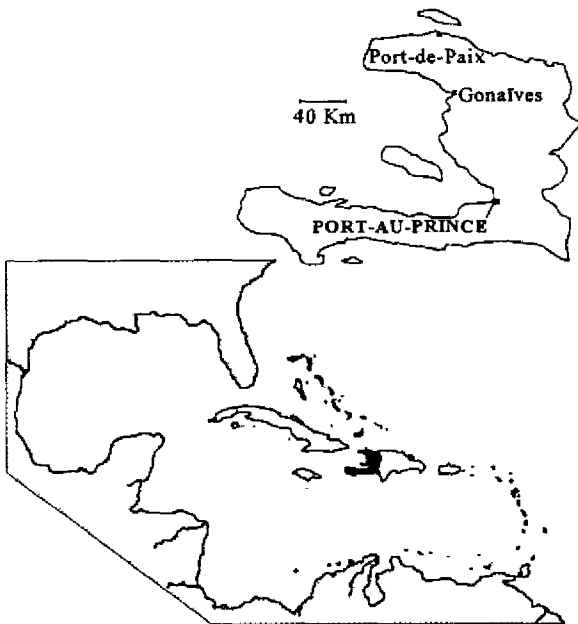

HAITI



Capital: Port-au-Prince
Area: 27,750 km²
Population: 6,504,000 (1988) (a)
Population density: 234/km²
Urban population: 28% (b)
Per-capita GDP in USD: 360 (1989) (c)
Life expectancy at birth: 55.7 years
Infant mortality rate: 92‰ live births (1990) (d)
Illiteracy: 77% (e)
Population under poverty line: 90% (1990) (f)
Human Development Index 1992: 0.276 (124th) (g)¹

A dramatic scenario of crisis, poverty, environmental deterioration, and political instability

Haiti is the poorest country in Latin America and the Caribbean and is among the poorest in the world,² in 124th place—of a total of 160—in the "human development" classification used by the United Nations Development Program (UNDP). Poverty affects more than 90% of the population, some regions are afflicted by famine, deficiencies in social and productive infrastructures are dramatic, and the country suffers from one of the highest deforestation and ecological deterioration indices in Latin America and the world. This has resulted in increased migration, both in and outside the country, creating a phenomenon of major proportions. In the past few years, moreover, Haiti has suffered from both a

difficult transition to democracy and major economic and social deterioration, realities for which there is as yet no solution.

In 1986, following a period of strong opposition, the then President, Jean-Claude Duvalier ("Baby Doc"), was ousted from the country. This led to the disintegration of Duvalierism, the authoritarian regime established in 1957 by François Duvalier ("Papa Doc"), the president for life until his death in 1971, which was characterized by the terror he exercised through his security forces, the sadly famous *tontons macoutes*. Duvalierism also brought about the country's economic stagnation and its alienation from the modernization and growth that took place in

Latin America during the 1960s and 1970s. The economic and social gulf separating Haiti from the rest of the continent widened, as evidenced by the fact that in Latin America and the Caribbean, Haiti is the country with the largest proportion of rural population (72%). In addition, the negative impact of the crisis of the 1980s and that period's adjustment measures worsened Haiti's poverty, social deterioration, and economic decline. Between 1980 and 1985 the gross domestic product (GDP) dropped by 1.3%, and it grew by only 0.5% from 1985 to 1989. Even with its limitations, the per-capita GDP reflects the country's decline in revenues, which dropped by 21% between 1980 and 1989 to the 1960 level.³

In 1986, after the departure of Duvalier, General Henri Namphy assumed power. Under his rule a Constitutional Assembly was created which drafted a new basic law, the foundation for a democratic state and basic rights. Consolidation of a state of law was impeded by human rights violations and marked political instability and frequent coups d'etat, however. Because of the prevailing climate of violence, the 1987 elections were postponed to 1988, at which time Professor Leslie Manigat was elected president. A few months after the elections, Manigat was overthrown by Namphy. A new coup, at the end of the same year, brought another army officer, General Prosper Avril, to power. General Avril was in turn overthrown in 1990 and a provisional civil Government took over the presidency and prepared for elections in December 1990.

In that election, which numerous international observers described as the first truly free one in the country's history, the Catholic priest Jean-Bertrand Aristide was elected president with the strong support of the urban poor, a phenomenon called a *lavalas*, literally meaning avalanche. Despite a new attempt to overthrow him, Aristide assumed power in February. But the high expectations raised by the new Government in regard to democracy, respect for human rights, change, and improvements in the difficult conditions facing the population, were frustrated by a new

military coup in September 1991 which ended constitutional Government.

The regime resulting from the military coup met strong international pressure to adopt democratic legality, which ultimately led to the trade embargo decreed by the Organization of American States (OAS) in October 1991. The embargo, from which only strictly humanitarian operations were excluded, caused new energy cuts, a broad scarcity of basic products with a resulting increase in prices, and a 70% reduction in trade and productive activity.

Apart from the embargo's short-term effects, the economic prospects, employment, and long-term development of the country are not encouraging. Agriculture is characterized by archaic structures in which large properties, many of them unproductive, coexist with tiny subsistence farms. Even though it provides work to 68% of the active population, its share in the GDP is falling: from 50% in 1970-1980, it dropped to 33% between 1985 and 1989. In addition, domestic agricultural production faces major difficulties because of the effects of food aid and importation of cheap cereals to local markets. Coffee, which is the main export product, is rapidly declining in sales volume abroad, from 30,000 metric tons in the 1970s to less than half that amount at present. Beyond the economic and social dimensions of the agricultural crisis there is an environmental one, which is perhaps more serious and more difficult to solve. Advanced environmental deterioration also heralds a large-scale energy crisis, which already hinders the country's development. In addition, industry does not have the necessary capacity or vigor to offset agricultural deficiencies and act as a springboard for economic growth. Finally, political instability and infrastructural deficiencies discourage foreign investments. All this points to bleak prospects for the 1990s; a solution would require normalizing the country's political life and the collective effort of all Haitians, with strong support from the international community.

Evolution of the labor market and spread of poverty

The Haitian labor market is characterized by a clear predominance of agricultural activity. Though this provides work for 68% of the economically active population (EAP), in large part it does so through farms that are too small, already overworked, low in productivity, and produce yields that do not meet minimum requirements. During the decade the proportion of the labor force employed in agriculture decreased while the industrial EAP increased slightly, from 7% to 9%; these figures illustrate the industrial sector's weakness and inability to absorb labor. *Maquilas* (assembly industry),⁴ which began in the early 1970s, succeeded in creating 30,000 jobs and represented 33% of exports based on free zones such as the Sonapi and Shodecosa industrial parks, but since 1983 the industry has been stagnating, in contrast to the rest of the Caribbean Basin where it is one of the most dynamic key growth areas. The service sector has experienced a larger increase, rising from 18% to 23%, according to International Labor Organization (ILO) data.⁵ Other sources estimate that as a result of the agrarian crisis and massive country-city migration, the service sector may already represent 40% of the active population.⁶ Finally, this sector is characterized by a large proportion of informal activities, also of low productivity and return. In itself such informal microbusiness provides employment to 125,000 people. The open unemployment rate has fluctuated around 12% (1988 figures), but underemployment is high since it is estimated that between 60% and 70% of the EAP are in that situation.

In direct correlation with the country's low index of human development, a very high proportion of the Haitian population lives in poverty and wretched conditions. In 1990, UNDP data showed that over the decade poverty affected an average of 76% of the total population and 80% of the rural population, which in absolute terms represented 5 million Haitians, 3.7 million of whom lived in rural areas.⁷ Studies by the Inter-American Development Bank (IDB) and the U.S. Agen-

cy for International Development (USAID) show that poverty affected 48% of the population in 1976, 68% in 1980, and 90% in 1990, which illustrates not only the extent of the problem but also the general pauperization that occurred in the last two decades.⁸

Poverty is estimated to affect 80% to 95% of the rural population, or 4.1 million people,⁹ the highest rate in Latin America and one of the highest in the world. Whereas the per-capita GDP for 1989 was USD 360, Government estimates are that in rural areas—where almost three of four Haitians live—it was USD 120.¹⁰ The past three decades have seen an increase in the number of landless peasants, and some areas have even suffered from periodic famines similar to those seen in sub-Saharan Africa, though on a smaller scale.

The poverty phenomenon may be explained by various factors. First, by the characteristics and fragility of the country's productive structure. Second, by the strong inequality and lack of equity prevailing in Haitian society: the lowest salary is 176 times smaller than the highest, and 1% of the population earns more than 46% of the national income.¹¹

Although there are no accurate figures, the situation created by the military coup d'état and the trade embargo has considerably worsened the living conditions of the population, especially that suffering from poverty. The scarcity of essential products has given rise to speculation and to price increases of 100% to 400%. The decrease in productive activity has led to a spectacular increase in unemployment: in February 1992 an estimated 143,000 workers became jobless because of the embargo. This assumes that a very large number of families have been pushed below the poverty line when their sources of income ceased.

Migrations and refugees

Massive and uncontrolled migration from the countryside is for the most part triggered by the difficult living conditions, low income, poverty

and pauperization—even hunger—of the population which are the daily reality in rural areas. These deficiencies are aggravated by the lack of public services in the countryside (they are found mainly in the Port-au-Prince metropolitan area), the agrarian crisis, and environmental degradation, the last two phenomena being closely connected. Extortions by the state and pressures by the security forces, which are the real power in rural areas, have also contributed to the violation of the population's basic rights. Consequently, hundreds of thousands of peasants and their families are leaving the countryside to improve their lot. This gave rise to three major migratory flows, one from the country to cities and the others abroad, to the neighboring Dominican Republic and especially to the United States.

Countryside-city migration has caused an increase in the marginal population of middle-sized cities like Cap-Haïtien and Gonaïves. These cities propel people to Port-au-Prince, however, since they are unable to offer new opportunities to migrants. This situation is reproduced in the capital; rural inhabitants relocate in marginal areas and live by various survival strategies in the informal economy.

Migration to the Dominican Republic, which is usually illegal, is permanent or seasonal, in the latter instance to perform agricultural jobs like sugarcane harvesting. In this case, laborers experience working conditions nothing short of total exploitation which have been denounced internationally by such organizations as the ILO. Sugarcane workers live in communities called *bateyes* which lack the most rudimentary living conditions,¹² suffer from the racism prevalent in Dominican society, and are legally unprotected to the extent that their children are registered in neither country.

As a last resort, countless immigrants choose to set out for the United States on very makeshift boats in hope of reaching its shores and landing there illegally. This is why they are known as boat people. The crossing is very perilous: many boats founder and others are intercepted by U.S. patrols and their occupants placed in camps around Miami. Despite all this, many reach their

goal. There is a huge Haitian community abroad, numbering around a million, particularly in the United States but also in Canada, Venezuela, other islands in the Caribbean, and France, a country with which there is a special affinity. Migration abroad has a large impact on national life: on the one hand it has a considerable influence in modernizing living conditions, democratizing and modernizing public life and political behavior, and satisfying basic needs. In economic terms, the World Bank (WB) noted that the foreign exchange remitted to the country exceeded USD 64 million in 1988, which amounted to 31% of the revenues received from exports and 43% of those from the development aid received by the country.¹³ That figure is a gross underestimate since it reflects only registered remittances; other estimates place the figure over USD 100 million.¹⁴ In an atmosphere of general scarcity, many families depend for survival on monies sent by members who have migrated abroad.

The coup which overthrew President Aristide has meant that the boat people phenomenon and illegal crossings of the Dominican border have reached uncontrollable dimensions, in this instance by thousands of refugees who have left the country in fear of repression by the new regime. Since February 1992 a true exodus has been witnessed: 34,000 boat people were intercepted by the U.S. coast guard while countless others—a number very difficult to estimate—were able to defy border surveillance and reached the United States.

Health, environmental sanitation, nutrition, and food security

The dramatic situation which Haitian society is experiencing in terms of human development is particularly visible when one examines its health conditions and problems. Prospects are not encouraging in view of the disparity between available means and actual needs, and the international isolation of the country caused by the coup which overthrew President Aristide.

Gross mortality is 13%; close to half of deaths occur before the age of 5. Child mortality in 1990 was 92‰ live births,¹⁵ and that among children under 5 years of age was 130‰ live births, although other estimates place it at 200‰ live births.¹⁶ One in every two deaths is caused by diarrheal or respiratory infections either alone or combined, and most of them occur in poor urban neighborhoods. It is estimated that a Haitian child experiences an average of seven diarrheal episodes every year. A program against diarrhea which provides oral rehydration therapy (ORT) to mothers and has helped reduce child mortality has been in place since 1983, though in 1988 the rate was still 138‰ live births.¹⁷ Diseases preventable by vaccination such as tetanus and poliomyelitis still represent a considerable problem in children. In 1990 coverage for DPT and polio was around 40%, 72% for BCG, and 32% for rubella.¹⁸

There are different estimates of maternal mortality. The Pan American Health Organization (PAHO) estimated that it was 230 per 100,000 live births in 1987,¹⁹ while UNDP placed it at 600 per 100,000 live births in 1988.²⁰ Although figures vary widely, they reflect the very serious health problems affecting Haitian women. Many factors are at the root of this problem: prenatal medical care is almost nonexistent. Only 40% of deliveries are performed by medical personnel, a proportion that falls to 10% in rural areas, where the other 90% are performed by empirical midwives at home. Although it is against the law, abortion is common. Even though it is practiced under minimal hygienic conditions, abortion is reserved for those who can pay for it. For lack of means, most women who wish to terminate their pregnancies rely on persons of dubious qualifications and are aborted under very questionable hygienic conditions. The most used contraceptive methods are the traditional ones; various agencies funded in part by USAID have promoted family planning programs.

The health problems affecting the adult population are the following: Tuberculosis is endemic, with an incidence of 500 cases per 100,000 population. Diabetes is estimated to be 15%

nationally.²¹ Arterial hypertension is also widespread in adults. Malaria is endemic: 85% of the population lives in malarial areas, and 72,000 cases were reported in 1984.²² Indeed, there are no accurate estimates regarding this disease since in 1988, because of the financial crisis and political instability, the National Malaria Eradication System closed its doors and fired its staff.²³ The introduction of cholera, already present in countries bordering the Caribbean, is much feared because it could spread very quickly given the country's situation.

The first AIDS cases were reported in 1979. As of 1990 there were 3,086 cases, which gave Haiti the third highest number of cases in Latin America and the Caribbean, behind Brazil and Mexico. The population/number of cases ratio is the highest in Latin America and the greater Caribbean, however.²⁴ There are no accurate estimates for 1991 and 1992 since it is assumed that official statistics are underreported due to lack of control. It is therefore anticipated that the disease will increase. According to studies already conducted, the transmission pattern is clearly heterosexual (70% of cases²⁵), the percentage of affected women is increasing, and most people with the disease are between 20 and 40 years of age.

The Haitian health system has three sectors. The Ministry of Health and social security organizations make up the public sector; nongovernmental organizations (NGOs) working in the health sector (a few grouped in the Association of Private Health Organizations) are in the private nonprofit sector, and various private institutions form the private, profit-making sector. There are 49 hospitals, 50 health centers with beds (with a total of 4,956 beds in 1987), 88 centers without beds, and 219 dispensaries. Sixty percent of the institutions are public, 18% are private, and 22% are private but receive some public support ("mixed" institutions). More than half of the institutions (which have 2,779 beds) and health workers (particularly specialists), of whom there are not enough, are in the capital and its metropolitan area, which means that the rural population's access to health

services is very limited because of distance and transportation difficulties. Further, most Haitians do not have access to health services for financial reasons. Private medicine, which has the best equipment including the only scanner in the country, is the privilege of the monied minority, and some public institutions in practice operate as private centers. Following diagnosis, patients at the University Hospital, the country's largest, have to bear the cost of all materials and medicines used in their treatment, and it has private wards despite its Government status.²⁶ The same problems affect clinical laboratories.

To appreciate deficiencies in coverage in all their magnitude, one must examine social security coverage. Created in 1960, social security is composed of two institutions, the National Insurance Office and the Sickness, Labor Accident, and Maternity Insurance Office, which are under the Ministry of Social Affairs. A bare 1% of the total population, or 2% of the EAP, are covered by these agencies, which are well staffed and financed but nonetheless inefficient.²⁷

Access to health care is also limited because of the high price of drugs. The importation and distribution of medicines is an almost total monopoly because of the absence of Government control and enforcement of regulations, which artificially raises prices, and puts drugs beyond the reach of most of the population. Because of this lack of controls, medicines are often imported which have been banned in the country of origin or are past their expiration date. There is active smuggling of medicines, and they are marketed through informal networks without any medical supervision.²⁸

The health policy was formulated by the ministry in 1982 to ensure exercise of the basic right to health by the year 2000. The following priorities were established, with emphasis on decentralization and primary health care: control of diarrhea, immunopreventable diseases, tuberculosis, and malaria; protection of mothers and children, including family planning, and prevention of malnutrition. AIDS control was added in 1986 through a medium-term plan running from 1989 to 1993. Decentralization has progressed

very slowly, and the program has barely advanced for lack of resources, staff, and funds and the sociopolitical turmoil the country experienced throughout the 1980s.²⁹

The magnitude of health problems and Government inefficiency caused the appearance in the early 1980s of nongovernmental initiatives which included modern and well-equipped hospitals, laboratories, and health centers based on strong external financing which formed a network parallel to that of the state. Although they undoubtedly helped alleviate the population's health care deficiencies, such organizations function outside the control of the Ministry of Health and for that reason do not contribute to integrating the national health system. In addition, the disorganization of and lack of control by the state has allowed a few of these organizations to carry out experiments with new drugs or therapies which do not always respect medical ethics. Such is the case, for example, with the subcutaneous contraceptives which certain organizations implanted in women in the capital's poor neighborhoods without their consent and without taking into account factors like age or number of children.³⁰

In this panorama of general deficiencies, the role played by traditional healers stands out. It is a resource open to all and fairly effective for certain ailments. Folk doctors are well entrenched in rural areas and have an extensive pharmacopeia based on medicinal plants. Despite the important role played by traditional healers and midwives, Government institutions have almost completely ignored their existence and the important role they could play, after proper training and coordination, in solving some of the country's health problems.

The drinking water and sanitation system is one of the most deficient in Latin America and the Caribbean, despite the efforts of public institutions financed by international agencies. Estimates in 1992³¹ show that drinking water coverage in the capital is 53.2%, as opposed to 58% in middle-sized cities and 33% in rural areas. In poor districts of Port-au-Prince, the proportion of dwellings without drinking water is nevertheless higher than 90%. This means that

in that city alone, more than a half-million people lack drinking water. As a result, to get water—a task exclusively reserved for women—long distances must be covered in both the countryside and the city to collect or buy rain water. Profit-making private networks of tank trucks have flourished in many areas which sell water at a high price, which represents an additional cost to the very poor and their meager incomes. In Fort National, one of the capital's *bidonvilles* or shantytowns, 88% of the population buy water. Lack of coverage is aggravated by periodic restrictions on supply and contamination of wells; an evaluation by the World Health Organization (WHO) and the Pan American Health Organization (PAHO) showed fecal contamination in 14 of the capital's 17 sources because of the presence of latrines over hydrants.³² Inspection and disinfection of drinking water hydrants to prevent cholera began in May 1991, but the economic sanctions resulting from the military coup caused the interruption of these measures due to lack of supplies.

Refuse collection systems pick up only two-thirds of the garbage generated in the capital, of which only a quarter is disposed of. In 1988, according to PAHO, more than 600 tons of daily refuse were not collected.³³

The daily caloric consumption of Haitians averages 84% of what is required.³⁴ Controlling malnutrition in children and pregnant women has been one of the priorities in the health policy since 1982 in spite of which there is a very high incidence of nutritional deficiencies. Low-weight births (less than 2.5 kilograms) between 1980 and 1990 averaged 37% of total births, and 51% of the children under 5 years of age during the same period showed growth deficiencies caused by malnutrition.³⁵

Housing, basic services, and urban marginalization: the *bidonville* reality

Most of the population lives in places well below minimum housing standards. The average

occupation density per house is one person per square meter. This average masks the reality of marginal areas or *bidonvilles* such as Cité Carton, Cité Moustiques, and the populous Cité Soleil, however. More than half the population of Port-au-Prince and its metropolis lives in *bidonvilles*. Overcrowding in these areas reaches unbelievable levels. In Cité Soleil, for example, 150,000 persons were crammed into less than 5 square kilometers, a density of 30,000 persons per square kilometer, in 1980. That density may have doubled today. Average occupation density per house goes up to two persons per square meter, and in some instances up to two families may occupy just one room. Such overcrowding has many consequences: early sexuality, promiscuity and sexual abuse, the rapid spread of infectious and contagious diseases, deterioration in family relationships, and psychiatric disturbances. In the *bidonvilles* there are even more troubling situations, however. A study published in 1991 indicated that in Port-au-Prince there were around 50,000 homeless people living in the streets.³⁶

The quality of the shanties in the *bidonvilles* is notorious—they lack electricity, water, and toilets. In Port-au-Prince and its suburbs, 65% of the dwellings have no electricity, 87% do not have toilets, and 98% use coal to cook. Open spaces are used for toilets and garbage disposal, despite the fact that they are also children's playgrounds. In many instances, given the extent of the informal economy, housing is used as workshop, storage area, and shop all at the same time

In rural areas dwellings do not as a rule meet minimum housing standards either. Built out of mud and palm trees, they are dark, unhealthy, poorly ventilated, and normally overcrowded. In addition to lacking water, light, and toilets, rural communities suffer from lack of transportation, and they are frequently isolated. The highway network covers only part of the country. Only 619 of the 3,343 kilometers of roads are paved.

Problems of education: illiteracy and bilingualism

The Haitian educational system faces two major problems: general illiteracy and unrecognized bilingualism. Teaching is done in French, which gives it an elitist and ineffective didactic character since it ignores Creole, the language spoken by all Haitians and which, together with French, is sanctioned as an official language by the 1987 Constitution. In contrast, French is spoken by only 10% of the population. This is due to the long control by an enfranchised mulatto elite of the educational system, in opposition to the popular Afro-Creole culture. It has only been in recent years that teaching in Creole has begun in an experimental way as part of a newly implemented educational reform.

The problem of illiteracy is a historical one. After 176 years of free education, 77% of the Haitian population is still illiterate; in rural areas the proportion is 90%, according to figures from the National Education Ministry (MEN).³⁷ If one adds the number of functional illiterates to that of the totally illiterate population, the proportion is higher than 85%. This situation will affect the future because of the limitations of the educational system's coverage (the lowest in Latin America and the Caribbean, with a primary education rate of only 59.7%), the poor quality of education, and high absenteeism and dropout rates caused by the general poverty. About 37% of school-age children do not go to school. Those that remain for an average of only two years. On the whole, only one in three children completes primary school.³⁸ In rural areas school dropout is greater because of the need to set young people to agricultural tasks at an early age. Another reason for not going to school is that a family pays very dearly for educating a child. At the beginning of the 1980s the costs associated with educating just one child represented 50% of a peasant's income and 40% of that of a poor urban resident, compared to an average of 3% in industrialized countries.³⁹ These figures may be even greater in reality.

The educational system has serious deficiencies. The state budget for education does not allow increases in coverage or quality, nor does it guarantee maintenance of centers and schools already built. Between 1960 and 1986 the number of secondary centers in the better endowed metropolitan area increased from four to seven while its population increased from 200,000 to 1 million inhabitants. This explains the rising popularity of private primary and secondary schools, which account for 61% of all school matriculation and 90% of secondary teaching, and have become a factor in reproducing social inequality. Moreover, there is a high concentration of centers and academic institutions in urban areas.

Two out of every three students who complete their elementary education go on to secondary school. Secondary school is characterized by its traditionalism and its inability to adapt to Haiti's sociocultural context and the requirements of the labor market. About 20,000 students complete such schooling, of whom only 7,000 take university entrance examinations.

During the entire Duvalierist period the state university suffered from the regime's control and "clientele" requirements. Currently, the state university is experiencing serious problems since it can only admit 60% of those who apply to enter. The proportion of university students in the population reflects the inadequacies of the educational system in general and of higher education in particular. In 1985, Haiti had 5,187 university students and 600 professors in a population of more than 5 million. In comparison, the Dominican Republic had more than 30,000 students in its state-run Autonomous University of Santo Domingo (UASD) in a population of 5.5 million, while Jamaica had 16,000 students for 3 million inhabitants and Cuba had 200,000 students and 12,000 professors for 10 million inhabitants.⁴⁰ To these gaps must be added the lack of centers or faculties of chemistry, biology, physics, and other experimental sciences. In existing faculties there are no research departments and shortcomings in infrastructure and equipment negatively influence the quality of teaching. This

is why study abroad is so frequent for those who have the means to do so, and why Haiti's brain drain is so great.

The situation of Haitian women

Women represent 47.3% of the EAP, one of the highest proportions in Latin America and the Caribbean. In the context of Haiti's job structure, 60% of working women are employed in agriculture, 18% in services, the liberal professions, and administration, 12% in business, and 10% in industry. The great participation of Haitian women in specific occupations like agriculture or business is directly related to typically Haitian sociocultural peculiarities.

Haiti continues to occupy the first place in Latin America and the Caribbean in employing women predominantly in agricultural jobs, although there is a trend toward a decrease in the number of women working in the countryside. In rural areas there is a marked and culturally sanctioned division of work by sex, men doing the jobs that require greater strength. The agricultural work of women is generally for the family and is not remunerated. They also perform domestic tasks, care for children, and transport drinking water, an activity that often requires walking several kilometers. It is estimated that the Haitian woman spends about six hours daily in this activity.⁴¹

Small businesses, particularly those selling food and staple products in local markets, are run by women. *Madan Sara*, or women who link the countryside with provinces and the capital through small-scale business, enjoy special status in society since they are central figures in the trade process. A similar figure has appeared who deals with electronics and domestic electric items she has acquired abroad. The presence of women in informal businesses has increased over the last few years because women's work, like children's, represents one of the most frequent survival strategies for the family unit in an environment of general poverty. The importance of women's work in informal business is illustrated in the

findings of independent studies carried out recently.⁴² According to these studies, between 80% and 90% of the 125,000 persons who work in microbusinesses in the metropolitan area of Port-au-Prince are women, on whom 550,000 people—a third of the population in that area—depend. Despite the importance of these workers' contributions to the country's economy and development, they receive little Government support, credit, or training; on the contrary, they must contend with legal restrictions to perform their activities.

In the service sector, domestic work, together with business, is the most common occupation for women. There are no regulations in this sector, which means that domestic workers are extremely vulnerable to their employers, and there are cases in which women trade their work simply for bed and board.

Although women's participation in industrial work is smaller, it is 70% to 80% in the metropolitan area's *maquilas*, mostly in the textile industry. This feminine bias is due to women's skills, their lack of propensity to unionize, and the lower salaries they receive. In the *maquilas* women work under poor sanitary and security conditions; labor laws do not protect them because such plants are located in the free zones; there are numerous instances of exploitation in regard to nonpayment of salaries, length of the working day, maternity leave, unjustified firing, and extraordinary hours. Sexual abuse is frequent.⁴³

At the middle and high levels of the employment structure—administration, liberal professions, etc.—discrimination against women is commonplace. For example, though more than 85% of primary school teachers are women, only 13.6% of university instructors are. This situation started to change with the election of President Aristide, in whose cabinet four of 11 ministers were women. In this regard, it must be noted that the intense popular movement (*lavalas*) which culminated in the election of Jean-Bertrand Aristide to the presidency had the strong endorsement and support of women, as

occurred in Haiti's democratic struggles during the last decade.

Even though the 1987 Constitution proclaims the equality of men and women, there is much discrimination in the laws in force. In the penal code, adultery is reason for severe punishment for women (imprisonment of three months to two years) while men need only pay a fine equivalent to USD 20 to USD 80 for a similar offense. For homicide caused by adultery the law is very tolerant toward men. Abortion is illegal, even when rape is involved. The right to inherit is recognized for male heirs only.

Up to 1982 the Napoleonic Code denied legal standing to married women. Since then a new law has assigned mutual obligations to couples and the legal standing of both spouses has been recognized. Important matters pertaining to cohabitation or *placage* are not dealt with; in this instance women remain unprotected and the rights of their children are not covered. Such omissions are important inasmuch as cohabitation is widely practiced: only 15% of all women are legally married. Concealed and unacknowledged polygamy exists in Haitian society, which is related to the extensive paternal irresponsibility seen in the country and explains why many households are headed by women.

Situation of children and youth

In urban areas around 20% of children aged 8 to 10 years work. In the countryside and in marginal urban areas this proportion is 70%, according to 1989 figures from the Ministry of Social Affairs.⁴⁴ The importance of the jobs performed by rural children in the family economy and the lack of roads and schools contribute to the high dropout and absenteeism rates observed in primary education.

Children generally work in "domestic service" or *restavek*, a specifically Haitian socio-cultural practice in which poor peasants place their children with urban families so that they may receive food, clothing, lodging, education, and in the best of circumstances, schooling, in

exchange for domestic work. In point of fact, urban families are also poor and the city does not offer many opportunities, which means that the reality of *restavek* is quite different: domestic children become the poorest of the poor, are subjected to harsh tasks which are inappropriate for their ages, and receive neither adequate food nor education (75% of *restavek* children are illiterate). Physical and sexual abuse of such children is common. Because of recently approved legislation to deal with the problems of such children, fewer *restavek* children are placed with host families, but deteriorating living conditions are forcing a greater number of the poorest families to resort to the practice.

A large number of working children belong to the category of children *in the street*, in which they spend their time on the street but maintain contact with their families. Such come from the poorest families who need the work of all their members.

Children *of the street* are those without any or with very tenuous family connections who live naturally in the street and join peer groups which give them a sense of belonging. According to statistics from the United Nations Children's Fund (UNICEF) and the Social Welfare and Research Institute (IBESR), there are 1,500 to 2,000 such children in Port-au-Prince. Their average age is 11 years and 14% of them are less than 5 years old. Eighty-two percent of street children are boys, but the percentage of street girls has increased in recent years. Such children live day to day, begging in the streets, carrying out minor criminal acts, and performing small jobs. Their hygienic conditions are deplorable; they suffer from many diseases such as eruptive skin infections, contagious and infectious diseases, nutritional deficiencies, and tuberculosis; and they live in total promiscuity and frequently practice prostitution. Most of them are addicted to inhalants such as industrial glue. They mistrust institutions which do not share their own immediate survival goals—food, a bed, shoes, and playing soccer.

A few international organizations like UNICEF or NGOs like "Fami selavi" are active in promot-

ing the reintegration of these children into society and the workforce. Such efforts have not succeeded in dealing with the problem of marginalized youth in all its magnitude, however.

The marginalization of these children and youth and their lack of basic life expectations or of the possibility of joining the workforce are at the root of the ever-increasing drug consumption among youngsters. Though there are no accurate data on the subject, an increase in marijuana consumption has been observed among adolescents and young people.

Human rights and International Humanitarian Law

The authoritarian regime headed by the Duvaliers led to a three-decade-long reign of terror and repression in which basic rights were systematically violated, especially through the actions of the *tontons macoutes*. It is estimated that 40,000 persons were murdered during the Baby Doc period alone from 1971 to 1986.

With the overthrow of Jean-Claude Duvalier in 1986, a period of democratic transition began in which respect for human rights advanced somewhat but was limited because of the continuity of the Duvalier regime's police state. In 1987, General Henri Namphy's regime abolished the *tontons macoutes* and created a new Constitution, despite which violations persisted and even worsened after the 1989 coup, causing the overthrow of Namphy and the installation of General Prosper Avril. During this entire period an intense movement for the respect and protection of human rights sprang up as part of the struggle for democracy and full practice of civil liberty. This period culminated in the December 1990 elections sponsored by the United Nations and the OAS; conditions then existed for the establishment of a state of law and the institutional reforms needed to bring it about effectively were initiated.

The coup of September 1991 cut this process short. The brutal repression directed at poor districts resulted in a mass exodus of Haitians from the country by boat or on foot and the flight

of 200,000 to 400,000 Port-au-Prince residents to rural areas, an unprecedented phenomenon. As noted above, more than 34,000 Haitians were stopped by the U.S. coast guard when they tried to enter the United States illegally and were returned to Haiti or detained in internment camps such as that at Guantánamo. Only a small number were granted refugee or asylum seeker status, which has led many human rights groups to argue that the United States was not respecting the "no return" principle established by legal instruments in defense of refugees.

Although Haiti has been a signatory to the Geneva Conventions since 1957, it has still not adhered to the Additional Protocols I and II.

The environmental and energy crisis and vulnerability to disasters

Haiti's environment may be described as in critical condition since in many instances its capacity to regenerate resources has been exceeded, as consequently has its ability to sustain development or, in other words, to guarantee that it will meet the basic needs of the present as well as future generations. Deforestation is one of the most serious, if not the most serious, environmental problems facing the country today. Each year 45 million trees are cut down without control and only 3 million are planted. This is caused by the need to expand arable land and collect firewood and coal, the only energy resources easily accessible for most of the population. Although Haiti has the lowest per-capita energy consumption in Latin America and the Caribbean, demand for firewood exceeds the country's ability to regenerate it. The annual consumption of wood as a domestic fuel and for small industries exceeds 134,000 metric tons and meets 70% to 80% of the country's energy requirements.

In 1950, according to various accounts, Haiti still had 20% of its original forests, but in 1990 only 2% to 4% remained.⁴⁵ If one also considers the fact that the yearly rate of deforestation is 3.8%,⁴⁶ the second highest in Latin America

after Costa Rica, it may be concluded that the country is on the verge of losing *all* its forests in a very short time. This could happen around 2010, according to the findings of a 1986 study.⁴⁷ This implies a seriously threatening situation in the short term if one considers that amid the general poverty, the availability of firewood may mean the difference between life and death.⁴⁸

The country's massive deforestation and the kinds of land tenancy (many leased land parcels are minifarms of less than two hectares, a situation in which neither the absentee landowner nor the tenant is motivated to apply soil protection measures), combined with Haiti's mountainous terrain, causes erosion and a loss of an average of two tons of fertile soil per hectare per year.⁴⁹ The immediate consequences, in addition to threatening the future of agriculture, are local droughts in some areas, sedimentation in dam reservoirs, waterway silting, lake eutrophication, and deterioration of littoral flora and fishery fauna. This is damaging the country's fishing resources, an important sector of the Haitian economy since yearly catches exceed 5,000 tons—almost a third of yearly consumption. The serious deterioration of the hydrographic system is reflected in the diminishing capacity of the main river, the Artibonite, to supply water year-round to the Peligre hydroelectric plant and its neighboring irrigation systems.

Factors such as the impossibility of sustaining present levels of wood consumption for fuel, deterioration of the hydroelectric system, which provides 3% of the country's energy, and the dependence on oil for thermal plants when they are already obsolete pave the way for an energy crisis which will not be easily solved and will be even greater than that of the present. Power outages are common, and some cities such as Cap-Haitien have remained without electricity for months.

In 1987 an ecological scandal took place when a U.S. ship discharged several thousand tons of toxic ash into the port of Sedren, near Gonaïves, in violation of the Constitution promulgated the same year, an act that met only passivity and connivance by local authorities.

The waste included heavy metals, which are a serious public health hazard. The incident, internationally denounced, revealed the extent of corruption of Government agencies and was the first case of toxic waste exportation recorded in Latin America and the Caribbean.⁵⁰

Haiti lies in the area of highest incidence of hurricanes and tropical cyclones in the Caribbean, which together with droughts and floods are the disasters most frequently encountered in the country. Hurricane Gilbert, in 1988, affected 870,000 persons and caused property damage of USD 91 million.⁵¹ The cyclone period runs from July to October and the southern and southeastern areas are the most affected. The makeshift nature of buildings makes the population very vulnerable to this type of disaster. The highly flammable materials used, combined with high population density and other risk factors such as domestic fires, are at the root of the large number of fires in poor districts, which often have devastating consequences. Floods are directly linked to deforestation and loss of plant cover, which have radically reduced the soil's absorption capacity. The Predisaster and Relief Organization (OPDES), created in 1983, is the only Government agency dealing with this area; it so lacks material and economic resources that its activities are very limited.

Influence of cooperation and development policies and agencies

Haiti depends heavily on external aid funds, which represent 80% of the budget deficit and almost the entire development budget. Though external aid has made major contributions to infrastructural works and economic and social development, it has been criticized because it encourages external dependence, supports the authorities in power, is not oriented toward the country's true priorities, and maintains social inequity.⁵²

In the 1970s external aid increased spectacularly to several thousand million dollars, mostly from the United States, France, Canada, Germa-

ny, and Taiwan. In the same period foreign NGOs settled in Haiti and developed their own, mostly social, activities to offset Government inefficiency and the absence of policies in that area.

At the beginning of the transition to democracy in 1986 there was a major increase in the flow of aid. Nevertheless, donor countries conditioned their disbursements on progress in democratization and respect for human rights. Because the country has been unstable and democratization has experienced advances and setbacks since 1986, the amounts of aid have fluctuated greatly. As an illustration of the patterns of cooperation with Haiti since then, Haiti received USD 46 million from multilateral sources (33% of the aid) and USD 93 million (67%) from bilateral ones in 1989. The most important bilateral donor, which accounted for 35% of the total bilateral support, was the United States through USAID and its food assistance program (PL-480, or Food for Peace). Behind the United States in bilateral support were France with 25%, Germany with 12%, and Japan with 11%.

Despite the importance of external aid to the Haitian economy and state, it has had little impact on the country's development for various reasons. Among the most important has been the Haitian Government's limited ability to execute programs and waste, corruption, and lack of adaptation of the assistance to the reality of the country. Two examples of the last are food assistance in cereals and swine restocking. The former had devastat-

ing effects on local production of rice, corn, and sorghum; its large scale distorted markets and ruined a large number of local producers. It also changed the eating habits of the population (wheat bread has completely replaced cassava as the basic food, for instance). The latter, restocking of swine herds halfway through the decade to prevent African swine fever, had a great impact: between 900,000 and 1,200,000 animals were slaughtered, affecting 80% to 86% of rural homes. The creole pig, a species resilient to heat and diseases specific to Haiti and which feeds on garbage, was replaced by imported breeds—Yorkshire, Duroc, and Hampshire—whose feeding also depends on imported grain. This had the effect of concentrating swine raising in agricultural entrepreneurs and has burdened peasants with debts. All this led to huge protests, as have "food for work" programs promoted by various agencies in rural areas.

The conditions under which the December 1990 elections took place, resulting in Jean-Bertrand Aristide's assumption of power, and the commitments and policies of the new administration, led donors to commit themselves to more than USD 500 million in aid in the first year alone.⁵³ However, the September 1991 coup and the resulting embargo by the OAS in October had the immediate consequence of suspending projects under way amounting to USD 163 million, freezing disbursements, and the departure of foreign technicians from the country.