



2010 Annual Report

Jamaica (72100)

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FINALIZED OFFICIAL REPORT

Strategic Plan 2008-2013 Development Results Framework

Outcome 1.1: Population dynamics and its inter-linkages with gender equality, sexual and reproductive health and HIV/AIDS incorporated in public policies, poverty reduction plans and expenditure frameworks
Indicator 1: Proportion of national development plans/policies (NDPs), including poverty reduction strategies (PRSs) that incorporate population dynamics, reproductive health, including HIV/AIDS and gender equality
Indicator 2: Resource mobilized for population activities

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

The Jamaica Office has successfully collaborated with partners in ensuring that population dynamics and its linkages with gender equality have been integrated into national policy frameworks. There are several sector plans accompanying Vision 2030- the National development Plan designed to assist Jamaica in achieving developed country status by the year 2030. The Population Sector Plan, the health sector Plan and the Gender sector Plans all demonstrate the inter-linkages between population, health and HIV and AIDS. The Plans have been accepted by key national stakeholders and mechanisms for the implementation are currently being elaborated.

a.1. During 2010, has your Country Office specifically contributed to Strengthen national capacity (of government institutions and civil society organizations) to incorporate population issues in public policies, plans and expenditure frameworks. (Please reply "Yes" only if in the assessment your Country Office has completed substantive initiatives as well as spent programme budget towards strengthening national capacity development in the specific areas listed below. If yes, then you must list three key initiatives/activities)

(X)Yes ()No

key initiative/activity 1

UNFPA supported data analysis training for the National Family Planning Board (NFPB), the Statistical Institute of Jamaica and the University of the West Indies in order to strengthen their capacities to analyze data generated from the 2008 Reproductive Health Survey. This training was done in collaboration with the Centre for Disease Control (CDC) in the United States.

key initiative/activity 2

UNFPA participated in the development of the Common Country Assessment (CCA) in Jamaica which is the precursor to the UNDAF, and has ensured that issues of gender equality, population and HIV/AIDS are incorporated into the document. This will provide the framework for the development of the UN support in Jamaica over the next five years, and importantly, has the endorsement of the Government.

key initiative/activity 3

The UNFPA office has also invested in training for its Youth Advisory Group (YAG) which is a body of young people who are trained as peer educators. The YAGs have been trained on issues including the linkages between poverty reduction, population, gender equality and sexual and reproductive health and have been disseminating this information to their peers.

[X]b. Results regarding advocacy and policy dialogue

UNFPA has advocated for the integration of sexual and reproductive health into HIV and AIDS, and the importance of looking at various target populations and their needs through a gender lens. Our advocacy and the collaboration with national partners has contributed to the initiation of a national process geared towards reviewing a potential structure for integrating HIV into Sexual and reproductive health. UNFPA is currently funding a Governance Consultant to undertake the review of the existing structure of the HIV Programme and the National Family Planning Board to identify the best mechanism for integration.

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

The development of the sector Plans in Population, gender and health are an indication of the national commitment to these issues. The Plans all demonstrate that there is a clear understanding of the linkages between these areas. Technical working groups have also been established to review the progress made in these areas and to discuss strategies for advancing the implementation process.

b. Key lessons learned

One of the major lessons learned is that there has to be greater advocacy for including health and related issues as a high priority on the Government's medium term framework. While health is identified as important in the sector plan, this is not necessarily reflected in the implementation of the national development agenda.

c. Main challenges

One of the main challenges experienced in Jamaica is the fact that the development agenda has become overwhelmed by issues linked to the debt burden, crime and violence and security concerns. As a result, social issues such as health do not receive the priority focus and investment that is required to significantly strengthen the response from the health sector.

d. Concrete steps to address the challenges and build on lessons learned

The UNFPA office will have to strengthen its advocacy around issues of sexual and reproductive health, utilizing evidence based information that will further sensitize policymakers to the importance of investing in these issues and the benefits that the country will derive from doing so.

B. Development Results Framework Indicators.

Please report the following information about the National Development Plan/Policy (NDP) and Poverty Reduction Strategy (PRS) currently approved in the country (data collected in this section will be used to calculate DRF outcome indicators 1, 3, 7 and 8):

1. Does the country have a NDP/PRS currently approved? (X)Yes ()No

| |
|--|
| Type: (X) NDP () PRS |
| Name: <i>Development Plan 2030 (T21)</i> |
| Year approved: <i>2007</i> Effective From: <i>2009</i> Effective To: <i>2013</i> |
| Is the NDP/PRS implemented? (X)Yes ()No |
| Did UNFPA participate in any Committees (Steering, management, technical, etc) related to the development of this NDP (PRS)? (X)Yes ()No |
| Please specify the role UNFPA played or activities UNFPA engaged (select all that apply): |
| (X) Advocacy for including population and development, reproductive health and gender equality issues. |
| () Participated in Working Groups for drafting the NDP (PRS). |
| () Provided technical assistance. |
| () Provided financial resources. |
| () Other, please specify: |
| Is an electronic version of the NDP (PRS) available? (X)Yes ()No please provide the link (or upload in DocuShare and provide the link): <i>Link previously provided</i> |
| Please provide a brief description of the NDP (PRS): <i>Jamaica has embarked on a 25-year National Development Plan - Jamaica 2030, which is expected to put the country in a position to achieve developed country status by the year 2030. It is a macro-economic model based on the T21 (WB) methodology The draft Jamaica Development Plan 2030 is expected to be prepared over a 1-year period (January 2007 - March 2008). This draft Plan will be tabled in the House of Parliament in April 2008. The final Plan will be completed after island wide consultations on the draft.</i> |

| Key elements | Inclusion in NDP/PRS | | | | | |
|--|----------------------|-----------------|----------|---------------------|--|---|
| | Situation analysis | Policy document | M&E plan | Resources allocated | Are there time-bound targets in relation to the key element? | Is the country monitoring these time-bound targets? |
| Population Dynamics and its inter-linkage with poverty | | | | | | |

| | | | | | | |
|---|-----|-----|-----|-----|-----|-----|
| Population size/growth/age structure | Yes | Yes | Yes | Yes | Yes | Yes |
| Fertility | Yes | Yes | Yes | No | Yes | Yes |
| Mortality | Yes | Yes | Yes | Yes | Yes | Yes |
| Migration | Yes | No | Yes | No | No | No |
| Population and poverty links | Yes | Yes | Yes | Yes | Yes | No |
| Reproductive Health, including HIV/AIDS | | | | | | |
| Universal access to reproductive health | Yes | Yes | Yes | Yes | Yes | Yes |
| Family planning | Yes | Yes | Yes | Yes | Yes | Yes |
| Maternal health | Yes | Yes | Yes | Yes | Yes | Yes |
| HIV/AIDS prevention | Yes | Yes | Yes | Yes | Yes | Yes |
| Availability of reproductive health indicators | Yes | Yes | Yes | Yes | Yes | Yes |
| Obstetric fistula | No | No | No | No | No | No |
| Gender equality | | | | | | |
| Gender and poverty links | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender and reprod. health links | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender-based violence | Yes | Yes | Yes | Yes | Yes | Yes |
| Availability of sex-disaggregated indicators | Yes | Yes | Yes | Yes | No | No |
| Young people's multi-sectoral needs | | | | | | |
| Adolescent reproductive health | Yes | Yes | Yes | Yes | Yes | Yes |
| HIV/AIDS prevention | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender-based violence prevention | Yes | No | Yes | Yes | No | Yes |
| Education, including vocation training | Yes | Yes | Yes | Yes | No | No |
| Employment and other income-generating opportunities | Yes | Yes | Yes | Yes | Yes | Yes |
| Challenges of emerging population issues | | | | | | |
| Population ageing | Yes | No | No | No | No | No |
| Population decline/ low fertility | Yes | Yes | No | Yes | No | No |
| International migration | Yes | No | No | No | No | No |
| Internal Migration/ Urbanisation | Yes | Yes | Yes | Yes | Yes | Yes |
| Environment/Climate Change | Yes | Yes | Yes | Yes | Yes | Yes |
| Comments: | | | | | | |
| Type: (X) NDP () PRS | | | | | | |
| Name: <i>Jamaica National development Plan: Vision 2030</i> | | | | | | |
| Year approved: 2009 Effective From: 2009 Effective To: 2030 | | | | | | |

Is the NDP/PRS implemented? Yes ()No

Did UNFPA participate in any Committees (Steering, management, technical, etc) related to the development of this NDP (PRS)? Yes ()No
Please specify the role UNFPA played or activities UNFPA engaged (select all that apply):

Advocacy for including population and development, reproductive health and gender equality issues.
 Participated in Working Groups for drafting the NDP (PRS).
 Provided technical assistance.
 Provided financial resources.
 Other, please specify:

Is an electronic version of the NDP (PRS) available? Yes ()No
please provide the link (or upload in Docushare and provide the link): *The document has already been uploaded into the system.*

Please provide a brief description of the NDP (PRS): *The National Development Plan: Vision 2030 provides a roadmap for highlighting the path to be taken by Jamaica in achieving developed country status by 2030.*

| Key elements | Inclusion in NDP/PRS | | | | | |
|---|----------------------|-----------------|----------|---------------------|--|---|
| | Situation analysis | Policy document | M&E plan | Resources allocated | Are there time-bound targets in relation to the key element? | Is the country monitoring these time-bound targets? |
| Population Dynamics and its inter-linkage with poverty | | | | | | |
| Population size/growth/age structure | Yes | Yes | Yes | Yes | Yes | Yes |
| Fertility | Yes | Yes | Yes | No | Yes | Yes |
| Mortality | Yes | Yes | Yes | Yes | Yes | Yes |
| Migration | Yes | No | Yes | No | No | No |
| Population and poverty links | Yes | Yes | Yes | Yes | Yes | No |
| Reproductive Health, including HIV/AIDS | | | | | | |
| Universal access to reproductive health | Yes | Yes | Yes | Yes | Yes | Yes |
| Family planning | Yes | Yes | Yes | Yes | Yes | Yes |
| Maternal health | Yes | Yes | Yes | Yes | Yes | Yes |
| HIV/AIDS prevention | Yes | Yes | Yes | Yes | Yes | Yes |
| Availability of reproductive health indicators | Yes | Yes | Yes | Yes | Yes | Yes |
| Obstetric fistula | No | No | No | No | No | No |
| Gender equality | | | | | | |
| Gender and poverty links | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender and reprod. health links | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender-based violence | Yes | Yes | Yes | Yes | Yes | Yes |
| Availability of sex-disaggregated indicators | Yes | Yes | Yes | Yes | No | No |
| Young people's multi-sectoral needs | | | | | | |
| Adolescent reproductive health | Yes | Yes | Yes | Yes | Yes | Yes |

| | | | | | | |
|---|--------------------|-----------------|----------|---------------------|--|---|
| HIV/AIDS prevention | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender-based violence prevention | Yes | No | Yes | Yes | No | Yes |
| Education, including vocation training | Yes | Yes | Yes | Yes | No | No |
| Employment and other income-generating opportunities | Yes | Yes | Yes | Yes | Yes | Yes |
| Challenges of emerging population issues | | | | | | |
| Population ageing | Yes | No | No | No | No | No |
| Population decline/ low fertility | Yes | Yes | No | Yes | No | No |
| International migration | Yes | No | No | No | No | No |
| Internal Migration/ Urbanisation | Yes | Yes | Yes | Yes | Yes | Yes |
| Environment/Climate Change | Yes | Yes | Yes | Yes | Yes | Yes |
| Comments: | | | | | | |
| Type: (X) NDP () PRS | | | | | | |
| Name: <i>National Development Plan: Vision 2030</i> | | | | | | |
| Year approved: 2009 Effective From: 2009 Effective To: 2013 | | | | | | |
| Is the NDP/PRS implemented? () Yes (X) No | | | | | | |
| Please explain why not: <i>The document was recently finalized at that time.</i> | | | | | | |
| Did UNFPA participate in any Committees (Steering, management, technical, etc) related to the development of this NDP (PRS)? (X) Yes () No Please specify the role UNFPA played or activities UNFPA engaged (select all that apply): | | | | | | |
| (X) Advocacy for including population and development, reproductive health and gender equality issues. (X) Participated in Working Groups for drafting the NDP (PRS). () Provided technical assistance. () Provided financial resources. () Other, please specify: | | | | | | |
| Is an electronic version of the NDP (PRS) available? (X) Yes () No please provide the link (or upload in Docushare and provide the link): <i>The document has already been uploaded into the system.</i> | | | | | | |
| Please provide a brief description of the NDP (PRS): <i>The document outlines the vision for accelerating Jamaica's development status and ensuring the country's movement from 'developing' to 'developed' country status by 2030.</i> | | | | | | |
| Inclusion in NDP/PRS | | | | | | |
| Key elements | Situation analysis | Policy document | M&E plan | Resources allocated | Are there time-bound targets in relation to the key element? | Is the country monitoring these time-bound targets? |
| Population Dynamics and its inter-linkage with poverty | | | | | | |
| Population size/growth/age structure | Yes | Yes | Yes | Yes | Yes | Yes |
| Fertility | Yes | Yes | Yes | No | Yes | Yes |
| Mortality | Yes | Yes | Yes | Yes | Yes | Yes |
| Migration | Yes | No | Yes | No | No | No |
| Population and poverty | | | | | | |

| links | YES | YES | YES | YES | YES | NO |
|---|-----|-----|-----|-----|-----|-----|
| Reproductive Health, including HIV/AIDS | | | | | | |
| Universal access to reproductive health | Yes | Yes | Yes | Yes | Yes | Yes |
| Family planning | Yes | Yes | Yes | Yes | Yes | Yes |
| Maternal health | Yes | Yes | Yes | Yes | Yes | Yes |
| HIV/AIDS prevention | Yes | Yes | Yes | Yes | Yes | Yes |
| Availability of reproductive health indicators | Yes | Yes | Yes | Yes | Yes | Yes |
| Obstetric fistula | No | No | No | No | No | No |
| Gender equality | | | | | | |
| Gender and poverty links | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender and reprod. health links | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender-based violence | Yes | Yes | Yes | Yes | Yes | Yes |
| Availability of sex-disaggregated indicators | Yes | Yes | Yes | Yes | No | No |
| Young people's multi-sectoral needs | | | | | | |
| Adolescent reproductive health | Yes | Yes | Yes | Yes | Yes | Yes |
| HIV/AIDS prevention | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender-based violence prevention | Yes | No | Yes | Yes | No | Yes |
| Education, including vocation training | Yes | Yes | Yes | Yes | No | No |
| Employment and other income-generating opportunities | Yes | Yes | Yes | Yes | Yes | Yes |
| Challenges of emerging population issues | | | | | | |
| Population ageing | Yes | No | No | No | No | No |
| Population decline/ low fertility | Yes | Yes | No | Yes | No | No |
| International migration | Yes | No | No | No | No | No |
| Internal Migration/ Urbanisation | Yes | Yes | Yes | Yes | Yes | Yes |
| Environment/Climate Change | Yes | Yes | Yes | Yes | Yes | Yes |
| Comments: <i>The National Development Plan links many of its impact statements to the MDG's. Since the goals are to be attained by 2030, there are monitoring frameworks in place across the sectors. Issues of population ageing and international migration are recognized by the Government as being critical. In 2011, the Government plans to develop a policy on International Migration, as well as undertake a situation analysis of the ageing population in Jamaica.</i> | | | | | | |
| Type: (X) NDP () PRS | | | | | | |
| Name: <i>Jamaica National development Plan: Vision 2030</i> | | | | | | |
| Year approved: 2009 Effective From: 2009 Effective To: 2030 | | | | | | |
| Is the NDP/PRS implemented? (X)Yes ()No | | | | | | |
| Did UNFPA participate in any Committees (Steering, management, technical, etc) related to the development of this NDP (PRS)? ()Yes (X)No | | | | | | |
| Is an electronic version of the NDP (PRS) available? (X)Yes ()No | | | | | | |

Please provide the link (or upload in DocShare and provide the link). The document has already been uploaded into the system.

Please provide a brief description of the NDP (PRS): *The National Development Plan: Vision 2030 details the areas of focus and programmes in which Jamaica will need to engage in order to achieve developed country status by 2030. The Plan is accompanied by several sector Plans including one for health, Population and Gender, which details the key actions that need to be undertaken in order to achieve developed country status.*

| Key elements | Inclusion in NDP/PRS | | | | | |
|---|----------------------|-----------------|----------|---------------------|--|---|
| | Situation analysis | Policy document | M&E plan | Resources allocated | Are there time-bound targets in relation to the key element? | Is the country monitoring these time-bound targets? |
| Population Dynamics and its inter-linkage with poverty | | | | | | |
| Population size/growth/age structure | Yes | Yes | Yes | Yes | Yes | Yes |
| Fertility | Yes | Yes | Yes | No | Yes | Yes |
| Mortality | Yes | Yes | Yes | Yes | Yes | Yes |
| Migration | Yes | No | Yes | No | No | No |
| Population and poverty links | Yes | Yes | Yes | Yes | Yes | No |
| Reproductive Health, including HIV/AIDS | | | | | | |
| Universal access to reproductive health | Yes | Yes | Yes | Yes | Yes | Yes |
| Family planning | Yes | Yes | Yes | Yes | Yes | Yes |
| Maternal health | Yes | Yes | Yes | Yes | Yes | Yes |
| HIV/AIDS prevention | Yes | Yes | Yes | Yes | Yes | Yes |
| Availability of reproductive health indicators | Yes | Yes | Yes | Yes | Yes | Yes |
| Obstetric fistula | No | No | No | No | No | No |
| Gender equality | | | | | | |
| Gender and poverty links | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender and reprod. health links | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender-based violence | Yes | Yes | Yes | Yes | Yes | Yes |
| Availability of sex-disaggregated indicators | Yes | Yes | Yes | Yes | No | No |
| Young people's multi-sectoral needs | | | | | | |
| Adolescent reproductive health | Yes | Yes | Yes | Yes | Yes | Yes |
| HIV/AIDS prevention | Yes | Yes | Yes | Yes | Yes | Yes |
| Gender-based violence prevention | Yes | No | Yes | Yes | No | Yes |
| Education, including vocation training | Yes | Yes | Yes | Yes | No | No |
| Employment and other income-generating opportunities | Yes | Yes | Yes | Yes | Yes | Yes |
| Challenges of emerging population issues | | | | | | |

| | | | | | | |
|-----------------------------------|-----|-----|-----|-----|-----|-----|
| Population ageing | Yes | No | No | No | No | No |
| Population decline/ low fertility | Yes | Yes | No | Yes | No | No |
| International migration | Yes | No | No | No | No | No |
| Internal Migration/ Urbanisation | Yes | Yes | Yes | Yes | Yes | Yes |
| Environment/Climate Change | Yes | Yes | Yes | Yes | Yes | Yes |
| Comments: | | | | | | |

Did UNFPA Country Office undertake the following activities related to emerging population issues in 2010?

| Emerging Population Issue | Engage in Policy Dialogue/ Facilitate Policy Formulation | Support Data Collection/ Research | Support Training/ Capacity Building | Advocate/Raise Awareness | Provide Technical Assistance | Include as part of Country Programme |
|-----------------------------------|--|-----------------------------------|-------------------------------------|--------------------------|------------------------------|--------------------------------------|
| Population ageing | Yes | Yes | No | No | Yes | No |
| Population decline/ low fertility | Yes | Yes | Yes | Yes | No | No |
| International migration | No | No | No | Yes | No | No |
| Internal migration/ Urbanisation | No | No | No | No | No | No |
| Environment/ Climate Change | No | No | No | No | No | No |

Outcome 1.2: Young people's rights and multi-sectoral needs incorporated into public policies, poverty reduction plans and expenditure frameworks, capitalizing on the demographic dividend

Indicator 3: Proportion of countries that address young people's multi-sectoral needs within their national development plans and poverty reduction strategies

Indicator 4: Proportion of countries that have an emergency preparedness plan/document in place that incorporates young people's sexual and reproductive health needs

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

UNFPA has supported the Ministry of health in developing a Strategic Plan for the healthy development of pre-Adolescents and Adolescents. The Plan is multi-sectoral and takes into consideration the needs of young people in terms of sexual and reproductive health, education and parenting among others. The Plan is currently being costed and should be ready for submission to Cabinet in the second quarter of 2011.

[X]b. Results regarding advocacy and policy dialogue

Through the consultations involved in the development of the National Strategic Plan for healthy pre-adolescents and

adolescents, several key actions have been initiated. One such action is the establishment of an adolescent working policy group, including a legal team which has been reviewing issues including inconsistencies between Policy and legislation regarding the age of consent and the age at which minors can access contraceptives. Therefore, these issues have been placed on the policy agenda for review and are being advocated for by UNFPA through our participation in the working group.

[]c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

The process of developing the National Strategic Plan has been a very consultative process. One key element has been the involvement of young people in the consultations across the four health regions in Jamaica. This was important in ensuring that their needs were adequately and accurately reflected in the Plan. It is also important to note that young persons are reflected in the Adolescent Policy working group in terms of their participation.

b. Key lessons learned

One of the major lessons learned is the importance of ensuring that young people are fully involved and engaged in the process of identifying key issues for adolescent development. Quite often, it is the adults who make determinations on the key issues that affect young people. However, involving these young people in a meaningful way was a key element in developing the Plan and ensures that the Plan is grounded in their realities.

c. Main challenges

The issue of pre-adolescent development was one that was supported by UNICEF who was also a partner in the process. One of the main challenges was ascertaining permission to discuss some of the more sensitive issues with younger children - though the discussion was approached in an age-appropriate manner by a professional in this area. However, the discussions revealed that pre-adolescents at the age of eight years old had significant knowledge of many issues in sexual and reproductive health. Therefore, the challenge is to get parents and other 'gatekeepers' to understand that sensitizing young people to these issues is not the same as encouraging them to have sex- but simply providing them with information that will allow them to make responsible choices.

d. Concrete steps to address the challenges and build on lessons learned

The important lesson is the need to engage the 'gatekeepers' involved in the lives of adolescents. This includes parents, faith-based organizations and other key players. Once the gatekeepers are involved and fully understand and support the reasons for addressing issues in adolescent sexual and reproductive health, it reduces the potential for opposition in this area

Outcome 1.3: Data on population dynamics, gender equality, young people, sexual and reproductive health and HIV/AIDS available, analyzed and used at national and sub-national levels to develop and monitor policies and programme implementation

Indicator 5: Proportion of countries that have completed their 2010 round of population and housing censuses as planned

Indicator 6: Proportion of countries that have conducted a national household/thematic survey that includes ICPD-related issues

Indicator 7: Proportion of national development plans that include time-bound indicators and targets from national/sub-national databases

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

The country office supported a data analysis training to strengthen the capacity of the National Family Planning Board (NFPB), the Statistical Institute of Jamaica (STATIN) and the University of the West Indies (UWI) to analyze the data in the 2008 Reproductive Health survey. The training was held in January 2010 in collaboration with the Centre for Disease Control (CDC). It was critical as it allowed participants to analyze the data, particularly information collected on young people - which was later reflected in a sub-report produced with a specific emphasis on the Reproductive health issues of young people.

a.1. During 2010, has your Country Office specifically contributed to Strengthen national capacity for conducting census operations and to manage and use census/survey data including development of databases.

(Please reply "Yes" only if in the assessment your Country Office has completed substantive initiatives as well as spent programme budget towards strengthening national capacity development in the specific areas listed below. If yes, then you must list three key initiatives/activities)

(X)Yes ()No

key initiative/activity 1

With the technical assistance of the SRO's Advisor on the census, the office supported the participation of the Statistical Institute of Jamaica in various training sessions on data coding, editing and analysis. This has strengthened the capacity of the Statistical institute of Jamaica to more effectively prepare for the April 2011 census.

key initiative/activity 2

The Office also procured and handed over six (6) PDA's to assist the Statistical institute of Jamaica with technologies to be used in the census process. This equipment was provided in a session geared towards strengthening the capacities of field officers who will participate in the conduct of the census.

key initiative/activity 3

A training exercise on the management of the census budget and financing was held with the assistance of the Technical Advisor on Census. the Statistical Institute of Jamaica participated actively in this initiative and their capacity in this area was significantly strengthened, which will assist in census preparations for April 2011.

[X]b. Results regarding advocacy and policy dialogue

In collaboration with STATIN, UNFPA prepared a 5 minute public service announcement (PSA) on the census to sensitize the public on the importance of being counted in the 2011 census. The theme of the video was 'Everyone counts: You, me- all a wi' (which is the Jamaican dialect for all of us). The PSA received extensive airplay and was viewed across the Jamaican society and served as an excellent advocacy tool for persons to understand the importance of participating in the national census.

[]c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

The data produced in the 2008 Reproductive Health Survey (finalized in 2010) has been extremely useful in providing good information for the National Adolescent Strategic Plan that has been developed. A youth forum was also held to disseminate the findings of the youth component of the survey, and various organizations have been utilizing the data in their programming as a basis for supporting youth work.

b. Key lessons learned

The conduct of the Reproductive Health Survey is a very costly exercise. In the case of Jamaica, the activity was almost exclusively funded by USAID. It is important in future however, that the Government attempt to commit additional financial resources to the Reproductive Health survey. If the conduct of the RHS is exclusively dependent on external funds, then in the absence of these external funds, this important exercise may not be conducted. Therefore, Government should seek to increase financial commitments for this exercise.

c. Main challenges

The cost of undertaking a Reproductive Health survey and other major national data collection exercises can be quite exorbitant. This has proven to be one of the major challenges to date.

d. Concrete steps to address the challenges and build on lessons learned

UNFPA could play a major role in advocating with Government on the importance of financing a greater proportion of the costs for this activity. An important national survey of this nature should reflect a greater deal of 'buy-in' from the government.

B. Development Results Framework Indicators.

Is there a 2010 round of population and housing census? ()Yes (X)No

All surveys that you have reported in 2009 will be preloaded to RDEF for your review. Please make necessary updates and focus on the new surveys. For each major new survey, please supply the following information:

| | | |
|-----------------------|------------------------------------|----------------------------------|
| Name: | Survey of Living Conditions | |
| Status of the survey: | Being undertaken | |
| Year conducted: 2009 | Survey reference period from: 2008 | Survey reference period to: 2009 |

Geographical coverage: National

Brief description of the linkages between the survey and ICPD related issues: *The survey examines issues dealing with health, education, housing and the demographic characteristics of the society which are integrally linked with the ICPD agenda.*

Who are the main administrators of the survey: *The Planning Institute of Jamaica and the Statistical Institute of Jamaica*

Were the following topics included in the survey:

| Topics | Included? |
|-------------------------|-----------|
| Maternal health | Yes |
| Morbidity | Yes |
| Infant and child health | Yes |
| Fertility | Yes |
| Family planning | Yes |

| Topics | Included? |
|--------------------------------|-----------|
| Internal migration | Yes |
| Adolescent reproductive health | Yes |
| International migration | No |
| HIV/AIDS | Yes |
| Urbanization | Yes |

| Topics | Included? |
|-----------------------------------|-----------|
| Gender based violence | Yes |
| Women's status/gender equality | Yes |
| Female genital cutting/mutilation | No |
| Poverty | Yes |
| Mortality | Yes |

Others, please specify:

Who are the key donors for survey, if any: *Government of Jamaica*

Estimated cost of conducting the survey (in USD):

Comments: *The Survey of living Conditions is produced on an annual basis.*

Name: RHS

Status of the survey: Completed, data being processed

Year conducted: 2008 Survey reference period from: 2008 Survey reference period to: 2008

Geographical coverage: National

Brief description of the linkages between the survey and ICPD related issues: *The survey covers various issues including sexual and reproductive health issues, fertility trends, unions and gender-based violence.*

Who are the main administrators of the survey: *National Family Planning Board*

Were the following topics included in the survey:

| Topics | Included? |
|-------------------------|-----------|
| Maternal health | No |
| Morbidity | No |
| Infant and child health | No |
| Fertility | Yes |
| Family planning | Yes |

| Topics | Included? |
|--------------------------------|-----------|
| Internal migration | No |
| Adolescent reproductive health | Yes |
| International migration | No |
| HIV/AIDS | Yes |
| Urbanization | No |

| Topics | Included? |
|-----------------------------------|-----------|
| Gender based violence | Yes |
| Women's status/gender equality | Yes |
| Female genital cutting/mutilation | No |
| Poverty | Yes |
| Mortality | No |

Others, please specify:

Who are the key donors for survey, if any: *Government of Jamaica, USAID*

| Estimated cost of conducting the survey (in USD): | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|-----------|-----------------------|-----|--------------------------------|-----|-----------------------------------|-----|-----------|-----|-----------------|-----|--|--------|-----------|--------------------|-----|--------------------------------|-----|-------------------------|-----|----------|-----|--------------|-----|
| Comments: | <i>The Reproductive Health Survey was completed in October 2009.</i> | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | Economic and Social Survey of Jamaica | | | | | | | | | | | | | | | | | | | | | | | | |
| Status of the survey: | Completed, data fully disseminated | | | | | | | | | | | | | | | | | | | | | | | | |
| Year conducted: 2009 | Survey reference period from: 2008 Survey reference period to: 2009 | | | | | | | | | | | | | | | | | | | | | | | | |
| Geographical coverage: | National | | | | | | | | | | | | | | | | | | | | | | | | |
| Brief description of the linkages between the survey and ICPD related issues: | <i>The survey examines issues of health, population and gender. It also reviews the interlinkages between the various areas.</i> | | | | | | | | | | | | | | | | | | | | | | | | |
| Who are the main administrators of the survey: | <i>Planning Institute of Jamaica</i> | | | | | | | | | | | | | | | | | | | | | | | | |
| Were the following topics included in the survey: | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>Topics</th> <th>Included?</th> </tr> </thead> <tbody> <tr> <td>Maternal health</td> <td>Yes</td> </tr> <tr> <td>Morbidity</td> <td>Yes</td> </tr> <tr> <td>Infant and child health</td> <td>Yes</td> </tr> <tr> <td>Fertility</td> <td>Yes</td> </tr> <tr> <td>Family planning</td> <td>Yes</td> </tr> </tbody> </table> | Topics | Included? | Maternal health | Yes | Morbidity | Yes | Infant and child health | Yes | Fertility | Yes | Family planning | Yes | <table border="1"> <thead> <tr> <th>Topics</th> <th>Included?</th> </tr> </thead> <tbody> <tr> <td>Internal migration</td> <td>Yes</td> </tr> <tr> <td>Adolescent reproductive health</td> <td>Yes</td> </tr> <tr> <td>International migration</td> <td>Yes</td> </tr> <tr> <td>HIV/AIDS</td> <td>Yes</td> </tr> <tr> <td>Urbanization</td> <td>Yes</td> </tr> </tbody> </table> | Topics | Included? | Internal migration | Yes | Adolescent reproductive health | Yes | International migration | Yes | HIV/AIDS | Yes | Urbanization | Yes |
| Topics | Included? | | | | | | | | | | | | | | | | | | | | | | | | |
| Maternal health | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Morbidity | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Infant and child health | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Fertility | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Family planning | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Topics | Included? | | | | | | | | | | | | | | | | | | | | | | | | |
| Internal migration | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Adolescent reproductive health | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| International migration | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| HIV/AIDS | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Urbanization | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>Topics</th> <th>Included?</th> </tr> </thead> <tbody> <tr> <td>Gender based violence</td> <td>Yes</td> </tr> <tr> <td>Women's status/gender equality</td> <td>Yes</td> </tr> <tr> <td>Female genital cutting/mutilation</td> <td>No</td> </tr> <tr> <td>Poverty</td> <td>Yes</td> </tr> <tr> <td>Mortality</td> <td>Yes</td> </tr> </tbody> </table> | Topics | Included? | Gender based violence | Yes | Women's status/gender equality | Yes | Female genital cutting/mutilation | No | Poverty | Yes | Mortality | Yes | | | | | | | | | | | | | |
| Topics | Included? | | | | | | | | | | | | | | | | | | | | | | | | |
| Gender based violence | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Women's status/gender equality | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Female genital cutting/mutilation | No | | | | | | | | | | | | | | | | | | | | | | | | |
| Poverty | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Mortality | Yes | | | | | | | | | | | | | | | | | | | | | | | | |
| Others, please specify: | | | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|---|--|
| Who are the key donors for survey, if any: | <i>Government of Jamaica</i> |
| Estimated cost of conducting the survey (in USD): | |
| Comments: | <i>The ESSJ is produced annually by the Government of Jamaica.</i> |

| | |
|---|--|
| Name: | Economic and Social Survey of Jamaica |
| Status of the survey: | Completed, data fully disseminated |
| Year conducted: 2009 | Survey reference period from: 2008 Survey reference period to: 2009 |
| Geographical coverage: | National |
| Brief description of the linkages between the survey and ICPD related issues: | <i>The Economic and Social survey of Jamaica (ESSJ) captures information on the relationship between economic and social issues in Jamaica. It examines issues such as health, poverty and gender and examines the linkages between these areas.</i> |
| Who are the main administrators of the survey: | <i>Planning Institute of Jamaica</i> |

| Were the following topics included in the survey: | | | | | | | | | | | | | | | | | |
|---|-----------|-----------|-----------------------|-----|--------------------------------|-----|-------------------------|-----|--|--------|-----------|--------------------|-----|--------------------------------|-----|---------------|-----|
| <table border="1"> <thead> <tr> <th>Topics</th> <th>Included?</th> </tr> </thead> <tbody> <tr> <td>Maternal health</td> <td>Yes</td> </tr> <tr> <td>Morbidity</td> <td>Yes</td> </tr> <tr> <td>Infant and child health</td> <td>Yes</td> </tr> </tbody> </table> | Topics | Included? | Maternal health | Yes | Morbidity | Yes | Infant and child health | Yes | <table border="1"> <thead> <tr> <th>Topics</th> <th>Included?</th> </tr> </thead> <tbody> <tr> <td>Internal migration</td> <td>Yes</td> </tr> <tr> <td>Adolescent reproductive health</td> <td>Yes</td> </tr> <tr> <td>International</td> <td>Yes</td> </tr> </tbody> </table> | Topics | Included? | Internal migration | Yes | Adolescent reproductive health | Yes | International | Yes |
| Topics | Included? | | | | | | | | | | | | | | | | |
| Maternal health | Yes | | | | | | | | | | | | | | | | |
| Morbidity | Yes | | | | | | | | | | | | | | | | |
| Infant and child health | Yes | | | | | | | | | | | | | | | | |
| Topics | Included? | | | | | | | | | | | | | | | | |
| Internal migration | Yes | | | | | | | | | | | | | | | | |
| Adolescent reproductive health | Yes | | | | | | | | | | | | | | | | |
| International | Yes | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>Topics</th> <th>Included?</th> </tr> </thead> <tbody> <tr> <td>Gender based violence</td> <td>Yes</td> </tr> <tr> <td>Women's status/gender equality</td> <td>Yes</td> </tr> <tr> <td>Female genital</td> <td>No</td> </tr> </tbody> </table> | Topics | Included? | Gender based violence | Yes | Women's status/gender equality | Yes | Female genital | No | | | | | | | | | |
| Topics | Included? | | | | | | | | | | | | | | | | |
| Gender based violence | Yes | | | | | | | | | | | | | | | | |
| Women's status/gender equality | Yes | | | | | | | | | | | | | | | | |
| Female genital | No | | | | | | | | | | | | | | | | |

| | | | | | |
|---|-----|--|-----|-----------|-----|
| Fertility | Yes | HIV/AIDS | Yes | Poverty | Yes |
| Family planning | Yes | Urbanization | Yes | Mortality | Yes |
| Others, please specify: | | | | | |
| Who are the key donors for survey, if any: | | Government of Jamaica | | | |
| Estimated cost of conducting the survey (in USD): | | | | | |
| Comments: | | The ESSJ is conducted by the Planning Institute of Jamaica on an annual basis. | | | |

Outcome 1.4: Emerging population issues—especially migration, urbanization, changing age structures (transition to adulthood/ageing) and population and the environment—incorporated in global, regional and national development agendas

Indicator 8: Proportion of national development plans and poverty reduction strategies that address the challenges of emerging population issues

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

In 2010, UNFPA participated in discussions with the Planning Institute of Jamaica which has expressed interest in developing a Policy on International migration. The policy development process will begin 2011. Likewise there has been a keen interest expressed in the preparation of a situation analysis on Ageing population in Jamaica. While UNFPA will continue to engage in discussions around these issues at the highest levels of Government, the office still needs to determine the degree of involvement where programming is concerned.

[X]b. Results regarding advocacy and policy dialogue

In collaboration with HelpAge International, UNFPA supported a Knowledge Attitudes Practice and Behaviour (KAPB) study on HIV among older persons. This was important in raising awareness of this issue among the Jamaican population and was widely disseminated among key stakeholders. The partners have confirmed the usefulness of this information in raising their awareness levels to the issues and challenges that confront older persons in the society- particularly in relation to health issues.

[]c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

The Population Sector Plan from the Vision 2030 document raises many of these emerging issues including migration, changing age structures and urbanization. The document also makes the link between these population issues and HIV/AIDS which is important for promoting a more comprehensive understanding of the issues.

b. Key lessons learned

It is important to make the linkages between these key population issues in our work. However, given the limited human and technical resources in this area, UNFPA must prioritize the issues that can actually be addressed in a strategic way. Where some of these issues are concerned, the organization must form strategic partnerships with other actors who may have greater technical expertise in these emerging areas such as IOM, or HelpAge International.

c. Main challenges

The main challenges are ensuring that these issues are accorded priority attention in the development agenda over the next few years. While national partners have identified these issues as being key to development in Jamaica, there is a medium term policy framework that establishes the 5 year priorities that the Government will pursue. If these issues are not outlined in the medium term framework, then there is a possibility that they may not receive the requisite priority attention, or the resources required to address priority actions in these areas.

d. Concrete steps to address the challenges and build on lessons learned

The UNFPA needs to engage in stronger advocacy with the Government and national partners to ensure that action plans are put into place to address key issues such as migration, urbanization and changing age structures. These issues are already having a profound impact on the Jamaican society and will continue to do so in the coming years. Therefore, UNFPA should establish linkages with organizations that have a comparative advantage in these areas and produce evidence based information as a basis for advocacy with the Government. This could be an important action to help place these issues as a priority on the national agenda. It should be noted that the Government has already shared with us , a proposal on International migration. UNFPA will determine how best to partner with the Planning Institute of Jamaica (PIOJ) on this very important issue.

Outcome 2.1: Reproductive rights and sexual reproductive health (SRH) demand promoted and the essential SRH package, including reproductive health commodities and human resources for health, integrated in public policies of development and humanitarian frameworks with strengthened implementation monitoring
Indicator 9: Unmet need for family planning

Indicator 10: Proportion of humanitarian crisis and post-crisis situations where the minimum initial service package (MISP) was implemented

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

a. Results regarding national capacity development

National partners in Jamaica were trained in issues of reproductive health commodity security and comprehensive condom programming as well as behaviour change communication. Both government and NGO partners were also provided with supplies of male and female condoms and have replicated training activities with vulnerable populations including sex workers, men who have sex with men , women and young people in order to promote behaviour change.

a.1. During 2010, has your Country Office specifically contributed to Strengthen capacity for humanitarian systems and sexual reproductive health, HIV and gender-based violence.

(Please reply "Yes" only if in the assessment your Country Office has completed substantive initiatives as well as spent programme budget towards strengthening national capacity development in the specific areas listed below. If yes, then you must list three key initiatives/activities)

() Yes (X) No

b. Results regarding advocacy and policy dialogue

c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

Through the comprehensive condom programme which made 2 million male condoms and 300,000 female condoms available within the public and NGO sector, many vulnerable populations were able to more easily access these commodities. One good practice was the involvement of men in the promotion of the female condom. Since one of the main issues of concern is the risky sexual practices of many Jamaican men and the norm of multiple partnerships, it was important to involve men in behaviour change communication programmes, and help them to understand issues of promoting reproductive health and preventing HIV infection, including the use of the female condom by partners in their sexual relations. Additionally, with the passage of Tropical storm Nicole in September 2010, UNFPA partnered with the Jamaica Red Cross to ensure the distribution of hygiene kits to individuals who were displaced. The hygiene kits contained both male and female condoms and were shared with men and women who were made vulnerable due to dislocation from their homes, and limited to access to various basic services.

b. Key lessons learned

One of the lessons learned is that there has to be more targeted interventions focused on men and the integration of men's health needs into public policies. UNFPA has been partnering with government and NGO's and has developed a television series targeting male sexual and reproductive health, however, there needs to be a specific focus on this issue at the policy level. The second major lesson learned with respect to access to SRH services in a disaster setting is the importance of pre-positioning to the extent possible so that assistance can be delivered in a rapid manner.

c. Main challenges

The global economic crisis has affected the policy environment for the promotion of reproductive health. Issues of macroeconomic development, debt management and crime and violence have consumed the development agenda in Jamaica, and as a result, the policy environment for promotion of RH has been somewhat weakened. However, one opportunity within this context, is the fact that Government is now in the process of re-structuring the public sector, including the health system to make it more efficient. As a part of this architecture, UNFPA is supporting a consultant to examine the integration of the HIV programme into sexual and reproductive health. This will present an opportunity to integrate and strengthen services in these areas so that we are able to reach the most-at-risk populations in a more comprehensive way.

d. Concrete steps to address the challenges and build on lessons learned

UNFPA will need to engage in significantly more advocacy to raise awareness on the importance of investing in reproductive health and the integration of HIV and AIDS, maternal and other reproductive health services in order to promote greater efficiency in the delivery of health services. This will involve developing evidence-based position papers including discussions on the benefits of investing in reproductive health and integration of services, and the costs (financial) and otherwise of not doing so. One concrete step that UNFPA has taken in terms of achieving maximum levels of preparedness, is the pre-positioning of hygiene kits that can be quickly deployed in an emergency. Through support from the Humanitarian Branch and LACRO, the office was able to procure 1000 hygiene kits for pre-positioning in Jamaica. Therefore in the next disaster, we will be able to deploy this assistance fairly quickly.

B. Development Results Framework Indicators.

Did the country experience any humanitarian crisis situation in 2010? ()Yes (X)No

Outcome 2.2: Access and utilization of quality maternal health services increased in order to reduce maternal mortality and morbidity, including the prevention of unsafe abortion and management of its complications
Indicator 11: Proportion of births attended by skilled health personnel

Indicator 12: Proportion of countries with caesarean sections as a proportion of all births that is less than 5%

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

In 2010, UNFPA supported the development of a public service announcement on 'the warning signs of complications during pregnancy.' The PSA was distributed in several health centres across Jamaica and were viewed by visitors to the clinics.

a.1. During 2010, has your Country Office specifically contributed to Strengthen national capacity of health institutions and providers at all levels to provide quality maternal health services, including services for complications of abortion and quality post abortion care.

(Please reply "Yes" only if in the assessment your Country Office has completed substantive initiatives as well as spent programme budget towards strengthening national capacity development in the specific areas listed below. If yes, then you

must list three key initiatives/activities)

() Yes (X) No

[] b. Results regarding advocacy and policy dialogue

[] c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

UNFPA has supported the development of the PSA in maternal health and has begun to show these in various health centres and clinic settings. This has served to increase the levels of awareness of many of the clients on the warning signs to the complications in pregnancy.

b. Key lessons learned

In the Jamaican context, the research has shown that the leading causes of maternal death are indirect causes such as hypertension, diabetes and HIV/AIDS as the direct causes have been decreasing in recent years. Therefore, the Ministry of Health is now looking at integrating other aspects of healthy lifestyle programmes into the maternal health programme. The key lesson learned is that integration of various health programmes including HIV prevention, maternal and child health contributes to the delivery of more holistic health care services and could potentially result in a reduction in maternal health in the country.

c. Main challenges

The main challenges to achieving the outcome is the shortage of human resources in the health sector. In Jamaica for example, there are only two persons in the central Ministry who are responsible for dealing with issues of maternal health. Additionally, these individuals are frequently diverted into other areas of work whenever an emergency arises in health. Therefore, the emphasis on maternal health becomes diluted on many occasions.

d. Concrete steps to address the challenges and build on lessons learned

UNFPA has been advocating for the integration of HIV into sexual and reproductive health, which would include maternal health services. As a result of this advocacy, there is now a consultancy being undertaken to review the governance and legal structures required to facilitate this integration. UNFPA will continue to provide financial and technical support to the integration process as one means of promoting greater management and efficiency with respect to maternal health. The integration of these services should also provide a mechanism for establishing more effective human resource delivery in the health sector, and contribute to greater efficiencies in dealing with not only maternal health, but adolescent health as well.

Outcome 2.3: Access to and utilization of quality voluntary family planning services by individuals and couples increased according to reproductive intention

Indicator 13: Contraceptive prevalence rate—modern methods

Indicator 14: Proportion of countries with service delivery points (SDPs) offering at least three modern methods of contraception

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

Through the reproductive health commodity security programme and more specifically, the comprehensive condom programme, several organizations have reported increased demand for contraceptives by their repeat clients, including couples and individuals. These include the bureau of Women's Affairs, The Jamaica network of Seropositives (JN+), Jamaica AIDS Support for life (JASL), the University of the West Indies Health Centre among others. With the increased information and behaviour change communication tools and materials introduced through the different organizations, the demand for male and female condoms in particular have increased. UNFPA also provided training for organizations involved in the comprehensive condom programme on demand generation, logistics management and social marketing of the female condom.

a.1. During 2010, has your Country Office specifically contributed to Strengthen national capacity to ensure reproductive health commodity security including comprehensive condom programming.
 (Please reply "Yes" only if in the assessment your Country Office has completed substantive initiatives as well as spent programme budget towards strengthening national capacity development in the specific areas listed below. If yes, then you must list three key initiatives/activities)

(X)Yes ()No

key initiative/activity 1

UNFPA partnered with Population Services International (PSI) to train government and NGO partners on social marketing of the female condom in particular, but more specifically on generating demand for condoms and other reproductive health commodities.

key initiative/activity 2

UNFPA undertook training with partners involved in the comprehensive condom programme on monitoring and evaluation of the stock of commodities. This was geared towards strengthening their capacities to manage the supply of commodities that they had received. The use of the Channel logistics management system was also utilized as a mechanism in managing the supply.

key initiative/activity 3

Several national partners including the Ministry of Health and members of UNFPA's Youth Advisory group participated in a subregional workshop held in Jamaica in October 2010 in order to share UNFPA's draft Global Strategy on Demand Generation for Male and Female condoms. The workshop also allowed participants from across the Caribbean sub-region to share their experiences in promoting male and female condoms as well as behaviour change activities.

[]b. Results regarding advocacy and policy dialogue

[]c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

According to the results of the Reproductive health Survey, there has been an increase in the contraceptive prevalence rate in Jamaica. The close partnership between the UNFPA and the Government in promoting reproductive health has been important in contributing towards this important change.

b. Key lessons learned

One of the major lessons learned from the data in the 2008 RHS is the fact that there has been significant progress in the promotion of reproductive health including family planning in Jamaica over the last few years. The fact that the percentage of unintended pregnancies has declined from 58 to 47% in the last five years is evidence of this progress. The major lesson is that targetted interventions, community-based initiatives, behaviour change communication and increased access to reproductive health commodities is crucial for reaching various populations, particularly those who are most vulnerable.

c. Main challenges

The main challenge has been a weakness in the consistent utilization of family planning services by some couples. The 2008 Knowledge, Attitudes and Practice Survey indicates that despite significant knowledge about family planning, including HIV prevention, this sometimes does not translate into actions on the part of individuals. Therefore, while tremendous progress has been made, there still needs to be significant investment in behaviour change communication programmes.

d. Concrete steps to address the challenges and build on lessons learned

During the course of 2011, UNFPA will be strengthening the partnership with the National Family Planning Board to scale up the promotion of family planning methods. A major public awareness campaign will also be implemented to build on the one currently focussed on promoting behaviour change among men. The objective is to sensitize the general public including couples on the importance of safer sexual practices.

B. Development Results Framework Indicators.

1. Please provide the following information about SDPs providing family planning services in the country. When available, information preferably should be provided from nationally representative assessments/surveys such as Service Provision Assessments (SPA), Service Availability Mapping (SAM) or RHCS surveys.

| SDPs providing family planning services | Percentage of SDPs |
|--|--------------------|
| a. SDPs that provide at least THREE modern contraceptive methods | 94% |
| b. SDPs that offer ANY modern contraceptive methods | 90% |

c. SDPs that offer family planning counselling

90%

d. Source of information: 2008

Nationally representative

Urban only

UNFPA supported SDPs

Other

e. Coverage of data:

f. Year: 2010

2. Comments (if any that would help clarifying the information provided):

Family planning has been integrated in primary health care since the 1970s. Three or more family planning methods are available in Type 2 - 5 health clinics and in maternity hospitals. In Type 1 clinics only condoms are available. There are some 363 health centres. UNFPA does not have service delivery points that it supports directly but complements governments efforts.

Outcome 2.4: Demand, access to and utilization of quality HIV and STI prevention services, especially for women, young people, and other vulnerable groups, including populations of humanitarian concern increased

Indicator 15: Percentage of young people with correct knowledge about HIV/AIDS preventive practices

Indicator 16: Condom use at last high risk sex

Indicator 17: Percentage of sex workers reached with HIV prevention programmes

Indicator 18: Percentage of HIV positive pregnant women who received anti-retrovirals to reduce the risk of mother-to-child transmission

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

In collaboration with the National HIV Programme, UNFPA has facilitated a technical working group tasked with examining the major challenges to HIV prevention issues among sex workers and men who have sex with men (MSM) including stigma and discrimination, barriers to access of sexual and reproductive health information and services. The group benefited from a major training exercise that included sessions on promoting reproductive rights, particularly among vulnerable populations, gender equality and diversity. Additionally, through the comprehensive condom programme, youth with disabilities, women, persons living with HIV, sex workers and men who have sex with men were able to access commodities and training that provided them with the information allowed them to engage in safer sexual practices. The programme involved various dimensions including behaviour change communication sessions, demonstration of the use of male and female condoms, counselling, training on condom negotiation, and condom distribution to participants. Partners involved in the intervention included the Jamaica Red Cross, the Bureau of Women's Affairs, the Jamaica Council for Persons with Disabilities, the University of the West Indies Health Centre among others. Reports from partners have indicated that the demand for contraceptives has increased among the various target groups. In particular, the female condom has become increasingly popular among various interest groups - although there still needs to be additional work in order to scale up the acceptability of this method.

a.1. During 2010, has your Country Office specifically contributed to Strengthen national capacity of health institutions and civil society organizations to provide information, services and develop skills for HIV/AIDS prevention among women and young people.

(Please reply "Yes" only if in the assessment your Country Office has completed substantive initiatives as well as spent programme budget towards strengthening national capacity development in the specific areas listed below. If yes, then you must list three key initiatives/activities)

Yes No

key initiative/activity 1

UNFPA collaborated with the Victoria Jubilee, Jamaica's specialized maternity hospital to strengthen their Adolescent Health Clinic. The clinic operates on a Thursday morning and sessions are conducted with adolescent mothers to discuss antenatal care and maternal health as well as issues of family planning. UNFPA has provided information on family planning and HIV prevention including a manual entitled, 'You, your life, Your Dreams' which the Counsellors have utilized in their sessions with the girls. The manual was produced by UNFPA in collaboration with the Caribbean Community - CARICOM and addresses various issues of interest to young people, including peer pressure, puberty, sexual and reproductive health

issues and drug/alcohol abuse.

key initiative/activity 2

In collaboration with the Jamaica Network of Seropositives (JN+) UNFPA hosted a series of workshops focussing on positive prevention and sexual and reproductive health and rights. The workshop targeted young positive women and examined issues such as gender inequality, stigma and discrimination and reproductive rights.

key initiative/activity 3

UNFPA has partnered with FAMPLAN, an IPPF affiliate in Jamaica to provide male and female condoms as well as resource materials to be used in the adolescent sexual and reproductive health programme in the parish of St. Ann. Several posters on family planning have been developed, along with pamphlets on information that young men should know about condoms, infertility, HIV prevention among others.

[X]b. Results regarding advocacy and policy dialogue

The Adolescent Strategic Plan that is currently being developed can be partially attributed to UNFPA's advocacy efforts. In collaboration with the Ministry of Health and UNICEF, UNFPA has been raising awareness regarding the need to have a comprehensive and integrated framework for addressing the sexual and reproductive health and other needs of young people.

[]c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

The development of a television drama series known as 'Wise Up' which targets young men and their sexual and reproductive health behaviours is one of the innovative programmes that has been developed for reaching young people. The series was produced in collaboration with the National Family Planning Board, and has been widely disseminated by the local television stations. Young people have indicated that the series is a very informative and useful one, and has given it a 'thumbs up.'

b. Key lessons learned

Among the key lessons learned is the fact that there has to be greater focus on more vulnerable groups in promoting access to contraceptives. For example, among sex workers and men who have sex with men, the estimated HIV prevalence rate is several times higher than the national prevalence rate at 1.6%. Therefore, it is important that greater emphasis be placed on the most vulnerable populations.

c. Main challenges

One of the main challenges is the fact that some of these vulnerable populations are very hard to reach. Therefore, efforts have to be exclusively targeted to reaching these population groups. Due to issues of stigma and discrimination, these populations are often marginalized and do not have easy access to reproductive health services. Therefore, UNFPA has to target the interventions to reach these groups.

d. Concrete steps to address the challenges and build on lessons learned

Among the lessons learned is the fact that there has to be greater institutional strengthening of the NGO's that have access to these marginalized groups. Because of the stigma and discrimination, it is often the NGO's who are able to work closely with vulnerable populations, as opposed to Government agencies and development partners. However, the NGO capacity is often quite weak and therefore, they require programmatic, financial and operational support to more effectively deliver their programmes and increase demand for and access to sexual and reproductive health services by the vulnerable populations. UNFPA will therefore strengthen the capacity of selected NGO's to reach the most vulnerable populations during the course of 2011. PAF funds have already been approved in association with UNAIDS for the implementation of this activity.

Outcome 2.5: Access of young people to SRH, HIV and gender-based violence prevention services, and gender-sensitive life skills-based SRH education improved as part of a holistic multisectoral approach to young people's development

Indicator 19: Percentage of countries with secondary school curricula including gender-sensitive, life skills based SRH/HIV prevention

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

a. Results regarding national capacity development

In partnership with the National Centre for Youth Development, UNFPA supported the training of 150 community-based youth leaders in 5 parishes across Jamaica. In this training, the young people were exposed to extensive information on sexual and reproductive health and HIV prevention. Materials including the manual, 'You, Your Life, your Dreams' was disseminated to the young people and they were trained as peer counsellors who will be based in youth information centres. Youth information centres are essentially youth friendly spaces where young people are able to access information on a wide range of issues including sexual and reproductive health services. UNFPA has also partnered with the Ministry of Education in Jamaica to disseminate the manual, 'You, your life, Your Dreams' in over 350 schools. The manual was produced by UNFPA in collaboration with CARICOM and examines issues that affect young people including menstruation, substance abuse and sexual and reproductive health. The manual is currently utilized by teachers as a resource guide to supplement the Health and Family Life Education curriculum. Several hundred teachers were trained in July 2010 on the use of the manual including issues of gender equality.

b. Results regarding advocacy and policy dialogue

c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

In collaboration with the Bureau of Women's Affairs, UNFPA established a mentorship programme for young males in several high schools across Jamaica. The aim of the programme is to train young males on issues such as gender-based violence prevention and other life skills.

b. Key lessons learned

One of the key lessons learned in relation to this outcome is that in order to address issues related to access of services by young people in a holistic way, then the laws of the country must clearly outline the framework for access. In the case of Jamaica for example, the Ministry of Health has a policy governing access to contraceptives by minors, which allows health care providers to deliver contraceptive services if certain conditions are met. However, there is a Child Care and Protection Act which indicates that any adult who is aware of sexual activities of minors should report it to the relevant authorities or they may face prosecution. Therefore, there is some lack of clarity where the Policy and the Act are concerned.

c. Main challenges

One of the main challenges is the lack of clarity in policies and the Acts that address adolescent sexual and reproductive health issues. This is a major barrier which prevents young people from accessing services as it is left to the discretion of individuals. Therefore, there has to be a clear directive on how to proceed in these circumstances

d. Concrete steps to address the challenges and build on lessons learned

UNFPA has decided to engage in advocacy with the Government in Jamaica and throughout the Caribbean subregion in order to promote the development of legislation with clear guidance on access to sexual and reproductive health services by young people.

B. Development Results Framework Indicators.

Latest indicator value: 44%

Year of data: 2009

Source of data: Ministry of Education

Comments: *Through a partnership with the Ministry of Education, UNFPA has introduced the manual, 'You, Your Life, Your Dreams' to young people and teachers in the formal education system as a resource text. The manual, produced by UNFPA and CARICOM, addresses various issues of importance to young people including sex and sexuality, substance abuse, relationships and nutrition. This manual is being utilized in over 325 schools across Jamaica. Teachers have indicated that the text is an excellent resource document, and it used to supplement the information in the Health and Family Life Education curriculum (HFLE). Jamaica and there are plans to develop an accompanying SRH programme for parents in 2010. UNFPA also participates in an intersectoral committee comprising the Ministry of Health, Education, Global Fund, UNICEF and other partners in which issues of sexual and reproductive health are discussed and programmes targeting young people are identified. The HFLE curriculum supported by UNICEF is currently being evaluated, which is also an opportunity for UNFPA to provide inputs in strengthening the sexual and reproductive health component of the curriculum, through participation in this committee. UNFPA has also collaborated with the Bureau of Womens Affairs and the Ministry of Education to educate students on the issues of gender, gender-based violence and women's empowerment. This*

Outcome 3.1: Gender equality and the human rights of women and adolescent girls, particularly their reproductive rights, integrated in national policies, development frameworks and laws
Indicator 20: Proportion of countries that implement/enforce policies and laws in line with the United Nations Security Council Resolution 1325 on Women, Peace and Security in conflict and post-conflict

Indicator 21: Proportion of countries that have incorporated reproductive rights into the convention on elimination of all forms of discrimination against women (CEDAW) reports

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

a. Results regarding national capacity development

UNFPA supported the Bureau of Women's Affairs in conducting various training programmes geared towards empowering women on their sexual and reproductive health and rights. Issues of reproductive health have been incorporated into the National Gender Policy (2007), which was supported by UNFPA. Additionally, in line with the sector Plans for Vision 2030, the Gender sector plan addresses issues of women's empowerment and sexual and reproductive health

b. Results regarding advocacy and policy dialogue

c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

The National Gender Policy and the Gender Sector Plan for Vision 2030 can be identified as key achievements for Jamaica as both recognize the importance and the strong linkages between gender equality and sexual and reproductive health

b. Key lessons learned

c. Main challenges

Generally, the pace at which Policy development and approval moves in Jamaica is relatively slow. The National Gender Policy is no exception, and therefore the Policy has still not been approved despite the fact that it was submitted to Cabinet, well over one year ago. This can be attributed to weaknesses in the systems and structures that are in place to oversee this process

d. Concrete steps to address the challenges and build on lessons learned

From UNFPA's perspective, we will continue to advocate for the acceleration of the policy approval and implementation process.

B. Development Results Framework Indicators.

Was the country in a situation of conflict, post conflict or humanitarian crisis in 2010? ()Yes (X)No

Please provide the following information about the latest CEDAW report prepared for the country:

| | | | |
|--|---------------------|----------------------------|-----------------------|
| 1. Name of latest CEDAW Report: <i>CEDAW - The Convention on the Elimination of All Forms of Discrimination against Women</i> | 2. Status: Prepared | 3. Report Date: 2009-00-00 | |
| 4. Please assess whether the following reproductive rights issues have been included in the latest CEDAW Report prepared for your country: | | | |
| Reproductive rights issues included in CEDAW report | Yes | No | Not applicable |
| a. Policies/strategies for maternal health and family planning | (X) | () | () |
| b. Rights in accessing SRH information and services | () | (X) | () |
| c. SRH service provision for married and unmarried adolescents | () | (X) | () |
| d. Gender based violence | () | () | (X) |

e. Harmful traditional practices, including female genital mutilation/cutting

(>)

(X)

()

f. Other (specify):

g. Comments: *The report contains sound discussion of where insufficient progress has been made in ensuring universal access to SRH and the efforts needed to improve the SRH of women and girls.,Discussions currently being undertaken, but the Bahamas first CEDAW report was presented before the Committee in November 2008.*

5. Has the UNFPA Country Office supported implementation of the concluding observations of the CEDAW Committee?
Yes (X) No ()

Please describe (Max. 200 words):

One of the concluding observations of the CEDAW Committee speaks to the role of men in addressing the issue of violence in the Jamaican society and in particular, violence against women. As a result, the office embarked upon a series of programmes geared towards working with young men to deconstruct negative perceptions of masculinity, and to examine the issues of gender-based violence. Men were sensitized to the various dimensions of gender-based violence, the linkages between sexual violence and HIV and the legal implications.

Outcome 3.2 Gender equality, reproductive rights and the empowerment of women and adolescent girls promoted through an enabling socio-cultural environment that is conducive to male participation and the elimination of harmful practices Indicator 22: Female genital mutilation/cutting prevalence rate Indicator 23: Percentage of women who decide alone or jointly with their husbands/partners/others about their own healthcare

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

UNFPA has partnered with the Bureau of Women's Affairs in a programme entitled 'Violence Against Women: Addressing the Gaps'. The programme is geared towards working with men in particular to address the issue of gender-based violence and understand the importance of promoting gender equality. The programme also examines the linkages between gender-based violence and reproductive health, and encourages men to be active partners in the prevention of violence against women.

a.1. During 2010, has your Country Office specifically contributed to Build and strengthen partnerships for enabling socio-cultural environment conducive to male participation and elimination of harmful practices.

(Please reply "Yes" only if in the assessment your Country Office has completed substantive initiatives as well as spent programme budget towards strengthening national capacity development in the specific areas listed below. If yes, then you must list three key initiatives/activities)

()Yes (X)No

[]b. Results regarding advocacy and policy dialogue

[]c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

Several printed materials have been developed with messages targeting men in the prevention of violence against women. In collaboration with the Bureau of Women's Affairs, posters bearing messages of 'Stop Violence Against Women' among others have been developed. UNFPA has also partnered with the National Family Planning Board to develop a series called 'Wise Up' which focuses on the sexual and reproductive health behaviour of a young man, and the consequences of engaging in unsafe sexual practices.

d. Key lessons learned

One of the main lessons learned in respect of this Outcome is that there needs to be more targeted interventions for young girls, women and men in rural areas. The latest Reproductive Health Survey indicates that the rates of teenage pregnancy tends to be higher in some of the poorer rural parishes. Additionally, some of the myths associated with HIV infection and the negative gender stereotypes seem to be stronger in some of the rural areas. Therefore, interventions geared towards empowering many of these young girls needs to be focussed in the rural areas

c. Main challenges

Financial constraints impacted on UNFPA's ability to significantly scale-up activities in the rural areas.

d. Concrete steps to address the challenges and build on lessons learned

Strengthening partnerships with international development partners who already work in these rural communities may be one potential way to address the challenge raised. This may also contribute to stronger programme outcomes if UNFPA is able to integrate our issues into an existing programme on income generating opportunities for example. This has been cited as an area of key concern by young people.

Outcome 3.3 Human rights protection systems (including national human rights councils, ombudspersons, and conflict-resolution mechanisms) and participatory mechanisms are strengthened to protect reproductive rights of women and adolescent girls, including the right to be free from violence

Indicator 24: Proportion of countries with reproductive rights incorporated in national human rights protection system

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

a. Results regarding national capacity development

The passage of the Sexual Offences Bill in July 2009 is a clear indication of efforts to protect women, girls and boys from gender-based violence, as it reforms and amalgamates various laws relating to rape, incest and other sexual offences. This landmark Bill, which repeals the Incest (Punishment) Act, as well as several provisions of the Offences Against the Person Act will have far-reaching implications for the protection of women and children in Jamaica. The Bill also provides a statutory definition of rape, as well as provisions relating to marital rape, specifying the circumstances in which such rape may be committed. UNFPA participated actively in the consultations and debates leading to the passage of the Bill and continues to support public awareness sessions to inform persons about the provisions in the Bill. Various sessions have also been held with vulnerable populations including persons living with HIV and persons with disabilities to increase their knowledge and understanding of their sexual and reproductive health and rights, and to sensitize them on the various laws that have been established to protect them in this regard. In this case, UNFPA has partnered with members of the legal fraternity and the Bureau of Women's Affairs in order to empower these vulnerable groups.

b. Results regarding advocacy and policy dialogue

c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

b. Key lessons learned

One of the key lessons learned is that there needs to be further capacity building on the issue of human rights and strengthening of the structures that are specifically tasked with the mandate of promoting human rights and addressing human rights violations. For example, the justice system in Jamaica requires significant strengthening. The time lag that exists in the dispensation of justice is often a deterrent to victims of abuse or potential complainants. Therefore, these issues need to be addressed.

c. Main challenges

One of the main challenges in the foreseeable future relates to weaknesses in the justice system. This may translate into delays in implementing the provisions of the act, and may result in frustration on the parts of the victims.

d. Concrete steps to address the challenges and build on lessons learned

In issues of this nature, UNFPA can play an advocacy role by emphasizing the importance of the national human rights architecture, and in particular – the protection and promotion of human rights. There also needs to be collaboration with agencies such as UNDP which has been working more closely with the security and justice constituent.

B. Development Results Framework Indicators.

Please answer the following questions on incorporation of reproductive rights of women and adolescent girls in national human rights protection systems in the country:

| | Yes | Some/Partial | No | Cannot Access |
|---|-----|--------------|-----|---------------|
| 1. Do government agencies promote and protect the reproductive rights (RRs) of women and adolescent girls? | (X) | () | () | () |
| 2. Is RRs protection (e.g. GBV, access to RH services, harmful practices) explicit in the mandate of courts, judiciary and law enforcement as well as ombudsman, national human rights commission? | () | (X) | () | () |
| 3. Do judicial procedures exist for individuals to effectively claim their RRs and adequately address RRs violations? | (X) | () | () | () |
| 4. Are there civil society groups, plus an independent media, strongly supporting RRs protection? | (X) | () | () | () |
| 5. Are there laws that in existence that incorporate RRs of women and adolescent girls, including in emergency and post emergency contexts? | () | (X) | () | () |
| 6. Comments: <i>In 2009, the Sexual Offences Bill was passed with the objective of protecting women and girls from sexual violations. The Child Pornography (Prevention) Bill was also passed in July 2009, making commercial sexual exploitation of children a criminal offence. Therefore, there have been increased efforts to address sexual violations against women and girls.</i> | | | | |

Outcome 3.4 Responses to gender-based violence, particularly domestic and sexual violence, expanded through improved policies, protection systems, legal enforcement and sexual and reproductive health and HIV prevention services, including in emergency and post-emergency situations

Indicator 25: Proportion of countries that have mechanisms in place to monitor and reduce gender-based violence

Indicator 26: Proportion of countries that include gender-based violence in pre- and in-service training of health service providers

A. Results achieved, good practices, lessons learned, challenges, and concrete steps that the country office has taken to address the challenges and build on lessons learned towards reaching UNFPA Strategic Plan Development Results Framework outcomes.

Please report on key results achieved, good practices, lessons learned, challenges, and concrete steps that your country office has identified to address the challenges and build on lessons learned, if any, related to this Strategic Plan outcome:

1. Please provide brief narratives (maximum 200 words each) on results achieved by UNFPA's country office related to this Strategic Plan outcome during 2010 regarding to:

[X]a. Results regarding national capacity development

In collaboration with the Institute of Gender Studies of the University of the West Indies, UNFPA undertook a baseline study on gender-based violence in Jamaica in 2009. The findings of this study have been used to inform the development of two programmes within UNFPA, more specifically those targeting males.

a.1. During 2010, has your Country Office specifically contributed to Strengthen capacity of national institutions and civil society organizations to design and implement the gender-based violence- response and prevention mechanisms. (Please reply "Yes" only if in the assessment your Country Office has completed substantive initiatives as well as spent programme budget towards strengthening national capacity development in the specific areas listed below. If yes, then you must list three key initiatives/activities)

() Yes (X) No

- [] b. Results regarding advocacy and policy dialogue
- [] c. Other results

2. Please provide brief narratives (maximum 200 words each) on good practices, key lessons learned and challenges related to this UNFPA Strategic Plan outcome during 2010. In addition, please list concrete steps that the country office has identified to address the challenges and build on lessons learned that were reported.

a. Good practices

The work with young men and the prevention of gender-based violence has been hailed as innovative by many organizations. Special focus on sexual violence and the linkages with HIV infection have been explored in the sessions hosted by the Bureau of Women's Affairs in collaboration with UNFPA. Several men's groups and networks have begun to mobilize themselves around the issues, which is an important element as the programme is receiving significant 'buy-in'

b. Key lessons learned

One of the major lessons learned in this regard is that there needs to be a National Action Plan on Gender-Based Violence that clearly outlines the activities that must be undertaken, the timelines and the responsible partners. While this innovative programme with young males has been established with UNFPA, there needs to be a broader and more comprehensive framework in which gender-based violence may be addressed.

c. Main challenges

While there are several actors working to address the issue of gender-based violence, the approach is not a coordinated one and the response is therefore quite fragmented. The impact of the interventions therefore is not at the desired level because there is limited coordination among the actors.

d. Concrete steps to address the challenges and build on lessons learned

UNFPA will be collaborating with the Bureau of Womens Affairs and UNIFEM in the development of a National Action Plan for Gender Based Violence. This will form the basis for coordination among the agencies, as well as assist in establishing a monitoring framework for achieving some of the goals in this area.

B. Development Results Framework Indicators.

Are there any mechanisms (e.g. policy program, law enforcement, ombudsman office) in place to monitor and/or reduce gender-based violence?

(X)Yes ()Being Developed ()No

Please provide brief description (max. 200 words):

The Victim Support Unit in the Ministry of Health receives reports on gender based violence cases.

SP DRF Indicator 26: Inclusion of gender based violence in pre- and in-service training of health service providers:

1. Please answer the following questions on the extent of incorporation of Gender-Based Violence (GBV):

| | Extent of Incorporation | | | |
|---|-------------------------|---------|------|---------------|
| | Comprehensive | Partial | None | Cannot assess |
| a. GBV included in the national health institute curriculum for SRH service providers: | () | (X) | () | () |
| b. GBV included in the national training plan for SRH services providers: | () | (X) | () | () |
| c. GBV included in the standard training materials designed to improve skills of SRH service providers: | () | (X) | () | () |
| d. Other, please specify: | | | | |
| e. Comments: <i>GBV is included in the training of service providers. However, a protocol for dealing with the survivors needs to be clearly defined and disseminated throughout the system. This is one of the activities that UNFPA has been discussing with the Ministry of Health.</i> | | | | |

2. Please answer the following questions on the access of GBV survivors to support services (including health, psychosocial, security and legal support) in the country:

| | Yes | Extent | No |
|--|-----|--------|-----|
| a. Are there qualified health providers in screening, care and referrals for GBV survivors? | (X) | () | () |
| b. Are there qualified health providers in screening, care and referrals for GBV survivors? | (X) | () | () |
| c. Are police officers and other security/ law enforcement agents trained and able to respond appropriately to GBV survivors' needs? | () | (X) | () |
| e. Comments: <i>While there are some services in place for survivors of GBV, and the Government is taking steps to strengthen efforts in this area, there is still need for an increase in the response. Training of police officers and other front-line personnel is one of the key areas that requires greater attention. Woman Inc, - an NGO involved in working with survivors of gender-based violence has been training security officers in this area.</i> | | | |

Strategic Plan 2008-2013 Management Results Framework

1. In 2010, did staff from your Country Office participate in training initiatives dedicated to results-based management? (X)Yes ()No

Please specify:

a. Number of staff that were trained: 3

b. Were the training initiatives (check all that apply):

Workshop

Online or distance learning

c. Who were the organizer(s) (check all that apply):

UNFPA Country Office

UNFPA Headquarters/UNFPA Regional Office

UN Country Team

United Nations System Staff College (Turin)

Other RBM training institution

2. Please indicate the percentage of outputs in all your Annual Work Plans (AWP) which have achieved their indicator targets:

0 - 24%

25 - 49%

50 - 74%

75 - 99%

100%

3.a. During 2010, has your Country Office specifically contributed to strengthen national capacity to receive or provide South-South Cooperation? (Please reply "Yes" only if in the assessment your Country Office has completed substantive activities as well as spent programme budget towards strengthening national capacity to receive or provide South-South Cooperation)

Yes

No

3.b. Indicate the total number of South-South cooperation initiatives to support the ICPD agenda, capacity building and technical cooperation that your Country Office organized or facilitated in 2010:2

| | | |
|------|--|--|
| b. | For each initiative, please provide the following information (report each initiative separately): | |
| b.1. | Area of South-South cooperation: | |
| () | Institutional and capacity development, along with an environment that fosters such development | |
| () | Technical, educational, humanitarian and cultural cooperation | |
| (X) | Exchanges of knowledge, expertise and technologies | |
| () | Policy development and the sharing of good practices | |

- Bilateral, sub-regional, regional, inter-regional or triangular cooperation, where two or more developing countries work in partnership with a traditional donor country
- Action by governments, national organizations, international organizations, civil society, non-governmental organizations (NGOs), academic institutions and the private sector
- Other, please specify:

b.2. UNFPA Country Office role (select all that apply):

- Strengthen South-South cooperation networks
- Assist the country with operational arrangements
- Support the country as recipient of South-South cooperation
- Conduct policy dialogs and advocacy
- Strengthen monitoring and evaluation
- Expand knowledge management
- Other, please specify:

b.3. Brief description (max 200 words):

An exchange visit was facilitated by the Women's Centre of Jamaica Foundation to support development of a programme for adolescent mothers in other Caribbean countries in the sub region including Grenada and Guyana.

b. For each initiative, please provide the following information (report each initiative separately):

b.1. Area of South-South cooperation:

- Institutional and capacity development, along with an environment that fosters such development
- Technical, educational, humanitarian and cultural cooperation
- Exchanges of knowledge, expertise and technologies
- Policy development and the sharing of good practices
- Bilateral, sub-regional, regional, inter-regional or triangular cooperation, where two or more developing countries work in partnership with a traditional donor country
- Action by governments, national organizations, international organizations, civil society, non-governmental organizations (NGOs), academic institutions and the private sector
- Other, please specify:

b.2. UNFPA Country Office role (select all that apply):

- Strengthen South-South cooperation networks
- Assist the country with operational arrangements
- Support the country as recipient of South-South cooperation
- Conduct policy dialogs and advocacy
- Strengthen monitoring and evaluation
- Expand knowledge management
- Other, please specify:

b.3. Brief description (max 200 words):

An exchange visit to the Jamaica Council for Persons with Disabilities and the Jamaica Association for the Deaf was facilitated in order to take a firsthand view of the work being done with adolescents with disabilities. The team comprised representatives of the Barbados Council for Persons with Disabilities

4. Has your Country Office undertaken the following knowledge sharing activities in 2010:

| | | Yes | No |
|--|---|-----|-----|
| a. | Documented and shared good practices and lessons learned | (X) | () |
| b. | Uploaded Country Programme documents and publications to Docushare | (X) | () |
| c. | Participated in online networks and communities of practice | () | (X) |
| Started using the new myUNFPA platform | | | |
| d. | Please indicate which of the following features were used (select all that apply): <input checked="" type="checkbox"/> Completed user profile <input checked="" type="checkbox"/> Created assets <input checked="" type="checkbox"/> Joined groups <input type="checkbox"/> Others, please specify: | (X) | () |

e. Please indicate any other knowledge sharing activities undertaken by the Country Office : *The Bureau of Women's Affairs in Jamaica has established a 'Male desk' geared towards involving males more actively in promoting gender equality. The office has shared this model with two other women's machineries including the operations and the objectives of the 'Male desk.'*

5. Please indicate the level of implementation in the country office of *UN Cares –Minimum Standards on HIV in the Workplace*:

| Rights of personnel and dependents to have: | Implementation: | | |
|---|-----------------|---------|---------|
| | Full | Partial | Not yet |
| a. Information about UN policies and benefits, including UN HIV/AIDS Personnel Policy, the booklet "Living in a World with HIV and AIDS" and the UN Cares website | () | () | (X) |
| b. Interactive learning/training activities conducted annually, including mandatory sessions on HIV/AIDS and/or any other awareness event | (X) | () | () |
| c. Free access to male and female condoms | (X) | () | () |
| d. Voluntary counselling and testing (VCT) activities organized, including information on where and how to access VCT, and facilities for treatment and care | () | () | (X) |
| e. Rapid access to Post-Exposure-Prophylaxis (PEP) kits, including awareness of PEP kit custodian and how to access it in case of emergency | (X) | () | () |
| f. A supportive and caring office environment, including managerial leadership on the implementation of UN Cares | (X) | () | () |
| g. Comments (if you have selected 'Partial' in any of the above, please explain. Maximum 200 words): | | | |

6. Please briefly report on (maximum 200 words each):

a. Up to two examples of results achieved through UNFPA's involvement in partnerships:

a.1. Example 1: *Strengthened partnership with the National Family Planning Board resulted in the production of an innovative television drama series targeting young people and their sexual behaviours. This is important as there has not been an innovative programme of this nature on national television for some time. The programme has been viewed by thousands of Jamaicans, and the Ministry of Education has requested copies of the DVD for viewing in the school system.*

a.2. Example 2: *UNFPA partnered with the Ministry of Health to convene a technical working group geared towards analyzing the factors that are contributing to high rates of HIV infection among sex workers and men who have sex with men. Significant issues have resulted from these discussions given the participation of key stakeholder organizations and these will be featured in the development of the New Strategic Plan on HIV/AIDS*

b. List new partnerships, if any, with private sector and other non-traditional partners that your Country Office became involved during 2010: *The office strengthened the partnership with Jamaica National Foundation in developing the capacity of young people to tell the stories of the ICPD through photography. Young people were sensitized to issues of migration, men as partners in promoting reproductive health, gender equality and other areas. The young people then had to capture these images and prepare an accompanying story. The images have been mounted across the island in various exhibitions, and the stories of the ICPD are being told on a wide scale.*

c. Please report what were the key challenges that your Country Office encountered in working with partnerships during 2010: *Partnerships was actually one of the strongest areas of UNFPA's work in 2010. The existing partnerships were strengthened and there were new partnerships established. One of the challenges had to do with the financial constraints experienced. While UNFPA has acknowledged that we bring limited financial resources to the table, there is sometimes a need for us to provide more than just technical assistance.*

d. During 2010, has your Country Office specifically contributed to strengthen national capacity to advocate for the ICPD agenda?
 (Please reply "Yes" only if in the assessment your Country Office has completed substantive activities as well as spent programme budget towards strengthening national capacity to advocate for the ICPD agenda)

(X)Yes ()No

Please list three key activities:

UNFPA organized a quarterly training for young people in the Youth Advisory Group (YAG) and the Youth Aides Programme to discuss issues of sexual and reproductive health and reproductive rights, HIV prevention and gender equality. The young people have been trained as peer educators and have been involved in several interventions geared towards sensitizing their peers on these issues.

Two training sessions were implemented for organizations working with sex workers and men who have sex with men to underscore issues of human rights, sexual and reproductive health and rights and gender equality. The representatives of these organizations were also participants in the Technical working group that UNFPA had supported in collaboration with the Ministry of Health.

In collaboration with the Jamaica Network of Seropositives (JN+), UNFPA supported training sessions targeting HIV positive women. The sessions focussed on positive prevention and the reproductive rights of persons living with HIV. The issues of gender equality and the empowerment of women was also a key element of the sessions.

7. Please report on UNFPA's involvement in UN system initiatives (CCA/UNDAF, Consolidated Appeals Process (CAP), Common Humanitarian Action Plan (CHAP), and MDG reporting, etc) and assess significant experiences in relation to common and/or joint programming and streamlining programme and financial procedures (OECD/DAC), including achievement and constraints (maximum 200 words):

UNFPA has been actively involved in various UN system initiatives including the CCA/UNDAF process, the UN Theme Group on HIV AIDS and the development of a CERF proposal in the aftermath of civil unrest in West Kingston in May 2010. Beginning in February 2010, UNFPA was selected as a member of a four person UN agency team that participated in a subregional workshop on the UNDAF development process. The workshop was held in Barbados and was facilitated by the UN Staff College in Turin. Following the workshop, UNFPA engaged actively with the CCA consultant by providing relevant documentation and ensuring that the ICPD issues were adequately reflected in the CCA document. Due to delays in the unfolding of the CCA process, the document is just now being finalized. However, UNFPA has provided extensive comments and participated in the Prioritization workshops. UNFPA also played an active role in the UN Theme Group on HIV/AIDS by participating consistently in the meetings of the group, playing a leading role in the review of the national UNGASS report, and participated in the development of a joint PAF programme. Additionally, UNFPA participated in the preparation of a CERF for Jamaica in the aftermath of civil unrest in West Kingston which left over 70 persons dead. Our proposed role was to assist with the provision of psycho-social support for the citizens.?

8. Please provide information on UNFPA participation in joint programmes (JP) with other United Nations agencies in 2010 (please report each JP separately):

| UNFPA participation in joint programmes (JP) with other UN Agencies | |
|--|--|
| UNFPA Strategic Plan Outcome to which JP relates: | |
| <i>Outcome 2.5: Access of young people to SRH, HIV and gender-based violence prevention services, and gender-sensitive life skills-based SRH education improved as part of a holistic multisectoral approach to young people's development</i> | |
| Title: | <i>Adolescent Strategic Plan</i> |
| Brief description of the JP: | <i>UNFPA and UNICEF participated in the development of a Joint Programme geared towards supporting the Ministry of Health in developing a situation analysis on children and adolescents and an Adolescent Strategic Plan. The Plan is geared towards promoting an enabling environment in the home, school community and at the individual level for the health development of adolescents.</i> |
| JP Status: | <input type="checkbox"/> Planned <input checked="" type="checkbox"/> Being developed <input type="checkbox"/> Being implemented <input type="checkbox"/> Completed in 2010 |
| Funding modality: | <input checked="" type="checkbox"/> Parallel <input type="checkbox"/> Pooled <input type="checkbox"/> Pass-through <input type="checkbox"/> Other, please specify: |
| Managing/Administrative agent: | <i>Ministry of Health</i> |

| | |
|---------------------------------------|--|
| Total budget (in USD): | 48000 \$ |
| UNFPA's contribution (in USD): | 23000 \$ |
| Share of UNFPA's contribution (in %): | 50 % |
| Coherence to national priorities? | <input checked="" type="checkbox"/> Comprehensive <input type="checkbox"/> Partially <input type="checkbox"/> none <input type="checkbox"/> Not sure |
| Reflect ICPD agenda? | <input checked="" type="checkbox"/> Comprehensive <input type="checkbox"/> Partially <input type="checkbox"/> none <input type="checkbox"/> Not sure |

9. Is there a new UNDAF developed in 2010 in the country? ()Yes (X)No

10. In 2010, did the Country Office conduct an annual UNDAF and/or CP review? (X)Yes ()No

a. Please specify:

() CP review was conducted as part of UNDAF review.

() CP and UNDAF reviews were conducted separately.

(X) Review was conducted for the CP only.

b. Please list the key findings (Max. 200 words):

The subregional programme for the Caribbean was evaluated in September 2010. The main findings indicated that UNFPA's programme is relevant, and that partners have confidence in UNFPA and the organization's ability to deliver on the ICPD agenda. However, one of the main critiques was that there are too many small activities, and they appear very dispersed, therefore it was difficult to realistically assess impact. Another critique was that the country programme outcomes were very broad and tried to capture too many issues in one statement- therefore, it was challenging to determine what was being measured in the first place.

11. Does your country office have a Country Programme Monitoring and Evaluation Plan for the current CP cycle? (X)Yes ()No

12. Please report on all evaluations conducted in 2010 (please report each evaluation separately):

13. For the management responses prepared for evaluations conducted in previous years that have accepted recommendations due in 2010, please provide the following information (please report each separately):

14. Regarding resource mobilization for UNFPA in 2010, please report on (maximum 200 words each):

a. Main results achieved:

Resource mobilization efforts were quite limited in 2010. The CO mobilize USD40,000 to assist with the programme on gender-based violence and in

particular, a focus on young men.

b. Good practices:

A strategy on resource mobilization for the Subregional Office was developed. This is important for outlining the potential for attracting additional resources to ensure the implementation of the programme

c. Key lessons learned:

Resource mobilization is an area that requires dedication. Ideally, it requires a dedicated individual who will focus efforts on identifying sources of funds, and mobilizing these resources. In the capacity of Assistant Representative in the Jamaica, the majority of my time and efforts are spent on programme management, and whilst resource mobilization is critical, it is difficult to pursue given the demands of effectively managing a programme. Therefore, the issue of resource mobilization requires a dedicated person

d. Main challenges:

While there has been a strategy developed for resource mobilization, there has been little progress in implementing the strategy. Therefore, the challenge is to dedicate time and human resources to the implementation of the resource mobilization strategy so that the programme needs can be effectively fulfilled.

e. Concrete steps the country office has identified to address the challenges and build on lessons learned that were reported.

The CO will be looking at establishing stronger partnerships within the bilateral agencies and other donors as well as review and revise the resource mobilization strategy.

15. Regarding financial management to reduce transaction costs and improve efficiency in 2010, please report on (maximum 200 words each):

a. Main results achieved:

Programme and financial management training was conducted with implementing partners at least once per quarter. There were clear signs of increased accuracy and improvement in the management of financial resources including reporting and recording of expenditure. At the end of the period, partners showed increase capacity to manage the resources assigned to them.

b. Good practices:

In the training sessions conducted on a quarterly basis, the stronger implementing partners would play leading roles in conducting the sessions among their colleagues. This was an important means of strengthening their capacities, and as well, demonstrate to partners that it was possible to perform very well in the management of financial resources.

c. Key lessons learned:

There is a need for ongoing capacity building activities to constantly engage partners and keep them updated on financial and programme management and procedures.

d. Main challenges:

Due to the numerous activities that the country office is involved in managing, it is difficult to effectively monitor the activities of all the partners in a timely manner. Therefore, sometimes the monitoring activities and site visits are undertaken with some amount of delay.

e. Concrete steps the country office has identified to address the challenges and build on lessons learned that were reported.

The country office has decided to reduce the number of partners that it works with over the next year and subsequently during the new programme cycle. This will allow staff more time to spend on monitoring some of the key programme and financial activities.

16.a. In 2010, what type of programmatic support did the Country Office receive from the Regional Office? (select all that apply)

Strategic guidance on CCA/UNDAF, country programme formulation and implementation

Technical contribution to the programming process

Coordination of inputs from other HQ Divisions (PD, TD, DOS, etc) for improved quality of programming

Joint review of the CP and projects in terms of their relevance and effectiveness

Support to CP monitoring and evaluation activities

Political support to help better position CP vis-à-vis the government in the national development context

Support to the UN Country Team

Other, please specify:

16.b. Please provide an overall assessment of the support provided by the Regional Office/Sub-Regional Office:

| Regional Office/Sub-Regional Office Support | Excellent | Good | Satisfactory | Poor |
|--|-----------|------|--------------|------|
| Relevance of support | () | (X) | () | () |
| Quality of support | () | (X) | () | () |
| Timeliness of support | () | () | (X) | () |
| Impact upon overall quality of CP and programme delivery | () | () | (X) | () |
| Comments: | | | | |