Executive Summary

The most important achievements for children in Jamaica were in the three focus areas: child protection; adolescent health and empowerment; and quality education. Results at the community level demonstrated strengthened local capacities; at national level, major policy shifts have Jamaica in greater compliance with the UN Convention on the Rights of the Child (CRC). The focus on the above-mentioned areas increased the national dialogue and aim to slow the impacts of abuse and violence on children. Sport for development (S4D) emerged as a key strategy.

Robust policies enhanced efforts of the Child Development Agency to improve living conditions for children in residential care facilities. The Talk Up Your initiative (i) pushed forward key debates and discussions throughout the country around critical issues in adolescents’ lives, promoting major advancements in human rights advocacy. Focused capacity building in three parishes increased positive impacts for vulnerable young people. Accelerated efforts in excluded rural/remote areas and strategic approaches to increase the diagnosis of disabilities (vision, hearing and learning) for primary school populations are top priority.

A Promise Renewed (APR) provided Jamaica with an opportunity to take a closer look at why the neo-natal mortality rate has not decreased in two decades, impeding health systems strengthening that could directly impact this stubborn indicator.

The Elimination Initiative alliance enabled HIV treatment to expand, and almost all pregnant women were reached with testing and access to antiretroviral drugs (ARVs). UNICEF’s partnership with the National Family Planning Board enabled the Adolescent Policy Working Group (APWG) to move this forward, breaking down barriers to adolescent pregnant women’s access.

The partnerships that created a powerful advocacy and “create the debates” platform for Talk Up Your enabled UNICEF to solidify productive and strategic relationships with local youth leadership, school principals and guidance counsellors, and private sector companies that invest in youth. A deeper understanding of youth realities, because of this “boots on the ground” access to young people’s views—and how they can improve the situation—played out on national television and on-line.

With the United Nations family, UNICEF leadership on the UNDAF review promoted action plans as part of the UNCT agenda.

Direct positive impacts on the national child protection policy dialogue included the successful removal of the “uncontrollable behaviour” label that could sentence children through the judicial system. This is no longer possible.

In 2013, all children were removed from adult correctional centres. This represents a major step forward in upholding the rights of children, strengthening national laws and upholding the Beijing Rules. Major challenges remain in the areas of juvenile justice and child protection.

There were no significant shortfalls in the Country Programme (CP).

Our South-South collaboration, the Brazil-Jamaica learning exchange, began to lead enhanced multi-country learning on interventions for the most vulnerable youth. It will expand mobile outreach to vulnerable populations and S4D with marginalised communities.

Country Situation Affecting Children and Women

Jamaica has a child population of approximately 836,000 boys and girls, representing 31 per cent of the entire population. A steady increase in poverty since 2008 (12.3 per cent to 17.6 per cent in 2010), has put Jamaica in danger of undermining achievements made toward the first Millennium Development Goal (MDG).
Stringent fiscal measures exacted under an International Monetary Fund (IMF) agreement limited the government's ability to respond to the inequities in society, as evidenced by an increase in the Gini Coefficient from 0.3667 in 2009 to 0.3813 in 2010. These inequities are highlighted in data disaggregated by gender and geographical regions.

Inequalities in income are also reflected in the increase in the poverty gap index from 3.9 in 2009 to 4.5 in 2010. As poverty deepens, more resources are required to lift them out. The rural poor continue to be furthest from the poverty line, with an index of 6.3 (Planning Institute of Jamaica 2012).

Approximately J$ 4 billion was expended on the national conditional cash transfer programme—the Programme of Advancement Through Health and Education (PATH)—for the fiscal year 2011/2012. PATH pays cash transfers to specific vulnerable populations, including children, the elderly, pregnant/lactating women, persons with disabilities and indigent adults (Planning Institute of Jamaica 2013). However, the Jamaica Survey of Living Conditions (2010) reported that 54 per cent of households applying for PATH receive or qualify for benefits and that 64 per cent of households in the lowest consumption quintile were receiving benefits.

Social protection interventions are also eroded by increasing inflation, at 8 per cent in 2012, which is two percentage points higher than the previous year; a 13.7 per cent average unemployment rate, with women accounting for 59.2 per cent of the unemployed population; and a youth unemployment rate of more than twice the national average at 34 per cent —54 per cent of which were female.

Children and adolescents (0 to 19 years of age) accounted for approximately one third of intentional injuries treated at public hospitals in 2012; just over one half (52 per cent) were boys. Jamaica’s high crime rate continues to impact children: 3,017 boys and 1,023 girls came before the courts in 2012 for varying offences.

UNICEF and partners collaborated on advocacy activities that contributed to the removal of over 100 girls from adult correctional centres. These girls are now housed in a female juvenile facility. The government also approved legislative changes for the removal of the label “uncontrollable behaviour” from children who exhibit extreme behaviour. Consequently, these children can no longer be sentenced to juvenile correctional centres. In 2012, of the 192 children admitted to juvenile institutions, 54, or 28 per cent, were charged with “uncontrollable behaviour.” Efforts continued to reduce the number of children in state care through the strengthening of the foster care programme and the establishment of diversion mechanisms for children who come in conflict with the law.

Reports on child abuse were received for approximately 7,200 children in 2012; 59 per cent of these were girls. The majority of the reports received were for neglect (51 per cent), followed by reports of children in need of care and protection (35 per cent). A 2013 Knowledge, Attitudes, Practices and Behaviours (KAPB) study sponsored by UNICEF indicated that 82 per cent of children (84 per cent of the boys and 81 per cent of the girls) had experienced some form of child maltreatment over a three-month period. However, only 30 per cent had ever reported an incident. The main reasons highlighted were fear of repercussions and an unwillingness to get involved. This study will support interventions to increase reporting of abuse by children.

UNICEF support for the creation of a National Parenting Support Policy led to the establishment of a National Parenting Support Commission under the Ministry of Education. Although the commission has limited resources, it is envisioned that it will play a strategic role in prioritising and co-ordinating stakeholder
activities around implementation of the policy.

Despite high enrolment rates (99 per cent at pre-primary, 99.6 per cent at primary and 92.9 per cent at secondary3), poor education outcomes continue to reflect the quality of Jamaica's education system. Seventy-four per cent of students sitting the Grade 4 standardised literacy assessment in 2012 achieved mastery of the subject, compared to 71.4 per cent in 2011. Nevertheless, this is 26 per cent shy of the national target of universal literacy by 2015. As has been the trend, a higher percentage of girls (83.3 per cent) than boys (64.7 per cent) achieved mastery. The overall mastery for the numeracy assessment at the same level was 54 per cent; however, 62 per cent of boys achieved mastery, as opposed to only 47 per cent of girls (Planning Institute of Jamaica 2013).

The extent of the inequity in society was highlighted in the establishment of profiles for the targeted vulnerable communities in the Caring, Healthy, Organised, Cohesive, and Empowered (CHOICE) communities programme. Average daily primary and secondary school attendance amongst children in these communities averaged 76 per cent, below the national average of 84 per cent. Teenage pregnancies averaged approximately 30 per cent in these communities, compared to national pregnancy rates amongst 15-to-19 year olds of 14.6 per cent in 20085. Some communities also experienced low participation of fathers in activities with children as well as low enrolment and educational outcomes.

The CP 2012-2016 takes a targeted approach by building on lessons learned from the previous CP and the latest knowledge and evidence on the effects of inequities. It is designed to contribute directly to the achievement of national development goals detailed in the Medium-term Framework (MTF) and Vision 2030, Jamaica’s national development plan.

The CP strategy is a two-tiered approach:

**Community level**

UNICEF is supporting the implementation of programmes that work specifically to reduce inequities amongst the poorest quintiles and most vulnerable populations. UNICEF and partners are focusing efforts in five communities, based on multiple vulnerabilities, through the CHOICE programme, developed in collaboration with the Social Development Commission (SDC), a branch of the Ministry of Local Government and Community Development.

The name CHOICE emanated from within the Vision 2030 goal to make Jamaica “the place of choice to live, work, raise families and do business.” This requires individual communities to develop characteristics that make them suitable places to live and to empower themselves to make sustainable changes.

UNICEF and the SDC designed the programme to guide communities toward achieving goals and priorities they set themselves, and to channel existing resources to these communities to address identified priorities.

The programme began with an initial cohort of five communities, located in two (of fourteen) highly under-resourced parishes in the western part of the island. The communities were identified from a combination of: screening based on indicators related to children and adolescents (such as teen pregnancy, school dropout, Grade four literacy and numeracy pass rates, STI prevalence, incidents of reported child abuse, dependency on social safety nets, etc.); and a process of self-selection, through which interested communities had to apply for the programme.
In 2013, UNICEF and the SDC established baselines via community profiles in order to build the community-level programming on a solid evidence base. The SDC regularly produces community profiles, but the format was enhanced to look at indicators that focused specifically on children and women. It is envisaged that this child-and gender-focused methodology will serve as a useful tool for island-wide use in the future.

In the first quarter of 2014, the communities were to go through a community visioning process leading to the development of unique community priority action plans. This typical SDC-led process will be further enhanced to focus on children and adolescents as specific target groups.

**National level**

UNICEF will continue to advocate for and support the development and enforcement of policies, laws and regulatory frameworks that promote and protect the rights of children, particularly the most vulnerable, using evidence generated from community demonstration programmes, research and other data.

In 2014, UNICEF was to conduct its Mid-term Review (MTR) with the Government of Jamaica and partners. No changes in strategy were envisioned, although the MTR would be the point at which and changes would be made.

**Humanitarian Assistance**

There were no humanitarian situations during 2013 in Jamaica.

**Effective Advocacy**

*Mostly met benchmarks*

**Child Protection:** UNICEF’s continued advocacy with key decision-makers on issues affecting children who come into contact/conflict with the law contributed to major developments. These include the government’s transfer of all female juveniles from the adult women’s prison—in which children had been detained for many years—to a refurbished, vacant facility with no adult inmates. The majority of these children were imprisoned on charges of being “uncontrollable,” and not for criminal offences. The government subsequently announced its plan to amend legislation to remove the “uncontrollable” label and posited that children with behavioural challenges should be provided with non-custodial options for their care and treatment. The psycho-social needs of this population are urgent and UNICEF is also supporting the Ministries of Youth and Culture, Health, and Justice with a programmatic response to pilot mobile mental health services and a national child diversion programme.

**Adolescent Health and Empowerment:** UNICEF is engaged in a strategic multi-agency (both UN and the Government of Jamaica) effort to address legal and policy barriers that impede access by adolescents to key sexual and reproductive health (SRH) information, advice and services. These include the risk of imprisonment for health professionals who provide services to sexually-active minors who seek support without parental consent. Significant progress includes committed leadership of the Minister of Health, broad-based consultation with various stakeholders including key Ministers, and the production of advocacy material for submission to Cabinet in early 2014. These include a comprehensive concept paper outlining the proposed amendments as well as a short animation developed to create a compelling visual point of reference for the overall effort.

**Capacity Development**

*Mostly met benchmarks*

**Support to the Health Sector:** Twenty-seven HIV+ teenage mothers were trained and are now delivering peer education and referral services amongst an estimated 500 pregnant teens attending ante-natal clinics in seven high HIV prevalence parishes. These services boosted the capacity of the public and NGO-run health
facilities to improve emotional support, adherence to medication, family planning practices, attendance for scheduled clinic visits and improved HIV prevention and transmission knowledge amongst adolescent and young mothers. Standards for health care delivery amongst adolescents was reviewed, revised and finalised. This was achieved through stakeholder consultations held across the island. These finalised standards will form the basis of training exercises for health workers who interact with young people. Protocols for the elimination of MTCT of HIV and syphilis were updated in line with international standards. Additionally, 350 health care staff were sensitised to new guidelines for the elimination of MTCT and training was undertaken for the implementation of a labour ward for HIV and syphilis testing of pregnant women.

**Child Protection:** Two UNICEF programme staff and representatives of two partner organisations (the Child Development Agency and Office of the Children’s Registry) were trained on the development, monitoring and evaluation (M&E) of child sexual abuse programmes and the assessment and mapping of child protection systems. These regional workshops facilitated the drafting of country action plans that highlight the importance of joint programming.

The 12 members of the Child Protection Database Working Group (CPDWG) committed to providing regular updates to facilitate monitoring of indicators and programme implementation, and they uploaded fresh data in the second quarter of 2013. The Office of the Children’s Registry produced a quarterly newsletter containing national year-to-date statistics on child abuse. To ensure optimal functioning of the database, an audit of CPDWG information and communications and technology (ICT) capacity was conducted and an implementation plan was being developed improve efficiency.

**Child Rights in Emergencies:** The capacity of UNICEF and the Office of Disaster Preparedness and Emergency Management (ODPEM) was strengthened to improve responsiveness to children in humanitarian situations and facilitate inter-agency arrangements to safeguard their rights. UNICEF’s Deputy Representative and Child Protection Specialist, together with ODPEM’s Deputy Director General, attended local and sub-regional training workshops that shared best practices, suggested new methodologies and informed the development of a work plan for the protection of children in emergencies.

**Child Rights Education:** The Caribbean Child Development Centre of the University of the West Indies equipped police officers and school-based deans of discipline (253) with knowledge and tools to protect and promote the rights of children who come into contact and conflict with the law by. A module was developed to mainstream the training into in-service training programmes of the Ministry of National Security and the Ministry of Education.

**Communication for Development (C4D)**

*Partially met benchmarks*

A national KAP survey on child maltreatment in Jamaica was completed. The findings were to provide the evidence base for a UNICEF-supported campaign commencing in 2014 to increase awareness of the Office of the Children’s Registry, the national mechanism in place to receive reports of child abuse and to influence reporting of abuse by the public and by professionals who work with children.

In a new collaborative effort, UNICEF partnered with the TV programme Talk Up Your for an island-wide school tour, which used a highly-participatory approach to gather the views of adolescents on a range of issues affecting them. This effort is shaping the national public debate on several key issues. UNICEF shared findings and recommendations from the tour with several stakeholders and was to lead the design of a follow-up intervention in 2014, twinning a programmatic and communication response.

UNICEF was to explore partnership opportunities in 2014 to follow-up on the findings of comprehensive formative research on parenting behaviours that was completed in 2013. The research examined multiple factors that influence how parents interact with their children.
Service Delivery

**Mostly met benchmarks**

**Combined Disabilities Association:** Two of the major obstacles to learning are vision and hearing impairments. UNICEF supported the Association in conducting screenings for vision, learning and hearing deficits in seven primary schools in rural western Jamaica, and to make appropriate referrals for treatment. Two thousand one hundred and thirty-nine students were screened for hearing and vision problems, over 20 per cent of whom were referred for treatment. Over 600 students perceived to be performing below grade level completed a psycho-educational assessment and close to 60 per cent of them were referred for further assessment. The treatment schedule for these students was to be completed in 2014. UNICEF also supported the Association in drafting a handbook for teachers to assist students with special needs better and in conducting workshops with parents to help them more readily identify and address learning challenges related to special needs.

**EduSport:** S4D is a priority action area. With UNICEF support, the Breds/Treasure Beach Foundation opened the General Colin Powell Challenge Course in 2013vi. The outdoor course, equipped with high and low elements, is the first of its kind in Jamaica. It is designed primarily to build leadership, self-confidence and teamwork skills for at-risk youth as part of broader interventions for their development. Breds also continued its EduSport interventions in several rural schools, using sports as a tool to enhance learning outcomes and providing structured physical education for students who previously lacked these opportunities.

Strategic Partnerships

**Mostly met benchmarks**

UNICEF established a new partnership this year with Talk Up Your, a unique TV programme designed to give children and adolescents a voice through mainstream media. UNICEF supported an island-wide Talk Up Your school tour in an effort to canvas the perspectives of a wide cross-section of secondary school students on issues spanning their health, education, protection and overall welfare. Over 3,000 adolescents shared their views and proposed solutions to a number of challenges they face. Short webisodes of the tour were shared online.vii

UNICEF strengthened its relationship with *The Sunday Gleaner*, the edition that commands the highest readership of the daily newspapers. UNICEF partnered with it to produce a series of human interest stories on adolescents in vulnerable circumstances, including children in state care and who live with HIV. The articles, authored by UNICEF, were published during Child Month as an effort to spotlight issues that are often forgotten or overlooked, and to humanise children whose behaviours are often negatively labelledviii.

UNICEF awarded broadcast and print journalists for their outstanding contributions to media coverage on children’s rights in its second year of partnership with the Press Association of Jamaica.

The European Union and UNICEF Jamaica agreed on joint support for the implementation of action to improve the capacity of the Government Justice and child care systems to provide alternatives to custodial care for boys and girls who come into contact with the law. The project aims to improve protection of the rights of children, non-custodial approaches to rehabilitation with an emphasis on good mental health, empowerment and re-integration. The main planned outputs of the project are a mobile mental health service—the Smiles Mobile—for children in state-supported institutions and a National Child Diversion Programme. The project partners are the Ministry of Youth and Culture/Child Development Agency, the Ministry of Health/Child and Adolescent Mental Health, the Ministry of Justice and the Ministry of National Security/Department of Correctional Servicesix.

The primary result was the establishment of a mobile mental health and psycho-social unit created for the assessment and treatment of children placed in residential child care facilities and juvenile correctional centres. UNICEF support to this initiative strengthened the capacity of the Child Development Agency, Ministry of Health and Department of Correctional Services to respond to the needs of children—especially
those with extreme behavioural and psychological needs—placed in residential child care facilities, juvenile correctional centres and remand facilities. The service will provide psychological assessment and treatment for wards of the state in two parishes of the island. UNICEF and implementing partners developed several key operational documents and recruited staff for the unit.

Knowledge Management

*Partially met benchmarks*

**Child Protection Database:** Institutionalisation and maintenance of the Child Protection Database (CPD) was hampered by the delayed delivery of information by key stakeholder agencies. In recognising the limitations of the stakeholder agencies that support the CPD, an ICT audit was undertaken to establish the main hindrances to timely availability of data and subsequent updates of the database. Results of the audit were used to develop a three-year work plan for the stakeholder oversight committee.

**JAKids Birth Cohort Study:**
JAKids, is a longitudinal study started in 2011 that aims to improve the health, developmental and behavioural outcomes for Jamaican children by obtaining current and detailed information on factors impacting them from conception to three years of age. It is being supported by the Inter-American Development Bank (IDB), UNICEF and other partners. The methodologies employed include:
1. The enrolment of mothers of cohort children during pregnancy to obtain critical information on maternal health and well-being during the foetal period.
2. Obtaining information on fathers’ health and well-being, allowing the contribution of fathers to new-born and early child health and development to be determined.
3. Investigation of the chemical environment by obtaining information on environmental exposures and potentially correlating this with maternal and cord blood analysis.
4. Detailed developmental and behavioural evaluations on Jamaican children in the first two years of life, now recognised to be a critical period for brain development, allowing for the determination of pre-natal and early environmental factors on both new-born and early childhood health and development.

UNICEF is supporting the aspect of the study that will lead to:
1. Accurate determination of perinatal, neo-natal, maternal and paternal mortality and morbidity rates;
2. Determination of social, medical, environmental and other factors contributing to maternal, paternal and child mortality and morbidity and formulation of policy and programme recommendations for intervention;
3. Accurate determination of infant mortality and morbidity rates and contributory factors as in 2 and formulation of policy and programme recommendations for intervention; and
4. Determination of the impact of the identified factors on child health and development at one year and two years of age.

**Community Profiles:** UNICEF supported the SDC in the development of detailed profiles on communities targeted within the CHOICE programme. Communities were selected based on their performance on specific social indicators. The data collection process involved a detailed sample survey, focus group discussions within communities and collection of secondary data. The standard SDC profile questionnaires were enhanced to include data on children and youth including substance abuse, sexual practices amongst youth, knowledge of HIV and AIDS, and perceptions on gender issues. The information generated from this exercise provided the foundation for strategic planning by the community and baselines to support monitoring of subsequent interventions.

Human Rights-based Approach to Co-operation

*Mostly met benchmarks*
The Office of the Children’s Advocate finalised Child Justice Guidelines\textsuperscript{xii} (http://www.welcome.oca.gov.jm/media/CHILD-JUSTICE-GUIDELINES1.pdf) for judges, magistrates, social workers, medical practitioners, police officers, prosecutors and victim support workers to guide their treatment of children who come into contact and conflict with the law. The guidelines are based on international conventions including the CRC, the Riyadh Guidelines and the Beijing Rules.

In 2010, seven children perished in a fire at the Armadale Juvenile Correctional Centre and the survivors are still awaiting compensation after being detained in inhumane circumstances. None of the survivors have to date been compensated, as promised by the government. To draw public attention to this accountability in an unconventional way, UNICEF supported the production of “Armadale: Children on Fire”, a video that uses emotionally-compelling and creative cultural expressions to convey the issue (http://www.youtube.com/watch?v=9tgV6lBS5tQ). The Office of the Children’s Advocate was given a court date in 2014 to try the case.

The Jamaica Association of Social Workers established a Code of Ethics for professional social workers and social service workers. It will guide social workers in accordance with the primary values and ethical standards of their profession. It reflects globally-accepted principles of the profession that recognise human rights and social justice as fundamental to social work. A significant number of Jamaica’s social workers are assigned to children’s services.

The UN Joint Human Rights and Gender Theme Group was established and chaired by UNICEF and co-chaired by UNFPA during 2013. The areas of focus for 2013 and beyond were identified as gender-based violence, the LGBT community, corporal punishment, capital punishment and the correctional services, as well as the development of the human rights mainstreaming capacity of the UNCT.

The country witnessed efforts on the part of the government and professional groups to bring the delivery of services for children, especially at-risk adolescents, in conformity with international human rights treaties. Responding to the expressed concerns of UNICEF, other international development partners and civil society, the Ministry of Youth and Culture and the Ministry of National Security/Department of Correctional Services joined forces to refurbish a facility to house girls who had previously been accommodated in a women’s prison and to re-integrate children with their families, where possible.

The Ministry of Youth and Culture, which publicly confessed that it had been in breach of the CRC, announced the government’s intention to decriminalise the behaviour of children with extreme behaviour and psychological problems who were deemed by the courts to be “uncontrollable” and accelerated its efforts to address in a timely and effective manner the mental health challenges of wards of the state.

**Gender Equality**

*Partially met benchmarks*

**Media:** Through a partnership with The Sunday Gleaner, UNICEF brought attention to experiences of adolescent girls who face particular vulnerabilities, largely on account of their gender. This human interest series included feature stories on two young women who contracted HIV as a result of sexual abuse; young women who were detained in a correctional facility; and a young commercial sex worker.

**Child-friendly Schools (CFS):** In addition to ensuring disaggregation by sex, data collection and analysis at the community level sought to gather baseline information on gender issues and perspectives. A CFS assessment of schools in western parishes examined the gender responsiveness of the school environment. This included access to bathroom facilities for girls, existence of gender-based policies and security and safety features for protecting girls. The majority of schools were found to be gender neutral in the last two elements. Schools made specific efforts to treat boys and girls equally, thereby losing the opportunity for more equitable approaches.

**CHOICE Community Profiles:** Final profiles supported the literature and anecdotal information that fathers are less likely to participate in activities with children than mothers. Boys aged 13 to 17 were more likely to
drink alcohol and generally began drinking and sexual intercourse at an earlier age than girls in the same age group. The profiles also examined the perceptions of 13-to-24 year-olds in regard to gender roles in society. The highest level of disagreement amongst men and women was in response to partners deciding together on how to spend household money, followed by “Women and men are able to do the same jobs”. This baseline research will support girls’ empowerment work in the CHOICE communities for the remainder of the programme.

Environmental Sustainability

Initiating action to meet benchmarks

Not applicable to the current CP.

South-South and Triangular Co-operation

The Governments of Jamaica and Brazil agreed on a programme of exchange of technical expertise to build capacities of technocrats working with adolescents in both countries. The exchange programme has the following two goals:

1. To improve the capabilities of government and non-government specialists to apply innovative practices in addressing the needs of especially vulnerable young people amongst key risk groups.
2. To examine and learn from the implementation of Brazil’s Urban Platform and Municipal Seal Programmes in order to ensure the inclusion and sensitivity to child rights within the Jamaican local government reform process.

The strong similarities in the cultural contexts of these two nations are expected to ensure suitability and the ability to adapt and replicate the activities and interventions. Jamaica’s Bashy Bus was identified as an innovation that could be examined by Brazilian counterparts in the municipality of Fortaleza who are attempting a similar mobile HIV prevention programme. Meanwhile, Jamaica cited Brazil’s work in implementing HIV prevention and treatment programmes amongst transient groups, including adolescents in sex work and those living on the street, as best practices to be examined and adapted.

As a start to this programme of co-operation, two UNICEF specialists and three partners attended a youth participation workshop in Brazil as part of the Global Forum on Human Rights. The partners, which included one person from the health services, one from a youth-led NGO and one media partner, were enabled to present on their own experiences and learn about how other initiatives to meet adolescent and youth participation rights were being implemented and sustained.
Narrative Analysis by Programme Component Results and Intermediate Results
Jamaica - 2280

PC 1 - Adolescent health and empowerment

Constrained

PCR 2280/A0/04/801 By 2016, 50 per cent of the most vulnerable adolescent boys and girls aged 10 to 18 in targeted communities are equipped with life skills, access quality health care services and contribute to decision-making in their own communities.

Progress:

Significant strides were made in Adolescent Health and Empowerment. Advocacy undertaken by UNICEF and its partners resulted in the development of a concept note for the Jamaican Parliament to discuss and agree on proposed changes to two pieces of legislation that would allow medical and other personnel to deliver services to adolescents without fear of prosecution. The existing legal framework requires parental consent for such adolescents seeking services, including HIV counselling and testing. The parliamentary debate is being led by the Minister of Health. In tandem with these activities, standards were finalised for the delivery of health services amongst adolescents. Health care workers will now be sensitised and trained to adhere to the standards.

A national plan for the elimination of MTCT of HIV and syphilis was approved and being implemented. The national plan is based on the results of a rapid assessment of prevention of MTCT, which highlighted several bottlenecks in implementation and put forward recommendations to address them. A multi-agency technical advisory committee for the elimination of MTCT, which is chaired by UNICEF, facilitated programme monitoring and addressed the existing obstacles that have hampered the programme.

Some 500 adolescent and young mothers’ access peer support and referral services through the Mentor Mom programme being implemented jointly by the Ministry of Health and the NGO Eve for Life.

Over 3000 adolescents across Jamaica had the opportunity to voice their opinions and experiences on issues affecting them through an island-wide tour of Talk Up Your. The programme gave the adolescents a chance to speak on issues relating to their SRH, mental health, security and safety, quality of education and relationships with the adults in their lives. Many of the issues pointed to a severe deficiency in the quality and reach of services designed for young people, especially for those in rural parishes.

Progress was also made in the implementation of research. Of note is that, for the first time, data on risky behaviours and attitudes toward safer sexual practices were documented amongst adolescents and young people in five high-risk communities. This will pave the way for the design and implementation of targeted interventions amongst adolescents in the communities. Additionally, the Ministry of Health initiated an adolescent suicide autopsy and research into the extent of suicidal behaviours amongst adolescents in schools.

On-track

IR 2280/A0/04/801/001 By 2016, reproductive health, HIV/STI and mental health services meet standards for quality and adolescent friendliness.

Progress:

Standards for delivery of health care amongst adolescents were reviewed, revised and finalised. This was achieved through a consultative process involving stakeholder consultations held across the island. Recommendations from this exercise informed the revision process. In tandem with this activity, advocacy efforts to make SRH information and services more accessible for adolescents were accelerated. A high-level inter-ministerial meeting around adolescent access to services brought together four government Ministers—Health, Education, Youth and Foreign Affairs—and generated consensus on controversial issues related to access to SRH services by minors. Arising from this meeting, a concept note was developed proposing specific legislative changes that would allow for improved access. This document was prepared for presentation to Parliament by the Minister of Health. At least 60 high-level policy-makers and programme implementers, including government Ministers, decision-makers from health, education and child protection organisations, and faith-based and civil society representatives participated in the process. The Ministry of Health-led APWG developed an accompanying animation to illustrate the issues affecting access to services and the need to ensure that professionals in the health sector were enabled to deliver services.

A national plan for the elimination of MTCT by 2015 was drafted and approved. The plan is based on the recommendations of a rapid assessment of the status of Jamaica’s prevention of MTCT programme. New guidelines for the detection and treatment of syphilis in pregnant women for the elimination of congenital syphilis were also finalised. Additionally, more than 350 health care staff were trained to implement new guidelines for the elimination of MTCT, including the implementation of labour ward testing of pregnant women. UNICEF continued to chair the multi-agency national Elimination of MTCT Technical Advisory Committee.
UNICEF Annual Report 2013 — Jamaica

**Constrained**

**IR 2280/A0/04/801/002 By 2016, 50 per cent of most at-risk young people are enabled to reduce their vulnerability through utilisation of health, second chance education and protective services.**

**Progress:** There were some challenges in the implementation of this IR, as many of the issues have required strong advocacy with the relevant government partners to finalise the details of the interventions in a manner that served the needs of especially vulnerable adolescents.

A situational assessment was conducted to inform the delivery of life skills amongst adolescents in juvenile correctional centres by the National Centre for Youth Development (NCYD) of the Ministry of Youth. The results of the assessment informed the drafting of training manuals for the capacity development of staff working with these adolescents in juvenile centres. A KAPB survey was undertaken amongst juvenile inmates and adolescents in the probation system. The results of the survey were expected to form the basis of an M&E framework for life skills-building amongst adolescents who have been denied their freedom. While these preparatory activities laid a strong foundation for the full implementation of the programme, capacity challenges at the NCYD contributed to significant delays in the programme. The NCYD agreed to collaborate with the NGO Children First to implement the programme in 2014.

Twenty-seven HIV+ teen mothers were trained and delivered peer education and referral services amongst an estimated 500 pregnant teens attending ante-natal clinics in seven parishes that are amongst those with the highest HIV prevalence. From these groups, 67 teen mothers were recruited into a one-year life skills and empowerment programme that aims to prepare them to form a new cadre of "mentor moms".

The National Centre on Drug Abuse initiated an intervention amongst young people in twenty urban and rural communities in order to improve their knowledge and skills on HIV/STI and pregnancy prevention, and the impact of underage drinking on risk assessment and perception.

**Constrained**

**IR 2280/A0/04/801/003 By 2016, inputs from adolescents and young people are utilised in governance mechanisms at regional and parish levels.**

**Progress:** Eighteen young people from across the Caribbean sub-region drafted and presented an outcome statement to Caribbean high-level leaders as part of the preparation for the World Summit on Small Island Developing States (SIDS). The outcome statement urges governments in the region to focus on improving quality and equity for all young people in the areas of education, health, social protection, climate change and good governance. This process was part of activities leading up to a global meeting of SIDS to be held in Samoa in the summer of 2014.

An estimated 3000 adolescents voiced their opinions and recommendations on a wide range of issues. These adolescents, from schools across the island, participated in the Talk Up Your school tour. Social media outlets such as Twitter, Facebook and YouTube generated close to 10,000 views of the 14 webisodes of the tour posted between October and December. Amongst the main concerns raised were challenges with early sex and teen pregnancy, transactional sex, issues relating to poor parenting, and uncertainty surrounding their ability to achieve their life ambitions due to poverty and violence in their communities. Subsequently, twenty government partners attended a feedback dissemination meeting arising from the school tour and assisted in drafting a plan to facilitate greater co-ordination and collaboration in the delivery of services to meet adolescents’ needs.

Four stakeholders, including one government partner, one media partner and two young people, benefited from a capacity-building workshop on adolescent participation in Brasilia, Brazil as part of the Global Forum on Human Rights. All four stakeholders are involved in the process of development of a multi-agency programme for adolescent participation.

It is expected that the indicators measuring this IR were to be revised at the MTR scheduled for 2014 to reflect recommendations from partners for a broader spectrum of adolescent participation outcomes.

**Constrained**

**IR 2280/A0/04/801/004 By 2016, interventions amongst adolescents, including the most at risk, are evidence informed and supported by quality M&E frameworks.**

**Progress:**

Data collection amongst was completed on a study to assess the extent of suicidal ideation and other behaviours amongst adolescents in schools. A total of 3,470 adolescents participated. The data was being analysed and will be compiled in a report along with an autopsy of adolescent suicides over a two-year period. The study, which obtained approval from two ethics committees, is aimed at better understanding the underlying causes and triggering factors amongst Jamaican adolescents as well as to identify early warning signs better and eventually to design intervention strategies that best meet adolescent needs. This research was deemed necessary, as there was a sharp increase in the number of suicides by adolescents over the 2011/2012 period. In addition, a study conducted amongst adolescents in 2005 indicated that suicidal ideation was high amongst the 12 to 15 years of age cohort (one in ten adolescents had seriously considered suicide). This study will continue to track this behaviour. Additionally, child mental health services in the public
sector were overwhelmed with cases, particularly depression, amongst adolescents and required a stronger evidence base to strengthen referral mechanisms and early detection interventions amongst at-risk adolescents in schools.

UNICEF’s partners that are involved in the implementation of a vulnerability study amongst young key affected populations have re-designed the terms of reference of the study. This was due to comments submitted by the ethical review board of the Ministry of Health, which suggested that the age groups of the participants be revised from a span of 10 to 24 years of age to 16 to 24 years. This was due to legal requirements for mandatory reporting of children under age 16 who are sexually active.

### PC 2 - Quality education

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**PCR** 2280/A0/04/802 By the end of 2016, in Jamaica's poorest and most volatile communities 40 per cent of six-year old girls and boys entering primary schools master the entrance assessment and the performance of Grade four boys and girls on national math and literacy assessments improved by 30 per cent.

**Progress:** The education sector—both government and NGO entities—explored new approaches to the delivery of guidance and counselling services to students and their parents, curricula for children with disabilities and parenting support services across the island. The Ministry of Education, through research studies, sought the evidence needed to inform new interventions. The processes of stakeholder consultation and research investigations were helpful, but major activity delays impacted negatively on programme implementation. As a result, several planned interventions had still not commenced or were incomplete.

Nevertheless, the sector can speak of positive developments in support of teenage mothers with the approval and launch of the Policy for the Re-integration of School-aged Mothers into the Formal Education System. The initiative was led by the Ministry of Education, with inputs from a wide cross-section of stakeholders. Policy documents drafted in previous years, such as the National Safe Schools policy and the Health and Family Life (HFLE) policy, had still not received final approval for implementation. The National Guidance & Counselling Policy for the Education System was also drafted through wide stakeholder consultation and was approved by the Ministry’s Senior Policy-Making Group for submission to Cabinet. The establishment of the National Parenting Support Commission also resulted from previous work on the development of a National Parenting Policy.

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**IR** 2280/A0/04/802/001 By 2016, all girls and boys 0 to 6 years old benefit from national and community systems to support a quality start to life, early learning and developmental readiness.

**Progress:** Finalisation of screening tools for a national system of referral and early intervention for children was to be completed by March 2014. Stakeholders in maternal and child health were preparing for a forthcoming €22 Million grant from the European Union, to be disbursed in 2014. UNICEF and other UN agencies continued to advocate for strong links between the EU-funded project and APR.

Approval was granted for presentation of the draft National Infant and Young Child Feeding Policy, to be tabled in Parliament. The Human Resource Committee of the Cabinet, which reviewed the document, suggested minor changes that, when complete, were to be tabled by the Minister of Health.

Forty decision-makers across four hospitals received training in a WHO/UNICEF course on Strengthening and Sustaining the Baby Friendly Hospital Initiative. Just over 1,000 health care workers were equipped to promote breastfeeding amongst pregnant women and facilitate skills building amongst new mothers. Additionally, 32,500 booklets that reinforce the benefits of breastfeeding and assist health staff in giving information to pregnant and new mothers were reproduced and disseminated in primary and secondary care institutions. Efforts were initiated to convert the 20-hour breastfeeding promotion and support course into an on-line course for medical doctors and clinical staff. With the development of this course, more doctors and clinical health workers will be expected to acquire the skills necessary to promote and support exclusive breastfeeding amongst new mothers.

Three hospitals that are most poised to achieve accreditation status were identified for support toward achieving baby-friendly status.

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**IR** 2280/A0/04/802/002 By 2016, all girls and boys 3 to 12 years old and attending Early Childhood Institutions and primary schools in the targeted communities enjoy healthy, safe and protective learning environments consistent with CFS standards.

**Progress:** One of the six domains cited for CFS is inclusiveness. The Ministry of Education, with support from key NGOs for persons with disabilities, reviewed existing curricular materials used for teaching children with disabilities and identified components that would comprise a curriculum for such children. The Ministry of Education commenced work with the Jamaica Association for the Deaf to improve deaf literacy including formalising Jamaican sign language. The expected outcome of this intervention will inform the development of the new curriculum for children with moderate to severe hearing disabilities.

The Ministry of Education established a committee to develop a school-wide positive behaviour intervention and support (SWPBIS) framework that will have strong links to guidance interventions, such as the Programme for Alternative Student Support (PASS). A Guidelines and Procedures Manual for the PASS was partially revised for piloting. An expansion of PASS was advanced to ensure greater
student access to psycho-social services, especially for students at risk. Expansion will also include a SRH referral mechanism and other components. As a result of work completed, a manual for the delivery of psycho-social support services to students and their families was being drafted. The delivery of the psycho-social services component of SWPBIS was to be piloted by the Ministry in the first quarter of 2014. The outcomes of the pilot will inform the finalisation of the manual for psycho-social services. The Ministry drafted a National Guidance and Counselling Policy that will address, amongst other programmatic interventions, the implementation of the SWPBIS and PASS and bring coherency to the implementation of both.

Seven schools in rural parishes were equipped to use positive behaviour techniques amongst more than 3,000 students. A total of 149 teachers and 40 auxiliary staff in the schools were trained in the use of positive behaviour reinforcement to impact a total 1,839 boys and 1,789 girls. The principals of the two early childhood institutions, three primary schools and two junior high schools were also engaged to expand and sustain the use of these methodologies.

The results of this pilot were to be submitted to the Ministry of Education for inclusion in the extended piloting of SWPBIS in 56 schools commencing in September 2014.

The HFLE curriculum for Grades 7 to 9 was revised, amended and approved for reproduction and dissemination to schools. There were no further developments regarding the National Safe Schools policy and the Management of HIV/AIDS in Schools policy.

A total of 3,122 students from Grades 1 to 4 in five rural schools learned money management and entrepreneurship life skills through the Junior Achievement programme. The programme engaged and trained 65 teachers and 338 parents to facilitate and support skills acquisition amongst the boys and girls.

The education sector focused some attention on the professional development of practitioners. One-hundred-and-eighty-two principals and teachers were equipped as resource persons in gender-sensitive teaching strategies, action research and professional portfolio development and teachers were equipped as resource persons in gender-sensitive teaching strategies, action research and professional portfolio development by the JTC. The workshops also served to test manuals and training programmes, which should be finalised for use in the education system. Reviews of Levels I-III of the Early Childhood Practitioners Training were completed and awaited written approval from the Board of the National Council on Technical Vocational Education and Training. Level IV content was also reviewed. A total of 621 early childhood practitioners were trained to deliver the HFLE curriculum effectively.

There was growing interest in the use of sports to enhance learning and to address behavioural problems presented by children. The Ministry of Education re-introduced the curriculum into the school system in September 2013. The overall curriculum remains strong and, implemented effectively, should contribute to improved life-skills related to health, inter-personal relationships, and conflict management. The Ministry has announced plans to make the curriculum a required part of the course offerings in all primary and secondary schools.

Efforts to expand the network of Parents Places, a one-stop information and resource centres on parenting, yielded minimal success. Although the Minister of Education endorsed Parents Places as the strategy to provide information to parents and announced establishment of 100 new places, none has started operation. Some parenting activities were supported through the work conducted for
children with disabilities, the Junior Achievement programme and the Attendance Project. This integrated approach might be more effective than having stand-alone parenting activities. Work commenced on the preparation of thematic booklets for parenting education.

Two research-related activities were completed during the period: baseline information for the C4D project on parenting and a review of the piloting of the curriculum for training persons as parenting facilitators. The C4D research provided useful insights into parenting practices that will inform the programming initiatives in the targeted communities.

IR 2280/A0/04/802/005 By 2016, quality data on ECD and education accessible in a timely manner and used to inform national policies, programmes and advocacy efforts.

Progress:

By 2016, quality data on ECD and education accessible in a timely manner and used to inform national policies, programmes and advocacy efforts.

IR 2280/A0/04/803/001 Key state-operated MDAs produce age/gender/location disaggregated reports by category on child abuse, children in conflict with the law, child victims of major selected crimes and children seen in accident and emergency units.

Progress:
Baseline data of the knowledge, attitudes and practices of Jamaicans regarding child abuse and child abuse reporting was collected and analysed. The findings, which reflect the views of more than 1,500 members of the public including students, school-based professionals and health and social workers, indicated that there was a range of opinions amongst the; and many persons are uninformed about the work of the Office of the Children’s Registry. The research recommendations will inform the efforts of the Office of the Children’s Registry to develop and effectively implement a communication strategy to increase reporting of child abuse by children and adults, especially child sexual abuse.

During the second quarter of 2013, the CPDWG of twelve Ministries, departments and agencies successfully uploaded new data to the system. To ensure optimal functioning, an information technology audit was conducted to determine the data management capabilities of each member and develop an implementation plan for improved efficiency. The findings revealed challenges such as insufficiently-skilled technical staff, aging computer software and lack of clarity regarding the role of CPD partners who provide technical support to the CPDWG. The findings of the study highlighted the need for more efficient computerised databases within child protection agencies. However, it was noted that commitment for the improved functioning of the CPD was strong amongst the technical staff of the CPDWG.

**IR 2280/A0/04/803/002 Improved planning, co-ordination, collaboration and networking arrangements in place to strengthen the child protection system.**

**Progress:**

Discussions were held with the Ministry of Youth and Culture and an agreement was reached that the government would lead the process of the assessment of the child protection system in Jamaica in 2014. The Ministry’s decision was based on its resolve to build on its effort to achieve more integrated collaboration amongst child protection stakeholders. In July 2013, two UNICEF programme staff members and representatives of two partner organisations—the Child Development Agency and the Office of the Children’s Registry—participated in Caribbean-wide training on the assessment and mapping of child protection systems and the development and M&E of child sexual abuse programmes. These workshops not only provided learning opportunities but facilitated the drafting of action plans (at the country and sub-regional levels) that highlighted the importance of joint/inter-agency/inter-sectoral programming that would facilitate the establishment of new MoUs amongst child protection Ministries, departments and agencies.

The Child Development Agency expanded the work of three child protection committees in the parishes of St. Catherine, Clarendon and St. James. The committees foster, monitor and co-ordinate inter-agency and inter-sectoral collaboration amongst public sector, private sector, civil society and community-based organisations to ensure the safety and well-being of the children of the parish. Based on dialogue with the Child Development Agency and partners at the parish level, UNICEF was to support the strengthening of the three committees during 2014, which would provide guidance for the establishment of new entities to be established in Hanover and Westmoreland parishes where CHOICE activities had already commenced.

**IR 2280/A0/04/803/003 Child victims of abuse, exploitation and violence and children affected by emergencies are provided with effective psycho-social services and community-based interventions.**

**Progress:**

Partners commenced implementation of the Reducing the Juvenile Population in State-supported Institutions project. The primary result was the establishment of a mobile mental health clinic created for the assessment and treatment of children placed in residential child care facilities and juvenile correctional centres. UNICEF support to this initiative strengthens the capacity of the Child Development Agency, Ministry of Health and the Department of Correctional Services to respond to the needs of these children, especially those with extreme behavioural and psychological needs. The service will provide psychological assessment and treatment for wards of the state in two parishes of the island. Since the start of 2013, UNICEF and implementing partners developed several key operational documents and recruited staff for the mobile unit and the Diversion programme.

The capacity of UNICEF and ODPEM was strengthened in order to improve responsiveness to children in humanitarian situations and facilitate inter-agency arrangements to safeguard the rights of children in emergencies. UNICEF’s Deputy Representative and Child Protection Specialist, together with ODPEM’s Deputy Director General, attended local and sub-regional training workshops that shared best practices, suggested new methodology at the country level and produced a work plan for children in emergencies.

**IR 2280/A0/04/803/004 Forty per cent of child protection services compliant with the CRC and other international standards, and deliver quality rehabilitation and re-integration services.**

**Progress:**
Several initiatives sought to bring the practices of child protection professionals into conformity with the CRC and promote quality rehabilitation and re-integration:

1. The Office of the Children’s Advocate established Child Justice Guidelines for judges, magistrates, social workers, medical practitioners, police officers, prosecutors and victim support workers to guide their interaction with children who come into contact and conflict with the law.
2. The Code of Ethics for Professional Social Workers and Social Service Workers was launched and disseminated.
3. The Child Development Agency commenced the review of the CRC-based Child Care and Protection Act (2004) and the Children (Adoption of) Act (1958) through island-wide consultations, elite interviews and focus group discussions with stakeholders, including children.
4. Several stakeholder consultations were held to solicit input into the development of the draft National Child Diversion Policy that will result in fewer children in conflict with the law being incarcerated.
5. A Tracer Study was conducted of graduates of the 2011 School Suspension Intervention Programme (SSIP) of the Dispute Resolution Foundation to ascertain the long-term (i.e. one-year) impact of the programme on its beneficiaries. The findings indicated that the behaviours learned and applied during the SSIP were sustained by most graduates of the programme. During 2013, the SSIP provided rehabilitation sessions for 466 children, mainly boys (297), from primary and secondary schools who were suspended for violent behaviour. The children’s skills improved in the areas of anger management, conflict resolution and self-analysis. The capabilities of 62 parents and 27 school-based professionals were strengthened in the areas of alternative methods of discipline, anger management and conflict resolution.
6. Awareness-raising for approximately 530 prescribed persons (professionals obligated under the Child Care and Protection Act to report incidents of child abuse) was achieved during six workshops, which were held in three parishes, which emphasised their responsibilities and the sanctions that would be applied if they failed to comply.
7. Two-hundred-and-fifty-three police officers and school-based deans of discipline were equipped with knowledge and tools to protect and promote the rights of children who come into contact and conflict with the law by the Caribbean Child Development Centre of the University of the West Indies. A module was developed to mainstream the training into the revision of the Jamaica Constabulary Force Police Academy curriculum and the department’s in-service training programme.
8. A rapid assessment and audits were conducted in an effort to improve the functioning of state-run and private residential child care facilities. The findings of the assessments will guide interventions for improvements in service delivery of these facilities.
9. Child participation was promoted through the launch of the Child Development Agency’s Children’s Advisory Panel.
10. Birth registration and/or certification increased by 2,352 for children 0 to 12 years old who received free birth certificates through fairs, and other interventions, organised by the Registrar General’s Department.

PC 800 - Cross-sectoral costs

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<td>IR 2280/A0/04/800/889 Key partners/stakeholders are mobilised to support and engage in the promotion and protection of children’s rights by 2016.</td>
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On-track

PCR 2280/A0/04/804 By December 2016, evidence-based communication and advocacy for children’s rights and mechanisms to monitor child-related systems and national priorities strengthened.

Progress:

Finalisation of an on-line dashboard for Vision 2030 contributed to improved management and dissemination of data for national planning. This output builds on previous work with DevInfo, as the JamStats database is used as the data source. The dashboard provides an on-line monitoring tool and facilitates timely reporting on the 46 indicators aligned to national goals and outcomes. UNICEF will continue to advocate for more specific indicators that bring boys and girls to the forefront of Jamaica’s development.

The development of community profiles for five targeted communities in western Jamaica increased the availability of data on women and children at the sub-national level. The communities consist of approximately 15200 individuals with an average child population of 35 per cent. Data collection mechanisms were improved to capture information on issues related to gender, sexual and reproductive health, parenting and school attendance. These data will support the Social Development Commission in the development of priority plans for these vulnerable communities and facilitate targeted interventions amongst UNICEF partners and other stakeholders.
An ICT Audit amongst 12 data providers for the Child Protection Database identified the main ICT barriers to effective implementation of it, which monitors key CRC indicators on children in state care, child abuse, enrolment and attendance rates, child victims and perpetrators of major crimes.

Efforts to strengthen evidence-based communication continued with UNICEF undertaking strategic advocacy concerning children in conflict with the law, contributing in part to major shifts in law and policy by the government and targeted programming supported by the EU. A multi-partner advocacy strategy to influence access to services by minors gained significant traction. UNICEF was supporting the development and implementation of evidence-based communication strategies to encourage reporting on child abuse and to provide adolescent-friendly SRH information using new ICT. UNICEF strengthened the capacity of its partners in strategic use of social media.

**IR 2280/A0/04/804/001** Key partners/stakeholders are mobilised to support and engage in the promotion and protection of children’s rights by 2016.

**Progress: Update Dec 2013:** The approach to strategic advocacy strengthened with the agreement to engage with key partners to develop and implement advocacy strategies for three key issues. UNICEF’s advocacy for children detained in adult prisons, both jointly with other agencies and on its own, contributed to major shifts by the government, including amendments to law. UNICEF plays a critical role in strategic advocacy to influence laws and policies that affect the way adolescents access health services. UNICEF also engaged partners to explore the development of an advocacy strategy around the efficacy of expenditure in the ECD sector. Efforts were being made to engage key civil society policy advocacy groups to strengthen the relationship with UNICEF and collaborate on advocacy issues where possible. Increasingly, UNICEF sought and was building new collaborative relationships with partners from various fields of interest, including media as well as non-government and influential advocates on awareness-raising initiatives. This worked particularly well on social media platforms, with the engagement of an on-line ‘street team’ of well-respected influencers. New partners in targeted initiatives include The Sunday Gleaner (newspaper), Global Reporters for the Caribbean (news feature broadcast programme) and the Talk Up Your’ TV programme. In the last quarter of 2013, UNICEF increased its reach and engagement of public audiences and key stakeholders through strategic use of traditional and social media platforms. UNICEF’s video content on YouTube attracted close to 14,000 views; 2014 was to see a greater focus on visual material. New collaborations with media partners and engagement of the CO’s Goodwill Ambassador were particularly valuable in highlighting issues affecting the most at-risk adolescent girls. The Ambassador conducted a field visit with teen moms and at a children’s home, which was filmed and shared widely. Strategic advocacy efforts around adolescent health gained considerable traction and a strong case for legal changes was to be submitted for government review in early 2014. UNICEF supported production of a three-minute animated feature to support this effort. UNICEF provided technical support for two major evidence-based communication initiatives to be implemented in 2014, which aim to increase reporting of child abuse and increase access amongst adolescents to SRH education using adolescent-friendly ICT.

**IR 2280/A0/04/804/002** By 2016, data collection and management systems provide sex- and age-disaggregated data on women and children for national planning and timely reporting on MDGs, CRC and Vision 2030 at national and sub-national levels.

**Progress:** Baseline information disaggregated by sex and age for children and youth was available for the five vulnerable communities in the UNICEF-CHOICE programme (5093 households). This data will support monitoring and guide community planning exercises, stakeholder interventions and programming.

The on-line dashboard for management and dissemination of data related to key performance indicators for Vision 2030, was completed in collaboration with the DevInfo Support Group and the Planning Institute of Jamaica (PIOJ). The data set consists of 336 data points for each year and covers a ten-year period, subject to availability. It also presents an assessment of the status of each of the 46 indicators in relation to national targets using the traffic light methodology. Actual values and targets are represented graphically; graphs and associated metadata are also available for download. In addition, two members of the technical team at the PIOJ were trained in use and maintenance of the DevInfo 7.0 databases and the dashboard. The oversight committee, which consists of key stakeholders from the PIOJ and the Performance M&E Unit in the Office of the Cabinet, estimated that decentralisation of reporting might not be cost effective. Therefore, ministries will submit data to a central point before publication on the dashboard. Subsequent to its launch in December 2013, a communication plan was being developed by the PIOJ to increase awareness amongst stakeholders and the general public.

The establishment of the CPD enabled on-line access to the most current (annual) data in support of child protection, including child abuse, child labour, juvenile justice and children in care. Whereas disaggregation of data by age and sex is predominantly the standard, advocacy and support continued for measurement of these indicators at sub-national geographical areas such as parish and community. An ICT audit conducted in 2013 highlighted gaps that needed to be addressed in regard to process as well as human and IT capacity to facilitate full implementation.

There was some delay in carrying out the assessment of the Child Protection Sector. An agreement was reached that the government would lead this activity in 2014.
Effective Governance Structure

Planning and Emergency: All staff participated in the planning meeting convened in February 2013 at which the objectives and priorities for the year were agreed. There was no need to make changes to the statutory committees. The CO continued to include risk assessment in decision-making processes. Transparency and information sharing occurred via the dissemination of minutes for all statutory committees.

Committee: All statutory committees, except the Central Review Body (CRB), met during 2013. The CRB was not required to meet, as all positions remained filled. The main risk mitigation committee, the Contract Review Committee, met ten times to review contracts, procurements and Programme Co-operation Agreements (PCA). Given the number of staff members and the number of statutory committees, the CO elected to use the Contract Review Committee to review PCAs. This was noted as a medium risk in governance by the Office of Internal Audit (OIA). They noted that the Contract Review Committee’s review of a PCA failed to ensure that the standard form was used in the submission. This resulted in an important element of risk not being identified and discussed at the meeting. As a result, it was recommended that a PCA committee be established. This recommendation was accepted, implemented and closed by the OIA in December.

CMT: Six Country Management Team (CMT) meetings were held in 2013 covering major issues, including dashboard alerts as well as other progress indicators. Preparation and follow-up actions for the audit were standard items on the agenda. With the overall improved knowledge of the Vision system, five comprehensive workflows were presented and approved by the CMT. In reviewing the workflows, the CMT members incorporated their knowledge of the new financial guidelines as well as the inherent country risks to make suggestions for more efficient processes. Discussions around programme implementation percentages and unliquidated amounts over six months focused on both the underlying reasons and strategies to be implemented to resolve these issues. The CO improvement plan, which originated from the all staff meeting at the start of the year, was also a standing agenda item at the CMT. Members were assigned responsibility for one area and required to provide the status of their respective area at meetings.

Audit: The audit conducted in 2013 by OIA found five medium-priority and one high-priority (fundraising) observations. Three of them were addressed and closed by the CO.

Strategic Risk Management

The prior, extensive work on emergency preparedness, which was linked to the Core Commitments for Children, helped to reduce the preparation process for 2013. The Programme and Operations sections reviewed the preparedness plans and ensured changes in relation to the current country situation. UNICEF also completed a UN-wide Business Continuity Plan test day, coordinated by UNDP.

A decentralised approach was taken in updating the strategic risk management; Programme and Operations colleagues updated their respective sections in the assessment. Although the reviews were satisfactorily completed, the co-ordinated approach from the prior years was more productive, as the CO benefited from cross-sectional inputs and suggestions.

The aid environment and predictability of funding remain high-risk areas and, despite a mitigation strategy of intensified fundraising activities, this was very challenging given the upper middle-income designation for Jamaica. The CO actively participated in fundraising initiatives and sought multiple opportunities to submit proposals to raise funds for the CP.

UNDSS and the UNCT vigilantly maintained security controls in order to reduce the impact of crime on staff and programme activities. UNDSS installed a 24/7 control room that provides the facilities for staff to have constant contact in emergency situations via phone and VHF radio. They also introduced a text messaging service that gives all staff quick information regarding crime hotspots as and when incidents occurred. This is very useful, as it allows staff the opportunity to avoid trouble spots.
The safety and security strategic alliance, established by the UNDSS with the local police, ensured further risk mitigation, as the individual offices in the UN system were visited regularly by specially-assigned police officers. The UNDSS implemented strategic monitoring through regular visits, as the police officers were required to sign in log books kept at the offices of the UN agencies. With the increasing crime rates and the declining economic conditions, the implementation of these risk mitigation strategies was important for programme implementation and staff safety and security.

### Evaluation

The annual Integrated Monitoring and Evaluation Plan (IMEP) is monitored by a research committee within the CO, which meets quarterly. As the CO implements programmes that address more vulnerable population groups, there is an increasing need to fill data gaps. Some areas are under-researched. This situation, along with additional requests from partners for other research activities, led to the process for reviewing proposals and approving changes to the IMEP being improved. Changes to the IMEP were approved by the CMT. In addition, the focus of this committee was expanded in 2013 from research and evaluation activities to reviewing the entire IMEP, in response to an audit observation.

An outcome-based Evaluation of the Caribbean Child Research Conference (CCRC) was completed as planned. The CCRC provides an opportunity for researchers on issues related to children to share findings with policymakers, students and the general public. The objectives of the seven-year conference were assessed in light of the OECD/DAC criteria of relevance, efficiency, effectiveness and sustainability. An assessment of impact was not included in the scope of this evaluation. Child participation ranked high amongst the achievements, with an average of 500 students participating per year and the work of the top ten student researchers recognised. As the only one of its kind in the region, the conference proved to be relevant within the Caribbean context.

Key recommendations centred on sustainability, increased regional participation and greater impact of adult research on government policy at national and regional levels. Activities identified for action include support to the CCRC steering committee in lobbying for alternative sources of funding and further integration of student activities within the Ministry of Education’s operational plans. In addition, the opportunity for the utilisation of the conference as a dissemination tool for the work of the newly-established Caribbean Child Rights Observatory was highlighted.

### Effective Use of Information and Communication Technology

In order to promote UN reform for business continuity, a joint UN Business Continuity Plan test day was undertaken on 22 May 2013. As a precursor to the event, the business and disaster recovery plans were updated and verified via a desk review. Participants used the opportunity to test their competence in the use of existing remote connectivity tools as well as the newly-released Cisco AnyConnect client. Skype, which was officially approved, was also used in the exercise, thereby enabling supervisor/supervisee PAS discussions. Satellite connectivity tests were supported by OPSCEN and the LACRO.

The maintenance of ICT equipment via Vision’s asset module continued with inclusion and verification of all ICT equipment rolled out in 2013. All items that were previously submitted to the Property Survey Board (PSB) in 2012 were formally removed from Vision’s asset master record in 2013. ICT equipment marked for disposal were identified and submitted to the PSB. As a result, one PSB meeting was held to dispose of obsolete ICT equipment.

The CO purchased ICT equipment that conformed to the latest hardware standards. Currently, 80 per cent of primary desktops/laptops have a life cycle expiry date greater than 31 December 2013 and newer ICT equipment was to be purchased before the end of 2013 in order to replace expiring equipment and to improve the CO’s contingency supply of ICT equipment.

The management of corporate applications continued with the migration to the VEAAM backup software, which replaced Microsoft DPMS. The antivirus platform was also upgraded to Symantec Endpoint protection.
12.1 for server and client machines. The capabilities of the automated patch downloader were further extended with the installation of the WSUS patch on Citrix Secure Gateway Server for the CO. The revamping of the scheduling of calendar events in Lotus notes and the scan-to-email settings of the multi-function bizhubs enabled the better use of resources, leading to efficiency gains. Minor changes to the default print settings for all users will lead to cost savings for the CO.

Ongoing projects include the migration to DHCP and Private IP addresses and the application of Service Pack1 for Windows Server 2008R2. Cost-saving initiatives that were started and still being experimented include the streamlining of the CO wireless to reduce the overall Internet cost and the customisation, and configuration of the call accounting package aimed at recovering telephone costs was to be finalised and implemented in early 2014.

**Fundraising and Donor Relations**

From the OIA audit report: “Of the office’s five-year country programme approved budget, US$ 13.1 million was planned, of which US$ 7.7 million (59 percent) was unfunded at the time of the audit. The funding status varied between the different programmes for the 2012-2013 planned budget; Child Protection was fully funded, Quality Education was underfunded by 2 per cent, Adolescent Health and Empowerment by 27 per cent, Communication by 50 percent and M&E by 76 per cent.”

An agreement with the US Fund for UNICEF was initiated in 2013 for joint development of a resource mobilisation strategy for UNICEF in the Anglophone Caribbean. Initial progress was made in identifying top funding priorities; identifying bottlenecks due to the upper-middle income classification; and ranking of existing and potential funders, by island/country and sector. The groundwork was laid for significant enhancements to resource mobilisation opportunities.

The CO had grants from the US Fund for UNICEF, the UK National Committee, SIDA, CIDA and the European Union in 2013, in addition to the thematic funds and regular resources. There were five donor reports due in 2013 and one was sent less than two weeks after the due date. There were no funds attracted from new donors in 2013.

The overall funds utilisation rate was 84 per cent for 2013 funds. None of the grants were extended in 2013 and the CO regularly monitored remaining unspent funds via Programme Management Team meetings held monthly in which the manager’s dashboard and efficiency indicators were monitored.

**Management of Financial and Other Assets**

An audit was conducted from 22 July to 16 August 2013. The OIA concluded that the control processes over operations support were generally well established and functioning during the period under audit.

With the CP not fully funded, the CO sought every opportunity to submit funding proposals to donors, the RO and headquarters. The CO also ensured that funds received were spent as agreed in the donor proposals. The timely submission of donor reports was another contribution strategy utilised by the CO. While these measures were adopted and monitored, the CO struggled with the capacity of the partners to utilise funds advanced to them and implement projects within the agreed schedule.

The improved knowledge in the Vision system was evident, as the CO had less need to correct financial entries in the system. It failed to reduce the number of transactions below US$ 500, with the recommendation that direct payments be made on behalf of these partners. Every effort was being made to the build the capacity of these partners so that they could be provided with direct cash transfers.

The principle that all partners, vendors and supplies to UNICEF Jamaica must supply banking information to conduct business contributed to only 2 per cent of payments made by cheque. The use of bank transfers significantly improved efficiency and reduced people traffic in the CO, which lowered safety and security risks. The use of bank transfer also positively impacted on the bank reconciliation process, as the number of outstanding items was limited to items transferred on the last business day of the month.
The collaboration between ExCom agencies in relation to the Harmonized Approach to Cash Transfer (HACT) was not present. At the start of the HACT process in 2006, UNDP, UNFPA and UNICEF, in consultation with the government counterpart, contributed to the macro assessment report and the assurance matrix. Where partners were shared between agencies, a combined team from the agencies attended the micro assessments evaluation activity. With the personnel changes within the agencies, collaborative efforts declined and implementation of HACT was reduced to the actions of the individual agencies.

The CO conducted twenty-seven spot checks and completed six micro assessment reports, of which five were government partners. Notwithstanding the invitation to the other ExCom agencies, UNICEF carried out all the micro assessments alone. In addition to the spot checks to review the implementation of financial procedures of partners, staff conducted 47 programme visits. The interactions with partners at spot checks and programme monitoring visits contributed to the improved programmatic and financial capacity of partners. Given the level of funding for programme implementation, and the fact that independent auditors for all partners audited the UNICEF assisted programmes, the CO did not undertake special programme audits. It determined that the non-implementation of special audits was not high-risk, given the level of financial and programme assurance activities and that the programme implementation was also being audited by external auditors.

The CO had a challenging year in relation to outstanding DCTs over six months. With most of the programming allocated to upstream work, the majority of funding was provided to government partners. In an effort to improve transparency, the government increased its bureaucratic procedures, which resulted in a reduction in the rate of implementation of UNICEF-assisted projects. One example was the procurement process of consultants, where the government partner received the DCT, but was unable to spend the funds until some eight months later when the hiring process for the consultancy was completed and the work plan started. To mitigate this risk, UNICEF and partners agreed to release DCT only after the procurement process was nearing completion. This should improve the level of outstanding DCT for 2014.

The CO was able to contain the costs of communications, including data and telephone, and maintenance of transport equipment to less than US$ 30,000. The cost of rent and maintenance continued to be the highest operating expense, but must be assessed in relation to the high costs of electricity and security services in the CO.

Supply Management

Local vendors were able to source and supply all programme supplies required and at competitive prices. The goods were delivered directly to the implementing partners, thereby eliminating the need for the CO to manage a warehouse facility. Total programme supply costs for 2013 were US$ 116,113.

The long-term agreements in place provided excellent service. There was no unusual delay in shipping equipment ordered for the CO.

Procurement services are used annually by the government, through the Ministry of Health, to procure oral rehydration salt from the Supply Division. The Ministry noted its satisfaction both with the prices and the services received.

There was no declared emergency and, therefore, no emergency intervention.

Periodically, programme staff visited activities and reported on the utilisation of supply assistance, including identification by decals.
**Human Resources**

2013 was an active year for staff changes and the preparation for the internal audit. The OIAI conducted an audit from July to August. The audit assessment of HR activities was satisfactory; it concluded that there were adequate controls on HR management in the CO. Specific mention was made on the completion of 2012 PERs and the completeness of the supporting documents for staff entitlements.

**Staff Changes:** HR supported the transition of the new Representative assigned to the Jamaica in August as well as the re-assignment of the former Representative to the Uzbekistan CO. In keeping with the recommendations toward centralisation of operations, the posts of Administrative Assistant and Receptionist/Registry Assistant were abolished effective 31 December 2013. The two affected staff members received career counselling through the support services arranged by the RO. To close the performance gaps created by the abolition of these two posts, work functions were distributed to the Executive Assistant, Operations Administrative Assistant and the drivers. Another noteworthy change to the office structure was the downgrading of the Senior ICT position from GS7 to GS6 level with the incumbent retained at the GS7 level of the salary scale.

**Training and Staff Development:** As is customary, the learning priorities established at the start of the year were guided by the regional learning strategy and activities set out in the regional Learning & Development calendar for 2013. Jamaica was not amongst the COs that received training funds for 2013; training therefore was concentrated in e-learning. The CO received two licences for Rosetta Stone on-line language training in Spanish and also took advantage of the e-Cornell HR modular training. Mandatory trainings were Advance Security in the Field and Integrity Awareness. Two staff members were trained in fire safety in June by UNDSS; it also provided emergency wardens and defensive driving training. There were five in-country UN Peer Support Volunteer meetings; each had a training component. In September, staff at all levels received the Performance Management for Results training over a three-day period. Facilitation of this training was done by the Operations Manager, with assistance from the Representative from the Eastern Caribbean Office. Staff members also participated in a number of WebEx sessions to enhance their area of work. Regional and global training undertaken by staff included PFP Training and Caribbean Fundraising Strategy Development, Child Protection Mapping Workshop, PPP Training, Advances in Social Norms, Child Protection in Emergencies and UNCT Leadership.

**Staff Wellbeing and Engagement:** One JCC meeting was held, resulting in the implementation of a policy regarding private visitors to the CO. Eight persons sought the support of the Peer Support Volunteer, with three referrals to the UNCT-appointed psychologist. The CO maintained the flexible time arrangement to encourage work/life balance. Further to the commitment made to improve communication and information sharing at the 2012 annual retreat, the CO maintained the weekly stand-up meeting.

**Efficiency Gains and Cost Savings**

The CO prioritised the search for new premises as the main cost savings initiative for 2013. This was based on the fact that the cost of rental and maintenance of office premises represented 150 per cent of the total support budget allocation. Various alternatives were explored, including a request to share accommodation with PAHO/WHO and relocation to a university campus. However, the offers received showed little reduction in the current costs of rental and maintenance, as it was assessed that the costs for electricity and security were approximately 60 per cent of amount now being paid.

The CO reviewed the efficiency gains achieved based on the level of service received from the current landlords and realised that the all-inclusive rental agreement had positively impacted its maintenance. In addition, the recent structural analysis of the office building through UNDSS showed that it was structurally very sound and one of the few buildings in Kingston that could withstand a major earthquake. In considering these factors, the CO is reviewing other ways to decrease costs while remaining efficient and effective.

UN agencies in Jamaica participated in Business Operations Strategy (BOS) training in May 2013. While the Operations Management Team (OMT) added new work plan items for cost-saving initiatives in the draft BOS, the previously-established initiatives continued to provide costs savings or operating efficiencies. The CO
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continued to receive a 35 per cent discount on courier services from the OMT agreement made in 2009. As part of the BOS plan, the OMT was to review this agreement in 2014 to ascertain if further savings or efficiencies could be gained.

Similarly, the Closed User Group system was to be reviewed in the new BOS work plan, as not all agencies received approval from their respective headquarters to join the group. The continued use of this system provided both efficiency and costs savings to the CO, as the system is used as a backup to the UN-wide VHF radio communication system.

UNDSS continued to collaborate with the agencies on training initiatives for safety and security. Given the small size of offices in country, the combined training benefitted all, as the provision of these training would be inefficient or too costly for offices on their own.

Both risk and efficiency were incorporated in programme procurement decisions. In responding to procurement requests from programme partners, the CO assessed the type of supply and cost in making the decision. Where the process would result in inefficiency and the financial risk was low to medium, programme partners were given DCTs to complete the procurement process.

Changes in AMP & CPMP

2014 is the third year of the country programme and a MTR will be a priority. Any changes to the CPMP will be made after that process is completed. The key priorities were to be reviewed in January and any changes reflected in the AMP.

Summary Notes and Acronyms

Acronyms

APR – A Promise Renewed
APWG - Adolescent Policy Working Group
BOS - Business Operations Strategy
CCRC - Caribbean Child Research Conference
CFS – Child-friendly Schools
CHOICE – Caring, Healthy ...
CO – Country Office
CP – Country Programme
CPD – Child Protection Database
CPDWG - Child Protection Database Working Group
CRC – Convention on the Rights of the Child
DCT – Direct Cash Transfer HACT - Harmonized Approach to Cash Transfer
IMEP - Monitoring and Evaluation Plan
IMF – International Monetary Fund
ICT – Information and communication technology
JCC – Joint Consultative Committee
JSCLC – Jamaica Survey of Living Conditions
KAPB- Knowledge, Attitudes, Practices and Behaviours
M&E – Monitoring and Evaluation
MDAs – Ministries, Departments and Agencies
MDG – Millennium Development Goal
MTCT – Mother-to-child transmission (of HIV)
MTF - Medium-term Framework
MTR – Mid-term Review
NCYD - National Centre for Youth Development
ODPEM - Office of Disaster Preparedness and Emergency Management
OIA - The Office of Internal Audit
### Document Centre

#### Evaluation

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