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AND YOUTH IN NATIONAL DEVELOPMENT

Jointly sponsored by the Economic Commission for Latin America, the Latin American Institute for Economic and Social Planning, and the United Nations Children's Fund, in co-operation with the International Labour Organisation, the Food and Agriculture Organization of the United Nations, the United Nations Educational, Scientific and Cultural Organization, and the World Health Organization

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SUMMARY
of

the Report Prepared by the Government of Uruguay

Introduction

Uruguay has a total population of 2,592,563 inhabitants. The average population density is 14.2 inhabitants per sq. km., but there are considerable variations which go from 4.3 inhabitants per sq. km. in some live stock raising areas to 2,276.5 inhabitants per sq. km. in Montevideo itself.

Only 28 per cent of the population is under 15 years of age,

The birth rate of 21.5 per thousand is one of the lowest in the continent.

The death rate is 9.0 per thousand; infant mortality was 46.6 per thousand in 1960 and has increased slightly.

There is a trend toward migration to urban centres.

The population growth is estimated at 1.25 per cent per annum.

39.2 per cent of the population over 10 years of age is economically active; in 1963 the average per capita income was approximately US\$ 600 per annum.

/Housing

Housing

In 1963 there was an 85,000 dwelling deficit, this figures including dwellings at present inhabited but which should be replaced. Since then low building rates have increased the backlog by some 12,000 dwellings.

Health and nutrition

There are no serious nutritional deficiencies; those which exist are due to ignorance and not to lack of food. If anything, the calory content of the diet is high, but low consumption of certain items and lack of dietary education are responsible for the lack of some vitamins to be found in vegetables.

Tuberculosis has declined and all new born infants receive BCG inoculations.

Typhoid has also decreased, largely as a result of the Rural Public Health Programme.

Syphilis, which was decreasing until 1961, has lately shown an increase of primary cases. Congenital syphilis is extremely rare.

Diphtheria, which as a serious problem has ceased to constitute one.

Measles continues to be a serious disease and an important cause of mortality, largely due to respiratory and encephalic complications.

Pertussis still presents a problem though with inoculations it is declining.

Polio has fallen off considerably and the greater part of the susceptible population has been inoculated.

Small-pox is virtually non-existent and vaccination is compulsory.

Hydatids and Chagas disease still exist and affect a fair number of children.

An increase in congenital heart malformation has been noted, and the proportion of heart disease resulting from rheumatic fever is still a cause for concern though it has declined in the last decade.

Goiter, which is endemic in some areas, particularly in the North, is being taken care of by legislation on the marketing and consumption of iodized salt.

/Education

Education

In Uruguay public education is free at all levels; 95 per cent of the school age population is enrolled in the system. The illiteracy ratio, 8.7 per cent is the lowest in South America.

According to 1961 figures, 23.2 per cent of the national budget was spent on education, which is equivalent to 3.6 per cent of the G.N.P. These figures only represent the expenditure of the public sector, but it should be borne in mind that there are many private establishments of primary, secondary and technical education.

Primary level. This is compulsory 6 year cycle which has a 95 per cent enrolment. 92 per cent of teachers are trained and the ratio is one teacher to 31 pupils. There is no significant absenteeism but the ratio of failures is high (26 per cent). This leads to drop-outs at 12 or 13 years, such children having attended school for 5 or 6 years but failed to complete the primary level.

It is estimated that 3,100 more classrooms are needed throughout the country.

Secondary level. This comprises two cycles: "liceal" (middle level) lasting 4 years and "preparatorio" (high school) lasting 2 years. Registrations have increased fourfold over the last 20 years. This has led to a shortage of equipment and classrooms: existing establishments operate on a 3 or more shifts basis; it has also resulted in a shortage of teachers qualified to offset the low cultural level of the homes from which many children come (children of the lowest strata are increasingly enrolling in secondary education).

Technical education. This level has a far lower standard than secondary education and also suffers by the lack of social prestige of its graduates. There is a high drop out ratio (35 per cent) and only 6.6 per cent of students graduate.

Higher education. There are no private Universities in Uruguay, which is exceptional for Latin America. The University is traditional in nature and there is little interest in technical professions. Only 25 per cent of enrolled students graduate. Scientific training is inadequate. Most professors only attend on a part-time basis.

In general one of the greatest deficiencies of education lies in the fact that curricula take little notice of the country's job possibilities or developmental needs, and therefore do not prepare students for after life.

/Protection

Protection

Juvenile delinquency figures, as established by a 1952 survey, are very low, and do not constitute a problem. Lately it has decreased considerably.

There is a very low proportion of physically deserted children, but a high proportion of morally neglected children, due to divorce, separation and other types of family conflicts.

Migration to urban areas has led to suburban shanty towns ("Cantegriles"); shanty towns known as "Pueblos de ratas" also exist on the outskirts of large cattle stations; all are schools for precocious vice, and an effort must be made to solve the problem.