



JAMAICA FAMILY
PLANNING ASSOCIATION

Since 1957 – a trusted provider of sexual and reproductive healthcare and advocate for sexual rights

ANNUAL REPORT
REPORT TO THE 2020 ANNUAL GENERAL MEETING

AUGUST 19, 2021

Preamble

Founded in 1957, the Jamaica Family Planning Association (JFPA) is the oldest provider of sexual and reproductive health services in Jamaica.

JFPA is an approved charitable organisation, registered under Section 2 and Section 17 of the Charities Act 2013 of Jamaica and a member of the International Planned Parenthood Federation.

The JFPA collaborates with the Jamaican government, as well as regional and international partners and funding agencies to inspire, resource and empower volunteers and voluntary organisations across Jamaica.

MISSION

To respond to the need and demand for family planning and reproductive health services for adolescents, women and men, in particular those under-served in rural and urban areas, working in partnership with the Government of Jamaica and all interested non-government agencies, in order to achieve a better quality of life for all.

GOVERNANCE (2020)

FOUNDERS:

Drs. Lenworth Jacobs and Beth Jacobs

DIRECTOR EMERITUS

Dr. Hugh Wynter, O.J, C.D., J.P.

BOARD OF DIRECTORS

President - Shakira Maxwell,

Vice President - Joan Stephen

Abigail Creighton

Derven Patrick

Pauline Pink- Bond

Cynthia Pitter

Secretary- Christopher Harper

Chief Executive Officer- Pauline Russell-Brown

Table of Contents

Preamble.....	1
GOVERNANCE (2020).....	2
MESSAGE FROM THE PRESIDENT.....	4
REPORT TO THE ANNUAL GENERAL MEETING OF THE ASSOCIATION.....	5
Introduction	5
Performance	5
Outcome 3: Services - Service Delivery (2019/2020).....	5
Outcome 1: Advocacy	6
Outcome 2: Comprehensive Sexuality Education (CSE).....	8
Outcome 4: Accountability	9
Other Major Achievements.....	10
Communication and Marketing	10
Human Resources	11
Staff Development	11
Expansion of Services.....	12
Fundraising.....	12
Competitive bids	12
<i>Waterford Women’s Boost Initiative (October 2020-April 2021)</i>	12
Non-competitive Small Grants.....	13
Partnerships	17
Plans and Projections.....	17
Condolences.....	18

MESSAGE FROM THE PRESIDENT

Dear Members,

I bring warm greetings on behalf of the Board of Directors at this our 63rd Annual General Meeting.

The past year has been one of unprecedented challenges for both the organization and indeed the world. The difficulties brought forth by the global pandemic have tested many, especially those who work in the health care sector. They have been foremost on the front line for over a year and a half now, providing support to those in need and saving lives. We owe them a debt of gratitude that can never be repaid.

At the organization level FAMPLAN has also seen major changes. With the decision by the International Planned Parenthood Federation (IPPF) Western Hemispheric Region (WHR) IPPF-WHR to separate from IPPF Global, the Board was asked to decide whether to stay part of IPPF-WHR or to remain part of the Global federation. The decision was by no means easy since it had implications for funding, operations and our reporting structure. After several days of consultation and deliberations and following a review of the ample supply of documents provided to us, the Board voted unanimously to remain a part of Global. We did this cognizant of the vision of our pioneers, Lenworth and Beth Jacobs and what they struggled to build in the form of FAMPLAN. As one of the long serving Non-Governmental Organizations in Jamaica dedicated to providing comprehensive and affordable sexual and reproductive health services to the most vulnerable in our society the decision was made in the best interest of the men, women and children that we serve.

The transition to the new structure was long and tedious. I wish to extend the sincere appreciation of the Board to our hard-working Chief Executive Officer, Pauline Russell-Brown who guided the team throughout the process. She often times went above and beyond the call of duty to ensure that the operations of FAMPLAN were minimally affected. I would also like to applaud each and every staff member in the organization who continues to give their all to provide services to Jamaicans from every walk of life. They are the heroes and heroines of this past year and a half. Our clinics remained opened, we continued to serve our clients and no one was left behind. They have ensured that we have been able to *“Overcome the Challenges of Change”*.

As we move forward, the organization will continue to provide a strong level of advocacy, give quality service and engage in research which impacts lives. I thank you all for your support and look forward to your continued assistance as we strive to make sexual and reproductive health a top priority for all.

Shakira Maxwell
President
Board of Directors

REPORT TO THE ANNUAL GENERAL MEETING OF THE ASSOCIATION

Introduction

The Annual General Meeting for 2019 was not held due to a combination of personnel that delayed the audit and the occurrence of the COVID-19 epidemic. This report, therefore, covers the 2019/2020 performance of the Association under the 4 IPPF outcomes – Outcome 3: Services; Outcome 1: Advocacy and Outcome 2: CSE and Outcome 4: Accountability.

Performance

Outcome 3: Services - Service Delivery (2019/2020)

The Association provides SRH services through 2 static clinics, a small cadre of CBD agents, doctors who register in the Associated Clinic programme and Pop Up Clinics (Outreach) organised by partners. Table 1 shows service delivery points (SDP) operated by the Association in 2019 and 2020.

Channels / Period	2019	2020
CBD	4	4
Outreach	4	2
Static Clinics	2	2
Associated Clinics	5	10
Total	15	18

The Associated Clinic programme – the Association’s initiative to supply private sector gynaecologists island-wide with Long Acting Reversible Contraceptives (LARC), was continued in 2019 and 2020.

In 2019, the Association committed to participate in 4 health fairs/Pop Up clinics. Only two PopUp clinics were conducted in 2020. One was scaled down because of the Corona outbreak. Breast cancer screening was the only service offered at that event.

Channels / Period	2019	2020
Mobile/Outreach	2,186	157
Static Clinics (incl CBD)	106,124	73,572
Total	108,310	73,729

Static clinics deliver a comprehensive range of services that include: ante-natal, post-natal, child health, contraceptives, HIV/STI testing and counselling, immunizations for children and adults, breast cancer screening and DNA testing. Each of these services includes education and counselling with referral as indicated.

A total of 108,310 services were delivered in 2019 compared to 73,719 in 2020.

10,538 SRH clients were seen in 2019 compared with 12,897 in 2020.

Outcome 1: Advocacy

JFPA Advocacy Efforts: 2019-2020

Imagine a world where you are free to make your own decision or choice regarding your sexual and reproductive health. The right to life, liberty, right to health care and information, or simply the right to not feel subjected to stigma or discrimination when seeking to access health etc. Well, this has been the request of advocates since 1994 when SRHR was recognized as human RIGHTS at the International Conference on Population and Development.

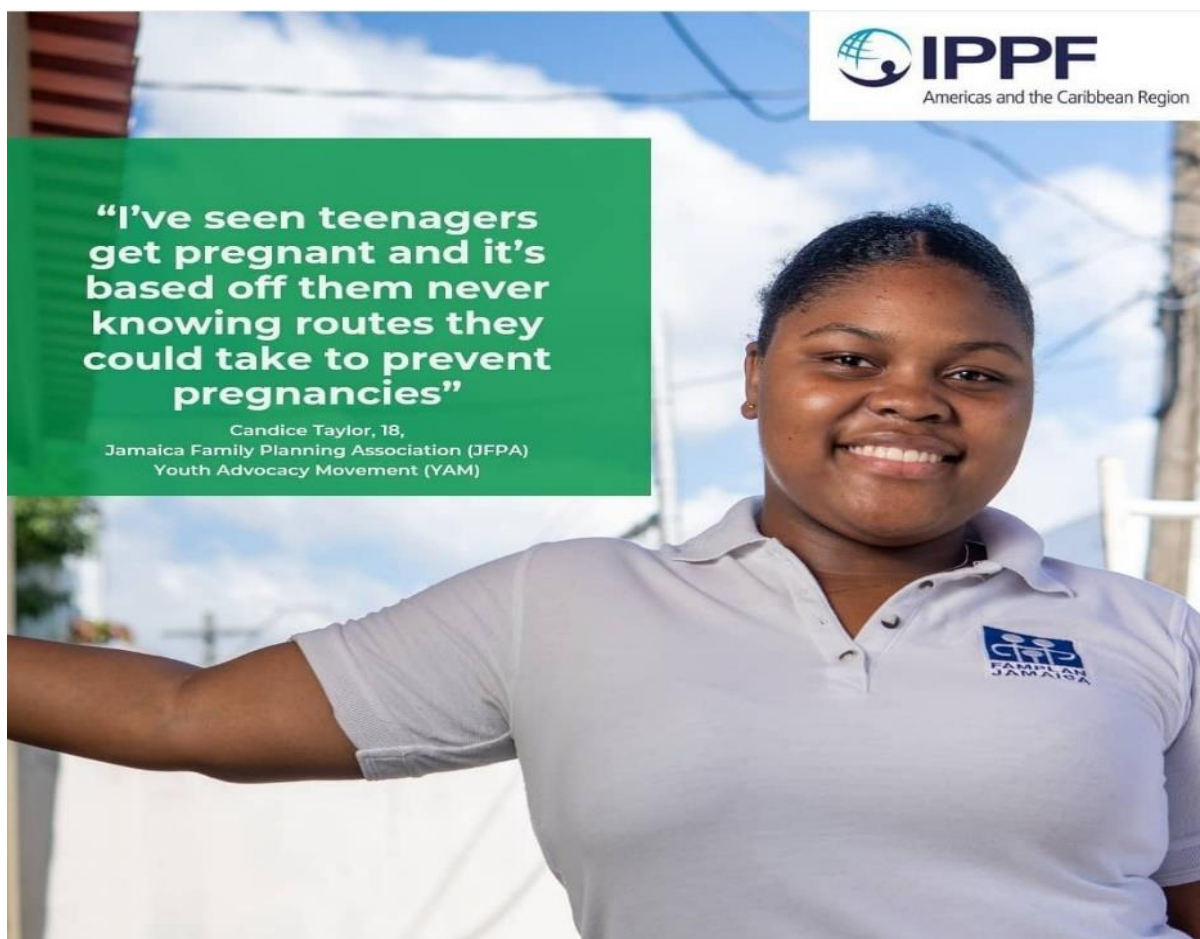
Yet, 27 years later, we continue to experience the same issues and roadblocks in the advancement of SRHR. Nevertheless, the advocates of JFPA continue to work assiduously as they believe that with national legislative change and greater accountability comes a more equitable and just country whereby the sexual and reproductive health and rights of each individual are acknowledged.

Youth Advocacy Movement (YAM)

Advocacy is one of the key pillars that drives the work of JFPA. Therefore, individuals affiliated with the entity who possess a passion for advocacy are often engaged in various forms of capacity-building training to strengthen their skills to become more effective advocates of change. Members of the Youth Advocacy Movement (YAM) and other staff have been exposed to such training to ensure that they are capable to carry out advocacy work in various spaces targeting different stakeholders.

Since 2019, the Association has identified and facilitated opportunities for youth advocates to receive training in key areas such as comprehensive sexuality education, HIV/PITC Testing and Counselling, HIV Peer Navigation, Gender-based violence, and other forms of violence, patient rights and responsibility, human rights etc. These training sessions were held nationally and regionally.

Finally, members of the group were featured by an IPPF commissioning assignment undertaken in November 2020. This helped to highlight the great work being done by YAM members at the national level.



Universal Periodic Review

The Universal Periodic Review (UPR) is a process facilitated by the Human Rights Council (HRC) aimed at improving the human rights situation nationally 193 United Nations (UN) Member States. JFPA actively participated in the 3rd review cycle of Jamaica. A ¹written statement/ report and video presentation was submitted to the HRC and shared with other member states and the Government of Jamaica. The submission highlighted areas such as:

1. Comprehensive Sexuality Education and Young People’s Access to Contraceptive Commodities
2. Right to freedom from Gender-Based Violence in all its forms
3. Negative implications of COVID-19 on the lives of women and girls.

Recommendations to the GOJ were also captured in the report.

We are grateful to the IPPF Advocacy team that assisted us through the intense advocacy process.

¹ <https://uprdoc.ohchr.org/uprweb/downloadfile.aspx?filename=7976&file=EnglishTranslation>



Outcome 2: Comprehensive Sexuality Education (CSE)

Comprehensive Sexuality Education: No face-to-face CSE sessions were conducted in 2020. Plans to implement CSE in 2020 were aborted due to COVID-19. YAM was able to partner with the St. Mary Youth Information Centre to conduct a Virtual Empowerment Session on May 28, 2021. The discussion focused on Sexual and Reproductive Health and Rights issues affecting young people. Of the 29 participants, 16 were attached to an educational institution. The panel consisted of 2 YAM members and a YAM graduate.

Photo: Virtual Empowerment session facilitated by YAM members

In lieu of face-to-face contact, the Association used social media to provide SRHR information and education. The Association collaborated with UNFPA to post messages on GBV and COVID-19 on our social media pages. UNFPA also provided financial resources that enabled the development of SRH messages that were posted on our social media pages.

The Association was contracted by Caribbean Right Here Right Now (CRHRN) to develop a CSE Handbook. The final draft Handbook was submitted. The Handbook served a very valuable resource for CRHRN members who participated in webinars in the Regional Youth Conference in July 2020 and in the Global Youth Festival, December 1-4, 2020, the latter, convened to mark the end of the Right Here Right Now Project.

Outcome 4: Accountability

Financial Performance (2019/2020)

The financial audit for 2019 was delayed. However, that audit was completed in March 2020 ahead of the audit for 2020. Data reported here from those respective audits.

Revenue from all sources in 2019 was JA\$ 47,922,658 and expenditure totaled JA\$ 42,079,808. Revenue from all sources in 2020 was JA\$ 36,879,728 – a decrease of JA \$11,042,930 or 23.04%. Expenditure for 2020 was lower than for 2019 (JA\$ 30,653,384) – a 27.15% decrease.

The Association relies on three main sources of income – i) a core grant from IPPF; ii) sale of SRH services including sale of contraceptives, and property rental; and iii) grants from international or local entities. The latter are generally considered restricted funds - available to conduct specific projects/activities. Core funds and revenue from sale of services and rental are considered unrestricted funds. Changes in fund balances for restricted and unrestricted funds for 2019 and 2020 are shown in Table 2.

Table 2: Changes in Fund Balances 2019, 2020

	Restricted (JA\$)	Unrestricted (JA\$)	Total
Balance at 31 December 2018	1,972,184	5,011,207	6,983,391
Surplus	--	5,842,850	5,842,850
Balance at 31 December 2019	1,972,184	10,854,057	12,826,241
Surplus	--	6,226,344	6,226,344
Balance at 31 December 2020	1,972,184	17,080,401	19,052,585

Source: Financial Statements 31 December 2019; Financial Statements 31 December 2020.

Other Major Achievements

In 2019, we had identified four growth pillars for the Association [Communication and Marketing, Human Resources Management (Staff, Volunteers, Membership and Youth), Service Expansion and Governance] and argued that we could achieve a strong sustainable SRHR programme if we were successful in these four areas. In the period since 2019 we have been relatively successful in continuing to move towards a strong and sustainable Association.

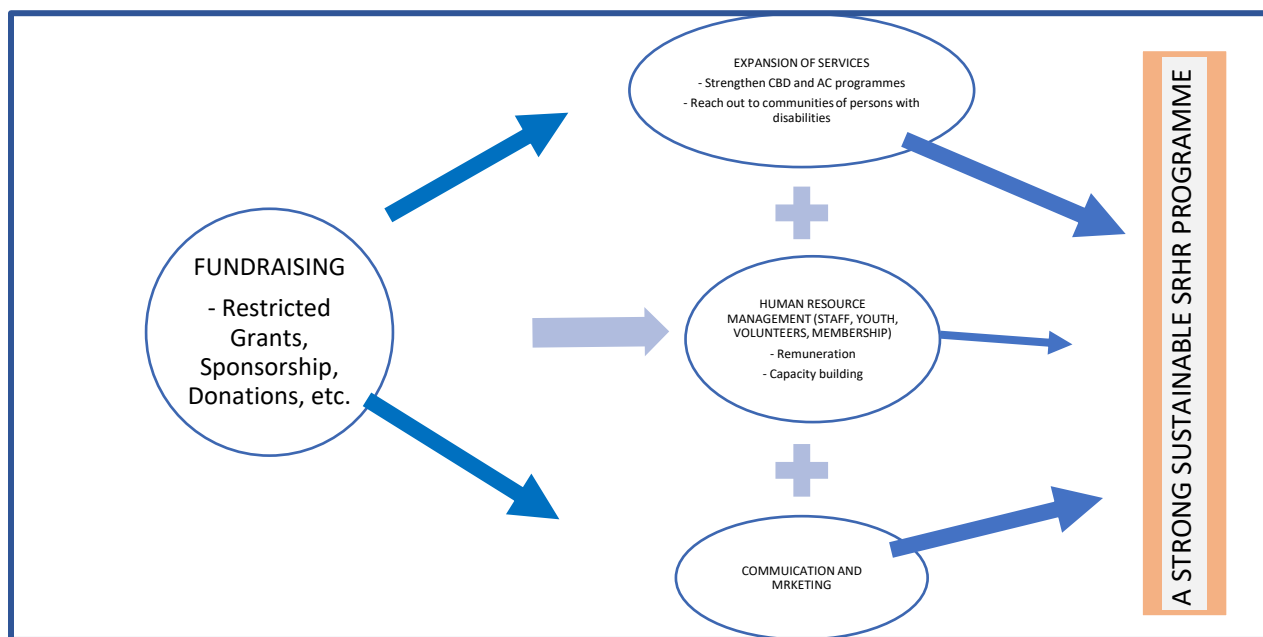


Figure 2: Proposed Pillars of Growth for JFPA in 2019-2021

Communication and Marketing

Guided by the recommendations from the communication consultancy commissioned in 2018² the Association engaged in a rebranding exercise. The logo was refreshed as recommended.



We also set about to help the general public differentiate between the NFPB (The National Family Planning Board) and the JFPA (Jamaica Family Planning Association). In the process, in 2020, we launched a website www.Famplanjamaica.org; and have reactivated our Facebook, Twitter and Instagram accounts.

Clients are using these platforms to communicate with the Association - requesting information on products and services. New clients have been identified through these sites/pages. The sites remain active and are important means of engaging with the wider public.

² The consultant's report was presented at the 2018 AGM.

Human Resources

Staffing: Staff separation in 2019 and 2020 was significantly lower than in 2018. The Association started 2019, with a complement of 9 full time staff – a CEO, an Executive Administrator/Youth Officer, Administrative Accountant, and one Clinic Administrator, a trained Nurse Midwife and one Office Attendant in each clinic.

The Clinic Administrator for the BJC resigned in 2019 and the Office attendant was terminated. Both positions have been filled and a sessional nurse midwife was added to the clinical team at BJC.

Three staff changes occurred in 2020. At the end of 2020, the contract for the Administrative Accountant was not renewed and the office attendant at LJC resigned to take care for family-related matters. Both positions have been filled. A part-time GBV counsellor position was created in 2020 through support from the UWI Access to Justice and Rule of Law Project.

After 40 years of voluntary service to the Association at the BJC, Dr. Stewart Mc Koy handed over to a younger female doctor – Dr. Jeneen Matthews. We wish to sincerely thank Dr. Mc Koy for his many years of service to the Association. Thanks also to Dr. Reid for his years of support to the care of clients at the LJC.

Finally, special thanks to staff at both clinics for their committed service over the period 2019-2020 – especially during the period since March 2020.

Staff Development

During 2019 and 2020, six of the Association’s fulltime staff and two (part-time/sessional) staff benefited from local (in-house) and international human resource capacity development opportunities. We highlight a few here:

- National Family Planning Board
 - Training in Provider Initiated HIV/Syphilis Testing and Counselling (PITC) - 2 staff members
 - Maternal Risk Communication - 2 nurses
 - Training as Peer Navigators – 2 staff members
- WINROCK – Training for nursing staff
 - Child trafficking – 3 staff
- Rise Life Management Services
 - Project management training (2 staff, 5 YAM members and volunteers)

THANK YOU

We wish to express our thanks to the following for supporting the training for women registered for the WWBI.

- National Family Planning Board
- Our CSO partners – Children First, Eve for Life and Jamaica AIDS Support for Life
- The two consultants who assisted with the Business Development and Social Media Marketing components of the training
- The Principal and administrative staff of the Waterford High School for allowing us to use the Dome – perfect space for enabling physical distancing

Expansion of Services

The CBD programme has 3 agents attached the BJC and one attached to LJC. Plans to expand the CBD programme and introduce programmes for persons with disabilities and men were stymied due to the COVID-19 pandemic. These areas of service expansion remain priorities for the Association.

Fundraising

The Association was able during the reporting period to secure funding through; i) competitive bids; ii) small grant support from international and regional entities; and iii) from donations of cash and kind.

Competitive bids

1. The University of the West Indies/European Union Access to Justice and Rule of Law Project
2. RISE Life Management Services /European Union Civil Society Boost Initiative 2

UWI/EU Gender-Based Violence Project (September 2020 – March 2021)

Funds from this project enabled the creation of a counselling room, hiring of a part-time counsellor and the production of GBV-related promotional and IEC material.

Waterford Women's Boost Initiative (October 2020-April 2021)

This project under the EU Rise Life Management Civil Society Boost Initiative² allowed the Association to train 50 women, aged 25-39 years, from the Waterford and neighbouring communities in St. Catherine in SRHR and GBV. 25 of these women also benefited from training in Business Development and Social Media Marketing. 17 women received small grants to start a new business or expand their existing business.

Between November 2020 and January 2021, five 2-day sexual and reproductive health and rights (SRHR) and gender-based violence (GBV) sessions were conducted with women aged 25-39 years resident in the Waterford and neighbouring communities of St. Catherine parish. These sessions were followed in February and March by two 2-day Business Development (BD) and Social Media Marketing Development (SMMD) Training sessions conducted with a subset of women from the original group who were interested in starting their own business or expanding their existing businesses.

By the end of March 2021, 17 the 25 (68%) women who had registered for BDT had completed their business plans with budgets and therefore qualified for financial support from the project.

Non-competitive Small Grants

The Association received financial support from the United Nations Population Fund (UNFPA); the Coalition for Vulnerable Communities (CVC) POP Campaign and the AIDS Health Care Foundation to provide PPE for our clinics and partners.



With UNFPA support, we were able to install a hand washing station in each clinic and to pay the salary of the sessional nurse based at the BJC.

A grant from the Caribbean Right Here Right Now (CRHRN) enabled the Association to provide no-perishable items to vulnerable youth (under 30 years). Twenty-seven packages were distributed to youth in 5 parishes – St. Ann, Clarendon, St Catherine, Kingston and St Andrew.

Photo: Packages with partners' logos. Credit: Jamaica Family Planning Association 2020



Photo: JFPA's Youth Officer presenting the recipient with his packages. Credit: Jamaica Family Planning Association 2020



Photo: Sharing masks, face shields and sanitors with CBD agent in St. Ann. Credit: Jamaica Family Planning Association 2020



Photo: Distributing masks, face shields and sanitising liquid to CBD agent in St. Ann and clinic staff in Kingston. Credit: JFPA 2020





A US-based benefactor who wishes to remain anonymous donated a hand held doppler to the Association. The CEO handed over the item to Clinic Nurse Brown at LJC.

Photo: Credit Jamaica Family Planning Association, 2020.

Governance

Three persons were coopted to the Board of Directors in the 2019/2020 period to fill the following slots – Youth Representative, Communication Advisor and Marketing Advisor. It is expected they persons will be nominated to these positions at the next Annual General Meeting.

Partnerships

JFPA strongly supports collaboration amongst organisations - CSO, government entities, FBO, private sector, CBO, etc. We believe that a more unified voice will reap greater advocacy wins. One such collaboration included our work with a consortium of organizations for the Maternal, Neonatal and Infant Health project which focused primarily on Patient Rights and Responsibilities when accessing healthcare. Materials produced by JFPA from this project were later used to educate the wider population and users of our clinic facilities.

In conclusion, although the organization has limited human resources, we at JFPA will continue to collaborate with partners to carry out advocacy work around SRHR.

Plans and Projections

2020 was a year of significant change for the Association. After months of debate, discussion and deliberation, the Board of Directors took the decision to separate from the Western Hemisphere Region (WHR), which had itself separated from the parent body, and to remain with the parent body (IPPF). By so doing, JFPA joins 9 other Member Associations in the Latin America and

Caribbean region and the 12 countries affiliated with the Caribbean Family Planning Affiliation (CFPA) which now report to the Americas and the Caribbean Regional Office (ACRO) – the regional office in Bogota, Colombia and Port of Spain, Trinidad and Tobago.

One of the more significant changes resulting from the shift in relationship is that, starting in 2022, Member Associations will engage in 3-year planning rather than one year planning. 2022 is the last year in which one-year plans will be submitted and is being used as the test year for the new business planning approach. Drafting of the 2022 business plan is on-going.

Condolences



The Association lost one of its committed volunteers in 2020. Ramone Walters was a former member of the YAM in St. Ann. After graduating from YAM, he continued to support the Association's outreach work. He will be missed. RIP Ramone