

A Management Review of  
THE JAMAICAN FOOD STAMP PROGRAM  
With Recommendations for Future Implementation

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Report Submitted to:  
The Government of Jamaica  
and USAID/Kingston

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## FORWARD

The firm of Management Sciences for Health was asked by USAID/Kingston to perform a management review of the newly implemented Food Stamp Program in Jamaica. The review focused on:

- 1) administrative operations (Report by C. Carpenter and K. Smith)
- 2) financial and accounting systems (Report by D. Rudisuhle)
- 3) the potential for fraud, abuse, and theft (Report by C. Sweeney)
- 4) evaluation aspects - from the health and nutritional standpoint (Report by Dr. Eileen Kennedy).

The findings and recommendations in each of these areas have been presented in separate reports.

This report deals with the administrative operations of the program.

Implementation of these recommendations to enhance or modify current practices, should result in more efficient and effective procedures as well as utilization of personnel; which in turn should lead to attainment of the Program's objectives.

The review of the Food Stamp Program was prepared under contract PDC-1406-I-00-4060-00.

### ACKNOWLEDGEMENTS

The team wishes to extend its thanks to Ms. Francesca Nelson of USAID/Kingston, and all the personnel of the Government of Jamaica who spent time with us - from their busy schedules - to share their knowledge, perceptions and perspectives regarding this Program. Without their guidance, advice, assistance and cooperation this review would not have been impossible.

While this report is the product of our shared experience with our Jamaican hosts, the views and interpretations expressed herein are those of the authors, and we take full responsibility for the conclusions and recommendations, as well as any errors of omission or commission. These recommendations should not be attributed to the U.S. Agency for International Development, or any element of the Government of Jamaica; they are presented here for consideration by officials of both governments, as responsible and interested parties in the Program.

A PRAYER

(On the wall of an office in the Ministry of Social Security)

Dear Massah God:

A short note to tank yu far di stamps of Red and Green.  
Di money dat mi wood use to buy milk and rice and meal, me use  
it instead to buy other things to keep mi pretty and clean.

Miss James baby jus a grin him teet' cause di milk dat him  
get it taste sooo sweet.

We the poor tank you for dis plan dat help di sick and de  
ailin' man.

Thou some people say it could be more and complain, we tank  
yu for it all de same.

Well, mi belly is full of meal and I'm off to sleep.

Please I pray you in you arms dis Food Aid Programme to  
safely keep.

Amen! Amen! Aaamen!

Your Servant

Icilda Agatha  
(Food Aid Recipient)

#### LIST OF ABBREVIATIONS USED IN THIS REPORT

BOJ	-	Bank of Jamaica
FSP	-	Food Stamp Program
GOJ	-	Government of Jamaica
JCTC	-	Jamaica Commodity Trading Company, Ltd.
JIS	-	Jamaica Information Service
MCH	-	Maternal and Child Health
MOF	-	Ministry of Finance
MOH	-	Ministry of Health
MLG	-	Ministry of Local Government
MPS	-	Ministry of Public Service
MSS	-	Ministry of Social Security
PIOJ	-	Planning Institute of Jamaica
PA	-	Public Assistance
PRO	-	Poor Relief Officer
USAID	-	United States Agency for International Development
USDA	-	United States Department of Agriculture

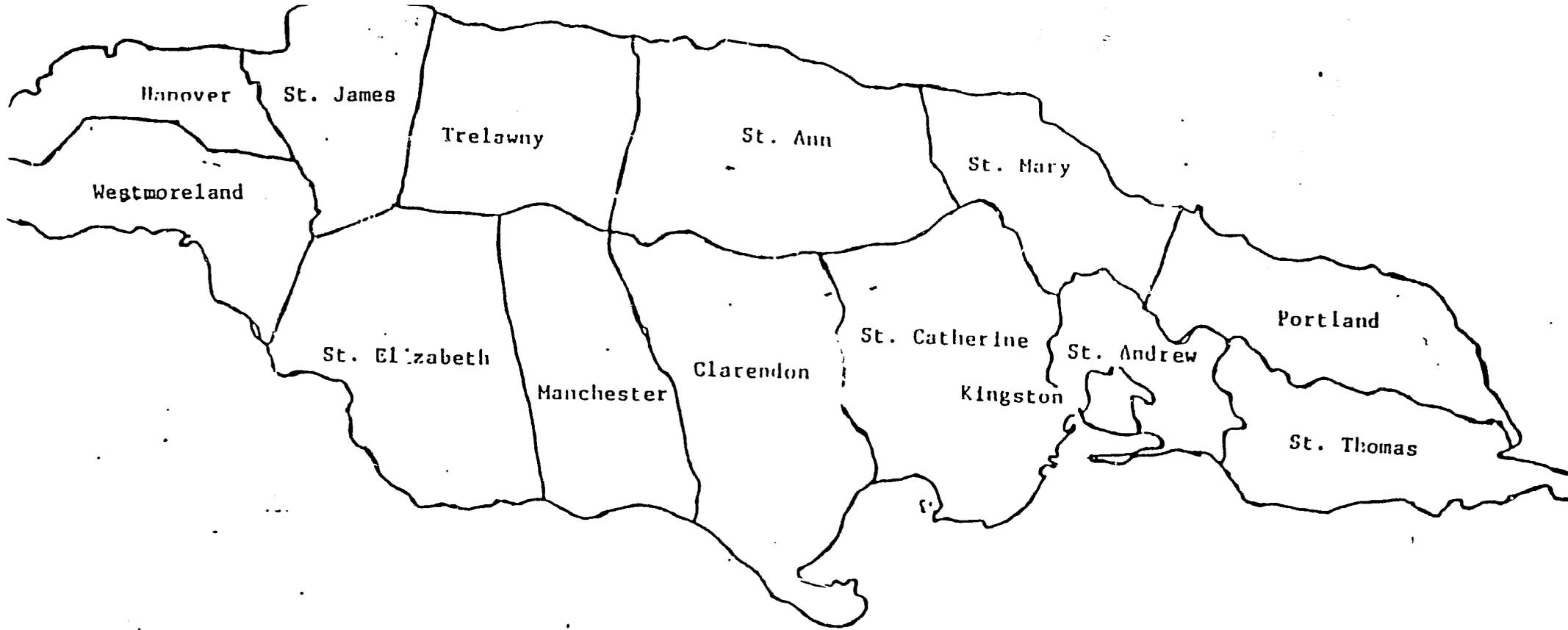
## PREFACE

Pursuant to a policy decision by the Government of Jamaica, the Jamaican Food Stamp Program was designed by the Planning Institute of Jamaica in August 1984 to provide some measure of economic relief and nutritional supplementation to the most needy segments of the population. The Program was launched in September 1984 under the direction of the Ministries of Health and Social Security, with the Ministry of Local Government playing a major implementation role in the field.

The government's Public Assistance and Poor Relief Officers have performed an extraordinary feat in identifying, investigating, and registering some 276,000 people, and providing food stamp benefits to more than 142,000 of them in the brief span of seven months. As with any new undertaking, the Program has experienced some growing pains in gearing up the administration, in gaining the participation and logistical coordination of several ministries and organizational entities to reach a disparate and geographically dispersed target population.

At this juncture - after some seven months in start-up implementation - both the Government of Jamaica and the U.S. Agency for International Development are interested in assessing the Program in order to determine the most effective direction, and manner, in which the Program should now proceed.

J A M A I C A



Parishes of Jamaica

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## SUMMARY OF MAJOR RECOMMENDATIONS

### Program Design

1. Food stamp benefit levels should be indexed to keep pace with inflation. This adjustment should be made annually.
2. Reinforce the concept of the individual as the basic beneficiary.
3. Include children in the 36-48 month age group in the program.
4. The Prime Minister's Office should reassess the current objectives of the Food Stamp Program - given various constraints experienced.
5. An evaluation plan should be developed, reflecting the Jamaican government's consensus of what can be expected of the program over the next two years - economically, nutritionally and administratively.

### Administrative Operations

1. Computerize preparation and updating of food stamp recipient lists.
2. Reduce progress reporting requirements to fortnightly, or monthly.
3. The Ministry of Social Security should:
  - a. (1) encourage Poor Relief Officers to register recipients directly at local health centers.
  - (2) establish a schedule for regular distribution of food stamps at health centers by Poor Relief Officers.
  - b. The Ministry of Social Security and the Ministry of Health should jointly reassess whether the current maternal and pre-school target is still appropriate, or whether some of the quota should be reallocated to the elderly and indigent category. In this regard, it is strongly recommended that an additional consultant study be conducted to review MCH registration processes and experience with the Food Stamp Program.

4. a. Develop a Policy and Procedures/Operations Manual - including guidelines for participant certification, stamp distribution, recording and reporting.
- b. Provide periodic retraining (at least semi-annually) for all Poor Relief Officers, and other staff involved in the Program's implementation at the local level.
5. a. (1) The current Monitoring Committee should retain policy-making authority for the Food Stamp Program.
- (2) The Monitoring Committee should also be used as a resource by the Ministry of Social Security.
- b. Establish a new organization unit in the Ministry of Social Security, with primary responsibility for the Food Stamp Program.
6. Sample redeemed stamps for control purposes - rather than making 100 percent counts and checks - in the Ministry of Social Security.
7. Implement a rank-ordered management information system to monitor program performance.
8. Public information should be a continuing part of the Food Stamp Program.

Additional background information on these major recommendations is provided in the Executive Summary, and where appropriate, is also discussed further in the body and/or appendices of the report.

## EXECUTIVE SUMMARY

The Food Stamp Program (FSP) was developed in Jamaica as one of two components of the government's Food Security Plan, in 1984. This report describes that program which provides food stamps to two broad categories of recipients (Health-, and Income- related) and makes several recommendations for improvement in its administrative aspects.

The targeted beneficiaries of the program were:

- a. Health Related - 200,000 persons
  - pregnant and breastfeeding women
  - children under three years of age
- b. Income Related - 200,000 persons
  - elderly
  - indigent

It was anticipated that these beneficiaries would be those persons served by the Ministry of Health's Maternal and Child Health Centers, as well as those assisted by the Ministry of Social Security's Public Assistance, and the Ministry of Local Government's Poor Relief programs.

The stamps, valued at J\$10 per month per recipient, were to be provided every two months (in J\$20 booklets of 10 stamps each, at J\$2 per stamp) and could be redeemed at retail food sales outlets for three commodities: rice, cornmeal, and skim milk powder in amounts corresponding to the appropriate J\$ value.

The program commenced nationwide operation in August 1984 under the administrative direction of the Ministry of Social Security (MSS), with participation of the Ministries of Health (MOH), Local Government (MLG), Finance (MOF), Education (MOE), the Planning Institute of Jamaica (PIOJ), and the Jamaica Commodity Trading Company, Limited (JCTC).

The initial implementation phase involved eligibility certification of potential recipients, and registration. Parish-based Public Assistance Officers (PAOs) of the Ministry of Social Security (MSS), Poor Relief Officers (PROs) of the Ministry of Local Government (MLG), and clinic officials of the Ministry of Health (MOH) began the enrollment of potential recipients, under directives from the MSS. All potential elderly and indigent beneficiaries were required to undergo a "mean test" investigation to determine their eligibility. A committee of each Parish Council reviewed the application together with the results of the investigation, and approved or denied entitlement. When approval was granted, a program identification card was issued to the beneficiary. This card authorized receipt of a J\$20 food stamp booklet every two months. It also entitled the bearer to free health treatment at government health centers.

Pregnant and breastfeeding women, and children under three years of age, receiving health care at a government facility were deemed to be automatically eligible for food stamps. They did not need to be reviewed and approved by the Parish Councils, but could be registered directly for the stamps.

"Birthing pains" have been experienced at all levels of the program. These are predominantly administrative in nature, and are typical of any new program which begins quickly and is implemented on a broad scale in a short period of time. At this stage of the program's evolution - after seven months - several issues have emerged which, if left unresolved, will create major problems in the future. Addressing these issues calls for considering several policy and procedural changes. These issues, and our recommendations, are divided into two categories; program design, and administrative operation, and are summarized as follows:

A. PROGRAM DESIGN FINDINGS AND RECOMMENDATIONS

1. Food Stamp Value.

The Food Stamp Program was intended to provide increased food purchasing power to the lowest income households in Jamaica, and thereby improve food consumption in the nutritionally vulnerable groups within the population. However, inflation has quickly eroded the food stamp benefits. Food prices for a market basket of commonly eaten foods has increased 72% between December 1983 and March 1985.

Recommendation

The level of food stamp benefits should be indexed to keep pace with inflation. This adjustment in value of the stamps should be done annually.

2. Beneficiary Definition

There are several different concepts of what constitutes a beneficiary - an individual in need and/or economically deprived/nutritionally "at risk", or the household. This distinction is a matter of policy which has profound implications for the program's administration and funding.

Recommendation

Reinforce the concept of the individual as the basic beneficiary.

3. Beneficiary Designation

As conceptualized, the Food Stamp Program was intended, in part, to protect the most nutritionally needy groups in Jamaica against the adverse effects caused by the removal of the Food Subsidy Program. It was assumed that the elderly and indigent, as well as pregnant and breastfeeding women, and children up to the age of three years were

in need of the program. However, three- to four-year old children (i.e., 36 - 48 months) who are not yet in school may also be nutritionally vulnerable, but are not beneficiaries of either food stamps or the School Feeding Program.

Recommendation

Include children in the 36 - 48 month age group in the Food Stamp Program. [This group could currently be accommodated under the 200,000 ceiling set aside for the maternal and child health category.]

4. Program Ceiling

As currently designed, the Food Stamp Program has a ceiling of 400,000 participants. It is apparent that if the need/vulnerability is liberally interpreted, this ceiling will be reached - if not breached - very soon. Funding for the program will ultimately determine its scope. However, it is administratively and politically difficult to deny program benefits to all eligible beneficiaries - by whatever criteria may be established - or to attempt to recoup benefits from individuals once they have received them, in order to redistribute such benefits to others who are "more in need".

Recommendation

The Prime Minister's Office should reassess the current objectives of the Food Stamp Program in terms of what can realistically be accomplished - given the political and financial constraints.

5. Program Evaluation

As currently designed, the Food Stamp Program has both economic and nutritionally stated objectives. The resources currently available do not appear to be commensurate with achieving both of these objectives.

Recommendation

An evaluation plan should be developed which will reflect the Jamaican government's consensus of what the Program can be expected to achieve economically, nutritionally as well as administratively over the next two to three years. (Refer to Dr. Eileen Kennedy's report: Evaluation and Monitoring.)

## B. ADMINISTRATIVE FINDINGS AND RECOMMENDATIONS

### 1. Beneficiary Identification

The present method for keeping track of Food Stamp Program recipients is cumbersome, and rapidly approaching administrative saturation at the local level. The Poor Relief Officers are required to manually transcribe and submit lists of names of all food stamp recipients for each two month distribution cycle. This will eventually require compiling and typing some 400,000 names every two months, nationwide, with additional reference information, in several copies for use at different levels.

#### Recommendation

Computerize preparation and updating of these lists. This will speed up the stamp distribution process as well as alleviate part of the administrative burden on the Poor Relief Officers, freeing up their time for more contact with the public. (Refer to Mr. D. Rudisuhle's report.)

### 2. Progress Reporting

The Ministry of Social Security currently requires a weekly progress/status report from each of the 13 Parishes on the categories and numbers of applicants, registrations, and stamp recipients. Preparation, transmission and processing of the data for this report consumes a considerable amount of administrative time of all personnel at the local level.

#### Recommendation

Reduce the reporting requirement to fortnightly, or monthly, freeing up more local time for other duties.

### 3. Health Category Enrollment

Registration of the maternal and pre-school population for food stamps has been much slower than was originally anticipated. As of 15 March 1985, only 88,000 (or 44%) of this target group had been registered. Of this number, 79,000 (89% of those registered) were reported to have actually received their stamps. There are two plausible reasons for this low registration: one administrative, and the other technical. Administratively, there appears to have been a lack of close coordination between the Ministry of Social Security and the Ministry of Health, and eligible health participants were not in fact 'automatically' registered. Not only the procedures, but both the responsibility and staff for so doing, have been at issue. Success in implementing the Food Stamp Program rests heavily on closer coordination between these two ministries, particularly at the local health centers.

From the technical standpoint, the target levels for the health beneficiaries - at least those serviced by the Health Centers - may be too high. Ministry of Health statistics indicate that only about

100,000 of the approximately 270,000 persons eligible in this category, utilize government health centers. Thus, even if the Food Stamp Program were to significantly increase registration of eligible health center participants, the 200,000 target for the maternal and child group would be difficult to achieve at the present time.

#### Recommendations

- a. The Ministry of Social Security should: (1) encourage the Poor Relief Officers to register recipients directly at local health centers; (2) establish a schedule for regular distribution of food stamps at health centers by Poor Relief Officers.
- b. The Ministry of Social Security and the Ministry of Health should jointly reassess whether the 200,000 person target for the maternal and pre-school category is still a realistic one or whether the quota should be reallocated to the elderly/indigent category.

#### 4. Policies and Procedures

There is a lack of uniform understanding of the Food Stamp Program's policies and procedures, particularly at the local level. For example, the definition of the intended beneficiary was interpreted differently in various locations, and by individual officers at the same location. Consequently, some officers were conservatively certifying only one beneficiary per family and even double entitlement, based on the individual's need. [The categories of indigency and pregnancy, for example, are not mutually exclusive.] The definition of "family" could likewise be interpreted narrowly or broadly.

Procedures for processing applications also differ. In some localities, applications for pregnant women and children were even (incorrectly) being sent to the Parish Council for review, resulting in additional, unnecessary, delays in issuing food stamps.

#### Recommendations

- a. Develop a Policy and Procedures/Operations Manual including guidelines for participant certification, stamp distribution, recording and reporting. This manual would also serve as part of the orientation for new staff involved in the Food Stamp Program.
- b. Provide periodic retraining (at a minimum, semi-annually) for all Poor Relief Officers and other staff involved in the Program's implementation at the local level. This training should cover all aspects of the Food Stamp Program.

## 5. Organization

The management organizational structure for the Food Stamp Program is very complex, involving five ministries, as well as other institutions in Jamaica.

### Recommendations

- a. (1) The current Monitoring Committee should retain policy-making authority for the Food Stamp Program because of its intra-ministerial focus. (2) The Monitoring Committee should also be used as a resource by the Ministry of Social Security.
- b. A new organizational unit should be established in the Ministry of Social Security, with primary, direct management responsibility for the Food Stamp Program. The unit should be headed by a senior level executive who could provide strong leadership in day-to-day operations within the Ministry, as well as closer coordination with external ministries and interested organizations.

## 6. Redeemed Stamp Checking and Disposal

The Ministry of Social Security has a unit which checks the stamps redeemed to the Bank of Jamaica, to ensure that the government only pays out for the stamps actually used. This is a cumbersome and time consuming process, and the bank's error rate is extremely low.

### Recommendation

Institute sampling procedures, rather than 100% checking. Dispose of the used stamps as soon as possible after quality control checking has been conducted. Retrain and reassign this unit's staff to more productive work in program monitoring. (Refer to Mr. Sweeney's report.)

## 7. Management Information Systems

Although the present reporting system provides much useful information for management purposes, it is not readily apparent within the program, where the strong and weak spots are.

### Recommendation

Implement a rank-ordered management information system to monitor program performance by Parishes of key variables.

## 8. Public Information

There is general public knowledge of the existence of the Food Stamp Program. Confusion continues however, on when and where registration is conducted. In the initial stage of implementation the Jamaica Information Service (JIS) cooperated in the Government's efforts to publicize and provide information on the Food Stamp Program

nation-wide. Through public service announcements on radio and television, periodic press releases and public meetings around the country, information on the Food Stamp Program achieved a high degree of circulation. An unfortunate side effect of the publicity is that a great number of applicants who expected timely approval are currently denied participation because the 'cap' on income-related eligibility has been reached. Many of these applicants travel to local Poor Relief Offices or distribution sites to find - after waiting several hours - that their applications have still not been approved. This presents a serious credibility problem for the Food Stamp Program and mistrust of Government pronouncements. Although the publicity has been generally successful, there are many Jamaicans who lack a television set or radio and do not read newspapers. To remedy this situation the JIS has developed a strategy to reach these people by designing posters and writing pamphlets describing the Food Stamp Program and application procedures. These items are proposed for nation-wide distribution to be prominently displayed in even the most remote area. Unfortunately, funding for the printing of these items has precluded their production.

Recommendation

Public information activities should be funded as a continuing part of the Food Stamp Program.

## I. THE JAMAICAN FOOD STAMP PROGRAM

### A. Overview

Objectives: the Food Stamp Program is one of two components of the Government of Jamaica's Food Security Plan.<sup>1</sup> The Food Stamp Program is designed to accomplish two prime objectives:

- 1) To offset the economic effects of devaluation of the Jamaican dollar, as well as removal of subsidies relative to food purchases, for the target groups.
- 2) To maintain the nutritional status of the target group at the then-current, minimal acceptance level.

Scope: The Food Stamp Program is intended to reach 400,000 beneficiaries in two principal categories:

#### 1. Health-related

- pregnant and breastfeeding women, and
- children up to three years of age.

These beneficiaries were expected to be identified and enrolled through their attendance at Ministry of Health Maternal and Child Health Centers.

#### 2. Income-related

- the elderly, incapacitated, poor and indigent.

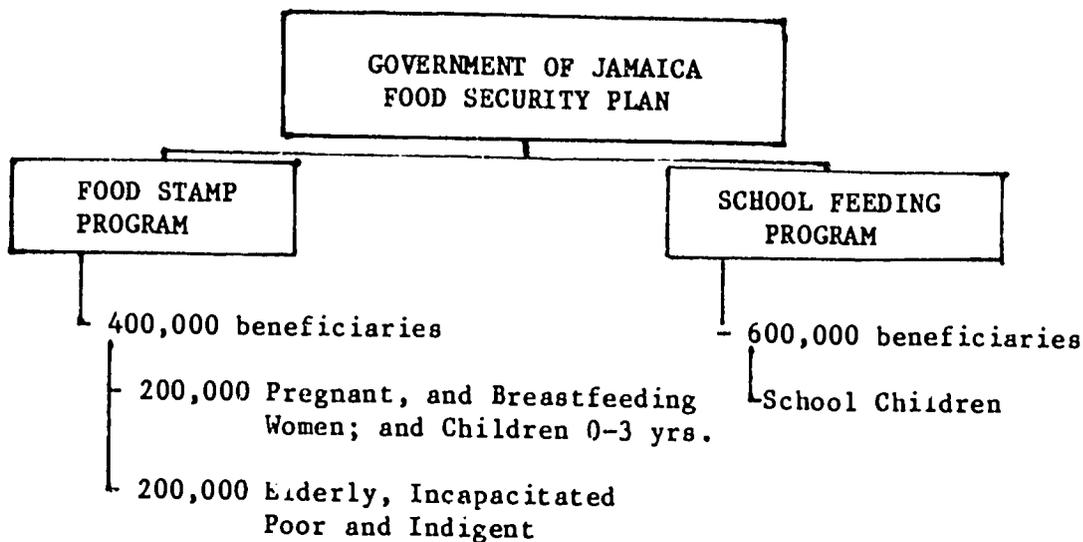
Many of these beneficiaries were currently being assisted (during the program design stage) through various programs of the Ministry of Security (Public Assistance), and the Ministry of Local Government (Poor Relief).

The program is nationwide; conducted in each of the twelve Parishes and the Kingston and St. Andrews Corporation area, and intended to reach approximately 20 percent of the nation's population. The program provided J\$10 of food stamps per month to each recipient, earmarked for procurements of imported food commodities: rice, cornmeal, and skim milk powder.

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<sup>1</sup> The other component of the Food Security Plan is the School Feeding Program, designed to reach 600,000 children. For further information on this program. see: Pyle, David F. and Fitzcharles, Ann. Current Status and Plans for the Expanded School Feeding Program of the Government of Jamaica. USAID/Kingston, Jamaica, October 1984. The John Snow Public Health Group, Inc. (JSI).

In summary, the Plan and Programs are as follows:



Program Design: It was anticipated that these objectives would be achieved by the following activities:

1. a) Location of, and application by potential beneficiaries.  
b) Review, approval and registration of beneficiaries.
2. Distribution of approved commodities to areas accessible to targeted beneficiaries.
3. Procurement and distribution of Food Stamps to targeted beneficiaries.
4. Redemption of stamps for approved commodities, by targeted beneficiaries.
5. Consumption of approved commodities: rice, cornmeal and skim milk powder, by targeted beneficiaries.

These commodities were to be obtained by the Government of Jamaica through various international donor assistance programs such as the U.S. PL 480 and 416 programs and delivered to wholesalers for distribution and retail sales through commercial outlets. It was anticipated that a J\$10 per month income supplement would be adequate to maintain nutritional parity when the controls were removed from food prices.

The amounts programmed for consumption per beneficiary, per month were:

Pregnant and Breastfeeding Women and Children

5 lbs. cornmeal  
2 lbs. skimmed milk powder (3 lbs. for  
nutritionally deficient children)

Elderly, Incapacitated, Poor and Indigent

2 lbs. rice  
3 lbs. cornmeal  
2 lbs. skimmed milk powder

With prices of commodities as follows:

2 lbs. rice @ .75 per lb.	= \$1.50
3 lbs. Cornmeal @ .32 per lb.	= \$ .96
2 lbs. skimmed milk powder @ .83 per lb.	= <u>\$1.66</u>
Total	\$4.12

Three times the quantity estimated above could have been procured (with a concomitant increase in the nutritional value consumed) by the pregnant, breastfeeding women, and children and almost two and a half times the quantity by the elderly, incapacitated, poor, and indigent.

An implicit assumption appears to be that the food purchased for the targeted beneficiary would be consumed by that individual. In practice (except in targeted feeding programs) this is almost never the case. The food procured for the household goes into the family pot, and is consumed by the family in total. In fact, in many instances, it has also been documented that the males of working age tend to receive a disproportionately larger share - at the expense of the other members of the household who are more 'at risk' - the elderly, the children and the mother.

While the Schmidt and Pines Report<sup>1</sup> indicated estimates of requirements based on a household of five, our spot checks (which admittedly were not randomly or systematically selected) tended to indicate extended families considerably larger than this. Time and again we encountered families of ten or more; although they could conceivably be broken down into two or more households - grandparents, parents and children. In this regard, a difference of opinion persists among many of the program's implementers as to the intended target beneficiaries - i.e. whether every individual who meets the eligibility requirements (health status, or means test) should be enrolled or whether there should be a further constraint of not more than one program enrollment per household. Currently, both interpretations are being implemented in different parishes, as well as simultaneously by different officers.

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<sup>1</sup> Schmidt, Christy and Pines, James M. Jamaica's Food Stamp Program: A Technical Review. Nutrition Economics Group, Technical Assistance Division, Office of International Cooperation and Development, US Department of Agriculture, June 1984.

Regardless of the foregoing consumption targets, which were originally established in nutritional terms, since the program was formulated, the economic situation has changed radically and for the worse. With an approximate 72% price increase for the package of commodities over the December 1983 price, the J\$10 per month currently buys little more for the adult beneficiaries than the original amounts targeted. Similarly, the cornmeal and skimmed milk powder now costs J\$6.50 for the children under three years, or almost double the original planned price per unit quantity.

Program Size: An administrative program 'cap' of 400,000 beneficiaries exists. This appears to have been established independent of the need and probably set on the basis of overall budgetary, rather than program 'need' considerations. The population of Jamaica is currently approaching 2.2 million people, and even accepting an average household size of five people, this approximates to 440,000 households. Thus, the program beneficiary size of 400,000 encompasses some 90 percent of the number of households if applied on a 'one beneficiary per household' rationale.

Half of the Program is set aside for pregnant and breastfeeding women, and children 0-3. While this number may be reasonable, in terms of total population demographics, it appears to represent an over-allocation in terms of the population actually being served by the government's health centers. At the same time, the program cannot currently accommodate all the people who meet the basic entitlement criteria with respect to incapacitation and poverty. Since individuals were enrolled on a 'first-come, first-served' basis, a back-log of fully-qualified applicants has developed, to whom the Government is unable to extend assistance. This situation needs to be addressed as soon as possible.

Purpose: Although the Food Stamp Program is a food program, it is primarily an economic supplement where food is the medium rather than the nutritional impact objective. Even at the economic level, however, as was indicated earlier, with inflation, the program has rapidly lost ground.

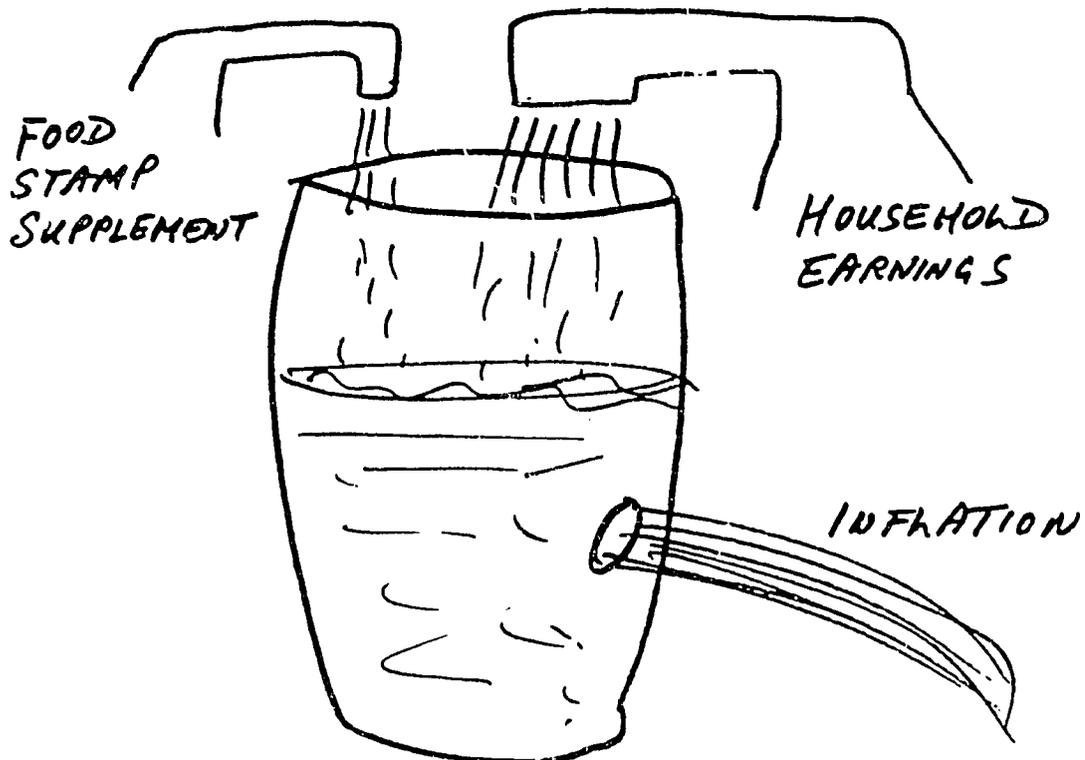
Since the Food Stamp Program can exercise no control over the inflation rate, its major recourse in attempting to maintain equilibrium is to establish a constant index value of the stamps in terms of the commodities which they were intended to procure. This could be done, either by:

- a) periodically increasing the face value of the stamps, or alternatively
- b) demonetizing the stamps and issuing stamps for direct commodity exchange (i.e. 2 lbs. of rice).

While perhaps stabilizing the nutritional aspect, this latter approach, would create tremendous administrative complications as ultimately, at some point they would have to be monetized. This

would also limit the utility and flexibility of the stamps as currently used. Thus this latter course of action is not recommended. Economics will dictate the feasibility of the former approach.

The dynamics of the Food Stamp Program in the face of continuing inflation are depicted below:



<u>Annual Income</u>	
2,600	Household earnings
<u>120</u>	Food Stamp Supplement
2,720	Total Income
-1,523	Inflation @ approximately 56% per annum (simple interest).

With the annual market basket price at approximately \$1,722 or 63% of household income, if this situation continues unabated, the household "barrel" will be empty in less than two more years.

## B. Administration

The Ministry of Social Security (MSS) has overall administration responsibility for the Food Stamp Program (FSP). In delivering this program to its intended beneficiaries, the MSS requires the cooperation and staff participation of employees of both the Ministries of Health and of Local Government.

Within the MSS direct responsibility for day to day operations is vested in the Director of Public Assistance, a senior level official who divides time between the Food Stamp Program and other full-time public assistance activities. The Director is assisted by a recently hired full-time Food Stamp Program expeditor. The expeditor handles routine Food Stamp Program problems and is on-call to respond to questions and issues raised in the parishes as well as within the MSS. A finance officer has custodial care of food stamps housed within the MSS, and arranges for transfer of the stamps from the Bank of Jamaica to the MSS, and for shipment of the stamps from the MSS to the parish offices from which they will ultimately be dispensed. He also is responsible for reconciling stamps after use. In this process he is assisted by a staff of seven clerks who count the stamps and place them in numerical sequence for cancellation and destruction. (Refer to Mr. Rudisuhle and Mr. Sweeney's reports.)

At the parish level, Poor Relief Officers, currently employees of the Ministry of Local Government, dispense the stamps to approved recipients at their offices or at designated distribution points throughout the parishes.

Monitoring of the Food Stamp Program is performed by a high-level committee composed of the Minister of Social Security, Permanent Secretary, Director of Public Assistance and senior representatives from the Ministries of Health, Finance and Education, and the Jamaican Commodity Trading Company and the Planning Institute of Jamaica. The committee meets weekly to review program operations and to make policy and procedural revisions as necessary.

Program registration has been generally satisfactory on the part of Public Assistance Officers, investigators and Poor Relief Officers. MOH clinic enrollments have not met quota expectations. Communications break downs and gaps in the management system have led to misunderstandings and poor coordination of registration procedures between MSS and MOH. This lack of coordination apparently extends from the central level to the parishes and to the community. (See the section on Health Clinic Enrollment for more details of our findings.)

Another potential problem (which appears on the way to resolution) is the status of the Poor Relief Officers. The Poor Relief function and employees will be transferred from the Ministry of Local Government to MSS in April. Some employees expressed concerns over their future because they were not being informed as to changes they might encounter during the transition. MSS is making efforts to assure them that their concerns are resolved in an equitable manner.

Our observations indicate that the Poor Relief Officers are a very dedicated and hard working group of employees who, though hard-pressed to meet their client needs, are diligent and forthright in the conduct of their professional obligations.

## II. FSP - APPLICATION APPROVAL PROCESS

Responsibility for verifying eligibility for participation in the Food Stamp Program is assigned to Parish-based investigators of the Public Assistance Branch of the Ministry of Social Security. The established procedure requires the investigator to interview applicants and verify statements made on the application form, question collateral contacts, and observe the applicants' circumstances, in order to validate conformance with eligibility criteria. After completing of the investigation, the investigator writes a narrative report on the reverse of the application form citing his/her findings, and recommends approval/denial. The application is then forwarded to the Parish Poor Relief Committee for action. The Committee (using FSP criteria and guidelines) reviews the application and renders one of three decisions: 1) approval, 2) disapproval, or 3) deferral-pending the receipt of additional information or authorization from the MSS to add new applicants to the program.

During the initial phase of FSP implementation, parishes received (depending upon population) from five thousand to over twenty-eight thousand applications each of which went through the investigative and committee process. Even with the hiring of temporary investigators on an emergency basis to accelerate the process, the system was sorely taxed to the point where a backlog of work piled up. This resulted in delays of up to five months before applicants could be approved to participate. (Refer to Mr. Rudisuhle and Mr. Sweeney's reports.)

By mid-February, 1985, the target number of FSP recipients was reached in the income-related category (but not in the health-related category). This, in effect, marked the end of the intensive implementation phase of the FSP.

The backlog of pending applications and processing delays was due primarily to the lack of human resources available to devote to the task in this relatively short period of time. It was not due to the basic procedures utilized for application processing.

The present application, investigative and committee review system has worked well and has been effective for other public assistance programs. This system has stood the test of time and both workers and applicants are familiar with this system. It also serves as a buffer for the investigators and Poor Relief Officers. As presently operating, it takes about two weeks to initiate the application, investigate it, and submit it to the parish committee for action.

### Recommendation

Continue the current application procedures but assign a sequential processing ID number to each. This will insure fairness in scheduling and sequencing follow-up activities, i.e., investigation and committee review. It will also provide ongoing count of all applications pending investigations. For a description of the Food Stamp Beneficiary Lists System refer to Mr. Rudisuhl's report. At the moment these lists are processed manually. It is recommended that these lists be computerized and processing be carried out in-house.

### III. PROBLEMS RELATED TO STAFFING AND LOGISTIC SUPPORT

Due to the need to implement the program rapidly nationwide, planners had to compromise program design, systematic planning, development and field testing. As a consequence:

1. No funding for additional staffing and logistic support of the Food Stamp Program - other than limited funding for temporary investigators - has been provided for ongoing program operations.
2. The Food Stamp Program has relied on existing MLG, MSS and MOH personnel, principally parish-based PAO's, PRO's and clinic workers to conduct registration. Each of these employees has also retained full-time responsibilities during Food Stamp Program implementation. In this situation the quality of their normal work obligations has declined and preexisting client needs have often been neglected.
3. There is a lack of uniform understanding of Food Stamp Program eligibility standards - evidenced by differing interpretations of criteria and policy guidelines for participation. This has led to delays in application approval as well as misinformation transmitted to potential applicants.
4. No standardized procedures manual has been developed for use by field workers. Information has been transmitted to the field by periodic directives which has not been circulated to all workers.
5. Presently, Food Stamp Program administration is essentially informal, formidable, and problem-oriented. The Food Stamp Program lacks adequately trained food stamp managers and support staff. All personnel involved in FSP operations are involved on a part-time basis and have competing responsibilities which detract from total commitment to the FSP.

Similarly, policy pronouncements emanating from the FSP Monitoring Committee are ad hoc in nature. Well-developed policy is difficult to formulate in this environment.

6. Information on the Food Stamp Program has generally been effectively transmitted to the majority of the Jamaican population. However, gaps are evident in rural sectors lacking radio, television and newspapers.

#### Recommendations

1. A new organizational unit with primary and direct management responsibility for the FSP should be established in the MSS under the Division of Public Assistance. The unit should be headed by a senior level executive who would provide strong leadership in day to day program operations. In addition, new staff positions should be authorized to provide full-time administrative support to the FSP.
2. Emphasis should be placed on planning, monitoring and evaluation during the course of the program's existence.
3. Standard operating policies and procedures should be developed and printed in a manual which would be provided to all FSP field workers to guide them in their interactions with potential applicants. Employees should be trained in the use of the procedures manual.
4. The Monitoring Committee should retain policy-making authority for the FSP and be used as a resource to the FSP unit should the unit be created.
5. To assure public knowledge of the FSP throughout the country, funding should be provided to underwrite the costs of printing posters and pamphlets for distribution and display island-wide.

#### IV. REDEMMEED STAMP RECONCILIATION AND DISPOSAL AT THE MINISTRY OF SOCIAL SECURITY

The Ministry of Social Security has a unit of seven (7) people who work full time (plus over-time) to monitor the ultimate phase of stamp redemption. This unit insures that the Bank of Jamaica has only paid for the actual number of stamps received from the corresponding banks; and then disposes of the used stamps.

##### A. Present Procedure

Two individuals from the unit pick up cancelled/paid stamps from the Bank of Jamaica, twice a week - on Tuesday and Thursday. Currently they are getting approximately 672,000 stamps per week\* packaged in small bundles of varying sizes, which are then put into larger sacks. The small bundles represent the take from different corresponding banks. A Bank of Jamaica tally lists the bundles and the number of stamps purported to be in each bundle. The tally is enclosed in each sack. (NOTE: the Bank of Jamaica does not count these stamps in the bundles, but merely accepts the count as reported by the corresponding bank. The Bank of Jamaica reimburses each bank based on its count.)

Personnel in the Ministry of Social Security unit first reconcile the bundles against the Bank of Jamaica tally, using both automatic counting machines (2) as well as manual counts. (Frequently, the counting machines jam and the count is questioned). When the count has been completed, any discrepancies are noted, and the Bank of Jamaica is requested to make adjustments in their payments.

The stamps are then laid on a large table, sorted and resequenced by type (Red or Green) and serial number. When a straight series is returned, it is rebundled and boxed, then stacked for storage. No decision has yet been made regarding further disposition.

##### B. Analysis

Counting such a large volume of stamps is a time consuming task, and resequencing them is even more arduous. Furthermore, the error rate of the bank count is extremely low - less than .001% - and consequently the cost of checking for error is greater than any loss from error.

Resequencing the stamps provides a means for detecting duplicate numbered forgeries which might be entered into the system. It also completely accounts for all the stamps which have been issued.

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\* This represents a current surge in activity and backlog from the start of the program since it exceeds the issuance rate of approximately 312,500. It may also reflect individuals cashing their 2 monthly supply in one week.

While identifying duplication may be worthwhile in the future (it has not occurred yet) it is being obtained at a rather high cost. Furthermore, the need for 100% accounting of issued stamps is questionable.

Because the inflow of stamps is currently greater than the unit's processing rate, despite overtime, the unit is falling behind by some 60,000 stamps per week. This is likely to continue to grow as more participants are added to the program, and as subsequent issues of stamps are regularized. There may be some dips in the cycle however if participants do in fact cash in their two month stamp supply during a one week period. There is not yet enough experience with the system to accurately predict the work pattern.

One hundred percent counting is rarely worthwhile, usually is not even 100% accurate, and is inordinately expensive. Consequently, we recommend that only a sampling of the redeemed stamps be checked for error and possible duplication, rather than the entire weekly take.

Random sampling can be done quite easily and rapidly, with minimal cost and still maintain the same or even higher quality control, and degree of accuracy.

#### C. Solution

The bundles should first be sorted into piles according to the corresponding bank redeeming them, and sample bundles drawn from each pile for count verification. If any miscounts are found in these samples, then the entire redemptions from that particular bank's turn-in could be scrutinized. Otherwise the entire submission should be accepted as stated.\*

Similarly, sample bundles of stamps could be drawn from each bank's pile and sequenced to check for possible duplications, rather than the entire weekly take. If any duplications were found, then the entire shipment should be further scrutinized, and the inspectors notified for appropriate follow-up. Otherwise the entire shipment should be accepted. If necessary, sample bundles from previous shipments could also be sequenced together with the current shipment's samples to check whether duplicates were being floated at different times. If no duplicates are detected in the samples, the entire shipment should be accepted.

The stamps should be destroyed as soon as possible thereafter. As long as they are maintained, they present a problem of storage, as well as an invitation to theft, and re-cycling. (Refer to Mr. Sweeney's report.)

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\* The number of samples to draw can be calculated from standard statistical formula. See: AID Publication - Applied Survey Methods for Development Projects.

The personnel involved in the present unit could be taught to handle these tasks with a minimum of on-the-job training. They would have much more interesting work to do than at present, while maintaining the same level of quality, at a much reduced cost. They will also be able to keep up with the workload, whether it increases or fluctuates and will have a considerable amount of time freed up to perform other, productive administrative work, such as more detailed monitoring and/or follow-up of program activity.

#### Recommendation

100% accounting for used stamps should be discounted. Instead, sampling practices should be adopted.

#### V. HEALTH CLINIC ENROLLMENT

The Ministry of Social Security set a 200,000 quota for food stamp registrants for health reasons targeted to pregnant and breastfeeding women, and children up to three years of age. It was anticipated that most of these people would be enrolled in the program through the health centers while attending MCH clinics.

As of 15 March, approximately 88,000 were reportedly registered in this category (or some 44% of the target). Of this number 78,000 stamp booklets (89%) have reportedly been issued by the MSS to Poor Relief Officers for distribution to the beneficiaries. However, there is no report of how many stamp books have actually reached the intended recipients. The overall report is in stark contrast to our findings for Kingston and St. Andrews.<sup>1</sup>

#### Findings

A spot check was made of four Health Centers in the Kingston and St. Andrews Corporation area, to review the procedures for enrolling eligible health beneficiaries under the food stamp program. Two of these centers were located in urban areas, one was suburban and one was in a more rural setting.

The Health Centers serve the entire community, not just the poor, thus it was considered by the Ministry of Social Security that this would be an appropriate point for registration, rather than the Poor Relief Office.<sup>2</sup>

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1 A quick rank-order comparative analysis reveals however that Kingston and St. Andrews is a "Worst Case" situation. See Appendix for details.

2 Note: Since these centers were selected for convenience rather than by scientific random sampling methods, the observations are not statistically valid, and no statistical inferences or extrapolations should be made from the data. Nevertheless the findings are illustrative of what may be happening on a wider scale, island-wide.

There is wide variation between Health Centers on how registration for the Food Stamp Program is done. The general conclusion however, is that to date, very few of the target group at these centers has actually been enrolled yet, and still fewer have been notified that they have been enrolled and have stamps waiting to be picked up. On the other hand, we encountered numerous people who met the eligibility criteria but who had not yet applied for the program because they were unsure how to do so.

There is evidence that a new initiative for registration was launched by the Ministry of Social Security and the Poor Relief Officers as recently as March 15th.

At one extreme, the staff of one center were quite knowledgeable about the food stamp program; it had a public health nurse and registration clerk who have spent some time checking patients to determine their interest in receiving stamps, then screening patients records to prepare registration cards.

At the other extreme, one center indicated that they were not at all involved in the Food Stamp Program, knew only what they heard on the radio, and simply referred all inquiries to the nearest Poor Relief Office. However, they were unable to provide an exact address, location, or directions for finding it.

In the other MCH clinics someone was responsible for Food Stamp registrations, and they had forms on hand. The three centers which were registering applicants had all been contacted in the past week in a similar manner by the Poor Relief Officer and with similar instructions. They were to complete the registration forms and hold them for later pickup.

In one health center, while someone was responsible for registering patients for Food Stamps in the MCH clinic, other staff in the same center were unaware that this was being done and referred inquiries to the Poor Relief Office.

In another center a list of approximately 100 approved individuals had been received from the Poor Relief Office. Registration Cards for another 100 were awaiting pickup for further processing.

The health centers had internal directives from the Ministry of Health to the effect that they should not let Food Stamp Registration interfere with regular health service operations. Consequently, any registration was being done after regular duty hours, even though in one of the four centers, they did have some slack time during the day we were visiting. (The Ministry's caution is well advised - at two of the centers their resources were obviously overburdened by nursing duties and patient care - dozens of mothers and children sitting and waiting while the staff processed and treated them as rapidly as possible.)

Nowhere was there any poster or handout material publicly displayed, or available for the clinic's patients to learn about the details of the Food Stamp Program or to take with them for further guidance.

In addressing some 200 patients at these four centers, most indicated that they knew little more about the Food Stamp Program than that "it existed". Most said they would like to be recipients, but did not know where or how to apply - even in the center which was doing registration after hours.

Problems: The problems experienced in the past were that patients had been advised to contact the Poor Relief Officers and show their health enrollment cards. However this had been insufficient, and they had been turned away. Subsequently, in at least one center, an officer of the Poor Relief or the Ministry of Social Security (they weren't sure which) had visited the center on several occasions and compiled a list of about 1,000 people for stamps. Nothing had even come of this however. (This was about last October).

Now a registration drive has started again, but the staff have very little orientation about who is eligible. There is some question for instance whether a poor, pregnant woman would qualify for both a green book (poor) and a red book (health), or only one; and if so, which. Thus, there is some apprehension that there may be some duplication, and if so where. In any event, all eligibles are now being registered at each clinic held.

Since additional information is required for the Ministry of Social Security's Registration Card than is in the patient record, the card cannot be filled out completely from the patient record. Such items as number of dependents in school, family income, etc. must be obtained from the individual, after hours, necessitating the patient hanging around all day, or returning later. One center is forwarding the registration cards without this information - judging that it is not necessary for the Health qualifications. Another center is holding up the Cards until all the information is complete.

Because patients do not come to the health center regularly each week - their clinics are only on particular days throughout the month - it is anticipated that sign-up will take several months to reach all the current clients. New cases can be accepted as they arrive of course.

Many of the pregnant women do not come to the health clinic until near the end of their second trimester - approximately the sixth month of pregnancy. Since this is late in terms of eligibility for benefits, there is some concern that the health clinic would not be the most appropriate place for them to register for food stamp benefits.

About 15% of the patients interviewed by the registration clerk at one center indicated that they did not want to receive the stamps because they conceived of them as a Poor Relief supplement. They would have been willing to accept them from the clinic as part of the clinic's program, however. This attitude was also confirmed by some of our own selected interviewing of patients.

The health center staff indicated that issuing the stamps from the clinic was not practical, as they had no secure storage for the stamps, while the administrative burden of accounting for the stamps and their issuance would interfere with their clinical work. (They even need additional administrative help for that). Although they had no objections to the Poor Relief Officer issuing the stamps at the clinic, we heard from other sources that the PROs were not in favor of this as they already had other duties to perform and areas to cover, and did not have additional time available to visit health clinics several times a week.

The people on the approved stamp list at the one clinic were supposedly sent notification - via the post office - to pick up their stamps. However, the center staff were apprehensive that the recipients - particularly those in rural areas - wouldn't know about this since mail was held up at the Post Office for pickup, rather than delivered. Furthermore, one individual who had been advised to pick up stamps was not aware of where to get them, and had come to the health center for assistance.

In essence, the health centers are starting to participate in the registration of individuals for food stamps, but most are ill-informed of the details of the process, and unable to answer the questions of potential beneficiaries. Currently, they are not keeping records on the food stamp program, but are merely a conduit for registration. (They have been informed that they will receive 25 cents per individual registered, but this does not seem to be a significant attraction for making any particular outreach efforts. The centers have Community Health Aides (CHAs) who do see the neighborhoods to visit patients, but outpatient registration does not yet seem to have been addressed by them).

In general, the clinic personnel have no idea how many of their eligible patients have actually been enrolled in the Food Stamp Program, nor who among them has received any stamps.

In our contacts with patients in the clinic - verbally requesting the attention of everyone there - we did not discover one individual who had received food stamps. Thus, whatever the registration rate, there is still a tremendous unfilled backlog in these four clinics.

Another problem of which we were made aware was that many individuals do not come to the health clinics for prenatal care, but go directly to the Victoria Jubilee Hospital<sup>1</sup> for delivery. In addition, patients at the Health Clinics are referred to the Hospital for delivery also. However, to the best of anyone's knowledge, there is no registration being done at the Hospital for such individuals, or for new births. If so, this is an oversight which should be rectified.

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<sup>1</sup> A recent study by the Tuskegee Institute of Victoria Jubilee Hospital found that of 400 pregnant teenagers, none were enrolled in the FSP.

From a review of the most recent health center statistics, it appears that the target enrollment of 200,000 people from health centers is far too high, and is thus unlikely to be attained. A more likely target for this eligible group would be 100,000.

Analysis: From MOH statistics<sup>1</sup> - during a year, approximately 59,000 births are expected. Assuming even distribution throughout the year, then in any month, 4,916 births are expected. A pregnant state lasts for approximately 9 months, following which the woman becomes a mother and breastfeeds for approximately 12 months. Therefore for any given month we can expect a maximum of  $12 \times 4,916 = 58,992$  women breastfeeding their babies.

Similarly, each pregnancy results in approximately one child. Thus there are  $36 \times 4,916$  children in the 0 - 36 month range, or 176,976 children.

A net expected eligible population for any given month is thus:

Pregnant Women	4,916
Breastfeeding Women	58,992
Children	<u>176,976</u>
Total	240,884

However, health center statistics indicate that they currently only reach approximately 52% of the eligible children for postnatal care, and 50% of the mothers, and that further about 70% of pregnant women receive health center care. Thus, the expected target should be deflated as follows:

		Exp. Target
70%	Pregnant Women	3,441
50%	Breastfeeding	29,496
52%	Children	<u>92,027</u>
	Total	125,964

or approximately 125,000

There are thus, at least two options open to the Government with respect to health beneficiaries:

1. Start an intensive community outreach program to contact the actual population target of 276,000
- or
2. Reduce the target for health beneficiaries from 200,000 to the approximately 125,000 that would be reached by contact with the health centers.

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<sup>1</sup> Quarterly Statistical Report (Jul -Sep 84) based on the Monthly Clinical Summary Reporting System (MCSR), Health Information Unit, Ministry of Health, Kingston Jamaica, January 1985.

The discrepancies between MSS reports of health participants generally, and the observed participation levels in Kingston and St. Andrews, coupled with the confusion and lag in enrolling eligible health clinic users the Food Stamp Program suggests the need for an intensive review of the MCH registration process. (See Appendix VII on statistics of stamps issued to health-related beneficiaries nationwide, compared to partial estimated demand.)

Recommendations:

1. It is strongly recommended that an additional consultant study be conducted to systematically review MCH registration processes and experience with the Food Stamp Program, island-wide, and make recommendations for improvement in coordination with the Ministry of Social Security.
2. A special announcement should be circulated to all Food Stamp Workers indicating that Health Clinic Registration Cards are acceptable proof of eligibility for food stamps.

VI. MANAGEMENT INFORMATION SYSTEM

The Ministry of Social Security currently publishes a weekly progress report of the Food Stamp Program. (See Appendix VI.).

A weekly report consumes a considerable amount of staff time, effort and cost (both direct and indirect) to produce, distribute and assimilate. Its value, like a newspaper, is also short-lived since the information it contains is quickly superseded by an updated edition. In our experience, such rapid updating of program status is rarely worth-while once initial start-up momentum has been attained.

While this weekly report contains much raw data for management monitoring and control, it is essentially an unanalyzed worksheet matrix. Data received from the parishes is summarized in spreadsheet form and totaled. Other than the overall targets of 200,000 registrants for Health, and another 200,000 registrants for Public Assistance & Poor Relief, there are no intermediary performance targets established.

Without further analysis of performance against some criterion/reference points, evaluation of performance is not possible, and it is difficult to detect degrees of good or poor performance on various aspects by the different parishes. Without such intermediary quality control, the Program's staff management is not able to exercise its monitoring and control responsibilities effectively.

By restructuring the existing data, as well as combining it with some other readily available data elements, comprehension, analysis, and consequently Program monitoring and management could be significantly improved. The restructured data should present parish activities in the form of a comparative rank-ordered performance analysis for each critical variable of interest to the program manager.

While no absolute performance criterion may exist in every instance, comparative analysis in this manner enables the program manager to rapidly scan the range of performances (from high to low) for any critical variable. The extremes can then be singled out for closer attention and follow-up, to discern the reasons therefor. Too high an accomplishment may indicate a superficial job, overstaffing or under work-load; while too low a rate of accomplishment may indicate more effort expended than necessary, or an overburdened staff. In any event, the reason for regional differences should be ascertained before initiating corrective action.

Each of the data elements and critical variables recommended for monitoring by the Food Stamp Program Manager are illustrated on the following pages, with an explanation of their utility.

We suggest that the Ministry of Social Security reconsider whether the management of the FSP would be seriously compromised if in the future such updating were to occur less frequently. We suggest a monthly, or at a minimum fortnightly reports, and elimination of the weekly report.

#### Recommendation

We recommend that the Ministry of Social Security implement a rank-ordered management information system to monitor program performance.

CRITICAL VARIABLE 1. APPLICATION RATE  
 APPLICATIONS FOR FOOD STAMPS, AS A PERCENTAGE OF POPULATION

VALUE: To identify the comparative priority for food stamps among parishes.

<u>RANK ORDER</u>	<u>PARISH</u>	<u>ESTIMATED POPULATION</u>	<u>(FA 1s) APPLICATIONS RECEIVED</u>	<u>APPLICATIONS AS % OF POPULATION</u>
1	Hanover	62,600	9,676	15.46
2	Portland	74,100	11,402	15.39
3	Westmoreland	121,700	16,575	13.62
4	St. Elizabeth	138,900	17,382	12.51
5	Trelawney	67,400	7,551	11.20
6	Clarendon	204,500	21,745	10.63
7	St. Mary	106,900	10,133	9.48
8	St. Ann	140,000	13,125	9.38
9	Manchester	146,800	13,603	9.27
<u>10</u>	<u>St. Thomas</u>	<u>79,900</u>	<u>6,904</u>	<u>MEAN 8.64</u>
11	St. Catherine	332,800	23,316	7.00
12	St. James	135,600	7,123	5.25
13	Kingston & St. Andrew	604,700	28,552	4.72
	TOTAL	2,215,900	187,087	MEAN 8.44

NOTE: This table is primarily informational rather than performance oriented.

CRITICAL VARIABLE 2. APPLICATION DUE  
 APPLICATIONS RECIEVED AS A PERCENTAGE OF APPLICATIONS  
 ANTICIPATED

VALUE: To identify the comparative priority of Parishes for  
 monitoring Program performance

<u>RANK ORDER</u>	<u>PARISH</u>	<u>NUMBER OF APPLICATIONS ANTICIPATED*</u>	<u>APPLICATIONS RECEIVED</u>	<u>APPLICATIONS RECIEVED AS % OF ANTICIPATED</u>
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NOTE: \* This may be based on a percentage of the  
 population, or any other meaningful criterion. Data  
 does not currently exist.

When completed, it will indicate the areas where the  
 greatest work backlogs exist (low %) and thus where  
 additional staff help may be required. The high  
 performance areas (high %) indicates likely sources of  
 such experienced help on a temporary basis.

CRITICAL VARIABLE 3. INVESTIGATION RATE  
 APPLICATIONS INVESTIGATED AS A PERCENTAGE OF APPLICATIONS  
 RECEIVED

VALUE: To identify the comparative performance of Parish  
 investigators re: the Food Stamp Program

<u>RANK ORDER</u>	<u>PARISH</u>	<u>APPLICATIONS RECEIVED</u>	<u>APPLICATIONS INVESTIGATED</u>	<u>APPLICATIONS INVESTIGATED AS % OF RECEIVED</u>
1	St. Ann	13,125	13,014	99.15
2	Hanover	9,676	9,507	98.25
3	St. Thomas	6,904	6,728	97.45
4	Kingston & St. Andrew	28,552	27,774	97.28
5	Westmoreland	16,575	16,093	97.09
<u>6</u>	<u>Manchester</u>	<u>13,603</u>	<u>12,917</u>	<u>MEAN 94.96</u>
7	St. Catherine	23,316	21,612	92.69
8	Trelawny	7,551	6,934	91.83
9	St. James	7,123	6,508	91.37
10	St. Elizabeth	17,382	15,795	90.09
11	Portland	11,402	10,118	88.74
12	Clarendon	21,745	19,012	87.43
13	St. Mary	10,133	8,841	87.25
	TOTAL	287,087	174,853	MEAN 93.46

NOTE: This table indicates where delays may be occurring in  
 the system because of untimely investigation practices.

CRITICAL VARIABLE 4. PARISH COMMITTEE REVIEW RATE  
 APPLICATIONS ADJUDICATED BY PARISH COMMITTEE AS A PERCENTAGE  
 OF APPLICATIONS INVESTIGATED

VALUE: To identify the comparative performance of Parish  
 Committees re: the Food Stamp Program

<u>RANK ORDER</u>	<u>PARISH</u>	<u>APPLICATIONS INVESTIGATED</u>	<u>APPLICATIONS ADJUDICATED</u> (+ Duplicates)	<u>APPLICATIONS ADJUDICATED AS % OF INVESTIGATED</u>
1	St. Elizabeth	15,795	16,471	* 104.28
2	Kingston and St. Andrew	27,774	27,510	99.41
3	St. Mary	8,841	8,846	95.08
4	St. Catherine	21,612	19,461	90.00
5	Portland	10,118	9,064	89.58
6	Hanover	9,507	8,218	MEAN 86.44
7	Manchester	12,917	11,014	85.27
8	Trelawny	6,934	5,699	82.19
9	St. Ann	13,014	10,282	79.01
10	St. James	6,508	5,069	77.89
11	St. Thomas	6,728	5,147	76.50
12	Westmoreland	16,093	11,170	69.41
13	Clarendon	19,012	12,274	64.46
	TOTAL	174,853	149,885	mean 85.72

\* Indicates probable error in data.

CRITICAL VARIABLE 5. MINISTRY OF SOCIAL SECURITY REGISTRATION  
 RATE  
 APPLICATIONS REGISTERED BY PARISH PUBLIC ASSISTANCE OFFICE, AS  
 A PERCENTAGE OF APPLICATIONS APPROVED

VALUE: To identify the comparative performance of Parish  
 level Ministry of Social Security Offices in  
 processing approved applications

<u>RANK ORDER</u>	<u>PARISH</u>	<u>APPLICATIONS APPROVED</u>	<u>APPLICATIONS REGISTERED</u>	<u>APPLICATIONS REGISTERED AS % OF APPROVED</u>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

NOTE 1: This should include those individuals Brought into the system directly to the registration phase, (such as health clinic participants) even though no formal application was required.

NOTE 2: The data in the MSS report is not consistent with this format. For instance, total approvals = 138,720, while total receiving benefits = 142,071, yet total registered = 276,812 or 251,815. This data needs to be researched further.

NOTE 3: When completed, this table should provide a useful indication of administrative bottlenecks in registering applicants in the Ministry Parish Offices.

CRITICAL VARIABLE 5a; HEALTH REGISTRATIONS FOR FOOD STAMPS  
 AS A PERCENTAGE OF ELIGIBLE HEALTH CLINIC CLIENTELE  
 (Pregnant, Breastfeeding, & Children 0-3)

Value: To identify the performance of the Ministry of Health & Social Security  
 in registering health-related beneficiaries in the Food Stamp Program

<u>RANK ORDER</u>	<u>PARISH</u>	<u>HEALTH RELATED REGISTRANTS</u>	<u>ELIGIBLE HEALTH CLIENTELE</u>	<u>REGISTRANTS AS A % OF ELIGIBLES</u>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

NOTE 1: This data does not exist in one place, but could be readily derived from the Ministry of Health Quaterly Statistical Reports, and coupled with the Ministry of Social Security's Stamp Issuance Report. This would provide a useful tool for monitoring the Health Enrollment aspect of the Food Stamp Program.

NOTE 2: Subsequent Variable Analyses (6,7 and 8) could also be broken out in a similar manner to monitor the delivery system for the health-related beneficiaries separately from the others.

CRITICAL VARIABLE 6. STAMP DELIVERY RATE (INITIAL)  
 FOOD STAMP BOOKS DELIVERED TO PARISH AS A PERCENTAGE OF  
 REGISTRANTS

VALUE: To identify the performance of the Ministry of Social Security Head Office in supporting the various Parishes for program start up.

<u>RANK ORDER</u>	<u>PARISH</u>	<u>NUMBER OF REGISTRANTS</u>	<u>INITIAL FOOD STAMPS DELIVERED TO PARISHES</u>	<u>FOOD STAMP BOOKS DELIVERED AS % OF REGISTRANTS</u>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

NOTE 1: The data in the Ministry of Social Security is not clear with respect to these requirements and should be researched further.

NOTE 2: When completed, this table will indicate the extent to which the Ministry of Social Security Head Office, in Kingston may be a delaying factor in program implementation of particular Parishes.

CRITICAL VARIABLE 7. STAMP DELIVERY RATE  
 (1ST, 2ND AND SUBSEQUENT)  
 FOOD STAMP BOOKS DELIVERED TO PARISH AS A PERCENTAGE OF BOOKS  
 REQUESTED

VALUE: To identify the performance of the Ministry of Social Security Head Office in supporting the various Parishes for continuous operation.

<u>RANK ORDER</u>	<u>PARISH</u>	<u>NUMBER OF BOOKS REQUESTED</u>	<u>NUMBER OF BOOKS DELIVERED</u>	<u>BOOKS DELIVERED AS % OF REQUESTED</u>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

NOTE 1: The data in the Ministry of Social Security is not clear with respect to these requirements.

NOTE 2: When completed, this table will indicate the extent to which the MSS in Kingston may be a delaying factor in program implementation of particular Parishes.

CRITICAL VARIABLE 8. STAMP DISTRIBUTION RATE  
 FOOD STAMP BOOKS DISTRIBUTED TO RECIPIENTS AS A PERCENTAGE OF  
 STAMP BOOKS RECEIVED

VALUE: To identify the comparative performance of Ministry of  
 Social Security Parish Offices in

<u>RANK ORDER</u>	<u>PARISH</u>	<u>FOOD STAMP BOOKS RECEIVED FROM KINGSTON</u>	<u>FOOD STAMP BOOKS DIST- RIBUTED TO PROGRAM PARTICIPANTS</u>	<u>BOOKS DISTRIBUTED AS % OF BOOKS RECEIVED</u>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

NOTE 1: The data to complete this table is not contained  
 directly in the MSS weekly Progress Report.

NOTE 2: When completed, this table should provide guidance on  
 the areas where MSS field staff are performing well or  
 having difficulty in meeting Program objectives.

CRITICAL VARIABLE 9. WORK LOAD ANALYSIS  
 PROGRAM REGISTRANT: PROGRAM OFFICER RATIO

<u>RANK ORDER</u>	<u>PARISH</u>	<u>NUMBER OF PROGRAM OFFICERS</u>	<u>NUMBER OF PROGRAM REGISTRANTS</u>	<u>REGISTRANTS TO OFFICER RATIO</u>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

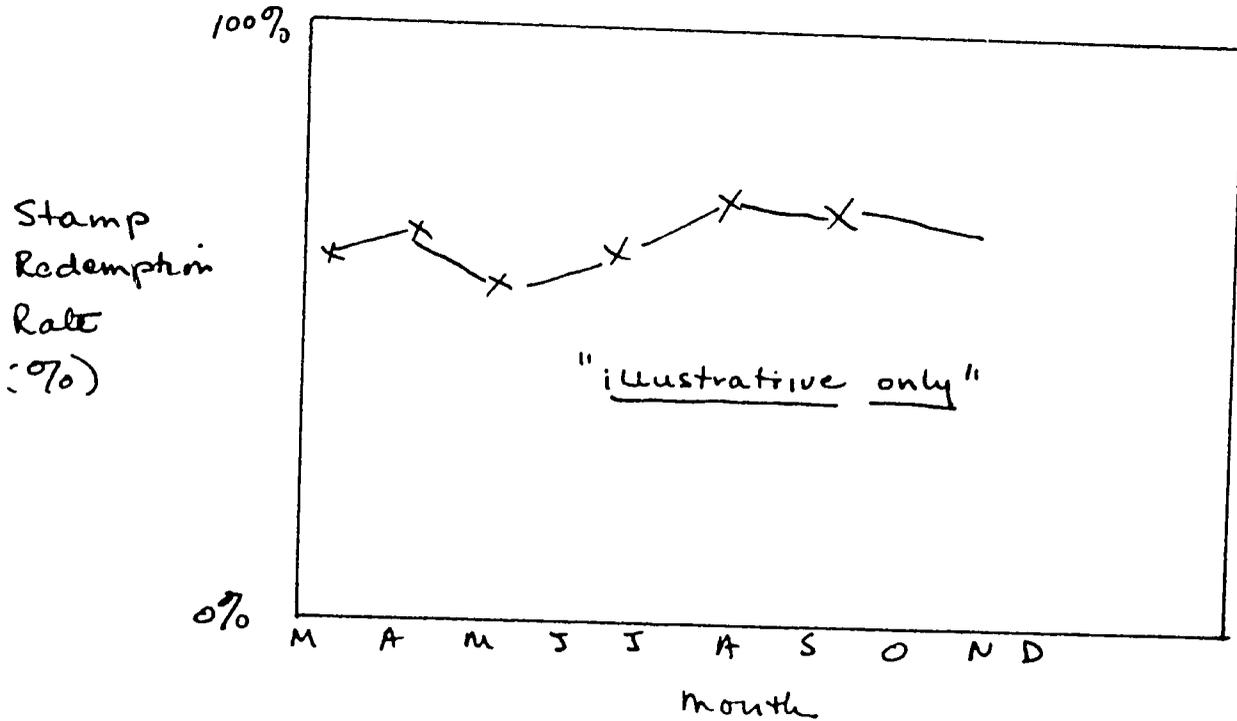
NOTE: This data is not available from the Weekly Progress Report.

However once completed, it will provide valuable insight into performance - especially when used in conjunction with some of the other tables of critical variables.

CRITICAL VARIABLE 10. STAMP REDEMPTION RATE  
 STAMPS REDEEMED AS A PERCENTAGE OF STAMPS DISTRIBUTED.

NATIONAL ONLY

$$\frac{\text{TOTAL STAMPS REDEEMED}}{\text{TOTAL STAMPS DISTRIBUTED}} \times 100 = \text{STAMP REDEMPTION RATE}$$



NOTE: This single rate, tracked over a period of time, should provide an indication of efficiency - turnaround time in redeeming stamps.

Further if the rate exceeds 100% - i.e. if more stamps are redeemed than distributed, - it will flag that leakage (fraud) is being perpetrated somewhere in the system.

All of the foregoing variables (and others) may be used in conjunction with a field monitoring and follow-up staff.

By summarizing the individual Rank Order reports and noting the Parishes which fall consistently and/or predominantly below the mean, poor performers can be rapidly isolated for further scrutiny, and high performers singled out for recognition and reward, as appropriate.

A summary performance report can be developed by reverse 'weighting' the rank orders (i.e. Rank Order "1" = 13 points and "2" = 12 points, etc., to R0 13 = 1 point.).

By summing the points for each Critical Variable, for each Parish, a Parish Score can be developed. Thus, with Nine separate Provincial Variables, scores could conceivably range from a low of "9" to a high of "117" (i.e. 9 x 13). Realistically, however, one would expect that performance would vary on different aspects of the Program. Nevertheless, such a system provides valuable insight for monitoring and control, by comparative analysis.

Copies of the analysis should also be provided to the participant Parishes so they can appreciate their standing with respect to their peers.

Similar monitoring and control can be exercised by Parish level management of some of these indicators to discriminate good, satisfactory and mediocre performance by individual staff officers.

APPENDIX I

Basic Data on Jamaica

Population	2,092,400
Percentage of Population in Rural Areas (1982)	53.7
Annual growth Rate (Percentage)	1.4
Crude Birth Rate (1981) - per 1,000 population	26.3
Life Expectancy (1970)	68.5
Infant Mortality Rate - per 1,000 live births	23
Calorie Intake as percentage of Requirements (1974-78)	119
Adult Literacy Rate (%)	86
Primary School Enrollment (%)	97
Per Capita GNP (1984 est.)	less than US\$1,000
Current Inflation Rate (1984 est.)	approx, 30% per year
Percentage of land owned by top 10% of owners (1961)	74.6
Percentage of land owned by smallest 10% of owners (1961)	1.6

Sources:

Demographic Statistics, 1983 - The Statistical Institute of Jamaica

Population Census 1982 - Preliminary Report - Population Census Office, Department of Statistics

Registrar General's Department Vital Statistics Publication, Births 1977-81

Statistical Yearbook of Jamaica 1981 - Department of Statistics

APPENDIX II

ESTIMATED COSTS UNDER THE JAMAICAN FOOD STAMP PROGRAM

COSTS

The original Program costs were based on the December 1983 price estimates. Thus, for the Poor, indigent, incapacitated and elderly, the programmed amount of commodities would cost as follows:

2 lbs. rice @ .75/lb.	=	\$1.50
3 lbs. cornmeal @ .32/lb.	=	.96
2 lbs. skimmed milk powder @ .83/lb.	=	<u>1.66</u>
Total 1983 cost		= \$4.12

Since the Stamp Program was for \$10 per month, in fact the recipient could purchase:

$\frac{10}{4.12} = 2.4$  times as much as the above programmed amount of food in the same proportions.

Similarly, the programmed amount of commodities for the Pregnant and Breastfeeding Women, and Children would cost:

5 lbs. cornmeal @ .32/lb.	=	\$1.60
2 lbs. skimmed milk powder @ .83/lb.	=	<u>1.66</u>
Total 1983 cost		= \$3.26

and the recipient could thus purchase:

$\frac{10}{3.26} = 3.1$  times the amount programmed.

With current (1985) costs, the situation has changed, as follows:

Poor, etc.

2 lbs. rice @ \$1.30/lb.	=	\$2.60
3 lbs. cornmeal @ .60/lb.	=	1.80
2 lbs. skimmed milk powder @ \$1.75/lb.	=	<u>3.50</u>
TOTALING		= \$7.90

Pregnant and Breastfeeding Women, and Children		
5 lbs. cornmeal @ .60/lb.	=	\$3.00
2 lbs. skimmed milk powder @ \$1.75/lb.	=	<u>3.50</u>
TOTALING		= \$6.50

Thus the effective purchasing power for the Poor, etc. was reduced to:

$\frac{10}{7.9} = 1.26$  times as much as the amount of food programmed and that of the Pregnant and Breastfeeding Women, and Children reduced to:

$\frac{10}{6.5} = 1.54$  times as much as the amount of food programmed.

APPENDIX III

March 1985 Market Basket Prices for a Household of 5\*  
(Jamaican dollars)

Compared to Food Stamp Commodities	DEC. 1983	MARCH 1985	% CHANGE
5 lbs. rice	4.50	7.80	73
6 lbs. cornmeal	1.92	3.60	88
2 lbs. skimmed milk powder	<u>1.66</u>	<u>3.50</u>	<u>111</u>
Sub-Total	<u>8.08</u>	<u>14.90</u>	<u>84%</u>
6 lbs. green bananas	1.80	2.40	33
4 lbs. sweet potatoes	3.20	3.70	16
2 lbs. dried peas (1 quart)	8.00	12.00	50
2 lbs. calaloo	1.40	1.80	29
2 lbs. pumpkin/carrots	1.60	2.86	79
2 lbs. cabbage	1.60	2.35	47
1 doz. oranges (3 lbs.)	2.50	3.00	20
1/2 doz. limes (6 oz. juice)	0.40	0.60	50
1/2 doz. ripe bananas (3 lbs.)	1.50	1.33	-11
6 lbs. flour	2.70	4.60	70
4 lbs. bread	3.68	5.74	56
1 lb. crackers	2.18	3.58	64
5 lbs. chicken necks and backs	3.25	10.00	208
1/2 lb. salt fish	1.75	4.35	149
2 lbs. pork (medium fat)	6.00	11.90	98
2 lbs. canned mackerel (4 tins)	3.20	9.60	200
2 lbs. tripe	5.00	13.00	160
1 lb. minced beef	4.50	5.80	29
1 quart cooking oil	7.20	11.38	58
2 lbs. margarine	6.92	8.45	22
6 lbs. dark brown sugar	4.32	6.00	39
2 tins sweetened condensed milk	2.80	4.20	50
<b>TOTAL</b>	<b>83.58</b>	<b>143.58</b>	<b>72 %</b>

\* Source of baseline (December 1983) data - Schmidt & Pines Report, June 1984, op. cit., pp. 63-64 - excluding J\$5 for spices, beverages and condiments. (Since these were not quantified, it was not possible to develop a comparative price). The March 1985 data was obtained and developed by averaging the findings from spot checks at various stores in Kingston, Westmoreland, St. James and St. Ann Parishes during the week 3 - 9 March 1985. While this data is not purported to be statistically definitive - due to non-random manner in which it was obtained, nevertheless it is illustrative of the general trend in increased food prices. The food stamp commodities - rice, cornmeal and skimmed milk powder - are government controlled prices, and are considered valid and reliable. The prices quoted did not vary, and were also verified by spot checks with consumers.

APPENDIX IV

Jamaican Population Estimates  
as of March 1985\*

Parish	December 1982	December 1983	Percentage Growth Rate		March 1985
			i,2	i,5	
Kingston & St. Andrew	570,500	585,400	2.6	3.3	604,700
St. Thomas	77,000	78,300	1.7	2.1	79,900
Portland	71,400	72,600	1.7	2.1	74,100
St. Mary	102,300	104,300	2.0	2.5	106,900
St. Ann	133,700	136,500	2.1	2.6	140,000
Trelawny	65,600	66,400	1.2	1.5	67,400
St. James	129,100	123,000	2.2	2.7	135,600
Hanover	61,000	61,700	1.2	1.5	62,600
Westmoreland	117,200	119,200	1.7	2.1	121,700
St. Elizabeth	133,700	135,900	1.8	2.2	138,900
Manchester	137,700	141,700	2.9	3.6	146,800
Clarendon	196,600	200,100	1.8	2.2	204,500
St. Catherine	318,800	325,000	1.9	2.4	332,800
<b>JAMAICA</b>	<b>2,114,600</b>	<b>2,159,100</b>			<b>2,215,900</b>

\* Based on extrapolation of differential Parish growth rates between the end of 1982 and 1983, as outlined in Demographic Statistics 1983. The Statistical Institute of Jamaica (Kingston, May 1984), p.3. The 15 month interest rate was approximated by adjusting the 12 month rate as follows:

$$i_{15} = \frac{i_{12}}{12} \times \frac{15}{1}$$

The 1985 estimate was then rounded to the nearest 100.

APPENDIX V

Stamp Reconciliations

Input: The Ministry of Social Security picks up approximately 16 sacks of stamps, containing approximately 21,000 stamps each two times a week.

Thus:  $16 \times 21,000 \times 2 = 672,000$  stamps per week.

Output: Seven (7) people in the ministry count, sort and repack the stamps for reconciliation and dispositor, at approximately the following weekly rates:

6 people x 6 days x 15,000 stamps per day = 540,000 stamps  
per week  
plus 1 person x 5 days x 15,000 stamps per day = 75,000 stamps  
per week  
for a total of approximately 615,000 stamps per week.

This represents a handling time of approximately 2 seconds per stamp per person, which is a high rate of work, and cannot be expected to be maintained over a long duration, or without significant error being introduced.



APPENDIX VII  
STAMPS REPORTEDLY ISSUED TO PARISHES, BY TYPE  
(CUMULATIVE, AS OF 15 MARCH 1985)

<u>PARISH</u>	<u>(INCOME-RELATED)</u> <u>Green Stamps</u>	<u>(HEALTH-RELATED)</u> <u>Red Stamps</u>	1984 ESTIMATED NUMBER OF PREGNANT WOMEN
KINGSTON & ST. ANDREWS CORPORATION	27,900	3,200	16,742
St. Thomas	13,900	8,000	2,295
Portland	28,080	5,000	1,876
St. Mary	16,000	9,500	2,602
Trelawney	14,000	2,500	1,740
St. James	18,000	8,100	3,937
Hanover	21,000	8,000	1,437
Westmoreland	21,400	9,000	3,184
St. Elizabeth	18,000	5,500	3,441
Manchester	19,000	7,000	3,824
Clarendon	22,000	9,000	5,572
St. Catherine	24,000	4,200	9,059
TOTAL	232,380	78,000	59,079

Source: Stamp data obtained from Ministry of Social Security's log books of stamp issuances.

Estimates of numbers of pregnant women obtained from Ministry of Health's Quarterly Statistical Report.

NOTE: While pregnant women are not the only category to receive red stamps, using this as a proxy, Kingston & St. Andrews Corp is experiencing major problems - compared to the other Parishes - in meeting the needs of the Health-related group. St. Catherine is also behind the curve, for some reason.

## APPENDIX VIII

### Project Design

In 'Logical Framework' terminology, the narrative summary of the Food Stamp Program as expressed in the PM paper was as follows:

#### Goal

To maintain the nutritional status of the target group at the current, minimal acceptable level.

#### Purpose

To offset the economic effects of devaluation of the Jamaican dollar for the target group, relative to food purchases.

#### Outputs

1. a) Location of, and application by potential beneficiaries;  
b) Approval and registration of beneficiaries.
2. Distribution of approved commodities to areas accessible to targeted beneficiaries.
3. Procurement and distribution of food stamps to targeted beneficiaries.
4. Redemption of stamps for approved commodities, by targeted beneficiaries.
5. Consumption of approved commodities by targeted beneficiaries.

#### Inputs

1. Food commodities procured, shipped and delivered to wholesalers:
  - a) Rice
  - b) Cornmeal
  - c) Skimmed Milk Powder
2. Food Stamps
3. Commodities (other than food) (i.e. equipment and supplies)
4. Technical Assistance
5. Training
6. Staffing
7. Public Information

It was anticipated that a J\$10 per month income supplement to some 400,000 beneficiaries in the target group (in the form of food stamps) would be adequate to maintain nutritional parity in the face of economic devaluation which was eroding household purchasing power.

APPENDIX IX

LIST OF PERSONS INTERVIEWED

Bank of Jamaica

Mr. Rupert Straw - Manager - Banking Operations

Jamaica Commodity Trading Company

Mrs. Andree Nembhard - Purchasing Manager

Mrs. Hillary Stuart - Supply Manager

Mr. Anton Thompson - Trading Manager

Jamaica Information Service

Ms. Joan Levitt - Consultant and Training Officer

Ministry of Finance

Mrs. Jean Marshalleck - Director of Budget

Mrs. Carol Jones - Financial Analyst

Mr. Miller - Financial Secretary

Ministry of Health

Dr. Carmen Bowen-Wright - Chief Medical Officer, Primary Care

Mrs. Kathleen Rainford - Director Nutrition Division

Doriell Jones - Senior Public Health Nurse K.S.A.C.,  
Zone IV Supervisor

Carmen Drummond - Public Health Nurse, Supervise Health  
Center KSA

Victoria Nelson - Registration Clerk, Sunrise HC

Valerie Gayle - Public Health Nurse, Waltham Park Road HC

Carmen McPherson - Records Clerk, Waltham Park Road HC

Jean French - Registered Midwife, Stoney Hill HC

Brenda Carnegie - Registered Nurse, Lawrence Tavern HC

Pamela Campbell - Enrolled Nurse, Lawrence Tavern HC

Marjorie Cole - Community Health Aide, Lawrence Tavern HC

Ministry of Local Government

Mr. Edward Miller - Permanent Secretary

Mrs. La Touche - Chief Poor Relief Officer, Kingston,  
and St. Andrew

Mr. Lancelot Tullis - Chief Inspector, Poor Relief,  
Westmoreland Parish

Mr. John Owen - Deputy Inspector, Poor Relief, Westmoreland

Mr. Stanley Smith - Chief Inspector, Poor Relief, St. Ann

Miss Beverly Marshall - Poor Relief Officer, St. Ann

Ministry of Public Service

Mrs. Sadie Keating - Director, Management Services Division  
Mrs. Sharon Callen - Management Analyst

Ministry of Social Security

Hon. Dr. Neville Gallimore, M.P. - Minister of Social Security  
Hon. Enid Bennett, M.P. - Minister of State  
Mr. Dennis Brown - Director, Board of Supervision  
Mrs. Merle Brown - Permanent Secretary  
Mrs. Helen Gordon - Director, Public Assistance  
Mrs. Sybil Johnson - Expediter, Food Stamp Program  
Mr. Edward Gatcher - Finance Officer

Parish Offices

Westmoreland

Mr. Kenneth Rodney - Manager, Public Assistance  
Leolyn Foskin - Supervisor, Public Assistance  
Joyce Ennis - Acting Investigator  
Daphne Gammon - Temporary Investigator  
Eunice Clayton - Clerk  
Cheryl Reid - Typist  
Eula Ellis - Food Stamp Recipient  
Euphemia Ellis - Food Stamp Applicant  
Evelyn Clayton - Food Stamp Applicant  
Mrs. Brown - Shop Keeper

St. Ann

Mrs. Gloria Johnson - Manager, Public Assistance  
Marlene Miller - Investigator  
Doreen King - Investigator  
Winnifred Lamm - Investigator  
Pamela Williams - Clerk  
Elais Marshall - Clerk  
Jacqueline Samuels - Typist

Planning Institute of Jamaica

Miss Carole Dixon - Director, Projects Development Division  
Mrs. Marjorie Henriques - Head, Technical Assistance

United States Agency for International Development

Ms. Francesca Nelson - Project Officer  
Mr. John Coury - Director, Office of Health/Nutrition/  
Population  
Mr. John Jones - Program Officer  
Mrs. Grace Simons - Program Officer



APPENDIX XI

**MINISTRY OF SOCIAL SECURITY  
FOOD AID PLAN  
REGISTRATION CARD**

No. 

--	--	--

NAME.....(See over)

National Registration No.....

FORM FAS  
5.84

**IMPORTANT**

1. Keep this Card in a safe place.
2. Quote the number overleaf when writing to the Ministry.
3. If this Card is found, send or take it to any office of the Ministry.

G.P.O.

**PUBLIC HEALTH DEPARTMENT  
JAMAICA, W.I.**

1. This card will be required with  
BIRTH CERTIFICATE

for

ADMISSION TO SCHOOL

IMMUNISATION

RECORD CARD

2. In the event of accident or  
injury – the information  
contained in this card will  
be useful to your doctor.

KEEP IT CAREFULLY

Name .....

Date of Birth .....

**THIS CARD SHOULD BE CAREFULLY  
KEPT IN THE PLASTIC ENVELOPE**

NAME.....DATE OF BIRTH.....SEX.....

NAME OF PARENT.....ADDRESS.....

SCHOOL/CLINIC.....

IMMUNISATION	CHILD WELFARE CLINIC			PRE SCHOOL		SCHOOL/ADULT		
1. Triple Vaccine (D.P.T.)								
2. Polio								
3. Smallpox								
4. Tetanus Toxoid								
5. Tuberculin Test								
B.C.G. Vaccine								
TAB/TAB/TT								

**DELIVERY**

Hospital  Midwife  Midwife (home)  Other

Date \_\_\_\_\_ Time \_\_\_\_\_ Approx Score \_\_\_\_\_

Sex M  F

Weight \_\_\_\_\_ Serology \_\_\_\_\_ Blood Group \_\_\_\_\_ Rh \_\_\_\_\_

Card Blood \_\_\_\_\_ S.C.G. Given  Not Given

POSTPARTUM CLINIC REFERRED TO \_\_\_\_\_ DATE OF APPOINTMENT \_\_\_\_\_  
**POSTPARTUM - Home Visits**

URINE					Remarks
Day	T	S.P.	Seg.	Alb.	

**POSTPARTUM - Clinic Visit** DATE \_\_\_\_\_

Breasts \_\_\_\_\_ Abd. \_\_\_\_\_ Pelvic \_\_\_\_\_ S.P. \_\_\_\_\_ Rb. \_\_\_\_\_

Seg. \_\_\_\_\_ Pap Smear  Done  Not Done  
 URINE Alb. \_\_\_\_\_ Class \_\_\_\_\_

**FAMILY PLANNING METHODS**

Condom  I.U.D.  Pill  
 Spasmodical  Diaphragm  Depo-provera  Other

**MATERNAL RECORD CARD  
 PUBLIC HEALTH DEPARTMENT  
 Jamaica W.I.**

PARISH OF \_\_\_\_\_ HEALTH CENTRE \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

NEXT OF KIN \_\_\_\_\_

BLOOD GROUP \_\_\_\_\_ Rh \_\_\_\_\_

SICKLE TEST \_\_\_\_\_

CONFIDENTIAL

THIS CARD SHOULD BE CAREFULLY KEPT AND BROUGHT TO THE CLINIC OR HOSPITAL ON EACH VISIT.

**INVESTIGATION:**

Results	Date	Treatment	Date

Investigation	1st	2nd	3rd	4th

PREVIOUS MEDICAL HISTORY: Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

**PAST OBSTETRIC HISTORY**

Date of Birth	Place of Birth	Birth Weight	Complications (include abortions/stillbirths)

**ANTE-NATAL RECORD**

L. N. P. \_\_\_\_\_ S.D.D. \_\_\_\_\_

Heart \_\_\_\_\_ Lungs \_\_\_\_\_

Breasts \_\_\_\_\_ Legs \_\_\_\_\_

Pelvic Assessment: \_\_\_\_\_

Date	Temp	Pulse	BP	Urine		Wt.	Remarks
				Seg.	Alb.		

Referral: \_\_\_\_\_

APPENDIX XIV

ADDRESS.....

MY REGISTRATION NO.....

I have not received my Food Stamp Book for the month of.....

Name.....

(Capitals)

.....

*Signature*

DISTRIBUTION  
CENTRE  
PARISH

FORM FA3  
5.84

G.P.O.

APPENDIX XV

MINISTRY OF SOCIAL SECURITY

Your application under the Food Aid Programme is approved.

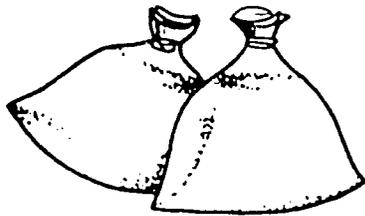
Please collect your Food Stamp book at.....  
on.....19..... You should en-  
deavour to collect it on the date specified above.

.....  
*Permanent Secretary*

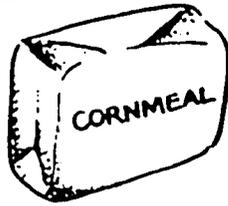
Form F.A.8  
11.84

G.P.O.-8411-41-50,000-11.84

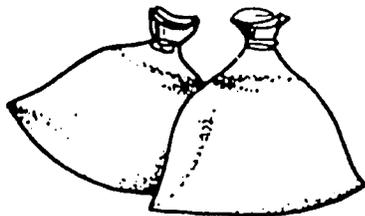
# FOOD STAMPS



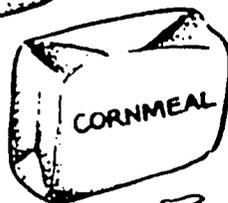
= **SKIMMED MILK**



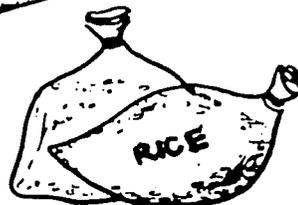
= **CORNMEAL**



= **SKIMMED MILK**



= **CORNMEAL**



= **RICE**

# FOOD AID PROGRAMME

## SHOPKEEPERS!

The Government has launched a new Food Aid Programme which will provide basic foods to Jamaicans who may not be able to maintain adequate nutritional levels in their diets because of the high cost of living.

People registered in the Food Aid Programme will be given Food Stamps which they will exchange for:

- CORNMEAL
- SKIMMED MILK POWDER
- RICE

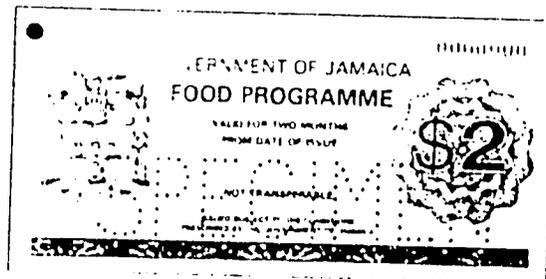
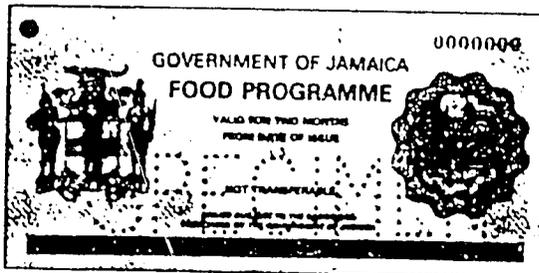
at any shop in Jamaica.

THE COUNTRY NEEDS YOUR SUPPORT TO HELP THE FOOD AID PROGRAMME WORK.

HERE'S HOW . . .

- Accept the Food Stamps.

PINK stamps buy cornmeal and skimmed milk powder.



GREEN stamps buy cornmeal, skimmed milk powder and rice.

- Exchange Food Stamps for only those items listed on the back of the stamps.
- Stock your shelves with a good supply of these foods.
- Help your customers by packaging these foods in small amounts if you can. Each stamp is worth \$2.00 and must be used to buy only specified foods.

REMEMBER . . .

- The Food Aid Programme will probably increase your food sales.
- Food Stamps are like money. You can use the stamps you receive from customers to purchase ANY goods from your suppliers.
- You can, if you prefer, encash the Food Stamps at your nearest bank.
- Your customers depend on you!

THE GOVERNMENT'S FOOD AID PROGRAMME WILL HELP JAMAICANS EAT RIGHT!

# FOOD AID PROGRAMME

## WHAT IT IS

The Food Aid Programme has two parts:

- School Lunches
- Food Stamps

To help our people maintain a healthy diet.

## WHO BENEFITS

- school children
- pregnant and nursing mothers
- children three years and under
- elderly and very poor (with household income of \$50 or less a week) who are in need of a proper diet.



## HOW YOU WILL BENEFIT

By receiving three kinds of foods. These are:

- cornmeal
- skimmed milk powder
- rice (only for elderly and very poor)

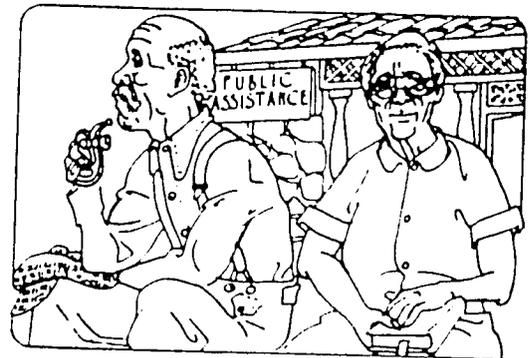
using Food Stamps provided by the Government.



Children attending school will get lunches of a nutribun and a half pint of milk for 20 cents. They will NOT get food stamps.

## TO RECEIVE FOOD STAMPS

- You have to be a nursing or expectant mother, or a child three years or under, attending a health clinic **REGULARLY.**
- You have to be elderly or very poor receiving Public Assistance or Poor Relief.



If you are one of the above, you will **AUTOMATICALLY** be registered to receive Food Stamps.

**IF YOU ARE NOT REGISTERED IN ONE OF THESE PROGRAMMES, BUT YOU NEED ASSISTANCE, YOU WILL HAVE TO APPLY FOR FOOD STAMPS.**

## HOW TO APPLY

### PREGNANT WOMEN, NURSING MOTHERS AND CHILDREN UP TO THREE YEARS

- Go to your nearest clinic and register for health care.
- If you are eligible, the health clinic will tell you to go to your Poor Relief office WITH YOUR HEALTH CARD to register for Food Stamps.

### ELDERLY AND VERY POOR

- Go to your Public Assistance or Poor Relief Office to get an application.
- Fill it in and return it to your Poor Relief Office.
- Your application will be evaluated and you will be told if you qualify for Food Aid or not.

If you do . . .

You will receive a book of Food Stamps and an identification card from your Poor Relief Office.

## HOW TO USE FOOD STAMPS

- You will get a book of Food Stamps every two months from your Poor Relief Office. Pregnant women, nursing mothers and children up to three years will get PINK stamps. Other persons will get GREEN stamps.
- Food Stamps will be used at your shop in exchange for cornmeal, skimmed milk powder and rice. Remember, you can get only those items listed on the back of the Food Stamps.
- After two months, go to the Poor Relief Office with your identification card and the old Food Stamp book to collect a new book.
- If you are unable to go yourself, send someone who is properly identified.

**REMEMBER – FOOD STAMPS ARE LIKE MONEY. DON'T LOSE THEM!**

**THE GOVERNMENT'S FOOD AID PROGRAMME WILL HELP YOU EAT RIGHT!**