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A Review of Gender Issues in the Dominican Republic, Haiti and Jamaica

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LIST OF ACRONYMS

ACOSTRAD	Association for the Control of Sexually Transmitted Disease
AIDS	Acquired Immunodeficiency Syndrome
AWOJA	Association of Women's Organizations of Jamaica
BWA	Jamaican Bureau of Women's Affairs
CARICOM	Caribbean Community and Common Market
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CENISM	National Center for Maternal-Infant Health Research <i>Centro Nacional de Investigaciones en Salud Materno-Infantil</i>
CEPAL	Economic Commission for Latin America and the Caribbean <i>Comisión Económica para América Latina y el Caribe</i>
CESDEM	Center for Social and Demographic Studies <i>Centro de Estudios Sociales y Demográficos</i>
CHEPROF	Haitian Center for Research and Action for Feminine Development <i>Centre Haïtien de Recherches et d'Actions pour la Promotion Féminine</i>
CIDA	Canadian International Development Agency
CIPAF	Center for Research for Feminine Action <i>Centro para la Investigación para la Acción Feminina</i>
CPS	Contraceptive Prevalence Survey
CXC	Caribbean Examinations Council
DHS	Demographic and Health Survey
EAP	Economically Active Population
EEC	European Economic Community
EMMUS	Survey on Mortality, Morbidity and the Utilization of Services <i>Encuesta Mortalidad, Morbilidad y Utilización de Servicios</i>
ENDESA	Demographic and Health Survey <i>Encuesta Demográfica y de Salud</i>
ENGHI	National Survey on Household Income and Expenses <i>Encuesta Nacional de Gastos e Ingresos de los Hogares</i>
ENMR	National Survey of Rural Women <i>Encuesta Nacional de Mujeres Rurales</i>
ESSJ	Economic and Social Survey of Jamaica
FAES	Economic and Social Assistance Fund <i>Fondo d'Asistencia Económica y Social</i>
GDP	Gross Domestic Product
GNP	Gross National Product
HIV	Human Immunodeficiency Virus
IAD	Dominican Agrarian Institute <i>Instituto Agrario Dominicano</i>
IEPD	Institute for Studies in Population and Development <i>Instituto de Estudios de Población y Desarrollo</i>
IDB	Inter-American Development Bank
IHSI	Indicators on Household Living Conditions and Society in Haiti <i>Indicateurs Sociaux et Suivi des Conditions de Vie des Ménages en Haïti</i>
ILO	International Labor Organization
LAC	Latin America and the Caribbean
MUDE	Dominican Women in Development <i>Mujeres en Desarrollo Dominicano</i>
NCTVET	National Council on Technical and Vocational Education and Training
NFFB	National Family Planning Board
NGO	Non-Governmental Organization
PAHO	Pan-American Health Organization
PIOJ	Planning Institute of Jamaica
PMA	World Food Programme <i>Programa Mundial de Alimentos</i>
PROFAMILIA	Dominican Association for Family Well-being <i>Asociación Dominicana Pro Bienestar de la Familia</i>
RHS	Reproductive Health Survey
RUFAMSO	Rural Family Support Organization
SEM	Dominican Ministry of Women <i>Secretaría de Estado de la Mujer</i>
STD	Sexually Transmitted Disease
STATIN	Statistical Institute of Jamaica
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP/PNUD	United Nations Development Programme <i>Programa de las Naciones Unidas para el Desarrollo</i>
UNICEF	United Nations Children's Fund
UNFPA/FNUAP	United Nations Fund for Population Activities <i>Fondo de las Naciones Unidas para Actividades de Población</i>
USAID	United States Agency for International Development
UTECH	University of Technology
UWI	University of the West Indies
WEDO	Women's Environment and Development Organization
WDI	World Development Indicators
WDR	World Development Report
WHO	World Health Organization
WWFT	Women Working For Transformation

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PREFACE

This report examines the effect of gender on socioeconomic outcomes in three Caribbean countries: the Dominican Republic, Haiti and Jamaica. Organized into three separate country notes, it covers a range of sectors, including demographics, health and reproductive health, violence, education, labor and agriculture. The report, while covering only three countries, is part of a larger effort of the Caribbean Department of the World Bank aimed at establishing a strategic social agenda in the subregion. It follows on other World Bank economic and sector work prepared in the Caribbean including: Dominican Republic Poverty Assessment (21306-DR, January 16, 2001), Trinidad and Tobago Youth and Social Development (20088-TR, June 2000), HIV/AIDS in the Caribbean: Issues and Options (20491-LAC, June 2000) and Violence and Urban Poverty in Jamaica: Breaking the Cycle (15895-JM, January 1997).

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EXECUTIVE SUMMARY

INTRODUCTION

Many of the key socioeconomic issues that Caribbean countries confront today have an important gender dimension. These include crime and violence, reproductive and sexual health issues, low education levels, unstable family structure, poverty and inequality. Gender roles and relations influence these socioeconomic issues. For example, violent crime is concentrated among young men, who are both victims and perpetrators. Domestic violence is extensive in the Caribbean subregion and for the most part involves men as the aggressors and women as the victims. Aggressive male behavior has been linked to the inability of men (in particular low-income men) to meet societal expectations of achieving and providing for the family, as well as to socialization patterns that teach boys to be tough and girls to be submissive.

Based principally on a desk review and compilation of secondary sources, this report presents findings on gender issues in three key Caribbean countries: the Dominican Republic and Haiti – countries which together contain a significant proportion of the subregion's population – and Jamaica, which is representative of the English-speaking Caribbean. The report compares the situation of men and women as distinct groups and in relation to one another, and examines how gender has a role in determining socioeconomic outcomes in each of the three countries. The report covers the following sectors: demographics and household structure, health and reproductive health, education, labor and agriculture. Because of its reliance on secondary sources, issues such as gender and legal/institutional framework, and migration, while obviously important, are covered only briefly. The report is organized into three separate country notes, each drawing on multiple information sources.

FINDINGS

The Dominican Republic, Haiti and Jamaica, despite their physical proximity, have distinct histories, religions and cultural traditions, making them a very diverse set of countries. The three countries are also quite different regarding gender issues. Available information suggests that Jamaica is the most advanced in terms of political participation, maternal health services, contraceptive use and fertility levels, female education and earnings equality. Haiti, in contrast, exhibits the worst indicators in the region in areas such as maternal mortality, fertility levels, contraceptive prevalence and human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS), with some indicators being worse than those of African countries with a similar gross national product (GNP). It also has the most antiquated laws in the Latin America and Caribbean (LAC) region in terms of gender equality. That said, Haiti fares much better in terms of fertility rates and gender gaps in education when compared with African countries with similar GNP. The Dominican Republic falls somewhere in between the other two countries, having made advances in reducing fertility and education gaps, and taken important first steps to address gender issues in the law and domestic violence. As for addressing from a male perspective – i.e. male violence, substance abuse and risky behavior, fathering roles and low education levels for boys – available information suggests that Jamaica has made the most effort.

The review highlights the following findings regarding gender issues in the three countries:

- **Fertility.** Fertility has declined in all three countries, but particularly in Haiti, where it dropped from 5.9 to 4.3 births per woman from 1980 to 1998. Large regional variations exist, however, with the rate for rural areas being double that of urban areas in Haiti. Fertility rates for the Dominican Republic remain higher than the regional average and are greater among rural women or women with lower levels of education.
- **Maternal Mortality.** At 600 per 100,000 live births, maternal mortality rates in Haiti are the highest in the Western Hemisphere (and higher than those of Togo and Senegal, which have lower adjusted per capita GNPs). While in a different category, the Dominican Republic also has high maternal mortality rates, particularly given the extent of health care available and the country's level of economic development. Jamaica has favorable maternal mortality levels when compared to countries of a similar economic level, however, it is making efforts to further reduce the incidence of maternal death.
- **Adolescent/Unplanned Pregnancies.** Teenage pregnancy, which has important intergenerational effects in terms of poverty, is high in Jamaica compared to the regional average and is on the increase, even though overall fertility levels have decreased. Adolescent pregnancy increased significantly in the Dominican Republic and appears to be less of a problem in Haiti, at least in relative terms. Also, 87 percent of teenage pregnancies are unplanned in Jamaica, suggesting deficiencies in reproductive health care in that country.
- **AIDS.** Haiti has the highest rate of HIV infection in the LAC region. And in the Dominican Republic, HIV/AIDS has reached the level of a generalized epidemic. In contrast, HIV/AIDS is still concentrated among high-risk groups in Jamaica. HIV/AIDS is closely linked to gender roles and relations. As noted in the recent World Bank publication on HIV/AIDS in the Caribbean, many men in Caribbean countries engage in high-risk behaviors such as having early and frequent sex with multiple partners and engaging in unprotected sex, whereas women are expected to defer to their male partners and be economically dependent on them (World Bank 2000e).
- **Violence.** Jamaica has one of the highest homicide rates in the LAC region. Violent crime is concentrated among poor young males, suggesting an intersection between gender roles/socialization and poverty. While measurement problems abound, available information suggests that domestic violence is prevalent in all three countries.¹ For example, one in six women in the Dominican Republic is or will be a victim of physical violence, while one in five Jamaican women ages 25-60 have suffered some sort of physical abuse. In Haiti, an estimated 70 percent of all women have experienced some form of violence. Moreover, a United Nations Children's Fund (UNICEF) study suggests that the sexual abuse of girls is highly prevalent in that country.

¹ For more on measurement problems related to domestic violence, see Shrader 2000.

- **Education.** Gender gaps in education are for the most part a problem affecting boys and men. Jamaica has one of the highest male illiteracy rates in the LAC region. Male gender gaps in school repetition are the highest in the Dominican Republic even though illiteracy is the same for men and women. Lack of education is a generalized problem for Haitian boys and girls.
- **Labor Force.** While figures are not directly comparable, information suggests that a high proportion of women are economically active in Haiti and Jamaica, albeit probably for very different reasons. Their participation has also increased in the Dominican Republic but remains significantly lower than that of men, even though girls outperform boys in school. Female unemployment is higher than male unemployment in all three countries examined: it is almost triple that of men's in the Dominican Republic, double the male rate in Jamaica, and 1.25 times higher than the male rate in Haiti.

Conclusions

While the nature and acuteness of gender issues varies significantly in the Dominican Republic, Haiti, and Jamaica, one common theme emerges from the analysis: the importance of institutions. First, **gender roles are an important institution.** As in other parts of the world, social rules prescribe the roles men and women take on and the appropriate behaviors for each. Beginning with school-age children, boys exhibit higher repetition rates due to labor force participation and the expectation that they should play the male “breadwinner” role. Girls, in contrast, are more likely to abandon school because of early pregnancy or domestic and childcare responsibilities at home, which is consistent with the traditional female “caregiving” role. In Haiti, women face social pressure to bear children, due to their traditional reproductive and maternal roles. In the Dominican Republic, despite higher levels of education among women, female labor force participation is lower than men's, suggesting that gender-specific responsibilities to carry out housework and childcare constrain women's economic activity and earnings.

State institutions also matter for gender outcomes. In no country in the Western Hemisphere is the absence of government so striking as in Haiti, and the gender consequences of these deficiencies are obvious. They have contributed to the highest rates of maternal mortality in the Americas, high fertility and high HIV infection rates. The importance of state institutions is also clear in Jamaica and the Dominican Republic. Almost all teenage pregnancies are unplanned in Jamaica, as are the majority of pregnancies of all ages, pointing to the shortcomings in reproductive and sexual health care programs and policies in that country. In the Dominican Republic, HIV infection is also high and adolescent pregnancy has risen, in part due to the fact that reproductive health programs are directed at married women and exclude other groups, such as youth and men.

Lastly, the **household institution** – how households are formed, the types of unions that are acceptable, and the corollary relationships between partners, parents and children – is critical to understanding gender and socioeconomic outcomes in the countries studied here. Household formation and the relations of its members have important consequences for gender and socioeconomic well-being. In Jamaica, for example, the fact that most children are born out of wedlock and do not have registered fathers means that children are,

for the most part, raised without their biological fathers. Also, the “visiting relationship” – a semi-permanent arrangement in which the man does not live in the same household but visits from time to time – is common in Jamaica. The presence of men in the family who are not the natural fathers of the children in the household has been linked to high levels of sexual abuse in that country. In Haiti, while the largest proportion of the population is in a stable union, men are typically involved in several unions at one time or have multiple partners. Even though it is a stigma for Haitian men not to support their children, in reality many provide very little in the way of economic provisions.

Policy Directions

Over the long term, Caribbean countries need to address socialization processes and norms that cause men and women to assume negative roles and establish asymmetrical relations. These, in turn, are linked to a number of social problems such as: violent behavior among men, shortened life spans among men, the spread of HIV/AIDS, teenage pregnancy, multiple partnering and risk behavior, absent fathers and unstable family environments, school drop-out and repetition (particularly for boys), the unequal burden of parenting and childcare on women, lower female labor force participation and earnings and the intergenerational transfer of poverty and violence.

Socialization processes take place in the public and private sphere and are influenced by, among other factors, the education system, the media, family structures and relations and role models and peer groups. Policy and program interventions should focus on these areas. And to be effective, gender programs need to target both men and women, given that men as well as women are socialized to behave according to gender norms and expectations, with negative consequences for both.

As for specific policy areas, the report recommends: (a) broadening the coverage and scope of **reproductive and sexual health services** for all three countries; (b) expanding programs aimed at **violence prevention** – both male on male violence and domestic violence; (c) investing in **early childhood development and youth at-risk**, in all countries but with a focus on Jamaica and the Dominican Republic; and (d) working on **legal reforms**, in the case of Haiti as well as in the Dominican Republic, with the latter paying specific attention to the labor and family codes, childcare provision and the effectiveness of amendments to the agrarian reform act.

Given the extreme nature of poverty in Haiti, the report also makes two additional recommendations specific to that country: (a) ensuring that economic opportunities reach both women and men (including income, employment and small enterprise generation programs); and (b) investing in on- and off-farm activities in rural areas as well as increasing access to domestic energy in rural areas, the latter having major implications on women’s time and productivity. The extremely limited capacity of the state would suggest that investments would need to be directed through civil society organizations, at least in the short-term.

1. INTRODUCTION

1. Gender is linked to many of the socioeconomic issues that most Caribbean countries confront today, including crime and violence, reproductive and sexual health issues such as teenage pregnancy and the spread of HIV/AIDS, attainment of quality education, unstable family structures, poverty and inequality.² Gender roles – socially ascribed roles and expectations imposed on men and women simply because of their sex – and gender relations – power relations between men and women – affect socioeconomic outcomes. For example:

- Violent crime is concentrated among young *males*, who are both victims and perpetrators. Less reported but extensive domestic violence in the subregion involves *men* as the aggressors and *women* as the victims for the most part. Aggressive male behavior has been linked to the inability of men (in particular low income men) to meet societal and family expectations of being an achiever and provider and to socialization patterns that teach boys to be tough and girls to be submissive (Barker 1998).
- Life expectancy, related to the issue of violence, is a gender issue in that biological reasons only explain two to three years of the longevity gap between women and men. The residual gap is related to *male* behavior – i.e. violence, alcoholism and risky behavior – which, in turn, is linked to male gender roles and socialization patterns.
- The spread of HIV/AIDS, which has attained the status of a generalized epidemic in several Caribbean countries (World Bank 2000e), is related to *male* and *female* sexual behavior and relations. These, in turn, are affected by prevailing gender roles and expectations. In several Caribbean countries, for example, men are expected to have multiple sexual partners, and engage in casual sex and solicit commercial sex. In Jamaica, rigid codes of male bravado mean that men resist using condoms. Also, unequal power relations between men and women make it difficult for women to negotiate condom use during a sexual encounter.
- Educational attainment in the Caribbean – where for the most part *girls* outperform and stay in school longer than *boys* (World Bank 1996d) – is also linked to gender roles. In other LAC countries, studies have shown that the male breadwinner role means that poor boys are more likely to drop-out of school to provide financial support to their families. Poor girls' school attendance is also based on their gender roles: those that drop-out usually do so due to early pregnancy, to take care of siblings or to perform other domestic duties.

² For a review of poverty reduction and human resource development issues in the Caribbean, see *Caribbean Countries Poverty Reduction and Human Resource Development, Report No. 15342-LAC* (World Bank 1996d).

- Poverty and inequality are related to, among other factors, labor force participation and earnings, both of which have gender components. Despite attaining higher levels of education, *women* participate and earn less than *men* in the labor market and have higher unemployment levels. This inequity has been linked to gender roles. For example, employers are often reluctant to hire women in their childbearing years. On the supply side, societal and family expectations that women perform housework and childcare roles also constrain female economic activity (Katz and Correia 2001).
- Unstable home environments and parenting problems, which place children and youth at risk, are related to the high incidence of out-of-wedlock births and single *female* parent households, social attitudes and peer pressures vis-à-vis pregnancy among teenage women, the expectation that *men* have multiple partners and children with more than one mate, the irregular presence of fathers in the household and the use of extended families to raise children (Blank 2000).

OBJECTIVES AND APPROACH

Objectives and Scope

2. Based principally on a desk review and compilation of secondary sources, this report discusses gender issues in three key Caribbean countries: the Dominican Republic, Haiti and Jamaica. The rationale for country selection was that by reviewing these countries the report covers close to half of the Caribbean population and a reasonably representative sample of the Anglophone Caribbean. The report documents the situations of both men and women as distinct groups and in relation to one another, and also examines the role of gender in determining socioeconomic outcomes in these countries. The report covers the following sectors: demographics, health and reproductive health, violence, education, labor and agriculture. Explicit attention is given to the subject of household structure, given its significance and unique characteristics in the Caribbean. The sectors selected for this report were based, among other things, on the availability of information, as secondary sources were used almost exclusively. Thus issues such as gender and legal/institutional framework as well as migration are not covered comprehensively, despite their obvious importance. This report is part of a larger effort on the part of the World Bank's Caribbean Department to analyze and identify the most prominent social issues in the subregion, which will form the basis for a strategic social agenda in the Caribbean.

Approach and Data Sources

3. The report is based principally on a desk review. Findings are organized into three separate country notes, with each note drawing on different data sources. As previously noted, the report draws mostly on secondary information but includes some basic analysis of the 1998 household survey for the Dominican Republic. The main data sources referred to in the text are: the *Encuesta Nacional Demográfica y de Salud*, 1996 (ENDESA-96) and the *Encuesta Nacional de Gastos e Ingresos de los Hogares*, 1998 (ENGIH-98) in the case of the Dominican Republic; the 1994-95 Survey on Mortality, Morbidity and Service Utilization (EMMUS II/DHS 94/95) in the case of Haiti; and the Economic and Social Survey 1999 and 2000 (ESSJ) and the Survey of Living Conditions, 1998, 1999 and 2000 (JSLC) in the case of Jamaica. Throughout the report and for the purposes of comparison, gender

indicators are provided for nations of similar per capita GNP and size of the countries examined here.

GENDER TRENDS IN THE DOMINICAN REPUBLIC, HAITI AND JAMAICA

4. The Dominican Republic, Haiti and Jamaica, while within close physical proximity of each other, are an extremely diverse group of countries with distinct histories and cultural traditions. A former Spanish colony, the Dominican Republic is populated with Spanish-speaking people of both European and African origin who are for the most part Catholic. French and creole-speaking Haiti is a former French colony with a legacy of slavery. The country's folk religion and practices of voodoo – a hybrid tradition emerging from the mix of African heritage and slave experience – is interwoven into all denominations and classes of Haitian society, despite the formal embrace of both Catholicism and Protestant Christianity. Dictatorship, military intervention and severe instability have characterized Haiti's history. English-speaking Jamaica was colonized and ruled by the British for over three hundred years, and remains part of the British Commonwealth. While the majority of its population is of African descent, Jamaica has strong ties to the United States and the European Community, due to its language, history and economic links.

5. Despite their historical and cultural differences, relative economic progress in Jamaica and the Dominican Republic in recent decades has meant that these countries share many gender trends and indicators. But Haiti, as the poorest country in the western hemisphere, is in a category all its own. Table 1.1 summarizes some of the relevant national statistics related to gender differences in these three countries and the LAC region as a whole. In terms of basic demographics, women outlive men in all three countries. The

Table 1.1 Gender Indicators

Indicator	Dominican Republic		Haiti		Jamaica		LAC average	
	Men	Women	Men	Women	Men	Women	Men	Women
Illiteracy (% of people above age 15) ¹	17	17	50	54	18	10	11	13
Maternal mortality (per 100,000 live births) ²	-	220	-	600	-	110	-	-
Life expectancy at birth ³	69	73	51	56	73	77	67	73
Total fertility rate (births per woman) ⁴	-	2.9	-	4.3	-	2.6	-	2.7
Contraceptive prevalence rate (% of population) ⁵	-	64	-	18	-	65	-	59
Adult mortality rate (per 1000) ⁶	153	96	432	339	117	53	216	116
Unemployment rate ⁷	9	24	-	-	10	22	-	-
Earnings inequality ⁸	100	76	-	-	100	90	-	-

Sources:

¹ World Development Report (WDR) 2000/2001 (1998 figures)

² Dominican Republic: ENDESA-96; Haiti: WDR, 1999/2000; Jamaica: ESSJ 1999

³ WDR 2000/2001 (1998 figures)

⁴ WDR 2000/2001 (1998 figures)

⁵ Percentage of women ages 15-49 1990-98, WDR 2000/2001

⁶ Probability of a 15 year old dying before age 60 if subject to age-specific mortality rates between ages 15 and 60, WDR 2000/2001 (1998 figures)

⁷ Dominican Republic: World Bank estimates (based on ENGIH 1998 data); Jamaica: the Labor Force 1998, Statistical Institute of Jamaica (STATIN)

⁸ Percentage of men's earnings on average. Dominican Republic: 1996 *Comisión Económica Para América Latina y El Caribe* (CEPAL); Jamaica: World Bank LAC Gender Database

gender gap at the national level is four years for the Dominican Republic and Jamaica, and five years for Haiti, compared to the LAC average of six years. The total fertility rate for both Haiti (4.3 births) and the Dominican Republic (2.9 births) is above the LAC average of 2.7 births. Contraceptive prevalence is high for both Jamaica (65 percent) and the Dominican Republic (64 percent) compared to the LAC average (59 percent), but extremely low for Haiti (18 percent). Maternal mortality varies significantly among the three countries, reaching 600 deaths per 100,000 live births for Haiti. The Dominican Republic has the second highest level, with 220 deaths per 100,000 live births, followed by Jamaica with 110. Gender inequality in earnings is low in the Dominican Republic and extremely low in Jamaica.

REPORT ORGANIZATION

6. The report has five sections. The first three comprise the country notes, as presented in alphabetical order: Dominican Republic, Haiti and Jamaica. Each note contains an overview of findings followed by a comparison of gender indicators with countries of similar per capita income, a gender analysis by sector and recommended policy directions for the country. The fourth and fifth sections present, respectively, conclusions and recommended policy directions for the three countries in aggregate.

2. DOMINICAN REPUBLIC

OVERVIEW OF GENDER ISSUES IN THE DOMINICAN REPUBLIC

7. Macroeconomic stability in 1991 brought a period of exceptional economic growth to the Dominican Republic. Over the last nine years, its economy has been among the fastest growing in the world, with average annual economic growth exceeding six percent from 1992 to 1999 (World Bank 2001a). Poverty has declined over the last decade, which suggests that the benefits of growth are reaching the poorest sectors of the population. Poverty persists, however, and is particularly acute in rural areas.
8. Recent decades have witnessed important changes in gender conditions in the Dominican Republic. Overall, fertility has declined dramatically over the last two decades, from 4.2 births in 1980 to 2.9 births in 1998 as a result of increased access to contraception, among other factors. Literacy has increased significantly for both men and women, and virtually no gender gap remains. And female labor force participation has grown steadily in the Dominican Republic. Also, the government has begun to recognize and address the important issue of domestic violence. Key actions have included establishing legal amendments to strengthen the protection of women and children, a nation-wide campaign to raise awareness about domestic violence, clinics that offer legal and psychological counseling and police stations that specialize in handling domestic violence cases. The government has also made important revisions to its labor code and agrarian reform act intended to reduce biases and discrimination against women.
9. Despite these advances, a number of indicators point to the need for continued efforts in addressing gender-related issues. Maternal mortality in the Dominican Republic is double the rate of Jamaica and higher than in countries of similar or lower per capita income. Given that health care coverage has increased significantly in recent years, high maternal mortality is indicative of problems in the country's quality of health care. Although fertility has decreased overall, it remains higher than the LAC average, and has risen among adolescent women. Fertility levels also vary significantly, depending on level of education and rural-urban residence. Another key concern is the HIV infection rate, which is among the highest in LAC, and is increasing at a faster rate among women than men. While knowledge of AIDS is widespread among both women and men, erroneous perceptions about transmission are common, and condom use for prevention is low. Domestic violence against women remains prevalent, with migrant Haitian women particularly vulnerable given their illegal status and lack of legal recourse. Interventions directed at men to reduce male violence are incipient in the Dominican Republic.
10. Educational patterns in the Dominican Republic resemble those of other LAC countries, with boys faring worse than girls. In fact, the Dominican Republic has the highest gender gap in school repetition rates in the region. But while girls now outperform boys in school, female labor force participation continues to be lower than that of men. More

importantly, the Dominican Republic has one of the highest gender gaps in unemployment rates in LAC: nine percent for men compared to 24 percent for women. Unemployment is particularly high among female youth (50 percent compared to 31 percent for male youth). The gender wage gap, while persistent, is relatively favorable at 76 percent, with gender differentials most prominent among more educated workers.

11. In terms of gender and the law, the provision of childcare remains an important problem for women, with corollary implications for female labor force participation and earnings. Moreover, the Civil Code continues to discriminate against women in the distribution of common goods as well as the guardianship of children. Despite changes in the agrarian reform act, land ownership remains concentrated in the hands of men. Several aspects of civil and agrarian law still make it difficult for women, and in particular rural women, to gain access to land. Married women, for example, do not even have rights over land which they themselves may have inherited or purchased. Women in consensual unions have even less claim on commonly held land and other property if their unions should dissolve.

12. Lastly, the latest World Bank Poverty Assessment for the Dominican Republic shows that households headed by a female are 13.4 percentage points more likely to be poor than households headed by males, other factors being equal. A simple analysis of poverty by household structure, however, suggests that single parent households – be they headed by men or women – may be a more important determinant of poverty. This issue needs to be examined further before making solid conclusions.

13. The Dominican Republic note is organized as follows: the first section provides some basic gender indicators for the Dominican Republic and countries of similar per capita income, while the remaining sections present the findings of a gender analysis in legal and institutional framework, demographics, household structure, health, reproductive health, violence, education, labor and agriculture. The note ends with policy considerations for the Dominican Republic.

THE DOMINICAN REPUBLIC AT A GLANCE

14. Global indicators for countries of similar per capita GNP show that the Dominican Republic has lower fertility levels than Paraguay and Peru, the same level as Venezuela, and higher levels than Panama (see Table 2.1). It does not do well in terms of literacy levels, however, with only El Salvador and Haiti, which have lower income levels, faring worse. Also, the Dominican Republic's maternal mortality rate is double that of lower income Jamaica, 1.5 times higher than that of lower income El Salvador, and almost three times higher than that of Panama, a moderately higher income country. Only Peru has a higher maternal mortality rate than the Dominican Republic.

Table 2.1 Socioeconomic and Demographic Indicators

	GNP per Capita (1999 dollars) ¹	Population (millions) 1999	Total fertility rate (births per woman) 1998	Maternal mortality (per 100,000 live births) 1990-98 ²	Illiteracy % people 15 + years 1998		Life expectancy at birth (years) 1998	
					m	f	m	f
Haiti	\$1,407	8	4.3	600	50	54	51	56
Jamaica	\$3,276	3	2.6	110	18	10	73	77
El Salvador	\$4,048	6	3.3	140	19	25	67	72
Paraguay	\$4,193	5	3.9	190	6	9	68	72
Peru	\$4,387	25	3.1	270	6	16	66	71
Dominican Republic	\$5,016	3	2.6	85	8	9	72	76
Panama	\$5,016	3	2.6	85	8	9	72	76
Venezuela	\$5,268	24	2.9	65	7	9	66	71

Source: WDR 2000/2001 unless otherwise stated

¹ Adjusted for purchasing power parity

² Dominican Republic: ENDESA-96; Haiti: WDR, 1999/2000; Jamaica: ESSJ 1999; El Salvador: World Health Organization (WHO), 1993 data

INSTITUTIONAL AND LEGAL FRAMEWORK

15. In response to the platform of action of the United Nations Conference for Women held in Beijing in 1995, the Dominican Government established a national action plan, which identified poverty, violence, political participation and institutional strengthening as priorities.³ Main advances in implementing the plan, according to the Dominican Ministry for Women (*Secretaría de Estado de la Mujer*, SEM), include: (a) the creation of women's offices, (b) the creation of some sectoral mechanisms to provide policy follow-up;⁴ and (c) the creation of women friendly police "detachments." The SEM, responsible for implementing the Beijing program, reports to the national legislature but does not have the authority to initiate legislation.

16. Since the Beijing conference, the government has enacted important legislation, both in the form of amendments to codes and special laws, to advance the cause of women. According to the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW, 1998), changes include the following:

- **Penal Code.** The penal code was amended to classify and prescribe "penalties for violence against women and domestic and intra-family abuse; it defines and prescribes penalties for sexual assaults; penalties for procuring and trafficking in women; penalties for desertion of family; and penalties for discrimination."

³ The plan is called the "*Plan Nacional de Género*."

⁴ While sectoral mechanisms exist they are not necessarily effective. For example, offices such as *EDUC-Mujer* do not have the necessary institutional support to carry out its mandate of gender mainstreaming (SEM 2000a). For more on this topic see "*Diagnóstico de Género en la Reforma y Modernización*," a publication put out jointly by the United Nations Fund for Population Activities (UNFPA) United Nations Development Programme (UNDP) and SEM, (2000).

- **Agrarian Reform.** The new Agrarian Law 55-97 recognizes the inclusion of women in the distribution of land, thereby obviating the discrimination against women established by the earlier law.⁵
- **Labor Code.** The new labor code establishes men and women as equals in terms of labor, thereby countering the earlier code that discriminated against women by preventing them from participating in work that was “not appropriate to their sex.” The new code provides legal provisions for women during pregnancy and following childbirth. It also establishes rules to govern domestic service, including workdays, rest breaks, vacations and labor benefits.

17. Legal issues related to gender, however, continue to persist. While the Dominican legislature has debated a bill to provide daycare services for children, which would disproportionately benefit women, no concrete actions have been taken. More importantly, the Civil Code continues to discriminate against women by establishing “universal community” as the common law regime administered by the male spouse, the dowry system and the immutability of marriage agreements. Under the current civil code, when a couple is married the father is entrusted with the administration of his minor children’s personal property; only in the event of the husband’s death does the mother have this same right. In the event of a mother’s death the father is automatically the guardian but the same does not apply to the mother if the father dies. Custody of children in the case of divorce or separation is decided by the courts but is usually passed to the mother.

Political and Civic Participation

18. Recent modifications to the electoral law require that women candidates to congress and local elections constitute 33 percent of the total number of candidates. Despite this move, the proportion of female senators, deputy ministers and mayors is below the regional average (see Table 2.2). The country, however, fares better in terms of women’s participation in the judiciary and chamber of deputies. Moreover, the vice president of the Dominican Republic is a woman.

	Year	Dominican Republic			LAC average
		Total	Women	Women as % total	Women as % total ^a
Women ministers, secretaries of state or equivalent	1999	17	2	11.7	11.7
Women deputy ministers, under-secretaries or equivalent	1998	11	1	9.1	16.1
Women mayors	1998	115	2	1.7	8.7
Women in senate	1998	30	2	6.7	15.6
Women in chambers of deputies	1998	149	24	16.1	11
Women judges in supreme courts of justice	1998	15	5	33.3	16.2
Source: Comisión Económica para América Latina y el Caribe (CEPAL) 1999c					
^a Latest year available for each country					

19. Women are also less involved than men in political parties. The survey on Democratic Culture and Participation reveals that, in 1997, 63 percent of those who declared

⁵ See also UNFPA/UNDP/SEM (2000) and SEM (2000a).

not to belong to any political party were women, and that 22 percent of women versus eight percent of men declared not to be interested in politics. However, the number of women's issues discussed during electoral campaigns has increased as well as the number of women's group initiatives that have become part of the government agenda (SEM 2000). In 1999, the Forum of Women in Political Parties was created to promote a process of internal revision inside political parties to achieve equal opportunities among women and men. Gender differences are consistent in informal political activities, although the differences are smaller when political action is related to solving neighborhood, community or city problems (Duarte et al. 1998). As Box 2.1 indicates, traditional gender roles constrain women from greater participation in political life.

Box 2.1. Perceptions on Political and Civic Participation

The 1997 Survey on Political Culture and Democracy reveals that there is general agreement among both men and women that women should involve more actively in politics, mainly due to "women's better personal and moral values".

However, these positive results are clouded by the fact that 32 percent of the respondents thought that women should participate in politics only if that did not pose a threat on their performance as mothers and wives. Similarly, 25 percent of the survey population considered women should work only if men's earning power was not enough to provide for household needs. It is worth noting that more women than men consider that: (a) politics is a man's activity; (b) women are less able than men to be good politicians; (c) women's involvement in politics must be conditioned to the fulfillment of their household tasks; and (d) the majority of women (53 percent) think that men alone should make household decisions. This suggests that women's perception of themselves as being unfit for certain tasks is one of the main constraints to their greater potential involvement in economic and other public activities and corresponding contribution to national development.

Finally, 51 percent of interviewed people considered that, generally speaking, there was equality between men and women in the Dominican Republic. However, only 38 percent of those with the highest levels of education thought that there actually was equality. Respondents considered that gender equality worsened from 1994 to 1997. However, this may not necessarily mean an actual deterioration of gender equality, but higher awareness about women's issues that causes people to note inequalities that they had not perceived before.

Source: 1997 Survey on Political Culture and Democracy in Dominican Republic commissioned by Dominican Association for Family Well-being (PROFAMILIA).

20. Other forms of women's participation in society have also increased considerably over the last years. Non-governmental organizations (NGOs) have experienced an important growth in the last decade and women have an active presence in them. Women's involvement is especially high in NGOs working in health, women issues, domestic violence, democracy and citizen participation, and micro-finance (PMA 2000). This suggests that Dominican women's limited political participation is less a matter of disinterest than of women using different channels to participate in political processes. Other possible explanations for gender differences in politics include: (a) the generalized cultural perception of formal politics as something exclusively masculine; (b) the different kind of policy issues raised in party politics compared to those in NGOs and other forms of informal political activity; and (c) the actual lack of time that women have to involve in politics due to their domestic burdens.

DEMOGRAPHICS

21. The Dominican Republic has the second largest population in the Caribbean after Cuba, with the proportion of men and women being almost equal. According to the last census conducted in 1993, the population was 7,089,041 of which 50.1 percent were women and 49.9 percent were men.⁶ The population is relatively young, with 34 percent under the age of 15 (United Nations 1998). But a continuing decline in fertility and mortality is gradually changing the demographic profile of the country. Life expectancy increased from 68 years for women and 64 years for men in 1980 to 73 for women and 69 for men in 1998 (Baéz 2000; World Bank 2001b), but remains lower than that of Jamaica, where it is 73 years for men and 77 years for women. In all age groups, mortality rates are higher for males than females. For example, current rates are 153 per 1000 for males age 15-59 years and 96 per 1000 for females in the same age group. The disparity in mortality rates is more significant in adulthood due to external causes such as traffic accidents and homicides.

22. The Dominican Republic is becoming increasingly urbanized. In 1980 the urban population was estimated at 50 percent, with the proportion growing to an estimated 65 percent in 1995 (PAHO 1999a). Although their presence is not reflected in official statistics, an estimated 400,000 to one million Haitians and Dominicans of Haitian descent currently live in the Dominican Republic, which represents approximately six percent of the total population (World Bank 2000a). Despite their contributions to the economy, the majority of the Haitian population in the Dominican Republic remains poor and vulnerable.

Fertility

23. Fertility has declined markedly in the Dominican Republic over the past two decades. Rates decreased from 4.2 births per woman in 1980 to 2.9 in 1998 but remain higher than the 1998 LAC average of 2.7 children and Jamaica's rate of 2.6 children (World Bank 2001b). Urban-rural residence and education also influence fertility. According to ENDESA-96, the average rural woman had 3.9 children, compared with 2.7 for her urban counterpart, down from 4.4 and 2.8 in 1988-91. From a geographic perspective, the highest fertility rates are in the southern part of the country. Fertility also varies according to educational level; those with no education have an average of five children compared to those women with superior education whose average fertility rate is 1.9 births.

24. Teenage pregnancy increased in the Dominican Republic from 1991-96 according to the latest demographic and health survey. About 23 percent of women age 15-19 years had had at least one pregnancy in 1996 compared to 18 percent in 1991 (CESDEM et al. 1997; PAHO 1999a).⁷ Also according to ENDESA-96, adolescent pregnancy varies considerably by urban-rural residence, region and level of education. For example, rural rates are almost double those of urban areas; similarly, the rate is more than double for those women with no

⁶ In 1999 the estimated population was 8,365,000 (UN Statistics Division 1999).

⁷ These figures seem alarmingly high thus further investigation is required to ascertain their validity. According to the World Development Indicators (WDI), the adolescent fertility rate was 12 births per 1,000 women age 15-19 in 1998, which, in contrast, seems unrealistically low (World Bank 2000f). The UNDP reports that in 1991, 13 out of every 100 female adolescents (age 15-19 years) had already been mothers compared to 19 percent in 1996, thereby suggesting a 40 percent increase in teen pregnancy (UNDP 2000).

education compared to those with higher education.⁸ Causes, consequences and policy responses to teen pregnancy are described in Box 2.2.

Box 2.2. Causes, Consequences and Policy Responses to Teenage Pregnancy in the Dominican Republic

Causes: Traditional socio-cultural values and economic dynamics play a role in fostering teenage pregnancy. The high value awarded to motherhood in Dominican culture and the actual lack of professional and educational options for many poor young women, make women perceive marriage and maternity as their only opportunity for development, and in many occasions for economic survival. This, coupled with limited access to contraceptives, misinformation on their use, as well as men's negatives to use them, results in early unsafe sexual relations that more often than not end up in pregnancy. Studies have found a positive correlation between teenage pregnancy and low socioeconomic status, low educational level and low exposure to media (IEPD/PROFAMILIA 1997).

Consequences: Adolescent pregnancy itself has potential physical and psychological negative health consequences for women. Similarly, and despite the fact that abortion is not common, the precarious conditions under which it takes place put young women's health at a serious risk. Moreover, early age pregnancy involves the disruption of educational and productive activities and hinders the terms of women's future incorporation to the labor market.

Policy responses: Some sexual education programs have been put in place in the Dominican Republic in the last years. However, no systematic effort appears to be underway to mainstream sexual education within the curriculum. A nation-wide sexual education campaign could be implemented using schools and the media to disseminate the message. The content could include accurate information on the contraceptives available, their use, as well as their side effects and risks. It could promote social dialogue among institutions across society about how gender roles influence teenage pregnancy and how to use those roles to promote responsible parenting afterwards. In parallel, prioritizing the creation of professional options for poor young women could be seriously considered as a strategy to reduce teenage pregnancy rates.

Source: Paiewonsky (1995), Tejada Holguin (1995) and others.

HOUSEHOLD STRUCTURE

25. Most households in the Dominican Republic are headed by a couple, have children and declare male headship. These households comprise 43 percent of urban and 50 percent of rural households (see Table 2.3). Female single-parent households with children make up another important group, particularly in urban areas where they comprise almost 11 percent of households. The proportion is seven percent in rural areas. The significance of this demographic group of families is that they are likely to have only one adult income earner and dependent children. Single female-headed households without children (primarily widows or separated women) make up 15 percent of households in urban areas and 11 percent in rural zones. Also, according to 1998 household data, male and female-headed

⁸ The childbearing and reproductive patterns of Dominican women have changed little over the last few decades. The average age of first marriage is just under 18 years for rural women and reaches just under 20 years for urban women. Reproductive behavior is characterized by childbirth soon after marriage and close spacing between births (United Nations 1998).

households in rural areas have on average the same number of children, while in urban areas, male-headed households tend to have more children on average than their female counterparts.

Table 2.3 Household Structure by Urban-Rural Residence, 1998

	Single-headed households, no children	Single-headed households, with children	Couple headed households, no children	Couple headed households, with children
Urban				
Male	5.9	1.4	18.1	42.5
Female	14.6	10.8	2.4	4.7
Rural				
Male	8.1	1.3	19.0	49.4
Female	11.0	7.2	1.4	2.7

Source: World Bank estimates, based on ENGIH-98

26. Co-habitation is the most common type union in the Dominican Republic. According to Duarte and Brea (1999), 38 percent of couples lived in common law unions, compared to 30 percent who were formally married in 1997. This trend was higher in rural areas (46 percent against 28 percent). The rates of couple separations and divorce were low, representing 11 percent and three percent of the married population respectively. People in the Dominican Republic marry or form a union at an early age. In 1992, 45 percent of women between 15 and 24 years old had already been married or had lived in partnership (Tejada Holguin 1995). This has repercussions in the form of lower education levels, higher number of children and the assumption of adult responsibilities of women as mothers and men as providers at very early stages of their life.

27. Male-headed households rely more on remittances than their female counterparts. According to analysis of 1998 household data, the share of total household income from remittances for male-headed households is 76 percent when no adults are working. The corresponding proportion is 69 percent for female-headed households. In cases of households with one adult family member employed, the proportion of total household income from remittances is slightly higher for female-headed households (37 versus 34 percent).

HEALTH

28. According to PAHO (1999a), the Dominican Republic has experienced a downward trend in deaths due to communicable diseases, whereas deaths from external causes are on the rise. The proportion of deaths due to malignant neoplasms and perinatal diseases remains relatively stable.⁹ In 1994, women in the 15-44 age category were most likely to die from diseases of pulmonary circulation, followed by tuberculosis, injuries from traffic accidents, and cerebrovascular and ischemic heart disease. Complications during pregnancy, labor and the puerperium, which in 1990 accounted for seven percent of deaths, were down to five percent in 1994. For men age 15-44 years, the leading cause of death in 1994 was

⁹ PAHO (1999a) recommends caution in interpreting these data, as under-registration of deaths was nearly 50 percent in 1994 and deaths due to "ill-defined" symptoms were about 15 percent between 1990 and 1994.

traffic accidents, followed by homicides, other injuries, and diseases of pulmonary circulation and other heart diseases.

REPRODUCTIVE HEALTH

Maternal Mortality

29. While rates vary depending on the source, maternal mortality is high in the Dominican Republic, which is particularly worrisome given that health care coverage has increased significantly over the years. Estimated maternal mortality for the Dominican Republic based on ENDESA-96 is 220 per 100,000 live births over the 1983-94 period (PAHO 1999a).¹⁰ Comparative figures for 1990-1998 were 140 for El Salvador, 170 for Paraguay and 270 for Peru (see Table 2.1). In the Dominican Republic, maternal mortality is highest among adolescent women (age 15-19) and older women (35 and above) (PROFAMILIA/UNFPA 1998). The three leading causes of maternal mortality are toxemia (25-30 percent), hemorrhages during childbirth (21 percent) and clandestine abortions (17 percent) (United Nations 1998).

30. The reported high rates of maternal mortality coupled with the broad availability of professional prenatal and childbirth care available in the Dominican Republic indicate a deficiency in the quality of health care services. Indeed, in 85 percent of maternal deaths in Santo Domingo, the women had received prenatal care (PROFAMILIA/UNFPA 1998). According to ENDESA-96, 43 percent of mothers received care from a general physician during pregnancy, and 55 percent received care from an obstetrician/gynecologist, with variations based on geographic region and educational level.

Family Planning

31. The prevalence of contraceptive use is high in the Dominican Republic compared to other countries. According to ENDESA-96, 45 percent of all women of childbearing age and 64 percent of women who were married or living with a partner used contraceptives in 1996. The average for the LAC region for the 1990-98 time period was 59 percent (World Bank 2000f). Contraceptive use does not vary much by urban-rural residence: 66 percent of urban women and 60 percent of rural women use some form of contraception. The method most commonly used by women was female sterilization (64 percent), followed by the pill (20 percent), other modern methods (nine percent) and traditional methods (seven percent) (CESDEM et al. 1997). Sixty-five percent of men in union reported that they or their partner were using some sort of contraceptive. Private clinics and medical offices provide about one third of contraceptives, public sector clinics provide another third, pharmacies provide about 15 percent and the reproductive health NGO PROFAMILIA provides about 13 percent of contraceptives.

¹⁰ According to the UNDP, estimations of maternal mortality vary by source. For example, the PAHO estimate is 93 per 100,000 live births from 1988-92; the *Centro Nacional de Investigaciones in Salud Materno-Infantil* (CENISM) estimate is 269 per 100,000 live births in 1996 for the National District; and the PROFAMILIA estimate is 107 per 100,000 live births in 1994-95 for the National District (UNDP 2000). However, rural health services are inferior to those provided in the National District thus at the national level maternal mortality rates would be much higher.

32. Coverage and quality of family planning methods and information appears to somewhat problematic, however, with some geographic areas, the poor and youth being at a disadvantage. For example, even though awareness of family planning is widespread among both men and women, many misconceptions exist. According to ENDESA-96, almost all women and men had heard of at least one family planning method, the most common being the pill, sterilization and the condom, which 98 percent of women claim to know. But when asked further about these methods, far fewer could actually describe the contraceptives correctly. Lack of education on how to use contraceptives, lack of medical supervision, women's preoccupations about contraceptives side effects and men's opposition are some reasons for contraceptives misuse or lack of use (Paiewonsky 1995). Figures from the *Encuesta Nacional de Jóvenes* illustrate the magnitude of the misuse. In 1992, despite 65 percent of young women and 56 percent of young men used contraceptives, 86 percent of women having sexual relations became pregnant (Tejada Holguin 1995). For young people, problems of access are exacerbated by socio-cultural prejudices. In the case of condoms, even if available, social disapproval of early age sexual relations, and youngsters' fears, preclude young girls and boys from buying them, thus contributing to high levels of teenage pregnancy.

Abortion

33. Abortion is both an illegal practice as well as a taboo in the Dominican society (Duarte et. al. 1998). A high proportion of those women interviewed in the 1997 Political Culture and Democracy Survey (49 percent) declared to be against abortion. However, illegal abortions occur, according to some estimates, at a rate of one abortion for every three deliveries (Paiewonsky 1995). Women's access to safe abortions is limited by the high cost of those illegally practiced by doctors, in turn forcing many women to use traditional methods, which pose a serious risk for their health.

HIV/AIDS

34. Having now attained the status of a generalized epidemic, HIV/AIDS is the Dominican Republic's most serious health problem.¹¹ At 2.8 percent nationally, the adult infection rate is among the highest in LAC.¹² According to the Joint United Nations Programme on HIV/AIDS (UNAIDS), 130,000 adults and children were living with HIV/AIDS at the end of 1999. Of the AIDS cases reported through 1999, 71 percent were from heterosexual contact and eight percent were from homosexual contact. The male/female infection ratio was 2:1 in 1997, but is now roughly equal. In recent years the prevalence of HIV infection has increased among pregnant women and to a lesser extent among sex workers (PAHO 1999a).

35. The spread of HIV through tourism has been identified as an important issue in the Spanish and Dutch speaking Caribbean in particular (World Bank 2000e). In 1998, tourism

¹¹ A generalized epidemic means that the disease has spread far beyond the original subpopulations with high-risk behavior.

¹² Haiti and the Dominican Republic, taken together, account for 85 percent of the total number of cases in the Caribbean (World Bank 2000e). The incidence rate reaches five percent in La Romana and Puerto Plata Provinces (World Bank 2001c). According to in-country projections, HIV prevalence could reach five percent of the adult population by 2005 if current trends were to continue.

contributed to 29 percent of total export earnings of the Dominican Republic or 13 percent of Gross Domestic Product (GDP) (World Bank 1999).¹³ Young women, as well as young men (known as “beach boys”), provide sexual services in tourist areas, where teenage pregnancy and HIV infection rates are high relative to other areas (World Bank 2000e). Countries such as Thailand that have acknowledged and addressed the link between tourism and sexual reproduction issues have been successful in reducing the spread of HIV without jeopardizing the country’s economic returns from tourism – the challenge will be for the Dominican Republic to do the same.

36. Knowledge of HIV/AIDs is widespread in the Dominican Republic: almost 100 percent of women and 90-98 percent of men claim to know about the disease. However, misinformation is common. According to ENDESA-96, 64 percent of men surveyed indicated that “avoiding mosquito bites” was a form of prevention, while 50 percent noted that “avoiding public baths” and 43 percent noted that “not sharing food with AIDS carriers” would prevent AIDS. Although these misconceptions were more common among older men, less educated men and men in rural areas, 30-50 percent of educated men also had erroneous perceptions about the transmission and prevention of AIDS.

37. Having recognized the magnitude of the problem, the government has made HIV/AIDS a national priority. It is currently funding a number of programs aimed at curbing the spread of the epidemic and mitigating its impact among infected or affected persons.¹⁴ The program will involve scaling up programs and activities targeted to high-risk groups, expanding awareness about HIV/AIDS among the general population, and strengthening institutional capacity to ensure the effectiveness and sustainability of the effort.

VIOLENCE

38. Compared to other countries in the LAC region including neighboring Jamaica, the Dominican Republic is only moderately violent, as measured in the number of recorded homicides. The homicide rate in the late 1980s and early 1990s was 11.9 per 100,000, which was very close to that of the United States in that time period (10.1 per 100,000) (Morrison and Biehl 1999). But male-on-male violence, as well as the lesser reported domestic violence, are important issues in the Dominican Republic. And as previously noted, homicides were the second leading cause of death among men age 15-44 years in 1994 (PAHO 1999a).

39. Studies for other countries in the LAC region suggest that both the perpetrators and victims of most acts of violence are young men (Ayres, 1998; Morrison and Biehl, 1999). Violence in the region is also associated with lower socioeconomic class, unemployment or underemployment, lower education and alcohol and drug abuse (Buvinic et al. 1999). Having experienced or witnessed chronic abuse as a child significantly increases the likelihood of being violent as an adult (Huesmann et al. 1984, cited in Buvinic et al. 1999).

¹³ In 1997, about 2.2 million tourists visited the Dominican Republic (World Bank 1999).

¹⁴ One such program is receiving financing from the World Bank (Project ID: PE-P-071505).

40. But according to some researchers, male gender socialization processes, roles and expectations, when combined with poverty, are at the root of male violence. According to Barker (1998), to be a man in most countries is to work hard, earn well, be responsible and provide financially for one's family. When these goals become difficult to achieve, men regularly assert their masculinity through violence and other dysfunctional behavior. Traditional stereotypes – transmitted through school, the popular media, and the home – reinforce aggression, physical prowess, and risk taking among boys and sociability, relationship building and submissiveness among girls (Pollack 1998).

Domestic and Sexual Violence

41. Although underreporting and lack of empirical data make it difficult to identify the magnitude, domestic violence against women is a major problem in the Dominican Republic. Reported cases are increasing, particularly sexual violence against children and adolescents (PAHO 1999a). According to estimates, one in every six Dominican women is or will be a victim of physical violence. In 1995, national police records showed that of all homicides committed against women, almost six percent were accompanied by sexual violation and 51 percent were classified as "crimes of passion" (United Nations 1998). Depending on the source, domestic violence is the fourth (SEM 2000b) or the sixth (United Nations 1998) leading cause of death for women. Haitian immigrant women living in the *bateyes*,¹⁵ given their often illegal and/or second class status, are especially vulnerable to sexual violence, with little or no legal or psychological recourse (World Bank 2001a).

42. As in many other countries, the practice of physical punishment of children by parents and relatives, both male and female, is common in the Dominican Republic. It affects both boys and girls, and its long-term effects include an acceptance of violence (both in terms of using and receiving violence) and the production of intergenerational cycles of violence. In the case of the Dominican Republic, according to a 1995 UNICEF study on domestic violence, 11 percent of children interviewed reported their father to be very aggressive against family members and eight percent reported their mother to be aggressive. Over 40 percent of children received beatings as punishments. According to human rights reports, the sexual abuse of children is perhaps the most serious human rights violation against children (US Department of State 2000). The National Police Department of Sexual Abuse receive between 200 and 300 reports per month of rapes of children between 4-11 years, only 30 percent of cases ever reach the courts. In 50 percent of the cases the abuser is a person close to the child. Child sexual abuse mostly affects girls, although boys are also victims. Lastly, Ministry of Health information indicates that many pregnancies among adolescent girls were reported to be the result of rape or incest and were often accompanied by sexually transmitted diseases.

Economic Costs of Violence

43. While violence is an issue of social justice and human rights, it is gaining recognition as an economic issue, taxing the health care and judicial systems, affecting productivity and earnings, creating economic and emotional instability within the household, and influencing

¹⁵ Many Haitian immigrants, particularly women, live in *bateyes*, communities located in or close to sugar cane plantations, which have very precarious living conditions.

perceptions of security and well-being and, as a corollary, economic investments. Latin America is spending several percentage points of GDP on its military, police and judicial systems. According to one estimate, loss of life due to homicide costs the region approximately US\$27.7 million, or almost one percent of the GDP of the entire region, given that the average age of a Latin American citizen is 26 and that he would be expected to live another 50 years (Ayres 1998).

Government Actions on Violence

44. The Dominican government has recently made significant efforts to reduce domestic violence. Actions take by the government include: amending the Penal Code, the Code of Criminal Procedure and the Code for the Protection of Children and Adolescents through Law No. 24-97 of January 1997, thereby increasing protection against all types of violence, and especially domestic violence against women and children; carrying out a nationwide campaign to heighten awareness about intra-family violence and sexual persecution; opening legal aid clinics that offer legal and/or psychological guidance to victims; establishing technical cooperation programs between the National Police, the Chief Prosecutor's Office, the Dominican Red Cross, universities and women's organizations to address the issue of violence; creating police stations known as "Women's Welcome Stations" which specialize in receiving and handling cases of violence against women and intra-family violence; training judges and the police to be more sensitive and efficient in handling women's violence cases; and opening SEM provincial delegations.

Education

45. Literacy has increased significantly in the Dominican Republic in recent decades, especially in rural areas, and almost no gender gap remains. In 1998, according to ENGIH, national literacy rates were 85 percent for men and 84 percent for women, with lower rates in rural areas (75 percent for men and 74 percent for women) (see Table 2.4). Figures are slightly lower for the population over 15 years of age (83 percent for both men and women – see Table 2.1). As expected, literacy rates decrease with age, as a result of increased coverage of primary education over time. Literacy is higher for women 15-34 years than for men of the same age group, while rates are higher for men than for women for the population 35 years of age and above. This change in the gender gap is due to higher enrollment rates for girls than boys in recent years (see Table 2.5).

Table 2.4 Literacy Rates in the Dominican Republic, 1998

	National	Urban	Rural	15-19 years	30-34 years	35-39 years
Male	85.1	91.4	75.1	91.7	88.8	88.2
Female	83.9	88.9	73.7	95	90.4	85.7

Source: World Bank estimates, based upon ENGIH-98

Enrollment and Attendance

46. Preschool enrollment levels remain low for both boys and girls, with girls at a slight disadvantage. In 1998, 56 percent of boys age 3-5 were not enrolled in school, compared to 58 percent of girls. Preschool enrollment levels are strongly correlated with income levels.

For example, in 1998, 76 percent of boys age 3-5 from the lowest income quintile were not enrolled in school, compared to 21 percent from the highest quintile. A serious problem with early childhood development is the almost complete absence of public child care facilities in the Dominican Republic. In addition to the negative effects on the cognitive and intellectual development of children themselves, lack of early childhood education limits working parents. Mothers, in particular, must spend resources on childcare and/or forsake labor market opportunities.

47. At the primary level, net enrollment levels are similar for urban boys and girls, but in rural areas, boys are at a disadvantage.¹⁶ After controlling for wealth, the proportion of children who are not enrolled in primary school is significantly higher among the poor than among non-poor families. Also, poor girls do better than poor boys in terms of school enrollment, while the opposite is true among the wealthier. At the urban level, for example, 15 percent of poor boys age 6-13 were not enrolled in school, compared to 11 percent of girls. Surprisingly, urban and rural non-poor enrollment rates are similar (see Table 2.6).

48. A strong correlation exists between mothers' education and school attendance for children age 5-14; fathers' education, in contrast, is not significant for children's education. Also, family income has a higher effect on the education of boys than that of girls. Controlling for the education level of the father and mother, household headship, urban-rural residence, household income and remittances, gender disaggregated probit regressions indicate, for example, that a boy whose mother has secondary education is seven percent more likely to be attending school than a boy whose parents have no education (see Table 2.5); the corresponding probability for girls is four percent. The correlation between mothers who have post secondary education and children's school attendance is higher for girls than for boys. As expected, for both sexes, living in rural areas decreases the probability of school attendance. Lastly, family income level has a positive impact on school attendance, with the effect being more important for boys than for girls. This might be explained by the higher opportunity cost of boys going to school due to higher expected wages for boys vis-à-vis girls.

49. Secondary enrollment rates remain low in the Dominican Republic, with girls faring better than boys in both urban and rural areas. In 1998, net secondary enrollment for boys in rural areas was less than half that of girls (17 percent compared to 36 percent). The gender disparity is less in urban areas where net enrollment for boys and girls is 40 and 47 percent, respectively. Not surprisingly, net enrollment rates are significantly higher among the non poor than the poor. Also, the proportion of boys who do not attend secondary school is similar for the non-poor and the poor after controlling for wealth variables.

50. Higher education enrollment, while low overall, is correlated with income levels and urban-rural residence. Net enrollment rates are higher for women than men except among the poor (see Table 2.7). In 1998, 16 percent of males age 18-23 in urban areas were

¹⁶ Primary school in the Dominican Republic covers eight grades, for children age 6-13 years, with two cycles of four years each. Secondary school covers four grades, with two cycles. The first cycle of two years has a general focus, while the second cycle offers either a general or a vocational/technical focus. Net enrollment rates are defined as the children of the corresponding age groups who are enrolled and attending as well as who are enrolled and awaiting the start of a new school period. It does not include those enrolled but not attending school for other reasons, such as helping their parents work.

enrolled in university, compared to 21 percent of females. In rural areas, three percent of males were enrolled, compared to five percent of females. Interestingly, in rural areas, net enrollment rates for poor and non-poor men are similar, but this is not the case for rural women. At all levels, low school attendance in the Dominican Republic is due mostly to high costs of education for the poor, the low returns on primary and secondary education particularly in rural areas, and the inaccessibility of schools for the poor and the rural population (World Bank 2001a).

Table 2.5 Determinants of School Attendance for Children Age 5-14, 1998 ^{1/}

Parameters	Boys	Girls
Female head of household*	0.025 (0.70)	0.051 (1.49)
Father with primary schooling*	-0.00027 (-0.02)	0.0071 (0.57)
Father with secondary schooling*	-0.0063 (-0.34)	0.0077 (0.46)
Father with higher schooling*	0.016 (0.57)	0.021 (0.73)
Mother with primary schooling*	0.046 (4.25)	0.049 (4.37)
Mother with secondary schooling*	0.065 (5.16)	0.037 (2.93)
Mother with higher schooling*	0.044 (2.39)	0.059 (2.98)
Rural*	-0.035 (-3.55)	-0.032 (-3.18)
Log (income per capita)	0.034 (5.01)	0.019 (2.82)
Single father family*	0.0021 (-0.64)	-0.017 (-1.15)
Single mother family*	-0.031 (0.09)	-0.072 (-0.70)
Dummy x log (remittances per capita) ^{2/}	0.0017 (0.77)	0.0049 (2.16)

Source: World Bank estimates, based upon ENGIH-98

1/ Dependent variable: dummy variable which takes the value of one if the child is attending school and zero otherwise

2/ This dummy variable takes the value of one if the family receives remittances and zero otherwise

* Coefficients represents the marginal effect of the variable on the conditional probability

Note: Numbers in parentheses are the z value for the test of the underlying coefficient being zero

Repetition and Drop-out

51. Repetition and drop-out rates in the Dominican Republic are among the highest in LAC, with gender gaps in repetition and drop-out being among the widest in the region. At the primary level, 38 percent of girls and 47 percent of boys were behind grade in school in 1991 (Filmer 1999).¹⁷ In secondary school, of those pupils 14-17 years old, 49 percent of

¹⁷ These figures represent the highest gender gap among eight LAC countries studied. The proportion of students who were "behind grades" was 12 percent for males and 11.3 percent for females in Bolivia, 52 percent for males and 47 percent for females in Brazil, 25 percent for males and 22 percent for females in Colombia, 22 percent for males and 19 percent for females in Guatemala, 62 percent for males and 58 percent

boys were still enrolled in primary, compared to 38 percent of girls (1998 figures). Repetition rates for the poor are not higher than for the non-poor, but drop-out rates are higher for the poor than for the non-poor (World Bank 2001a).

Table 2.6 Primary and Secondary Net Enrollment Rates, 1998

Urban						
	Not enrolled	Male Primary	Secondary	Not enrolled	Female Primary	Secondary
6-13 years						
Total	9.4	87.7	1.2	8.5	87.7	2
Poor*	14.6	83.1	0.9	10.9	85.6	1.8
Non-poor*	2.8	90.1	1.7	5.4	89.1	3.1
14-17 years						
Total	16.1	42.5	40.5	16.7	35.2	47.1
Poor	15.9	54	29.7	20.2	45.9	33.9
Non-poor	16.5	23.6	58.6	12	20.9	65.7
Rural						
	Not enrolled	Male Primary	Secondary	Not enrolled	Female Primary	Secondary
6-13 years						
Total	11.7	85.5	0.5	9.5	89.1	0.4
Poor	14.5	83.9	0.1	10.9	87.4	0
Non-poor	3.8	93.1	2.3	6.8	93.2	0
14-17 years						
Total	23.6	59	17.1	20.1	43.7	36.2
Poor	24.4	63	12.3	22.9	45.8	31.3
Non-poor	23.8	50.1	26	16.1	35.1	48.8

Source: World Bank estimates, based upon ENGIH-98

*The "poor" correspond to households in the 1st and 2nd income quintiles, while the "non poor" correspond to households in the 4th and 5th quintiles. The income quintiles are based on the Dominican Republic Poverty Assessment (World Bank 2001a)

52. High repetition rates are partly due to the low quality of education, including inadequate teacher training, lack of school supplies and insufficient access to schooling in certain areas (World Bank 2001a). Differentials among repetition and drop-out rates for boys and girls, however, are likely due in part to gender roles. Since boys have higher expected wages than girls, especially in rural areas, they face higher opportunity costs for attending school, as well as greater pressure from parents, in some cases, to begin working at an earlier age. For both primary and secondary age groups, 80 percent of children who work are boys (ENGIH 1998). While girls are less likely than boys to drop-out and repeat school, their educational performance is also influenced by gender roles. For example, the need for girls to care for siblings and/or perform domestic chores may cause them to abandon their studies. Data from ENDESA-96 show that when women with children under six years old enter the labor force, other children often take care of the younger siblings, especially in rural areas. This trend is much more pronounced for women with low levels of education than for higher educated women, who tend to rely more on domestic employees.

for females in Haiti, 21 percent for males and 17 percent for females in Paraguay, and 20 percent for males and 19 percent for females in Peru (Filmer 1999).

Educational Attainment

53. Educational attainment remains low in the Dominican Republic, and boys fare worse than girls overall. In 1996, women had completed an average of 6.5 years of schooling, compared to 6.2 years for men (CEPAL 1999a). The gender gap is larger for the economically active population, with attainment levels of 8.5 years for females and 6.7 years for males. The gender gap is also higher for the non-poor than the poor. Attainment rates are significantly lower in rural areas than in urban areas for both males and females. Among the rural population age 15-19 years, only 44 percent of boys had attained the 6th grade in 1996, compared to 60 percent of girls. In urban areas, 73 percent of boys age 15-19 years had attained 6th grade, compared to 81 percent of girls (Filmer 1999). Completion rates for boys from the richest 20 percent of households are higher than for girls, while completion rates for girls from poorer households are higher than for boys. This suggests that poor boys are left behind or are pressed to drop-out of school to provide income support to the family, whereas traditional domestic work typically carried out by poor girls is more compatible with schooling.

Table 2.7 Higher Education Net Enrollment Rates, 1998

	Urban			Rural		
	Poor	Non-poor	Total	Poor	Non-poor	Total
Male	6.8	24.9	15.9	3.1	4.3	3.3
Female	9.8	30.8	20.6	2.7	11.5	4.7

Source: World Bank estimates, based upon ENGIH-98

Gender Differences in Career Paths

54. Males and females in the Dominican Republic tend to choose academic paths and subsequently careers that are consistent with their traditional gender roles. In technical and vocational education there is a gender difference in courses attended. The segregation in technical and vocational training is paralleled in higher education, where the professions in which most female students enroll and from which they graduate are those socially defined as "feminine", such as teaching, psychology, pharmacy, bio-analysis and nursing (United Nations 1998). While gender differences in academic and vocational career paths are not problematic *per se*, and are due mostly to self-selection, the academic and vocational paths that women tend to choose reflect traditional gender roles and can lead to less promising work and income opportunities.

LABOR

55. Female labor force participation has grown steadily over the decades but remains significantly lower than male participation.¹⁸ Since 1991, female labor force participation

¹⁸ The labor force is defined as the percentage of the working age population (15 to 70 years old) who are currently working, looking for work, awaiting a response to a job application, and discouraged workers. Discourage workers are those who are currently not looking since they looked for a job and could not find one. The discouraged workers represent 2.8 percent of the labor force (4.8 percent for females and 1.5 percent for males). Of the discouraged workers, 67.6 percent are females. When using labor force defined as the percentage of working age population who are currently working, or looking for work, male labor force participation rates are 85.3 percent, compared to 48.6 percent for females.

rates have increased, particularly for women age 35-49 years, while participation rates for both male and female youths have decreased significantly (Sapelli 1999; World Bank 2001a). In 1998, 87 percent of men were in the labor force compared to 53 percent of women (see Table 2.8). While urban and rural male participation rates are similar, female participation rates are significantly higher in urban areas than in rural zones: the rates are 85 percent for urban men and 54 percent for urban women compared to 88 percent for rural men and 43 percent for rural women. Across age cohorts, participation levels of men age 20-54 years are similar, while for women, labor force participation rates increase with age, with the highest levels of participation for women being in the 35-44 age group.

Table 2.8 Labor Force Participation by Age Group, Urban-Rural Residence and Sex

Urban							
	15-19	20-25	25-34	35-44	45-54	55-70	Total
Male	56.5	91.3	97.2	97.5	95.2	76.4	86.5
Female	31.8	64.9	68.5	71.4	60	27.0	56
Rural							
	15-19	20-25	25-34	35-44	45-54	55-70	Total
Male	66.7	91.8	95.4	98.2	96.1	87.6	88.8
Female	32.4	47.7	52.8	58	48	31.1	45.8

Source: World Bank estimates, based upon ENGIH-98

56. While the educational attainment level of the labor force remains very low, women on average have higher average levels of education than men (see Table 2.9). In 1998, 67 percent of the male labor force had no education or only primary education, compared to 47 percent of the female labor force. Although the proportion of the labor force with no education or only primary education has not changed since 1991, the percentage of the labor force with a university education has increased, especially for females. It increased from 16 percent in 1991 to 22 percent in 1999 for women and from 10 to 12 percent for men (World Bank 2001a).

57. Education is positively correlated with labor force participation for women but not for men. Probit regressions using 1998 data, which control for education level, age, household structure, urban-rural residence, numbers of persons in the household, remittances and being poor, show a strong positive correlation between female labor force participation and education. This does not hold true for men, with the exception of those men with secondary education, for which a small positive correlation exists (see Table 2.10). For example, a woman with secondary education is 14 percent more likely to be in the labor force than a woman with no education; a woman with university education is 33 percent more likely to be working. An Inter-American Development Bank (IDB) study of 14 countries in LAC found that education levels were by far the most important factor in explaining women's labor force participation decision in almost all countries analyzed (IDB 1999). An educated woman has the ability to make high earnings in the labor market and hire domestic workers inexpensively, so her marginal benefits of entering the labor force exceed her marginal costs. For uneducated women, however, given their low earning potential, the marginal costs of entering the labor force might exceed the marginal benefits. In the absence of adequate family planning programs, family support and childcare services, having a child might force poor women to stay at home and prevent them from participating in the labor force (World Bank 2001a).

Table 2.9 Level of Education of Labor Force by Sex, 1991-1999

	Total		Female		Male	
	1991	1999	1991	1999	1991	1999
No education	7.5	8.1	5.3	5.1	8.7	9.8
Primary education	52.2	52.3	44.2	44.1	56.4	56.7
Secondary education	28.6	24.4	34.9	29.0	25.4	21.8
University education	11.6	15.2	15.6	21.8	9.5	11.6
Total	100	100	100	100	100	100

Source: World Bank 2001a

58. According to the Poverty Assessment for the Dominican Republic, immigrants of Haitian descent or Dominicans with Haitian roots make up an important part of the unskilled labor force (World Bank 2001a).¹⁹ With the recent changes in the internal labor market, including the privatization of the sugar industry and the growth in the construction and service sectors, many of these Haitian laborers have moved from the *bateyes* to urban and tourist centers, leaving women and children behind. The majority of these women and children live in subsistence situations, as they are restricted by law from participating in work activities such as cane cutting, and have limited income generating activities. As previously mentioned, they are also subject to sexual violence.

59. Household headship is strongly correlated with labor force participation, especially for women (see Table 2.10). While male labor force participation and being single is not correlated, single females tend to participate much more in the labor force than their married counterparts. Remittances from abroad and being poor are both negatively correlated with labor force participation, with the correlation being much stronger for females than for males. Also, poor women tend to participate much less in the labor force than wealthier women.

60. Unemployment has decreased in the Dominican Republic (World Bank 2001a) but remains very high for women, despite average annual economic growth rates of eight percent from 1996 to 1999.²⁰ For women, overall unemployment rates are similar in urban and rural areas, while men's unemployment rates in urban areas are almost twice those of rural areas (Table 2.11). Women and the young are disproportionately more likely to be unemployed. In 1998, nine percent of the male economically active population (EAP) was unemployed, compared to 24 percent of females, which represents one of the highest gender unemployment gaps in the LAC region. Youth unemployment was 33 percent overall and reached 53 and 50 percent for female youth in urban and rural areas respectively. The problem, however, may be one of labor market insertion (Marquez and O'Connell forthcoming). However, while unemployment is higher among women than men, women can fall back more easily on their traditional reproductive and care taking roles in the

¹⁹ Estimates range from 400,000 to one million (with half a million being the preferred guess-estimate of most NGOs), thus suggesting that approximately six percent of the population is Haitian immigrants or Dominicans of Haitian descent (World Bank 2000a).

²⁰ Unemployment rates are defined as the percentage of the labor force who are looking for work, awaiting an answer to a job application, and discouraged workers. Discouraged workers represent 18 percent of the unemployed. Unemployment levels also include persons who are looking for work, but currently study. When unemployment levels disregard discouraged workers, male urban unemployment levels are 10 percent for men compared to 22 percent for women; in rural areas they are five percent for men compared to 20 percent for females.

household. For men, unemployment threatens their only role as family provider, and this often leads to problems of low self-esteem, depression, violence and substance abuse.

Table 2.10 Determinants of Probability of Participating in the Labor Force, Population 25-64, 1998

	Female	Male
Primary ^{1/}	0.062	0.0044
Secondary ^{1/}	0.14***	0.025***
Vocational ^{1/}	0.29***	0.019
University ^{1/}	0.33***	0.016
Post-university ^{1/}	0.21**	
Age 30-39	0.0082	0.0051
Age 40-49	-0.031	-0.023**
Age 50-59	-0.20***	-0.090***
Age 60+	-0.37***	-0.23***
Single	0.12***	-0.0040
Heads of household	0.14***	0.084***
Rest of urban	-0.084***	0.0018
Rest of rural	-0.070***	0.020***
Number of members:		
Ages 0-5	-0.025**	0.0086**
Ages 6-13	0.011	0.0063**
Ages 14-17	0.034***	0.0021
Ages 18-24	0.016	0.0019
Ages 25-64	-0.0042	-0.0019
Ages 65+	-0.0084	0.010*
Remittances from abroad	-0.13***	-0.035***
Poor	-0.13***	-0.059***

Source: World Bank estimates, based upon ENGIH-98

^{1/} Corresponds to complete levels

Note: ***, **, and * represent significance at 99 percent, 95 percent, and 90 percent, respectively

Table 2.11 Unemployment Levels by Age Group, Urban-Rural Residence and Sex

	Urban						Total
	15-19	20-24	25-34	35-44	45-54	55-70	
Male	29.4	19.6	8.4	5	5.2	5.8	11.2
Female	53.1	40.5	22.2	17.8	14.4	13.8	25.3
	Rural						Total
	15-19	20-24	25-34	35-44	45-54	55-70	
Male	17.2	9	5	1.1	1.1	6.1	6.2
Female	49.8	33.9	23.2	19.4	14	8.9	24.4

Source: World Bank estimates, based upon ENGIH-98

Gender Wage Gaps

61. The Dominican Republic has a relatively low gender wage gap compared to other LAC countries, and even compared to some highly industrialized nations. In 1996, women earned 76 percent of what men earned, with rural areas having a higher gender gap (63 percent) (CEPAL 1999b). The urban income gender gap in the Dominican Republic is among the smallest in the region: only Colombia and Costa Rica have lower gaps (CEPAL 2000c). Analysis of 1998 household data suggests that, after controlling for educational level

(and experience to the extent possible), the gender wage gap varies.²¹ Relative to their male counterparts, women with primary, secondary and university education tend to earn five, 14 and 10 percent less, respectively. On the other hand, men with technical or no education tend to earn less than their female counterparts (World Bank 2001a). For example, the average wage for women with neither education nor experience tends to be about 16 percent higher than that of males. This is due most probably to the competition men face with unskilled male Haitian immigrants, who are willing to work for lower wages. Lastly, gender-based wage differentials increase with age (CEPAL 1999a).

62. Discrimination is often argued to be a cause of gender wage gaps. However, self-selection, preferences, and less working experience can also contribute to gender wage gaps. When entering the labor force, women often make decisions based on a preferred work-family balance, which might make them opt for jobs with higher flexibility but corresponding lower wages. Also, vis-à-vis men, women tend to choose fields of study with lower income earning possibilities (Furchtgott-Roth 1999). And because women often enter and exit the workforce to have children and have to carry out domestic duties, they tend to accumulate less work experience than men. In the case of the United States for example, for which data exist on actual labor market experience for men and women, different studies show that, when controlling for education and type of occupation (among other things), gender wage gaps decrease significantly (Blau 1998; Furchtgott-Roth 1999). Besides, combining housework and labor may cause women to constrict their hours of work and hence reduce their wages or occupational choice. Even after controlling for hours of market work, women may reduce their effective level of effort per hour because of their housework and caregiving tasks (Becker 1985, in Blau 1998).

Home-Based Labor

63. As in other countries, domestic labor and child care continue to be the domain of women for the most part. According to ENGIH-98, only 0.5 percent of men reported housework as their main occupation, compared to 29 percent of women, with higher levels for rural women (see Table 2.12). While this does not tell us anything about who carries out household activities on a part-time basis, we can assume that domestic work and child care continue to be mainly a female responsibility.

Table 2.12 Household Work by Urban-Rural Residence and Sex, 1998

	National	Urban	Rural
Male	0.5	0.6	0.5
Female	28.7	24.7	36.8

Source: World Bank estimates, based upon ENGIH-98

Child and Youth Labor

64. Although child labor decreased significantly over the last decade, the Dominican Republic still has one of the highest levels of working children in the LAC region (World

²¹ Experience is usually taken into account by subtracting from a person's age six years (pre-school) and the number of school years attained by the individual. While this proxy works for men, it is less useful for women because they tend to break their work trajectories to have and care for children. Calculations for the Dominican Republic poverty report do take experience into account, while acknowledging the possibility of a bias in the estimate due to data limitations.

Bank 2000f).²² The percentage of working youth in the 10-19 year age group declined from 27 percent in 1991 to 22 percent in 1999 (World Bank 2001a). Boys continue to carry out the bulk of remunerated child labor. Although most children who work also attend school, they are at greater risk of not attending school, particularly if they are from poor families. For working children non-attendance rates are 14 percent, compared to seven percent for non-working children. While the percentage of poor and non-poor children who work is similar, the vast majority of children who work and do not attend school are from poor families.

65. Due to gender roles, both rural and urban boys are more likely to participate in outside remunerated work, whereas girls tend to assist families indirectly by taking on housework and childcare responsibilities. For 1998, 10 percent of boys in urban areas worked, compared to three percent of girls. In rural areas, 19 percent of boys worked, compared to three percent of girls (see Table 2.13). Thus the influence of gender roles – which dictate that men’s primary role should be the breadwinner whereas women’s main role should be the caregiver – starts early in the Dominican Republic, as in other LAC countries. While working does not necessarily mean that kids will abandon school, it can have a negative effect on educational performance and lead to school drop-out. Moreover, full-time child labor is both a result and a cause of poverty, in that working decreases the possibilities of accumulation of human capital and therefore increases the probability of remaining poor (World Bank 2000d).

Table 2.13 Child Labor by Urban-Rural Residence and Sex, 1998

	National	Urban	Rural
Male	13.3	9.6	18.5
Female	2.9	2.6	3.3

Source: World Bank estimates, based upon ENGIH-98

Childcare

66. A number of government agencies have made efforts to establish childcare services in the Dominican Republic, which, among other things, facilitate women’s entry into the labor market. Currently, the Ministry of Public Health operates seven public nurseries and five home schools, the National Council for Children operates 15 daycare centers, the Dominican Social Security Institute operates one nursery school, and the Ministry of Education and Culture operates 3,198 kindergartens (CEDAW 1998). However, demand is reportedly much higher than supply.

AGRICULTURE

67. The Dominican Republic is a relatively urbanized society, with slightly over one-third of the population residing in rural areas and agriculture. Rural areas contribute a disproportionately small and declining portion of national income (13 percent in 1997). Poverty in rural Dominican Republic is double that of urban areas (42 percent compared to

²² Child labor is defined here as the percentage of children in the age group 10-14 who declare work as their main activity.

21 percent), and more than half of the poor and extremely poor households are in the countryside (World Bank 2001a). The rural economy is diversified: approximately one-quarter of rural income (but 42 percent of employment) is generated from agricultural activities, 15 percent from rural manufacturing and agricultural-related services, and the remainder from non-agricultural employment and remittances. Traditionally important crops include sugar, coffee, cacao and tobacco. More recent agricultural exports, which are notable for their high rates of female employment, include fresh and processed fruits and vegetables, flowers and ornamental plants.

Rural Labor Force Participation

68. Labor rural force participation rates for women are 46 percent compared to 89 percent for men (see Table 2.8). Approximately 13 percent of women in 1998 were engaged in some form of wage labor (excluding domestic service) compared to 29 percent of men, while 21 percent of women were self-employed compared to 51 percent of males (see Table 2.14). The *Encuesta Nacional de Mujeres Rurales*²³ showed that among women with agricultural wage employment, most (68 percent) were employed during the harvest, and another 25 percent worked in post-harvest processing (Mones and Grant 1987). Women were most likely to be employed in labor-intensive crops such as coffee, cotton, tobacco, and increasingly in the expanding horticultural sector. In comparison, men's agricultural employment was more diversified. Their activities included field preparation (13 percent), planting (12 percent), fertilizer application (13 percent), and harvest and post-harvest activities (64 percent). The decline of the sugar industry as well as its subsequent privatization in 1999 resulted in thousands of Dominican and Haitian men losing their jobs in this sector.

Table 2.14 Classification of the Rural Labor Force by Gender as a Proportion of the Total Rural Labor Force and of the Total Working Age Population (WAP)

	Wage earners (percent of WAP)	Self-employed (percent of WAP)	Firm owners (percent of WAP)	Unpaid family members (percent of WAP)	Domestic workers (percent of WAP)	Total (percent of WAP)
Male	32.9 (28.7)	57.8 (50.5)	3.3 (2.9)	5.9 (5.2)	0.1 (0.09)	100 (87.3)
Female	31.8 (13.2)	49.5 (20.5)	1.3 (0.5)	8.1 (3.4)	9.2 (3.8)	100 (41.4)

Source: World Bank estimates, based upon ENGIH-98

Gender Division of Labor

69. While there are some regional and wealth-based variations in the gender division of labor in rural areas, most sources seem to agree that women's economic contribution to home production is centered around gender-specific tasks in field agriculture (where subsistence crops such as rice, beans and cassava are grown), tending of home gardens

²³ The *Encuesta Nacional de Mujeres Rurales* (ENMR), from 1985, is the most recent household survey with sufficient gender disaggregation to allow for meaningful gender analysis. The survey was carried out by the *Centro para la Investigación para la Acción Femenina* (CIPAF). In the survey, approximately 22 percent of households were female-headed, which is consistent with ENGIH-98 data. Based on ENMR, approximately 15 percent of women were engaged in some form of wage labor, which is also comparable to ENGIH-98 findings (13 percent).

(dedicated largely to short season vegetables and herbs), small livestock care (especially chickens and goats), and a wide range of "domestic" activities. The latter, which may occupy 10-15 hours of a rural woman's day, include: fuelwood and water collection, cooking, cleaning, clothes washing, shopping and childcare. In addition, some women engage in artisanal production (such as the manufacture of palm leaf mats in the Sierra) and/or informal sector services such as selling raffle and lottery tickets, or small-scale merchant activity (usually the sale of home-produced food and clothes). For men, primary responsibility for the *conuco* (subsistence plot) and large livestock (such as beef cattle and oxen) constitute their principal contributions to household production.

The Non-Traditional Agricultural Export Sector

70. For rural Dominican women, the expansion of the non-traditional agricultural export sector has led to perhaps the biggest shift in their employment prospects and income-generating abilities. Since the 1980s, the non-traditional agricultural export sector has grown in importance in the Dominican agricultural economy. This sector, which has been actively promoted by the Dominican government and international development agencies such as the United States Agency for International Development (USAID), comprises the production and processing of fresh, frozen and canned fruits and vegetables, as well as nuts, flowers and ornamental plants. The sector is geographically dispersed throughout the countryside, with only 16 percent of firms clustered around Santo Domingo (Raynolds 1998). During the 1980s, and especially since the decline of the sugar industry, non-traditional agriculture absorbed an increasing share of the rural work force.

71. A 1990 study on women in non-traditional agriculture estimated that approximately 40 percent of the non-traditional agricultural labor force is female, with women workers concentrated in the labor-intensive food industries such as canned tomatoes and fresh melon and pineapple production (*ibid.*).²⁴ A clear gender division of labor exists, however, with supervisory and professional jobs reserved almost exclusively for men. At the level of production workers, women predominate in the most rapidly paced assembly line operations where both dexterity and speed are required, such as selection, washing, filling cans and packing fresh produce into boxes. Men, on the other hand, watch over the processing machinery, lifting and transportation aspects of the work. A firm-based survey²⁵ suggests that one-third of female non-traditional agricultural workers are household heads, and fully three-quarters are mothers, implying that it is not predominately young, single rural women who are accessing these new jobs (*ibid.*).

Land

72. Despite almost forty years of agrarian reform, land ownership is extremely concentrated in the Dominican Republic. Over half of the rural population is landless, and almost three-quarters of those who do own land have farms too small to generate income above the poverty level. At the other extreme, 200 wealthy families control half of all of the country's arable land (World Bank 2001a). Another 15-20 percent of agricultural land is still

²⁴ Female participation in non-traditional agriculture can only be estimated, given the lack of national statistics on the companies or workers who comprise this sector (Raynolds 1998).

²⁵ Note that the study was a small sample size and thus does not allow for larger scale extrapolations.

owned by the government. Furthermore it is estimated that only 40-60 percent of the land is legally registered. No reliable statistics on the gender division of land ownership currently exist (CEDAW 1999), however, *Mujeres en Desarrollo Dominicano* (MUDE) estimated in 1996 that eight percent of land titles were registered to women. Lack of land titles has a negative effect on, among others, the productivity of land, access to credit from the formal sector and farmers' incentives to invest in land-attached capital goods (World Bank 2001a), and as such increases the probability of being poor.

73. In addition to the highly skewed distribution of the land ownership, for many years several aspects of agrarian and civil law made it difficult for rural women in particular to gain access to land. According to the 1962 Agrarian Reform Law, all property brought into and obtained during marriage was legally administered (meaning sold, mortgaged or otherwise entered into a legal contract) by the husband (Alvear Valenzuela 1998). Married women therefore had no rights, even over land which they themselves may have inherited or purchased, and women in consensual union – which are not recognized in the country's Civil Code – have even less claim on property on commonly held land and other property if their unions should dissolve. In the event of a husband's death, Dominican law gave hereditary rights to children, parents and siblings of the deceased, in that order. Widows were eligible for up to one-quarter of the property of their husbands, but only if a will was drawn up before the husband died.

74. The new Agrarian Reform Law, passed in 1997, has the potential to improve women's access to land and credit considerably. Under the new law, land titles are registered in the names of both spouses or partners. For the legal administration of land, the consent of both spouses or partners is required. The reform also allows women to benefit on equal terms with men with respect to technical training and housing plans. As well, the law abolishes the previous requirement for women to have approval from their spouse/partner to access credit.

75. But problems in the law remain. Beneficiaries of the land distribution are normally identified through a process of in which landless peasants associations, whose members are often exclusively men, draw up lists of potential candidates. In the case of the death of the male beneficiary, wives had to reach an agreement with all of the potential inheritors regarding future administration of the parcel, or risk reclamation by the *Instituto Agrario Dominicano* (IAD). If a husband abandons the parcel, it is left to the discretion of the IAD whether to allow a son or the wife – “whoever has better ability to comply with the contract” – to continue to work the land, or whether to reclaim it for redistribution to a new beneficiary.

76. Despite limitations in the law, the proportion of women land owners increased from seven percent in 1996 to 10 percent in 1999. Moreover, credit agreements between the *Banco de Crédito* and women's organizations have been signed and, in 1998, women were the beneficiaries of 36 percent of the total resources lent by the *Banco de Crédito* (Rosario 2000). However, the effectiveness of the new law is still unclear given its short period of application. Also, unless the new legal framework is accompanied with other measures in the implementation process, women's access to land in rural areas is unlikely to improve much.

POVERTY

77. The World Bank's Poverty Assessment for the Dominican Republic finds the following poverty-related gender issues:

- *Poverty is associated with household structure and gender.* Controlling for number of family members, educational level of the household head and the companion, sources of income and access to basic service, female-headed households are more likely to be poor than those households headed by men, the difference being 4.6 percentage points. In urban areas, about 41 percent of poor households were female-headed, although they made up only 32 percent of all urban households.
- *Mother's education is strongly correlated with poverty reduction.* Because of the link to children's nutritional status, mothers' education is strongly correlated with poverty reduction. Thus even though gender parity has been achieved in educational attainment, educating girls continues to be a critical strategy for combating poverty.
- *Women, particularly poor women, have lower labor force participation than their male counterparts.* Since the mobilization of female labor is a common household response to poverty, the Poverty Assessment suggests that higher fertility rates and corollary domestic and childcare responsibilities hinder poor women from participating in the labor force and generating income.

78. A simple analysis of poverty by household structure suggests, however, that the fact that a household is headed by a single parent might be more important determinant of poverty than the sex of the household head. As Table 2.15 shows, families that are male-headed with children in rural areas are actually the most likely to be poor – 57 percent of these households are poor – although these make up only 1.3 percent of rural households. In contrast 50 percent of female-headed rural households with children are poor and these make up a more significant proportion of households (seven percent). Also noteworthy is that 40 percent of couple households who declare men as the head are poor, and this group makes up almost 50 percent of rural families in the Dominican Republic. In urban areas, the category that calls attention is female single-headed households, 27 percent of which are poor.

Table 2.15 Poverty Rates by Household Structure and Urban-Rural Residence

	Single-headed households, no children		Single-headed households, with children		Couple-headed households, no children		Couple-headed households, with children	
	% that are poor	% of total households	% that are poor	% of total households	% that are poor	% of total households	% that are poor	% of total households
Urban								
Male	7.9	5.9	19.0	1.4	9.8	18.1	16.9	42.5
Female	17.9	14.6	27.0	10.8	9.1	2.4	23.0	4.7
Rural								
Male	12.3	8.1	56.5	1.3	22.7	19.0	39.8	49.4
Female	36.6	11.0	49.6	7.2	41.7	1.4	45.5	2.7

Source: World Bank estimates, based upon ENGIH-98

CONCLUSIONS AND POLICY CONSIDERATIONS

79. While gender-related indicators such as fertility, girls' education and earnings equality are favorable and the Dominican Republic has taken important recent steps to advance women's status, a number of issues persist. These include reproductive and sexual health concerns (maternal mortality, teenage pregnancy, and AIDS/HIV); gender biases in the law or enforcement of the law, including issues related to childcare, the family and labor codes, and agrarian reform; the incidence of domestic violence; and problems related to boys' education and early childhood development. These issues and brief recommendations related to each are discussed below.

Reproductive and Sexual Health

80. Maternal mortality is relatively high in the Dominican Republic, teenage pregnancy has risen over the last decade (according to ENDESA-96), and the incidence of AIDS/HIV has increased to the point of being a generalized epidemic. In the case of the latter, the government has made AIDS a top national priority and is working to contain and reduce the spread of the epidemic. But it would also be important for government-supported and other programs to consider that condom use is hindered by a number of factors, including lack of communications in sexual relations and traditional gender roles, which make it difficult for women to negotiate condom use and which promote risky "macho" behavior among men. As for reducing maternal mortality, a critical first step would be to identify why, in the context of high maternal health care coverage, the rate continues to be high.

81. Regarding teenage pregnancy, it is important to ascertain if, as in other countries, reproductive health programs target women in union to the exclusion of youth and men, and if so, to broaden the coverage of services to reach these groups. Youth programs that do exist should be tailored to the needs of youth. For example, international experience suggests: (a) putting in place integrated programs that address employment, violence, sexuality, sexually transmitted diseases (STDs) and AIDS, which work better than conventional health programs; (b) using youth workers to reach other youth; (c) using participatory learning in the form of role playing and assertiveness exercises rather than traditional didactic training methods; (d) addressing causal factors related to adolescent sexual activity, including self-esteem, decision-making, gender roles and values; and (e) targeting youth where they normally congregate, i.e. school, the community, the street and the workplace (Barker and Fontes 1996).

Legal Framework

82. Gender issues related to the law include: (a) disparities in the civil code to men's advantage; (b) labor laws which may inadvertently discriminate against women; (c) lack of daycare provision which can hinder the participation of women in the labor force; and (d) recent amendments to the Agrarian Reform Law which may not be sufficient or may have enforcement problems. Continued efforts to review, revise and evaluate the Dominican Republic's legal framework are thus required. In this context, identifying mechanisms to improve the provision of childcare, particularly for poor women and single parent households, is a top priority given that female-headed households are more likely to be poor and that poor women generally have lower labor force participation rates than their female non poor and male counterparts. Expanding early childhood development programs is another important consideration given that these not only facilitate women's entry into the

labor market but also promote children's cognitive and academic skills thereby reducing their chances of being at-risk later in life. Promoting family friendly work policies in labor laws is a final priority to enable parents, and particularly mothers, the flexibility to combine work and childcare.

Domestic Violence

83. As in other parts of the region, domestic violence is prevalent. While the Government has already taken important actions to address the issue, ensuring adequate coverage of programs and a focus on prevention is essential. According to Morrison and Loreto Biehl (1999), the education system, community-based organizations and the media are important vehicles for preventing violence. The education system, for example, can be used to modify cultural values that promote violent behavior. Possible actions include: (a) training teachers to ensure they do not promote violent behavior among boys and submission among girls; (b) eliminating gender stereotypes in textbooks and other pedagogical materials; and (c) developing innovative programs to teach children nonviolent resolution skills and promote civic values. Community-based organizations can be used to teach citizens about legal sanctions against violence and provide social services for victims of violence. Lastly, communications and media, including radio, television and print material, can be used to promote nonviolent behavior. In Latin America, *telenovelas* (soap operas) in particular have been a powerful mass medium for transmitting social messages. As for the enforcement of the domestic violence law, efforts to integrate, inform and educate the police, judges, potential victims and offenders on the law have been successfully introduced in the Dominican Republic and elsewhere and could thus be scaled up.

Education/Early Childhood Development

84. Early childhood development is another key policy area for the Dominican Republic. Children who attend pre-school perform better academically and have better cognitive skills, thus reducing the chances that they will be at-risk later in life. Preschool is also critical for parents (mothers) because it facilitates their entry into the paid labor market and increases their economic opportunities. The latter is particularly important given that women's labor force participation is an important coping strategy for the poor.

85. To help address at-risk youth, particularly boys in danger of dropping out of school, international experience suggests that establishing programs that complement the public school system work better than placing all the onus on an already burdened education system (Barker and Fontes 1996). Broad-based public sector reforms should of course continue to focus on reducing school drop-out and repetition. But community-based organizations, NGOs and other government agencies should work in parallel to the public system by supporting programs and networks to keep youth in school. Examples of such programs include *Cidade Mãe*, a Brazilian community-based vocational training and after-school academic support program which also provides health education, recreation and counseling for youth; the Cities in Schools program in the United States, which provides group and individual counseling, life-skills education, preparation for the work force and remedial education and tutoring in partnership with government, social service NGOs and

community businesses;²⁶ and *Liceu de Artes e Ofícios*, another Brazilian program that provides vocational training, life-skills and health education for low income youth who agree to continue studying while in the program.

²⁶ Life-skills include training, activities and discussions in: self-awareness, parenting, nutrition, health and sex education, drug abuse prevention, sports and recreation, basic literacy and social studies, community services, entrepreneurship and preparation for employment (Barker and Fontes 1996).

3. HAITI

OVERVIEW OF GENDER ISSUES IN HAITI

86. Haiti is the poorest country in the Western Hemisphere. Poverty is endemic; more than 60 percent of the population lives below the poverty line. Malnutrition affects about one half of children under the age of five, and less than half the population has access to safe water. Over half of the adult population is illiterate, and only one in seven adolescents attends secondary school. As poverty has increased in recent years, evidence suggests that income inequality has increased as well; the gini coefficient is estimated to be 0.56, surpassed only by Brazil and Guatemala in the LAC region.

87. As the poorest country in the Western Hemisphere, Haiti also exhibits some of the worst gender-related indicators. For example:

- maternal mortality is a staggering 600 per 10,000 live births;
- life expectancy at birth is 56 years for females and only 51 years for males;
- the overall fertility level is 4.3 children with huge regional differences;
- modern contraceptive use is the lowest in the Western Hemisphere;
- the HIV infection rate is the highest in LAC, with women's and men's infection rates now being equal; and
- sexual and domestic violence against women and girls appears to be common.

88. Legal and constitutional advances related to women have also been minimal in Haiti, and the legal code remains antiquated in terms of gender equality. Adultery is classified as a second-level crime, and women who are caught can receive three months to two years' imprisonment, while men pay only a fine. Rape is never actually defined in the law but is classified among "offences against public decency." Abortion is illegal under all circumstances, even for therapeutic purposes, and punishable by 3-9 years in prison. And although only a minority of Haitian couples are legally married, the law does not recognize many rights of women living in informal unions, particularly those related to inheritance.

89. Haiti has very low levels of educational attainment overall, but unlike African countries with similar levels of economic development such as Togo and Senegal, only a small gender gap exists in favor of men. Primary and secondary educational attainment is similar for men and women. However, illiteracy is higher for women (54 percent) than for men (50 percent).

90. Interestingly, Haiti has one of the highest female Economically Active Population rates (EAP) in the developing world, with 62 percent of women working. From 1981 to 1999, the female proportion of the EAP increased from 40 to 48 percent while men's EAP decreased from 60 to 52 percent. This is not so surprising given that women's labor force participation tends to be U-shaped, depending on the stage of economic development in which the country finds itself (Blau et al. 1996). That is, the participation of women is typically high when a country's economic development is low, and the country is in the stage

of subsistence agriculture, as is the case of Haiti. However, women's unemployment – an estimated 44 percent in 1993 – is substantially higher than men's (35 percent).

91. The situation in rural Haiti is particularly acute given the stagnant under-productive agriculture sector, the lack of basic infrastructure and services, and the extensive environmental degradation. These severe conditions in rural areas have differential consequences for men and women. For example, total fertility rates are 5.9 children and only nine percent of pregnant rural women gave birth in hospitals (compared to 31 percent of their urban counterparts). While time use data are unavailable, it is likely that housework, a traditionally female task, is particularly onerous because of fuel shortages and a lack of piped water.

92. Household structure significantly influences gender realities in Haiti. Several types of heterosexual unions exist, with "cohabitation" being the most common, and the level of stability of these unions varies widely. The importance of these unions goes beyond cohabitation; it often influences, among other things, the type of support that the man is obligated to provide and that the woman expects, as well as the family's emotional and economic stability, decision-making about family planning, and safe, or unsafe, sexual behaviors.

93. The Haiti note is organized as follows: the first section provides some basic gender indicators for countries of similar per capita income both within and outside LAC; and the second section presents findings of gender analysis in the following areas: legal and institutional framework (including political representation), demographics, household structure, health, sexual and reproductive health, violence, education, labor, agriculture and environmental degradation. The topic of sexual and reproductive health, including HIV/AIDS, received more attention than did others for two reasons. First, the recent demographic and health survey provides the most up-to-date representative information for Haiti at this time, thereby facilitating a more thorough analysis. Second, the seriousness of HIV/AIDS in Haiti justifies a more in-depth discussion on the gender dimensions of this epidemic. The note ends with a section on policy considerations for Haiti.

HAITI AT A GLANCE

94. Haiti has some of the worst socioeconomic indicators in the Western Hemisphere. Even when compared to African countries with lower per capita GNP, it fares poorly. For example, Haiti's maternal mortality levels are worse than those of lower income Togo and Senegal (see Table 3.1). However, compared to these countries, Haiti has significantly lower fertility levels and gender gaps in illiteracy. As for LAC countries, Haiti's indicators are much worse than those of Nicaragua, the second poorest country in the Western Hemisphere, in terms of total fertility, maternal mortality, illiteracy and life expectancy.

Table 3.1. Socioeconomic and Demographic Indicators for Comparable Countries

GNP per capita 1999 dollars ¹	Population (millions) 1999	Total fertility rate (births per woman) 1998	Maternal mortality (per 100,000 live births) 1990-98 ²	Illiteracy % people 15 years + 1998	Life expectancy at birth (years) 1998
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Senegal	\$1,341	9	5.5	560	m	f	m	f
Togo	\$1,346	5	5.1	480	55	74	51	54
Haiti	\$1,207	8	4.3	600	28	62	47	50
Nicaragua	\$2,154	5	3.7	150	34	31	66	71
Honduras	\$2,254	6	4.2	220	27	27	67	72
Jamaica	\$3,276	3	2.6	110	18	10	73	77
Dominican Republic	\$4,653	8	2.9	220	17	17	69	73

Source: WDR 2000/2001 unless otherwise stated

¹ Adjusted for purchasing power parity

² Dominican Republic: ENDESA-96; Haiti: WDR, 1999/2000; Jamaica: ESSJ 1999

INSTITUTIONAL AND LEGAL FRAMEWORK

95. The Ministry of Women's Affairs and Women's Rights is Haiti's main government body responsible for the status of women. As a ministry, it has the authority to present legislation to parliament and reports to parliament (Women's Environment and Development Organization, WEDO 1998). Due to the weakness of government agencies, international development agencies such as the UNDP, UNFPA, UNICEF, USAID and the Canadian International Development Agency (CIDA) have played a key role in further addressing gender issues in Haiti. As with the provision of most basic services, non-governmental organizations carry out much of the work related to gender in Haiti.²⁷

96. Haiti's progress has been minimal on legal and constitutional reforms related to women. Recent limited advances include:

- **1982:** Haiti establishes a landmark decree that makes women equal to men, particularly within marriage. However, different penalties for breaches of laws continue to be applied, even though they may contradict this decree, the 1987 Constitution, and ratified treaties.
- **1994:** The government establishes the Ministry of Women's Affairs and Women's Rights to work toward eliminating "all forms and practices of violence against women" and to "propose and promote legal, administrative and disciplinary reform toward the respect of constitutional principles of equality between men and women".²⁸
- **1981 and 1986:** Haiti ratified the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Inter-American Convention on

²⁷ Data are scanty, but existing information suggests that the private and NGO sectors help compensate for the public sector's inability to deliver basic service in health, education and extension. Between 1992 and 1994 NGOs delivered 60 percent of all health services provided in Haiti (Schneidman and Levine 1998) and approximately 80 percent of all primary and secondary schools are run by the non-governmental sector (Salmi 1998; OXFAM 1995). The development of this parallel state is largely the result of donor strategies that have prioritized the NGO sector in the face of a weakened and inefficient public sector operating under successive militarized and repressive regimes.

²⁸ *Ministère à la Condition Féminine et aux Droits de la Femme.*

the Prevention, Punishment and Eradication of Violence Against Women, but these have little practical or even formal significance.²⁹

97. Examples demonstrating the antiquated nature of Haiti's laws with regard to gender include:

- Adultery is classified as a *delit*, or second-level crime, and women who are caught are punished with three months to two years imprisonment, while men pay only a fine. Murder committed by a husband who discovers his wife and her lover *in flagrante delicto* may be excused by a judge or punished by no more than two years in prison.
- Rape is never actually defined in the law but is classified among "offences against public decency" (*atteintes aux bonnes moeurs*). Courts tend to attribute less importance to the rape of a woman who is not a virgin on the pretext that her honor is not at issue. Medical certificates are required to prove rape and are difficult or impossible for most women to obtain.
- Abortion is illegal under all circumstances, even for therapeutic purposes, and punishable by 3-9 years in prison. A doctor or other person who performs an abortion can be jailed for 3-15 years, although prosecutions are very rare.
- Violence is punished by laws against assault and battery, according to the circumstances of the attack and the degree of injury to the victim. Assault on a parent or adoptive parent is singled out for additional penalties, but no special mention is made of assault by men on women. Domestic abuse has traditionally been seen as an internal family matter and not penalized (Fuller 1999).
- Although only a minority of Haitian couples are legally married, the law does not recognize many rights, particularly of inheritance, of women living in *plaçage* (informal marriage), the most common form of stable union. Among other distortions caused by the law's non-recognition of widespread social practices, a married man may not recognize children born of a woman other than his wife, leading such children to sometimes be falsely registered as the children of the married woman (Fuller 1999).
- In rural areas, customary law is prevalent over Civil/Statute Law. Thus, while inheritance laws are meant to treat men and women equally, traditional practices exclude women from land ownership (N'Zengou-Tayo 1998).

Political Representation

98. In the 1997-99 period, women comprised 17 percent of ministers and 60 percent of deputy ministers but only four percent of local authorities and deputies (CEPAL 1999c). There are no female Supreme Court judges. The proportion of female ministers and deputy ministers in Haiti is high compared to the LAC averages of 12 and 16 percent respectively.

²⁹For example, under both dictatorship and democracy, Haiti has ignored its commitment to provide progress reports to CEDAW.

DEMOGRAPHICS

99. Haiti has one of the highest population densities in Latin America, with an estimated 283 inhabitants per square kilometer in 1999 (World Bank 2001b). In 1999, Haiti's total population was about eight million, with about two-thirds of Haitians living in rural areas. The age structure of Haiti's youthful population reflects high fertility and elevated mortality; 40 percent of the population is under the age of 15 years, and 56 percent is between the ages of 15 and 64. In 1998, Haiti had an age dependency ratio of 0.82 (dependents to working age population), one of the highest in the LAC region (WDI 1999).

100. Life expectancy at birth is the lowest in LAC, at 51 years for males and 56 years for females (World Bank 2001b). The probability of dying between the ages of 15 and 59 for men is 432 per 1,000, as compared to 339 per 1,000 for women. Men are under-represented in the population, with 96 men to every 100 women, largely due to increased international migration and excess mortality among males.

Migration

101. The collapse of agriculture in combination with the violence and repression of the recent coup period spurred a significant increase in out-migration from Haiti.³⁰ Out-migration has distinct gender and class characteristics and varies according to push factors and resources that can be deployed to migrate. Internal migration is dominated by women (twice as many women as men migrate from rural to urban areas), whereas cross-border migration is dominated by men (Laguerre 1998; Akman 1992). Men disproportionately migrate seasonally or semi-permanently to the Dominican Republic, to seek employment harvesting sugar cane and bananas on plantations and farms.³¹ Women tend to migrate to urban areas seeking employment as domestic employees or in export processing zones.³² The temporary or permanent nature of these migration decisions affects household formation in both rural and urban areas.

102. For many Haitian households, the ability to capture remittances is key to diversifying income and lifting these households out of poverty (Gammage and Jumelle 2000; CARE 1997b). Almost 70 percent of household survey respondents in the rural Northwest and Northern Artibonite reported having at least one relative overseas, who send average annual remittances of a little over 1500 *gourdes*.³³ Remittances appear to be disproportionately important for female-headed and female-maintained households allowing them to purchase a range of consumption items that enable them to mitigate poverty and secure income.

³⁰ Between 1990 and 1997 an estimated 220,000 Haitians, or almost four per cent of the total population, migrated to the United States (US Census Bureau 1999).

³¹ While men make up the greatest proportion of international migrants, women also migrate externally and in some cases face more serious exploitation and discrimination than their male counterparts. The National Coalition for Haitian Rights reports that in the Dominican Republic, which is estimated to have the greatest number of Haitian migrants, economic and racial exploitation is further exacerbated for women who as workers have fewer rights than men (for example, they are not legally permitted to work on sugar cane plantations, and are not eligible to receive housing, health care and other social services, and are often subjected to sexual violence) (Correia 1998; World Bank 2001a).

³² Although men also migrate to the cities and obtain employment in the urban informal sector, a significant proportion do so as an interim strategy to secure contacts that will eventually enable them to migrate to other Caribbean islands or to the United States.

³³ The exchange rate at the time of writing was 25.30 *gourdes* = 1US\$.

Remittances make up approximately 43 percent of total income for female-headed households and less than 29 percent for male-headed households (ADRA survey 1994). Households receiving remittances were more likely to have a microenterprise or undertake small-scale trade.

HOUSEHOLD STRUCTURE

103. The household is a dynamic entity in Haiti, not easily defined or captured by conventional survey instruments. Households dissolve and reform due to seasonal and periodic migration, fostering-in and -out of children³⁴, multiple partnering and the high proportion of informal conjugal unions (Correia 1998; CARE 1997a; de Zaldondo et al. 1993; Anglade 1986). The importance of the union goes beyond cohabitation; it often influences the type of support that the man is obligated to provide and that the woman expects, as well as emotional and economic stability, decision making about family planning and safe, or unsafe, sexual behaviors.

104. The most common type of union is cohabitation (*place*) (Cayemittes et al. 1995; Akman 1992; Maynard-Tucker, 1996), followed by legal marriage (*marye*), and then union without regular cohabitation (*vivavek*) (see Table 3.2). As Table 3.3 indicates, gender differences are small with respect to those in *marye* and *place* status. However, men are more likely to be single than women (the proportions being 43 percent and 32 percent respectively). Furthermore, a higher proportion of females than males claimed to be in less stable relationships, or were separated or divorced. It is important to note that the "union" status is not mutually exclusive or static. Men could be involved in several unions at one time or have multiple partners, including casual ones (Akman 1992). While it is not uncommon for women in unions other than legal marriage to have more than one partner, it is expected that women remain monogamous (Maynard-Tucker 1996).

Table 3.2 Types of Unions in Haiti, by Order of Stability

Type of Unions	Definition	Characteristics
<i>Marye</i>	Legal marriage	Generally involves cohabitation and stability. In rural areas, it is not commonly practiced because of costly rituals and ceremonies. The man is usually obligated to provide economic support for the woman and children (Akman, 1992).
<i>Place</i>	To set up a household	Generally involves cohabitation and can be as stable as <i>marye</i> . It was originally created as a form of partnership because rural residents did not trust the legal system and civil officials, and wanted to avoid costly weddings and the influence of the state or Church in restricting partners (Akman, 1992).
<i>Vivavek/Menaj</i>	To live as a pair	May or may not involve cohabitation; less stable than <i>place</i> . Male economic support is limited (Akman, 1992).
<i>Remen</i>	Lover	More common among young people in rural areas, and involves sexual relations. May or may not lead to <i>place</i> .
<i>Fyanse</i>	Engaged	More prevalent among young people in urban areas, and generally practiced by higher social economic classes.
<i>Antente, Flirte, Wik'en</i>	Casual	Involve sexual relations that are unstable and casual.

³⁴ There is frequent fostering-in and -out of children as part of a complex coping strategy that enables households to meet their daily subsistence requirements. Approximately 28 percent of urban and 24 percent of rural households reported that they were caring for foster children, according to the 1994/95 Demographic and Health Survey (DHS) (Cayemittes et al. 1995). Foster children are usually extended kin.

Table 3.3 Prevalence of Types of Unions by Sex

"Marital" Status	Female %	Male %
<i>Marye*</i>	17.9	17.5
<i>Place*</i>	27.8	26.1
<i>Vivavek**</i>	11.4	5.7
<i>Renmen/Fiance**</i>	1.0	0.9
Separated/Divorced	8.0	5.4
Widowed	2.1	0.9
Single	31.8	43.4
Total	100.0	100.0

Source: Cayemittes et al. (1995)

*union with cohabitation (stable)

** union without cohabitation (unstable)

105. **Paternity.** Attributing paternity is tremendously important in Haitian society, and a man's inability to support his own children (regardless of how many and from whom) is a stigma. By law and custom, a married man's children with other women cannot become his heirs, thus the reluctance of some men to legally marry may also be understood as unwillingness to prospectively disinherit future offspring (Lowenthal 1984). But while the presence of children is, in theory, a guarantee of economic support from the father, in reality many Haitian mothers do not receive such support, and must accept their children as their sole responsibility (Brown 1991; Farmer 1999).

HEALTH

106. Haiti consistently ranks poorly in the LAC region with respect to health indicators. The World Health Organization (WHO) ranks Haiti 138th of 191 countries in terms of the overall performance of the health system, the lowest ranking in the LAC region. Women's life expectancy at birth is higher than that of men, despite exceedingly high maternal mortality levels. The health system is rife with inequitable access, limited coverage and low quality of services, with the poor disproportionately bearing the burden. The health infrastructure has continued to deteriorate, with the majority of health facilities dating back to 1930s (Schneidman and Levine 1998). Furthermore, low utilization rates were related to shortage of staff, equipment and supplies, long waiting times, travel cost and inconvenience. Geographical distribution of physicians and health facilities is heavily biased toward urban areas, in particular Port-au-Prince.

Infant and Child Health

107. Boys suffer from slightly higher infant mortality rates than girls in Haiti (see Table 3.4). Although the infant mortality rate is declining in Haiti, at a little less than 74 per 1,000 live births, it remains among the highest in the region. This alarmingly high rate of infant mortality is linked to low educational levels for women in Haiti (Rokx 1997). Infant malnutrition is associated with over 50 percent of all childhood deaths (Pelletier in Rokx 1997),³⁵ and most malnourished infants are not hospitalized (Rokx 1997). Malnutrition in

³⁵ While breast-feeding is nearly universal in Haiti (96 percent), the demand upon women to generate income means that many women abandon breast-feeding early and wean prematurely. Only three percent of children are breastfed exclusively for the first three months of life. The early introduction of liquids and solid foods

infancy and early childhood is manifested in low height for age (stunting) and low weight for age (wasting), which are highest in the lowest income quintiles (see Table 3.5). Girls are uniformly better nourished than boys, except in the middle income quintiles.

Table 3.4 Infant Mortality Rates by Sex (Deaths per 1,000 live births)

	1980-85	1990-95
Girls	116	70
Boys	128	78
Ratio of girls to boys	0.91	0.90

Source: CEPAL 2000

Table 3.5 Child Health by Sex

	Low height-for-age			Low weight-for-age		
	Income quintile			Income quintile		
	Poorest	Middle	Richest	Poorest	Middle	Richest
Percent of girls malnourished						
1994-95	43.5	33.3	10.5	37.3	28.6	8.5
Ratio of girls to boys						
1994-95	0.91	1.06	0.73	0.92	1.14	0.75

Source: Gwatkin et al. 2000

SEXUAL AND REPRODUCTIVE HEALTH

Fertility

108. Haitian women will give birth to 4.3 children during their reproductive years on average, with gaping regional differences (World Bank 2001b). In rural areas, the total fertility rate stands at 5.9, whereas in Port au Prince it is 3.0, and in other urban areas it is 3.9. Gender preference for child is not evident in Haiti (Akman 1992). The majority of Haitian women prefer about three children (Cayemittes et al. 1995). Rural women prefer a slightly greater number of children (3.6 children) than urban women (3.0 children). And almost no difference exists between men (3.4 children) and women (3.3 children). Higher fertility rates in rural areas suggest that the unmet need for family planning is most extreme in these regions.

Adolescent Fertility

109. Adolescents between the ages of 15 and 19 contributed to a small but significant portion of Haiti's high fertility: teenage mothers delivered eight percent of all births. According to the DHS 1994/95, girls in rural areas were more likely to have initiated their fertility by the time of the survey than were their counterparts in urban areas (Cayemittes et al. 1995). As expected, Haitian males in general are more likely than females to have their first sexual experience at an earlier age. Among the 15-19 year old age group, eight percent

dramatically increases the risk of infectious disease, diarrhea and ultimately death for the infant (PAHO in Rokx 1997; Alvarez 1990).

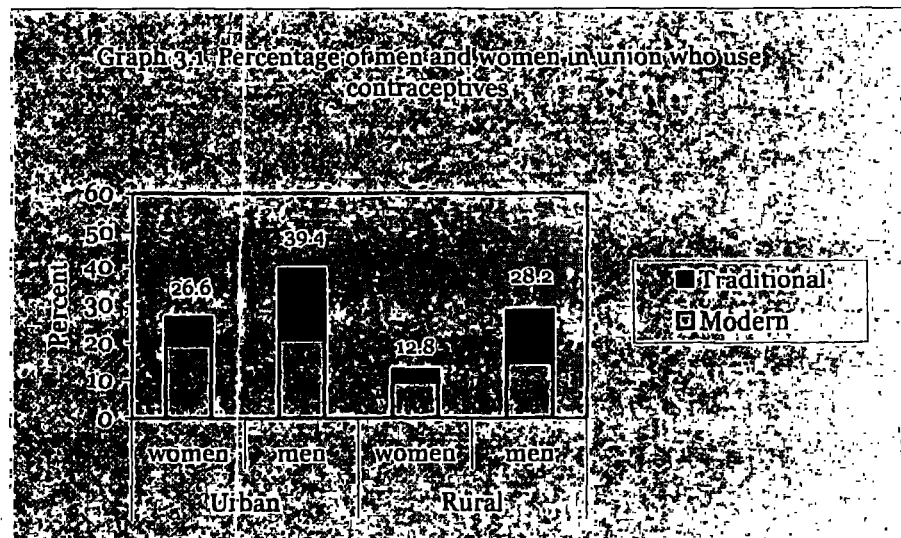
of girls have had sex by the age of 15, compared to 20 percent of the boys, which is consistent with findings from other surveys.³⁶

Contraceptive Use

110. Although Haiti has witnessed an improvement in contraceptive use in recent years, the country still has the lowest rate in the Western Hemisphere, despite numerous programs supported by donors and international organizations. According to the latest figures (1998) on contraceptive use, 18 percent of Haitians in their reproductive years were using contraceptives (World Bank 2001b). The DHS 1994/95 reports that just 13 percent of women and 17 percent of men in their reproductive years were using a modern contraceptive (which in Haiti includes the pill, injectables, female sterilization, hormonal implants, condoms and male sterilization). Gender and regional differences are noteworthy: women residing in rural areas who are *in unions* (13 percent) are less likely to use family planning than their counterparts in urban areas (27 percent) (Cayemittes et al. 1995). This pattern is also evident among men. About 39 percent of urban men in unions have ever used family planning, compared to 28 percent of their rural counterparts. When only modern contraceptives are considered, contraceptive utilization rates decline even further.

111. Contraceptive use also differs significantly by type of union. For both women and men, those who are sexually active but who were not currently in a union were more likely to use contraception than all of those in a union. It is interesting to note that contraceptive use was more common among men and women in unstable (non-cohabitating) relationships than among those in stable (cohabitating) unions. Resistance to family planning and contraceptive use in Haiti is reinforced by many factors; see Box 3.1 for a detailed discussion.

112. Low contraceptive use is prevalent among sexually active adolescents, which further exacerbates the potential adverse health consequences of early sexual initiation. Only nine percent of girls between 15 and 24 years old have tried any form of contraception, and of these, only four percent have ever used a modern method (WHO 1998).



³⁶ The Child Health Institute found that in its sample, 10 percent of sexually active young women and 24 percent of sexually active young men had sex before the age of 15 (cited in Holschneider 1999). The Haiti Family Planning and AIDS Prevention Survey, conducted in 1998, revealed an even higher level of early sexual initiation: 35 percent of sexually active women under the age of 18 have had sex before 15 (cited in Holschneider 1999). The Haitian National Survey on Contraception in 1989 found that, among its male respondents, eight percent had sex for the first time between the ages of seven and 11 (WHO 1996).

Half of adolescents attending a large clinic in Port-au-Prince, reported having had one or more abortions (Guest 1994). These figures reveal a vast need to include adolescents in reproductive health programs.

Maternal Mortality

113. Of every 100,000 live births in Haiti, about 600 women die from child birth (WHO/PAHO 1998), giving the country the highest maternal mortality rate in the LAC region. WHO identified the principal direct causes of maternal deaths in Haiti as: eclampsia (31 percent), hemorrhage (22 percent), infections (20 percent), gynecological disorders (11 percent) and other complications from an infection or neurological condition (16 percent). High maternal mortality in Haiti is related to clandestine unsafe abortions, and in large part reflects the failure of the country's health care system, which has inadequate prenatal and natal care. Only nine percent of pregnant rural women gave birth in hospitals, as do only 31 percent of their urban counterparts.

114. Poor quality of service engenders a lack of confidence in medical facilities by the public. Barnes-Josiah et al. (1998) studied 12 maternal mortality cases and identified three main causes: delay in seeking appropriate medical care in an emergency, delay in reaching an appropriate obstetric facility, and failure to receive adequate care at the facility. Moreover, an estimated 25 to 40 percent of all maternal deaths could be prevented through improved family planning (Schneidman and Levine 1998). Coupled with the failing health system, high maternal mortality takes place within a socio-cultural environment that promotes high fertility, high economic and social value of children and gender expectations about women and child bearing.

115. Underlying the formal health care system of clinics, hospitals and medical professionals, a rich and highly structured traditional health sector continues to thrive in Haiti (Barnes-Josiah et al. 1998). Various types of healers participate in assisting pregnancy and childbirth and caring for related problems, such as shamans (voodoo practitioners),

Box 3.1 The Challenge of Reducing Fertility in Haiti

Resistance to family planning in Haiti is reinforced by a variety of social, religious and practical factors. As in many other poor countries, Haitians view children as assets for their labor, such as helping mothers maintain the household and rearing younger children. Moreover, women view children as strengthening their partner's emotional and economic ties to the family. This is particularly true in insecure and unstable unions, such as *vivavek* or *remen*. Bearing a child helps to secure a woman's relationship with her male partner (Akman, 1992, Maynard-Tucker 1996).

Religious beliefs also promote high fertility. Catholicism is the primary religion of Haiti, with Protestantism gaining grounds among the rural and urban poor. Alongside Christianity, voodoo is widely practiced by the majority of Haitians. The opposition to modern contraception has emerged from many leaders across all religious groups (Maynard-Tucker 1996). For example, voodoo priests, who play an important role as healers, view contraception as an assault on the belief that women can be possessed and impregnated by a god during rituals (Maynard-Tucker 1996).

Furthermore, women with no or few children bear social stigma. Women who have only one or two children or have difficulty getting pregnant are considered "infertile" or "pedisyon"—a culture-specific illness in which a woman is thought to be pregnant, but the normal progression of pregnancy is stopped. Many Haitians believe that sterility is the curse of black magic upon the woman (Maynard-Tucker 1996). Coreil et al. (1996) suggests that pedisyon allows women who are infertile or subfecund to cope with the social pressure to bear children.

herbalists and traditional birth attendants. Whereas the former two are relied on in cases of pregnancy or delivery-related complications, traditional birth attendants often hold the primary responsibility for delivering births. As might be expected, women living in rural areas have less access to physicians and nurses than urban women. Untrained personnel assisted more than half of the deliveries among rural women, as compared with a quarter among urban women, according to the DHS 1994/95 (Cayemittes et al. 1995). Place of childbirth differs greatly between regions. Half of the women in Port-au-Prince gave birth in a hospital, compared with 31 percent of women in other urban areas.

HIV/AIDS Epidemic

116. Haiti is facing a devastating HIV/AIDS crisis, the worst in the LAC region. Although men were disproportionately affected by HIV infection during the early stages of the epidemic, the rate of infection among women has risen dramatically to equal that of men (Ulin et al. 1993). UNAIDS estimates that 5.2 percent of the general population between the ages of 15 and 49 has been infected with HIV. A total of about 190,000 adults and children were living with HIV/AIDS at the end of 1997. More than 90 percent of the infections occurred through heterosexual contact (Deschamps 1996).

117. HIV/AIDS in Haiti has been a generalized epidemic since the late 1980s, with the infection spreading beyond highly vulnerable groups into the

Box 3.2. Vulnerability to HIV in Haiti

The HIV epidemic in Haiti is likely to continue spreading given the context of elevated vulnerability, as exemplified by the following:

- While a large majority of people in Haiti has heard of HIV/AIDS, some groups, for example, rural women, rely on few information sources.
- AIDS has evoked fear in segments of the society, according to a 1993 survey of 1,300 men and 1,300 women between the ages of 15-49. Fear and stigma can drive the epidemic further underground and inhibit people from seeking testing and counseling, and from discussing and inquiring about the disease.
- Despite general awareness of condoms, actual use (life time prevalence) among the sexually active population is extremely low, particularly in rural areas. Only a fifth of rural men have ever used a condom, as compared to 46 percent of urban men (DHS 1994/95). Among the 12 percent of sexually active women who have ever used a condom, only 41 percent used the condom in every sexual encounter. Condom use is highest among singles, followed by women in unstable unions. Among sexually active males, condom use was highest among men who were separated or divorced, followed by men in unstable unions. Socio-cultural barriers to condom use abound in Haiti.
- Maintaining multiple sexual partners is a norm rather than an exception in Haiti (Ulin et al. 1993; Holschneider 1999; Maynard-Maynard-Tucker 1996). For example, men in unstable unions in both rural and urban areas had, on average, 2.4 partners in the 12 months prior to the DHS 1994/95 survey. Maintaining multiple sexual partners is not uncommon among women, though not as widespread or accepted as for men.
- Although the scope of the commercial sex industry is not known, paying for sex is not uncommon in Haiti. Eight percent of all male respondents of the 1994/95 DHS survey stated that they have paid for sex in the last 12 months, with men in rural areas (nine percent) more likely than men in urban areas (six percent) to have paid for sex. The magnitude and type of commercial sex services available, particularly in rural areas, are not known and need further investigation.
- Vulnerability to HIV is exacerbated by population movements, particularly male migration. Lack of social ties and social control, skewed sex ratios and availability of sex work all help fuel, among other things, risky behaviors associated with HIV.

general population. In 1989, 42 percent of workers engaged in the commercial sex industry of major urban areas in Haiti were already infected with the AIDS virus. In 1998, the prevalence climbed to 70 percent (UNAIDS, cited in Holschneider 1999). Pregnant women in major urban areas manifested HIV infection as early as 1986. In a sample of 1,237 women attending antenatal clinics in the slums of Port-au-Prince, nine percent were HIV positive (Boulos et al. 1990). Although much of the attention has focused on urban areas, a few studies show that HIV has made inroads into rural areas (Olle-Goig et al. 1994).

118. In the absence of an adequate and prompt response to HIV/AIDS, and given the context of high vulnerability in Haiti, the epidemic will continue to spread (see Box 3.2). High risk sexual behaviors, particularly among men, such as multiple sexual partners and engaging with sex workers, low condom use and early sexual initiation are common. The spread of HIV will be facilitated by the lack of STD treatment, care and management, and high mobility (rural-urban and cross border), in particular male migration. Sexual behaviors are further reinforced by norms about male and female sexuality, and gender roles and relations in sexual and reproductive decision-making.

VIOLENCE

119. While specific data on Haiti are unavailable, the country's weak institutional framework means that virtually no rule of law exists and that violence is a generalized experience for both men and women. As in other countries, violence has important gender dimensions. Although both men and women experience and witness violence frequently, men are both the perpetrators and victims of violent acts whereas women are typically victims only.

120. The limited information that exists suggests that violence against women, and particularly the sexual abuse of girls, is widespread in Haiti. According to a 1996 UNICEF-funded investigation by the *Centre Haïtien de Recherches et d'Actions pour la Promotion Féminine* (CHREPROF), more than 70 percent of the female population have experienced some form of violence, of which 37 percent is sexual in nature (Adams et al 1998; Fuller 1999). One third of respondents said that they had been victims of physical violence and 50 percent of these aggressors were husbands or boyfriends. Also according to the study, an astounding 46 percent of Haitian girls have been sexually abused, of which 33 percent had experienced their abuse between the ages of five and nine years, and 43 percent between the ages of 10 and 14.³⁷ Despite this level of incidence, 66 percent of victims never report the crime, even though 79 percent can identify the perpetrators. The failure to report violence is attributed to the fact that many Haitian women do not know they have the right to bring charges against their aggressors and that they have the right not to be beaten by their spouses.³⁸

³⁷ The references to the study do not mention the specific age range of "girls", but do break down ages 5-9 and 10-14. Thus while not clearly stated in the report, "girls" is probably meant to refer to 15 years and under.

³⁸ When male respondents were asked about violence, 80 percent believed that violence against women was sometimes justified, such as in cases where women were rowdy (*tapageuse*), extravagant, refused to obey, or had committed adultery (CHEPROF 1996, in Fuller 1999). CHEPROF (1996) and other sources also report that 29 percent of women had not consented to their first sexual experience. The same study noted a prevalence of violent expressions commonly used by men to describe sexual intercourse (such as crushing, hitting, beating, etc.).

Women may also be reluctant to talk to the police or bring claims before the courts because they lack confidence in these institutions.

121. As a generalized problem in Haiti, violence jeopardizes the health and security of all of its citizens. Long recognized as a social justice and human rights issue, violence is gaining recognition in the LAC region as an economic issue, taxing the health care and judicial systems, affecting productivity and earnings, creating economic and emotional instability within the household, influencing perceptions of security and well-being and, as a corollary, economic investments (Ayres 1998; Morrison and Biehl 1999).³⁹ Further, international public health research shows that the presence of violence plays a profound role in health and fertility outcomes (UNICEF 2000; Ellsberg 1997; Heise 1994).

EDUCATION

122. Illiteracy levels in Haiti are the highest in LAC for both men and women, although they are higher for women than men. While gender gaps have declined gradually, about 50 percent of men and 54 percent of women above age 15 are illiterate (World Bank 2001b). Illiteracy levels are greater among women than men in all age brackets except the 15-24 age category, in which male illiteracy narrowly exceeds female illiteracy. However, in the 25-34 age group, female illiteracy is double male illiteracy, according to EMMUS II data for 1991.

123. At 56 percent, Haiti has the lowest enrollment rates for primary education in the Western Hemisphere. The problem of basic schooling is particularly severe in rural areas (Salmi 1998). A similar proportion of girls and boys age 6-10 are enrolled in school, with a greater proportion of girls enrolled in rural areas and the reverse in urban areas. The gap favoring girls increases in the age 11-15 group, particularly in urban areas. Among 16-20 year olds, however, a significantly greater proportion of boys are enrolled than girls. Data are insufficient, however, to provide a clear picture. It is likely, for example, that some children may be repeating years of school not successfully completed. The fact that boys tend to have high repetition rates in other LAC countries (and in the Caribbean countries in particular) could explain the higher proportions of boys enrolled in school. Available information suggests that parents in Haiti indicate no gender preference for sending their children to school but rather base their decision on economic means and the child's aptitude (Smucker in Economic and Social Assistance Fund, FAES 1999a; Cayemittes et al. 1995).

124. Educational attainment is similar for men and women. Data from 1991 (EMMUS II) indicate that primary and secondary attainment rates are low for both boys and girls, with little difference between the two. Primary school attainment for girls age 15-19 was 60 percent, compared to 58 percent for boys. High school enrollment and completion rates are low, with only 29 percent boys and 28 percent of girls aged 15-19 receiving some high school education.

³⁹ Latin America is spending several percentage points of its GDP on its military, law enforcement and judicial systems (World Bank 1997a). According to one estimate, loss of life due to homicide costs the region approximately US\$28 million or almost one percent of the GDP of the entire region given that the average age of a Latin American citizen is 26 and that he would be expected to live another 50 years (Londoño, 1996).

LABOR

125. The Haitian economy has a very high labor force participation rate for both sexes, and has a higher proportion of economically active women than any other developing society in the world, with the exception of Lesotho (Farmer 1999).⁴⁰ In 1995, the IDB estimated male and female participation rates to be 87 percent and 62 percent respectively (IDB 2000). From 1981 to 1999, the female proportion of the economically active population increased from 40 to 48 percent, whereas the male proportion decreased from 60 to 52 percent (1999 data are presented in Table 3.6).

126. As in other countries, the distribution of occupations varies by gender. As Table 3.6 indicates, women made up 82 percent of all workers engaged in marketing and petty trade in 1999; a full 44 percent of the female EAP worked in this sector.⁴¹ Just over half the male workforce was engaged in agriculture. Women were also active in agriculture, comprising 37 percent of all workers in the sector, compared to only 12 percent in the rest of LAC (International Labor Organization, ILO 2000; Anglade 1995).

127. Women's participation in the marketing system varies significantly, from the *prisonne* trader who sells small quantities of goods produced in the household, to the *Madam Sara* who buy in bulk from producers or intermediaries to sell wholesale in urban centers (Correia 1998). Although women predominate in petty trade, as the value of the merchandise rises, so does the percentage of men doing the selling (Brown 1991). Unfortunately, for most women working in the sector, low profits make it difficult for them to build up inventories and benefit from economies of scale. Economic conditions force many women to work under these conditions, making the sector competitive and unprofitable. Women concentrate in commerce and petty trade because entry is relatively open, skills and capital requirements are low, hours are flexible and employment is consistent with child-rearing responsibilities.

Table 3.6 Economically Active Population (10+ Years) by Sector and Sex, 1999

	Total	Male%	Female%	% of sector female
Agriculture	44.5	53.6	34.5	37.1
Industry and manufacturing	12.9	18.3	7.0	25.9
Commerce, petty trade and restaurants	25.7	9.0	43.9	81.7
Services	17.0	19.1	14.6	41.2
Total	100	100	100	47.8

Source: Charmes (2000)

128. **Unemployment.** Unemployment is extremely high in Haiti for both men and women, although it is higher for women. Gender-disaggregated data on unemployment are scarce and notoriously inaccurate, particularly in rural areas. According to a 1993 UNICEF study, the national unemployment rate was 39 percent, 44 percent for females and 35

⁴⁰Labor force participation rates are the employed and unemployed expressed as a percentage of the total numbers of working-age individuals (i.e. between the ages of 15 and 65).

⁴¹ Self-employment rates for both men and women in Haiti are also far higher than elsewhere in the Caribbean or in Central America (Charmes 2000). Preliminary data from the 1999-2000 household survey (*Indicateurs Sociaux et Suivi des Conditions de Vie des Menages en Haiti*, IHSI) on household budgets and consumption reveal that 68 percent of men and 84 percent of women are self-employed.

percent for males (UNICEF 1994). The release of the latest household survey data might provide better estimates of unemployment data by gender.

129. **Wage Gaps.** Gender-disaggregated data on wages are scanty, however available information suggests that gender wage differentials persist in Haiti. The 1993 UNICEF study found that a greater proportion of working women than men were in the lowest revenue level, in both the formal and informal sector (see Table 3.7). About 83 percent of formal female workers were in the lowest income level, compared to 44 percent of men.

Table 3.7 Worker Distribution by Income Level, Formality and Sex

Level of Income	Formal Sector		Informal Sector	
	Men	Women	Men	Women
Lowest third	43.8 %	82.9 %	69.4 %	87.4 %
Middle third	39.3 %	11.0 %	20.0 %	5.3 %
Upper third	16.9 %	6.1 %	10.6 %	7.3 %

Source: UNICEF (1994)

AGRICULTURE

130. Haiti's agriculture sector has long been stagnating. The sector contributes scarcely one-third of GDP. Production declined steadily until 1998, when a modest increase of two percent was recorded. The sector's share in exports declined from about 50 percent in 1980 to less than 10 percent in 1998. Agriculture's capacity to employ labor has also declined. The percentage of the population employed in agriculture declined from 61 percent in 1971 to 31 percent in 1989 (UNICEF 1993) and likely decreased even more over the last decade. While employment data are suspect, given that many people are employed part-time in agriculture, it is clear that the agricultural sector is currently unable to fully support the rural population, who must seek off-farm employment or migrate. The neglect of the rural sector has decreased the size of land holdings and led to a complex, informal tenure system. These conditions constrain the choices of agricultural workers and discourage long-term investment.

Rural Poverty

131. According to CARE (1997b), a little more than 74 percent of all Haitian households face extreme food insecurity or weak food security (see Table 3.8). On average, 28 percent of rural households are headed by women and 72 percent are headed by men (Wiens and Sobrado 1998), but four times as many male-headed households face extreme food insecurity as female-headed households. Since women have traditionally been engaged in food production, it may be that female-headed households direct their energies towards maintaining food security at the expense of other income-generating activities (Kennedy and Peters 1992). When the extreme and weak food categories are aggregated, however, there is little difference in poverty by sex of household head.

Table 3.8 Food Security by Sex of the Household Head

Food security levels	Male %	Female %	Total %
Extreme food insecurity	32.7	9.1	27.5
Weak food security	41.7	64.8	46.9
Moderate food security	23.6	23.9	23.7
Food secure	1.9	2.3	2.0

Source: CARE (1997b)

132. Gender is an important factor linked to poverty in rural areas of the Artibonite (Gammage and Jumelle 2000).⁴² Only 24 percent of all households that are non-poor are headed by a woman, whereas 36 percent of households among the extremely poor are headed by a woman (see Table 3.9).⁴³ The percentage of female-worker households decreases at higher income quintiles. The highest concentration of female-worker households is found in the lowest household quintile.⁴⁴ In addition to being poorer, female-headed households are also likely to have lower birth rates and lower total fertility rates (Lorge Rogers 1995). Despite lower birth rates, female-headed households have higher dependency ratios, which can restrict their economic activities and ability to generate income.

Table 3.9 Income Quintiles in Rural Artibonite by Sex of the Household

Income quintile	Headship		Sex ratio of workers		
	Male	Female	Male	Female	Dual
1	64	36	30	46	24
2	68	32	33	39	27
3	73	27	30	39	31
4	75	25	34	34	32
5	76	24	43	29	28

Source: Gammage and Jumelle (2000)

Income Sources

133. In rural Haiti, the poor depend heavily on agricultural wages and charcoal and wood sales, while wealthier households rely on non-agricultural production, artisan work and other income sources to a greater extent. According to USAID's rural household survey, the lowest income quintile derive only 28 percent of income from agricultural wages, 23 percent from non-agricultural wage, 28 percent from wood and charcoal sales, 10 percent from

⁴² Headship is an imperfect measure of a gendered predisposition to poverty and should be compared with a variety of other indicators that capture the gender portfolio of income.

⁴³ Approximately 36 percent of all households in the first income quintile are female-headed whereas only 24 percent of households in the upper income quintile are female-headed. Table 3.9 demonstrates that there is a higher proportion of female-headed households in the lower income quintiles than in the higher income quintiles.

⁴⁴ An analysis of the correlates of poverty among these households reveals that doubling the female-worker ratio from 0.5 to 1.0 increases the likelihood that a household is poor by 19 percentage points, and extremely poor by 21 percentage points. Whether the household is female-headed, however, increases the probability that it is poor by only four percentage points and extremely poor by nine percentage points (Gammage and Jumelle 2000).

artisanal income and 12 percent from other sources (Wiens and Sobrado 1998). Data do not distinguish between participation in income-earning activities by gender.

Gender Division of Labor in Farming Systems

134. As previously noted, at 37 percent, women's labor force participation in agriculture is high vis-à-vis other LAC countries. However, actual figures might be even higher given that employment data often miss part-time agriculture workers, the proportion of which is high in Haiti. Some evidence suggests that women are paid less than men. For example, female agricultural workers who work in groups (*escuades*) receive only one-half to four-fifths of men's wages (EEC 1998).

135. Although gender roles in agriculture have been poorly documented, some qualitative and region-specific studies help to understand the gender division of agricultural labor and the importance of female contributions to the sector. In general, both men and women contribute to the sowing, harvesting, and agricultural processing, with men typically carrying out the more physically demanding work such as land clearing and plowing (Plotkin 1984). Typical women's activities consist of growing tubers (yam, manioc, potatoes), *epierrage* (chasing birds and animals away from crops), watering crops and buying agricultural supplies. Women are usually responsible for tending small animals such as chickens, rabbits, and pigs whereas men handle the larger livestock (Correia 1998). Women are also responsible for the processing, storage and marketing of agricultural produce. Men tend to be more involved in fishing, hunting and bee-keeping (EEC 1998).

136. The gender division of labor varies widely by region, socio-economic conditions and household composition. For example, women participate to a greater extent in agricultural work and wage labor in lowland regions where more labor-intensive work is required (Smucker 1981; EEC 1998). In Maissade, men are generally responsible for sugar cane production and manioc grown on family plots, while women produce cereals, sweet potatoes, okra, eggplant, plantains and fruit trees in home gardens (Correia 1998).

137. As for productivity, crop diversification and farming systems as it relates to gender, a moderately positive correlation exists between the percentage of total production dedicated to rice or cash crops and value of production per hectare (Wiens and Sobrado 1998). A weaker positive correlation appears in the share of banana/coconut production and cattle with productivity and similarly a moderate negative correlation with the share of upland grains, small animals, poultry and legumes and value of production. Also, successful smallholder farming is associated with the extent of crop and livestock diversification, according to statistical analysis.⁴⁵ This suggests that crop diversification as a result of a gender division of labor could reduce the likelihood of being poor.

⁴⁵ The interaction between cropping choices and agricultural zone is also a determinant of successful smallholder farming with rice being a more effective strategy on humid coastland and irrigated plains and coffee, cocoa, sugar cane and tobacco being more effective everywhere else except humid mountainous zones (Wiens and Sobrado 1998).

Land Holdings and Tenure

138. Although both male and female household heads own land in Haiti, gender differences exist. About 93 percent of rural households report having access to land, with the poor having plots located further from their homesteads than wealthier households (Wiens and Sobrado 1998).⁴⁶ But according to CARE (1997b), households classified as female-headed on average have fewer and smaller plots, and cultivate smaller areas than those classified as male-headed (see Table 3.10). Small farm size is one of the main constraints to household production (Wiens and Sobrado 1998).

139. The proportion of male- and female-headed households who gain access to land through inheritance is similar. However, a larger proportion of female-headed households were likely to purchase land whereas a larger percentage of male-headed households were likely to sharecrop or rent land. The latter is important in that cropping patterns, diversification, input intensity and conservation practices can vary by type of land tenure, with sharecroppers typically having more incentives to use extensive, input-saving and land degrading practices.

140. Information is scanty on land security for women who are not household heads. Anecdotal information suggests, however, that because women's property rights often derive from their status as wives, mothers or wards rather than as individuals, women often lose their rights when their status within the household changes (Morris-Hughes 1999).

Table 3.10 Land Holdings and Means of Access by Sex of the Head of Household

Sex of household head	Landholdings per household			Means of access %				
	No. of plots	Total area (ha)	Area cultivated (ha)	Inherited	Purchased	Rented	Share-cropped	Other
Male	2.16	1.62	1.33	26.3	23.4	7.4	27.7	15.2
Female	1.45	0.82	0.68	24.9	33.3	6.9	17.5	17.5
Total	1.98	1.41	1.17	26.0	25.2	7.3	25.8	15.6

Source: CARE (1997b)

Migration

141. Migration is an important survival strategy of the rural poor in Haiti, with female-headed households receiving higher remittances than their male counterparts. According to a USAID-funded rural household survey conducted in 1994-96, 29 percent of rural households have had members migrate (Wiens and Sobrado 1998). While remittances did not differ greater among income quintiles, female-headed households received more than twice as much from remittances than the male-headed households.

⁴⁶ Plots average 1.78 ha. each, of which on average 1.23 ha. are cultivated, thus representing 69 percent of available land in Haiti. While there is little variation in mean farm size, farm plots of the poor on average are nearly twice as far away from the homestead as those of the rich.

ENVIRONMENTAL DEGRADATION

142. Extensive documentation is available on the damaging environmental effects of land shortages, insecure tenure and uncertain land rights in Haiti. Environmental problems include overuse or abuse of fragile lands, shortening of fallow periods, deforestation and related secondary ecological effects. For example, during the recent embargo, deforestation increased by as much as 30 percent as households switched into charcoal production to compensate for declining returns in agriculture and rising input costs (Morris-Hughes 1999).⁴⁷ Cultivation of marginal lands with steep slopes, forest encroachment and destruction of watersheds have further aggravated Haiti's precarious environmental situation.⁴⁸

143. While information is not available on the gender impact of environmental degradation in Haiti, it is likely to have differentiated consequences. For example:

- Initially charcoal producers were men, with women being responsible for marketing, but there is evidence that the gender division of labor in charcoal production is not as stark as it once was. The time intensity of charcoal processing has reportedly increased. Many households in the Northwest have resorted to gathering stumps and twigs and digging up roots to process into charcoal. Producing charcoal from roots is particularly labor-intensive (CARE 1997a).
- The effects of energy shortages on time use are likely to be greater on women, who remain disproportionately engaged in fuelwood gathering for domestic consumption (Plotkin 1984; Stevenson 1989).

CONCLUSIONS AND POLICY CONSIDERATIONS

144. Policies related to gender in Haiti need to be part of a larger effort to reduce poverty, improve governance, increase the effectiveness of public sector institutions and government spending, consolidate political stability, and strengthen macroeconomic stability. Gender-specific interventions must address basic needs and simultaneously attempt to avoid the perpetuation of negative gender roles and stereotypes. Drawing on the findings of this report, policies on gender should be directed at: (a) improving reproductive and sexual health care, and in particular, meeting the unmet need for contraception; (b) addressing violence from a gender and prevention perspective; (c) ensuring that economic opportunities reach both women and men; and (d) improving rural productivity, including providing improved access to domestic energy.

⁴⁷ Morris-Hughes documents that in 1992 with a depreciating *gourde*, oil prices began to rise and the demand for charcoal increased as much as fivefold in some parts of the country (Morris-Hughes 1999).

⁴⁸ In May 1999, the Inter-Ministerial Environmental Commission presented an Environmental Action Plan to Government for its approval, which provides a comprehensive framework of priority areas to be addressed over the next 15 years. No subsequent information was available to determine the progress.

Improving Reproductive and Sexual Health Care

145. Improving reproductive and sexual health programs is a first policy priority in Haiti, particularly in rural areas, given the high payoffs of reducing fertility, the evidence of unmet demand for family planning, the high levels of maternal mortality and the incidence of HIV/AIDS. Specifically, the report recommends integrating traditional healers and practitioners into the delivery system, given the weakness of the public sector and the highly rich and structured traditional healthcare available in Haiti, and identifying how traditional practices could complement modern health care.⁴⁹ The highly decentralized nature of traditional health-care and healing would provide an opportunity to better deliver information and provide services to a wider base of clients. Traditional healers would also be able to advise modern health-care professionals on how to communicate with patients more effectively, which in turn, would lead to more accurate data collection, more appropriate diagnoses and more effective and comprehensive health care (Brodwin 1996; Farmer 1992; Singer et al. 1988).

146. Reproductive and sexual health care services need to be made available to both women and men, as well as youth. Services need to target specific sectors in the different environments in which they interact and operate, for example, in the workplace and marketplace, in schools, through radio and television and in sports events. Information and materials on reproductive and sexual health care also need to be made available in Creole and in popular education formats.

Addressing Violence from a Gender and Prevention Perspective

147. A second policy consideration is to ensure that anti-violence programs focus on prevention, and that they have a gender dimension. A few suggestions include: (a) working through community-based organizations to provide informal education programs on nonviolence and conflict resolution; (b) working with women's and men's groups to identify and address the root causes of violence and the influence of gender roles on violent behavior; (c) using the media to educate men and women on civic values and promote nonviolent behavior; and (d) training educators and teachers to avoid perpetuating aggressive behavior among boys and docility among girls.

Ensuring Economic Opportunities Reach Women and Men

148. To the extent that income and employment generation programs are put in place, a third priority is to ensure that these address the different constraints to participation that men and women face. According to a late 1990s study of employment generation/poverty alleviation programs in Haiti, only 20 percent of beneficiaries were women (Charlier 1998).⁵⁰

⁴⁹ Various types of healers participate in assisting pregnancy and childbirth and caring for related problems: shamans (voodoo practitioners), herbalists and traditional birth attendants. In the Haitian folk division of medical labor, it is believed that there are illnesses appropriate for physicians, illnesses for herbal healers and midwives, and illnesses for spiritual healers. Each type of healer is said to have her own "territory" (Farmer 1992; Singer et al 1988).

⁵⁰ In general, poverty alleviation programs were designed to promote women's participation (Charlier 1998). Women were mostly involved in activities such as carrying water and other construction materials although they also were responsible for physically difficult work and supervision.

However, programs suffered from hasty preparation, thus jeopardizing participation and involvement of beneficiary communities and authorities. Also, emphasis was placed on the hardware of sub-projects (i.e. construction) rather than the software (training and maintenance), as well as support to productive activities (small credit) which could have enhanced female involvement. In Argentina's two major temporary employment programs, for example, a public works program employs almost 90 percent men and a community service works program benefits over 90 percent women (Correia 2000). Employment programs should attempt to address the more subtle barriers to participation that women face due to conflicting domestic roles by, for example, allowing flexible work hours, offering piece-rates and home-based work and supporting child care facilities and local employment services to orient women. Working through local community organizations and women's groups to address such constraints is one option.

149. Similarly, programs established to invigorate the small enterprise and informal sector in Haiti should consider the different constraints men and women confront in using financial services. Some specific considerations include: (a) offering financial products that are flexible enough to reach both female and male borrowers (for example, establishing repayment terms and schedules, collateral requirements, and interest rates that respond to both women's and men's needs); and (b) developing a mix of financial products that recognize gender differences in business size, sectoral concentrations, business strategies, and access to land and other collateral (for example, farmers typically require longer term-larger, loans to cover the scope of their agricultural inputs, while small and petty traders seek small and very short-term loans).

Improving Rural Productivity and Access to Domestic Energy

150. A fourth priority is to ensure that rural development programs address the distinct constraints faced by women and men in increasing productivity and incomes, given that both sexes engage in on-farm and off-farm activities. The fact that the rural poor derive much of their income from off-farm activities, and that on-farm productivity is low among the poor, suggests that investments in both on-farm and off-farm production are warranted (Wiens and Sobrado 1998). Such investments would need to take into account men's and women's different technology needs, their time use patterns, their ability to participate in farmers' and other groups and their differential access to land and credit.

151. Given the time burden of fuelwood gathering, the scarcity of energy sources in Haiti and the need for domestic energy for cooking and heating, increasing access to domestic energy is another important policy priority, with major implications on women's time use and well-being. Making available stoves that are more fuel-efficient and reduce the health-costs related to cooking on inefficient open stoves is one key consideration. Improving existing charcoal carbonization techniques and introducing alternatives such as the production of carbonized briquets is another (Global Environment Facility 1995). Domestic energy interventions should work closely with women to ensure that energy alternatives are technically viable and cost effective.⁵¹

⁵¹ Although kerosene and propane gas may provide relatively cheap and fuel-efficient sources of domestic energy, the cost of purchasing a propane stove may be prohibitive for many poor rural households.

Furthermore, for these fuels to be adopted and used continuously they need to be in ready and uninterrupted supply, which requires domestic production of kerosene and propane with a secure supply of imported petrochemical inputs, well-developed markets and good distribution networks.

4. JAMAICA

OVERVIEW OF GENDER ISSUES IN JAMAICA

152. Despite high levels of external investment and support, Jamaica has had a disappointing economic track record over the last few decades. Many of the country's social indicators, however, are hopeful. Life expectancy at birth and access to safe water and sanitary conditions have both increased, for example, and Jamaica has witnessed a generally declining trend in the incidence of poverty since 1988 when the Government began to monitor its living standards (World Bank 2000b). And with its well-established tradition of democratic participation and thriving civil society, Jamaica also fares well in regard to governance measures. Indicators suggest that Jamaica is well-advanced on gender issues compared to other countries in the region, particularly in terms of maternal health services, contraceptive use and fertility levels and female participation in education.

153. But while Jamaica has made progress on social indicators and women's advancement, it continues to face a number of key challenges. Reported violent crime remains among the highest in the hemisphere, even though it has declined since 1997. Moreover, the poor have disproportionately low access to quality education and face greater exposure to violence. Poor youth are particularly at-risk in Jamaica due to low quality of education and high absenteeism, lack of employment opportunities, limited reproductive health services, unstable home environments and involvement in and exposure to illicit or violent activities. Gender issues are identifiable in most of these socioeconomic issues facing Jamaica today. For example:

- While the crude birth rate has declined and contraceptive use has increased significantly, almost 70 percent of pregnancies in Jamaica are unintended, with the proportion being 87 percent in the case of teenage pregnancies. Sexual activity also begins early for many Jamaicans. Data released by the National Family Planning Board indicated that the mean age of first intercourse for young women was 15.9 and for young men approximately 13.9 years and that 38.0 percent of young women and 64.0 percent of young men 15-17 are sexually experienced (ESSJ 2000). These figures point to the fact that there is early sexual initiation for both sexes, in particular for boys.
- As in many other countries, violent crime is concentrated among young males, who are both victims and perpetrators. In 2000, males between the ages of 16 and 35 accounted for 84 percent of all arrests for murders and young men were the principal victims and offenders of all serious crimes. Domestic violence is also prevalent in Jamaica. One in every five women between 25-60 years has suffered some sort of physical abuse.
- In 1999, the Adult Literacy Survey showed that the illiteracy rate for males was 26 percent compared to 14 percent for females (ESSJ 2000). The lower educational participation of boys vis-à-vis girls is reflected in the widening male-female gap in educational enrollment, which increases with level of education.

- Women have one of the highest labor force participation rates in LAC but their unemployment level is twice that for men. Despite women's significantly higher levels of education they earn, on average, 17 percent less than men.

154. As in Haiti, household structure and the relations of its members are key to understanding gender outcomes in Jamaica. About 43 percent of households report female headship. Unstable home environments, lack of parenting skills, violence and teenage pregnancy, which have been documented as key issues in Jamaica, all impact on household structure and familial relations. Sexual abuse of children, for example, is reportedly common in Jamaica due to the preponderance of multiple, live-in common-law relationships and the large proportion of children being reared by men who are not their biological fathers. Socialization processes in Jamaica are aimed at making boys tough, which translates into the aggressive discipline of boys. The significance of experiencing violence in the household is clear. Studies have shown that children who are exposed to violence at an early age are more likely to be perpetrators and/or victims of violence as adults.

155. The Jamaica note is organized as follows: the first section provides some basic gender indicators for countries of similar per capita income within LAC. The next section provides findings of the gender analysis conducted in the following areas: legal and institutional framework (including political representation), demographics, household structure and dynamics, health, reproductive health, violence, education, labor and agriculture. The last section lays out policy considerations for Jamaica. In preparing this note, emphasis was placed on violence as well as the household due to their importance in Jamaica. The note also includes a short discussion on men's roles in the family, which is relevant to understanding a range of social problems affecting Jamaican society today.

JAMAICA AT A GLANCE

156. Jamaica's overall gender indicators are favorable. Compared to Guatemala and Paraguay, which have higher (adjusted) GNP per capita, Jamaica's fertility levels are lower, life expectancy for both sexes is higher, and its maternal mortality is almost half that of these countries. Illiteracy levels, however, are worse than those of Paraguay, although in Jamaica the gender illiteracy gap favors women, whereas in Paraguay, more women than men are illiterate.

Table 4.1 Socioeconomic and Demographic Indicators for Comparable Countries

	GNP per capita (1999 dollars) ¹	Population (millions) 1999	Total fertility rate (births per woman) 1998	Maternal mortality (per 100,000 live births) 1990-98 ²	Illiteracy % people 15 years + 1998		Life expectancy at birth (years) 1998	
					m	f	m	f
Haiti	\$1,407	8	4.3	600	50	54	51	56
Jamaica	\$3,276	3	2.6	110	18	10	75	77
Guatemala	\$3,517	11	4.4	190	25	40	61	67
Paraguay	\$4,193	5	3.9	190	6	9	68	72
Peru	\$4,387	25	2.7	270	6	16	66	71
Trinidad & Tobago ³	\$4,430	1.3 ³	1.8 ³	75				
Dominican Republic	\$4,653	8	2.9	220	17	17	69	73

Source: WDR 2000/2001 unless otherwise stated

¹ Adjusted for purchasing power parity

² Dominican Republic: ENDESA-96; Haiti: WDR, 1999/2000; Jamaica: Economic and Social Survey 1999; Trinidad and Tobago: PAHO 1999b

³ WDI 2000

INSTITUTIONAL AND LEGAL FRAMEWORK

157. Jamaica has made considerable progress in institutional and legal reforms for women. The Government of Jamaica was the first of the Caribbean Community and Common Market (CARICOM) countries to establish a special government body dedicated to women's affairs. The chronology of the most significant events related to the rights of women and the protection of children over the last three decades is as follows:

- | | |
|------|--|
| 1974 | Adviser on Women's Affairs appointed and a Women's Desk established |
| 1975 | The Employment Act providing equal pay for men and women established |
| 1976 | The Women's Desk is upgraded to the Bureau of Women's Affairs |
| 1976 | The Maternity Leave Act established |
| 1976 | The Minimum Wage Act established |
| 1981 | Ratification of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Convention on the Rights of the Child |
| 1987 | The National Policy Statement on Women approved by Cabinet |
| 1989 | The Matrimonial Causes Act established |
| 1993 | The Inheritance (Provision for Family and Dependants) Act established |
| 1994 | National Report on the Status of Women in Jamaica prepared for the Fourth World Conference on Women |
| 1996 | The Domestic Violence Act established |
| 1996 | Steering Committee charged with creating a Commission on Gender and Social Equity (recommendations of Steering Committee are awaiting parliamentary action) |
| 1999 | Amendments to the Property Rights of Spouses, and Offences Against the Person Acts submitted; currently in the form of Bills before the Joint Select Committee of Parliament |
| 2000 | National Report prepared for Beijing +5 World Conference on Women |

158. The events outlined above have helped to push to the fore the many issues that face women in Jamaica. The Bureau of Women's Affairs (BWA) recently completed a project that examined laws affecting women in Jamaica. However, several laws and amendments have not been passed and still await approval. These include amendments to the Property Rights of Spouses and Offences Against the Person Acts. In addition, no legislation on sexual harassment exists.

Government Agencies

159. The government agency officially responsible for the status of women is the BWA, which broadly aims to empower women and ensure their full participation in national life. In order to achieve this, one of the Bureau's critical role is to direct government policies and programs in the social and economic sectors. The BWA was recently shifted to the Ministry of Tourism and Sports. Since the move, the Bureau has had a stronger resource base and has benefited from being able to employ more qualified technical staff. (All officers have University degrees and many have received in-house training, participated in seminars, and

benefited from international exposure to gender planning and programming.) There is, however, a need to evaluate the positioning of the agency in the overall scheme of government in terms of its ability to affect gender mainstreaming in the public sector.

160. Jamaica has made progress in implementing the 1995 Fourth World Conference on Women's Beijing Platform for Action, which specifically states that governments and other actors should promote an active and visible policy of mainstreaming a gender perspective in all policies and programs so that possible differential effects on women and men can be identified. The Planning Institute of Jamaica (PIOJ) has been engaged in a project to strengthen the capacity of its staff to engage in gender analysis and a Gender Equity Checklist has been finalized.⁵² The Office of the Prime Minister (OPM) has also carried out a program to train policy analysts in ministries and agencies in gender analysis and planning. And the BWA leads a focus group to review policies and legislation from a gender perspective. The latter will involve members of the Policy Analyst Network, which is coordinated by the Policy Analysis and Review Unit of the OPM. Lastly, the Centre for Gender and Development Studies at the University of the West Indies (UWI) has played an important role in terms of developing training materials in gender analysis in policy and planning and facilitating the training of a critical mass of persons engaged in gender mainstreaming initiatives.

Non-Governmental Organizations

161. Non-governmental agencies are extremely active and innovative. For example: (a) the Sistren Theatre Collective, a grass roots women's group started in 1977, uses drama to mobilize women and community groups around gender issues; (b) Woman Inc., launched in 1984, provides support to battered women; (c) the Rural Family Support Organization (RUFAMSO), established in 1986, works with both female and male youth on teenage pregnancy and fathering; (d) Father's Inc., started in 1991, fights negative male stereotypes and provides counseling to teenage boys about parenting, STDs and HIV/AIDS; and (e) Women Working for Transformation (WWFT), started in 1999 and comprised of over 100 men and women, uses community outreach to bring about lasting change on gender issues. The Association of Women's Organizations of Jamaica (AWOJA) was established in 1987 on the initiative of the Women and Development Studies group of the UWI as an umbrella association for women's organizations. It has functioned as a leadership and coordinating center for over 60 women's organizations and activities worldwide.

162. In spite of their numerous achievements, NGOs continue to face severe challenges with human, technical and financial resources. In addition, both governmental and non-governmental organizations tend to continue to use a Women in Development⁵³ and small project or welfarist approach to address women and gender issues. Following the Fourth World Conference on Women in 1995 there has been a shift to gender mainstreaming as a

⁵² The 'Gender Equity Checklist' was developed as part of a the 'Strengthening the Capacity of the Planning Institute in Gender Analysis and Planning' Project which began in 1997 and was a joint initiative between the PIOJ and the Canada Caribbean Gender Equity Fund in Jamaica.

⁵³ The Women in Development approach, grounded in modernization theory and popularized by liberal feminists, emphasizes strategies and programs that minimize women's subordination to men in the productive realm and that end discrimination against women (Rathgeber 1990).

Gender and Development⁵⁴ approach. In Jamaica, one such initiative has been started in the Ministry of Health, spearheaded by the BWA. Further, the Centre for Gender and Development Studies at the UWI has a critical role to play in providing training in gender analysis, particularly in regards to the development of policy and programs. The Centre has recently compiled a gender analysis training manual for policy makers.

Political Representation

163. While men continue to dominate political life, the proportion of female politicians is relatively high compared to LAC averages. Women comprise 13 percent of members in the House of Representatives (LAC average 11 percent); 24 percent of senators (LAC average 16 percent); 12 percent of cabinet members (LAC average 12 percent); and 13 percent of mayors (LAC average nine percent). At 11 percent, Jamaica is below the LAC average of 16 percent in terms of Supreme Court judges (CEPAL 1999c; PIOJ 2000). Jamaican political parties (Jamaica Labour Party, National Democratic Movement, and People's National Party) have established women's sections to inform their positions on women's issues. Women currently head the two most recently created political parties, the National Democratic Party and the United People's Party.

164. Although the number of women in politics has increased, women continue to face greater challenges than men in this arena. The Jamaica Women's Political Caucus was created in 1992 to increase the number of women in representational politics. The Caucus is involved in training female candidates for political life and providing financial support to their election campaigns.

Table 4.2 Women in Leadership and Decision-Making, 1994 and 2000

Area of Government	1994				2000			
	Men	Women	Total	% Women	Men	Women	Total	% Women
House of Representatives	53	7	60	12	52	8	60	13
Senate	17	4	21	19	16	5	21	24
Cabinet	13	1	14	7	15	2	17	12
Local government	163	24	187	13	173	54	227	24
Justices of the Peace (1997)	NA	NA	NA	NA	2861	1111	3972	28

Source: Jamaica National Preparatory Commission 1994 and PIOJ

DEMOGRAPHICS⁵⁵

165. The population of Jamaica was estimated to be 2,605,400 persons at the end of 2000, with slightly more women (50.1 percent) than men (49.9 percent). The trend towards urbanization continues in Jamaica. An estimated 50 percent of the population lived in urban

⁵⁴ The Gender and Development approach has its theoretical groundings in socialist feminism and analyses both the productive and reproductive spheres as sites of women's oppression and shifts the focus to gender and gender relations.

⁵⁵ This section is based on the ESSJ 1999 unless otherwise stated.

areas in 1991 compared to 41 percent in 1970 (STATIN 1998). Jamaica continues to have a moderately young but aging population with a median age of 25 years. The aging of the population is reflected in the decline in the population of young people aged 15-29 years from 29 percent in 1995 to 27 percent in 2000. Life expectancy at birth in 2000 was about 73.4 years for women and 69.8 years for men (World Bank 2001b; STATIN 2000).

166. The crude death rate has remained relatively low for the past 15 years and was 5.1 per 1,000 people in 2000. Age-specific death rates in the age group 15-40 years, however, reveal high levels of death especially among males, due to motor vehicle accidents, crime and violence, and other related incidents. Deaths in the 50 years and over age group tend to reflect the predominance of non-communicable diseases or life-style diseases. The leading cause of female mortality in 1998 was endocrine and metabolic diseases. Other leading causes by rank were cerebrovascular diseases, hypertensive diseases and cardiovascular diseases (STATIN 2000).

Fertility

167. Jamaica's total birth rate has declined over the last two decades, falling from 3.7 births per woman in 1980 to 2.8 births per woman in 1997 (World Bank 2001b; Jamaica Reproductive Health Survey RHS-97; NFPB, 1997). The Jamaica Reproductive Health Survey for 1997 reported increases in age-specific fertility rates of adolescents 15-19 years and women 20-24 years, as compared with the rates for these age group in the 1993 reproductive health survey (RHS-93). At approximately 100 births per 1,000 women age 15-19 years, the adolescent fertility rate is high compared to the LAC average of 74 births. An estimated 85 percent of Jamaican babies are reportedly born to unmarried mothers and over 50 percent do not have a registered father (STATIN 2000). However, this does not mean that the father of the child is unknown and/or is not involved in the child's life.

International Migration

168. Emigration continues to play an integral role in Jamaica's population dynamics, with over 80 percent of migrants going to the United States, followed by Canada and the United Kingdom. The number of women migrating slightly surpassing that of men: figures for 2000 indicate that 55 percent of migrants to the United States were women. The median age of migrants was 25 years for males and 28 years for females. Many Jamaican households are female-headed and many women migrate, therefore children are often left with their extended family, often in the care of a grandmother or aunt, or with friends and occasionally as boarders with strangers. These children are known as "barrel children" and "Western Union children" because they depend on the packages and remittances sent back to them by their absentee parents. Some persons who visit overseas countries on a temporary basis opt to remain in the country illegally. In these cases, travel back to Jamaica is almost impossible and their subsequent emotional involvement in their children's upbringing can be extremely limited.

JAMAICAN HOUSEHOLDS⁵⁶

169. Jamaican society has been termed matrifocal given that almost half of all households are female-headed. Between 1989 and 1997, female-headed households increased from 42 to 45 percent but decreased to 43 percent in 1999 (see Table 4.3). According to a World Bank study for Jamaica, three-quarters of female headed households are headed by women who are in the oldest generation of the household and who do not have a spouse or partner in the house (including legal and common-law marriage as well as "visiting union", which refers to a semi-permanent relationship in which the man does not live in the same household as the woman but visits from time to time, with the regularity and duration of such visits varying). In most of the remaining one-quarter of the households, the female head also belongs to the oldest generation of the household but does have a spouse or a partner.⁵⁷ The proportion of male-headed households with a spouse/partner, in contrast, is 59 percent. The study did not provide information on whether the head contributed more income or hours of work to family well-being than the non-head of household or on intrahousehold decision-making patterns.

170. It is important to highlight the limitations of examining gender and household dynamics in Jamaica using data on household headship. As in other countries, data are collected based on reported headship rather than on more rigorously defined concepts such as economic support or decision-making/bargaining position in the household (World Bank 1993a).⁵⁸ The heterogeneity of households is therefore lost with this type of classification system. This caveat stated, available information on households in Jamaica follows.

Household Size and Status

171. Female-headed households, on average, are bigger than male-headed households in Jamaica, a trend that has been consistent over the last decade (see Table 4.4). In 1999, female-headed households had an average of 3.8 members, compared to 3.2 for their male counterparts

Table 4.3 Percentage of Households by Sex of Household Head

Sex	1989	1993	1997	1999
Male	58.5	54.6	55.3	57.5
Female	41.5	45.4	44.7	42.5

Source: Jamaica Survey of Living Conditions

Table 4.4 Household Size by Sex of Household Head

Sex	Year			
	1989	1993	1997	1999
Male	3.8	3.6	3.4	3.2
Female	4.1	4.1	3.8	3.8

Source: Jamaica Survey of Living Conditions

⁵⁶ Unless otherwise noted, this section is based on World Bank (1993a): *Welfare Implications of Female Headship in Jamaican Households*, LSMS Working Paper No. 96.

⁵⁷ According to the study, households declaring female headship, female heads either have no partner, have a higher income, are older or are better educated than their male partners.

⁵⁸ As noted by Rosenhouse (1989), implicit in the term headship, among other things, is the assumption that a hierarchical relationship exists between household members, that the head is present in the household, that the head has overriding authority in household decision-making and is thus the most important family member, and that the head provides consistent and central economic support to the family. These commonly made assumptions obscure a much more complex reality in Jamaica and in other countries. For more on this subject also see Barry Chevannes' *What We Sow and What We Reap: Problems in the Cultivation of Male Identity in Jamaica*, 1999, Jamaica: Grace Kennedy Foundation.

(PIOJ 1999). Female-headed households had, on average, 0.7 children up to the age of five, compared to 0.5 children for male-headed households.

172. Male- and female-headed households are quite different in terms of the status of the union of the household. In 1999, male-headed households were more likely to report the presence of a spouse (72 percent). Seventy-five percent of female-headed households reported no male present and 69 percent reported children present. These figures are similar to findings from the World Bank report (1993a) where male heads of households were twice as likely to be in a legal marriage (44 compared to 20 percent), more likely to be in a common-law union (22 compared to 15 percent), and twice as likely to be in a “visiting union” as female heads. In contrast, female heads of households were three times more likely to be widowed, twice as likely to be divorced, and almost twice as likely to never have been married (World Bank 1993a).

Labor Force Participation by Household Type

173. Male- and female-headed households do not differ greatly in terms of the labor force participation of its members. In 1989, half of the working-age members of female-headed households were in the labor market, compared to 61 percent for its male counterparts. On the other hand, 15 percent of working-age family members were unemployed in female-headed households, compared to 10 percent for male-headed households (World Bank 1993a).

174. Clear differences exist in the working status of the household head, with male heads more likely to be in the employed labor force. In 2000, 95 percent of all males in the labor force identified as heads of households were employed, whereas this was the case for only 85 percent female heads of households (PIOJ 2000). Findings from a World Bank study using 1989 data indicate that approximately 79 percent of male heads were working compared to only 50 percent of female heads. Moreover, female heads were twice as likely to be unemployed and three times more likely to be out of the workforce, reportedly out of choice according to the respondents of the 1989 survey. Contrary to conventional wisdom, female heads that were out of the labor force were not significantly more likely to have adult children in the household, were less likely to have young children age 0-5, and were less likely to have partners as compared to their male counterparts. Lastly, the educational status of male and female heads did not vary significantly.

175. Women who are declared heads of household are only slightly more likely to be in the labor market than women who are not declared heads of the family. For women without access to non-earned income, the probability of being in the labor market for a female head was 65 percent, compared to 58 percent for a female non-head, according to 1989 data. As expected, non-earned income in the form of remittances reduces the likelihood that female heads will be in the labor market. Indeed, remittances received by female-headed households were 38 percent higher than those of male-headed households in 1989 (World Bank 1993a).

Well-being and Poverty by Household Type

176. While results are somewhat mixed and the relationship is not strong, female headship is correlated with poverty in Jamaica. Also, while male- and female-headed households have similar consumption patterns, types of expenditures do vary by household type. Analysis of 1989 data yielded the following results:

- (a) Using mean adjusted consumption, male-headed households are better off than their female counterparts by about 15 percent on average. The difference is even higher in Kingston (28 percent). Because households with female heads are more likely to have more children, figures are less than for non-adjusted mean per capita income.
- (b) Multivariate analysis indicates that female headship has an independent and negative effect on welfare levels of the household. Consumption levels of female-headed multiperson households are 11 percent lower than male-headed households of similar characteristics. Among single person households, consumption levels are about five percent higher for those with male heads than female heads. Lower welfare is also associated with more children, younger children and lower stability of the union. Households with legal marriages have higher consumption levels than other types of unions, except for the divorced and widowed.
- (c) Using a poverty line corresponding to the poorest 30 percent of the population, female-headed households are poorer than male-headed households, regardless of the measure of poverty used.
- (d) Multivariate analysis indicates that female headship does increase the probability of being poor. However, the quantitative effect is tiny and the results only apply to a lower poverty line (corresponding to the poorest 10 percent of the population): female-headed households have a 1.4 percent higher probability of being poor than their male counterparts. This is not the case with the higher poverty line or using adjusted per capita expenditures.⁵⁹
- (e) Differences in consumption patterns by sex of the household head are small. However, compared to their male counterparts, female-headed households are more likely to buy higher quality foods and spend less on alcohol, all other things being equal.
- (f) The analysis does not support the conventional notion that children in female-headed households are disadvantaged. Neither the sex of the child or the household head determine the probability of a child having diarrhea or a child's nutritional status. Some educational differences are apparent (see section on education that follows), but these are more favorable for children in female-

⁵⁹ The analysis controlled for area, urban-rural residence, family structure, health status of the household, and characteristics of the household head (including age, education, sector of work and status of the union).

headed households than for those in households with male heads (World Bank 1993a).

The Role of Fathers in the Family

177. The stereotype of the absent and irresponsible father prevails in Jamaica, but recent research disputes commonly held beliefs on men and fathering and sheds light on how traditional gender roles shape men's behavior and attitudes on childrearing. As described in Brown and Chevannes (2001), a seminal 1990 study of 700 Jamaican men in both rural and urban settings revealed the following:

- (a) A man faces a number of responsibilities to family over his lifetime, including to his parents (and in particular to his mother), to his siblings and their children, to his children of a common law/married wife, or woman with whom he is currently involved, and to his children from earlier unions. The children of a current union, however, usually get the most attention and the quality of relationships with his children is usually dependent on the relationship with the child's mother. The impact of step-fathering has received little attention in Jamaica.
- (b) Following on traditional gender roles, a man's primary responsibility to his children is to provide financial support. If a man is able to fulfill that role, he is deemed the head of household and ultimate disciplinarian, even though he may be a non-resident of the house. If the man can or does not fulfill this role, he is ostracized, "literally or figuratively". As in other countries, caring and nurturing of children is deemed the woman's responsibility; "men themselves do not value [these roles]."
- (c) Men face contradictions in that their main societal role of breadwinner may be difficult to fulfill in the context of high unemployment in Jamaica. While many men desire to be good fathers and role models for their children, economic conditions preclude this, thus highlighting the importance of both structural and attitudinal changes in Jamaica if men are to play more central roles in the lives of their children.
- (d) A second contradiction is that male identity is associated with "sexual prowess with females, preferably in multiples," and accepting paternity of children. But having multiple children early on sets the stage for failure in male identity later in life because most men can not fulfill their role as economic provider for a large number of children.

178. A subsequent study on men in Jamaica, Guyana and Dominica by Brown and Chevannes (1998), revealed similar trends. The concept of manhood focuses almost exclusively on three elements: (a) a man's sexuality/sexual identity as measured by the number of consecutive or simultaneous female partners and the number of children produced from these relationships; (b) a man's ability to fulfill his main role as protector and provider – "a man who can not provide for his family is not a man"; and (c) a man's ability

to exercise his authority over women and offspring, which, as previously noted, is based on his ability to be the economic provider and protector.

GENERAL HEALTH⁶⁰

179. Jamaica's epidemiological profile shows that distinct differences exist in the diseases faced by men and women. Compared to men, women are more likely to suffer from genito-urinary disorders, cardiovascular diseases, respiratory tract infection, diabetes mellitus, hypertension, STDs and psychiatric disorders. Men, by contrast, are more likely to face injuries and poisoning, AIDS, appendicitis, hernia and other diseases of the respiratory tract (see Table 4.5).

180. Trauma and injuries related to motor vehicle accidents and acts of violence continue to be among the leading causes of morbidity among men 20-44 years of age according to Ministry of Health data (see Table 4.6). The highest proportion of patients seen in emergency units are treated for accidental laceration and motor vehicle accidents, and the majority of these are men with the largest gender gaps being in the 10-19 and 20-29 age categories. HIV/AIDS and sexually transmitted infections (STIs) are also among the main causes of mortality and morbidity among men. In 2000, men comprised 61 percent of persons living with AIDS and 63 percent of the 3131 reported deaths due to AIDS between 1982 and 2000. Men age 30-34 represent the largest single group of persons living with AIDS (ESSJ 2000). Risk factors include multiple partners, substance abuse and inconsistent condom use. Men in Jamaica have traditionally scoffed at using condoms, claiming that real men preferred to "ride bare back" as it is commonly put.

Table 4.5 Curative Visits to Primary Health Care Facilities, Public Health Sector by Five Leading Conditions, 1998

Number	Conditions	Male	%	Female	%	Total	%
1	Hypertension	28,191	19.8	113,991	80.2	142,182	100
2	Respiratory tract infection	46,439	42.4	63,114	57.6	109,553	100
3	Skin disease	40,351	43.8	51,839	56.2	92,190	100
4	Diabetes	13,590	20.7	52,080	79.3	65,670	100
5	STDs	15,351	29.5	36,698	70.5	52,049	100

Source: Ministry of Health (1998)

181. Data for 1997 from the Jamaica Cancer Registry show that the overall incidence of cancer is higher in women than men: 55 percent of cancer cases are female. The highest rate for both males and females occurred at sites related to the reproductive system (PAHO 1997). The five most common sites of cancers in women were breast (45 percent), cervix (28 percent), Non-Hodgkin's Lymphoma (nine percent), colon (eight percent) and lungs (five percent). Unlike males, the incidence of cancer among women was higher (59 percent) for those under 60 years of age, peaking between the ages of 40-49 years of age (Ministry of Health 1998).

⁶⁰ This section draws on PIOJ, UNDP and CIDA (2000) unless otherwise stated.

Table 4.6 Patients Seen in Emergency Units of Public Hospitals by Conditions, Sex and Age, 2000

Conditions	Total Cases Seen	Under 5 years		5-9 years		10-19 years		20-29 years		30-44 years		45-64 years		65+ years	
		Total	%f	Total	%f	Total	%f	Total	%f	Total	%f	Total	%f	Total	%f
Burns	1,897	681	42.1	294	46.6	282	44.3	246	48.0	247	46.2	108	46.3	50	34.0
Poisoning	1,381	847	43.1	152	39.5	106	46.2	105	37.1	98	37.8	51	49.0	18	55.5
Bites	3,709	369	38.5	629	39.0	833	44.0	590	49.3	656	51.8	440	50.9	169	48.5
Stab wounds	3,821	27	48.1	36	27.8	919	27.0	1,494	23.0	1505	23.8	211	19.0	43	18.6
Gun shot	1,229	7	71.4	11	27.3	203	14.8	481	10.2	378	12.2	89	20.2	33	27.3
Blunt injury	9,578	316	41.8	457	32.8	2,147	44.5	2,654	52.1	2,471	45.3	1,087	34.4	391	42.7
Sexual assault	1,123	75	93.3	160	92.5	649	97.2	142	95.8	61	93.4	27	92.6	8	87.5
Attempted suicides	145	0	0.0	3	100	46	76.1	46	69.6	32	37.5	9	22.2	7	42.9
Motor vehicle accident	11,658	415	39.5	853	40.0	2,182	40.2	3,211	30.4	3,043	31.4	1,355	35.1	473	35.1
Accidental laceration	15,589	2,345	34.8	3,086	31.8	3,680	27.0	2,640	28.4	3,043	31.4	1,065	29.4	369	34.4
Head injuries & fractures	9,544	1,080	43.4	946	34.2	1,806	30.1	1,604	39.8	1,831	42.8	1,298	47.1	900	52.7
Genito urinary	15,257	137	33.6	120	48.3	1,382	61.8	2,539	63.6	3,096	58.9	3,309	37.9	4,608	8.9

Source: Planning Institute of Jamaica, based on Ministry of Health data

REPRODUCTIVE HEALTH

Maternal Mortality

182. Maternal mortality is moderate in Jamaica. According to the ESSJ 2000, the rate was 111 per 100,000 live births. According to UNICEF estimates, trained health personnel attended 95 percent of births from 1990-99. Pregnant women average 4.5 prenatal visits to clinics but low-income women and those women living in rural areas initiate prenatal care later than others. A comparison with selected Caribbean countries shows that Jamaica ranks the third lowest in number of prenatal visits among fourteen countries (PAHO 1997).

Contraceptive Use

183. Overall, contraceptive use is high in Jamaica. According to the Reproductive Health Survey 1997 (RHS-97), the Contraceptive Prevalence Rate for Jamaica was 66 percent. A more detailed breakdown of the numbers, using the 1993 Jamaica Contraceptive Prevalence Survey (CPS-93), reveals that contraceptive use is relatively high among married women and those living in common law: 62 percent of women age 15-44 years who are in union and 69 percent of men ages 15-54 years use a method. The 1993 survey also shows that only 43 percent of women and 21 percent of men ages 15-24 years use contraceptives the first time they have sexual intercourse. However, these figures increased in the 1997 survey where 56 percent of females and 31 percent of males used contraception at first intercourse. Nevertheless, almost 70 percent of pregnancies are unintended. Approximately 93 percent of visits to government health centers for family planning services were made by females, indicating that, as in most other countries, family planning is primarily a female responsibility. Lastly, according to the CPS-93, the private sector is the largest provider of contraceptives. Only six percent of the target population (women 15-48 years) obtained contraceptives from public clinics.

184. Sexual activity begins early for many Jamaicans. According to the RHS-97, sexual initiation begins as early as 10 years of age for some and by age 11-12, about 20 percent of boys and girls have had sexual intercourse. More than 40 percent of sexually active adolescent girls reported that they were not using, or had not used a contraceptive at last intercourse, and 87 percent of teenage pregnancies had not been planned. The level of

knowledge about sexuality and contraception is high among adolescents, but it does not translate into preventive behavior.

Teenage Pregnancy

185. As previously noted, teenage fertility has increased in Jamaica, even though total fertility has decreased. Lower levels of educational attainment and poverty result in a greater likelihood of becoming pregnant (World Bank 1997; World Bank 2000g). Other risk factors include absent fathers, weak family support, individual characteristics (i.e. lack of self esteem) and family-related factors such as exposure to sexual abuse and having been born to a teenage mother (World Bank 2000g). Social attitudes, peer pressure and the belief that pregnancy will lead to economic support on the part of the father also lead to teenage pregnancy (World Bank 1997; World Bank 2000g; Blank 2000). Lastly, access to family planning on the part of teenagers may be another constraint to avoiding pregnancy. In terms of consequences, early pregnancy contributes to school dropout and unemployment and leads to fewer opportunities for young women (World Bank 1997; Marshall 1999). It also has important intergenerational effects. Women's absence from the home due to work and men's limited presence, especially among the poor, frequently result in abuse and chronic neglect of children (World Bank 1997).

HIV/AIDS

186. While still concentrated among high-risk groups, HIV/AIDS is a growing problem in Jamaica. At 0.99 percent, the current incidence is lower than that of Haiti, Bahamas, Barbados and the Dominican Republic, but considerably higher than the LAC Regional average of 0.57 percent (World Bank 2000e). Nearly 70 percent of the HIV-positive population is male (World Bank 2000e), although the incidence of HIV has been growing at a faster rate among women than men (ESSJ 2000). Adolescents between the ages of 10 and 19 have the highest incidence of STI infections, which is a known risk factor for HIV/AIDS. The number of reported new HIV infections has almost doubled among adolescents, with adolescent girls being three times more likely than boys of being infected with HIV (Blank 2000). This is probably due to high levels of sexual abuse of girls as well as girls having sexual relations with older men.⁶¹ In addition, the physiological attributes of pre-pubescent and pubescent girls put them at increased risk.

VIOLENCE⁶²

187. Jamaica is one of the most violent societies in the LAC Region. The overall homicide rate is 35 per 100,000 people.⁶³ Within the LAC region, only Guatemala, El Salvador and Colombia have higher rates than Jamaica.⁶⁴ Violent crimes tend to be

⁶¹ This statement is made on the basis of HIV infection taking as long as 10 years to develop (Blank 2000).

⁶² Unless otherwise noted, this section is based on Moser and Holland (1997). Their work, entitled *Urban Poverty and Violence in Jamaica* and published by the World Bank, is based on a study of five communities in Jamaica.

⁶³ Based on 1996 data (cited in Morrison and Biehl 1999).

⁶⁴ The rates were 150 homicides per 100,000 population for both Guatemala and El Salvador and 89.5 for Colombia (PAHO 1997 cited in World Bank 1997).

geographically concentrated in poor urban communities (World Bank 1997) and Kingston reportedly has one of the highest murder rates in the world.⁶⁵

188. Violence in Jamaica is often related to gang activity. According to a World Bank study on youth in Jamaica, four out of the five communities studied perceived gang conflict as the most serious type of violence. Gang violence dates back to the late 1960s when individual politicians within Jamaica's political parties created unofficial armed militias to control poor neighborhoods. These groups eventually became economically independent through drug smuggling and today form a loose mafia that operates within Jamaica and internationally. Violence is linked to the availability of arms. Between 1997 and 1999, 63 to 68 percent of all murders were committed using guns (World Bank 1997).

189. The pervasive violence in Jamaican society has important economic and social consequences. For men age 15 to 44 years, injuries account for nearly 60 percent of the disability adjusted life years (DALYs) lost. For the population as a whole, injuries represent a quarter of all DALYs lost, and in 1990, one out of 10 DALYs lost was due to homicide. The impact of violence, while difficult to quantify, is also apparent at the macroeconomic level. For example, Jamaica's tourism industry and the ability of the country to attract overseas investors are affected by publicity on violence (World Bank 1997). Violence also has a negative effect on employment and educational attainment by limiting the mobility of children and adults and causing schools to close (World Bank 1997; Blank 2000). Residents from high violence areas may also be discriminated against by employers (World Bank 1997). Lastly, violence leads to family dissolution and trauma by causing death and imprisonment of family members as well as increasing the likelihood of migration (Moser and Holland 1997).

Male Exposure to Violence

190. Male exposure to violence begins at an early age. Through the school system, the family, the media and most importantly, the streets, boys are socialized to be violent, thus making male aggression an acceptable behavior (see Box 4.2). Both victims and perpetrators of crime tend to be young men, who accounted for 25 to 36 percent of all arrests for murders over the last four years; in 2000, males in the 20-25 age group were the principal offenders in all types of major crimes and accounted for 37 percent of all murders committed in that year, according to the PIOJ 2000 Economic and Social Survey. Studies out of Jamaica and elsewhere have shed light on the possible root causes of male violence, which are as follows:

Box 4.2 Boys Exposure to Violence in Jamaica

According to a PIOJ commissioned survey carried out by Meeks-Gardener (2001) on factors leading to aggression among school children, aggressive boys surveyed were more frequently exposed to violence. Most of the aggressive children had seen murder victims and had personally known victims of shootings, stabbings and other violent crimes; moreover, there was significantly more quarrelling among family members of the aggressive group. The survey involved 202 boys from 30 schools in Kingston and St. Andrews. A second PIOJ commissioned study also carried out by Meeks-Gardener linked corporal punishment in schools to aggression in Jamaican primary school children. The latter study involved 1,416 children between the ages of 9-13 years in 29 primary and all age schools in Kingston and St. Andrew.

Source: Jamaica Observer, Kingston, 3 June 2001

⁶⁵ The Sunday Gleaner, October 17, 1998.

- (a) **Lack of Parental Guidance.** Lack of parental guidance and broken homes are the leading cause of violence and gang activities in Jamaica, as well as that of other countries (Samms-Vaughan 2001, Meeks-Gardener, 2001, Gomart, 2001, World Bank 2000g).⁶⁶ Violent offenders are likely to have experienced neglect or absence of supervision throughout childhood, conflict or abuse, erratic discipline, or lack of emotional warmth in the family. Teenage pregnancy has also been linked to violence and other high-risk behaviors in Jamaica, as teenage parents have less experience and have had less time to develop parenting and disciplining skills (World Bank 1997).
- (b) **Household/Family Characteristics.** Violence is associated with household structure and other household characteristics. More aggressive boys were more likely to have a mother in a common-law union and less likely to have a mother who had never been married, according to research in Jamaica conducted by Meeks-Gardener (2001).⁶⁷ Another issue is the lack of a father figure to provide boys with a set of codes of behavior. In communities controlled by gangs, the “don” figure often assumes this role model for young men (Gunst 1995, as cited in Blank 2000). Lastly, the nature of a child’s parenting figures, parental presence, and child shifting have the greatest effects on behavior disorders in children, according to research carried out by Samms-Vaughan (2001) in Kingston and St. Andrew.⁶⁸ Children living with or being parented by biological parents have fewer behavioral problems. And in the case of child shifting, serial father figures and serial mother figures were equally distressing to children.⁶⁹
- (c) **Lack of Education/Unemployment.** Lack of access to quality education can lead to violence either directly by reducing self-esteem (World Bank 1997) or indirectly by reducing the skills required to get a good job. Unemployment is also likely to be high in small island economies given globalization and labor market distortions (World Bank 1996d). In countries with high unemployment, unskilled youth (many of whom are school dropouts) have difficulty entering the labor force. This leaves them with large amounts of free time to participate in gang, drug, or other criminal activity (Ayres 1998; World Bank 1997).
- (d) **Socialization Processes.** Violence among men can also be traced back to the socialization processes aimed at making boys tough, and child-rearing practices that emphasize harsh physical punishment (Blank 2000). Punishment of a male child is, generally speaking, much more severe than that given to a female child. Believing in corporal punishment as a means of control and a means of ‘bending

⁶⁶ For a review of the international literature on youth violence, see Gomart (2001).

⁶⁷ According to Marshall (1999), in many female single-parent households, mothers force their sons to be the patriarch of the family in the absence of the father. In an attempt to maintain respect within the household, these male youth tend to drop-out of school and become involved in illegal ways of income generation as well as gangs. Failure to provide economic support to the family can lead young men to feel useless and turn to aggressive behaviors.

⁶⁸ The research involved 1,720 children under 12 years of age, living in Kingston and St. Andrew and attending school in these areas.

⁶⁹ Problems detected by Samms-Vaughn were mainly associated with attention problems, delinquency and aggression, which could be a reflection of more easily identifiable externalizing problems.

the tree while it is young', many Jamaicans further believe that from the time a boy approaches adolescence, only a man is strong enough to bend a wayward sapling. Up to that age, corporal punishment is usually meted out by mothers, thereafter by fathers, uncles or older siblings who are able to 'drop man lick.'

Violence Against Women

191. As in many other LAC countries, domestic violence against women occurs in a significant number of families, not only in the lower classes of society where it is often more overt, but also within the middle and upper classes. Cultural attitudes reinforce the societal belief that violence in the family is a private matter between a man and a woman and that outsiders should not interfere. Also, the shame, guilt and stigma attached to wife-beating, sexual harassment and rape prevent female victims from openly admitting and reporting violence against them. Lack of awareness and sensitivity on the part of the police is another problem. Jamaican women are unlikely to report offences because they do not believe the police will take any action. In terms of the incidence of violence, available information suggests that:

- One out of five Jamaican women between the ages of 25 and 60 have suffered some sort of physical abuse (Brown 1999). Haniff (cited in Centre for Gender and Development Studies "National Report on the Situation of Violence Against Women and Girls in Jamaica 1999") found in her research that one in 11 women between the ages of 5 and 60 would experience an act of violence in one year in Jamaica based on reported cases. However she contends that this is conservative and that the real estimate is probably closer to one in five.
- According to a survey of 450 female students ages 13-14 in Kingston, 13 percent had experienced attempted rape (half of them before they were 12 years old) and one third of girls had been molested (Brown 1999).

192. The creation of the Centre for the Investigation of Sexual Offences and Child Abuse (formerly the Rape Investigative Unit) and the Victim Support Unit in 1998 have helped to foster a more sensitive approach to the handling of sexual and other violent offences committed against women and children.

Violence Against Children

193. Violence against children appears to be a serious problem in Jamaica, partly as a result of household structure and dynamics. Sexual abuse of children, for example, is common in Jamaica due to the preponderance of multiple, live-in common-law relationships and the large proportion of children being reared by men who are not their biological fathers. In some cases the live-in or visiting male friend of the child's mother is the perpetrator of sexual abuse of children. Child-rearing practices also give tacit and legal approval for corporal punishment of children. Children are regularly smacked, flogged, and even threatened with weapons. Jamaican law does not mandate the reporting of the physical abuse of children but evidence of sexual abuse has to be reported to the authorities. The intergenerational effects of violence against children are important. Studies have shown that

children who are exposed to violence at an early age are more likely to be perpetrators and/or victims of violence as adults (Morrison and Biehl 1999).

Governmental and Non-Governmental Efforts to Reduce Crime and Violence

194. In light of the escalating levels of crime and violence in Jamaica, several initiatives were put in place in 2000 in an effort to reduce the number of violent incidents (ESSJ 2000). These included widening the scope of training offered at the Jamaica Police Academy to de-emphasize force and weaponry and include an emphasis on alternative approaches to policing and the rights of citizens; the introduction of an Citizen Security and Justice Programme which will focus on the development of an up-dated crime and violence prevention strategy and on community action initiatives; and a review of the juvenile justice system with a view to making it more consistent with international standards.

195. Other ongoing initiatives to address the issue of violence in Jamaica include: conflict resolution programs in schools and communities, such as the Peace and Love in Schools and the Change from Within programs; Disputes Resolution Foundation Limited, for training police officers and mediators in the Correctional Services; and Jamaica Family Planning Association, which works with male abusers. Several agencies examine the issue of gender-based violence, including the BWA, Women's Media Watch and the Centre for Gender and Development Studies. The Centre is also about to undertake a research project to identify the root causes of gender-based violence in Jamaica with a view to inform public education, programs and interventions aimed at reducing the occurrence of gender-based violence.

EDUCATION

196. In comparison to other countries with similar income levels, Jamaica has made considerable progress in expanding educational coverage: the country has almost achieved universal education up to grade nine (World Bank 2000b). Enrollment rates, however, decline in upper secondary education, with a considerable falloff at grade nine due in part to decreased physical capacity at this level.

197. On average women have more education than men. As Table 4.7 indicates, in 1997 a Jamaican woman had on average 9.1 years of education, compared to a Jamaican man who had 8.5 years of schooling. Similarly, on average a Jamaican male worker had 8.4 years of education, compared to 8.9 years for a Jamaican woman. Illiteracy figures also reflect the gender gap between men and women, with rates being 50 percent higher for men than for women. According to the Jamaica Human Development Report 2000, 81 percent of women were literate compared to 69 percent of men.⁷⁰

Table 4.7 Average Number of Years of Education by Sex

Year	Population as a whole		Labor force	
	Males	Females	Males	Females
1990	8.31	8.60	8.43	8.91
1993	8.45	8.51	8.61	9.04
1997	8.54	9.09	8.37	8.87

Source: World Bank LAC Gender Database

⁷⁰ WDI indicators were slightly different: 90 percent for women and 82 percent for men for the population over age 15 years.

Enrollment

198. In both years under review, 1996/97 and 1999/2000, a slightly greater proportion of boys than girls were enrolled at the early childhood and primary school levels. For both years the proportion of females was just under 50 percent. The trend, however, changed at the secondary level in favor of females. At grades 7-9 females accounted for just over 50 percent of enrollment for both years. At grades 10-11 the gender gap widened in favor of females, with a percentage gap of 8.8 and 5.2 between male and female enrollment in 1996/97 and 1999/2000 respectively (see Table 4.8).

199. Enrollment levels for both sexes decline substantially at the grade nine level because of decreased capacity but more so for boys than girls. In 1999/2000 the net enrollment at the secondary level in public schools was 83 percent. At grades 7-9 the net enrollment rate for females was 77 percent and for males 79 percent, while at grades 10-11 the rates were 52 and 48 percent, respectively. At grades 12 and 13, where students are prepared for advanced level examinations, the decrease in enrollment was even more dramatic. Only nine percent of girls and five percent of boys made the transition from grades 11 to 12 in 1999/2000. This carries over to the tertiary level where there was almost a 2:1 ratio of females to males with the former accounting for 65 percent of enrollment in both years.

200. Analysis of 1989 household data confirms that more girls than boys are enrolled in Jamaica's exclusive track of secondary education (World Bank 1993a). However, boys from female-headed households are more likely to be in school than those in male-headed households. Bailey and Brown (1999) found that more of their out-of-school sub-sample came from female-headed households. This distinction does not apply to girls. These results are substantiated by using probit analysis that controls for the sex of the student and head, age of the student, per capita consumption, parental education and presence in the household, and access to transport.

Table 4.8 Enrollment in the Jamaican Education System by Sex and Level, 1996/97 and 1999/2000

Level	Female (%)		Male (%)		Total	
	1996/97	1999/2000	1996/97	1999/2000	1996/97	1999/2000
Early childhood	49.7	49.4	50.3	50.6	131,060	17 049
Primary	49.0	49.1	51.0	50.9	293,863	309 808
Secondary (total)	52.0	50.8	48.0	49.2	214,313	226 384
Grades 7-9	50.8	50.5	49.2	49.5	148,091	145 813
Grades 10-11	54.4	52.6	45.6	47.4	62,496	75 937
Grades 12-13	63.4	63.0	36.6	37.0	3,726	4634
Tertiary	64.7	65.5	35.3	34.5	27,069	39 8870

Source: Ministry of Education and Culture, Statistics Unit 1997 and 2000

201. Data on Jamaican entries in the 2000 Caribbean Examinations Council (CXC) examinations⁷¹ confirm the trend of higher female participation in school at this level.⁷² There was a total of 49,867 candidates entered for the June 2000 examinations, of which 31,900 (64 percent) was female. In that year female entries outnumbered male entries in both academic and vocational/technical tracks, with the predominance of females being greater in

⁷¹ CXC is the certification most sought after at the secondary level by school-leavers in the region.

⁷² This section draws on PIOJ, UNDP and CIDA (2000).

the latter. In the academic track the female to male ratio of entries was 64:36 and in the vocational/technical track the ratio was 67:33 (Ministry of Education and Culture, Statistics Unit 2000). Thus more girls than boys are using the CXC as the route for certification at the end of the secondary cycle, and thus fulfilling the requirements for university matriculation.

202. Data for Jamaica's two major universities also demonstrate large gender gaps between female and male participation. In the 2000/20001 academic year more than twice as many females (7,753) as males (3,198) were enrolled at the University of the West Indies (UWI) in both undergraduate and graduate programs. At the University of Technology (UTECH) the gender gap was much narrower with enrollments being 55 percent female (3,762) and 45 percent male (2,913), due most probably to the more technical nature of the courses offered at that institution (see Table 4.9).

Table 4.9 UTECH and UWI* Enrollments by Sex (2000/2001)

University	Female		Male		Total
	Number	Percent	Number	Percent	
UTECH	3826	51.9	3549	48.1	7375
UWI Undergraduate	5295	71.4	2117	28.6	7412
UWI Graduate	1125	65.6	590	34.4	1715
Total UWI	6420	70.3	2917	29.7	9337

* Jamaicans at Mona only

Source: Office of Planning and Institutional Research, UWI and Marketing Division, UTECH

Repetition and Attendance

203. In Jamaica, repetition among students enrolled in secondary school is linked to a greater extent to rural residence and age than the sex of the student or household head (World Bank 1993a). In female-headed households, boys age 13-19 years repeat less than boys in male-headed households; for girls, sex of the household head is not a determinant. Controlling for area, sex of the student and head, age of the student, per capita consumption, parental education and presence in the household, access to transport and type of school produces the same results.

Performance

204. Sex differentials in overall performance in favor of females are evident at all levels of the education system. In the 1999/2000 Grade Six Achievement Test administered to students at the end of the primary cycle, girls outperformed boys in all five areas: mathematics, science, social studies, language arts and communication tasks. At the secondary level, data for the June 2000 CXC examinations indicate that a higher percent of girls than boys obtained Grades 1, 2 and 3 passes in 10 of the 17 academic subjects. A larger percent of boys, however, obtained passes at this level in five of the nine science-based subjects including mathematics and girls in six of the eight humanities subjects (Ministry of Education and Culture, Statistics Unit 2000). For the 1999/2000 and 2000/2001 academic years, 75 percent of all degrees awarded at the UWI went to women (Office of Planning and Institutional Research, UWI). In terms of the class of degree awarded in 2000/2001, 2.9 percent of male graduates received distinctions whereas only 1.4 percent of female graduates received distinctions; males received 3.2 percent of first class honors, compared to 3.7 percent of females.

Gender Stereotypes in Education

205. Research in Jamaica suggests that curriculum materials portray images and convey implicit messages on gender identities and corresponding behaviors and roles. For example, in their work on the subject, King and Morrissey (1988) note that men predominate in the textbooks of most schools. Sexism appears through the use of language, e.g. masculine words are frequently used to refer to the general population. When they do appear, women are depicted in subordinate or secondary roles. Textbooks also fail to present women's contributions to the development of the Caribbean. A more recent study by Bailey and Parkes (1995) confirm these findings in texts used by students in grades one to three. These authors found that texts presented images of male dominance and female subordination and invisibility.

LABOR⁷³

206. Labor force participation rates – defined as the percentage of the working age population (14 years and over), who are currently working, unemployed or looking for work – have remained fairly stable for men in Jamaica between 1990 and 2000, but have decreased slightly for women since 1995 (see Table 4.10). In 2000 the employment rate for men was 90 percent, compared to 78 percent for women. While male labor force participation in Jamaica mirrors that of other LAC countries, female labor force participation is among the highest in the region.

Table 4.10 Distribution of Labor Force Participation*, Employment, Unemployment and Job-Seeking Rate by Sex, 1990-2000

Year	Labour force participation rate		Employment rate		Unemployment rate		Job-seeking rate	
	Male	Female	Male	Female	Male	Female	Male	Female
1990	76.4	62.4	90.7	76.9	9.3	23.1	4.4	10.1
1991	76.3	62.4	90.6	77.2	9.4	22.8	3.7	8.0
1992	75.0	62.4	90.3	77.1	9.7	22.9	4.3	8.5
1993	74.6	62.4	88.8	78.5	11.1	21.5	5.6	8.0
1994	76.5	62.4	90.5	78.2	9.5	21.8	5.9	10.9
1995	76.8	61.8	88.7	76.8	11.3	23.2	4.9	9.4
1996	75.5	60.6	89.4	76.9	10.6	23.1	4.6	10.9
1997	74.6	59.0	90.2	77.3	9.8	22.7	4.5	11.0
1998	73.9	57.8	90.2	77.8	9.8	22.2	4.8	10.2
1999	73.0	56.5	89.5	77.1	10.5	22.9	5.0	11.4
2000	72.9	54.3	89.8	77.6	10.2	22.4	5.6	11.7

*Population 14 years and over

Source: Ricketts and Benfield (2000)

Unemployment

207. In Jamaica, women and youth are more vulnerable to unemployment (World Bank 2000b).⁷⁴ In 2000, 10 percent of men and 22 percent of women were unable to find formal

⁷³ Unless otherwise stated, this section uses figures for the October (last) quarter of the year.

work (see Table 4.10). The gender gap is even wider among youth: 62 percent of females and 37 percent of male youth 14-19 years old were unemployed in 2000 (see Table 4.11). While unemployment levels are higher for females than for males, many women engage in informal economic activities when they are unable to find work. Women not only experience higher levels of unemployment than men but are also more vulnerable to redundancies. In 1998 women accounted for 68 percent of all redundancies, 62 percent in 1999 and 67 percent in 2000 (Bailey 2001). A corollary to these redundancies is that the number of 'own account' workers has increased, where professionals, senior officials and technicians accounted for 37 percent of this category of workers. This percentage has tripled since 1991 when they comprised 11 percent of own-account workers. However, in spite of the potential of the informal sector in Jamaica to absorb excess labor, it remained a volatile area and in the final quarter of 2000, 12,900 persons were unemployed because of a failed business of which 8,400 (67 percent) was female (STATIN 2000b).

Table 4.11 Rate of Unemployment by Age and Sex, 1998, 1999 and 2000

Age	1998		1999		2000	
	Male	Female	Male	Female	Male	Female
14-19	37.5	74.0	34.5	65.3	37.0	61.9
20-24	17.9	37.4	19.7	43.5	18.7	39.5
25-34	6.9	20.4	7.5	21.3	7.9	20.6
35-44	4.8	11.1	5.7	12.4	5.8	16.0
45-54	4.5	9.1	3.9	8.0	2.7	10.3
55-64	3.7	6.7	5.7	2.6	5.9	2.6
65 and over	1.3	2.2	4.2	6.5	2.7	6.2

Source: STATIN (1998) and STATIN (2000b)

Education and Labor Force Participation

208. Higher education has not translated into income equality or economic independence for women, according to a report on the Status of Caribbean Women prepared in 1996 by the CARICOM Secretariat for the Fourth World Conference on Women. Sex disaggregated unemployment figures also suggest that women have had difficulties translating education into labor market opportunities. For example, unemployment for women with secondary education is just under 16 percent, compared to eight percent for men with secondary education.⁷⁵ In 2000, 12 percent of women in Jamaica's employed labor force had professional training with degrees or diplomas, compared to only six percent of men (STATIN 2000b). Similarly, eight percent of women had vocational training with certificates, whereas this was the case for only three percent of the men. In view of these differences, and given that females experience higher levels of unemployment, it could be concluded that men with lower levels of education obtain jobs more easily than their female counterparts, and that young women in particular encounter constraints in the labor market.

⁷⁴ Employment-related problems among the poor are associated with low quality and productivity of employment as well as lower earnings rather than open unemployment (World Bank 2000b).

⁷⁵ World Bank LAC Gender Database.

Occupational Differences

209. Occupational segregation in the labor market is quite marked, as shown in Table 4.12. In 2000, females were predominately positioned in the "Professionals, Senior Officials and Technicians" (23 percent), "Clerks" (16 percent) and "Service Workers and Shop and Market Sales" (24 percent) categories. They also outnumbered men in the category "Elementary Occupations" (22 percent, including domestic helpers). Males predominate in the categories "Skilled Agriculture and Fishery" (27 percent), "Crafts and Related Trades" (25 percent) and "Plant & Machine Operators and Assemblers" (eight percent) (The Labour Force 2000). Although women have on average higher levels of education, the majority is concentrated in "Elementary Occupations" and the "Service Workers and Market Sales" categories of work. Almost one half of all employed females are concentrated in these lowest paying sectors, which require less technical skills, have lower status, and for the most part, pay the minimum wage approved by the government.⁷⁶

Box 4.3 Gender, Education and Labor Force Participation

A newsletter published by the PIOJ reported that:

"Studies have shown that women in similar positions as their male counterparts tend to be more qualified; that women earn less than their male counterparts; and that though more women are now holding managerial positions than previously, there remains a 'glass ceiling' which separates women from positions of real power."

Source: Bailey (2000)

210. While women outnumber men in the top occupational category "Professional, Senior Officials and Technicians," they are still under-represented at the upper levels of management. Women hold 10 percent of senior positions in the public and private sectors, and their presence on the boards of companies is limited, despite the fact that they constitute two-thirds of university graduates. On the other hand, these sectors offer time flexibility and easy entry and exit, thus allowing women to balance work and domestic/care giving responsibilities.

Wage Gaps

211. In 1997, women earned on average 83 percent of men's earnings (see Table 4.13). However, men probably work longer hours than their female counterparts. According to STATIN's Labor Force Survey Report, some 37,400 women worked more than 49 hours per week in the last quarter of 2000; this represented 29 percent of all persons who worked more than 49 hours.⁷⁷

⁷⁶ The minimum wage is JA\$6,000 per month. With the exchange rate at US\$1=JA\$45.25 as of January 31, 2002, the minimum wage equals US\$132 per month.

⁷⁷ According to a survey conducted by Jamaica Employers' Federation in collaboration with the Center for Gender and Development Studies in 1995, women comprised 72 percent of those who worked more than 49 hours per week. However, this data were not nationally representative.

Table 4.12 Occupational Allocation of Employed Labor Force, 1996, 1998, and 2000 by Sex

Occupational Category	1996			1998			2000		
	M	F	% F	M	F	% F	M	F	% F
Professionals, senior officials and technicians	9.5	18.0	58.0	11.7	21.8	57.4	11.6	22.7	57.6
Clerks	3.0	13.1	76.3	3.4	15.5	76.6	4.0	16.3	74.0
Service workers & market sales	10.6	21.5	59.8	11.5	23.9	60.0	11.3	23.8	59.4
Skilled agric. & fishery	27.6	9.6	20.4	27.3	8.0	17.6	26.6	7.7	16.7
Crafts & related	26.1	6.4	15.2	24.1	5.7	14.7	24.7	5.3	12.9
Plant & machine operators and assemblers	8.6	6.1	34.4	9.1	3.6	22.3	8.4	2.2	15.1
Elementary Occupations	14.6	25.3	56.0	12.8	21.4	54.7	13.4	22.0	53.2
Total	100	100	---	100	100	---	100	100	---

Source: STATIN (1999) and STATIN (2000)

212. Research in other countries suggests that wage differentials could be due to discrimination, self-selection or preferences (World Bank 2000h). Women's lower earnings could also be due to breaks in their work histories and thus less cumulative experience. An analysis of wage differentials in the LAC region found that differences in experience accounted for about 10 percent of labor income differences, while sex explained approximately four percent (IDB 1999).

Box 4.4 Gender Division of Labor in Jamaica

As in most countries, men and women in Jamaica are socialized to identify domestic work as female and work outside the domestic sphere as male. The fact that many boys are required to perform some 'female' tasks, as can be the case in families with mostly boys, or that many girls are required to undertake 'male' tasks in families of girls, is of little consequence as far as the behavioral norms are concerned. Even as they perform such cross-gender tasks, children are made aware of their gender significance, which is usually rationalized as preparation for an independent and self-reliant life. These gender roles play into the perception of education as well. Anecdotal evidence indicates that a boy is the first to suffer deprivation where children's education is concerned. If resources do not allow for all children to attend school at the same time, girls are given the advantage over boys.

The nurturer-provider axis forms one of the bases of gender identity among children. Whereas girls acquire nurturing and domestic skills, boys learn from an early age the need to acquire money. In rural communities, boys' farming initiatives are encouraged; while in urban communities, their money-making initiatives are developed on the streets and in the markets. In the scale of priorities, education for boys ranks lower than making money. A study on coping strategies in an inner-city community found that men are expected to 'make life' by fair or foul means: "juggle if you can, hustle if you must." To do nothing is to be branded "worthless".

Table 4.13 Gender Wage Gaps (mean hourly female wage/mean hourly male wage)

Year	Age						Total
	15-19	20-24	25-34	35-44	45-54	54-70	
1990	1.34	0.89	0.79	0.6	0.7	0.75	0.75
1993	1	0.74	0.8	0.75	0.53	0.76	0.83
1997	1	1	0.77	0.75	0.57	0.85	0.83

Source: World Bank LAC Gender Database

AGRICULTURE⁷⁸

213. While the trend has been towards urbanization, half of Jamaica's population continues to live in rural areas, according to the last census. The sex breakdown of the rural population is about even, but women make up 62 percent of the adult (age 14-64 years) population (see Table 4.14).

214. According to official statistics, agriculture is male-dominated in Jamaica. The 1996 Agriculture Census reported that women 'farm operators' accounted for 26 percent of all farmers and males for 74 percent (see Table 4.14). However, as in other LAC countries, female contributions are probably underestimated.⁷⁹ In the case of Jamaica, these statistics do not include the number of women who participate as unpaid family workers, female farm laborers, traders (who account for approximately 80 percent of fruits, vegetables and staples marketed in Jamaica) and community-based and commercial agro-processors.

Table 4.14 Rural Population Gender Indicators

Indicator	Number	Percent
Rural population as a % of total population (1991 Census)	1,180,379	49.5
Rural female population as a % of the total rural population	602,234	51.0
Rural female population age 14 to 64 years	373,285	62.0
Females in school as a % of females 14+ years	104,548	28.0
Females not in school as a % of females 14+ years	268,883	72.0
Women in the agricultural labor force, 14-64 years, f/m *	61,600	16.5
Women not accounted for in agricultural labor force, 14-64 years, f/m	207,283	83.5

Source: Women Food Producers' Survey Study 1993

Note: *Official Statistics; f/m = female/male

215. A 1993 survey of women food producers indicates that 61,600 women were employed in agriculture in 1993 (see Table 4.14). This left 207,283, or 77 percent of the rural female population aged 14-64 and not attending school unaccounted for in the agricultural labor force. Innerarity (2000) opines that many women in this unaccounted category actually work on male-operated farms and postulates that based on a single woman working on each such farm, another 105,826, or 51 percent of that female rural population not in school, could be accounted for. This re-estimation would mean that the total number of women working in agriculture would have increased from 61,600 to 166,426 and would leave only 20 percent of the unaccounted female rural labor force working in other sectors. If this is the

⁷⁸ Statistics and information contained in this section come from PIOJ, UNDP and CIDA (2000) unless otherwise stated.

⁷⁹ The problem of undercounting is more acute for women than men because of the subsistence nature of their activities, the irregularity of their work, and the integration of women's work with their domestic duties.

case, it could mean that women are participating in the agricultural labor force in numbers relatively close to those recorded for men.

Table 4.15 Distribution of Individuals Farm Holders by Sex and Parish, 1996

Parish	Percent	
	Male	Female
JAMAICA	74.3	25.7
St. Andrew	83.6	16.4
St. Thomas	75.0	25.0
Portland	82.2	17.8
St. Mary	72.0	28.0
St. Ann	79.8	20.2
Trelawny	73.0	27.0
St. James	72.7	27.3
Hanover	70.1	29.9
Westmoreland	76.2	23.8
St. Elizabeth	66.8	33.2
Manchester	76.0	24.0
Clarendon	74.0	26.0
St. Catherine	77.1	22.9

Source: STATIN (1996)

216. Both male and female farmers experience problems in accessing resources and benefiting from agricultural sector policies and programs. But, as in other LAC countries, cultural practices, reinforced by stereotypes held by rural development officials, result in the tendency to not recognize women as “farmers” in and of themselves. This is exacerbated by the misrepresentation of women in agricultural statistics. Thus while both rural men and women face constraints, female farmers and agricultural workers are often the last group considered in policy and program initiatives in the agricultural sector.

CONCLUSIONS AND POLICY CONSIDERATIONS⁸⁰

217. Poverty and gender are intertwined in Jamaica. A tendency exists in Jamaican society to attach a high social value to gender roles and behaviors that actually exacerbate economic hardship among the poor. For men, there is a popular identification of masculinity with a man's sexual prowess, which is defined in terms of his ability to father children with multiple partners. For women, the social pressure to bear children is twofold. On the one hand, a woman's role and identity are typically identified with motherhood. On the other, women often choose pregnancy in the belief that it will secure the economic support of their male partner. These behaviors have both social and economic consequences. A high unemployment rate, particularly among the unskilled and uneducated, means that men can usually not provide for the economic needs of these children; and early pregnancy results in school drop-out and limited job opportunities for young mothers. The contradiction inherent in this situation is that a high social value is attributed to behaviors that carry a heavy social and economic cost.

⁸⁰ This section is based largely on Barker and Fontes (1996).

218. Given the close relationship between gender-mediated behaviors and poverty, ensuring that poverty reduction strategies consider this important gender-poverty nexus is a key recommendation of this report. In terms of gender-specific policy priorities, findings here suggest the following: (a) reducing adolescent and unintended pregnancies, as well as addressing early sexual initiation; (b) promoting the active participation of men in childrearing and domestic tasks; (c) reducing male crime, risky behavior and violence, including domestic violence; (d) reducing school drop-out and repetition among boys; and (e) reducing the high levels of unemployment, particularly among women, in the 14 – 24 age group. Specifically, this report recommends a prevention strategy focused on children and youth at-risk, which addresses all the aforementioned issues but with a focus on the generation of the future.⁸¹ Based on a review of the international experience carried out by Barker and Fontes (1996), a successful youth at-risk strategy would include: (a) educational support and school drop-out prevention programs; (b) job skills and vocational training; (c) health outreach and health promotion; and (d) support to at-risk families. The report makes three additional recommendations: (a) fostering local community-based work to tackle social problems such as violence; (b) addressing negative gender socialization through the education system; and (c) collecting and analyzing better household data to reflect gender roles, dynamics and decision-making. These recommendations are described briefly in turn.

Educational Support and School Drop-out Prevention Programs

219. At-risk youth in Jamaica, in particular males, often require some form of support to prevent them from abandoning school and assist them in the school to work transition. “Full service” schools, which involve expanded recreational and extra-curricular activities, health services, and parent and community participation, have been a successful model used in the United States to keep kids in school. But these may not be possible in the context of a poorly funded and weak education system. Successful models in Latin America and the Caribbean have used community-based organizations, NGOs and local governments to develop youth programs, which complement the formal education system. As previously noted in the policy recommendations for the Dominican Republic, successful private or non-governmental educational support programs have provided a combination of the following types of services: community-based vocational training, after-school academic support, health education, recreational activities, group and individual counseling, life-skills education, preparation for the work force, remedial education and tutoring. Many of these programs operate in partnership with government, other social service NGOs and community businesses, thus enhancing their sustainability.

220. In Jamaica, an important program – the Learning for Earning Activity Programme (LEAP) Centre – emerged following research conducted in 1986 by the Ministry of Education, which indicated a growing number of street children. The Center, which operates under the aegis of the Special Programmes Division of the HEART Trust/National Training Agency (NTA), provides temporary shelter, health services, and hot lunches, as well

⁸¹ According to Barker and Fontes (1996), youth at-risk is defined as people age 10-19 who are socially disadvantaged because they are not enrolled in school or are at risk of dropping out; work in settings that are damaging to their health and development (including being involved in illicit activities); spend a large amount of time on the street or sleep in the streets; have been abused physically or sexually or neglected by their families; live in an institutional setting due to abandonment or the like; live in a stressful home situation; or live in neighborhoods with high levels of crime, violence, substance abuse or drug trafficking.

as a day school and drop in center for remedial education and basic vocational skills for street children.

221. A number of NGOs also provide community-based programs that address the needs of youth. These include: Youth Opportunities Unlimited, which matches volunteers with young people for one-one mentoring; Children First, a program that provides academic and other support to children and their parents using a rights-based approach; the Women's Centre of Jamaica Foundation, which operates programs for teenage mothers and fathers, their parents and at-risk youth; Father's Inc., which counters negative stereotypes of men and provides counseling to teenage fathers; and the YMCA's Youth Development Programme, which provides remedial schooling and vocational training for street boys.

Job Skills and Vocational Training

222. Many at-risk children come from homes with persistent unemployment pressures, thus many programs have been designed to provide paid apprenticeship, or short vocational training which facilitate youth's immediate entry into the labor force. Lessons from these programs include the need to provide vocational "orientation", which can be as important as the vocational training itself given that at-risk kids cannot get the guidance from their families and peers on how to find or keep a job. For example, the Women in Non-Traditional Occupations Project – also operated by HEART Trust/NTA – provides life-skills (self-awareness, parenting, sex education, nutrition, basic literacy, etc.), community service, and employment preparation training for 400 women over three years. Programs linked to local industries have been successful in providing the on-the-job training required by many youth as well as ensuring that a market for the skills acquired exists once youth have completed their courses. In some cases, partnerships have worked well, with a local community organization providing the vocational orientation or life-skills and private sector firms setting the vocational training curriculum and providing on-the-job training. Lastly, gender equality is an important element of vocational training. The Trinidad and Tobago program emphasizes non-traditional courses for women (in carpentry, plumbing, mechanics, etc.) and for men (nursing, childcare, etc.) to reduce negative gender stereotypes.

223. In Jamaica, under the Children and Youth At Risk component of the Government of Jamaica/UNICEF Country Programme, NGOs are sponsored to provide remedial, recreational and vocational programs to empower street children (primarily boys) with new skills, knowledge and opportunities in order to improve their chances for employment and reintegration with family and in the formal education system. The government has also signed a Memorandum of Understanding with the ILO for the elimination of the worst forms of child labor in Jamaica, including drug pushing and prostitution. The HEART Trust/NTA offers a range of training programs for school-leavers and drop-outs through 16 Vocational Training Centers, on-the-job-training programs, special community based projects and a Work Force Improvement Programme. In 2000, a total of 4,316 (56 per cent females) who were examined were recommended for certification under the National

Council on Technical Vocational Qualification of Jamaica (NVQ-J), a competency-based examination.⁸²

Health Outreach and Health Prevention Programs

224. Compared to adults, adolescents face a number of health issues that are associated mostly with behavior and lifestyle. These include adolescent pregnancy, STDs and HIV transmission, substance abuse, risky behavior, and violence. International experience on health outreach and health promotion for youth suggests that: (a) youth health interventions should be integrated into broader youth development programs (for example, in income generation and anti-violence); (b) separate stand alone health services should be provided for youth which are tailored to their needs; (c) health services should be staffed by youth to the extent possible; (d) health services should target youth in places where they like to gather and where they feel comfortable – with males and females receiving different treatment according to their needs; and (e), to be effective, health care staff working with youth need to be trained on how to deal with their own feelings on adolescent sexuality.

225. Examples of successful or promising prevention programs/interventions in Jamaica include: the National AIDS Committee, which will focus on youth and AIDS in its National Forum slated for 2002 and has established a web page targeting youth; the Ministry of Health's Behaviour Change communication program, which has included a number of workshops and activities for youth; Association for the Control of Sexually Transmitted Disease (ACOSTRAD), an NGO that has designed information pamphlets on sexuality and sexually transmitted infections for adolescent; the Jamaica Red Cross, which trains youth and inner city groups around HIV/AIDS issues; and the Jamaica Foundation for Cardiac Disease's "Heart for Life" campaign launched in January 2002, aimed at curbing the increase in obesity among children through a program targeted for students in grade four.⁸³

Support to At-risk Families and Children – Including Support for Parents

226. Family support programs have been employed in urban areas of the United States to assist at-risk families and improve parents' skills in raising and caring for their children. The premise of these programs is prevention, thus interventions foster health, child and youth development to circumvent future problems and attempt to break the poverty cycle. In many communities, family resource centers provide a combination of training, job placement services, parenting sessions, educational services, communications, child development, reproductive health care referrals, tutoring and mentoring to different members of the family based on their needs. In doing so, programs also address tough issues such as responsible fatherhood, alcoholism and substance abuse, domestic violence and adolescent pregnancy.

227. The issue of parenting receives much public attention, particularly the stereotype of the absent and irresponsible father. The disproportionate share of women's responsibilities in this area is highlighted in the Jamaica Human development Report 2000. The Situation

⁸² The examination is offered to candidates at training institutions, schools, firms/companies and privately registered individuals. This number represents some 48 per cent of those who sat, an improvement over the 3,337 or 38 per cent, who were recommended in 1999.

⁸³ The program includes aerobic exercise and education on the functions of the heart and the importance of physical activities.

Assessment of Parenting in Jamaica carried out by UNICEF identified the main problems of parenting as having to do with poor communication, limited quality time spent with children, over compensation with material things and inadequate preparation for parenting roles. Several strategies to strengthen parenting skills have been carried out by a number of agencies. These include the development of standards and materials for parenting programs by the National Council on Training; the establishment of a hotline for parents by the Jamaica Foundation for Children; the Government of Jamaica/UNICEF's Coalition for Better Parenting, which provides technical assistance to develop Standards for the National Council on Technical and Vocational Education and Training (NCTVET). Moreover; and the National Council on Education' Parent Education Conference. The latter – which was supported by the Government of Jamaica/USAID New Horizons Project – trained 343 parents as training coordinators in 2001. Parents need to avail themselves of these facilities and fathers need to be targeted in this regard.

Addressing Gender Socialization through the Education System

228. Schools are an important force to counter or reinforce negative gender stereotypes and biases, which, in turn, affect men's and women's choices and behaviors over their lifetimes and ultimately affect their well-being. The CARICOM Secretariat in association with the Centre for Gender and Development Studies at UWI has produced a module for teacher education entitled Gender Issues in Caribbean Education. The aim of this module is to make teachers aware of ways in which gender bias, stereotypes and sex discrimination, against both women and men, are reproduced through their own behaviors and through a variety of processes in the school. The Centre has also spearheaded the development of a comprehensive regional research program aimed at address issues of gender disparities in Caribbean education systems with a view to facilitating the full contribution of women and men to national and Caribbean development. It would be important to utilize these types of tools to change negative teaching practices both in the formal and informal education systems.

Community-Based Interventions

229. Local-level and community-based programs can be a powerful force in addressing a range of gender-based social issues. Working through civil society and local level organizations offers several advantages: they exert powerful peer pressure and influence by operating close to and interacting directly with target groups, they have the best understanding of local contexts and can adapt programs according to local conditions and practices, and they can be cost effective. A good example of how community action addressed gender-related social problems is that of Craigtown, one of the most impoverished districts in Western Kingston. Here local residents tackled violence head on by negotiating peace agreements directly with local gangs. As a result, homicides in Western Kingston declined dramatically from 200 in 1997 to 69 in 2000.⁸⁴ The government could play an important role in supporting community-based initiatives such as that of Craigtown by assisting in popularizing the peace process and extending it to other violent parts of Jamaica

⁸⁴ US National Public Radio (2001).

Household Data Collection and Analysis

230. A last policy consideration would be to establish better data on the characteristics, dynamics and structure of the family with the objective of improving targeting of social and productive assistance programs. Headship is inadequate to understand the complexities of gender and households, particularly when it is self-reported and in the context of complex and diverse household arrangements, both of which are the case in Jamaica.

5. CONCLUSIONS

231. Gender-related issues are prominent in all three Caribbean countries examined in this report, the most salient being: (a) problems in the provision of integrated and sexual health care, which have led to elevated levels of maternal mortality, unplanned pregnancies (particularly among adolescents) and the highest incidences of HIV infection in LAC; (b) the prevalence of male violence, including domestic, social and economic violence as well as intergenerational violence; (c) low educational attainment with particularly high repetition rates among boys in the Dominican Republic and Jamaica; (d) large gender gaps in unemployment to women's disadvantage, with the widest gap being in the Dominican Republic; (e) the presence of discrimination in laws because they are either outdated (Haiti) or inadvertently discriminate against women (the Dominican Republic); and (f) poverty linked to household structure and single parent families, unstable home environments, absent fathers and lack of parenting skills. Specific country issues are described below.

232. In the **Dominican Republic** maternal mortality levels are high given the broad coverage of health care services. While total fertility has decreased overall, births among adolescent girls have increased. High fertility in the Dominican Republic is generally associated with low levels of education and rural residence. More importantly, the HIV infection rate is among the highest in LAC, and is increasing at a faster rate among women than men. Domestic violence remains widespread and accepted in society, with illegal migrant Haitian women being particularly vulnerable. Gender problems in education are related to boys' under-performance: the Dominican Republic has the highest gender gap in school repetition rates in the region. But while girls now outperform boys in school, female labor force participation continues to be lower than that of men's. Within LAC, the Dominican Republic has one of the highest gender gaps in unemployment, to women's disadvantage; unemployment among female youth is almost double the rate of male youth. Lastly, while the Dominican Republic has made important changes to its laws in recognition of issues such as domestic violence, problems with the civil code and other legal concerns persist. Women's political participation also appears to be low vis-à-vis other countries in the region.

233. **Haiti's** extreme poverty translates into some of the worst gender indicators in the Western Hemisphere. Within the LAC Region, Haiti exhibits the highest maternal mortality rates, the lowest life expectancy for women and men, the highest overall fertility, the lowest levels of contraceptive use and the highest HIV infection rates. The situation in rural areas is particularly severe given the lack of economic opportunities, basic infrastructure and services. Sexual and domestic violence also appear to be prevalent in Haitian society. And despite one of the highest levels of female labor participation, unemployment levels for women are significantly higher than those of men. Moreover, high female employment is likely less related to women's emancipation than to the need for subsistence and basic survival. Lastly, legal and constitutional advances related to women have been minimal. Haiti's antiquated laws treat men and women in disparate ways.

234. In the case of **Jamaica**, the overwhelming numbers of unplanned pregnancies and the incidence of HIV point to problems with reproductive health services reaching men and women. As for violence, Jamaica is one of the most violent societies in LAC, with crime being concentrated among young males, who are the principal victims and offenders of all

serious offenses. Domestic and sexual violence, which is less reported, is also widespread in Jamaica. In relative terms, education is a male issue in Jamaica: illiteracy is 50 percent higher for men than women. And while women have one of the highest labor force participation rates in LAC, consistent with other countries, Jamaican women have double the unemployment level of men.

INSTITUTIONS AND MEN'S AND WOMEN'S WELL-BEING

235. While the cultural and historical backgrounds of the Dominican Republic, Haiti, and Jamaica differ, one common theme emerges from the analysis of gender issues carried out here: the importance of institutions. In all countries reviewed, the society's "gender rules," the state, and the household, are critical institutions in terms of influencing men's and women's outcomes. They are also central in understanding how to improve men's and women's well-being and that of their families.

Gender Rules

236. As in other parts of the world, social rules prescribe the roles men and women take on and the appropriate behaviors for each over their lifetimes. Beginning with school-age children, boys exhibit higher repetition rates due to labor force participation and the expectation that they should play the male "breadwinner" role. In Jamaica, on the scale of male priorities, education ranks lower than earning money, which has clear implications for men's human capital and labor market outcomes. Girls, in contrast, are more likely to abandon school because of early pregnancy or domestic and childcare responsibilities at home, which is consistent with the traditional female "caregiving" role. In Haiti, women face social pressure to bear children, following on their traditional reproductive and maternal roles.

237. As adults, despite higher levels of education among Dominican and Jamaican women, labor force participation is lower among women than men, and their unemployment levels are substantially higher. Evidence from other countries suggests that gender-specific responsibilities to carry out housework and childcare constrain women's economic activity and earnings (Katz and Correia 2001), with obvious implications on them and the well-being of their families. Another example of the importance of gender roles in determining outcomes relates to violence, which is highly prevalent in Jamaican society. High levels of male unemployment – typical of small island states – and men's consequent difficulty in fulfilling their expected "breadwinner" role has been cited as one of the main causes for increased violence in the subregion (Ayres 1998; Barker 1998).

238. Gender roles and expected behaviors are also linked to household formation and stability. For example, having multiple sexual partners is accepted behavior among men in Haitian society, which compromises men's ability to form a stable household and union. It also challenges men's ability to provide economic support for their children. Men's (and fathers') presence in the household, or lack thereof, in turn influences decisions on fertility, precautions related to sexual behavior, labor force participation, children's psychological well-being and family stability.

State Institutions

239. Information presented here also suggests that state institutions matter for gender outcomes. In no country in the Western Hemisphere is the absence of government so striking as in Haiti, and the gender consequences of these deficiencies are obvious. They have led to the highest rates of maternal mortality and contributed to high fertility and HIV infection rates. Remarkably, only nine percent of rural women give birth in a hospital. But the importance of state institutions is also clear in Jamaica and the Dominican Republic. Almost all teenage pregnancies are unplanned in Jamaica, as are the majority of pregnancies of all ages, thus pointing to the inadequacies of reproductive and sexual health care programs and policies in that country. HIV infection is high and adolescent pregnancy has risen in the Dominican Republic, which is likely due, at least in part, to reproductive health programs targeting mostly married women to the exclusion of youth and men. Also in the Dominican Republic, several aspects of civil and agrarian law make it difficult for rural women in particular to gain access to land, which contributes to women's low levels of land ownership and increases their probability of being poor.

240. The importance of state institutions in determining outcomes at the household level is fascinating in the case of Haiti. The informal *place* union in Haiti originally emerged because rural residents did not trust the legal system and civil officials and because they wanted to avoid costly weddings and the influence of the State or Church in restricting partners. The *place* household arrangement is now the most common form of union in Haiti.

The Household as an Institution

241. Vis-à-vis other countries in LAC, one of the most prominent aspects of Haitian and Jamaican societies is the unique nature of how households are formed, the types of unions that are acceptable, and the corollary relationships between partners, parents and children. Household formation, their structure and their relations have important gender and intergenerational consequences. In Jamaica, for example, the fact that most children are born out of wedlock and do not have registered fathers, means that children are, for the most part, raised without their fathers. Also, a common type of union in Jamaica is the "visiting relationship", a semi-permanent arrangement in which the man does not live in the same household as the woman but visits from time to time. The presence of men in the family who are not the natural fathers of the children in the household has been linked to high levels of sexual violence in Jamaica. In Haiti, while the largest proportion of the population is in a stable union, the "union" status is not mutually exclusive or static. Men can be involved in several unions at one time or have multiple partners. And even though it is a stigma for Haitian men not to support their children, regardless of how many they have and the type of union the children come from, in reality, many mothers do not receive the father's economic support and must accept their children as their sole responsibility.

242. While it is beyond the scope of this report to explain the complex nature of household formation and relations in Haiti and Jamaica, the literature on the economics of the family provides some useful insights.⁸⁵ From the perspective of neoclassical economists, decisions regarding family formation and breakup or fertility are based on whether the

⁸⁵ This section is primarily based on "The Economics of Women, Men and Work" by Blau et al. (1996).

benefits exceed the costs. Marriage was thus seen as advantageous in many societies in which women specialized in domestic work and men in market work, thus leading to increases in the couple's productivity and economic well-being.⁸⁶ But increased female education, reduced sex discrimination and corollary increases in women's labor force participation in many countries have led to greater market productivity for women, and in turn, lower marriage rates. Few economic opportunities for men have also made them less attractive partners to women thereby also contributing to reduced marriage rates. In the United States, for example, marriage in the African American community has declined dramatically, reflecting both women's rising employment levels and men's poor job prospects. In inner cities, high rates of crime and incarceration have further reduced the supply of "marriageable" men. Moreover the smaller gender wage differential among African Americans has meant fewer gains from the job specialization that may occur with marriage. Thus in the case of Haiti and Jamaica (and to a lesser extent the Dominican Republic), women's increased educational and economic opportunities coupled with men's declining status in the labor market may also help to explain household dynamics.

243. In many countries worldwide, attitudes towards marriage, separation and divorce, cohabitation, sexual relations outside marriage and multiple partnering have also played a key role in household formation and relations. In the case of the Caribbean, historical events – and specifically slavery – fundamentally affected family formation (Patterson 1975, cited in Williams 2002). Plantation owners actively discouraged slaves from asserting their role as fathers and partners (*ibid.*). For more on the subject and a historical perspective of Caribbean family structure and formation see Clarke (1957). As for the Dominican Republic, it is likely that the Catholic Church has played an important role in dictating household formation patterns but that like other LAC countries, the norms have broken down somewhat as a result of increased female education and labor force attachment.

⁸⁶ Other factors contributing to marriage include economies of scale in housing and commodities and non-economic considerations such as love and companionship.

6. POLICY DIRECTIONS

244. Over the long term, gender work in the three countries examined should continue to address socialization processes and norms that cause men and women to assume negative roles and establish asymmetrical relations. These socialization processes are linked to violent behavior among men, shortened life spans of men, the spread of HIV/AIDS, teenage pregnancy, multiple partnering and absent fathers, unstable family environments, school drop-out and repetition (particularly among boys), the unequal burden of parenting and childcare on women (which has implications for their labor force participation and earnings), and the intergenerational transfer of poverty and violence. Socialization processes take place in the public and private sphere and are influenced by, among other factors, the education system, the media, family structures and role models/peer groups. Policy and program interventions should thus focus on these domains.

245. As many Caribbean groups and development practitioners have detected through experience, gender cannot continue to focus solely on women if gender barriers are to break down. Both men and women are socialized and behave according to gender norms and expectations, which leads to problems for both groups. While women's issues are well-known and documented, men's issues related to masculinity, including violence, alcoholism and substance abuse, risky behavior, the effects of unemployment and aging and active fathering, are relatively under-researched and extremely important in the Caribbean subregion. Experiences in LAC as well as in more industrialized nations such as the United Kingdom and the United States suggest that parallel efforts need to be made to reach men if real change is to take hold.

246. As for specific policy areas, the report recommends focusing on the following issues:

- **Reproductive and sexual health**, which would include: (a) broadening the coverage of services beyond women in union to include youth (male and female), and men in all three countries; (b) increasing the coverage of services in Haiti, and in rural areas in particular, with creative means such as the use of traditional healers to meet the unmet need for contraceptives and reduce maternal mortality; and (c) broadening the scope of services to encompass sexual as well as reproductive health in all three countries.
- **Violence reduction** – both male on male violence and domestic violence – with a focus on prevention, which would involve the use of the education system, community-based interventions, and media/communications tools. Programs to integrate, inform and educate the police, judges, potential victims and offenders on domestic violence laws have been successfully introduced and could therefore be scaled up in Jamaica and the Dominican Republic and replicated in the case of Haiti.
- **Legal reforms**, in Haiti in particular, are justified given the antiquated nature of the laws, which blatantly discriminate against women. In the Dominican Republic, examining the labor and family codes to see how these inadvertently or

otherwise discriminate against women and men is a priority, as well as examining if amendments to the Agrarian Reform Act have had their intended effects. Another priority is to look at the issue of childcare and flexible work policies in the context of labor laws.

- **Early childhood development and targeting youth at-risk**, in all countries but with a focus on Jamaica and the Dominican Republic: youth at-risk programs would be aimed at reducing school drop-out (particularly among boys), addressing youth unemployment, reducing teenage pregnancy and the intergenerational effects of poverty and youth at-risk, reducing gang-related activity and substance abuse, promoting responsible parenting (and in particular the role of fathers in childrearing and childcare), and addressing inequalities in gender roles and relations. The school system, media, community-based groups and local governments could be used to deliver these programs. Also, the private sector could be used creatively to finance such interventions. Lastly, investments in early childhood development would go a long way to both increasing the cognitive and academic skills of kids (thereby reducing their chances of being at-risk later in life) as well as freeing the time of parents (mothers) to engage in economic activities.

247. Haiti's staggering poverty and social conditions, political instability and weak government institutions put the country in a category of its own within the region. Policies here need to be part of larger effort focused on alleviating poverty, improving governance, increasing the effectiveness of public sector institutions and government spending, consolidating political stability, and strengthening macroeconomic stability. In terms of gender, the report makes two additional recommendations: (a) ensuring that economic opportunities reach both women and men (including income, employment and small enterprise generation programs), and (b) investing in on-farm and off-farm activities in rural areas as well as increasing access to domestic energy, given the important implications of the latter on rural women's time and productivity. The extremely limited capacity of the state suggests that investments need to be directed through civil society organizations, at least in the short-term.

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