Segunda Conferencia regional intergubernamental sobre envejecimiento en América Latina y el Caribe: hacia una sociedad para todas las edades y de protección social basada en derechos

Brasilia, 4 al 6 de diciembre de 2007

BELICE
Informe de la aplicación de la Estrategia regional de implementación para América Latina y el Caribe del Plan de Acción Internacional de Madrid sobre el Envejecimiento

Priority Area I: Older Persons and Development

Objective 1: Promote the human rights of older persons

(i)&(ii): In 2002/3 Help Age International, through their Caribbean programme of Advocacy & Capacity Building, funded a Legislative Review of the Laws of Belize. Although this was very useful and provided recommendations for action it remained a read only document until 2007.

The National Council on Ageing has recently engaged the services of a lawyer skilled in drafting to move the process a step further and draft an Older Persons Act. The first draft has been completed and the consultation process nearing an end so it is envisaged by the end of 2007 the Act will be ready to be submitted to the Solicitor Generals office.

The Ministry of Human Development has also drafted Regulations for the Residential Homes of Older Persons, which is currently being dealt with at the Solicitor General’s office.

(iii) No consultation has ever taken place with the National Council on Ageing regarding this matter.

(iv) The National Council on Ageing continually promotes the human rights of older persons through their education programmes. The radio programme ‘The Golden Years” is an effective means of publicizing all matters relating to older persons concerns and human rights issues.

(v) The National Council on Ageing is the mechanism of the Government of Belize for monitoring the implementation of the National Policy for Older Persons and any plans and programmes that affect the lives of older people.

The office of the Ombudsman of Belize is ultimately challenged with the submission, investigation and resolution of complaints relating to compliance with laws. This would also be the case if older person’s human rights were being abused or affected in any way.
Employment

Objective 2: Promotion of access, under conditions of equality, to decent employment, continuing training and credit for individual or community undertakings

1. The table below indicates the unemployment rate for the national population by sex and age group for the period: 2002 to 2006. Please note that it was not possible to acquire specific data on employment of older persons. The required data nonetheless, can be deducted from the table below.

   ![Table 11.13](image)

   Table 11.13
   Unemployment Rate, by Sex and Age Group: 2002 - 2006

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   Source: Central Statistical Office

   *At May

2. Very little have been done by the State to increase accessibility to credit for older persons. All the traditional credit institutions such as credit unions, and commercial banks including the now defunct Development Finance Corporation (DFC), have been encouraging prospective creditors to borrow irrespective of their age. The main issue in the case of older persons is the unavailability of collaterals, or a steady income due to unemployment, and not owning their own property.
Since 2005, a government-supported program—Belize Rural Development Program, funded by the European Union, has instituted and implemented a credit-window for older persons. Older Persons are able to access grants of US$1,000 as a member of a group, or as an individual for micro projects in agriculture and craft. The program targets rural areas with high levels of poverty such as the two most southern districts—Stann Creek and Toledo Districts. Data is not available to present a statistical breakdown for the past five years in terms of access to credit to older persons.

3. Very little has been done to improve the employability of older persons over the past five years. Nonetheless, through the small but effective efforts of agencies such as the Adult and Continuing Education Unit of the Ministry of Education, along with NGO’s such as Belize Red Cross, and Helpage (to name just a few), older persons are being equipped with basic literacy and technical skills which allows them to access jobs such as care-givers, clerks, and other categories of support staff in both the public and private sectors. Data is not available on the coverage, annual amount of resources committed, and the selectivity mechanisms of these programs.

Objective 3: Promotion and facilitation of the inclusion of older persons in the formal-sector workforce

1. The National Trade Union Congress of Belize (BNTUCB) has taken the lead in the battle to increase continuity of employment for older persons. Its strategy is to lobby employers for increases in the pension and other types of benefits for workers, while at the same time discourage employers in their constant attempts to rise the retirement age. Presently, the retirement age in the public sector is fifty-five (55) years.

2. Efforts to reduce the incidence of industrial accidents is being spearheaded by the Belize Social Security Board (BSSB), with the support of government’s Labor Department. For obvious reasons, it is in the best interest of all employers to keep the level of on the job accidents to a minimum level, particularly that of the BSSB which is responsible for meeting the medical expenses to all registered workers injured on the job. There has not been a specific study done to evaluate the impact of the present safety measures on older persons in the workplace.

Social Security

Objective 4: Expansion and improvement of the coverage of both contributory and non-contributory pension schemes

1. The tables below provide statistical information on the coverage of contributory and non-contributory social security systems in Belize over the past five (5) years, disaggregated by age group and area of residence.
2. There is just one (1) non-contributory pension scheme which commenced in April, 2003 and administered through the Belize Social Security Board. The beneficiaries are presently limited to females sixty-five years (65) and older. The table below provides comparative statistical information for the years: 2001 to 2005 for the main social security programs (inclusive of the non-contributory scheme), disaggregated by program area and funds paid out.
3. There have been a number of legal reforms to the social security system over the past years, and the relevant sections of the legislation amended along with the year(s) these were made are outlined below.

**Education**

**Objective 6: Promotion of equal opportunities and access to lifelong education**

1. While over the past five years there have been a number of continuing—education programmes in Belize, however, in terms of their coverage they tended to focus more on school dropouts, and young adults who have not completed primary and secondary education. Presently, a number of the secondary schools have included “evening sessions” for the two categories of students mentioned earlier. Very little has been done over the past five years in terms of creating educational opportunities for older persons (60 years and older) both in the government and non-governmental sectors.
The Ministry of Education is presently actively seeking a replacement for the vacant post of Coordinator to its Adult and Continuing Education Program which has been vacant for almost a year to date. The focus of that program however, is not on older persons but instead on young adults who have not been able to complete their primary or secondary education. Nonetheless, some grass-root organizations working with the elderly do promote educational sessions for their members in specific areas. eg caring for the elderly; first-aid; working with HIV/AIDS victims etc.
Priority Area II: Promotion of Health and Well-Being into old age

Health Services

Objective 1: Promotion of universal coverage for older persons to health-care services through the inclusion of ageing as an essential component of national legislation and policies on health

1. The Government of Belize has been a signatory to numerous regional and international Agreements and Conventions related to health-care over the years, and have used them as a framework to develop national and local level health plans for the country over the years.

2. The government has recently implemented a National Health Insurance Scheme (NHI), which to date covers only a few regions of the country, i.e., the two southern districts of Stann Creek and Toledo, and south-side Belize City. There should be national coverage by the end of 2007. It should be noted that services offered to older persons is an integral part of the scheme which allows them universal and free of charge access to essential medicines and rehabilitation services.

3. Belize is a signatory to ILO Convention # 169, and does not practice discrimination based on ethnicity in relation to its health-care systems and programmes.

4. Yes, there are some special health care programmes for older persons with access problems. Examples include the National Health Insurance Scheme and those of NGO’s such as the Mercy Care Center, and the Belize Council for the Visually Impaired (BCI). The Mercy Care Center provides health care (at the Center and through home visits), and meals for the elderly, while the BCVI assists persons with visual impairments inclusive of all age groups.

Objective 2: Establishment of comprehensive health-care services that meet the needs of older adults by strengthening and refocusing existing services and creating new ones where necessary

1. Yes, there is a health plan for the country but it is all-inclusive in terms of age groups and is not limited to just older persons. In addition, the health plan coordinates health-care services primarily at the national level and does not extend to the regional and local levels.

2. No, there are no specific measures regarding health care for older women.

3. While there are plans in the country for products and technologies which help to maintain functional autonomy in old age, they are very few and are found mostly with NGO’s such as the Rotary and Lions clubs.

4. Older persons are included in mental health programmes, but the majority of them are unable to gain maximum benefits due to the nature of their ailments which normally requires in-patient treatment. It should be noted that only a
small percentage (30%) are recipients of in-patient services compared to out-patient services (60%).

5 Yes, Belize has a basic package of guaranteed health care but it does not include specific medical coverage for older persons.

Healthy Environments
Objective 3: Promotion of healthy personal behaviors and environments through legislation, policies, programmes and measures at the national and community levels.

1 Yes, Belize has conducted a number of national and local campaigns to promote healthy ageing. The National Council on Ageing has organized and promoted a number of campaigns in the areas of human rights; home health-care; and institutional care for the elderly, while the Mercy Care Center (an NGO), focuses on issues related to healthy eating, food, and medication for the elderly.

2 The National Council on Ageing has taken the lead in terms of governmental bodies promoting the social integration of older persons. Since its inception in 2003, the Council has worked through its member-agencies to improve both the accessibility and quality of services provided to older persons. An example has been the recent government decision to extend the benefits of the non-contributory pension to males, as well as to increase the present monthly payments from Bz$75 to Bz$100 for both sexes effective the 1st, December, 2007. In addition, two (2) recently established NGO’s that are now working towards the upliftment of older persons in Belize (“VOICE” and “HOPE”)

Long-stay Institutions
Objective 4: Creation of legal frameworks and suitable mechanisms for the protection of the rights of older persons who use long-term care services.

1: A draft legislation for long-stay institutions for the elderly (regulations which regulates their registration, licensing and operations) is presently with the Solicitor General’s Office for his review and approval prior to it being signed into law by the minister with portfolio responsibility for the elderly. It should be noted that the final draft came about through a series of consultations spearheaded by the Ministry of Human Development with all the major stakeholders covering a period of almost two years.

2: The Ministry of Human Development which has ministerial responsibility for the elderly, and through its Inspector of Social Services Institutions (ISSI), is responsible for the inspection of long-stay institutions for the elderly in Belize. It should be noted that this officer (without any additional field staff), is also responsible for the inspection of other types of institutions, eg day-care
centers for children, and long-stay institutions for children throughout the country. Over the past five (5) years, a total of three (3) long-stay institutions were inspected, along with two (2) homeless shelters. Although inspections have been carried out over the past five years, and there have been some positive effects in terms of the quality of service offered, the issue of lack of enforcement powers of the Inspector has always been a problem. It is our hope that this issue will be solved once the present draft regulations are signed into law.

3 At present, two (2) of the long-stay institutions are NGO’s, while one (1) is fully managed by the government. In all three institutions, a mechanism has been put in place whereby a medical doctor makes regular visits (on a weekly basis) to meet and treat the residents. In the case of the homeless shelters, a similar arrangement has been made with medical personnel for their services to those residents.

4 Once the present draft regulations for long-stay institutions is signed into law, all long-stay institutions for older persons will be required by law to be registered and licensed. The residents of all registered and licensed institutions will then be entitled to the full protection and support available under the relevant sections of the statutory instrument and parent Act.

5 There are a total of three (3) long-stay institutions in Belize. The main reasons for entry include insufficient or no familial support; poverty, and inability to take care of oneself due to illness and/or old age.

Although all three (3) institutions receive financial support from the government, two (2) receive partial funding via monthly subventions, while one (1) receive full financial backing. The first two institutions are managed by NGO’s while the latter is managed by the government.

The sex ratio of the resident population of all three (3) institutions shows a slight majority of females over males, and the age profile is indicating that the majority of the residents tend to be in the 70-80 age group with a high proportion suffering from debilitating illnesses such as diabetes, hypertension and Alzheimer’s.

The main services offered in the institutions include basic health care, socialization through group activities such as church services, parties and other types of social gatherings, physical exercises and field visits.

Objective 5: Promotion of the development of human resources through the design and implementation of a national gerontology and geriatrics training plan for existing and future health –care providers at all levels of care, with emphasis on primary health care.
(i) The country has not developed any strategies and plans. There is no gerontologist in the country and neither is there any geriatric training taking place. Several NGO’s prepare programmes and facilitate training in the care of older persons in the home but quite infrequently. The National Council on Ageing with assistance from FAVACA and Health professors from Florida International University carried out a series of workshops to support volunteers and family members in the Home Health Care of Older Persons.

(ii) The NCA conducted a 2 day workshop entitled “The Human Rights and Fundamental Freedoms of Older Persons in Belize” in 2006 which attracted the participation of over 60 persons from many professions and disciplines, as well as residential long-stay establishments for older people.

(iii) See (i) above: no geriatricians in Belize
Priority Area III: Creation of an Enabling and Supportive Environment

Objective 1: Adaptation of the Physical environment to the characteristics and needs of older persons to enable them to live independently in their old age.

(i) No subsidy programme available to older persons. However, the Ministry of Housing will carry out essential repairs to homes of older persons when referred by NGO’s.

An international charitable organization has taken on the role of providing cheap housing for older persons providing that they own their land. The cost is very reasonable but also very basic structure.

(ii) No transport discounts for older persons available in the country although some transport companies will look kindly at older people and not charge them for short journeys.

(iii) No specific housing programmes available for people with disabilities. A Belizean NGO provides support to families with children with various disabilities but this service is not available to older persons.

(iv) Although the Government of Belize has agreed to abide by the International Building Regulations which identifies the need for adaptive devices to enable person’s with disabilities access to establishments, the codes are not enforced.

Objective 2: Increased availability, sustainability and suitability of social support systems for older persons.

Objective 3: Elimination of all forms of discrimination and mistreatment against older persons.

(i) No information available.

(ii) The Older Persons Act should be completed by the end of 2007 and then be moved through the process to formal legislation.

(iii) Legal Aid is available to older persons and the services of the Ombudsman to address issues of discrimination and abuse of older persons.
(iv) Belize has an Ombudsman and also a Human Rights Commission, although this organization is very weak at the present time.

**Objective 4: Promotion of a positive image of old age.**

(i) The National Council on Ageing continually acts to present a positive image of older persons in society. Older people are represented on the Executive Committee of the NCA, where their views and ideas are eagerly accepted and acted upon.

VOICE is currently the mouthpiece for older person’s action on issues relating to ageing and has the lobbying power. The VOICE promotional poster has been very well received as it conveys older persons from the different cultural groups demanding their rights.

“The Golden Years” radio programmes promotes a positive image of ageing as it is co-hosted by an older persons and also features older persons and issues on ageing on every programme.