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**A REVIEW OF SOCIAL DEVELOPMENT IN THE CARIBBEAN
IN THE NINETIES
WORLD SUMMIT FOR SOCIAL DEVELOPMENT (WSSD)+5**

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A REVIEW OF SOCIAL DEVELOPMENT IN THE CARIBBEAN IN THE NINETIES – WSSD+5

Introduction

Five years have passed since the World Summit for Social Development took place in Copenhagen. There, at the invitation of the United Nations, Heads of State and Government gathered to consider and define the goals of social development and human well being and to give these goals the highest priority. The Summit, which was held from 6 to 12 March 1995, made the following important commitment:

"...eradicating poverty in the world, through decisive national actions and international cooperation, as an ethical, social, political and economic imperative of humankind; focusing on policies to address the root causes of poverty, giving special priority to the rights and needs of women and children and other vulnerable and disadvantaged groups."

Among the agreements made by the world's leaders in the Copenhagen Declaration and Programme of Action are the following 10 major commitments:

Commitments

1. Create an economic, political, social, cultural and legal environment that will enable people to achieve social development.
2. Eradicate poverty in the world, through decisive national actions and international cooperation, as an ethical, social, political and economic imperative of humankind.
3. Promote the goal of full employment as a basic priority of economic and social policies, and to enable all men and women to attain secure and sustainable livelihoods through freely chosen productive employment and work.
4. Promote social integration by fostering societies that are stable, safe and just and that are based on the promotion and protection of all human rights, as well as on non-discrimination, tolerance, respect for diversity, equality of opportunity, solidarity, security, and participation of all people, including disadvantaged and vulnerable groups and persons.
5. Promote full respect for human dignity and to achieve equality and equity between women and men, and to recognize and enhance the participation and leadership roles of women in political, civil, economic, social and cultural life and in development.

6. Promote and attain the goals of universal and equitable access to quality education, the highest attainable standard of physical and mental health, and the access of all to primary health care, making particular efforts to rectify inequalities relating to gender, age or disability; respect and promote common and particular cultures; strive to strengthen the role of culture in development; preserve the essential bases of people-centred sustainable development; and contribute to the full development of human resources and to social development.
7. Accelerate the economic, social and human resource development of Africa and the least developed countries.
8. Ensure that when structural adjustment programmes are agreed to, they include social development goals, in particular, to eradicate poverty, promote full and productive employment, and enhance social integration.
9. Increase significantly and/or utilize more efficiently the resources allocated to social development in order to achieve the goals of the Summit through national action and regional and international cooperation.
10. Obtain improved and strengthened framework for international, regional and subregional cooperation for social development, in a spirit of partnership, through the United Nations and other multilateral institutions.

Following the Copenhagen Summit, steps were taken by the entire United Nations system to support national governments in their efforts to implement this agenda. Several meetings and inter-sessional reviews were held, both at regional and national levels. Two conferences are worthy of note. The First Regional Conference in Follow-up to the World Summit for Social Development was held in Sao Paulo, Brazil, from 6 to 9 April 1997. This conference was attended by 11 Caribbean countries: Barbados, Belize, Cuba, Dominica, Dominican Republic, Haiti, Jamaica, Netherlands Antilles St. Kitts and Nevis, Saint Lucia and Trinidad and Tobago. The Caribbean Subregional Review of WSSD+5, held in Port of Spain, Trinidad and Tobago, 2 September 1999 was also well attended by member countries, agencies and NGOs. In addition, the Preparatory Committee for the Special Session of the General Assembly on the Implementation and Outcome of the World Summit for Social Development and Further Initiatives continues its work, drawing on inputs from regional and subregional assessments and meetings.

This document describes different facets of social development in the fields of health, education, crime and violence, drugs and migration faced in the subregion. It should be recognized that many contemporary social problems are global in nature and are shared by many countries, with their solution requiring concerted and well-coordinated efforts on the part of governments, civil society and the international community at large.

Demographic factors

In most Caribbean Development and Cooperation Committee (CDCC) countries the average annual growth rates decreased consistently during the last half of the twentieth century. Exceptions to this trend can be witnessed in four Caribbean countries, namely Haiti, the British Virgin Islands, Saint Lucia and Puerto Rico, which show increased growth rates in the decade of the nineties. (See Table IX and Annex, Table 3).

Table I
CDCC Countries with estimated increased annual growth rate (1950-2000)

Country	1950-1960	1990-2000
British Virgin Islands	1.54	2.72
Haiti	1.54	2.05
Puerto Rico	0.61	0.88
Saint Lucia	0.85	1.34

Source: CELADE, Santiago 1992

The population of older persons is on the increase in the Caribbean. This group which comprised 6.9 per cent of total population in 1950 will increase to 10.6 per cent by the year 2005. In 1997 the 65+ population comprised 11.3 per cent of total population in The Bahamas, 11.1 per cent in Barbados, 9.2 per cent in Cuba, 9.1 per cent in Jamaica and 6.4 per cent in Trinidad and Tobago. (Population growth statistics appear in Annex, Tables 7, 8 and 9).

Life expectancies are lower than 62 years of age in Guyana and Haiti and over 70 in the other Caribbean countries.

a. The economic scenario

Growth in Gross Domestic Product (GDP) is one of the more important indicators of a country's economic development. During the nineties most Caribbean economies showed modest growth in the GDP.

Table II
GDP growth rates (constant prices) for selected countries

	1993	1994	1995	1996	1997	1998
Anguilla	7.5	7.1	-4.1	3.5	9.2	5.5
Antigua & Barbuda	5.1	6.2	-5.0	6.1	5.6	3.9
Aruba	...	...	...	5.7	3.9	3.0
Bahamas	...	1.7	...	0.9	0.3	4.2
Barbados	...	3.8	2.9	5.2	3.0	4.4
Belize	4.3	1.5	3.8	1.5	4.0	1.4
British Virgin Islands	5.7	13.6	10.4	10.4	7.8	6.7
Cuba	...	0.7	2.5	7.8	2.5	...
Dominica	1.9	2.2	1.6	3.1	2	3.5
Dominican Republic	...	4.3	4.8	7.3	8.2	7.5
Grenada	-1.2	3.3	3.1	2.9	4.2	5.8
Guyana	...	8.5	5.1	7.9	6.2	...
Haiti	...	-8.3	4.4	2.8	1.1	...
Jamaica	...	1.1	0.5	-1.8	-2.4	...
Montserrat	2.5	0.9	-7.6	-21.5	-26.5	-3.3
Neth. Antilles	4.6	5.7	0.5	...	...	...
Puerto Rico	3.3	2.5	3.4	3.3	3.1	3.1
Saint Kitts & Nevis	5.4	5.4	3.5	5.9	7.3	1.6
Saint Lucia	1.1	1.8	1.7	1.4	0.57	2.9
St. Vincent & the Grenadines	1.8	-2.9	8.3	1.2	3.1	5.2
Suriname	-14.7	0.6	-4.6	...	...	...
Trinidad and Tobago	-1.5	3.6	3.8	3.8	3.2	3.6

Source: ECLAC, based on national data

This growth in GDP, however, was unaccompanied by growth in the employment rates in some countries. Consequently, while registering commendable rates of growth, these countries have been troubled by chronically high unemployment rates.¹ In addition, the distribution of incomes is significantly skewed.

Country	Real GDP per capita US\$	Income Distribution (to top 20%)
Antigua and Barbuda	7800	0.525
Bahamas	11233	0.460
St. Kitts and Nevis	5484	0.446
Trinidad and Tobago	6606	0.592

Source: Dr. Edward Greene, PAHO/WHO
Poverty in the Caribbean 1993-1998 data.

¹ Indeed, at the recent substantive session of the United Nations Economic and Social Council (ECOSOC), held in Geneva, 1 July 1999, the major agenda item addressed the role of employment and work in poverty eradication.

Caribbean countries faced the major challenge of reorienting their main economic strategies and programmes to respond to the multi-faceted demands of the global market. The Caribbean policy response to the transformation of production at the international level has been to attempt the integration of Caribbean countries into the global production, trade and financial markets. To this end, governments have increased their efforts to liberalize and diversify the economies. Several countries were able to do this with some success by, for example, diversifying their agricultural economies and embracing the use of technology, increasing trade in services, especially tourism, offshore banking and informatics.

The Caribbean Tourism Organization (CTO) reports that tourism in the subregion is growing. In many Caribbean economies services now account for more than 75 per cent of GDP. Tourism dominates the economies of Aruba, Antigua and Barbuda, Bahamas and Barbados and makes a significant contribution in Jamaica and the Organization of Eastern Caribbean States (OECS). While the industry in countries such as Bermuda, St. Kitts and Nevis and Saint Vincent and the Grenadines has slowed down somewhat towards the end of the decade of the 1990s, other countries such as Cuba and the Dominican Republic have seen increases in tourism revenues. Tourist expenditure has been increasing overall in the Caribbean but the high import content and the limited linkages with other sectors of the economy have reduced the potential benefits to the region. Tourism also has a downside in terms of its effect on the environment and on the price of land. In these areas public policy cannot remain unconcerned. These developments have not been able to significantly address increasing levels of unemployment in the subregion, nor the persistent phenomenon of income inequality. Following the example of the Bahamas, the Netherlands Antilles and the Cayman Islands, some countries have attempted to encourage offshore financial activities with varying degrees of success.

At the Copenhagen Summit as well as in the Preparatory Committee for the forthcoming Special Session of the General Assembly, governments reiterated the need to promote greater coherence between social development policies, on the one hand, and economic development policies, on the other. Despite this concern, disparities between the rhetoric about the mutually reinforcing nature of economic and social policies and the implementation and action remain.

In this vein the 1998 United Nations Children's Fund (UNICEF) study of seven Caribbean countries on the Situation of Children noted deteriorating conditions faced by children and vulnerable families and linked this regression to the failure of current development models to link economic growth to sustainable social progress. The study recommended that the "basic paradigms of economic and social development need to be adjusted to take the problematic issues to the centre of growth strategies".

b. The social scenario

Enabling environment

Governments have been constrained in their efforts to create and foster an enabling environment to support the goal of social development with equity. These constraints were initially caused by fiscal reform and also

Commitment 1
To create an economic, political, social, cultural and legal environment that will enable people to achieve social development.

to a major degree by developments at the global level with trade liberalization which, despite its benefits, had a negative effect on small Caribbean economies.

The processes of change have been very rapid and the global environment is highly competitive. This has placed major stresses upon small Caribbean countries, with peculiarities rooted in size, degree of openness and dependence, history, and cultural and ethnic diversity.

In addition, after a process of economic reform, most Caribbean countries undertook structural adjustment programmes in order to balance their economies, often to the detriment of human well-being and a decent quality of life for all. Social services, for example, have deteriorated in many Caribbean countries. The positive role which social programmes could play in reducing macroeconomic instability is widely recognized, but there is considerable discrepancy between the rhetoric and the practice.

In a continuing quest for stronger and more competitive economies States have found themselves surrendering the lead role as agents of development to the private sector. Private foreign investment is often drawn to the profit potential of export-oriented economies which have been able to sustain high growth rates over a fairly long period of time. However, they do not accept the social responsibilities of this influential new role, nor can they realistically be expected to do so.

To increase public sector savings in some countries, government expenditures were reduced on many fronts and social services and subsidies sharply curtailed. In some instances, wages and salaries were cut and the public sector workforce reduced thus increasing the number of the unemployed. In CuraHao, for example, the fiscal situation had become so tenuous that public sector workers were sometimes in danger of not being paid. One of the several adjustment measures suggested there was a drastic reduction in the number of public sector workers.

Growing social and economic inequalities and the exclusion of a significant proportion of the population from the benefits of economic growth have contributed to the deterioration of the social fabric in the subregion. While some countries experience significant economic growth, high levels of poverty persist.

It is in this socio-economic environment that Caribbean people need to define the type of society that is desirable and then fashion the development model that would realize the vision of sustainable development.

A positive, enabling environment also requires good governance where strong democratic institutions, the rule of law, and transparent and accountable administrative systems prevail.

At a Hearing on Civil Society and Political Partnership in Post LomJ, held in Brussels, 8-10 July 1999, it was noted that civil society should fully participate in the European Union-Asian Caribbean and Pacific (EU-ACP) partnership. This was considered not only an expression of the new democratic quality of international relations but also a reflection of the growing role and responsibility which civil society has been assuming in the development processes at the national

level. The involvement of civil society will improve the effectiveness of development programmes, through more precise targeting, better monitoring of project activities and increased political support, in effect, reinforcing the efforts of the State.

Poverty

The Caribbean Ministerial Meeting on Poverty Eradication, held in Port of Spain in 1996 highlighted not only the impoverishment of new population groups in the Caribbean, but also new forms of poverty and the further intensification of poverty among those already poor.

Commitment 2

To eradicate poverty in the world, through decisive national actions and international cooperation, as an ethical, social, political and economic imperative of humankind.

The United Nations Development Programme (UNDP) Human Development Report of 1999 ranks Haiti as the country with the lowest level of human development in the Caribbean. The country finds itself in a poverty trap rendered difficult to overcome as the situation is compounded by ecological degradation, rising levels of crime and interpersonal violence, human rights abuses, a massive exodus of people and human degradation with physical, social and environmental expression.

Table III
Lowest level of development expressed by HDI

Countries	Rank World	Rank CDCC
Haiti	152	16
Guyana	99	15
Dominican Republic	88	14
Belize	83	13
Jamaica	82	12
Saint Lucia	81	11

Source: UNDP Human Development Report 1997, 1998 & 1999

While there is general agreement that productive employment plays a central role in poverty eradication, the Caribbean reality is that access to productive employment has been very limited, especially in the context of changing production patterns. There is also a significant gap between the kinds of employment available and the nature and quality of skills offered on the labour market.

The main poverty-related issues identified in the subregion include:

- Problem youth
- Destitute families
- Children at risk
- Poor small farmers
- The unemployed
- The new poor (people who became poor through drastic decrease in real income)

- The instant poor (people who suddenly became poor through natural disasters)
- Deficient infrastructure
- Inadequate housing
- Limited access to quality social services

Table IV shows poverty levels towards the end of the millennium in selected countries with Guyana, Belize, Dominica and Jamaica ranking high.

Table IV
Percentage population below the income poverty line
Selected Caribbean countries
1989-1999

Antigua and Barbuda	12.0
Belize	35.0
Dominica	33.0
Dominican Republic	21.0
Grenada	20.0
Guyana	43.0
Jamaica	32.0
St. Kitts and Nevis	15.0
Saint Lucia	25.0
St. Vincent and the Grenadines	17.0
Trinidad and Tobago	21.0

Source: UNDP Human Development Report 1999

Although governments committed themselves to set specific targets for the eradication of poverty, few countries have actually done so. Compounding the problem is the fact that several Caribbean countries have low levels of social expenditure because of the need to service debts to international lending institutions.

Poverty assessments at national level have been conducted in several countries of the subregion. (See Table IV). Others are preparing to conduct poverty assessment exercises soon. Such national assessments have provided a wealth of data on the nature, location and issues of poverty. Where there is a standing practice of conducting surveys of living conditions, the measurement of poverty and/or related action is greatly facilitated, for example, in Barbados, Jamaica, and Trinidad and Tobago. Jamaica, in addition, drew up a Poverty Map post-WSSD.

In Saint Lucia the "Poverty Reduction Fund Act 1988" was enacted to improve the existing Basic Needs Fund. Indeed, specific action aimed at poverty eradication has often taken place through the creation of special funds to address poverty-related issues. Funding programmes have been instituted for physical infrastructure, micro credit, training, small business initiatives, also, on occasions, for community and intersectoral workshops, pilot studies, improvement of data and data collection, etc.

The question of gender-based poverty has surfaced at many forums. It has been suggested that the study of gender disparities provides a good yardstick for measuring how women and men benefit to different extents from services. Gender analysis reveals that men and women have been unequally affected by problems of poverty, to the detriment of women in most cases. In addition, some of the negative differences for women are peculiar to the nature of gender relations and the status of women in Caribbean society. For example, in terms of access to housing, a female head and a male head of household may both secure housing, but invariably, the woman supports a larger household than her male counterpart.

Labour participation of women is characterized by higher levels of risk, a smaller range of occupations available, lower wages paid, and limited non-wage benefits compared to men. An International Labour Organisation (ILO) report noted that in the private sector, wages for women are 33 per cent less than wages for men and that male agricultural workers are paid more than female agricultural workers, despite existing legislation for equal pay in some countries.

One issue which is seldom considered in analyses of productive employment is the fact that women have less time available to work in the productive sector than men do. Deterrents, such as child care and reproductive responsibilities, poor access to transportation, home duties, account both for the smaller wages which women receive as well as for the inability of some women to pursue other income-generating activities or training which might open further career opportunities.

Employment

At this time, the possibilities of creating productive employment in the Caribbean, as well, depend in a significant way upon improved and expanded education and training, enhanced quality of work and the opening of opportunities for people who although part of the labour force, have special needs. There is also the need for wider understanding of the differences between work and paid employment in Caribbean societies, where many more people work in the formal sector than are reflected in the numbers of the employed.

Commitment 3

To promote the goal of full employment as a basic priority of economic and social policies, and to enable all men and women to attain secure and sustainable livelihoods through freely chosen productive employment and work.

Nonetheless, unemployment continues to be a problem in the subregion, with 30 per cent or more of young people being unemployed and the participation of women in the work force remaining lower than that of the male labour force. Table V shows the unemployment rate for selected countries for 1990 and 1997 and Table VI illustrates changes in the levels of unemployment.

Table V
Unemployment rate of selected Caribbean countries
1990 and 1997

Country	Unemployment Rate	
	1990	1997
Antigua and Barbuda	6	n.a
Bahamas	15	10
Barbados	23	14.5
Belize	10	13
Dominica	n.a.	23
Guyana	12	n.a
Grenada	14	17
Jamaica	15	16
Saint Lucia	17	20
St. Vincent & the Grenadines	20	n.a.
Suriname	14	10
Trinidad and Tobago	19.6	15

Source: ECLAC Document WSSD 99/4, August 1999

Table VI
Changes in the levels and rates of
unemployment in selected Caribbean countries between
1993 and 1998

Country	Levels of unemployment	% increase or decrease in the rate
Bahamas	Decrease	-47.3
Barbados	Decrease	-46.5
Belize	Increase	45.9
Jamaica	Increase	7.1
Neth. Antilles (Curacao)	Increase	20.1
Saint Lucia	Increase	35.8
Suriname	Decrease	-25
Trinidad and Tobago	Decrease	-27.6

Source: ECLAC Document WSSD 99/4, August 1999

Social integration

The formulation of policies and programmes promoting the integration of vulnerable groups into the development process is hampered by the absence of relevant data and, therefore, absence of sustainable remedial action. Policies are inadequate, action often incomplete and without sustainable results while targeting is deficient. The often assistential approach to programmes and projects has limited the realization of the goal of a "society for all".

Commitment 4
To promote social integration by fostering societies that are stable, safe and just and that are based on the promotion and protection of all human rights, as well as on non-discrimination, tolerance, respect for diversity, equality of opportunity, solidarity, security, and participation of all people, including disadvantaged and vulnerable groups and persons.

Despite commitments made at the Social Summit with regard to social integration, there are several emerging challenges, such as the increasing incidence of HIV/AIDS and abandoned street children, domestic violence, marginalization of boys and male youth and their absence from secondary level schools. Vulnerable groups identified in Caribbean societies therefore include the disabled, older persons, the HIV/AIDS infected, problem youth, children at risk, poor women, battered women, boys and young men, and the few minority populations of indigenous peoples.

Disabled persons in Caribbean society, typically, are confined to the home since physical access to public facilities remains a problem. Public buildings continue to be built without infrastructural provisions such as ramps. This adds to the degree of dependency of the disabled on relatives or other persons to assist in instances where they might otherwise be able to help themselves.

The population of older persons is projected to rise to 10.6 per cent of total population by the year 2005. (ECLAC, 1999). This demographic change has consequences for income security, health care and social services, and intergenerational relationships.

Crime and violence

Homicides, drug-related offences and rape are among the crimes reported most often. Table 1 (see Annex) illustrates for selected countries.

The 1998 UNICEF study on the state of children in the Eastern Caribbean found a correlation or connection between early education failures, on the one hand, and limited coping skills and an early entry into lives of crime and drug abuse, on the other. Juvenile crime and drug abuse profiles indicate that children who have been failed by the education system appear to have limited conflict resolution skills, life skills or entrepreneurial skills to provide for their needs. Several countries in the subregion report increasing numbers of incarcerated young criminal offenders.

Table VII
Crime statistics for selected CDCC countries 1994

Country	Intentional Homicides per 100,000 people	Drug Crimes Per 100,000 people	Recorded rapes (thousands)
Bahamas	85.5	282.6	0.2
Barbados	11.8	217.7	0.1
Guyana	18.0	252.4	0.1
Jamaica	27.1	231.1	1.1
St. Vincent and the Grenadines	9.8	...	...
Trinidad & Tobago	6.8	244.0	0.2

Source: UNDP Human Development Report 1999

Apart from drug and other crime-related violence, violence against women and domestic violence have been on the increase, as well, in several member countries. In Trinidad and Tobago for example, the number of murders resulting from domestic violence has increased between 1996 and 1998. (See Table VIII).

Table VIII
Murders in Trinidad and Tobago resulting from domestic violence

Year	No. of victims	Per cent Female	Per cent of Females killed who were spouses	Per cent of Perpetrators male
1996	16	75	50	87.5
1997	12	83.3	50	83.3
1998	23	60.8	39.1	82.6

Source: ECLAC document LC/CAR/G.583

Drugs

The small size of most Caribbean countries, the location of the Caribbean subregion in between the two larger parts of the Western Hemisphere and the intensive traffic of people and goods in the subregion make the subregion prone to drug trafficking. (Griffith, 1997).

The highest Caribbean drug seizures in the nineties were in Belize and Guyana. Both countries serve as transit points. Transit, however, also creates opportunity for local consumption of illicit substances and, therefore, for increasing levels of drug addiction. Cocaine and heroin consumption and abuse are primarily the results of a spillover from trafficking operations. The drug problem appears to be more acute in the major transit States, notably the Bahamas, Puerto Rico, Jamaica, Belize, the Dominican Republic, Trinidad and Tobago and to a lesser extent Guyana.

Recent studies in the Caribbean have found that the highest incidence of crack cocaine abuse is among young people. Crack addicts as young as 11 years of age have been admitted to detoxification centres in the subregion. Even younger addicts -nine year olds- were found in the

Bahamas, which has a high incidence of trafficking. Table IX gives the volume of drug offences in the nineties in selected Caribbean countries. (Griffith, 1997).

Table IX
Volume of drug offences in the 1990s in selected Caribbean countries

COUNTRY	YEAR	DRUG OFFENCES
Bahamas	1985	1,161
	1986	1,259
	1987	1,214
	1988	948
	1989	955
	1990	1,172
	1991	NA
	1992	1,135
	1993	1,023
	1994	997
Barbados	1985	259
	1986	274
	1987	401
	1988	NR
	1989	510
	1990	555
Dominican Republic	1985	1,121
	1986	1,358
	1987	1,329
	1988	1,036
	1989	NR
	1990	NR
Jamaica	1983	4,250
	1986	4,123
	1987	4,395
	1988	3,533
	1989	4,086
	1990	5,433
	1991	6,711
	1992	6,298
	1993	6,915
	1994	5,859
	1995	6,074
Trinidad and Tobago	1985	3,162
	1986	2,175
	1987	2,401
	1988	2,473
	1989	2,361
	1990	2,921
	1991	2,706
	1992	2,317
	1993	2,509

Source: Dr Ivelaw Lloyd Griffith. *Drugs and Security in the Caribbean: Sovereignty under Siege*, Pennsylvania State University Press 1997 (295 p.)

Migration

A UNECLAC study on “The Impact of Immigration on Caribbean Micro-States” reveals that the consequences of immigration on micro-States in the region tend to be exaggerated when compared to the effects on industrial metropolises, the impact being more dramatic, sudden and provoking stronger reactions from nationals. The impact is significant in the demographic, economic and social areas.

Demographically, recent population growth is attributable to immigration in some of the countries where there is significant labour migration from within the subregion. These countries include Antigua and Barbuda, St. Kitts/Nevis, Belize, The Bahamas and the Netherlands Antilles, notably the island of St. Maarten. The predominance of male immigrants in the Bahamas and in St. Maarten seems to be an indication of the types of labour niches being filled. The study found that the predominance of males indicates that immigrants are not moving with their families and will eventually select mates from among the national population. Immigrants tend to be within the working age cohort, with the consequence that the dependency ratio is pushed downwards.

Young migrants within the region have a higher fertility rate than nationals. The higher fertility of immigrants is of certain importance to countries which grant citizenship through birth, because of the rights, such as voting, to which the offspring of immigrants will automatically be entitled.

In the economic realm, notwithstanding perceptions to the contrary, empirical studies show that immigrants exert positive growth effects on wages and employment opportunities. They tend to accumulate higher levels of financial capital than nationals, contribute substantially through savings to the capital stock and have a higher proportion of self-employed than nationals.

It was also found that the financial impact of immigrants is greatest on social welfare. These costs of meeting the increased need for education, health and housing services fall on the national governments.

The Economic Commission for Latin America and the Caribbean (ECLAC) study further suggested that as international migration increases, regional migration would increase well into the first decade of the twenty-first century. Therefore, decision-makers need to develop proactive strategies which ensure the management of entry of newcomers, while promoting efforts that genuinely integrate long-term residents into society. For an estimate of return migration, see Annex, Table 3.

Gender

The CDCC region focused its attention on the implementation of several mandates and recommendations towards achievement of equality and equity between men and women in society. Empowerment of women continues to be promoted by agencies and by the women's movement in the subregion. In this context the issue of reproductive rights is at the top of the agenda. In this regard efforts have been made to strengthen national machineries for women, appoint ministers with responsibility for women's affairs, offer training programmes in leadership for women and in parliamentary procedure targeting women who have an interest in political participation in the subregion. (See Annex, Table 5)

Commitment 5

To promote full respect for human dignity and to achieve equality and equity between women and men, and to recognize and enhance the participation and leadership roles of women in political, civil, economic, social and cultural life and in development.

Female participation in clerical work and in sales and services as well as in professional and technical work is at levels of parity with male participation in these sectors. Women's participation in government, at ministerial and subministerial levels remains below the levels of male participation. (See Annex, Table 4). For gender empowerment indices and gender empowerment measures, see Annex, Table 5.

The elimination of existing inequities in public and private institutions remains the main objective of several programmes and projects developed by the State sector. The objectives of these policies and programmes go beyond numerical concerns of equality and focus on issues of balance, fairness, justice, representation and sustainability. Gender equity, which is at the core of such programmes, is understood as a guiding principle in public policy and a sustainable derivative of true democracy.

Health

Infant mortality per 1000 live births is the highest in Haiti, Guyana, Dominican Republic, Belize, the British Virgin Islands. and St. Kitts/Nevis and has decreased in Antigua and Barbuda and in Jamaica. (See Annex, Tables 1 and 6). Child mortality rates per 1000 live births is highest in Haiti (132), followed by Guyana (82), which witnessed a significant increase from 62 in 1995. (See Annex, Table 1).

Both infant and child mortality have been on the increase in Grenada, Guyana, St. Kitts/Nevis, Saint Lucia, the British Virgin Islands and Suriname. In maternal mortality, Haiti leads with a rate of 456 per 100,000 births, followed by the Dominican Republic and Guyana both with a rate of 180, Belize with 147, Jamaica 115 and other CDCC countries remaining far below such figures. (See Annex, Table 1).

Indicators on immunization coverage detail high levels of coverage in most CDCC countries, with some deficiency in the Dominican Republic and Suriname. Haiti recorded the

lowest level of coverage, below 50 per cent. Haiti also experienced very high levels of malnutrition among children. (See Annex, Table 12).

With regard to health resources, Haiti has 1.6 physicians and 1.3 nursing professionals per 10,000 population. The figure for the Dominican Republic is 0.8 physicians per 10,000 population. Suriname, Saint Lucia and Guyana rank low within the bracket of 5 to 3 physicians per 10,000 population. (Table 13). In contrast, Cuba has 51.8 physicians and 75.2 nursing professionals per 10,000 population. For the British Virgin Islands, the corresponding figure is 16.5 physicians. There are 59.0 nursing professionals per 10,000 population in St. Kitts and Nevis. (See Annex, Table 13).

The presence of relatively large numbers of health professionals in any country does not necessarily guarantee equal access to relevant services, nor that the service provided to patients is of reasonable to good quality and based on equal treatment for all.

Public expenditure on health in CDCC countries is highest (ranging from 3 to 6 per cent of GDP) in Belize, Saint Vincent and the Grenadines, Barbados, Guyana and Antigua and Barbuda. Most of the other CDCC countries with available relevant data range between 1-3 per cent of GDP in this regard. (See Annex, Table 14).

Reproductive rights and health has been recognised as important in the PAHO agenda of “health for all” particularly since sexual and reproductive health problems are among the most significant causes of morbidity and mortality in the Caribbean.

HIV/AIDS and other sexually transmitted diseases (STDs), adolescent pregnancy, cervical and breast cancer, prostate cancer, maternal mortality and sexual violence are not just health problems. They are related to poverty, gender relations, quality of health services and to interacting factors, such as education, the environment and cultural, social and political values about sexuality and reproduction.

Health statistics reveal an alarming increase in reported AIDS cases and deaths over the period 1993 - 1997 with the Bahamas heading the list with as high as 147 cases in 1995 and 107 deaths in 1996. Table X shows which countries experienced increase or decrease of the reported incidence of AIDS.

There continues to be widespread ignorance among sectors of the population about the dangers of infection with the virus and, therefore, continued unprotected sex practices. There is also minimal acknowledgement of the economic effects of the spread of the disease. Most deaths occur in the 25-35 male age group. Many individuals in this group become unproductive long before they die.

Table X
Increase and decrease of AIDS cases
reported in selected Caribbean countries – 1993-1997

Countries	Increase	Decrease	Highest Incidence
Anguilla	X		
Antigua and Barbuda		X	
Bahamas	X		X
Barbados	X		X
Belize	X		
British Virgin Islands	X		
Dominica	X		X
Grenada		X	
Guyana		X	
Jamaica	X		X
Saint Kitts and Nevis	X		
Saint Lucia	X		
St. Vincent and Grenadines	X		X
Suriname	X		
Trinidad and Tobago	X		

Source: Quarterly AIDS Surveillance Reports submitted to CAREC's Epidemiology Division by CAREC member countries and UNDP Human Development Report 1999.

Most countries in the Caribbean have policies and services in place to address the issue of HIV/AIDS. Belize, for example, has a HIV/AIDS Policy and Task Force. The Dominican Republic has a special Youth HIV/AIDS Project. In Saint Vincent and the Grenadines, there are HIV/AIDS awareness programmes, and Trinidad and Tobago has a special AIDS programme as well.

Non-governmental Organizations (NGOs) in Caribbean countries have been pivotal in starting up special services of reproductive health for men, with efforts focused on HIV/AIDS². This has been made possible through funding provided to Family Planning Associations in the subregion, notably in Trinidad and Tobago and in the Dominican Republic. As reported at the First Caribbean Workshop on HIV/AIDS and Development, held in Barbados, 23-26 March 1999, government funds have been insufficient in many countries of the Caribbean for the operation of existing public health programmes and facilities. A large proportion of health sector budgets continues to be allocated to hospitals.

The AIDS Prevention and Support Committee in the Caribbean has observed that financial assistance for prevention programmes has been difficult to access. Stakeholders consider that there is a need for multisectoral approaches, especially involving young people, for the design and implementation of the programmes. At the same time, institutional approaches are required at community level, including partnerships between private sector and communities.

² The Family Planning Association (FPA) in Trinidad and Tobago opened a special clinic for reproductive health services to men.

Reproductive health

It is reported that adolescent pregnancy has dropped in the Anglophone Caribbean in recent years, but the following countries continue to show high rates:

Country	High Incidence
Barbados	21.4
Guyana	20.7
Jamaica	24.6
Suriname	16.6

Specific policies are required with regard to the continued education of pregnant teens and teen mothers.

Breast cancer accounts for the highest percentage of cancer deaths in the Anglophone Caribbean. Among such countries are the following:

Barbados	41.4
Jamaica	41.8

Caribbean countries with high rates of deaths from prostate cancer include:

- Barbados
- Bahamas
- Dominica,
- Jamaica
- Trinidad and Tobago

Maternal mortality rates remain under 50 for:

- Bahamas
- Barbados
- Saint Vincent and the Grenadines
- Suriname

Maternal mortality rates above 100 are registered for:

- Belize
- Guyana
- Jamaica

Sexual abuse

Sexual abuse appears to be increasing in the Caribbean. In Suriname the experience of advocacy against domestic violence and violence against women has had a major impact on

attitudes and perceptions. So have training programmes targeting important groups in the population, such as health workers and the police force. Work in counselling, legislative changes, infrastructural infrastructure, among others, has begun but needs continued monitoring and strengthening.

Education

Education indicators show that compulsory education is between the ages of five or six - 14 or 16 in most countries except, for example, Suriname where it is stipulated to be from 7 - 12.

Illiteracy rates are generally higher for females than for males. Notable are the exceptions in the Dominican Republic and in Jamaica, where illiteracy among males scores respectively 0.2 and 8.3 higher than among females. (See Table 11).

With regard to adult literacy, the incidence in 1997 is reportedly high for Guyana, Trinidad and Tobago, Barbados, Grenada, Cuba, the Bahamas, Antigua and Barbuda, in that order. However, adult literacy in the Bahamas decreased from 98.2 in 1995 to 95.8 in 1997 and in Grenada from 98.0 in 1994 and 1995 to 96.0 in 1997. Haiti moved forward from 44.1 in 1994 to 45.8 in 1997 which is far below the rankings of the rest of the Caribbean. (See Table 16).

Similarly, school enrolment at secondary and tertiary levels combined, decreased in Haiti from 40.0 in 1994 to 24.0 in 1997, remaining far below the rest of the Caribbean of which most countries range in the seventies with Barbados ranking highest with an enrolment of 80 at that level.

In Saint Lucia obstacles to full participation in secondary school include:

(a) Low socio-economic status of parents

Many parents are unable to provide even basic materials necessary for school. The World Food Programme (WFP) assists in providing meals through the school-feeding programme. This programme is implemented at all levels of schooling.

(b) Non-participation in pre-school

The country experiences limited availability of school places available at primary and pre-primary levels. Non-participation in pre-school hinders continued education in later years. Only 50 per cent of primary school students move into secondary schools.

Commitment 6

To promote and attain the goals of universal and equitable access to quality education, the highest attainable standard of physical and mental health, and the access of all to primary health care, making particular efforts to rectify inequalities relating to gender, age or disability; respect and promote common and particular cultures; strive to strengthen the role of culture in development; preserve the essential bases of people-centred sustainable development; and contribute to the full development of human resources and to social development.

Universal secondary education is a high priority which the country hopes to achieve by the year 2005. Among strategies towards this goal, the following are on the agenda:

1. Extension of the physical structure of 11 to 12 schools.
2. Construction of two new schools.
3. Upgrading of the two existing senior primary schools to full secondary schools.
4. Consideration of the option of a shift system. While this was among possible options, government eventually decided against that action.

(Source: ECLAC, from official national information).

Public expenditure in education as a percentage of GNP has been highest in Saint Lucia, and lowest in St. Kitts/Nevis and in the Dominican Republic. (See Annex, Table 10)

Saint Vincent and the Grenadines has implemented a Basic Education Project in 1995 aimed at improving its education services from primary to tertiary level. The scope of the project addresses curriculum development, teacher training, technical and vocational training, policy formulation and subregional cooperation at the OECS level.

Housing

Countries with a large influx of migrants tend to have more problems of available housing. In St. Maarten the social concern arises from the fact that many migrants from Haiti and the Dominican Republic make their home in container facilities. In Curacao, a survey is underway to better determine the housing needs.

Water and sanitation

Recent information obtained from member countries suggests that some countries still have not reached 50 per cent coverage of households with access to safe water. An overview of selected countries is presented in Table XI.

Table XI
Households with access to safe water (%)
in selected countries

Country	Households served by public system	Public piped into households	Public standpipes	Piped into own yard	Piped into other yard	Private piped and private attachment not piped	Public well or tank	Year
Barbados		84.20	1.00	10.20	3.30			1991
Dominica		30.00	37.00				7.90	1991
St. Kitts Nevis		49.5	22.7	16.8		5.7	1.6	1991
St. Lucia	74.00	46.00	28.00			18.00	6.90	1991
St. Vincent and the Grenadines						71.60		1998

Source: UN-ECLAC National data.

Saint Vincent and the Grenadines reported that approximately 90 per cent of the population has access to water. However, about 45 per cent of households do not have any acceptable method of sewerage disposal and only 3 per cent are connected to a control sewerage system.

Communication

Communication for information dissemination has increased in the Caribbean over the years. In addition to radios, television, newspapers and personal computers, Caribbean people are also taking advantage of information available on the Internet with Barbados ranking highest in the use of personal computers.

Except for Saint Vincent and the Grenadines, all member countries experienced an increase of access to radio. The lowest access rates are registered in Haiti, the Dominican Republic and in Cuba. In general, there is more access to radio than to television. Lowest access to television is recorded in Haiti, the Dominican Republic and Guyana.

The Netherlands Antilles shows the highest rate of newspaper circulation, followed by Trinidad and Tobago, the Bahamas, Barbados and Dominica.

However, the Caribbean subregion is not yet using the major benefits offered by the technological revolution, which through, for example, the Internet provides access to a wide range of information and to resources of information to improve education, health, business, trade, etc. Countries in the subregion that have taken the lead in the technological revolution into are Barbados, the Netherlands Antilles and Trinidad and Tobago.

Challenges facing the Caribbean in the new millennium

Several social and economic indicators reflect the gains made by Caribbean States over recent decades. Life expectancy at birth has increased to over 70 years in almost all the countries and this is comparable to the level reached in the developed countries. The infant mortality rate has also been falling, and the adult literacy rate is over 90 per cent in most cases. Three Caribbean countries are ranked by UNDP as countries with high human development, i.e., with an index of over 0.800. Per capita GNP in current dollars ranged between US\$1270 for Haiti to almost US\$16705 for the Bahamas in 1997. Despite the difficulties in the 1980s, real per capita income has grown in a number of countries since 1970. This, however, is only one side of the picture.

Unemployment rates in the region remain high notwithstanding the recent declines in some countries. Even where employment has increased there remain concerns about the quality of employment. The group of "working poor" engaged in low productivity or marginal activities has grown. Unemployment becomes chronic as it becomes more difficult to find employment when one has been out of employment for a while.

The World Summit for Social Development, including its follow-up process, substantially contributed to an increased level of awareness regarding social issues. This review of social development in the nineties documents the recognition that Caribbean countries are not immune from social problems. In those countries where social issues are most pressing, the well-being of significant parts of the population is affected. There is a growing recognition of the merits of civil society involvement in the development process, in particular to improve targeting and monitoring of the social development agenda.

Annex

Table 1. VITAL SOCIAL STATISTICS IN CDCC Countries

COUNTRY	Population 1997 est.	Population 65+ as a % of total 1997	Life Expectancy at Birth (nearest year)			Infant Mortality Per 1000 live births		Child Mortality per 1000 live births		Total Fertility Rate 1997	Maternal Mortality Rate Per 100,000 births 1990 ^c	Crude Birth Rate per 1000 pop. 1996	* * *	Crude Death Rate per 1000 pop. 1996
			M	F	Year	94/95	1997	94/95	1997					
Anguilla	8.0	...	71.0	77.0	90-95	26	...	34		3.1g	...	18.4	h	6.4
Antigua and Barbuda	69.7 ^a	...	71.0	75.0	90-95	19	17	23	21	1.8g	...	19.9	d	6.4
Aruba	71.0	...	73.0	80.0	90-95	8	...	10		1.8g	...	16.9		5.5
Bahamas	289.0	11.3	70.5	77.1	'97	19	18	21	21	2.6	21	20.7		5.4
Barbados	262.0	11.1	73.7	78.7	'97	16	11	19	12	1.5	20	13.3		9.1
Belize	230.0	4.3	73.4	76.1	'97	36	35	46	43	3.7	147	34.2	g	4.8
British Virgin Islands	20.0	...	66.0	75.0	85-90	20	30 ^d	23		1.9g		19.0	g	5.0
Cuba	11059.0	9.2	74.2	78.2	'97		7		8	1.6	27	13.5		7.2
Dominica	71.0	...	74.0	80.0	90-95	14	17	18	20	2.6g		19.1		7.7
Dominican Republic	8097.0	4.2	69.0	73.1	'97		44		53	2.8	180	27.0	g	5.5
Grenada	93.0	...	68.0	73.0	90-95	20	24	25	29	3.5g		22.8		8.5
Guyana	847.0	4.1	61.1	67.9	'97	46	59	62	82	2.3	180	25.1	g	7.2
Haiti	7492.0	3.6	51.4	56.2	'97		92		132	4.4	456	35.3	g	13.0
Jamaica	2554.0	7.1	73.4	76.1	'97	17	10	23	11	2.5	115	22.8		5.9
Montserrat	3.3 ^b	...				12		15		1.6		16.0	g	10.0
Netherlands Antilles	197.0	...	71.1	75.8	'81	15	...	18		2.1g		18.5	d	6.7
Puerto Rico	3771.0	...	69.6	78.5	90-92		25 ^f			...		16.9		8.0
St. Kitts/Nevis	41.0	...	67.0	70.0	'94	27	30	32	37	2.6g		18.3	d	8.8
St. Lucia	146.0	...	68.0	75.0	'86	19	24	23	29	2.4g		25.2	d	5.9
St. Vincent and the Grenadines	112.0	...	67.0	72.0	85-90	18	18	23	21	2.0g	6	20.7	i	6.6
Suriname	437.0	5.2	67.5	72.7	'97	18	24	22	30	2.2	13	22.7		7.0
Trinidad & Tobago	1307.0	6.4	71.5	76.2	'97	14	15	18	17	1.7	76	14.0		8.5

Sources: United Nations. Demographic Yearbook 1997; UNDP. Human Development Report 1999; UNECLAC Regional digest of Selected Demographic & Social Statistics 1960-1994, LC/CAR/G.456 ; PAHO. Health Conditions in the Caribbean. Sci. Pub. No. 561; and UNICEF, The State of the World's Children 1999. Antigua and Barbuda "Ministry of Health: Annual Statistical Digest" 1998 edition b= Government of Montserrat "Social Survey 1997" c = latest available year between 1987 & 1995 d= 1995

f = 1996 g = latest available year between 1990 & 1995 h= 1993 *** nearest year available for both CBR & CDR

Table 2. HUMAN DEVELOPMENT INDEX AND REAL GDP PER CAPITA (\$PPP) RANK: 1994-1997^a

COUNTRY	1994					1995					1997						
	value	HDI rank		Real GDP Per Capita (\$PPP)	Real Rank minus rank	GDP HDI	value	HDI Rank		Real GDP Per Capita (\$PPP)	Real Rank minus rank	GDP HDI	value	HDI Rank		Real GDP Per Capita (\$PPP)	Real Rank minus rank
		world	CDCC					world	CDCC					world	CDCC		
Anguilla	...	...	...	...	...		...	...	...	...	...		...	...	...	...	...
Antigua and Barbuda	0.892	29	3	8977	16		0.895	29	2	9131	16		0.828	38	3	9692	5
Aruba	...	...	...	...	...		...	...	...	...	...		...	...	...	...	...
Bahamas	0.894	28	2	15875	0		0.893	32	3	15738	-3		0.851	31	2	16705	-3
Barbados	0.907	24	1	11051	11		0.909	24	1	11306	13		0.857	29	1	12001	8
Belize	0.806	63	10	5590	1		0.807	63	10	5623	1		0.732	83	13	4300	-1
British Virgin Islands	...	...	...	...	...		...	...	...	...	...		...	...	...	...	...
Cuba	0.723	86	13	3000	17		0.729	85	13	3100	18		0.765	58	8	3100	47
Dominica	0.873	41	5	6118	16		0.879	41	5	6424	15		0.776	53	7	4320	27
Dominican Republic	0.718	87	14	3933	1		0.720	88	14	3923	1		0.726	88	14	4820	-12
Grenada	0.843	54	7	5137	17		0.851	51	7	5425	19		0.777	52	6	4864	22
Guyana	0.649	104	15	2729	3		0.670	100	15	3205	1		0.701	99	15	3210	2
Haiti	0.338	156	16	896	5		0.340	159	16	917	3		0.430	152	16	1270	-4
Jamaica	0.736	83	12	3816	7		0.735	84	12	3801	9		0.734	82	12	3440	15
Montserrat	...	...	...	...	...		...	...	...	...	...		...	...	...	...	...
Netherlands Antilles	...	...	...	...	...		...	...	...	...	...		...	...	...	...	...
Puerto Rico	...	...	...	...	...		...	...	...	...	...		...	...	...	...	...
St. Kitts/Nevis	0.853	49	6	9436	-9		0.854	50	6	10150	-11		0.781	51	5	8017	-1
St. Lucia	0.838	56	8	6182	-1		0.839	58	9	6530	-3		0.737	81	11	5437	-14
St. Vincent and the Grenadines	0.836	57	9	5650	6		0.845	55	8	5969	6		0.744	75	10	4250	8
Suriname	0.792	66	11	4711	10		0.796	65	11	4862	9		0.757	64	9	5161	6
Trinidad & Tobago	0.880	40	4	9124	4		0.880	40	4	9437	3		0.797	46	4	6840	11

Source: UNDP. Human Development Report 1997, 1998 & 1999 Note: In the column "Real GDP Rank minus HDI rank" A positive figure indicates that the HDI rank is better than the real GDP per capita

Table 3. Population Estimates: Average Annual Growth Rates, 1950-2000

COUNTRY	1950-1960	1960-1970	1970-1980	1980-1990	1990-2000
Anguilla	1.82	0.00	1.54	0.00	1.34
Antigua and Barbuda	1.79	1.82	-0.79	0.64	0.74
Aruba	0.34	0.33	-0.17	0.17	0.32
Bahamas	3.31	4.35	2.11	1.94	1.46
Barbados	0.91	0.34	0.41	0.32	0.42
Belize	3.06	2.77	1.96	2.58	1.92
British Virgin Islands	1.54	3.57	1.82	2.88	2.72
Cuba	1.77	1.99	1.28	0.92	0.81
Dominica	1.63	1.54	0.69	-0.41	-0.41
Dominican Republic	3.17	3.14	2.53	2.30	1.84
Grenada	1.69	0.43	-0.55	0.22	0.32
Guyana	2.97	2.20	0.68	0.48	1.04
Haiti	1.54	1.72	1.69	1.92	2.05
Jamaica	1.49	1.37	1.32	1.26	1.01
Montserrat	-1.54	-0.87	0.87	-0.87	0.00
Netherlands Antilles	1.66	1.68	0.54	0.23	0.17
Puerto Rico	0.61	1.42	1.65	0.96	0.88
St. Kitts/Nevis	1.48	-0.82	-0.66	-0.47	-0.24
St. Lucia	0.85	1.61	1.30	1.45	1.34
St. Vincent and the Grenadines	1.77	0.84	1.19	0.88	0.89
Suriname	2.99	2.49	-0.55	1.81	1.70
Trinidad & Tobago	2.01	1.41	1.08	1.33	0.99

Source: CELADE, Latin America and the Caribbean: The Dynamics of Population and Growth (Santiago 1992)

Table 4. Population in urban and rural areas and rates of growth: 1990 and 1995

COUNTRY	% Rural		%Urban		Growth Rate			
	1990	1995	1990	1995	Rural Population		Urban Population	
					1990	1995	1990	1995
Anguilla	89.7	89.0	10.3	11.0	1.4	1.2	2.0	2.6
Antigua and Barbuda	64.6	64.2	35.4	35.8	0.4	0.5	0.8	0.8
Aruba								
Bahamas	16.4	13.5	83.6	86.5	-2.4	-2.1	2.9	2.5
Barbados	55.2	52.7	44.8	47.3	-0.5	-0.7	1.4	1.4
Belize	52.5	53.5	47.5	46.5	2.8	3.0	2.0	2.2
British Virgin Islands	49.8	44.0	50.2	56.0	1.0	0.4	5.7	5.1
Cuba	26.5	24.2	73.5	75.8	-0.8	-1.2	1.7	1.3
Dominica	32.3	30.7	67.7	69.3	-1.3	-1.2	0.2	0.4
Dominican Republic	41.7	38.1	58.3	61.9	0.5	0.1	3.5	3.1
Grenada	65.7	64.2	34.3	35.8	-0.1	-0.2	0.8	1.2
Guyana	66.8	64.6	33.2	35.4	-0.4	0.2	1.1	2.1
Haiti	48.5	68.2	28.9	31.8	1.2	1.1	4.0	3.9
Jamaica	85.4	46.3	51.5	53.7	-0.5	-0.1	1.4	1.7
Montserrat	31.7	83.7	14.6	16.3	-0.9	-0.7	1.3	1.8
Netherlands Antilles	31.7	30.8	68.3	69.2	0.4	0.1	0.8	0.9
Puerto Rico	28.7	26.7	71.3	73.3	-0.6	-0.5	1.5	1.5
St. Kitts/Nevis	65.4	66.0	34.6	34.0	-0.3	-0.1	1.4	1.3
St. Lucia	62.8	62.8	37.2	37.2	1.4	1.4	-0.9	-0.7
St. Vincent and the Grenadines	59.4	51.9	40.6	48.1	-1.4	-1.8	4.7	4.3
Suriname	53.2	50.8	46.8	49.2	0.7	0.4	1.9	2.2
Trinidad & Tobago	30.9	28.3	69.1	71.7	-0.9	-1.0	1.8	1.6

Source: United Nations Statistical Yearbook (1995) 42nd Issue

Table 5. Mid-year Population Estimates (1994-1997)

COUNTRY	1994	1995	1996	1997
Anguilla	8.0	8.0	8.0	8.0
Antigua and Barbuda	66.0	68.0	69.0	69.7 ^a
Aruba	79.0	82.0	86.0	71.0
Bahamas	274.0	279.0	284.0	289.0
Barbados	264.0	264.0	264.0	262.0
Belize	211.0	217.0	222.0	230.0
British Virgin Islands	18.0	19.0	19.0	20.0
Cuba	10950.0	10980.0	11019.0	11059.0
Dominica	74.0	71.0	74.0	71.0
Dominican Republic	7769.0	7915.0	8052.0	8097.0
Grenada	92.0	92.0	92.0	93.0
Guyana	821.0	830.0	838.0	847.0
Haiti	7041.0	7180.0	7336.0	7492.0
Jamaica	2473.0	2500.0	2515.0	2554.0
Montserrat	11.0	11.0	11.0	3.3 ^b
Netherlands Antilles	200.0	205.0	195.0	197.0
Puerto Rico	3686.0	3719.0	3733.0	3771.0
St. Kitts/Nevis	43.0	44.0	42.0	41.0
St. Lucia	141.0	145.0	144.0	146.0
St. Vincent and the Grenadines	110.0	111.0	111.0	112.0
Suriname	405.0	409.0	414.0	437.0
Trinidad & Tobago	1250.0	1260.0	1264.0	1307.0

Sources: United Nations. 1997 Demographic Yearbook

Antigua and Barbuda "Ministry of Health: Annual Statistical Digest" 1998 edition

b= Government of Montserrat "Social Survey" November 30 1997

**Table 6. Life Expectancy at birth; Infant Mortality and Under 5 Mortality Rates
(Selected Years)**

COUNTRY	Life Expectancy at Birth			Infant Mortality Per 1000 live births			Under 5 Mortality Rate Per 1000 live births			
	1990	1993	1997	1970	1994/ 1995	1997	1970	1994/ 1995	1996	1997
Anguilla	...	...			26			34		
Antigua and Barbuda	...	74.0	...	...	19	17	...	23	22	21
Aruba	...			...	8	...		10		
Bahamas	72.5	73.2	73.8	38	19	18	49	21	23	21
Barbados	73.3	75.7	76.4	40	16	11	54	19	12	12
Belize	72.1	73.7	74.7	56	36	35	77	46	44	43
British Virgin Islands	73.9			32 ^a	20			23		
Cuba		75.4		34		7	43	...	10	8
Dominica	71.0	72.0		...	14	17		18	20	20
Dominican Republic		69.7	70.6	91		44	128		56	53
Grenada		71.0		33	20	24		25		29
Guyana	65.0	65.4	64.4	81	46	59	101	62	83	82
Haiti		56.8	53.7	148		92	221		134	132
Jamaica	70.9	73.7	74.8	47	17	10	62	23	11	11
Montserrat					12			15		
Netherlands Antilles				...	15			18		
Puerto Rico				...						
St. Kitts/Nevis		70.0		...	27	30		32	38	37
St. Lucia	71.8	72.0		...	19	24		23		29
St. Vincent and the Grenadines		71.0		...	18	18		23		21
Suriname		70.5	70.1	52	18	24	65	22	31	30
Trinidad & Tobago	72.2	71.7	73.8	49	14	15	57	18	17	17

Sources: PAHO. Health Conditions in the Caribbean. Sci. Pub. No. 561 (1994/1995 data); UNDP. Human Development Report 1999 (1970 & 1997 data); a=1970-1974 (Source: UNECLAC. Digest of Selected Demographic & Social Indicators LC/CAR/G.456)

Table 7. Selected Indicators of Health Resources
(Latest year available between 1990 & 1995)

COUNTRY	Physicians per 10,000 population (a)	Nursing Professionals per 10,000 population (a)	Dentists per 10,000 population (a)	Hospital Beds per 10,000 population (b)
Anguilla	11.1	22.2	1.1	6.2
Antigua and Barbuda	7.6	23.3	1.7	6.6
Aruba	11.2		2.8	4.8
Bahamas	14.1	25.8	2.2	4.0
Barbados	11.3	32.3	1.3	8.4
Belize	4.7	7.6		2.0
British Virgin Islands	16.5	36.9	0.8	...
Cuba	51.8	75.2		
Dominica	4.6	26.3	0.1	3.0
Dominican Republic	0.8	2.0		
Grenada	5.0	23.9	0.7	8.0
Guyana	3.3	8.8	0.1	3.3
Haiti	1.6	1.3		
Jamaica	5.7	6.9	0.9	2.2
Montserrat				
Netherlands Antilles	14.0	29.4	3.3	7.6
Puerto Rico				
St. Kitts/Nevis	8.9	59.0	1.8	9.2
St. Lucia	3.5	17.7	0.6	4.0
St. Vincent and the Grenadines	4.6	18.7	0.5	4.7
Suriname	4.0	22.7	1.0	5.7
Trinidad & Tobago	9.0	16.8	1.1	3.6

Sources: PAHO. Health Conditions in the Caribbean. Sci. Pub. No. 561 a= Latest year available between 1990-1995 b = Latest year available between 1992-1995

Table 8 Incidence and Rates of Reported AIDS Cases and Deaths by Country: 1993-1997

Country	1993		1994		1995		1996		1997	
	Cases	Death	Cases	Death	Cases	Death	Cases	Death	Cases	Death
Anguilla	0.0	0.0	0.0	0.0	0.0	0.0	11.1	11.1	-	-
Antigua & Barbuda	26.2	15.4	24.6	18.5	10.6	18.2	19.7	12.1	10.4	10.4
Aruba										
Bahamas	113.8	80.0	120.6	84.4	147.9	102.7	134.3	107.1	137.0	92.3
Barbados	34.1	27.3	44.9	37.0	35.6	40.8	49.4	40.7	42.8	39.8
Belize	...	0.0	8.7	9.7	13.5	13.5	17.2	12.7	-	-
British Virgin Islands	11.2		5.6		16.7		5.6		16.7	11.1
Cuba					1.0a					
Dominica	20.8	19.4	8.1	9.5	6.8	9.5	18.9	6.8	26.8	5.6
Dominican Republic					4.9a		4.6a			
Grenada	22.3	14.9	7.4	9.6	19.1	11.7	18.2	9.1	10.8	7.5
Guyana	14.5	0.0	14.3	8.7	13.0	3.7	19.6	15.1	13.6	8.1
Haiti										
Jamaica	8.9	6.0	13.5	8.1	20.5	10.8	19.6	9.7	23.9	15.5
Montserrat	9.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Netherlands Antilles										
Puerto Rico										
St. Kitts & Nevis	7.0	7.0	16.3	4.7	14.0	7.0	14.0	2.3	9.1	4.5a
St. Lucia	8.6	5.8	9.2	10.6	7.0	7.0	9.7	6.9	10.3	8.9
St. Vincent & the Grenadines	8.6	6.9	10.3	13.8	5.1	4.3	22.0	19.5	26.9	18.5
Suriname	8.4	9.4	6.2	6.7	4.8	4.0	14.6a		-	
Trinidad & Tobago	20.5	13.8	22.6	17.7	27.0	13.5	32.5	20.2	9.3	5.3

Source: Quarterly AIDS Surveillance Reports submitted to CAREC's Epidemiology Division by CAREC member countries and UNDP. Human Development Report 1999

**Table 9. Immunization rates, Government expenditure on Immunization and Malnutrition data by country
(Most recent year available)**

COUNTRY	IMMUNIZATION					NUTRITION				
	Percentage of one-year-old children who are fully immunized – 1995-1997				Percentage of routine Extended Programme on Immunization (EPI) financed by Govt. 1995-1997	Percentage of infants with low birthweight 1990-1997	% of under 5 suffering from: (1990-1997)			
	TB	DPT	Polio	Measles			underweight		wasting	stunting
							Moderate & severe	severe	Moderate & severe	Moderate & severe
Anguilla							...	...	...	...
Antigua and Barbuda	...	100	100	93	100	8	10x	4x	10x	0x
Aruba						...	...	...	...	...
Bahamas	...	86	86	93	100	...	...	...	...	...
Barbados	...	96	96	92	100	10	5x	1x	4x	7x
Belize	95	86	85	98	100	4	6	1	-	-
British Virgin Islands							...	...	...	...
Cuba	99	100	97	100	97	7	9	-	3	-
Dominica	100	100	100	100	100	10	5x	0x	2x	6x
Dominican Republic	88	80	79	80	100	13	6	1	1	11
Grenada	...	95	95	92	100	9	...	...	...	...
Guyana	94	88	89	82	100	15	12	-	12	10
Haiti	40	35	32	30	0	15	28	8	8	32
Jamaica	97	90	90	88	100	10	10	1	4	6
Montserrat							...	...	...	...
Netherlands Antilles	...	95	95	96		...	...	...	...	...
Puerto Rico					100		...	...	...	...
St. Kitts/Nevis	99	100	100	97	100	9	...	...	...	...
St. Lucia	100	98	98	95	100	8	...	...	...	...
St. Vincent and the Grenadines	98	100	100	100	100	8	...	...	...	...
Suriname	...	85	81	78	100	13	...	...	...	...
Trinidad & Tobago	...	90	91	88	100	10	7	0	4	5

Sources: UNICEF. The State of the World's Children 1999. 'x' indicates data that refer to years or periods other than those specified in the column heading, or refer to only part of the country

Table 10 Literacy, Enrolment and Education Expenditure in Selected CDCC Countries

Country	Adult Literacy			Combined Primary, Secondary & Tertiary Gross Enrolment Ratio			Public Education Expenditure 1993-1996			
							as a % of total Govt. exp.	Primary & Secondary as a % of all levels	Higher as a % of all levels	as a % of GNP
	1994	1995	1997	92-94	1995	1997				
Anguilla										
Antigua & Barbuda		95.0	95.0		76.0	76.0				
Aruba										4.9
Bahamas	98.1	98.2	95.8	94.0	72.0	74.0	13.2			
Barbados	97.3	97.4	97.6		77.0	80.0	19.0			7.2
Belize	70.0	70.0	75.0	92.0	74.0	72.0	19.5	87.9	6.9	5.0
British Virgin Islands										
Cuba	95.4	95.7	95.9	90.0	66.0	72.0	12.6	57.3	14.9	
Dominica		94.0	94.0		77.0	77.0				
Dominican Republic	81.5	82.1	82.6	84.0	73.0	66.0	13.4	62.0	13.0	2.0
Grenada	98.0	98.0	96.0		78.0	78.0				
Guyana	97.9	98.1	98.1	82.0	64.0	64.0	10.0	71.3	7.7	4.9
Haiti	44.1	45.0	45.8	40.0	29.0	24.0				
Jamaica	84.4	85.0	85.5	86.0	67.0	63.0	12.9	65.5	22.4	7.5
Montserrat										
Netherlands Antilles										
Puerto Rico										
St. Kitts & Nevis	90.0	90.0	90.0		78.0	78.0	8.8	75.7	11.4	3.8
St. Lucia	82.0	82.0	82.0		74.0	74.0	22.2	69.1	12.5	9.8
St. Vincent & the Grenadines	82.0	82.0	82.0		78.0	78.0				
Suriname	92.7	93.0	93.5		71.0	71.0		75.2	7.6	
Trinidad & Tobago	97.9	97.9	97.8	87.0	65.0	66	11.6	80.0		4.4

Source: UNDP. Human Development Report 1997, 1998, 1999

Table 11. Illiteracy and Enrolment in Selected CDCC Countries

Country	Adult Illiteracy Rates 1995			Gross Enrolment Ratios by levels of education											
	Total	Males	Females	1990				1993/94				1995			
				Pre- Primar y	First Leve l	Seco nd Level	Thir d Lev el	Pre- Primar y	First Level	Secon d Level	Thir d Lev el	Pre- Primar y	First Leve l	Seco nd Level	Thir d Lev el
Anguilla															
United States of America				63	102	93	75	68	102	97	81	70	102	97	81
Bahamas	1.8	1.5	2.0		101	93		8	94	90		10	100	86	
Barbados	2.6	2.0	3.2												
Belize				24	112	41		27	121	49		-			
British Virgin Islands															
Cuba	4.3	3.8	4.7	101	98	89	21	89	100	75	14	94	105	80	13
Dominican Republic	17.9	18.0	17.8					20	103	41					
Guyana	1.9	1.3	2.5	69	98	83	6	85	94	76	9	84	95	75	10
Haiti	55.0	52.0	57.8	41	56	22									
Jamaica	15.0	19.2	10.9	84	108	64	6		111				110		8
Suriname	7.0	4.9	9.0												
Trinidad & Tobago	2.1	1.2	3.0	9	95	79	7		96	74	8		96	72	8

Source: UNESCO Yearbook 1998

Table 12. Female participation in selected occupational categories as a percentage of total selected category

Country	Female administrators and managers	Female professional and technical workers	Female sales and service workers	Female clerical workers	Women in Government (Total)		Women in Government (At Ministerial Level)		Women in Government (At sub-ministerial level)	
	1992-1996	1992-1996	1992-1996	1992-1996	1995	1996	1995	1996	1995	1996
Anguilla										
Antigua & Barbuda					30	26.7	0	0	47	42.1
Aruba										
Bahamas*	35	51	59	79	34	30.3	20	18.8	38	34.0
Barbados	39	51	58	80	23	25.5	33	30.8	24	23.5
Belize	37	39	56	71	10	6.0	0	0	14	8.8
British Virgin Islands										
Cuba	19	48			8	9.1	4	2.7	10	11.9
Dominica	36	57	69a		31	25.0	8	18.2	39	26.5
Dominican Republic	21	50			12	9.8	3	4.0	16	11.9
Grenada	32	53	58a	64b	19	22.5	10	21.4	24	23.1
Guyana	13	48			5	14.6	0	5.6	9	20.0
Haiti	33	57	88a	65b	14	22.2	17	29.4	11	15.8
Jamaica		59	69	62	13	14.3	6	5.6	16	18.4
Montserrat										
Netherlands Antilles										
Puerto Rico										
St. Kitts & Nevis					21	16.7	10	0	28	25.0
St. Lucia					5	5.0	8	9.1	0	0
St. Vincent & the Grenadines					25	19.2	10	20.0	50	18.8
Suriname	12	62	51	57	14	11.3	0	0	21	17.6
Trinidad & Tobago*	40	52	49	72	14	13.8	20	16.0	10	12.5

Source: UNDP. Human Development Report 1998 and 1999. * refers to the International Standard Classification of Occupations (ISCO) 1988, which is not strictly comparable with the ISCO-1968 classification. 'a' - excludes sales workers 'b' - includes sales workers

Table 13. GENDER DEVELOPMENT INDEX AND GENDER EMPOWERMENT MEASURES:1994-1997^a

COUNTRY	1994				1995				1997			
	GDI value	GDI World Rank	GEM Value	GEM Rank	GDI World Rank		GEM Value	GEM Rank	GDI Value	GDI World Rank	GEM Value	GEM Rank
Anguilla												
Antigua and Barbuda												
Aruba												
Bahamas	0.880	18	0.544	19	0.876	21	0.649	15	0.849	29	0.658	13
Barbados	0.885	17	0.602	14	0.889	16	0.607	18	0.854	27		
Belize			0.470	32	0.689	72	0.471	40			0.492	39
British Virgin Islands												
Cuba	0.699	68	0.523	23	0.705	69	0.523	25	0.762	53	0.556	21
Dominica												
Dominican Republic	0.658	75	0.424	46	0.662	81	0.424	58	0.716	75	0.528	25
Grenada												
Guyana	0.615	91	0.469	33	0.630	95	0.472	39	0.691	83	0.434	57
Haiti	0.332	130	0.345	63	0.335	144	0.356	71	0.426	124		
Jamaica	0.726	63			0.724	65			0.731	69		
Montserrat												
Netherlands Antilles												
Puerto Rico												
St. Kitts/Nevis												
St. Lucia												
St. Vincent and the Grenadines												
Suriname			0.457	37	0.735	63	0.434	53			0.428	60
Trinidad & Tobago	0.841	32	0.571	17	0.823	38	0.608	17	0.790	44	0.540	24

Source: Human Development Report 1997.1998 and 1999

Table 14. Communication Profile – Radio, Television and Personal Computers

Country	Radios per 1000 people			Televisions per 1000 people			Circulation of daily newspapers per 1,000 people (1996)	Personal Computers per 1000 people	Internet Hosts per 1000 people
	1992	1994	1995	1992	1994	1995			
Anguilla									
Antigua & Barbuda	417	427	439	356	350	409	90		3.69
Aruba									
Bahamas	542	735	735	225	240	233	100		1.96
Barbados	876	877	900	280	260	287	202	57.5	5.44
Belize	584	581	587	166	170	167		27.8	2.26
British Virgin Islands									
Cuba	345	347	351	162	190	200	119		0.01
Dominica	589	600	634	72	70	141			1.23
Dominican Republic	171	173	176	87	90	87	52		0.63
Grenada	598	595	598	331	160	158			0.14
Guyana	493	491	494	40	40	42	50		0.09
Haiti	47	50	53	5	10	5	3		0.02
Jamaica	421	436	438	134	300	306	64	4.6	0.67
Montserrat									
Netherlands Antilles							356		
Puerto Rico									
St. Kitts & Nevis	648	666	668	206	220	-			0.17
St. Lucia	759	764	765	190	250	301			0.25
St. Vincent & the Grenadines	698	667	670	144	230	234	9		0.03
Suriname	639	680	679	132	150	195	116		0.34
Trinidad & Tobago	494	491	505	-	310	318	121	19.2	3.13

Source: UNDP. Human Development Report 1997, 1998 & 1999

**Table 15. Official Development Assistance^a to countries through the disbursement of grants and/or loans
1994 - 1997**

Country	TOTAL NET OFFICIAL DEVELOPMENT ASSISTANCE RECEIVED (net disbursements)							
	1994		1995		1996		1997	
	As a % of 1993 GNP	Per capita \$US	As a % of 1994 GNP	Per capita \$US	As a % of 1995 GNP	Per capita \$US	As a % of 1996 GNP	Per capita \$US
Anguilla								
Antigua & Barbuda	106.1	46.2	2.7	200	2.6	184	0.8	62.3
Aruba								
Bahamas	-	7.5	0.1	15			-	11.6
Barbados	-0.1	3.8	-0.1	-4	0.3	19	-	11.5
Belize	5.8	137.3	3.0	76	3.2	83	2.3	72.1
British Virgin Islands								
Cuba	0.3	2.9	-	6	-	6	-	6.2
Dominica	8.2	140.8	12.1	343	19.8	589	6.2	194.4
Dominican Republic	0.8	-	1.2	16	0.9	14	0.5	10.5
Grenada	4.1	97.8	4.2	111	4.1	121	2.7	85.5
Guyana	35.6	104.2	19.2	106	27	172	11.8	50.4
Haiti	24.2	18.6	45.5	104	17.9	52	39.9	339.9
Jamaica	3.4	46.0	2.7	43	1.7	24	1.8	29.3
Montserrat								
Netherlands Antilles								
Puerto Rico								
St. Kitts & Nevis	-	261.9	2.1	100	3.2	171	2.7	167.5
St. Lucia	6.0	194.2	9.6	313	7.4	247	4.1	160.0
St. Vincent & the Grenadines	2.4	127.3	20.5	427	11.0	243	2.2	55.6
Suriname	-	198.1	27.6	183	31.3	271	11.4	190.6
Trinidad & Tobago	0.4	5.5	0.6	20	0.4	13	0.6	26.5

Source: UNDP. Human Development Reports 1996, 1997, 1998 and 1999. a – ODA refers to grants or loans to countries and territories on Part 1 of the OECD Development Assistance Committee (DAC) list of Aid recipients that are undertaken by the official sector, with promotion of economic development and welfare as the main objective and at concessional financial terms

Table 16. Age of Compulsory Education

Country	
Anguilla	5-16
Antigua & Barbuda	5-16
Aruba	
Bahamas	5-14
Barbados	5-16
Belize	5-14
British Virgin Islands	5-16
Cuba	6-16
Dominica	5-15
Dominican Republic	5-14
Grenada	5-16
Guyana	6-14
Haiti	6-12
Jamaica	6-12
Montserrat	5-14
Netherlands Antilles	6-15
Puerto Rico	6-16
St. Kitts & Nevis	5-17
St. Lucia	5-15
St. Vincent & the Grenadines	5-15
Suriname	7-12
Trinidad & Tobago	5-12

Source: UNESCO Yearbook 1998

Table 17. Labour Statistics by sex for selected CDCC countries – 1996 or nearest available year

COUNTRY	Unemployment Rate (%)			Participation Rate (%)			% of total unemployment		% of Employed Labour Force				Total Labour Force
	Male	Female	Total	Male	Female	Total	Youths	Adults	Male	Female	Total		number
											%	number	
Anguilla ^a	6.3	9.0	7.2	82.0	60.7	71.4	53.1	46.9	58.3	41.7	100.0	4120	4440
Antigua and Barbuda ^b	6.4	5.6	6.0	81.6	62.9	71.8	47.8	52.2	53.7	46.3	100.0	27850	29630
Aruba ^c	5.4	7.9	6.5	76.0	53.0	64.0	20.6	79.4	5.8	41.6	100.0	35940	38410
Bahamas	8.6	14.7	11.5	79.8	68.2	73.7	45.3	54.7	54.2	45.8	100.0	129765	146635
Barbados	12.4	18.9	15.6	74.3	61.6	67.4	37.9	62.1	52.8	47.2	100.0	114300	135400
Belize	11.7	18.6	13.8	79.0	34.0	56.1	54.3	45.7	70.9	29.1	100.0	65025	75450
British Virgin Islands ^b	3.4	3.1	3.3	84.3	68.6	76.7	40.7	59.3	56.6	43.4	100.0	8700	8995
Cuba													
Dominica ^b	9.8	9.2	9.6	75.2	38.9	56.9	60.8	39.2	65.4	34.6	100.0	23820	26360
Dominican Republic													
Grenada ^b	14.6	12.7	13.9	67.8	38.2	52.5	45.8	54.2	61.9	38.1	100.0	23860	27700
Guyana ^a	8.4	18.1	11.7	81.2	39.3	59.5	66.9	33.1	68.3	31.7	100.0	245490	278080
Haiti													
Jamaica	9.9	23.0	16.0	75.5	60.6	67.7	56.1	43.9	57.6	42.4	100.0	959800	1142700
Montserrat													
Netherlands Antilles (Curacao)	10.4	18.1	14.0	...	...	...	27.8	72.2	55.7	44.3	100.0	56970	66220
Puerto Rico													
St. Kitts/Nevis													
St. Lucia	13.8	19.3	16.3	...	...	68.4	55.0	45.0	56.0	44.0	100.0	56715	67750
St. Vincent and the Grenadines ^b	18.4	22.1	19.8	80.8	35.8	62.3	55.3	44.7	65.2	34.8	100.0	33440	41680
Suriname	7.9	16.4	10.9	72.0	39.0	...	40.6	59.4	66.3	33.7	100.0	87210	97910
Trinidad & Tobago	13.2	21.0	16.2	74.2	46.8	60.5	39.4	60.6	63.6	36.4	100.0	444200	530400

Source: ILO Digest of Caribbean Labour Statistics 1997 Year for which data is available: a= 1992 b= 1991 c= 1994

Whooping Cough: The incidence rate of whooping cough per 100,000 population is negligible in the CDCC countries. Jamaica had its highest number of cases for the decade in 1991 – a rate of 0.7%. In 1996, Guyana had its highest number of cases - 44 cases and an incidence rate of 6%.

Polio: Over the decade of the 1990's, there has virtually been no reported cases of polio in the CDCC countries

Rubella: The incidence of this disease has been very small or non-existent in most of the CDCC countries over the period 1990-1998. However there have been relatively high incidences of this disease in a few of the CDCC countries namely the Bahamas, Barbados, Belize, Dominica, Guyana, Jamaica, Suriname and Trinidad and Tobago. These countries have been selected and highlighted in the table below.

Table 18. Incidence rates of Rubella per 100,000 population – Selected CDCC countries: 1990-1998

COUNTRY	1990	1991	1992	1993	1994	1995	1996	1997	1998
	rates	rates	rates	rates	rates	rates	rates	rates	rates
Bahamas	46.5	0.0	0.0	0.8	0.0	0.0	0.0	6.7	0.0
Barbados	20.8	1.1	0.0	1.1	0.0	0.4	39.5	n.a	0.0
Belize	1.1	1.5	0.5	0.5	0.0	1.4	12.2	273.4	2.1
Dominica	5.6	1.4	0.0	0.0	13.5	0.0	0.0	0.0	0.0
Guyana	0.0	2.0	2.8	0.0	1.9	0.0	17.4	14.9	0.9
Jamaica	0.7	10.3	1.5	0.0	0.8	3.2	0.6	1.9	0.0
Suriname	30.7	21.8	2.9	0.7	10.0	4.8	5.7	2.8	20.3
Trinidad & Tobago	19.1	3.4	3.2	4.9	1.1	0.9	29.3	20.4	2.0

Source: Weekly Communicable Disease reports sent to CAREC's Epidemiology Division by its member countries

Mumps: This is also a disease that has been brought under control in most CDCC countries. There are CDCC countries however, where the incidence rates are very high.

**Table 19. Incidence rates of Mumps per 100,000 population
1992-1998**

COUNTRY	1992	1993	1994	1995	1996	1997	1998
Anguilla	0.0	0.0	0.0	0.0	22.2	0.0	0.0
Antigua & Barbuda	0.0	0.0	41.5	3.0	16.7	1.5	0.0
Bahamas	0.0	0.4	0.4	0.8	2.1	4.6	2.1
Barbados	0.0	0.0	0.0	0.0	0.0	na	0.0
Belize	109.0	9.8	3.4	4.8	10.4	110.6	8.6
British Virgin Islands	0.0	0.0	5.6	0.0	0.0	0.0	0.0
Dominica	0.0	73.6	147.3	0.0	2.7	4.2	4.2
Grenada	2.1	1.1	0.0	0.0	0.0	1.1	1.1
Guyana	1.5	1.0	0.0	266.2	6.9	2.3	0.1
Jamaica	0.5	0.2	0.2	26.5	2.3	0.9	0.8
St. Lucia	8.8	14.4	7.8	7.0	2.8	10.3	5.4
St. Kitts/Nevis	4.8	0.0	9.3	4.7	0.0	2.3	0.0
St. Vincent / Grenadines	0.9	0.0	0.0	0.0	0.0	0.0	0.0
Suriname	3.1	1.7	15.8	17.9	29.3	1.4	49.1
Trinidad & Tobago	140.2	293.0	19.7	8.1	4.9	4.5	2.8

Source: Weekly Communicable Disease reports sent to CAREC's Epidemiology Division by its member countries.

Measles: In addition to outbreaks of this disease in specific years within individual countries, 1996 & 1997 seems to have been an exceptionally bad year for most CDCC countries.

**Table 20. Incidence Rates of Measles per 100,000 population
1992-1998**

COUNTRY	1992	1993	1994	1995	1996	1997	1998
Anguilla	22.2	0.0	11.1	22.2	66.7	50.0	75.0
Antigua & Barbuda	6.2	1.5	6.2	1.5	4.5	10.4	10.4
Bahamas	6.4	0.8	1.9	4.9	3.9	55.6	10.6
Barbados	7.6	16.7	14.0	10.1	28.1	14.4	11.2
Belize	12.6	7.8	13.6	4.8	24.0	45.8	7.5
British Virgin Islands	11.6	0.0	0.0	5.6	5.6	16.7	16.7
Dominica	11.1	19.4	17.6	50.0	1.4	22.5	7.0
Grenada	10.6	8.5	17.0	5.3	23.2	28.0	19.1
Guyana	5.7	3.5	3.3	2.2	11.3	31.6	5.7
Jamaica	3.6	1.9	2.6	5.3	2.7	6.2	3.3
St. Lucia	27.0	14.4	12.8	5.6	4.9	6.2	1.3
St. Kitts/Nevis	21.5	9.3	11.6	4.7	25.6	31.8	11.4
St. Vincent / Grenadines	6.9	1.7	1.7	0.0	5.1	1.7	1.7
Suriname	4.8	3.6	3.6	2.9	3.5	9.6	47.3
Trinidad & Tobago	6.3	4.1	1.5	4.5	8.7	11.3	3.6

Source: Measles Elimination Surveillance System (MESS)

**Table 21. Reported cases and incidence rates of Gastroenteritis in under 5's per 100,000 population
1992-1998**

COUNTRY	1992		1993		1994		1995		1996		1997		1998	
	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates	Cases	Rates
Anguilla	7	546.9	12	1200.0	5	500.0	11	1100.0	0	0.0	0	0.0	0	0.0
Antigua & Barbuda	1149	17676.9	497	7069.7	1084	15055.6	728	9837.8	687	9228.4	1966	26251.6	1037	13764.3
Bahamas	230	580.8	1166	4134.8	1166	4224	314	1163.0	856	3151.5	673	2462.9	478	1738.9
Barbados	151	766.5	53	267.7	36	181.8	102	512.6	39	194.8	22	109.2	25	123.4
Belize	69	280.5	9	40.0	456	1974.0	795	3354.4	1063	4458.5	1092	4552.8	1577	6535.7
British Virgin Islands	*	*	4	222.2	6	300.0	8	381.0	178	8425.6	46	2164.4	51	2385.4
Dominica	611	7734.2	490	6274.0	146	1848.1	76	950.0	334	4150.1	42	518.8	70	859.4
Grenada	598	5695.2	395	3726.4	339	3198.1	648	6056.1	185	1718.7	368	3398.3	718	6590.9
Guyana	*	*	*	*	*	*	*	*	*	*	4051	4905.4	1828	2200.4
Jamaica	18831	6822.8	12217	4491.5	13698	5036.0	14585	5246.4	17115	6119.8	22302	7926.9	11410	4031.3
Montserrat	88	3793.1	79	5129.9	6	545.5	37	3083.3	42	3479.1	19	1564.5	27	2210.0
St. Lucia	723	3972.5	257	1452.0	681	4152.4	168	1012.0	*	*	357	2125.0	0	0.0
St. Kitts/Nevis	563	10053.6	305	5648.1	199	3685.2	479	8870.4	219	4031.4	0	0.0	224	4074.4
St. Vincent / Grenadines	814	6512.0	585	5000.0	1427	11236.2	1451	11248.1	981	7559.3	881	6748.2	378	2878.1
Suriname	4450	8900.0	1518	2869.6	3504	6513.0	3141	5721.3	2879	5212.8	637	1146.5	2676	4787.6
Trinidad & Tobago	*	*	*	*	*	*	*	*	*	*	16026	12181.1	*	*

Source: Weekly Communicable Disease reports sent to CAREC's Epidemiology Division by its member countries

Table 22
Crime Statistics for Selected CDCC Countries 1994

COUNTRY	Intentional Homicides per 100,000 people	Drug Crimes per 100,000 people	Recorded rapes (thousands)
Bahamas	85.5	282.6	0.2
Barbados	11.8	217.7	0.1
Guyana	18.0	252.4	0.1
Jamaica	27.1	231.1	1.1
St. Vincent and the Grenadines	9.8	...	...
Trinidad and Tobago	6.8	244.0	0.2

Source: UNDP. Human Development Report 1999

Table 23
Public Expenditure on Health as a % of GDP for Selected CDCC countries

Country	1995
Anguilla	
Antigua & Barbuda	3.7
Aruba	
Bahamas	2.5
Barbados	4.4
Belize	6.0
British Virgin Islands	
Cuba	2.9
Dominica	3.9
Dominican Republic	1.8
Grenada	2.7
Guyana	4.3
Haiti	1.3
Jamaica	...
Montserrat	
Netherlands Antilles	
Puerto Rico	
St. Kitts & Nevis	3.1
St. Lucia	2.5
St. Vincent & the Grenadines	5.3
Suriname	2.0
Trinidad & Tobago	2.1

Source: UNDP. Human Development Report 1999.

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