Global Journal on International Business and Economics Development
http://eurekajournals.com/GJIBED.html
ISSN: 2581-3447

An Assessment of the Economic Challenges Experienced by Jamaicans Ages 50 Years and Older: Post-COVID-19

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Abstract

Introduction: According to 'The Jamaican Elderly, a Socioeconomic Perspective & Policy Implications,' "Statistics reveal that only 1% of the elderly are in institutions, suggesting that elderly are either alone or with family members. Everyone in adulthood who is part of a middle- or lower-class background is likely to face economic challenges at one point in their lives.

Objective: This research aims to determine the economic challenges faced by those 50 years and older in Jamaica post-COVID-19 pandemic.

Method and Materials: A web-based and face-to-face explanatory, cross-sectional, and correlational research design was used to collect data from persons ages 50+ years. A purposive sampling method was used to obtain the data from 1129 sampled respondents across the 14 parishes in Jamaica. The collection of data commenced from October 1, 2022, to November 30, 2022. Confidentiality, privacy, and informed consent were maintained through google forms. A standardized survey was distributed via various social media platforms including WhatsApp, Facebook, Instagram, and Snapchat, through phone and face-to-face interactions. Data were then

analyzed using the Statistical Packages for the Social Sciences (SPSS)for Windows, Version 28.0.

Findings: Findings and data analysis showed that Jamaicans 50 years and older are in dire need of help financially to survive their daily lives, this is especially true from a medical point of view. Most individuals were unaware of the importance of having a retirement plan for themselves, inclusive of appropriate personal health and critical illness insurance and this is further exasperated by a lack of education and awareness of the various government programmes and funding to assist with their medical expenses. Also, COVID-19 made it extremely difficult successfully engage in basic daily activities such as being able to purchase food and medication, and even pay bills due to the loss of jobs for themselves or a family member within the household who was the primary or substantive provider.

Conclusion: Multiple factors contributed to the economic challenges faced by the elderly population of Jamaicans. While employment status is one of them, it accounts for the majority percentage of their challenges. The COVID-19 pandemic demands that Jamaicans remain vigilant in their daily lives as they return to everyday activities and apprise themselves of financial planning knowledge that will scaffold their medium to long-term ability to live comfortably.

Keywords: Daily expenses, economic challenges, elderly Jamaicans, medical expenses, microeconomic challenges, post-COVID-19.

Introduction

Everyone in adulthood who is part of a middle-or lower-class background faces economic challenges at some point in their lives. While some studies have found that there have been no significant changes in the assistance afforded to the elderly financially, in addition to receiving assistance to meet their basic needs and making it more easily accessible for them; health and economic aids have been put in place to help bridge the existing financial gaps. Even with what is available, the elderly have become some of the most economically vulnerable as they have limited access to the technology and information that would allow them to maximally gain access to much-needed resources. While for the younger population, the widespread migration of information and services to online or technology base systems has been welcomed, for the elderly this has just created additional obstacles and challenges that bar them from receiving existing limited resources, further frustrating their existence in their latter years. This indicates that though resources are made readily available for some, the additional requirements are too high hence marginalizing those who arguably need them the most (Bertelsmann, nd.).

Though population ageing has been renowned as one of the greatest recent demographic achievements (McKoy-Davis, et al., 2022), there are financial difficulties accompanied by such great achievement which this paper will review concerning Jamaica. It is evident that with age comes duties, and some more than others can tackle those responsibilities by being given a head start in life from family wealth and working extremely hard to receive financial freedom. Individuals from the lower class of society experience more financial difficulties trying to

provide for their family, send their children through secondary to tertiary school and afford their daily living expenses such as bills, food, healthcare, insurance and other basic amenities (Eldemire-Shearer, 2014). Studies by Shapiro & Oliver (2006) demonstrated that lower social class is associated with lower levels of financial stability and that this can have negative externalities that affect society as a whole.

It has been said by several works of scholarship that the elderly in any population is considered a vulnerable economic group attributed to the fact that they are at the age at which they are more prone to chronic health issues. This commonality is universal to all ethnicity and social groups, however, the more concerning trend is that those who were not well established financially in their early years will find it more difficult to sustain their family while balancing other financial responsibilities in the later years(Rawlins, 2022).

Literature Review and Theoretical Framework

The Human Capital Theory tells us that people can increase their efficiency through education and skills (Figure 1). According to 'The Jamaican Elderly a Socioeconomic Perspective & Policy Implications,' "Statistics reveal that only 1% of the elderly are in institutions, suggesting that the elderly is either alone or with family members. Based on the study this group has gathered of 1,129 elderlies, 9.3% stated that they live somewhere without payment, money or rent; and 2.4% have no permanent residence. Others, therefore, stated that they either lived with friends, family or in a home that was bought by them or someone else, or a house that is being rented.

As stated by Xu & Fletcher (2017), Becker in his 1962 works and Rosen in his 1976 work explained that "Human Capital Theory" is that individual workers with skills or abilities that improve or accumulate through training and education. It can be extrapolated from the theory that we typically invest in physical means of our business such as machinery, and doing so allows us to produce stocks or products from which we profit. We should also invest heavily in human capital the same way we invest in physical property as education and training are quite valuable over the medium to long term. "Investing in human capital allows you to see growth - measured through your staff's abilities, values, and skillset" (Bouchard, 2008). Due to the rapidly ageing population, there are fewer working-age people in the economy, which leads to a shortage of qualified workers, thus resulting in difficulty filling vacant positions with suitably qualified personnel and by extension limiting an entity's ability to consistently fulfil business roles. An economy that cannot fill in-demand job vacancies across multiple occupation bands faces adverse consequences including declines in productivity, international competitiveness and an increase in labour and production costs.

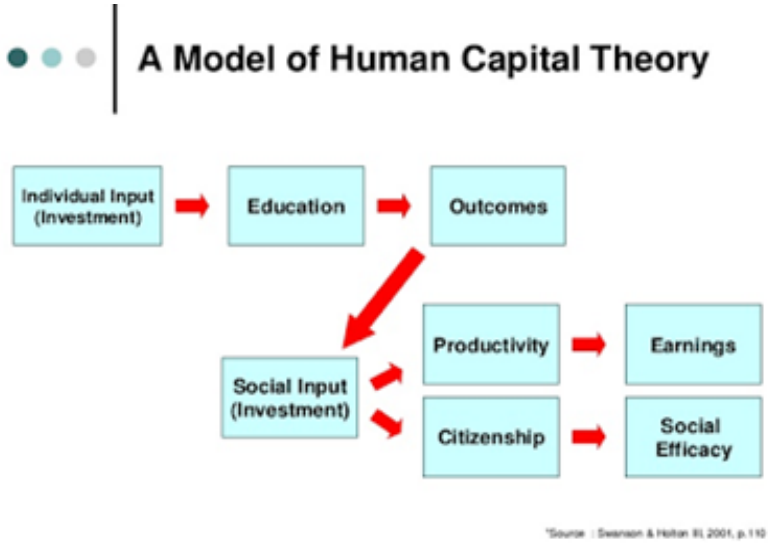

Figure 1: Stages or steps associated with Human capital theory

According to the World Health Organization (2021) No communicable diseases report, these diseases such as cardiovascular diseases, cancer, chronic respiratory diseases and diabetes, are often associated with older age groups. The article by Eldemire (1997) also states that "Only 4% of the elderly have health insurance; in addition, only approximately 40% received any form of pension. Since then, things have changed for the better, with 34.5% of the elderly using government funding, 32% using private insurance and 33.4% paying out of pocket for their health care medical expense.

Materials and Methods

A web-based and face-to-face explanatory, cross-sectional, and correlational research design was used to collect data from people ages 50+ years to determine the research goal of this study. Stratified multistage sampling was used to collect the data from 1129 sampled respondents across the 14 parishes in Jamaica (Kingston and St. Andrew, St. Thomas, Portland, St. Mary, St. Ann, Trelawny, St. James, Hanover, Westmoreland, St. Elizabeth, Manchester, Clarendon, and St. Catherine). This research takes a quantitative methodology in the form of a survey collected through a self-administered questionnaire consisting of 23 questions that were carefully structured to gather the data necessary to fulfil the objective of this research.

Similarly, a standardized survey was distributed via various social media platforms, including WhatsApp, Facebook, Instagram, and Snapchat, through phone and face-to-face interactions. The researchers ensured information that was retrieved was strictly confidential, privacy was maintained, and informed consent was maintained from each respondent. The quantitative data were analyzed by using the Statistical Packages for the Social Sciences (SPSS) for Windows, Version 28.0, where descriptive statistics such as frequency tables were utilized to convey the findings in the research. The collection of data was between the periods of October 1, 2022, to November 30, 2022. The method of the research serves to obtain information to achieve the following research question: Economic challenges faced by those 50 years and older in Jamaica during the COVID-19 pandemic.

Findings

Table 1 presents the demographic characteristics of the sampled respondents. Of the sampled respondents, 525 were males, 589 were females and 15 choose not to be identified as either male or female in which their Age, Area of Residence and Marital status were depicted in the table above.

Table 1: Demographic Data of Sampled Respondents, N=1129

Details	**% (n)**
Gender	
Male	46.5 (525)
Female	52.2 (589)
Non- Binary	1.3 (15)
Age Cohort	
50-55 years	43.1 (487)
56-65 years	25.5 (288)
66- 75 years	18 (203)
76+ years	13.4 (151)
Area of Residence	
Kingston and St. Andrew	23.6 (266)
St. Thomas	4.1 (46)
Portland	3.3 (37)
St. Mary	4.0 (45)
St. Ann	6.2 (70)
Trelawny	2.8 (32)
St. James	7.0 (79)
Hanover	2.6 (29)
Westmoreland	5.0 (57)
St. Elizabeth	6.2 (70)
Manchester	6.6 (75)
Clarendon	9.7 (110)
St. Catherine	18.9 (213)
Marital status	
Single	33.6 (379)
Married	25.5 (288)
Divorced	10.1 (114)
Common Law	13.2 (149)
Separated	9.9 (112)
Widowed	7.7 (87)
Number of people living in the household	
1	25.3 (286)
2	19.6 (221)
3	18.2 (205)

4	17.4 (196)
5	10.0 (113)
6+	9.6 (108)
Number of biological child/ren	3±2, range = 13
Number of dependents	
None	28.8 (166)
1	35.0 (202)
2	23.0 (136)
3	8.7 (50)
4	2.6 (15)
5	1.4 (8)

Table 2 presents the highest level of education attained by the respondents. Thirty-six and four-tenths per cent of the sampled respondents indicated having completed secondary education, 29.3% have attained a university degree, 16.1% state only having an all-age school leaving certificate while 3.1% state only having completed a basic school certificate and another 31.6% has no form of educational background.

Table 2: Highest Level of Education

Details	**% (n)**
Educational level	
None	3.6 (41)
Basic School	3.1 (35)
Primary/preparatory	11.4 (129)
All age	16.1 (182)
High/Secondary	36.4 (411)
University	29.3 (331)
	1129

Table 3. Shows the financial challenges faced by those ages 50+ years within the Jamaican population of which 63.9% state they are unemployed and 36.1% are still within a paying occupation; 64.4% are still able to afford normal living expenses while 35.6% are unable to fund their living expenses; 1:1 of the individuals' states that COVID-19 has impacted their ability to afford it and others state the pandemic not having an effect on them being able to afford their living expenses.

Table 3: Financial Challenges of Those 50 Years and Older

Details	**% (n)**
Are you employed?	
Yes	36. 1 (408)
No	63.9 (721)
Are you able to afford your normal living expenses?	
Yes	64.4 (727)

No	35.6 (402)
Are you able to cover your health expenditure?	
Yes	60.7 (685)
No	39.3 (444)
COVID-19 has made it increasingly difficult for me to cover my normal living expenses	
Yes	50.0 (564)
No	50.0 (565)
Breadwinner	
I am	59.7 (673)
My spouse	14.3 (161)
My spouse and I	1.0 (11)
Other	25.1 (283)
Having resources to support the family	
Yes	46.4 (524)
No	53.6 (605)

Table 4 presents various methods by which individuals 50 years and older pay for their health care medical expenses. Of which 34.6% of states receive government assistance through PATH etc; 33.4% of states pay for their insurance out of pocket and 32% of states have private Insurance coverage.

Table 4: Various Methods of Payment for Health Insurance

Details	**% (n)**
Health Insurance Coverage	
Government-funded (JADEP, PATH, etc.)	34.6 (391)
Private	32.0 (361)
Self-paid	33.4 (377)
Total	1129

Table 5 Shows The average minimum wage for the respondents of which 17.9% states receiving above $150,000 for the year while the majority of the results from the above table depict earning less than the minimum wage for Jamaica and 38.7% did not give an estimated earning total for the year.

Table 5: Income of Respondents over the last 12-month period

Details	**% (n)**
Income	
None	19.4 (219)
Jamaican (Ja.) Ja. $1 - $9,999	0.7 (8)
Ja. 10,000-Ja. $19.999	3.3 (34)
Ja. 20,000-Ja. $49.999	8.8 (99)
Ja. 50,000-Ja. $99.999	19.3 (218)

Ja. 100,000-Ja. $149.999	12.1 (137)
Ja. 150,000+	17.4 (196)
Don't care to say	19.3 (218)
Total	1129

Table 6 presents a cross-tabulation between having resources to support family and breadwinner status. A significant statistical association emerged between the two variables ($\chi 2(df=3) = 27.493$, p-value < 0.001). Of those who were sole breadwinners (673), only 46.7% of them indicated having the resource to support their family. Comparatively, 59.6% of sampled respondents who indicated their spouse as the winner stated they had the resources to support the family and 81.8% of those who both respondent and spouse are the breadwinner had the resources to support their families.

Table 6: A Cross-tabulation between having Resources to Support Family and Breadwinner Status

Details	**Breadwinner of family**				**Total**
	I am (solely)	**My spouse**	**My spouse and I**	**Other**	
Having resources to support the family	% (n)	% (n)	% (n)	% (n)	% (n)
Yes	46.7 (314)	59.6 (96)	81.8 (9)	36.7 (104)	46.4 (523)
No	53.3 (359)	40.4 (65)	18.2 (2)	63.3 (179)	53.6 (605)
Total	**673**	**161**	**11**	**283**	**1128**

Table 7 presents a cross-tabulation between having resources to support family and gender. Using Chi-square analysis, no significant statistical association emerged between the two variables ($\chi 2(df=2) = 0.596$, p-value = 0.742). Forty-seven and four-tenths per cent of males indicated that they have the resources to support their families compared to 45.7% of females, and 40.0% of non-binary respondents.

Table 7: A Cross-tabulation between Having Resources to Support Family and Gender

Details	**Gender**			**Total**
	Male	**Female**	**Non-Binary**	
	% (n)	**% (n)**	**% (n)**	**% (n)**
Having resources to support the family				
Yes	47.4 (249)	45.7 (269)	40.0 (6)	46.4 (524)
No	52.6 (276)	54.3 (320)	60.0 (9)	53.6 (605)
Total	**525**	**589**	**15**	**1129**

Table 8 presents a cross-tabulation between having resources to support family and gender. Using Chi-square analysis, a significant statistical association emerged between the two variables ($\chi 2(df=1) = 38.180$, p-value < 0.001). Forty-seven and four-tenths per cent of those who indicated being able to afford their living expenses have the resources to support their families compared to 45.7% of those who indicated not being able to afford their normal living expenses.

Furthermore, 52.6% of those who indicated being able to afford their living expenses do not have the resources to support their families compared to 54.3% of those who indicated not being able to afford their normal living expenses

Table 8: A Cross-tabulation between having Resources to support family and Being able to afford normal living expenses

Details	**Being able to afford normal living expenses**		**Total**
	Yes	**No**	
	% (n)	**% (n)**	**% (n)**
Having resources to support the family			
Yes	47.4 (387)	45.7 (137)	46.4 (524)
No	52.6 (340)	54.3 (265)	53.6 (605)
Total	**727**	**402**	**1129**

Table 9 presents a cross-tabulation between having resources to support my family and COVID-19 has made it increasingly difficult for me to cover my normal living expenses. Using Chi-square analysis, a significant statistical association emerged between the two variables ($\chi 2(df=1) = 8.047$, p-value = 0.005). Forty-two and two-tenths per cent of those who indicated COVID-19 has made it increasingly difficult for them to cover normal living expenses, have the resources to support their families compared to 50.6% of those who said no to COVID-19 has made it increasingly difficult for me to cover my normal living expenses. Furthermore, 57.8% of those who yes that COVID-19 has made it increasingly difficult for them to cover normal living expenses said they do not have the resources to support their families compared to 49.4% who said no to COVID-19 has made it increasingly difficult for me to cover my normal living expenses.

Table 9: A Cross-tabulation between Having Resources to Support Family and COVID-19 has made it increasingly difficult for me to cover my normal living expenses

Details	**COVID-19 has made it increasingly difficult for me to cover my normal living expenses**		**Total**
	Yes	**No**	
	% (n)	**% (n)**	**% (n)**
Having resources to support the family			
Yes	42.2 (238)	50.6 (286)	46.4 (524)
No	57.8 (326)	49.4 (279)	53.6 (605)
Total	**564**	**565**	**1129**

Figure 2 depicts the perception of the sampled respondents on the status of their general health status. Of the sampled respondents (n=1129), the majority of them indicated at least good health status (68.4%, n=772; excellent, 28.9%, n=326; good, 39.5%, n=446), with only 10.5% (n=118) indicated poor health status.

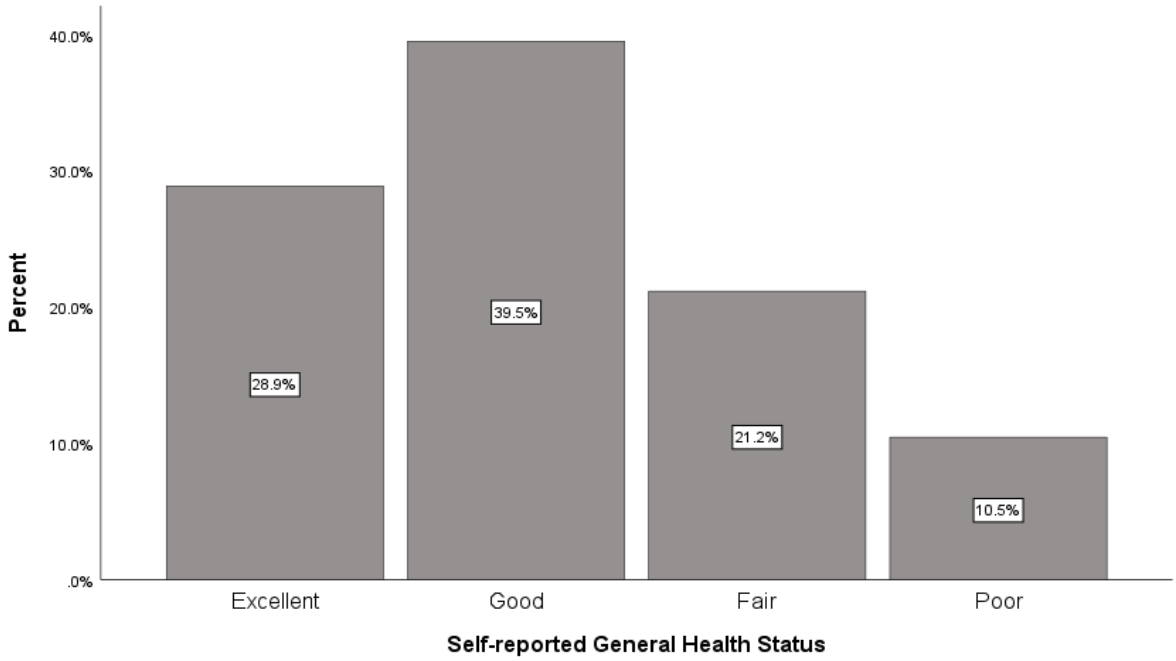

Figure 2: Self-reported General Health Status

Table 10 presents a cross-tabulation of the age cohort of respondents and selected variables. The findings revealed a significant statistical relationship between the age cohort and all the variables except gender (*p*-value > 0.05). Of those 50-55 years old, 28.5% (n=139) indicated that they were unable to cover their medical expenses compared to 37.2%(n=107) of those 56-65 years old, 53.2% (n=108) of those 66-75 years and 59.6% (n=90) of those 76+ years old. In addition, 24.8% (n=121) of those 50-55 years old stated that they cannot meet their normal daily expenses compared to 32.3% (n=93) of those 56-65 years old, 49.8% of those 66-75 years old, and 57.6% (n=87) of those 76+ years old. Of that 50 - 55-year-old, 49.7% (n=242) indicated that they do not have the resources to support their families compared to 48.6% (n=140) of those ages 56-65 years, 57.6% (n=117) of those ages 66-75 years old, and 70.2% (n=106) of those ages 76+ years old.

Table 10: A Cross-tabulation of the Age Cohort of respondents and Selected Issues

Details	**Age Cohort**				**Total**
	50-55 years	**56-65 years**	**66- 75 years**	**76+ years**	
	% (n)	**% (n)**	**% (n)**	**% (n)**	**% (n)**
Gender					
Male	47.2 (230)	47.2 (136)	42.4 (86)	48.3 (73)	46.5 (525)
Female	52.0 (253)	51.7% (149)	54.2 (110)	51.0% (77)	52.2 (589)
Non-Binary	0.8 (4)	1.0 (3)	3.4 (7)	0.7 (1)	1.3 (15)
	487	**288**	**203**	**151**	**1129**
Marital status* **					
Single	45.6 (222)	31.3 (90)	20.2 (41)	17.2 (26)	33.6 (379)
Married	25.9 (126)	33.3 (96)	20.2 (41)	16.6 (25)	25.5 (288)

Divorced	7.2 (35)	10.1 (29)	16.3 (33)	11.3 (17)	10.1 (114)
Common Law	12.3 (60)	13.9 (40)	15.8 (32)	11.3 (17)	13.2 (149)
Separated	5.5 (27)	8.0 (23)	13.3 (27)	23.2 (35)	9.9 (112)
Widowed	3.5 (17)	3.5 (10)	14.3 (29)	20.5 (31)	7.7 (87)
	487	**288**	**203**	**151**	**1129**
Number of People Living in Household*					
1	27.7 (135)	18.8 (54)	23.2 (47)	33.1 (50)	25.3 (286)
2	19.3 (94)	20.8 (60)	21.2 (43)	15.9 (24)	19.6 (221)
3	16.8 (82)	24.0 (69)	18.7 (38)	10.6 (16)	18.2 (205)
4	15.0 (73)	21.2 (61)	16.7 (34)	18.5 (28)	17.4 (196)
5	11.1 (54)	7.6 (22)	9.4 (19)	11.9 (18)	10.0 (113)
6+	10.1 (49)	7.6 (22)	10.8 (22)	9.9 (15)	9.6 (108)
	487	**288**	**203**	**151**	**1129**
Health Insurance Coverage**					
Government Funding (JADEP, Path, Pension)	19.1 (93)	30.6 (88)	55.7 (113)	64.2 (97)	34.6 (391)
Private Insurance	39.2 (191)	33.0 (95)	21.2 (43)	21.2 (32)	32.0 (361)
Self-pay (out-of-pocket)	41.7 (203)	36.5 (105)	23.2 (47)	14.6 (22)	33.4 (377)
	487	**288**	**203**	**151**	**1129**
The breadwinner of the family**					
I am	73.3 (356)	63.5 (183)	38.4 (78)	37.1 (56)	59.7 (673)
My spouse	17.5 (85)	19.1 (55)	9.9 (20)	0.7 (1)	14.3 (161)
My spouse and I	1.2 (6)	1.4 (4)	0.5 (1)	0.0 (0)	1.0 (11)
Other	8.0 (39)	16.0 (46)	51.2 (104)	62.3 (94)	25.1 (283)
	486	**288**	**203**	**151**	**1128**
Having resources to support the family**					
Yes	50.3 (245)	51.4 (148)	42.4 (86)	29.8 (45)	46.4 (524)
No	49.7 (242)	48.6 (140)	57.6 (117)	70.2 (106)	53.6 (605)
	487	**288**	**203**	**151**	**1129**
Cover your health expenditure**					
Yes	71.5 (348)	62.8 (181)	46.8 (95)	40.4 (61)	60.7 (685)
No	28.5 (139)	37.2 (107)	53.2 (108)	59.6 (90)	39.3 (444)
	487	**288**	**203**	**151**	**1129**
Able to afford your normal living expenses0**					
Yes	75.2 (366)	67.7 (195)	50.2 (102)	42.4 (64)	64.4 (727)
No	24.8 (121)	32.3 (93)	49.8 (101)	57.6 (87)	35.6 (402)
	487	**288**	**203**	**151**	**1129**
Number of dependent children**					
0	7.8 (22)	24.7 (37)	60.9 (53)	93.1 (54)	28.8 (166)
1	45.0 (127)	40.0 (60)	17.2 (15)	0.0 (0)	35.0 (202)
2	31.2 (88)	23.3 (35)	13.8 (12)	1.7 (1)	23.6 (136)
3	10.3 (29)	10.7 (16)	5.7 (5)	0.0 (0)	8.7 (50)

4	3.9 (11)	0.7 (1)	2.3 (2)	1.7 (1)	2.6 (15)
5	1.8 (5)	0.7 (1)	0.0 (0)	3.4 (2)	1.4 (8)
	282	**150**	**87**	**58**	**577**

p-value < 0.001*** *p*-value < 0.001** *p*-value < 0.5*

Discussion

This study was conducted to assess the economic challenges experienced by those 50 years and older in Jamaica, post-COVID-19. The World Health Organization (2023) opined, "Most people who develop COVID-19 fully recover, but current evidence suggests approximately 10–20% of people experience a variety of mid and long-term effects after they recover from their initial illness" which lacks information on the influence of the pandemic on the economic reality of people, and how they are coping post-COVID-119. However, OCHA (2021) postulated, "COVID-19 rapidly caused devastating socio-economic impacts such as income loss, business impacts and health concerns. Basic consumer needs were affected." An issue of importance here is 'How were the people of Jamaica influenced by the COVID-19 pandemic." The United Nations Economic Commission for Latin America and the Caribbean (2020) provided some answers to the previously mentioned question when it forwarded that COVID-19 has substantially influenced the Jamaican economy simply becausethe nation relied on tourism. This general information does not provide an individualized account of the impact of the COVID-19 pandemic on Jamaicans.

To understand the extent of the COVID-19 pandemic on Jamaicans, one should examine the writing of the Jamaican Ministry of Finance on the state of the economy and the challenges associated with the recovery. The Jamaican Ministry of Finance (2020) aptly summarised the influence of the pandemic on society when it said, "The COVID-19 pandemic will lead to a severe downturn in the Jamaican economy. The Planning Institute of Jamaica ("PIOJ") has projected that the economy will contract by between 4% and 6% in the fiscal year 2020/21 versus a pre-COVID forecast of 1.2% growth" (p. 6). The writings of the Jamaican Ministry of Finance provide some context of the brevity of the economic effect of COVID-19; but, this information is at the individual level. The current study provides a comprehensive examination of the economic challenges experienced by Jamaicans ages 50 years and older, which provides information at the micro-level.

The current study provides information from 1,129 respondents Jamaicans. The majority were Female (52.2%), ages 50-55 years (43.1%), lived in Kingston and St. Andrew (23.6%), single (33.6%), lived alone (25.3), had one dependent (35.0%) and had attained high/secondary education (29.3%). According to Social and economic studies (1997), the elderly population is the fastest-growing segment of the Jamaican population while the under-15 population is decreasing. Also, a census report that was done in 2011 (Recinos 2021) on "Health Barriers Faced by the Elderly in Jamaica revealed that Jamaica has seen a rapid increase in its elderly population. This begs the question, what are the experiences of those 50 years and older post-COVID-19?

The data on the financial challenges faced by those ages 50+ indicated that the majority were not employed (63.0%), could afford their normal living expenses (64.4%), were able to cover their health expenditure (60.7%), is a breadwinner (59.7), and does not have resources to support the family (53.6%). The reason those ages 50 + can afford their normal living could be because the majority of the respondent (34.6%) receive government assistance through PATH to pay for Health Insurance. These results are supported by the social and economic studies (1997) which showed that approximately 40% receive a form of pension although the payment levels are low. The census report of 2011 (Recinos 2021) indicated that the old age pension provided to qualifying retired Jamaicans is usually insufficient to cover the additional health costs associated with old age as the pension does not adjust to meet the yearly changes in the cost of living.

The majority of the respondents (19.3%) received an average income of Ja. 50,000-Ja. 99,999 over the last 12 months although still, the majority (19,4) did not get any income and others ((19.3%) did not care to say. There was a significant statistical association between having resources to support family and breadwinner status ($\chi 2(df=3) = 27.493$, p-value < 0.001). It was interesting to note that, the majority of the respondents whose spouses were the breadwinner had more resources to support the family (59.6%) than the sore breadwinner (46%). There was no significant statistical association ($\chi 2(df=2) = 0.596$, p-value = 0.742) that emerged between having resources to support the family and gender. Both male (47.4%) and female (52.6%) supported their families equally. A significant statistical association (($\chi 2(df=1) = 8.047$, p-value = 0.005emerged between having resources to support family and COVID-19 making it increasingly difficult for respondents to cover their normal living expenses.

The findings from this study should not come as a surprise to people as Reyes-Tagle, et al. (2020) had warned about the likely effect of COVID-19 on Caribbean economies. They opined, "…the Caribbean region is facing a significant decline in the exports of goods and services, as well as remittances", and this reality translated into unemployment, lower tax collection, lower disposable income, and more economic challenges experienced by those 50 years and older. This study found that 46.4% (524) of those 50 years and older did not have the resources to support their families, and 46.7% (n=314) of those who were the sole breadwinner of their families did not have the resources to support the family. To summarise the current challenges of those 50 and older in Jamaica, this study found that 50% of them indicated that COVID-19 has made it increasingly difficult to cover their normal living expense and 39% were unable to cover their medical costs. As such, Cucagna & Johnson(2020) wrote that theWorld Bank projections based on Jamaica's latest GDP per capita growth estimates suggest a likely increase in poverty by over 4 percentage points in 2020, this is the reality in Jamaica for 2022.

The microeconomic challenges experienced by Jamaicans ages 50 years and older are provided by this study, and it is not based on gender. Therefore, the impact of COVID-19 is not a gendered phenomenon and so should not be promulgated as such, and this contradicts a United Nations perspective (UN Women, nd). UNWomen (nd) opined, "Women are being hit hard by the fallout of the pandemic. Because they typically earn less, have fewer savings and hold less secure jobs, to begin with, women are particularly susceptible to economic shocks in general." The general perspective of the UN Women has some merit in contemporary society; but, the economic impact of COVID-19 has equally cut across the genders.

Conclusion

Cucagna & Johnson(2020) opined, "The Jamaican government has executed a series of interventions for both rapid and medium-term responses to mitigate the impacts of the COVID-19 pandemic" yet more than 40% of those 50 years and older are struggling to meet the daily living expenses and 39% were unable to cover their medical expenses. The effect of the COVID-19 pandemic has been extensive on the well-being of Jamaicans, and this cannot be understated for policymakers to understand that social intervention initiatives have not made a significant impact on the liveability of those 50 years and older.

Recommendations

1. The government should consider increasing the pension of retired Jamaicans to match with the cost of living or what is often defines as a "livable wage".
2. More studies are to be done on the health care of the elderly, including mental health services, home and respite care, physiotherapy, and other rehabilitation services.

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