

KEY GOAL 2: SOCIAL INTEGRATION

A society rich in social capital, enabling communication, participation and trust, valuing diversity and respecting the rights of individuals, groups and organisations.

Social integration is *“the capacity of people to live together with full respect for the dignity of each individual, the common good, pluralism and diversity, non-violence and solidarity, as well as their ability to participate in social, cultural, economic and political life...”*

Programme of Action of the World Summit for Social Development 1995

OVERVIEW

Forty-four years on from Independence the promise of the national motto “Out of many, one people” has not been fulfilled for thousands of Jamaicans. There remain great inequalities between the least advantaged groups and communities and the rest of society. The perception that there is one system for the rich and another for the poor (and, we could add, one for the black and another for the brown) is a lived reality for a majority of Jamaicans (Board of Supervision Survey 2005).

A work in progress

The 2003 Annual Progress Report noted that “social integration as a concept and practice is not fully addressed for Jamaica.” While there has been some positive change in this area, for example in the policy framework for children’s rights and decreasing the stigma against people living with HIV, there remains much to be done. Reducing social and income inequality and breaking down the barriers that marginalise groups of people and prevent them from accessing services or employment is a must for the country if we are to eliminate poverty and have a more just, equitable and secure society. Increasing respect for others and for their rights in the face of differences and diversity is also fundamental if we are to build a nation in which all people can play a positive role.

A society for all

Jamaica’s vision for 2015 is predicated on social integration (Box 2.1). Social integration is an important objective in its own right, but it also underpins and is supported by the nation’s other social policy goals, including governance, education and skills, health and wellbeing, and human security. It is against this background that the review process has led to a revised goal statement that more explicitly reflects the importance of social capital and emphasises the role of participation in formal processes, institutions, groups and social networks as enabling factors in overcoming disadvantage and exclusion.

Box 2.1

A Vision for Jamaica in 2015

A prosperous and dynamic Jamaica which upholds the fulfilment of human rights, dignity for all persons and builds continual social progress, based on shared values and principles of partnership. Minds are transformed and extraordinary results are produced in this the most caring and secure country in the Americas, where individuals fulfil their potential, are in control of their destiny, take responsibility for their lives and work always for the larger good.

The Programme of Action of the World Summit for Social Development says the “aim of social integration is to create ‘a society for all’, in which every individual, each with rights and responsibilities, has an active role to play” (United Nations 1995). The society in which the 2015 Vision will be a reality is one in which all Jamaicans, regardless of age, sex, socio-economic status, or race enjoy full and equal benefits of citizenship, including access to services and the legal system, and equal opportunity to participate in national life and institutions.

Dimensions of social exclusion

There are several dimensions to social exclusion. These include:

- lack of access to labour markets;
- lack of access to services such as health and education; and
- lack of political and civil rights.

There is usually some level of participation in society by socially excluded groups, but it is on an unequal basis when compared to access by the more privileged groups (DFID 2005).

Renegotiating power

To reduce social exclusion, barriers to access need to be removed and the power relations between groups in society and between the State and citizens renegotiated in order to improve communication and trust. Reducing social exclusion is critical to the success of poverty reduction strategies. Structural and institutional biases that perpetuate exclusion can prevent poverty reduction programmes from reaching those who need them most or impede their participation in designing strategies to meet their needs.

Overcoming lack of access and limits to civic participation requires protection of the vulnerable, transforming the structures and institutions that prevent people from playing a full and active role in society. This task is made more difficult by resource constraints that require making hard choices. There has, for example, been little increase in levels of social spending because of the need to facilitate repayment of the public debt (Witter 2006:4).

Box 2.2

Vulnerable groups

The groups that are at risk of social exclusion in Jamaican society include:

- Children at risk, including children separated from their families or in alternative care
- Youth
- Elderly
- People with disabilities, including mental health problems
- Rural poor
- Urban poor
- Homeless persons
- People Living with HIV
- Prisoners and ex-prisoners
- Sex workers
- Refugees
- Deportees
- Migrants/ ethnic minorities
- Substance users
- Men who have sex with men/Women who have sex with women

Within each of these groups, there are particular concerns that relate to women, as gender inequality often exacerbates the impacts of vulnerability or social exclusion.

Measuring progress towards social integration

Measuring progress towards social integration is a complex task because of the challenge of dealing mainly with qualitative information, much of which is still largely anecdotal. And although the Goal Team has identified five overarching areas in which progress is needed, developing measurable targets and indicators has proven more challenging. While some issues can be measured quantitatively, others lend themselves to more qualitative tracking. In many instances the measurements are indirect and proxy indicators or case studies are used.

Sub-goals

In reviewing progress towards social integration, members of the Goal Team felt the sub-goals identified at the start of the JASPEV process were too narrow and closer examination of the concepts underpinning the original sub-goals would better support ongoing assessment. The following four sub-goals are now being used to benchmark social integration:

1. **Respect for the rights of others:** The inherent dignity of each human being is valued and each person upholds the dignity of others.
2. **Affirmation of Diversity:** The differences between individuals, groups and organisations that enrich the human experience are valued and respected to ensure the rights of others.
3. **Participation:** All citizens have full access to knowledge of their rights and of mechanisms and channels for influencing policy and decision-making processes that affect their lives. They are empowered to exercise these rights without being intimidated.
4. **Building Social capital:** Nurturing norms and attitudes of mutual dependence and friendliness that dispose to acts of confidence and kindness as well as networks and organisations that facilitate joint decisions, communication, co-ordination, co-operation in acts of solidarity and cohesion.

Communication, defined as the meaningful exchange of views and opinions, reflecting the interests of all parties, is critical for social integration and is a cross-cutting issue through this report, although its role is particularly highlighted in this chapter. The communication process takes place at different levels (micro, meso, macro) and between different actors, and provides the mechanisms for connecting people to social, political, cultural, political and economic processes.

Sub-Goal 1 Respect for the Rights of Others

Key issues, targets, indicators and case studies

Key issues		Targets	Indicators (Qualitative and Quantitative)	Case studies
1. BUILDING A CULTURE OF HUMAN RIGHTS		<p>A population educated and knowledgeable about their rights and responsibilities</p> <p>Human rights-based legislation and policy framework adopted</p>	<ul style="list-style-type: none"> • Human rights legislation • % of children registered at birth 	<p>Good Practice: Integrating human rights education in primary schools</p>
2. BREAKING THE CYCLE OF EXCLUSION AND REDUCING VULNERABILITY	2.1 Children	<p>Better care and protection for the vulnerable</p> <p>User-friendly, quality services accessible to all</p>	<ul style="list-style-type: none"> • Child poverty rate • Budget expenditure on children • N° of children in care • Unattached Youth 	<p>Good Practice: Participatory Budgeting for Children</p> <p>Good Practice: The Possibility Programme</p>
	2.2 The Homeless		<ul style="list-style-type: none"> • N° of persons living on the street • % of persons living on the street who are mentally ill • Services for the Homeless 	<p>Good Practice: CUMI - Helping the distressed on the street</p>
	2.3 People with disabilities		<ul style="list-style-type: none"> • Challenges of discrimination for people with physical, sensory & intellectual disabilities 	
	2.4 People Living with HIV		<ul style="list-style-type: none"> • Attitudes towards People Living with HIV 	<p>Note: HIV in the workplace Policies</p>
	2.5 Deportees		<ul style="list-style-type: none"> • N° of deportees & reasons for deportation 	
3. QUALITY SOCIAL SERVICES		<p>Institutionalisation of fair and equal service delivery for all members of the public</p> <p>Public services are user-friendly for people with varying disabilities and for the socially marginalised.</p>	<ul style="list-style-type: none"> • Government ministries and agencies with Citizens Charters • Performance of Public Services • PATH Beneficiary Distribution 	<p>Good Practice: Increasing Access for the disadvantaged at NHT</p>

Unpacking the concept of 'Rights'

In many instances when Jamaicans make the popular demand for "justice" they are in fact seeking recognition of their rights. Respecting the rights of others is based on recognising the inherent dignity of each human being, and accepting that we each have a responsibility to others. The State has the added responsibility of upholding rights, including the right to equal access to public services in one's own country, the right to good education and protection against severe poverty and starvation.

Human rights in the Jamaican context

Human rights refer to the basic rights accorded to all people, guaranteed by the state, including the liberty to participate in politics, freedom of belief, religion, movement and equity before the law. 'Human rights' is a very relevant concept for Jamaica, even though we are not faced with such things as gross violations of freedom of speech and association or ethnic genocide. Human rights are sometimes denigrated as a minority concern and cast as something to be guarded against. But the reality is human rights are something we need to protect and uphold. In fact, the struggle for justice, respect for all, and human dignity is fundamental to our national history. Concerns in the Jamaican context range from such civil rights violations as prolonged detention and ill-treatment in detention, to failure to uphold social rights, like the right of children to a name or of HIV affected persons to employment. The challenges for Jamaica are to identify the various policies, institutions and social systems that reinforce and perpetuate the divisions in society and to come up with deliberate strategies to overcome them.

The responsibilities of persons with rights

But in upholding fundamental human rights and freedoms, it is also important to promote responsibility and accountability. Citizens have a responsibility to pay taxes and obey laws, for example. They also have a responsibility to monitor government processes and hold their political leaders and government agencies to account, as well as to participate in civic groups and perform public services, such as jury duty.

Barriers to respecting the rights of others

The recognition of rights in law is no guarantee that they will be respected or upheld, even when a person is aware of these rights and able to demand they be upheld. Some of the barriers to respecting the rights of others include:

- Entrenched power, including political and economic power that is concentrated in the hands of a few;
- Cultural attitudes, including an understanding of power that supports paternalistic and authoritarian approaches to governance which depend on the dis-empowerment of large segments of society;
- Making discrimination an accepted pattern of behaviour (normalisation), including the accepted absence of institutional support for rights and lack of formal mechanisms for redress;
- Lack of awareness of rights among the general population and a consequent failure to claim or protect one's rights; and
- Absence of protective legislation and presence of laws that criminalize private sexual behaviours between consenting adults.

BUILDING A CULTURE OF HUMAN RIGHTS

Key strategies:

- Introduction of a Jamaican Declaration of Rights and anti-discrimination legislation to protect those rights, particularly of vulnerable groups and those deemed least deserving of rights, and removal of barriers to employment and services.
- Human rights education at all levels to make citizens aware of their rights and responsibilities and increase their willingness and demand to participate in all aspects of national life.
- Upholding each citizen's right to an identity, to ensure that s/he is recognised by the State and able to access all the benefits of citizenship.

Human rights based policy framework and legislation

The Office of the Public Defender is slated to lead a process to develop anti-discrimination legislation, which will include gender, age and place of residence and anything that may put individuals at an unfair disadvantage (Jamaica Office of the Cabinet 2006: 29). This legislation will address, for example, the concern about the government policy that discriminates against ex-prisoners by prohibiting them from holding jobs in the public service, even when the job is not of a security-sensitive nature.

A National Disabilities Bill was scheduled to be presented to Parliament in FY 2006-7 (Office of the Cabinet 2006: 26) but has not yet taken place.

A Charter of Rights and Freedoms has been under deliberation since 1999. The Charter would amend the Constitution to protect the rights and freedoms of citizens, including life, liberty and the security of the person; freedom of thought, conscience, belief and observance of religious and political doctrines; peaceful assembly; freedom of movement; and freedom of expression, among others. The deliberations by the Joint Select Committee in Parliament have been stymied over disagreement about wording of the right to privacy of the individual clause that an evangelical law group has suggested could potentially allow homosexuality (The Gleaner 2006).

Human rights education

The Ministry of Education and Youth and the Independent Jamaica Council for Human Rights (IJCHR) have developed training manuals for teachers in an initiative to integrate human rights education at the primary level (Box 2.3).

The Justice Training Institute, under the Ministry of Justice has incorporated a 45hr 3 credit course in Human Rights as part of its Certificates in Criminal Justice Studies and Legal Administration. Thirty six persons were enrolled in these courses in 2006-7.

The Office of the Public Defender will also develop a public education campaign on anti-discrimination (Jamaica Office of the Cabinet 2006: 29).

Box 2.3



Good Practice

Integrating human rights education in primary schools

The Ministry of Education and Youth (MOEY) and the Independent Jamaica Council for Human Rights (IJCHR) have worked together to develop Human Rights Resource Manuals for primary school teachers. The manuals, one for grades 1 to 3 and another for grades 4 to 6, show teachers how to integrate human rights concepts into the various subjects and units of the revised primary school curriculum. IJCHR is

now conducting one-day training-of-trainers workshops with 25 primary school teachers in each parish to introduce them to human rights concepts and the teaching material. 13 parishes have already been covered. However funding for the manuals has been exhausted; so not all schools are yet supplied.

To take this initiative further, the MOEY has asked IJCHR to consider how human rights concepts could be introduced at the early childhood level in basic schools.

Registration of Births

The registration of a child's birth is considered one indicator of the fulfilment of her/his 'first right' – the right to an identity. It is with this act that children are formally recognised by the State and given status under law. A birth certificate is the passport to a country's privileges and services (Dow 1998). Children who are not registered are at risk of not being able to access all the rights, privileges and services to which they are entitled.

Many children remain unregistered, in part, due to the practice by hospitals of withholding birth registration forms in lieu of payment of hospital fees. Although the law prohibits this practice, it persists as cash-strapped hospitals attempt to recover costs.

(See Education and Skills Goal p. ____ for a discussion on how naming and registering children at birth is important in the educational system.)

Tracking Indicator

% of children registered at birth

According to the Registrar General's Department, approximately 30% of children born in public hospitals and clinics are not named at birth (<http://www.rgd.gov.jm/name-your-child> - retrieved 22 Jan 2007). As part of the government's response to this problem, the Registrar-General's Department began offering, as of 1 January 2007, one free birth certificate to all children who are registered and named at birth. Registration is now also available at hospitals and online¹.

Policy Issues

Follow-through on legislative processes. It is important that the proposed and pending laws to protect human rights go through the legislative process in a timely manner. This includes ensuring that corresponding Regulations are developed for Acts so that they can be implemented. Legislation also needs to protect citizens from violations perpetrated by fellow citizens as much as by the state.

Human rights education in secondary schools. The Ministry of Education and Youth and the Independent Jamaican Council for Human Rights initiative needs to be expanded to the secondary level and human rights education should become part of the curriculum at all levels.

¹ *An egregious error has been made in the recent handbook for medical personnel put out by the Registrar General on "Registration of Foetal Deaths and Deaths", which refers to "illegitimate" and "legitimate" children, a discrimination reversed and outlawed under the Status of Children Act of the 70s. This needs to be immediately rectified.*

2. BREAKING THE CYCLE OF EXCLUSION

Key strategies:

Children and youth at risk

- Adequate social spending on children as an investment in equalising opportunity and reducing the need for other more expensive social interventions in later years
- Increase the proportion of children who are receiving family care rather than alternative care and support parents and children at home as an alternative to institutionalised care.
- Island-wide interventions for at-risk and unattached youth to prevent them from falling through the cracks.

The homeless

- Increase the range of shelter options for the homeless, including for people with mental illness.
- Address the needs of homeless children as a separate target group.

- Enabling the disabled
- Eliminate systemic barriers faced by people with disabilities to expand and improve access to education, employment, and services.
- Collect more and better data on challenges faced by people with disabilities to inform programme development

People living with HIV

- Increase communication strategies used for getting HIV messages across to people in rural areas and member of the disabled community.
- Introduce policies to guarantee the rights of people living with HIV in the work place
- Enact proactive legislative and policy protection to secure their rights.

Deportees

- Increase services to deportees to facilitate their (re)integration into Jamaican society.

Children and youth at risk

There have been a number of recent, important developments in the policy framework for protecting and upholding children's rights. These include the following:

- Completion of New Standards for Quality Care in Children's Homes and Places of Safety in 2002;
- Establishment of the Child Development Agency as an executive agency of the Ministry of Health in 2003;
- Passage of the Child Care and Child Protection Act in 2004; and
- Establishment of the Office of Children's Advocate in 2005.
- Encouraging better parenting practices and preparation in process towards a National Parenting Policy

- Ratified in 2007 General Comment 7 in the Convention on the Rights of the Child protecting the rights of children 0 – 8 years old and recognising them as specially important, since it is in this age group that the foundations of their physical, psychic, emotional and social being are laid. Jamaica became the first country in the world to do so.

Notwithstanding these positive policy advances, we continue to have conditions that intensify the vulnerability of children and contribute to their exclusion. These include exposure to violence, abuse and exploitation as well as inadequate access to quality essential services, information and goods (UNICEF 2006).

Societal Commitment to Addressing Child Poverty

Approximately one-fifth of Jamaica children live in poverty and more children live in poverty in rural areas than in the Kingston Metropolitan Area (KMA) and other towns (Witter 2006). Children are at greater risk from poverty than the general population. The 2003 child poverty rate of 22.1% was higher than the national rate of 19.1% (PIOJ 2003). The data in Table 2.1 point to a slight dip in child poverty in 2003 but show an overall upward trend over the 1999 baseline.

Despite the child poverty rate being above that of the general population, real government expenditure on children has steadily decreased between 2003 and 2006 (Table 2.2). According to a study prepared for the Government of Jamaica and UNICEF, government expenditure on children for the period 2003/4 to 2005/6² accounted for:

- 10 to 11% of total expenditure,
- 16 to 17% of recurrent expenditure,
- 1% of capital expenditure, and
- 6 to 7% as a proportion of GDP (Witter 2006).

Tracking Indicator


Child poverty

Table 2.1 Poverty rate among children

	1999 %	2000 %	2001 %	2002 %	2003 %
KMA	13.4	12.3	9.8	12.7	10.9
Other Towns	16.5	23.8	18.6	22.8	18.9
Rural	26.0	29.0	29.1	28.8	27.3
Jamaica	20.7	23.1	21.5	23.4	22.1

Source: JamStats, citing Jamaica Survey of Living Conditions, 2004

² The study used data on actual expenditure for 2003/4 and proposed expenditure for 2005/6.

 **Tracking Indicator**

Expenditure on children

Table 2.2 Real budget expenditure on children '000 J\$ (constant value in 1996 \$dollars)³

Fiscal Year	2003/04 (actual)	2004/05 (revised)	2005/06 (approved)
Budget Expenditure on Children	14,380,558.07	13,301,991.43	12,019,067.07

Source: Witter 2006, based on Estimates of Expenditure, as presented to House of Representatives, 31 Mar 2005

Box 2.4



GOOD PRACTICE IN THE MAKING

Participatory Budgeting for Children: Invest in Our Children, Build Our Nation

The Social Investment for Children Initiative was formally launched in March 2006 to build national capacity to ensure that social investment is consistent with agreed national priorities for children. It brings together a multi-sectoral coalition of organisations that have been working together since 2004 to advocate for increased budgetary allocations to children and address a range of related issues. These include:

- * ongoing analysis of the annual fiscal budget
- * adjustment of the budget process to facilitate increased stakeholder participation in national budgeting
- * sensitisation and capacity building among key stakeholders in order to facilitate participatory budgeting
- * participation of children as self-advocates in improving budgetary outcomes for children
- * partnership with civil society & the private sector in improving social investment outcomes for children.

The Initiative is supported by: Cabinet Office; Child Development Agency; Jamaica Coalition on the Rights of the Child; Ministry of Education and Youth; National Centre for Youth Development; Office of the Children's Advocate; Planning Institute of Jamaica; United Nations Children Fund; United Nations Development Programme; University of the West Indies.

Source: Jamaica Coalition on the Rights of the Child. n.d. Advocacy and Communication Plan. *In lit* and UNICEF-Jamaica web site. **Social Investment for Children Initiative Launched in Jamaica.** Retrieved on 26 September 2006 from http://www.unicef.org/jamaica/promoting_child_rights_4085.htm

Children in care

According to the Child Development Agency (CDA), there were 2,673 boys and 2,583 girls in care at the end of 2005 (Table 2.4). The 2005 total of 5,256 children in care represents a slight decrease over the 2004 figure of 5,298 children.

CDA initiatives aimed at keeping children with their families have led to an increase in the number and proportion of children under

Box 2.5 Exclusion and children in care

Children living in residential institutions are at particular risk of exclusion. They are deprived of parental nurturing and can be more vulnerable to abuse. While institutional care can sometimes ameliorate a child's welfare, in most cases services in such settings are not adequately tailored to meet individual needs.

Many of the 'problems' that prompt families to have children institutionalised are considered normal developmental problems by the professionals who interact with the children.

Source: Child Development Agency.

³ The national budget does not disaggregate expenditure by social groups; these figures were extracted from the Estimates of Expenditure by Dr. M. Witter of the University of the West Indies as part of a UNICEF study on expenditure on children (Witter 2006). At the time that they were compiled, the actual expenditures for 2004/05 and 2004/06 were not available.

Social Integration

supervision orders between 2004 and 2005. A home supervision order allows the child to go home under the supervision of a probation officer. In 2004 there were 707 or 13.35% of children in care under supervision orders while in 2005, that number increased to 865 or 16.4%.

Between 2004 and 2005, there was an overall decrease in the number of children in the Home on Trial/Family Reintegration programme. 720 or 13.6% of children in the system participated in this programme in 2004, compared to 672 or 12.8% in 2005. The CDA attributes this reduction to children maturing out of the programme, breakdown in placements, socio-economic constraints affecting parents' ability to care for their children and permanent placement with families.

Part of the long-term vision of the Child Development Agency is to increase services provided to children in the community and increase resource transfers through initiatives such as the Programme for Advancement through Health and Education (PATH). Table 2.3 points to an enhanced level of family-based placement over institutionalization of children in need of care.

Tracking Indicator Children in Care

Table 2.3 N° of Children in Care and Types of Care in 2005

Region	Children's Home		Foster Care		Supervision Order		Home On Trial/ Family Reintegration		Places of Safety		Other		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
South East	594	285	110	161	128	304	154	161	120	185	25	42	1,131	1,138
North East	133	75	95	105	38	60	67	68	59	50	8	21	400	379
Southern	182	108	81	95	68	90	8	13	28	54	15	13	382	373
Western	312	235	207	220	81	96	101	100	49	31	10	11	760	693
Total	1,221	581	493	581	315	550	330	342	256	320	58	87	2,673	2,583
Grand Total	1,924 37%		1,074 20%		865 16%		672 13%		576 11%		145 3%		5,256 100%	
			2611 49% living in family setting											

Source: Child Development Agency, 2005.

Unattached Youth

One category of under-served young people in need of targeted services is 'unattached youth.' This group of 15 to 24 year olds not in formal education, training or employment, is considered chronically unemployed, receives little or no financial support from their families, lives below the poverty line and often has limited social networks and opportunities. Between 1998 and 2001, an estimated 24-34% of all young people were considered unattached, with just over half of them living in rural areas (Fox, n.d).

A gap that needs to be addressed is minors in custody in the prison system. While this includes minors who have been or will be charged, it also includes minors (especially girls) who are witnesses or complainants who need police protection. More input is needed to bridge the gap

between juveniles in the Justice System and those in care, which is largely due to a lack of spaces in the juvenile remand centre (See also p. ___ in Governance Goal Chapter.)

Community violence, domestic abuse and abuse of children needs to be noted in terms of its effects on victims as well as the communities at large. There are gaps in outreach for indirect victims of violence, e.g. young family members, with the result that some end up needing state care. Inadequate resources for care and treatment compounds the impact on the life chances of victims.

There is a need for education and skills training programmes that target this population and those initiatives that do exist, such as the Possibility Programme, need to be scaled up (Box 2.6)

Box 2.6



Good Practice **The Possibility Programme**

Since 2001, the Possibility Programme has been offering 'street boys' in the Kingston Metropolitan Area an opportunity to improve their life chances. This initiative of the Office of the Prime Minister provides a range of services to the boys to improve their educational level, give them marketable skills and help them find apprenticeships and jobs. **Recently training in micro-business development has been added.** The programme also tries, where possible, to reintegrate the boys with their families and schools.

Though modest in scope, the programme is making a difference in the lives of the boys who become involved. By the end of March 2006, a total of 337 young men had taken part in the programme since its inception five years ago. In 2006, six graduates of the Programme's Skills/Employment Centre went on to undertake further studies in Computer Repair, Food Preparation and Building and Construction at HEART TRUST/NTA.

A hostel for 32 boys between the ages of 10-19 years, who are registered in the Possibility Programme, was built by the Rotary Club of St. Andrew during the 2006/2007 financial year. It will be staffed and managed by the Office of the Prime Minister, but is not yet operational. The hostel will see to the boys' physical needs as well as their spiritual and emotional development.

Source: Programme Coordinating and Monitoring Unit (PCMU), Office of the Prime Minister

Policy Issues

- Support for children in their homes. There is a need for research to better understand the factors that are affecting parents' ability to cope. Although poverty, social exclusion and becoming parents at a young age have been identified as contributing factors, these are not new phenomena and the relationship between these and the ability to cope with the demands of parenting is not fully understood.
- Most government spending on children has been in the areas of health and education, but more money is needed for child protection and family services. The CDA, for example, is unable to provide important prophylactic services because of budgetary constraints. Eighty-five (85) per cent of its budget currently goes towards institutional care, leaving primary prevention alternatives, such as public education and community outreach initiatives that focus on encouraging healthier families through better parenting, severely under-funded.

- Programmes for at-risk youth. There is an island-wide need for more programmes for at-risk youth as well as for initiatives that target adolescents who are outside the formal school system. This includes providing more public funds to NGOs such as Children First who have a track record of success in reaching at-risk youth.⁴

The Homeless

Estimates of the number of people living on the street have ranged from 402 in a 2001 survey to 835 in a survey done in 2005 (Table 2.4). Data collection is not systematic, however, despite the fact that it is a point of entry for programming to address one of our most marginalised populations.

The highest concentrations of homeless people are in Clarendon, Kingston and St. Andrew, and St. James, followed by Hanover (Table 2.5). The breakdown of the extended family as a support network has contributed to homelessness in Jamaica. Where families may once have stepped in to care for aged or infirm relatives there is now less willingness or capacity to do so. Many other factors contribute to this problem. For example, the Board of Supervision Task Force on Homelessness has identified the socio-economic problems of Hurricane Gilbert in 1988 as one cause of homelessness. Fifteen years on some of the people displaced by the hurricane continue to be affected.

Box 2.7 Homelessness

Homelessness occurs when someone has no fixed, regular and adequate night-time domicile. Some of the factors that can contribute to homelessness include the following:

- mental illness
- physical disability
- deportation
- discharge from prison
- absolute poverty
- HIV status
- age (elderly)
- substance abuse
- natural and social upheavals
- lack of access to stable tenure

Source: Board of Supervision, 2006

Tracking Indicator

Persons Living on the Street

Table 2.4 N° of Persons living on the Street

	2001	2005	Comments
No. of persons living on the street	402 <i>(Census STATIN)</i>	835 <i>(Board of Supervision Survey)</i>	2001 census counted persons on the street on Sept 10, 2001 from 5am-7am. 2004 survey counted adults only on the street on Mar 31, 2005.

Services

There are inadequate services and programmes for the homeless and those social security programmes that are in place are not reaching the entire homeless population. Only seven parishes – Kingston and St. Andrew, Clarendon, Manchester, St. Elizabeth, Westmoreland, St. James and Portland – have programmes to care for the homeless. And of these, there are night shelters in operation in Kingston/St. Andrew and St James only. Poor Relief statistics for 2005 indicate that 280 people (184 men and 86 women) received a bi-monthly allowance of \$800 to assist with the cost of medication and incidentals. A total of 255 males were not receiving assistance through any programme, while the figure for females was 74 not receiving assistance (Table 2.5)

⁴ See Chapter 3, Education and Skills, p. ___

Tracking Indicator

Services for the homelessness

Table 2.5 Street population and no. accessing services in 2005

	Street People Adult Popn.	No. on Poor Relief Roll	No. receiving Shelter Care and/or Other Care	No. not participating in any Homeless Programme	% not participating in any Homeless Programme
Clarendon	206	103	31	64	31%
Kingston/St. Andrew	153	50	103	0	0%
St. James	117	13	23	81	69%
Hanover	95	8	8	60	63%
Westmoreland	57	1	10	46	81%
St. Ann	57	57	0	0	0%
Trelawny	42	3	11	28	67%
St. Catherine	40	2	4	34	85%
Portland	20	9	20	0	0%
St. Elizabeth	16	16	0	0	0%
St. Mary	13	13	0	8	62%
St. Thomas	10	4	0	0	0%
Manchester	9	1	0	8	89%
	835 M: 70% F: 30%	280 M:66% F: 34%	210 M:72% F: 28%	329 M: 78% F: 22%	39%

Source: Draft Five Year Strategic Plan, Board of Supervision Sub-Committee Task Force on Homelessness, 2006

Children

No data on homelessness among children are collected systematically. A National Survey of Street and Working Children, prepared for the Child Services Unit, Ministry of Health, in 2002 indicated there were between 2,818 and 6,448 street and working children in selected high-concentration areas across the island. Boys outnumbered girls by a proportion of 7:3. The survey, however, does not make a distinction between children **of** the street, that is, those who live and work on the streets, and children **on** the street, that is, those who work on the street and then go home to sleep. This makes it difficult to have a true picture of the level of homelessness among children. Informal estimates suggest that there may be in excess of 6000 children who are homeless. The Possibility Programme is one government-funded initiative that is attempting to address this problem.

Mental illness

The South East Regional Health Authority outreach surveys indicate that a majority of adults living on the streets in the KMA are mentally ill. The surveys suggest that this phenomenon is increasing (Table 2.6). Like many other countries, Jamaica has adopted a community care approach to treating mental illness, but the programmes and personnel of the Community Mental Health Services are insufficient and inadequate to treat patients and support rehabilitation (Box 2.8).

Tracking Indicator

Mental illness among the homeless

Table 2.6 Mental illness among the homeless in the KMA

	2003/4	2006	Comments
% of people living on the street in the Corporate Area who are mentally ill	58% (2 SERHA point-in-time surveys between Nov 03-Feb 04)	70% (SERHA point-in-time survey)	In the 2006 survey, 47% were found to be schizophrenic, 10% suffered from ganja related psychosis, 9% from psychotic disorder, and 3% from major depression.

Source: Draft Five Year Strategic Plan, Board of Supervision Sub-Committee Task Force on Homelessness, 2006.

Box 2.8



GOOD PRACTICE Helping the Distressed on the Street to find Support, Acceptance and Normality

CUMI, the Committee for the Upliftment of the Mentally Ill, started off in 1990 as a Montego Bay lobby group concerned for the welfare of the homeless and other mentally ill persons or those considered not “righted” in the head. In 1991 it opened a day centre. Two years later it had persuaded the authorities to station a psychiatrist, Dr Wendell Abel, full time at Cornwall Regional Hospital and began the work of stabilizing those diagnosed there. CUMI’s work is a testament to the fact that very little was being done to address the care and other support needs of mentally ill persons outside Kingston. They have been instrumental in helping to establish centres in other parishes. They have also helped to establish and work closely with a network of nurses, doctors and clinical staff on the one hand, along with the police, church and other community groups to meet the needs of mentally ill persons who do not have family support. CUMI today has a record of having transformed hundreds of vulnerable excluded vagrants into functioning members of society. Founder of CUMI, business woman Mrs. Elizabeth ‘Liz’ Hall, recently deceased, has left a wonderful legacy.

The CUMI model is simple. Mentally ill street people are invited to come to the day shelter for a place to shower, a change of clothes, a meal and a talk with the volunteer psychiatrist who visits weekly. Between 25 and 35 clients come each day. Their days follow a routine of devotions, community tasks such as caring for the garden, meals and group activities – craft making, dominoes, dancing, reading aloud, and so on – as well as taking their medication from Nurse Administrator Joy Crooks. Slowly, contented individual personalities emerge from stony-faced mumbling or threats, masking severe depression or schizophrenia, to chat and make jokes. CUMI has persuaded many families to take back in their rehabilitated members. It has added a programme of getting the neglected children of the mentally ill into foster homes and school.

1999 brought crisis to Montego Bay street people, CUMI and decent citizens all over Jamaica. Anxious about the physical presence of street persons in the tourism capital, certain persons took it on themselves to corral, pepper spray, tie up, and load onto a truck 32 street people who they dumped two hours journey away near a toxic-waste, bauxite-mud lake in St. Elizabeth. CUMI along with Jamaicans for Justice demanded and finally got a Commission of Enquiry into this scandalous deed. No naming of the culprits came out of this, but there was compensation for 30 victims (most of whom found their way back to the city) as well as Parish Council funding for a feeding centre and a night shelter for all street people – these are CUMI monitored to ensure adequate standards.

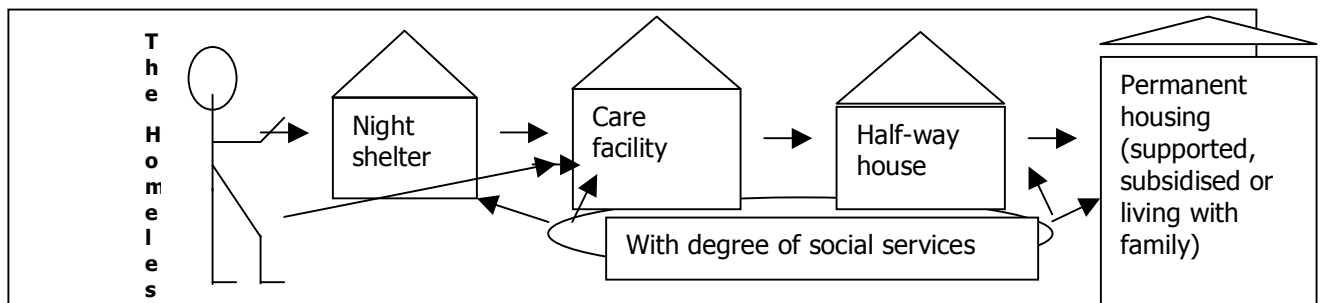
CUMI lost a lot of its financial support from the private sector after its public protest around the 1999 street people scandal, but used this very difficult period to build up alternative means of community support through ordinary citizens. The Jamaica Money Market Brokers (JMMB) and the Mennonite Central Committee have provided CUMI with continuous financial support from its inception. CUMI has raised awareness while working to restore dignity to some of our most socially disadvantaged citizens.

National Policy on Care for the Homeless

The Task Force on Homelessness set up in 2004 under the initiative of former Prime Minister Portia Simpson-Miller, then Minister of Local Government, Community Development and Sport, has developed a draft plan for a national policy and a nationally co-ordinated programme of care.

Its first priority is the provision of shelter for all street people within five years. Figure 2.1 from this plan shows the types of facilities required, from temporary and transitional shelter to more permanent accommodation. Temporary shelter is sometimes needed by poor people requiring convalescent care after hospitalisation and who may neither have the means nor the family support to provide the required at-home care. This situation, when unresolved, can lead to homelessness.

Fig 2.1: TYPES OF SHELTER FACILITIES WITH ACCOMPANYING SOCIAL SERVICES



Source: Draft Five Year Strategic Plan, Board of Supervision Sub-Committee Task Force on Homelessness, 2006.

Policy Issues

- Policy framework. The draft plan for a national policy and a nationally co-ordinated programme prepared by the Task Force on Homelessness needs to be finalised and implemented.

People with disabilities: systemic discrimination

The exclusion of people with disabilities is the result of policies or practices that are part of the normal operation of the education and employment systems that unintentionally, and often unconsciously, create and perpetuate disadvantage. Systemic discrimination is the result of doing business as usual. It occurs when services are not provided for people with disabilities or inappropriate services are provided, as well as when policies and legislation are not formulated, or inappropriate policies and legislation are formulated. While attitudes towards the people with disabilities are slowly changing, in large part because of advocacy, much of which is done by people with disabilities, they continue to be disadvantaged in society.

Many people with disabilities in Jamaica are excluded from a range of opportunities, including education and the workplace for reasons not necessarily related to ability or job requirements. People with disabilities have the same rights as the rest of the population, but require additional provisions to ensure their rights are upheld. The 2001 Census recorded 162,860 people with disabilities, or 6.2% of the total population of 2,607,633.

Social Integration

Some of the areas in which people with disabilities face discrimination include:

Education: There are more than 37,000 children in Jamaica with varying degrees of disability yet their inclusion in the education system has been piecemeal. Although most of these children are between 5 and 14 years old, only 10% of them are enrolled in formal school-based and other programmes that receive funding from the government (UNICEF, 2006).

Employment: Less than 1% of people with disabilities are employed, mainly in the public sector. However, the public sector has failed to meet its target of filling a minimum of 5% of government jobs with people with disabilities (Centre for International Rehabilitation 2004). PATH is looking at how to include more people with disabilities in the programme.

Accessibility: Notwithstanding progress made in this area, there is a need for greater access to physical structures, such as ramps to buildings and more buses with low steps that accommodate people with physical challenges. However access should be considered more widely than physical accommodation, but include materials and equipment.

Communication: Inadequate provisions are made for communicating with the blind, deaf and physically disabled, such as sign language services for the deaf or audio facilities for the blind. Many public service messages about such things as disaster preparedness and HIV do not reach members of the disabled community.

Part of the reason why some of these messages are not transmitted has to do with how they are conveyed, the types of media used. Perceptions of people with disabilities and assumptions about what they do or don't do sometimes make them invisible to communicators. People with disabilities, for example, are often not seen as sexual beings, like the able-bodied, and are therefore not even considered when messages about sexuality and sexually transmitted diseases are being developed. But the reality is people with disabilities have sex. And the irony is that women with disabilities are particularly vulnerable to sexual abuse and assault. While the disabled community is addressing these issues, other social development actors need to have a greater awareness of them. An important step has been taken by the government in collaboration with the United Nations Population Fund (UNFPA) in providing sexual and reproductive health information in Braille and other formats accessible to the disabled.

Policy Issues

- Data. Not enough data is collected on people with disabilities, particularly children. The census data is known to underreport the number of people with disabilities. In between censuses, the Survey of Living Conditions attempts to collect data about disabled persons but its samples are too small to do a meaningful analysis and the definition for disability is unclear. Lack of reliable data and information on the different kinds of disabilities makes it difficult to develop programmes and interventions that aim to increase inclusion and to measure the effectiveness of public policies.
- Policy compliance. The National Policy on Disabilities, which was passed in 2000, has no legal sanctions and therefore its guidelines to create equal opportunities in such areas as accessibility, public sector employment and school integration cannot be enforced. More integration is needed between key ministries – Labour, Housing, Health, Education and Transport.

- Legislation. The National Disabilities Bill, which was originally scheduled for completion during the 2003 legislative year, was then scheduled to be presented to Parliament in FY 2006-7 (Office of the Cabinet 2006: 26), is still waiting to be presented. A National Act is now being looked at.
- Social safety nets. The social safety nets that exist for people with disabilities are neither adequate nor effective. Many people with disabilities (along with elderly people) do not qualify for assistance under the government's main social assistance initiative, PATH, because the programme is household-based. If a person with a disability lives in a household that is above PATH's poverty threshold, they are not eligible for assistance, regardless of their personal circumstances. Other countries that have cash transfer programmes comparable to PATH, such as Mexico, have introduced separate targeted programmes for groups like people with disabilities and the elderly. Jamaica needs to do likewise (see p. 21 for further discussion on PATH).
- Employment opportunities. The government needs to go further in creating the conditions for increased employment for people with disabilities by ratifying the 1983 Vocational Rehabilitation and Employment (Disabled Persons) Convention and upholding the 5% public sector employment quota. The private sector can also make a significant contribution in this area by creating employment opportunities for people with disabilities.

2.4 People Living with HIV

Cultural attitudes towards the HIV are slowly changing, as evidenced by the reduction in complaints about stigmatisation in schools and clinics received by Jamaica AIDS Support for Life. One effective way of getting the message across in schools has been the use of peer educators who work with students of similar age and socio-economic background. Churches are also beginning to tackle the issue and are becoming more receptive to educational interventions. National campaigns that show healthy-looking people living with HIV are also conveying more positive messages about managing and preventing the disease.

Over three quarters of men and women say they would be willing to look after a family member with HIV, although there has been no increase in this percentage over the last few years (Table 2.7). The National Knowledge, Attitudes, Behaviour and Practices (KABP) Survey conducted in 2004 introduced new questions which suggested the majority of persons have a more enlightened attitude. However the myths around food and transmission through association or causal contact remain strong (Table 2.7).

Tracking Indicator

Attitudes to Persons with HIV

MDG Star

Table 2.7 Attitudes to Persons with HIV

Attitudes to Persons with HIV	2000		2004	
	Males	Females	Males	Females
Willing to care for a family member who is sick with AIDS	77%	80%	77%	79%
Female Teacher with AIDS virus but not sick should be allowed to continue teaching in school	-	-	60%	67%
If a member of the family became infected with the AIDS virus would not want it to remain a secret	-	-	69%	62%
If knew a shopkeeper or food seller had the AIDS virus would buy fresh vegetables from them.	-	-	11%	13%
Total	100%	100%	100%	100%

Social Integration

Attitudes to Persons with HIV	2000		2004	
	Males	Females	Males	Females
	(754)	(744)	(878)	(922)

Source: Report of National Knowledge, Attitudes, Behaviour and Practices (KABP) Surveys 2000 and 2004

Persistent stigma

However, the reduction in stigma has not been uniform across the island. Changes in attitudes have been slower in rural areas like St. Mary, or St. Ann, where the incidence of HIV is on the increase, ostensibly because of the commercial sex trade that is linked to tourism. There is some concern that the Ministry of Health's mass media campaign may not be reaching people in rural areas, where many myths about HIV/AIDS persist, including that it is a homosexual disease. There is also concern that messages are not reaching people with disabilities as discussed earlier.

Access to services without fear of repercussion or stigma

A recurrent theme in the literature on social integration is people's uneasiness about accessing services even when they are available. In Jamaica, many men who have sex with men (MSMs), are reluctant to access services due to fear. This group is faced with a real threat of violence and discrimination because of societal attitudes towards homosexuality. The lack of tolerance that forces men who have sex with men to go underground becomes life-threatening when men hide their HIV status and deny themselves treatment because of fear.

Children living with or affected by HIV may experience social ostracism and a level of exclusion from social services, despite having policies in place which mandate their inclusion, for example in schools.

HIV in the workplace

Progress in countering discrimination in the workplace has been slow. Anecdotal evidence suggests there have been a number of instances where, upon finding out an employee's HIV status, employers have set the stage for resignation or future dismissal by assigning individuals to jobs or functions that do not match their skill set.

The establishment of the Jamaica Business Council on HIV/AIDS (JaBCHA) in September 2006, a coalition of the private sector, civil society, and government, is a positive step towards addressing discrimination in the workplace. The 19-member council aims to facilitate a structured business response to mitigating the impact of HIV by adopting policy, prevention and treatment strategies in the workplace. A survey of 23 companies conducted for the Jamaica Employers' Federation (JEF) in February 2006 revealed that 62% of them did not have HIV-specific workplace policies. The JEF is now working with the Ministry of Health, under the National AIDS Programme, to help approximately 40 companies to develop HIV workplace policies. The private sector has an important role to play in addressing HIV/AIDS in the workplace and this is an area that merits tracking in future Progress Reports.

Policy Issues

- Workplace policies. The introduction of policies on HIV in the workplace by the private and public sector is critical for protecting rights and reducing the vulnerability of people who are living with HIV.

Deportees

Although the popular perception is that deportees are a major part of Jamaica's crime problem, approximately 1 in 10 were convicted for violent crimes, while most were imprisoned for non-violent offences such as overstaying visas, possession of drugs, fraud etc. (Table 2.8). Many who are returned to Jamaica have no local family ties or social networks and are unfamiliar with the country. In the absence of services and programmes to facilitate their re-entry into Jamaican society, they are at risk of marginalisation or falling into criminal activity.

A new civil society initiative, the *Land of My Birth* project, is helping deportees by meeting them at the airport, providing assistance with lodging, employment and finding their families. More such programmes are needed, including initiatives that offer skills training.

Table 2.8 N° of people deported to Jamaica and reasons for deportation

	2002	2003	2004	2005	2006
Total number of people deported to Jamaica	3,331	3,940	4,226	3,320	2,969
% deported for non-violent crimes (possession of drugs, illegal alien, fraud/false documents, money laundering, other)	87%	88%	90%	89%	88%
% deported for violent crimes (murder, manslaughter, rape, wounding, assault) or illegal possession of firearm	10%	9%	10%	11%	12%
% deported for robbery, burglary or larceny	3%	3%	3%	3%	3%

Source: Crime Statistics Unit, Jamaica Constabulary Force

3. QUALITY SOCIAL SERVICES

Public institutions as barriers to, or supports for, social inclusion

The quality of public services offered is an indication of the State's respect for and commitment to upholding its citizens' social and political rights. The accessibility of these services is a marker of its commitment to diversity (see the sub-goal that follows).

The government's Public Sector Reform Programme, which began in the early 1990s, aims to modernise the delivery of public services by improving customer service, transparency and accountability and increasing productivity, savings and revenues. The Reform Programme includes:

- The Consultation Code of Practice for the Public Sector, which sets out rules for the minimum acceptable level of consultation with the public and a consistent process for doing so (see also p. ___ in Governance Goal Chapter); and
- The Citizens Charter Programme, under which ministries and agencies publicly commit to delivering a core standard of services to their customers.

Tracking Indicator

Government Ministries and Agencies with Citizens Charters

By December 2006, 101 out of 212 ministries and agencies had Citizens' Charters, up from 35 in 2001. It will be important to see over time how the adoption of citizen's charters translates into improved customer service, and what systems to effectively monitor implementation and compliance of the Charters are in place.

Box 2.9



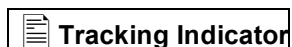
GOOD PRACTICE Increasing access for the socially disadvantaged at the NHT

There are a number of policies and programmes in place that aim to help socially disadvantaged persons access housing:

- The Inner-city Housing Project (IHP) is aimed at providing low cost housing solutions to people in inner-city areas. There were 96 persons provided with houses or apartments under this project in 2005 and 486 in 2006. The difference is related to the difficulty of obtaining land in these areas.
- Customers with sensory deprivation are offered mortgages at the second lowest interest rate band.
- Mortgage-holders 55 years and over are offered a 2% interest rate on their mortgages irrespective of their income .
- The NHT has begun a training programme to help staff better serve the needs of those who suffer from sensory deprivation.

Types of complaints received by customer service institutions

How an institution deals with complaints is an important indication of its commitment to serving its clientele and improving its services. Complaints made to the Standards and Monitoring Unit of the Cabinet Office between 2001-2005 indicate courtesy and timeliness of service (including delays in delivery of documents) as the two main areas of dissatisfaction with service. In 2003 a market research survey of 17 public sector agencies was undertaken for the Unit (Table 2.10). There are reservations relating to the validity of some of the measures used in the Public Sector Customer Service Competition Report 2003. For instance, the survey asked whether a satisfactory response was received when complaints were made. It is not clear whether satisfactory means the response to the complaint was one which the complainant agreed with or if satisfactory speaks the manner in which the complaint was resolved. Nevertheless, the trends identified in the study are mirrored in the pattern of complaints recorded by the Unit. The uniformly low scores for the Registrar General's Department (RGD) is a cause for concern, although it must be borne in mind that many agencies, including the RGD, have improved their services since 2003.



Performance of Public Services

Table 2.9 Overall Ratings of 17 Service Agencies in 2003 Survey

Rank	Agency	Total Score %	Timeliness in Service Delivery	Customer/ Agency Communication	Accessibility %	Service Improvement %
1	MIND	77.06	86.36	44.6	73.14	74.00
2	Administrator General	76.62	89.16	77.0	78.57	59.5
3	National Housing Trust	76.38	93.01	78.2	82.14	49.0
4	Bureau of Standards	73.36	89.16	58.8	67.0	55.75
5	Min. of Lab. & Social Security	72.74	87.76	43.0	72.86	66.5
6	Registrar of Companies	72.24	94.76	49.4	69.29	63.75
7	Post & Telecommunication	68.4	94.76	7.6	65.86	54.0
8	Airport	64.97	85.66	31.0	70.71	47.25
9	National Land Agency	63.24	91.96	54.2	55.43	37.00
10	Inland Revenue Department	62.44	84.97	28.4	59.29	48.5
11	Police Station	60.10	79.37	22.6	44.29	45.75
12	Passport & Immigration	53.06	21.33	57.8	58.43	36.25
13	Customs Department	52.49	61.54	11.8	51.14	46.75
14	Hospital	47.25	36.36	28.6	53.43	33.0
15	Examination Depot	43.59	62.59	10.2	38.0	17.5

Social Integration

Rank	Agency	Total Score %	Timeliness in Service Delivery	Customer/ Agency Communication	Accessibility %	Service Improvement %
16	The Courts	35.93	59.44	14.8	21.71	29.0
17	Registrar General's Dept.	18.43	0.0	26.4	13.57	17.25

Source: Foundation Market Research "Public Sector Customer Service Competition 2003"

The PATH Programme

The Programme of Advancement Through Health and Education (PATH) is the Government of Jamaica's flagship social assistance programme. It has replaced three former social assistance programmes: Food Stamps, Outdoor Poor Relief, and Old Age and Incapacity Programmes. It is a conditional cash transfer programme that links the delivery of services and investment in human capital.

The programme is a safety net for poor families that aims to:

- increase **educational achievement** and **better levels of health** among poor Jamaicans
- reduce child labour by requiring an 85% school attendance among children between age 6 and 17 years
- reduce poverty by increasing the value of benefits to the poor

Participation in the programme is means-based and is on a household rather than individual basis. A formula is used to select participating families who receive cash assistance conditional on beneficiaries adhering to stipulated attendance in school and health centres (health centre visits are free of cost). Each beneficiary in a household receives \$530 per month paid in two month intervals once they are complying with the conditions. Conditions for children (who form approximately 60% of the beneficiaries – Table 2.10) are:

1. Children between 6-17 years must have a minimum 85% school attendance. Benefits are suspended when unexplained absences exceed three days per month.
2. Children 0-12 months are required to visit the Health Centre every two months
3. Children 1-5 years are required to visit the Health Centre every six months.

Tracking Indicator

Performance of PATH

Table 2.10 PATH Beneficiary Distribution by Category

Category	Number of Beneficiaries (%)			
	2002 (pilot)	2003	2004	2005
Children 6-17 yrs (Education)	55,825 (54%)	68,699 (45%)	71,387 (44%)	86,428 (48%)
Children 0-6 yrs (Health)	30,850 (30%)	35,114 (23%)	38,559 (24%)	38,559 (21%)
Elderly Poor	13,299 (13%)	24,541 (16%)	27,791 (17%)	31,865 (18%)
Other Destitute Poor	1,055 (1%)	21,664 (14%)	20,407 (13%)	18,622 (10%)
Disabled	1,154 (1%)	2,755 (2%)	3,277 (2%)	4,393 (2%)
Pregnant & Lactating Women	732 (1%)	181 (0.1%)	406 (0.3%)	474 (0.3%)
Total	102,915 (100%)	152,954 (100%)	161,827 (100%)	181,938 (99%)

Source: Ministry of Labour and Social Security

A recent qualitative assessment of the programme using five focus groups across the island (Hope Enterprises 2005) found:

Social Integration

- *PATH cash grants provide critical support for families.* For many families, the grants not only made it possible to send children to school but also to buy food for other family members when there was no other household income.
- *The programme has contributed to improved school attendance.* Parents were more motivated to send their children to school and children had a greater interest in attending school, performing better in their studies and improving behaviour in school. However, the extent of this change has been hard to assess, as there is no rigorous data on the performance of PATH children. Some teachers suggested that that even though attendance had improved due to fear of suspension of benefits, performance and behaviour in school had not seen marked improvement.
- *Possible stigma associated with the programme.* One challenge to the gains made in school attendance is that some children feel embarrassed to be PATH beneficiaries. Parents felt that better sensitisation about the importance of PATH would help reduce any stigma attached to the programme. There was also a strong sense of being stigmatized by staff in health facilities as one person claimed, “*When yu go to the hospital dem run yu like dem don’t recognize di PATH.*”
- *Better Management System needed to reduce high levels of incorrect suspensions.* Approximately 10% of the at least 125 children of the focus groups discussants, had been suspended from the programme for a range of reasons. Non-attendance at school has been the main reason, but the parents dispute this in most instances. Non-attendance at school due to illness was an admitted problem due to the parents’ inability to prove the child was ill by supplying a doctor’s note. Parents felt that it was too costly to obtain the required doctor’s note or that the illness was not so serious as to require a doctor’s visit. Transfers between schools also prompted many suspensions despite the PATH office being informed of the pending transfers. A problem that compounds the inaccurate suspension of children, was the onerous process for having the error rectified. Parents often felt that the programme has been slow to respond to complaints and field officers had negative attitudes. In addition, they often have to travel long distances, at significant cost, to seek redress at a PATH Office.

Health compliance in 2006 was 87% for children aged 0-1, 67% for ages 1-6 (the highest ever level of compliance for this age group) and, for education, 75% compliance (6-17 years). A recent impact evaluation (Levy 2006) found that school attendance had increased by approximately 0.5 days per month and that health care visits for children 0-6 years had increased by 38%.

Policy Issues

- Key Strategy. Ongoing training for public servants, particularly front-line staff, in fair and equal customer service relations.
- Improvements to PATH. There are a number of areas in which the PATH programme could be improved:
 - *Selection and monitoring:* Criteria used to select beneficiaries are not necessarily good indicators of well-being or need. Ownership of appliances such as stoves, for example, is not necessarily an accurate indicator of poverty: stoves are now commonplace household items rather than luxuries and an applicant with a stove

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may have purchased it when s/he was doing better economically or it could have been given the appliance. How valid are the indicators used by PATH.

- Linked to the selection criteria and poverty-threshold used is a requirement for an improved ability to identify need. Evidence from the study suggests people in genuine need have had their applications rejected, while some who should not have been selected due to their economic standing, remain on the programme and continue to receive benefits. Teachers, CBOs and other groups working with the poor have suggested that their involvement in recommending children for participation in the programme could help reduce this problem.
- *Social work and research capacity*: The wider public sector environment within which PATH operates limits its ability to attract human resources of the quantity and quality desired.
-
- *Implementing the health requirement*: Despite much dialogue and co-ordination at the policy level, lower down the management chain the processes do not seem to function in the way the policy makers had envisaged. There is no consistency in hospital policies towards PATH: some do not do not accept PATH Health Cards, some do and some require payment when the card is presented. The situation in government-run health centres has also been problematic, and the pressures on resources in these centres often mean that staff attempt, sometimes successfully, to charge patients for services.
- Health centres also often have problems reporting back that beneficiaries have complied with their reporting requirements.

Sub-Goal 2 Diversity

Key Issues, Target, Indicators and Case Studies

Key issues	Target	Indicators (Qualitative and Quantitative)	Case Studies
1. RESPECT FOR DIVERSITY	Increased tolerance and understanding of difference among individuals, groups and organisations.		
2. ATTITUDES TO LANGUAGE			Communication Barriers: the Social Status of Jamaican and Standard English
3. THE ROLE OF THE MEDIA IN PROMOTING DIVERSITY		<ul style="list-style-type: none"> Media practices that support diversity 	Good Practice: International prize for Investigative Journalism

Unpacking Diversity

Diversity is expressed in differences in appearance, views, and practices, related to differences in culture, sex, religion, race, ethnicity, sexual orientation, aptitude, socio-economic status, physical and mental ability, and age. These differences are part of what makes up each person's unique, individual identity as well as their group identity or identities. It is our group identity that helps determine our historical inclusion or exclusion in society. It is not the differences themselves that matter, but rather the value or importance that we place on these differences and how that translates into privilege for some groups and lack of privilege for others. A measure of social integration is how a society treats those it considers different from the perceived norm.

Selected markers of 'difference'

Culture is a critical marker of difference in the Jamaican dynamic. The current socio-economic conditions magnify this and allow it to be expressed in a variety of ways. There is, for example, a basic divergence rooted in the European and African orientations of the culture and a history in which one has been institutionalised as being superior to the other. Biases manifest themselves in attitudes towards race, skin colour and hair. Biases as well as unresolved ambiguities are also apparent in peoples' attitudes towards the Jamaican Language.

Race and skin colour continue to afford or deny privilege in Jamaica. The divide is not just between black and white, but Jamaican society is an inversion of typical scenarios, where the racial or ethnic minority experiences discrimination. It is in fact members of the majority group, darker-skinned black Jamaicans, who experience disadvantage - based on their skin colour. This legacy of the social system of the colonial period can translate into partiality in hiring practices and in how services are delivered in both the public and private sectors.

Class is another significant marker of difference in Jamaica. The uptown/downtown divide isn't just geographic; it is socio-cultural, sometimes manifesting itself in discrimination against people because of their accent, language, or residential address and influencing how they are treated by the justice, health and educational systems, as well as in the labour market.

Increasing tolerance

One of the values of diversity is that each individual's understanding can be enriched by another's point of view. Accepting diversity means understanding and appreciating intercultural and other differences, promoting clear communication, breaking down barriers, building trust, and strengthening relationships across group identities. It means acknowledging that groups in society are different while ensuring that these differences aren't used to keep some people 'in' and others 'out.'

Accepting diversity requires bringing about more tolerance in society and ensuring that a lack of tolerance does not lead to the violation of rights or the supremacy of one person's rights over another's. This holds as much for the right to education as for a woman's right to abortion or the right among consenting adults to choose one's sexual partner. Every society has its norms that represent expected and acceptable ways of behaving. But there are limits to how far the State should go in legislating the promotion of a norm in the face of differing values and moral philosophies and infringing on individual choices in the private sphere that are neither harmful to specific individuals or society at large. In this context, a human rights framework takes on an important role in the promotion of tolerance, respect for others, and acceptance of diversity.

Barriers to diversity

Some of the barriers to accepting diversity in the Jamaican context are:

- An historical intolerance of political, cultural, individual, social, religious differences at all levels and entrenchment of these behaviours within institutions. When group prejudice is combined with institutional power and authority, it can be a force for social oppression (Castania, 1996).
- Intolerant behaviours have been normalised, both at the personal and institutional levels, entrenching barriers to access or opportunity and reinforcing discriminatory practices. One of the ways in which this is expressed in Jamaican society is in acceptance of popular song lyrics that degrade women or censure homosexuality.

Behaviours and practices that are rooted in or reflect intolerance need to be dealt with openly and frankly for they are not merely private, individual prejudices, but they contribute to the marginalisation of groups and communities of interest.

1. RESPECT FOR DIVERSITY

Intolerance in Jamaica is expressed most vehemently in antipathy towards homosexuals. Increasingly, there have been reports of violent attacks on men perceived to be homosexual, to an extent that has triggered a great deal of internal debate. This has impacted the public dialogue of fundamental rights, such as the right to privacy, freedom of association and the right to equal protection under the law. As Jamaica struggles with these fundamental issues, it is struggling with its own history of exploitation and indigenous understanding/interpretation of fundamental human rights

2. ATTITUDES TO LANGUAGE

In most colonial societies, because of conflicts between the language of the colonizing elite and the language of the masses, language itself has become a marker for class, ethnic origin, educational background and a number of criteria that are used to perpetuate inequities and the systems that support them. It is also a marker for race. As a result language becomes

overdetermined and takes on a central role in socially exclusionary processes. In Jamaica it can determine whether or not a person is given equal access to government and private sector services, as well as the career opportunities available.

Attitudes towards the Jamaican language (also referred to as Patwa) are changing. The Ministry of Education is developing a Language in Education policy "To provide direction for the treatment of language issues in the Jamaican educational context in order to improve language and literacy competencies." (Policies in Development on www.cabinet.gov.jm). But there is still some ambivalence in attitudes towards it and lingering stigma associated with its use, as both qualitative (Box 2.9) and quantitative studies show..

A 2005 island-wide survey⁵ on attitudes to language in Jamaica revealed a broadly positive view of Jamaican language that coexists with some level of discrimination towards exclusive Jamaican speakers. Nearly 80% of the people surveyed said they thought Jamaican was a language and 68.5% felt the Parliament should make it an official language alongside English. The survey also showed a degree of dualism in the ways that Jamaicans use language: most respondents reported they used Jamaican with friends and family, but English with strangers and co-workers.

Slightly more than two-thirds of those interviewed said if the Prime Minister or Minister of Finance were to make a speech in Jamaican, they would think that these government officials were trying to communicate better with the public. Only 20% said they would view this as talking down to the masses. One implication of this finding is that the use of Jamaican by public officials may have the potential to increase accessibility and so mass interest in public affairs.

But despite the generally positive view of the Jamaican language, only 8% saw a Jamaican speaker as more intelligent than an English speaker, while 58% viewed an English speaker as more intelligent than a person speaking Jamaican. And it is because of this perception that speakers of Jamaican who are not also fluent in English are stigmatised and denied equal access to social institutions (Box 2.9). Forty four per cent did not think there was a link between intelligence and whether a person spoke Jamaican or English.

The challenge for the society is to ensure that language is not used to exclude people or deny them access to services to which they are entitled. People for whom Jamaican is the mother tongue need to be taught from the recognition that English is their second language. Studies over the past 40 years have shown that this approach dramatically improves mastery of English and performance in schools more broadly (Devonish 2001). Not only would this demonstrate recognition that Jamaican is for many Jamaicans their first language, it also shows a commitment to ensuring that all Jamaicans are able to gain a level of competence in English that allows them to function in a global market. Further, it accords speakers of Jamaican a central place in their own country as citizens for whose benefit the State works, rather than marginalising them as speakers of a language that is debased and seen as best left for those with lower socio-political status.

⁵ The study was conducted by the Jamaican Language Unit in the Department of Language, Linguistics and Philosophy of the University of the West Indies, Mona Campus. One thousand people of different ages from rural and urban areas were surveyed.

Box 2.9 Communication Barriers: The Social Status of Jamaican and Standard English

A study was carried out involving six financial institutions. A researcher first visited each institution and, speaking to the customer service personnel in Jamaican, asked for information on how to open an account with the institution. In four of the six cases, the overall pattern was for the customer service personnel to be indifferent, unfriendly and sometimes directly rude. The investigator had to ask several questions in order to get the information needed.

Four days later, the same researcher, dressed in exactly the same way, entered the same institutions making the same inquiry, but this time using English. The responses were polite and helpful. Information that had not been asked for was given voluntarily, inclusive of detailed directions to the relevant section of the institution to which the customer was being sent. On the positive side, in two of the cases, the same helpful and friendly service was accorded the researcher when she spoke in Jamaican and when she spoke in English. This latter fact shows that if there is the will, staff providing services to the public can be selected and/or trained to provide bilingual services to the public in a non-discriminatory manner.

Source: Submission of Prof. Hubert Devonish to the Joint Select Committee of Parliament on the Charter of Rights Bill on May 21, 2001

3. THE ROLE OF THE MEDIA IN COMBATING INTOLERANCE

One of the ways in which intolerance is normalised is through the mass media. The failure to cover issues thoroughly or in a balanced way both reflects and perpetuates social marginalisation and stigma. At issue is not just the accuracy or veracity of reports, but how issues are analysed, how decisions are made about what to cover, what to highlight, what sources are quoted or consulted and the language used in reporting.

The Jamaica Gleaner's recent decision to highlight positive events in inner city communities is a commendable attempt to balance coverage of these areas. By reflecting the positive aspects of inner city communities, which exist alongside the appalling violence they experience, this newspaper is attempting to help overcome the stigma that comes from a one-sided view of these areas.

The mass media, especially broadcast and print media, can play a greater role in promoting diversity through the use of more creative media forms that provide channels for excluded or marginalised communities, including communities of interest, such as people with disabilities, the elderly, children, and people living with HIV, among others.

Higher levels of investigative journalism would result in more in-depth coverage and analysis of issues, which would provide audiences a more nuanced understanding of issues.

While the media producers have a responsibility to improve their output, the consumers – the public – also have a responsibility to demand better coverage.

Box 2.10: Selected Radio and TV programmes that support diversity

- **Roots FM** – This station provides media space for marginalised inner city communities
- **Your Issues Live, TVJ** - This programme takes live TV to the community and gives residents an opportunity to express themselves.
- **Up Front With Ragashanti, 93FM** – This talk-show uses Jamaican language, with inclusion stated as a cardinal principle of the programme.

Good Practice *International Prize for Investigative Journalism*

- **Nationwide, Hot 102 and Impact, CVM TV.** In-depth, fearless investigative journalism. In 2003 the Lee Malvo Story produced by Sonia Stewart and Cliff Hughes for Nationwide for the programme 'Impact' on CVM TV won the Washington, DC-based National Capitol Chesapeake Bay Emmy Award for Outstanding Investigative Report.
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SUB-GOAL 3 Participation

Key issues, targets and indicators

KEY ISSUES	Targets	Indicators (Qualitative and Quantitative)
1. OPERATIONAL STRUCTURES FOR PARTICIPATION IN GOVERNANCE	Recognition of value of local knowledge and local expertise – mainstreamed in the decision-making Local government structures enable citizen participation process.	<ul style="list-style-type: none"> • Mechanisms for participation in public decision-making
2. COMMUNITY ORGANISATION	Citizens' groups participate actively in decision-making processes at local and national levels.	
3. YOUTH PARTICIPATION IN DECISION-MAKING	The concerns of young people are better reflected in development policy and decision-making	

Unpacking participation

A 'society for all' is one in which all members can play a full and equal role in decision-making, particularly about issues that affect them directly, as well as in social and economic activities. Increasing participation means bringing marginalised groups and communities into the picture and creating equitable structures, opportunities and social conditions that allow them to have their say as well as be heard and recognised. To enable participation, society has to respond to, and encourage, the demands of marginalised groups for access and empowerment.

A means and an end

Participation is a means to more equitable and representative decision-making, whether as part of the political process or as part of planning and development at the local level. Participation both requires and results in a paradigm shift that acknowledges popular knowledge, practices, and analysis. Participation is also an end; a desirable outcome of the very empowerment process that it facilitates.

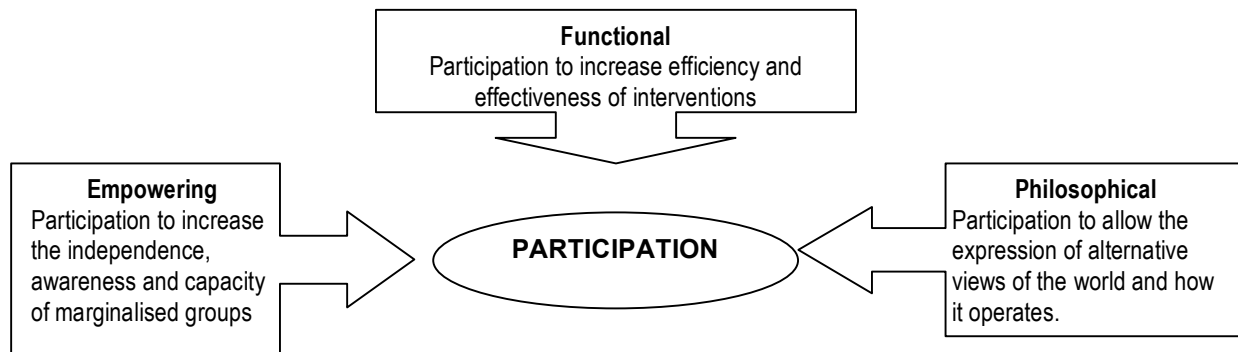
Not an easy road

Participatory processes challenge the existing power dynamic and status quo, making them potentially conflictual. Interests may oppose participation based on political affiliation, class, race, ethnicity, sexual orientation or gender. Participation needs to be learned, institutionalised and enabled. The reasons for pursuing participation as a strategy for social integration are shown in Figure 2.2 below.

Citizen participation as citizen power

Citizen participation is critical to the democratic process. When citizens are actively involved in their government, the interests of all groups in society are better balanced and decisions can better reflect the will of the people. Citizen participation is the "redistribution of power that enables the have-not citizens presently excluded from the political and economic processes to be deliberately included in the future" (Arnstein 1969:216).

Figure 2.2 Reasons for pursuing participation



Source: Campbell, J., and V. Salagrama. 2001.

Forms and levels of participation

Not all participatory processes are equal in intent and outcome. If placed on a continuum, at the low end there would be passive forms of participation where stakeholders are informed of decisions taken, or to be taken, without their input. At the high end, there would be more active forms of participation where stakeholders are part of decision-making processes and take responsibility for their engagement and input. By participation here we are speaking not just in public life, but other spheres of social life including religion, business, the justice system, medical care and so on.

Barriers

Some of the barriers to increased participation in the Jamaican context include:

- Learned helplessness or a sense of powerlessness/intimidation. This has been encouraged and perpetuated by political and social systems of patronage, and can be exhibited among consumers, among religious followers, in doctor-patient relationships, and elsewhere..
- Lack of trust between groups in society and between citizens and the State, or agents of the State, notably the police force.
- Use of power bases (political, financial, legal, illegal) to control and manipulate territory. This includes the system of patronage that is part of the political culture.
- Top-down decision-making and bureaucratic structures are not designed to encourage participation.
- Perceptions and attitudes that participation takes too long, is too costly, is inefficient, and does not add value.
- Lack of recognition of local expertise means little value is placed on community contributions in favour of 'expert' knowledge.
- Ignorance of participatory processes and unwillingness to learn about them.
- The belief that the majority of people are too stupid to offer anything of value to public processes.

1. OPERATIONAL STRUCTURES FOR PARTICIPATION IN GOVERNANCE

There are a number of mechanisms for participation in the public decision making. They are listed here but are discussed in the chapter on the Governance Goal:

- a. Participation in Local Governance through Parish Development Committees
- b. The Consultation Code of Practice for the Public Sector
- c. Use of Citizen Score Cards for improvement of Government and Private Sector Service Agencies

2. COMMUNITY ORGANISATION

Strong communities and effective community organising is a key ingredient for change to both take place and to take root. Organisations are necessary structures for participation in civil life; they allow for linkages to be made with the State and decision-making processes. Non-partisan local level organising is key for the transformation of Jamaica's inner-city communities. There have been a number of successful models of community organising such as Partners for Peace and the Kingston and St. Andrew Action Forum, providing an important space for cross community organising.

The political culture of tribalism undermines community organisation and participatory processes. It is a socially divisive phenomenon in which people are awarded or denied privileges based on political affiliation. The political culture also undermines national and local governance structures.

Box 2.12 Garrison Communities

One of the most serious manifestations of political tribalism is the garrison community. 'Garrison communities' are communities that have been developed by a process of homogenisation. Areas are populated by political party supporters and non-party supporters are pushed out by political activists. In these communities there is little or no room for dissent or opposition against the dominant party or for community organisation. According to the Report of the National Committee on Political Tribalism, anyone in these communities "who seeks to oppose, raise opposition to or organise would definitely be in danger of suffering serious damage to their possessions or person thus making continued residence in the area difficult if not impossible" (Report of the National Committee on Political Tribalism).

Garrison communities perpetuate the exclusion of poor and already marginalised communities. 'Area branding' exposes residents of certain communities to violence by people from areas with a different political affiliation and to discrimination from employers who are themselves biased or wary of the labour instability that they perceive may result from hiring someone from a violence-prone area.

Role of civil society organisations and the private sector

NGOs, the private sector, and faith-based organisations also have a role to play in stimulating community organisation. While NGOs and faith-based organisations have traditionally been in the vanguard of community organising, there is scope for the private sector to do more. Private sector representatives report that one of the challenges they face in working with community and non-governmental organisations is identifying bona fide organisations and ascertaining who is doing what on the ground. This situation is greatly improved when organisations become registered as Benevolent Societies or as some form of non-profit organisation.

Increased, proactive community organisation is not just occurring in geographic communities, but also in communities of interest, such as youth, women, men who have sex with men and people with disabilities. The growing trend needs to be encouraged and supported as part of the social integration process.

YOUTH PARTICIPATION IN DECISION-MAKING

While progress has been made in acceptance of youth participation in public life as a principle, there is scope for more and better youth organisation and for integrating youth and their concerns in a range of processes. There is a need for more resources to be dedicated to youth development and for these resources to be made available to a range of agencies across sectors. **The National Secondary Schools Council** has been revived by the National Council for Youth Development (NCYD) but while this has strengthened the voice of high school students, there is still a gap in positive youth organising. The leader in the work that has been done is the Social Development Commission which supports youth clubs and sports **as an important element in community development.**

Participation of children in decision-making

Jamaica is making headway in the areas of adolescent and youth participation, but the same cannot be said for the participation of children. There has been little recognition of the right of children to participate, at the appropriate level, in decision-making that affects their lives, including at school, in the community and in national life. Empowering children to participate helps form adults who see participation in national life as their role and responsibility, but goes against a generally authoritarian approach. The gap between the right of children to participate and practise is even more relevant for children with special needs or those who are at risk.

Some initiatives to address children's participation include the Children's Advocate, Early Childhood Commission, Change from Within programme. Children First is a model for inclusion of children in decision-making about their school.⁶

⁶ See Chapter 3, Education and Skills, p. ___

SUB-GOAL 4 Social Capital

KEY ISSUE	Target	Case Study
1. TRUST - IN FELLOW HUMAN BEINGS - IN POLICE – CITIZEN RELATIONS	Institutions, society and leaders manifest concern, friendship and respect for the excluded in concrete ways.	Good Practice: The JASPEV Police-Youth Relations Action Learning Approach

Unpacking social capital

Social capital can be described as the social relations that an individual or household or group or organisation can call on to facilitate collective action. These relationships or networks of relationships “may improve welfare [though] increasing information flows, reducing transaction costs (due to greater trust), increasing consultative decision making, and helping to insure against crisis” (Haddad and Maluccio 2000).

Social capital is an important concept in the discourse on social integration, particularly with regard to poverty reduction. The strength of networks, the nature and extent of civic participation and exchanges among neighbours all contribute to a community’s capacity to leverage resources, ideas and information from formal institutions beyond the community. This is essential as part of a strategy to overcome the powerlessness and exclusion that are a function of poverty (Woolcock 2001).

Trust and social capital

While critical to the strength of the networks and social relations that make up social capital, trust is an outcome of social capital. As such it is a useful proxy measure of social capital (Glaeser 2001). Trust is relevant to both social relationships and relationships between citizens and the State. It is a function of reciprocal interactions over time, and at the societal level contributes to order and cohesion and can facilitate co-operation and exchange.

Barriers to trust

Putting trust into practice in the Jamaica context is challenging because of some of the very factors that work against social inclusion. Some of the conditions that create distrust in society include:

- Experience of bad treatment by parents, teachers, employers, institutions (e.g. hospital), rival community, and society.
- One’s own unfriendliness, membership in anti-social groups, isolation or physical disability.
- Corruption, particularly when it occurs in politics and law enforcement.
- Lack of credibility of legal and other institutions

TRUST

a. IN FELLOW HUMAN BEINGS

Only about a third of Jamaicans (35%) answer “Yes” to the question “Would you say that most people are essentially good and can be trusted?” A majority (59%) say “No” and instead agree that “Most people are not essentially good and cannot be trusted.” These are the findings of a

survey on leadership and governance, in which this question was asked. It was undertaken in July and August 2006 by the new Centre for Leadership and Governance at UWI, Mona. The survey used a random stratified sample of 1,338 persons, which ensured that genders and classes were represented over the 14 parishes.

These findings are significant as they point to fundamental perceptions about Jamaicans' experience of their fellow citizens. Trust in our fellow human beings is a basic building block for social cohesion and all that follows from it. Mistrust undermines social capital and other crucial aspects of social integration.

b. IN POLICE - CITIZEN RELATIONS

Lack of trust between citizens and the State in Jamaica is well illustrated by police-citizen relations. Good relations between the police and citizens make for safer communities, but when there is little trust between the two groups, forging an effective partnership to tackle crime through intelligence and the enforcement of laws becomes difficult.

Roots of distrust

Police – citizen relations are characterised by a high level of mistrust that began with the use of the police by our colonial masters to enforce social exclusion, and persists because of citizens' perception of corruption in the police force as well as from current experience of abuse and lack of respect. The experience of residents of poor and inner city communities in particular point to one system of justice for the rich and one for the poor. The system for the poor is dominated by an image of 'Rambo-style' policing in which citizens fear the police and expect to be brutalised, abused and harassed rather than protected or assisted. They are reluctant to seek redress or to report crimes because direct experience or anecdotal evidence has taught them that providing information to the police can lead to retaliation by those who are accused.

Towards transformed police-citizen relations

The growing emphasis on Community-based Policing points to the need for a sea change that goes beyond increasing the number of foot patrols in communities to bringing about a paradigm shift that transforms how the police and the community see their roles, responsibilities, and functions. Some of the mechanisms that can be used to help the transition to genuine community-based policing include:

- **Education of law enforcement officers** in their training institutions. It should be noted that some changes have already been made here and new courses in mediation, gender relations, and other topics have already been added to the police curriculum.
- **Socialisation of police officers.** The culture *inside* the Police Force supports the perception that their role is to protect the middle and upper classes from the working class and not to protect everyone, equally.
- **Change from a Police Force to a Police Service.** While nomenclature may seem superficial, embedded in the concept of a police force is control and repression, while a service looks out for the good of the community it attends to or serves.
- **Facilitate dialogue** based on a concept of partnership and collective responsibility (Box 2.13).

(See also Human Security Goal Chapter p. __)



Good Practice

Creating Common Ground – The JASPEV Police-Youth Relations Action Learning Approach

The JASPEV Police-Youth relations action learning approach has helped foster dialogue between young people and their local police in over 20 communities. At the start of the process, the young people are asked to score the state of relations between them and their local police, an approach now endorsed by the Ministry of National Security and the Jamaica Constabulary Force (JCF). With few exceptions, the scores are generally very low. On the basis of these scores, the youth and police representatives begin a dialogue. With the help of an external facilitator, each group presents their side of the story and the two role-play to develop a better appreciation of each other's perspective. At the end of the discussion, they work together to plan solutions to some of the local problems. Some of these dialogues have led to practical initiatives in communities. As a result of the dialogue in Grants Pen, for example, the police started a Police Courtesy Campaign.

PRIORITY RECOMMENDATIONS

Public Sector

Short Term (FYs 2008/09–2009-10)

1. Rescind the regulation that prohibits the employment of ex-prisoners in the public service
2. Complete the National Policy on Care for the Homeless.
3. Expand the Code of Consultation for the Public Sector to include children and youth among the recognised stakeholder groups (there are a number of civil society organisations that are concerned with child and youth participation with which the government could partner).
4. Look at what targeting mechanisms exist and revisit the instrument used to determine access to PATH programme with a view to facilitating inclusion for vulnerable groups among the poor, such as the disabled and the elderly.

Medium Term (FYs 2008/09–2011/12)

5. Conduct research on the number of persons with, and the distinct kinds of, disabilities in Jamaica.
6. Increase budgetary allocations for youth and community organisations and allocate supervised resources across sectors including to NGOs with a proven track record.
7. Reflect Jamaica's international commitment to Human Rights in the New Constitution and Bill of Rights.
8. Disaggregate and systematise data collection and analysis, and use to monitor the impact of policies on exclusion and integration. Ministries should prioritise investments in surveillance systems, the data from which should feed into a national database such as Jamstats to improve policy making.

Public and Private sectors

Medium Term (FYs 2008/09–2011/12)

9. Establish incentives for employers to hire people with disabilities as a minimum percentage of the workforce, and review compliance with Government quotas.

Public and Private Sectors and Civil Society Organisations

Short Term (FYs 2008/09–2009/10)

10. Foster open dialogue about tolerance, sexual orientation and diversity

OTHER RECOMMENDATIONS

Sub-Goal 1: Respect for the Rights of Others

Public Sector

Short Term (FYs 2008/09–2009/10)

11. Complete the National Plan of Action for Children
12. Institute sanctions for any hospital, or health personnel, who refuse to provide all the appropriate forms to parents for the registration of their child.
13. Correct the error of referring to children as “illegitimate” and “legitimate” in the Registrar General Department’s handbook “Registration of Foetal Deaths and Deaths” to bring it in line with government policy and existing law.

Public Sector, Private Sector and Civil Society Organisations

Short Term (FYs 2008/09- 2009/10)

14. Inform and encourage citizens with the inclination and capacity, to foster or adopt a child; Promote the right of all children to be raised in a family.
15. The Child Development Agency to promote and set target for number of children in care who have contact with families.

Organisations of People with Disabilities

Medium Term (FYs 2008/09–2011/12)

16. Provide advice to employers about workplace requirements to accommodate people with disabilities and develop a members’ skills-bank that could be accessed by prospective employers when recruiting.

Public Sector

Medium Term (FYs 2008/09–2011/12)

17. Review existing mechanisms for redress of human rights violations and make appropriate recommendations. This information should be widely disseminated
18. Review and strengthen the role of the Public Defender’s Office in order to strengthen the practice of human rights.
19. Incorporate education on Human Rights in school curriculum.
20. Conduct a national public awareness survey to measure knowledge about rights in order to make services more accessible.

Public Sector (contd.)

Medium Term (FYs 2008/09–2011/12)

21. The Ministry of Labour and Social Security is urged to:

- Provide ongoing programme of public education on PATH to engender beneficiary confidence and public support
- Consider involving community institutions in the selection of clients to better enable the programme to reach the needy and exclude the genuinely ineligible
- Improve promptness in making payments, approving applications and rectifying incorrect suspensions from the programme
- Give clearer guidelines on the use of health cards in hospitals
- Give focus to the performance of PATH children in school in addition to their attendance

Sub-goal 2: Valuing Diversity

Public sector

Short Term (FYs 2008/09-2009/10)

22. Enforce or enact, as appropriate, policies and legislation in support of diversity and tolerance, notably the National Disabilities Act.

23. Ensure continued support for integrating the Jamaican language in the school system

24. Include Media Literacy as a component of the Education for Citizenship curriculum

Public Sector, Private Sector and Civil Society Organisations

Short Term (FYs 2008/09-2009/10)

25. Organizations such as CARIMAC, the Heads of Media and the Press Association of Jamaica should consider developing indicators and collecting data to track the quality and depth of investigative journalism in Jamaica

Public and Private Sectors and Civil Society Organisations

Medium Term (FYs 2008/09–2011/12)

26. Develop a public campaign to promote tolerance around diversity

Public Sector

Medium Term (FYs 2008/09–2011-12)

27. Recognise Jamaican as a language under the New Constitution and Bill of Rights and provide for its use in public services.

Sub-goal 3: Enabling Participation

Civil Society Organisations

Short Term (FYs 2008/09–2009/10)

28. Community organisations must ensure they embrace/incorporate democratic principles of inclusion, participation, trust – values of social integration.

Public sector

Medium Term (FYs 2008/09 – 2011-12)

29. Renew the thrust towards community organisation and its linkage with local government, including support for the Social Development Commission (SDC)

Private Sectors

Medium Term (FYs 2008/09–2011/12)

30. Increase private sector support for community organisations

Public Sector and Civil Society Organisations

Medium Term (FYs 2008/09 – 2011-12)

31. Consider the establishment of a comprehensive registration process for NGO and CBOs and increase collaboration and information sharing among those organisations that currently collect data about NGO/CBO activities. The introduction of a standardised data collection format would help improve the quality and usability of data being collected.

Sub-goal 4: Promoting Social Capital

Public Sector

Short Term (FYs 2008/09 – 2009/10)

32. The Police Public Complaints Commission should be more accessible through the establishment of a manned hotline and a more responsive system.

33. The Ministry of National Security should ensure continuation and extension to other communities of police-youth relations scoring process as developed under the JASPEV project.

34. As under sub-goal 3, increase support to the SDC

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