of cultural model that has been spreading throughout the region since the introduction of television, in whose programmes small families are portrayed as the norm; iii) urbanization and the increasing incompatibility between women’s paid and unpaid work, due to the lack of preschool child-care assistance and infrastructure in almost all the countries; iv) the needs and desires of women themselves, who did not participate, either as individuals or as members of organized groups or social movements, in the design or implementation of these programmes.

2. Contraception

The changes that have occurred in respect of human reproduction during the twentieth century have been
overwhelming. Although all cultures have used some form of birth control, it appears that efforts to address this issue have now assumed an entirely new dimension, involving free choice for individuals (particularly women), along with a conscious separation of sexuality from reproduction (that is to say, for women, since this separation already existed in the case of men) and a search for more effective birth control methods.

The possibility of engaging in sex with some degree of certainty that it will not lead to procreation has been an aspiration of people for a very long time. There are a number of mostly qualitative anthropological studies which illustrate these practices in the past. The rhythm method, early withdrawal, abortion, concealed infanticide, abstinence and some forms of condoms were apparently the most commonly used, or at least the best-documented, contraceptive methods in the past, but we cannot determine the scale or significance of their use with any degree of certainty. The large number of deaths (especially among women and young children) caused by plagues, other infectious diseases and childbirth-related complications was the most important, and most dramatic, regulator of population growth. It is interesting to note that, unlike modern methods of contraception, most of which are designed for use by women, some of the traditional systems placed the greatest share of responsibility on the man.

Current figures on contraceptive use in the region reflect striking differences from one country to the next (from 7% in Haiti to 70% in Costa Rica and Puerto Rico). The most recent statistics indicate that over 60% of married women use contraceptives in Brazil and Colombia but less than 30% do so in Guatemala. The main differences stem from such factors as economic stratum, educational level, age, the country’s level of development, and the prevailing kind of health care policy, since contraceptive use is categorized as a health issue. According to some estimates, between the mid-1970s and the mid-1980s contraceptive use rose from 36% to 49% in Latin America.

In the beginning, the issue was highly controversial. Some groups objected to the idea of the region borrowing models of reproductive behaviour from developed countries; others took exception to the implementation of family planning programmes that were contingent upon funding from the “beneficiary” countries themselves. In some circles, the debate revolved around the religious beliefs of the majority of the population; in others, there was concern about the diversity of reproductive behaviour patterns in the region, the indiscriminate sterilization of certain groups of women, and many other questions. There is now an international legal instrument—the Convention on the Elimination of All Forms of Discrimination against Women (United Nations, 1979)—which voices a consensus on the need to ensure free choice for all individuals. In this context, free choice means socially and politically free choice based on a participatory approach and unconditional respect for plurality and differences on the part of all social actors; in other words, it is free choice based on a renewed appreciation for the value of democracy as a political model.

The World Health Organization (WHO) has said that the fact that a woman can now control her own fertility is probably one of the most important events in the history of women (WHO, 1980, p. 13), and the Nairobi Forward-looking Strategies state that a woman’s ability to control her own fertility constitutes an important basis for the exercise of other rights. This is tantamount, at least in formal terms, to an acknowledgement of women’s right to control their own fertility (United Nations, 1985).

Thus, we have moved from a situation in which women’s fertility was controlled in the name of a “higher purpose”, and they played little or no part in decision-making, to a situation where women are—at least formally—free to regulate their fertility. They are also given almost total responsibility for the reproduction of new generations, however. Granted, this is not stated explicitly, but if we take a look at how fertility is currently regulated in the region, we will find that in nearly 80% of all cases it is women who are responsible for contraception (PAHO/WHO, 1990). In fact, more recent data obtained from population and health surveys put the figure even higher (nearly 90%) in some countries.

It should be noted that although the literature on fertility-related behaviour usually talks about the “population”, almost all the available information has actually been supplied by women, since all the health and fertility surveys are directed exclusively at women. It would be of interest at some future date to analyse the significance of a body of information that reflects solely the views of women on an issue which is at once so private a matter, yet at the same time such a subject of public concern as is the reproduction of human societies— a question which involves not individuals, but couples.
The contraceptive methods currently in use are sterilization, medication, intrauterine devices (IUDs), implants, condoms and vaginal methods. The traditional systems on which the most statistics have been compiled are the rhythm method and early withdrawal. Obviously, of all these methods, only early withdrawal and condoms place the main responsibility for avoiding pregnancy on men; all the others are the women's responsibility. Another way of regulating fertility that is used in the region is abortion, which will be discussed later.

The most widely used of all of these systems in Latin America, as well as in the other developing countries, during the past decade has been the sterilization of women, which as of 1983 was applied to 36% of the women with active sex lives who were seeking to regulate their fertility (PATH/WHO, 1990). In fact, more recent figures indicate that in some countries of the region the rates are now far higher than that 1983 regional average, with the Dominican Republic, El Salvador and Brazil registering sterilization rates of 65.8%, 63.8% and 40.4%, respectively, of the total number of female contraception users. Male sterilization has begun to have some impact, but in Latin America (with the exception of Puerto Rico, where the figure has reached 4%) the rates have remained below 1%, so that they do not even begin to measure up to female sterilization rates.

Given these figures, the question arises as to whether sterilization as a means of limiting the number of children is a contraceptive method comparable with those which only seek to space out births. It is true that, in terms of risk and under appropriate conditions, sterilization is a relatively more economical method, since it involves a single one-time cost; in addition, it affords complete security and probably has no physical side effects. However, in view of the fact that this method's use has become so widespread among fertile women with active sex lives, we might ask ourselves whether this irreversible decision—the facts show that it is indeed irreversible for the great majority of sterilized women—actually represents the result of true freedom of choice. It is one thing for a woman who is exhausted by the double workday with which she is saddled when she is raising her children—as is the case of the immense majority of women in the region—to express her conscious and definitive desire never to have any more children, and quite another for her to give that "never" a concrete expression, especially within the cultural and social milieu of Latin America and the Caribbean, where these women will continue to live for many years to come. If it were an option chosen only by women whose age exposed them to possible high-risk pregnancies, it would be much more understandable, but most of these women are quite young, in an age group for which the future should hold many more "free choices". It is important for this phenomenon to be analysed in greater depth; it is not simply a question of examining the programmes that are set up or the type of education and information given to women, but rather of determining to what extent they could perhaps envisage using other methods. The best known methods are the so-called "modern" ones, among them the "pill" and female sterilization.

The use of traditional methods has been declining considerably in comparison to modern methods. Although in Bolivia and Peru traditional methods are still the most widespread, in countries such as Colombia and Mexico they account for only a negligible percentage of total contraceptive use. The predominance of modern methods in such countries as Brazil, the Dominican Republic and even Guatemala, which has a low rate of contraceptive use, attests to the impact of the campaigns that have been launched to promote the use of particular methods.

According to recent figures, the demand for contraceptives on the part of women of childbearing age ranges from over 80% (Brazil and Colombia) to scarcely more than 50% (Guatemala). Although a substantial part of that demand is not being satisfied (in Bolivia, 35.2% of the women—mostly rural women and uneducated women—do not have their contraceptive needs met (Westoff and Ochoa, 1991)), the figures none the less indicate that the trend already is and will continue to be one of fewer births or perhaps, in some sectors, even no births at all.

There appears to be a need for a more in-depth study of the concept of demand so that we can determine how it is linked to class, ethnic group and culture and identify women's actual needs. People usually turn to what is most familiar to them, and in order to exercise their right to free choice, women should therefore have genuine access to all the information that has been compiled on the various methods, as well as to the methods themselves. If it is indeed true that a majority of the women in the region wish to limit the number of children they have rather
than simply spacing out those births, then the demand for contraceptives should be greater. This desire is also to be observed among young adult women, who, rather than simply spacing out their pregnancies, want to prevent any future births once they have had the number of children they wish (Westoff and Ochoa, 1991).

Although the subject of contraception has been addressed in many different ways, involving a variety of actors and numerous contradictions—which is why the available information on the topic is so fragmentary—there is clearly a very large and very explicit unsatisfied demand for contraceptives. Contraceptives are, in fact, inaccessible for a large majority of women due to lack of information and the cost of modern methods.

3. Abortion

Today it is generally agreed that abortion is not an acceptable means of contraception; nevertheless, the extent of this practice and its impact in terms of the physical and psychological injury done to many women who submit to this procedure under extremely substandard conditions merit our concern. The outcome of efforts to attain a suitable system of birth control will largely hinge upon a better appreciation of the complexities associated with decisions regarding birth control options, along with assured access to other possibilities. Sexual conduct and reproductive behaviour have sources and implications that go far beyond any single rationale, transcending ideological, geographic, linguistic and religious boundaries (David, 1974).

Induced abortion is one of the issues about which there is least information and most ambivalence. Some experts contend that abortion as a form of birth control is as old as the human race and has probably been practised in all cultures. Throughout history, women have chosen to abort undesired pregnancies, regardless of moral or legal sanctions and, frequently, at considerable physical and psychological risk (David, 1974).

At present, official statistics are available only on legal abortions in countries that have passed laws—starting, for the most part, in the 1930s—to lift restrictions on abortion. There are no reliable figures on illegal abortions, however, and this hinders the formation of informed opinions on the subject. The current laws concerning abortion range from total prohibition to selective authorization at the request of the pregnant woman concerned. About 10% of the world's population live in countries where abortion is illegal; 18% live in countries where it is permitted only if the life of the pregnant woman is in danger; and 39% live in countries where abortion is permitted upon the woman's request.

Unconditional opposition to abortion is a position taken by conservative groups, primarily on religious and moral grounds. Although the Catholic Church has perhaps been the strongest opponent to abortion in the last few centuries, its position is shared by some Moslems, fundamentalist Protestants and orthodox Jews (David, 1974).

Cuba is the only country in the region where abortions are performed as part of government-provided health services. In 1974, Cuba recorded an overall rate of nearly 70 abortions per 1,000 women between the ages of 15 and 44; during the five-year period from 1974 to 1980, that rate dropped by 21% and the number of births fell by 33%, which would seem to indicate increased use of contraceptives. The abortion rate is believed to be higher in other countries and is thought to be on the rise, especially in urban areas (Tietze, 1987).

The circumstances under which abortion is permitted differ from country to country. In the Scandinavian countries, it is allowed primarily for medical, eugenic (including mental illness and hereditary diseases), legal and medico-social reasons. Abortion—during the first three months and under no circumstances after the eighteenth week—is also permitted on demand for women over 38 - 40 years of age and for women who have four or more children living. In the rest of Europe, abortion was restricted until the mid-1970s; thereafter it was permitted, and is now complemented by personal, psychological and family counseling. Interpretations in this regard tend to vary, and the methods employed differ as well. The most commonly used methods are instrumental extraction through the vaginal canal, uterine surgery and medication-induced uterine contractions. In Latin America, legal grounds for an abortion range from specific medical reasons only (for example, if the woman's life is in danger), to narrowly-defined medical reasons, broadly-defined medical reasons, eugenic considerations and, in some countries, legal, social and medico-social reasons (Tietze, 1987).

Interventions by persons with no medical training are particularly common in countries where abortion
is illegal; these include magic spells, traditional medicaments (some of them toxic) and traumatic procedures designed to destroy the embryo or fetus, after which its expulsion is left to nature. The most common method of all is the introduction of a foreign body into the uterus (Tietze, 1987). This type of abortion, usually performed with unsterilized instruments under unhygienic conditions, leads to such complications as hemorrhaging and sepsis which, unless the woman receives proper medical care, can result in her death. Indeed, this is the cause of 54% of all maternal mortality in Trinidad and Tobago, over 35% in Argentina and Chile, and 25% in Uruguay and Venezuela (PAHO/WHO, 1990).

There is a clear lack of adequate legislation in this area to protect women’s physical and mental health, and this is reflected in the statistics on maternal mortality, in the fact that the number of abortions exceeds the estimated figures (illegal abortions are concealed and induced abortions are recorded as miscarriages), and in a whole range of problems mostly associated with certain socioeconomic strata, since well-to-do women in the region are able to obtain abortions under satisfactory medical conditions.

VI

Conclusions

Women’s issues and their relationship to development form part of a sweeping process of change involving modifications in the way the developed and developing worlds relate to one another, a process of economic internationalization of unprecedented proportions, the breakdown of ideological polarization, and a renewed appreciation of democracy as an almost inherent part of human development. All of this is taking place at a time marked by widening disparities between economic and social progress, the exclusion of large contingents of the population from the benefits of that progress, and the physical deterioration of our planet. For women, the basic issue is no longer their integration into development per se, but rather what form that integration should take. This calls for a thorough-going transformation of society, cultural changes, and shifts in the power structure (ECLAC, 1991).

It is inconceivable that a response to the needs of the women of the region today could be given by any one of the social actors on its own. The issues are complex ones, and there is no organization or group in the countries that has all the necessary human and financial resources to do the job. In order to incorporate these issues into global processes and design truly effective policies in support of women, government agencies (including national mechanisms targeting women and sectoral ministries, particularly in the areas of education, labour and health) must join forces with non-governmental organizations, women's movements, research centres, universities and others.

In order to exercise their rights to the full, women need: i) genuine access to health services, information on reproduction and the means of planning their reproductive behaviour in accordance with their own beliefs; ii) consideration for the various stages of their life cycle; iii) a type of education that prepares them to participate in society on an equal footing as full citizens; iv) changes in the content of formal education and access to informal education, particularly with respect to training; and v) employment free of wage discrimination and of restrictions on access to certain areas of production.

Policies that have population-related impacts are more complex than other sorts of economic and social policies because they affect the private lives of individuals. They have more intimate emotional and affective components, and are heavily charged with cultural elements having historical, religious and ideological overtones. A process of change is therefore needed in order to ensure that reproduction—which has obviously always been a shared endeavour for men and women in biological terms—will also be a matter of shared concern to men and women in respect of the decision to have children and the care of, responsibility for and rearing of those children.
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