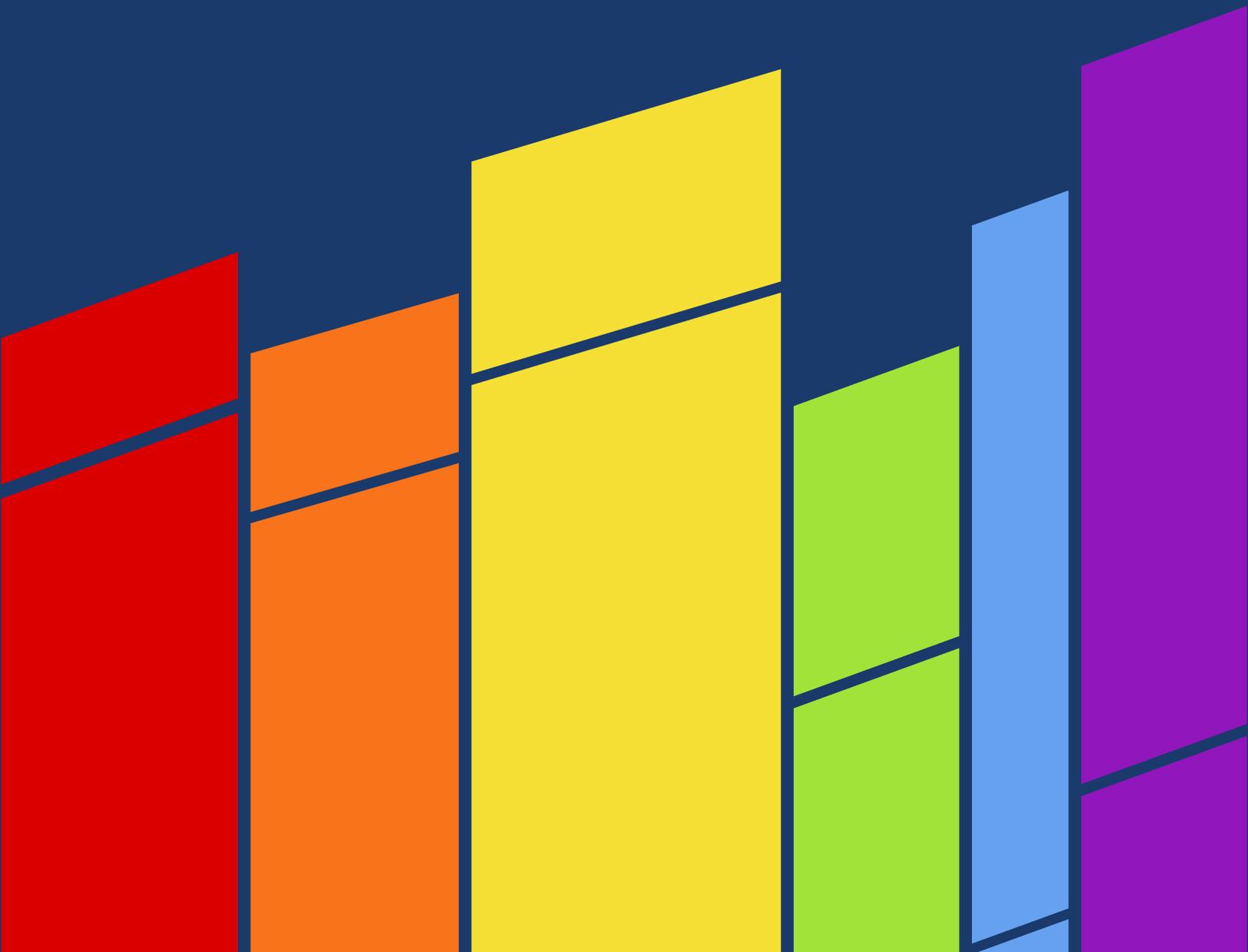


National
Dialogue on
**Human Rights
in Jamaica**





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Executive Summary

J-FLAG, in partnership with the UNDP's Regional Hub in Panama and with support from USAID, hosted a National Dialogue on Human Rights in Jamaica on September 23 - 24, 2020 via the video-conferencing platform, Zoom. The National Dialogue, under the Being LGBTI in the Caribbean (BLIC) project was a means of collective deliberation on key issues essential to progress related to:

- a. advancing the social inclusion and promoting the effective access of LGBTI persons to all human rights
- b. critical actions necessary to ensure progress in agreed prioritized areas.

The objectives of the National Dialogue were to:

- facilitate guided interactions between national stakeholders, including academia, government representatives and civil society members
- provide a space to integrate lived experiences and technical knowledge into the development of inclusive public policies (academia, government, civil society organizations)
- set incentives and build political support for government activities related to LGBTI inclusion

- support the development of a trust-relationship between government and civil society actors
- come to an agreement on a Local Action Plan for LGBTI Integration
- provide inputs in the drafting of each BEING LGBTI report

There was a wide cross section of panellists and participants, spanning government ministries, departments and agencies, civil society, international development partners, academia, and members of the LGBT community. Government representatives included persons from the Ministry of Health & Wellness, the Ministry of Education, Youth & Information, the Ministry of Justice, and the Office of the Public Defender. Civil society organisations included J-FLAG, WE-Change, TransWave, Caribbean Vulnerable Communities Coalition, Jamaicans for Justice, Jamaica Mental Health Advocacy Network, Equality Youth Jamaica, and the Jamaica Youth Advocacy Network. The Caribbean Policy Research Institute (CaPRI), UNICEF, and UNDP were also represented on panels.

In order to increase openness in the discussions, the Chatham House Rule was observed throughout the proceedings of the session. Under the Chatham House Rule, anyone who comes to a meeting is free to use information from the discussion, but is not allowed to reveal who made any comment.

Four thematic areas were covered in the dialogue – Health & Wellness; Creating Safe Spaces in Education; Access to Justice; and Inclusion & Integration: Vision 2030.

Health & Wellness Panel

The health and wellness panel will sought to outline the realities experienced by LGBT Jamaican citizens in accessing healthcare as well as identify gaps in addressing their healthcare needs. Gaps that limited and impacted LGBT community members' access to adequate and responsive healthcare were identified. These included a lack of understanding of LGBT issues by healthcare workers, who therefore could not offer the kind of treatment and care needed; as well as stigma and discrimination within facilities. A recommendation was made that training be included in the curriculum of training institutions.

Mental health care was a major challenge for the LGBT community. Institutional challenges were raised, including the inability of healthcare workers to Adequately deal with members of the LGBT community. Cost was a major barrier to accessing care. The scarcity of readily available, affordable services was among institutional barriers to mental health care. Geography was also identified as a barrier as most health facilities were located in Kingston, Ocho Rios, and Montego Bay. There is therefore limited spread of mental health services across the island.

Additionally, a major challenge observed in implementing certain programmes or campaigns was the insufficient capacity and lack of funding. Most mental health organizations were non-profit and lacked funding. While the situation is improving somewhat, there is still much to be achieved, but it requires giving the issue sufficient attention.

The capacity of the Mental Health Unit was limited in its capacity and therefore partnerships with NGOs would be key to effectively pushing the agenda. The information was also shared that the Ministry was currently operating under an IDB loan and a mental health plan had been developed. It was suggested that LGBT and NGOs working in the area of mental health access and review that document which laid out the plan for the next three to four years.

Creating Safe Spaces in Education

Legislative and other barriers impact negatively on LGBT citizens' ability to access and afford goods and services that are critical to their physical, mental and emotional health and wellbeing. As a result, LGBT citizens do not feel safe and protected. There is a need for policies that explicitly recognize and deal with how homophobia and transphobia affects a child's development. Families need support in understanding and providing for their LGBT children. Young LGBT citizens becoming homeless is concerning, and the mental, emotional and physical health of LGBT students and their vulnerabilities need to be highlighted and addressed.

LGBT students at the secondary level would be reluctant to make themselves visible, as there was no consideration for their well-being. They experienced bullying as well as other psychological issues such as suicide, isolation, and depression. The suggestion was made that there should be a system for catering to LGBT in the school system. Transgender individuals were particularly challenged, as their safety is a major issue.

The Ministry of Education, Youth & Information noted a number of ways that the issue of bullying was being addressed. The MOEYI notes that much of the discrimination against LGBT children came from the institution itself, which might be identified as the fourth

player in the bullying cycle. The institution was seen to be responsible for training staff to recognise LGBT challenges.

It was suggested that a way of supporting young people was to provide opportunities to reach out through avenues from which they can get guidance and information. UNICEF, along with partners, was working on establishing a message-based health help line. Messages would be answered by individuals who had received training and who could guide youth to available services. UNICEF also partnered with the MOHW to create a Teen Hub - a space that was adolescent friendly - in the HWT Transportation Centre. That model would be replicated in other parishes with St Thomas being identified as the location of the next teen hub. Ways had to be found to assist children and to create spaces in which their voices could be heard without fear of censorship.

There was a recommendation for the LGBT advocates to review the first draft of the safe school policy and provide recommendations that would address the challenges of the LGBT community. Other policies being worked on currently were the bullying policy and the policy on prevention of child trafficking. It was critical for the LGBT advocates to make their contribution during the consultation phase.

The Jamaica Teaching Council was another entity to be engaged in terms of diversity training. The Anti Bullying initiative would be hosting some events in October that might

provide platform for advocates. UNICEF was collaborating with the MOEYI in rolling out the Schoolwide Positive Behaviour and Support programme which involved capacity building, awareness raising within the school community about different core values of respect. The framework has worked been evaluated locally and internationally and an effort was now being made to scale it up within the system - student, safety, diversity acceptance, etc.

Access to Justice

This panel sought to identify the realities experienced by LGBT Jamaicans when they try to navigate the justice system as well as document the policy and legal gaps that need to be addressed.

A member of the community shared her experience after coming in conflict with the law. This was used as a launchpad to explore the many issues LGBT people face when they have to interface with the justice system.

Jamaicans for Justice is doing some critical work in this area, including providing pro bono services for members of the community, sensitising police, and also embarking on a sensitisation training programme for court personnel.

The Office of the Public Defender (OPD) was described as being unique as it was in a position to review legislation and

make recommendations to Parliament for amendment, replacement or repeal. The organisation also investigates actions of state that infringe on human rights.. The OPD was willing and able to offer services to help the LGBTQ community in Jamaica to ensure they had full and equal access to justice. There was, however, an unwillingness for members of the community to come forward. While understandable, that impacts on whether the OPD can pursue the matter, as to provide assistance to victims, divulgence of full information is required.

To make the LGBTQ community more comfortable in making complaints and seeking redress, empowerment of community members needed. The community must know their rights and have confidence in the system. It was important to give the community legal assistance. It was acknowledged that most matters were dealt with in open court, which was intimidating. It would take confidence and both legal and psychological support. It would require time. In addition, continued training of justice system personnel re sensitivity of the community had to be pursued. It was recognised to be a personal decision as to how far one was prepared to go in pursuing individual justice.

Jamaicans for Justice and the Office of the Public defender identified areas they can collaborate. JFJ's educational resources would boost the work of the OPD, and the OPD carried out human rights training among police in western Jamaica. It was suggested that training should begin at the Police Training Academy and within the Jamaica

Defence Force (JDF). The Public Defender was said to welcome partnerships and this was an excellent time for such an approach to be made.

When asked about the Ministry of Justice's position on anti-discrimination legislation, the representative noted that there was no directive or policy in that regard at the time.

Inclusion and Integration: Vision 2030 Panel

The panel sought to identify opportunities in Jamaica's national development goals for greater inclusion and integration of the LGBT community within same.

Education was needed to build awareness on the LGBT community to displace the stereotypes and misunderstanding around it. It was necessary also to understand that infringements on the right of the most marginalised represented an infringement on the rights of all. The legislative reforms that followed on greater awareness would ensure the inclusion of most marginalised, including the LGBT community, and that they were able to access the rights and privileges due to all citizens.

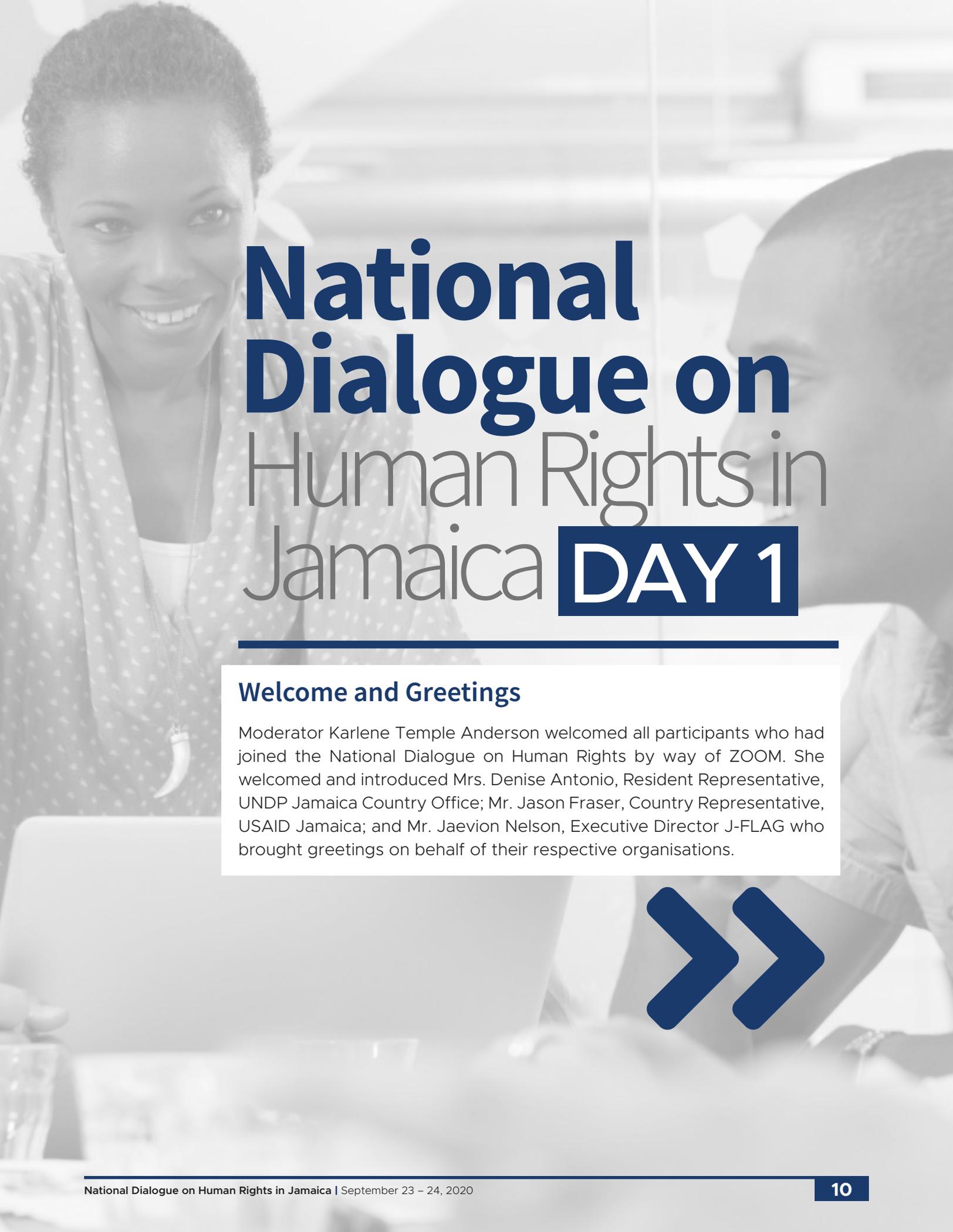
Public education should include training on sensitivity among policymakers and state stakeholders. A symbiotic relationship existed between human rights and development; therefore, a people-centred approach must be pursued. Post-independent Jamaica had to be guided by inclusiveness. It was necessary to understand: how LGBT people

fared in development priorities; how they are affected; what challenges they faced; how different categories of LGBT people managed in their daily lives and taking an intentional approach to addressing their needs. It was shared that the Caribbean Policy Research Institute (CAPRI) had done a study which showed the detrimental impact of discrimination on the economy.

Along with increased public education, we need to increase engagement of policymakers, duty bearers so they can understand that human rights are not special things but were fundamental, foundational building blocks for the development of the country. Consequently, greater support was needed for organisations such as J-FLAG, TransWave, and We-Change, etc. Advocates needed a better understanding of development priorities and how the United Nations and other international development organisations, for example, were supporting the development of Jamaica and how that knowledge can be used in the community's advocacy campaigns. LGBT organisations, typically, focus on a narrow set of policies and this approach needs to be broadened.

There were approximately one hundred and twenty-five (125) participants in total over the 2-day period.





National Dialogue on Human Rights in Jamaica **DAY 1**

Welcome and Greetings

Moderator Karlene Temple Anderson welcomed all participants who had joined the National Dialogue on Human Rights by way of ZOOM. She welcomed and introduced Mrs. Denise Antonio, Resident Representative, UNDP Jamaica Country Office; Mr. Jason Fraser, Country Representative, USAID Jamaica; and Mr. Jaevion Nelson, Executive Director J-FLAG who brought greetings on behalf of their respective organisations.





DENISE ANTONIO
Resident Representative,
UNDP Jamaica Country
Office

Mrs. Antonio noted that the UNDP was pleased to be partnering with J-FLAG in the staging of the National Dialogue on Human Rights in Jamaica. She noted that human rights are the birth right of every person and the observance of human rights was key to the development of all countries and their peoples. She observed that over the past year the LGBTI community had received increased attention in Latin America and the Caribbean. Despite efforts on the part of governments to increase human rights for all, LGBTI individuals continued to experience discrimination, stigma and violation of their human rights limiting access to basic social services. She noted that the Covid-19 pandemic had compounded vulnerabilities and caused further distress and displacement. She emphasized that inequality affected the achievement of all SDGs, particularly SDG 10 – reducing inequality – and SDG 16 – promoting peace, justice and strong institutions. She stressed that institutions could not be strong unless peace and justice are accessible to all Jamaicans. Mrs Antonio commended the Government of Jamaica for the strides made in ensuring that the rights of all Jamaicans are upheld and protected. She stated that the government’s involvement in the current dialogue signalled an awareness of the gaps that existed in the pursuit of human rights protection and shows the commitment of local policymakers to protect lives and livelihoods of all members of society.

Mrs. Antonio reiterated UNDP’s commitment to supporting the Government of Jamaica in the effort to leave no one behind. She added that the next two days would be a hallmark in the nation’s efforts in stimulating interest in localising diversity and social inclusion. The dialogue on human rights represented a key component of the “Being LGBTI in the Caribbean Project”. The project was funded by the USAID and implemented by the UNDP in partnership with regional civil society organisations. The discussion, she said, would be instrumental in providing data on the experiences of the LGBTI community. She hoped that the outcomes of the sessions would have far-reaching impact of the lives of the LGBTI community in Jamaica.

Mrs. Antonio commended USAID for committing the necessary funding to eligible CSOs for projects aligned to recommendations. She restated the UNDP’s commitment to strengthening partnerships with local and regional CSOs and international development partners to design flexible strategies to ease the challenges faced by the most vulnerable. This, she noted, was integral to Jamaica achieving its development goals of Vision 2030.

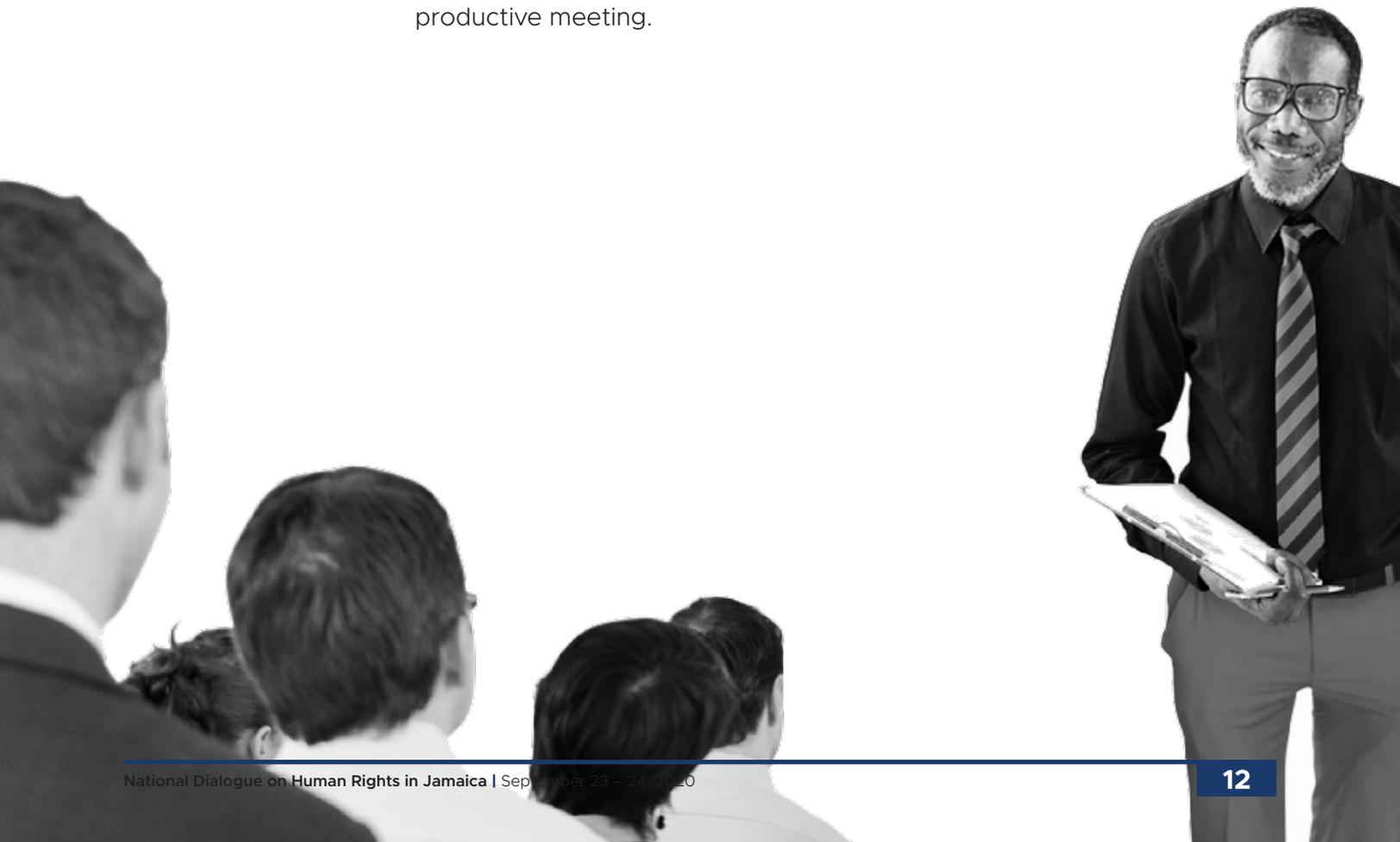


JASON FRASER
Country Representative,
USAID Jamaica

Mr. Fraser observed that this event marked the culmination of three years’ effort on the parts of the USAID, UNDP Jamaica Country Office, Equality for all Foundation and partnering LGBTI civil society organisations (CSOs). He noted that “Being LGBTI in the Caribbean” had made strides for the community of LGBTI regionally. The marginalisation and fear experienced over many decades had built up the resilience and determination of members of the community to work together to ensure that members of the community were free from discrimination and had the opportunity to realise their full potential.

The deliberations over the next two days, he noted, should facilitate a better understanding of Jamaica’s LGBTI community and the complexities of individual circumstances. He emphasised that it was critical for the plight of members of the community to be appreciated to know how best to alleviate the struggles being faced. The Covid-19 pandemic represented an unprecedented period of instability and uncertainty and had exacerbated the challenges already faced by vulnerable groups. It presented the opportunity to reconfigure strategies, programmes and policies that promote inclusion for all Jamaicans, he iterated.

He noted that some of the nation’s brightest were involved in the forum and would be putting forward ideas as to how to address this sensitive subject. He added that the presence of representatives from the government was encouraging and hoped that the engagement would lead to deepened collaboration in the future. He wished for a robust and productive meeting.





JAEVION NELSON
Executive Director,
J-FLAG

Mr. Nelson noted that human rights was the foundation of a just society and was represented in the constitution as being fundamental to the nation's development. He pointed to the symbiotic relationship between human rights and human development. He said the constitutional protection of human rights illustrates the importance for governance. He acknowledged that great strides had been made in terms of human rights. The stories of the abuse of power by the police had reduced and organisations such as INDECOM and Jamaicans for Justice were monitoring activities, resulting in some perpetrators being held accountable.

Mr. Nelson shared that 10 years ago, a forum such as this could not have been held. He noted that the LGBTI community existed totally outside of the purview of government and with little acknowledgement from anyone outside the HIV response unit. There was uncertainty, hesitation, fear and unwillingness. He shared that currently, J-FLAG is liaising with several ministries, departments and agencies, and there were many visible queer persons and allies in media and in communities. The community, he noted, was a far way from where it needed to be, but progress had been made. The current national dialogue in partnership with the UNDP and funded by the USAID with the participation of government and civil society was an example of how far the community had come. It demonstrated the willingness of more people to play a part in protecting the rights of the LGBT community, but that there is much to be done to make Jamaica "the place of choice to live, work, raise families and do business."

He said that the conversation over the next two days would explore the challenges relating to access to education and training and access to jobs and development. Ways would be identified to address these challenges. Mr. Nelson pointed to the fact that the pandemic had exposed the vulnerability of many Jamaicans and that the government had to do a better job of protecting the rights of the vulnerable including the LGBT community.

LGBT Community Surveys

The moderator presented summaries of surveys J-FLAG conducted with members of the LGBT community. This provided the audience with some context for the lived-realities of the community and an appreciation of how LGBT people are coping and the support they need in order to lead fulfilling lives.

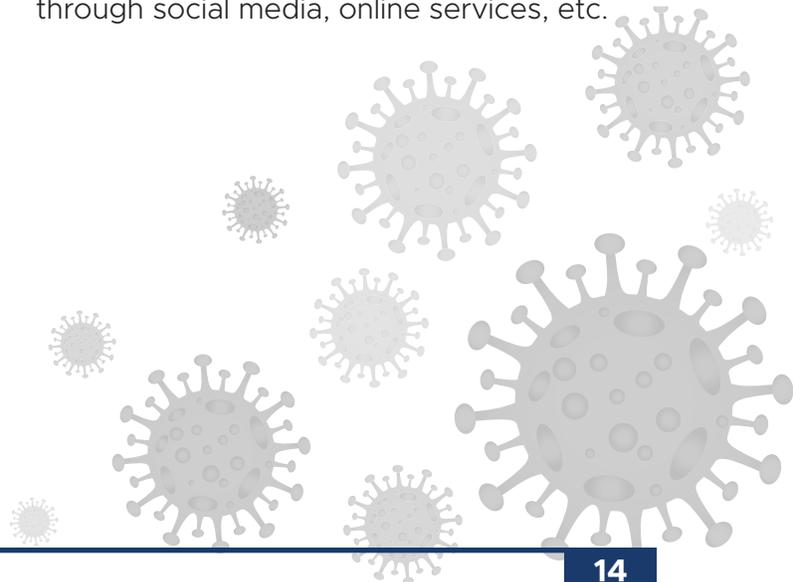
COVID-19 SURVEY

The LGBTQ community executed an online survey in April 2020 to identify the impact of the COVID-19 pandemic on the LGBTQ people in Jamaica. A total of 215 persons participated in the survey, with 163 (or 75.8%) of them answering all questions fully. The survey, launched on 13 April, ran until 1 May 2020. Most respondents were between 18 and 34 years and resided primarily in Kingston & St Andrew, St Catherine, and St James. The sexual orientation of most respondents was identified as gay, bisexual and lesbian: 36.15% gay, 24.88% lesbian, 22.07% bisexual, 23.03% trans-feminine, trans-masculine or non-binary, 34.80% were cis-men and 30.88% were cis-women, 11.27% used other gender identities.

Eighty-eight per cent (88%) of respondents indicated that COVID-19 had had a financial, emotional, mental or social impact on them. Most were not within the essential workers' labour force. Over 95 per cent indicated that they knew what to do in the event of encountering infected individuals. Sixty-five per cent indicated that they had not been seeking medical attention prior to the Covid-19 pandemic; 19.10% had sought mental health care, 13.5% HIV treatment and 6.5% hypertension and diabetes treatment.

In relation to the support currently required, responses included: someone to talk to, access to medical care, strategies to cope, and access to care packages. Most respondents had knowledge of the government's "We Care" programme and 28 per cent had benefitted under the programme. Approximately 18 per cent had either planned to apply or wanted to but did not know how, while about 25 per cent did not qualify. The rest said it was not applicable to them. 14.7 per cent admitted to needing assistance with completing the application process. In response to the question "How would you rate the government's handling of the Covid-19 situation" the average rating was 4 out of 5.

When asked how Equality Jamaica can better support you in this difficult time; responses included: provision of care packages, support through social media, online services, etc.



FINDINGS OF REPORTED CASES OF HUMAN RIGHTS VIOLATIONS BETWEEN JANUARY 2018 AND JULY 2020

There were 84 reported cases of human rights violations during the stated period: 38 cases of physical assault; 46 cases of verbal assault; 4 cases of cyberbullying; 21 cases of expulsion from home; 23 cases of threats and intimidation; 5 cases of mob attack; 8 cases of discrimination from police; 2 cases of employment discrimination; 1 case of attempted poisoning; 1 case of being buried alive.

Reported incidents to the police: Most LGBT Jamaican citizens did not report their last physical or sexual assault to the police. According to the 2016 Development Cost of Homophobia in the case of Jamaica, 51.3% of respondents had made no reports to the police. Reasons included: 41% did not think that the police would do anything; 31% thought the matter was too minor; 1 in 5 felt too embarrassed and did not want anyone to know; 14% feared reprisals from the offender; and 1 in 10 were discouraged from reporting the matter.

LGBT NEEDS ASSESSMENT SURVEY

The Needs Assessment Survey, conducted in 2019, targeted 301 LGBT citizens with the objective of identifying their needs as well as their ability to navigate and peacefully coexist in Jamaica, as well as the challenges being faced. It explored six main categories: life satisfaction; navigating spaces; health; relationships; professional experience; homelessness and displacement.

CATEGORIES	RESPONSES
Life Satisfaction	Many LGBT people were dissatisfied with their lives in Jamaica. The majority did not believe they would be able to meet life their goals or achieve their full potential. They felt that Jamaica was, however, moving in the right direction.
Navigating spaces	Most weren't comfortable being openly LGBT in Jamaica. Homophobia, transphobia, judgemental family members, fear for life and threats of and violence against bisexuality were factors that contributed to their discomfort. Those who coped pointed to strong family support and friendship.
Safety	LGBT felt safe only in their homes and LGBT entertainment spaces. Violence was still a major issue with which most respondents had some experience. Most common types of violence were threats and discrimination.
Health	LGBT individuals accessed health care primarily at private health care facilities where they were more comfortable sharing their gender identities. Participants were accessing mental health services from private counsellors and public services and through Jamaica AIDS Support for Life. Most had not had any barriers to access. For others, cost and judgement were the major barriers.
Relationships	Most respondents desired marriage and said they would be comfortable living with their partners but were uncomfortable with the idea of raising children with their partners. Many found it difficult to form healthy romantic relationships but had formed healthy friendships and felt a sense of belonging within the community.
Professional experience	Most respondents did not report workplace discrimination. Those who did, experienced verbal abuse and discrimination.
School	Most LGBT Jamaicans felt that the school curriculum did not address the needs of LGBT students. Some experienced bullying by their peers. Individuals in authority were generally unaware of the bullying and even when they were, were unlikely to help. Most LGBT students needed help.
Homelessness and displacement	Most of those experiencing homelessness had been put out of their homes because of their LGBT identity. Trans and nonbinary individuals were more likely to experience displacement than other members of the LGBT community. Most respondents did not feel comfortable in accessing non-LGBT shelters and felt that there should be dedicated shelters for LGBT people.

Most LGBT people were unable to meet their needs consistently without support. Proportionate, trans and non-binary individuals were less likely to be able to support themselves.

Panel 1:

Health and Wellness

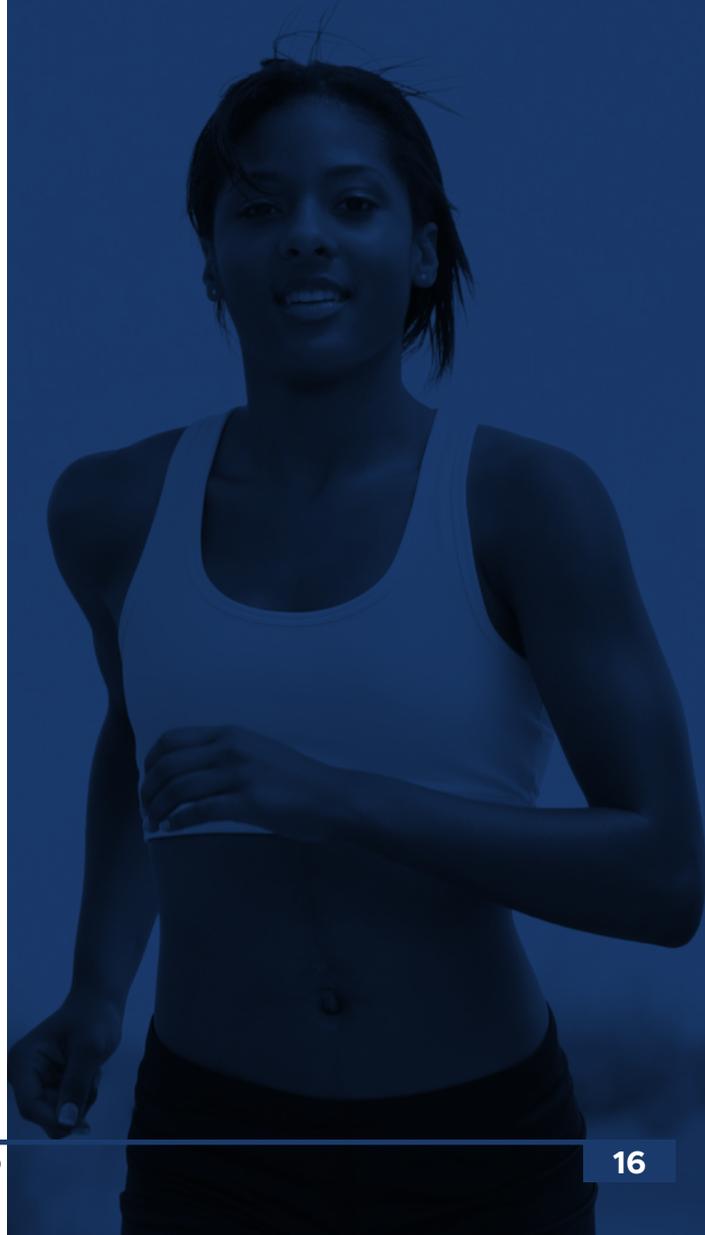
Context

The moderator provided the context of the ensuing panel discussion on health and wellness. It was noted that legislative and other barriers negatively impacted goods and services which were critical to the mental and physical well-being of LGBT community. She noted that LGBT citizens did not feel safe and protected and this was especially evident during the Covid-19 pandemic when additional support was required. Panellists would explore additional strategies to reduce the vulnerability of the LGBT community in Jamaica.

The moderator introduced the panellists, and they indicated their pleasure at participating in the dialogue.

WHAT WERE SOME OF THE GAPS IN HEALTH CARE PROVISION FOR LGBT POPULATION?

Gaps included a lack of understanding; some health care workers did not understand the experiences of the members of the population and, thus, they could not offer the type of treatment that the LGBT community required. The Ministry of Health and Wellness (MOHW), in recognition of this, had introduced the mental health gap training. The Sexually Transmitted Infections (STI) Unit





within the MOHW, in collaboration with the International Training and Education Center for Health (I-TECH) and the Pan American Health Organization (PAHO), established training sessions for medical doctors and other health care workers within the HIV sector to help them to better understand some of the issues that members of the population were experiencing. Health care professionals had to appreciate that patients came in with a long history of trauma, so all staff that are part of the treatment team (even the security guard) needed to treat patients with dignity and respect. Personal questions should be handled sensitively, and the space should provide the level of comfort that was conducive to building a rapport between health care giver and the patient and thus be able to provide the appropriate level of service. Clients have indicated that they had suffered discrimination from health care workers. Efforts were being made to reduce the incidence of discrimination.

Research had, indeed, revealed that health care professionals had not been adequately trained to deal with the sensitivities of the LGBT community, and this was a major gap. It was suggested that such training should be included in the curriculum of training institutions. Most LGBT persons shared that they were more comfortable accessing private care than through the public health system. The challenge arose because many members of the LGBT community could not afford private care but were unwilling to avail themselves of public clinics as they were judged and they did not feel comfortable enough to speak candidly about their sexual orientation.

WHAT ARE THE INSTITUTIONAL CHALLENGES IN ACCESSING MENTAL HEALTH CARE?

Challenges included the inability of healthcare workers to deal with members of the LGBT community. Cost was a major barrier to accessing care. The scarcity of readily available, affordable services was among institutional barriers to health care.

The public mental health system was said to be geared, primarily, towards managing psychiatric illnesses where patients required occasional check-ups and medication management but not regular talk therapy – ongoing weekly or bi-weekly sessions with therapists which most of the LGBT population needed. Geography was also identified as a barrier as most health facilities were located in Kingston, Ocho Rios and Montego Bay. There is limited spread of mental health facilities.

HOW HAD THE GOVERNMENT WORKED WITH THE COMMUNITY IN THE PAST? WHAT WERE OPPORTUNITIES FOR COLLABORATION ON HEALTH PROTECTION BEYOND HIV?

It was noted that the Ministry of Health and Wellness was aware of the importance of intervening at various levels and in moving forward to effectively manage mental health, they had to understand the lay of land. The point was made that if policies or legislation only recognised sex, there would be a challenge within the ministry in dealing with gender. There needed to be advocacy for policy and legislative changes which could impact service delivery. An understanding of the playing field was critical to determining the appropriate interventions at various levels.

The importance of pre-service training to facilitate sensitisation of trainees to provide graduates with basic knowledge on how to engage the LGBT population was highlighted. Hence, the need to engage the (UWI, and other health training institutions) in this regard. Continuous training was recommended for health care workers to help them to separate personal bias from the delivery of professional services. It was noted that through the HIV programme CSOs had worked with leadership in the health sector, including Professor (John Peter?) Figueroa & Dr. (Kevin) Harvey, to advocate for training of workers. It was observed that J-FLAG had been instrumental in helping to build the capacity of health care workers in terms of quality of service for the LGBT community. It was acknowledged that Jamaica's HIV Programme had moved the dial in terms of service offered to LGBT individuals but there was more to be done. Emphasis was placed on the need to establish a curriculum that included information on LGBT care.

The question was raised as to whether any of the surveys and any other documentation relating to the challenges of the LGBT community had been shared with the MOHW's directorate for their input and feedback. Sharing information was critical to understanding. Non-communicable diseases such as diabetes, asthma and hypertension were the big-ticket items of Jamaica's health burden. Consequently, the major focus would be on those areas when the MOHW crunched the numbers. It was critical, then, for advocates to bring LGBT-related issues to the attention of the directorate at the MOHW and to share their list of priorities. The directorate was generally responsive but there must be the recognition that LGBT issues were not in the top 10 list of issues that the MOHW had to deal with. The responsibility

was the community's advocates to push the agenda. MOHW interventions are now limited to the HIV issues. limits. It was exceedingly important to understand the advocacy role of civil society in moving the agenda ahead.

WHAT WERE SOME OF WAYS IN WHICH COUNSELLING WAS PROVIDED AND WHAT RESOURCES, BEYOND FINANCES, WERE REQUIRED?

J-FLAG had worked with the Mental Health Unit in training private practitioners to be more friendly to the community. Some training had also been implemented among psychologists in private health care. The recommendation made to revisit that initiative. A formal training programme should be formulated for all practitioners to ensure consistency across the board.

From the public sector perspective, it was suggested that ongoing training by J-FLAG was most important to keep pace with the high turnover of staff. It was recommended that J-FLAG reengage directorate of MOHW Working Group for Customer Service by resubmitting the proposal that had been sent previously. Trainer of trainers within the health care system to provide basic

customer service training including modules that addressed LGBT persons would go a long way to provide basic skills until more specialised training could be offered.

In conducting a session with a client, the first priority was to respect the client to communicate in a way that promoted a high level of comfort to encourage trust. At the beginning of a session it was important to build rapport. It was noted that an act as simple as recognising the client's gender identity by using the correct pronoun could enhance the level of comfort by demonstrating respect. Training manuals were important providing continuous training for private practitioners.

HOW DID THE MOHW SEE ITS RESPONSIBILITY RE RAISING PUBLIC AWARENESS ABOUT THE LGBT COMMUNITY TO ADDRESS FALSE NARRATIVES?

Currently, the Ministry's awareness was limited to the HIV space. It was, therefore, important to engage the MOHW at a higher level to move the dial. The HIV Unit had pushed the envelope as far as it could. The Unit had done some work in relation to vulnerabilities of and discrimination suffered by persons living with



HIV, which included some LGBT individuals. External advocacy was required to engage the policymakers.

A human rights media campaign was being implemented in the unit that dealt with Enabling environment and Human Rights. Much of the funding was tied to HIV, hence the importance of the advocacy to see how that can be broadened to address the wider LGBT community. The HIV tag currently dictated the agenda. It was emphasised that advocates liaised with other units, such as the Mental Health Unit, within MOHW.

The point was made that the buy-in of the directorate – ministers and permanent secretaries – was key. They had to be convinced to approve additional work.

There was the perception, also, that the wider community tended to shy away from human rights discussions because of absence of policies and regulatory framework. For example, the buggery law was still on the books. The question was raised as to whether the MOHW could assist the LGBT community in any direct way in relation to these policies. The issue was identified as getting to the point of having the legislation and policies. It was known what was necessary to help the LGBT community to feel safe, but unless certain policies were in place no progress could be made.

WHAT WERE KEY AREAS OF THE WORK OF MOHW THAT PRESENTED OPPORTUNITIES FOR THE LGBT?

The area of customer service and the way in which the community worked with the units that managed those processes. There was also the area of health services and those who developed services and programmes

related to quality of care. The Family Health Unit, whose mandate ranged from womb to the tomb, addressed all age groups and subgroups within the society was another unit that could be approached. The community should find ways of integrating LGBT issues in the major national surveys implemented by government agencies and departments such as the Jamaica Health and Lifestyle Surveys to generate data needed on the community. National surveys were key in collecting data on the LGBT community.

WHAT COULD BE DONE TO GET THE LEGISLATORS AND GOVERNMENT TO UNDERSTAND THAT THE LGBT COMMUNITY NEEDED TO BE RECOGNISED AS VULNERABLE CITIZENS AND SHOULD BE TREATED AS SUCH?

The importance of identifying allies and champions among directorate and policymakers was emphasized. J-FLAG was advised that it was now timely to resubmit their customer service proposal.

It was noted that outside of J-FLAG's work in the MOHW, Ministry of Youth and Ministry of National Security there had not been much diversity training, but the organisation was interested in working with policymakers.

WHAT WERE THE CHALLENGES BEING EXPERIENCED IN AREA OF MENTAL HEALTH TRAINING?

The Jamaica Mental Health Advocacy Network had supported some activities of the MOHW. The major challenges observed in implementing certain programmes or campaigns were ones of insufficient capacity

and lack of funding. Most mental health organizations were non-profit and so lacked funding. Also mental health was not given the attention deserved. While the situation was improving, there was still much to be achieved.

It was reiterated that the capacity of the Mental Health Unit was limited in its capacity and therefore partnerships with NGOs would be key to effectively pushing the agenda.

However, a meeting held at the MOHW, recently, showed that mental health was now being given priority by the Minister. The information was also shared that the Ministry was currently operating under an IDB loan and a mental health plan had been developed. It was suggested that LGBT and NGOs working in the area of mental health access and review that document which laid out the plan for the next three to four years.

Personal (verbatim) experience shared by a participant who suffered from clinical depression and bi-polar disorder.

The last two to three years have been difficult. My experience within the mental health system has been very bad. The experience in the hospital was garbage. I had two hours experience that was good in the last three to four years and she might have been part of the LGBTQ community. That was the only good experience that I had. It needs to be fixed. It needs, definitely needs to be fixed. I am imploring and I am begging, and I am pleading. A lot of persons suffer from suicidal thoughts as well as other things that we need help with. March of this year, as I said I suffer from suicidal thoughts and clinical depression. At the latter part of March, I rushed to Spanish Town Hospital. I spoke with a counsellor on waking up in the emergency room. She was OK. I was admitted to ward at 2:00 am. I was forced to shower in the cold water at 2:00 a.m. and then strapped to a bed. I was strapped to a bed until the next day when showered for 15 minutes and again strapped to bed. That was not a good experience for me. You don't speak, not allowed to express yourself. For three days after not being allowed to speak to anybody, not even family. The first counsellor asked them not to strap me down after I spoke to her. She explained that she was not a risk to the other patients. I was discharged after two weeks. I was supposed to have a coach call me every other day. She called the day after I was discharged. It is now five months and I have not received another call.

I experienced discrimination because I appear to be butch. Experienced it at Spanish Town, KPH and UWI hospital.

Dr. Skyers asked if a complaint had been lodged through the client complaint mechanism, the participant said yes, but nothing had resulted. It was stressed that for any real outcome and change to be effected, complaints had to be lodged through the formal mechanism. There was also a written aspect to the complaint mechanism, important for record keeping and documentation which was key as evidence for policy change.

It was observed that the LGBT community needed to work with the National Family Planning Unit to help parents to understand their children better. Parents needed to understand the differences among people and appreciate that they all needed to be loved and accepted. Many mental health challenges resulted from displacement and the absence of a support system.

Research among parents was said to be critical to the understanding their issues. It was recommended that J-FLAG should undertake research among parents of LGBTQ individuals so they could share their own emotional turmoil as they brought up their children, not wanting to displace their children or having them fall behind in school, but not knowing how to deal with children who were different.

A recommendation was to seek the assistance of the National Parenting Support Commission in this regard.

THE UNDP WAS ASKED TO SHARE BEST PRACTICES IN ITS EXPERIENCE MOVING THE HUMAN RIGHTS AGENDA FORWARD

The Panama Regional Office highlighted the work done by the UNDP in advancing the conditions of the LGBT community included the “Being LGBTI in the Caribbean” project which comprised seven countries including Jamaica. Under the project the organization had been supporting several civil service organisations in areas such as training for human rights and in reporting. In terms of the national dialogue, the UNDP had supported research on promoting inclusion.

The UNDP Jamaica country office would be launching an entrepreneurial training programme. In a more specific project related to mental health, the agency was collaborating with Haiti in supporting a civil service organisation to establish a suicide hotline and was also providing improved mental health support to members of the community. Collaboration with the MOHW to explore ways of enhancing the sustainability of that project was also a possibility

In addition, the UNDP Jamaica Country Office had supported CSOs in facilitating human rights training by increasing awareness of legislation, conventions and agreements that Jamaica was party to. Programmes had also increased the awareness of the CSOs in this regard as well as supporting their

advocacy machinery. The UNDP worked with CSOs on other advocacy initiatives such as campaigns to increase visibility that had been undertaken by TransWave. The Country Office had also supported We-Change in their entrepreneurship training for female entrepreneurs. The programmes had been geared to increasing capacity of LGBT CSOs in Jamaica and to increase discussion on the issues represented in part by the current forum. The dialogue was said to be at a pivotal point. The concept of social protection was also an area of priority and was emphasising human rights and social protection for everyone. Another initiative was being pursued by a group of UN agencies who were working with governments to reduce discrimination and stigma against all vulnerable groups in the fight against HIV/AIDs, including the LGBTI community.

HOW COULD RELIGIOUS ENTITIES FACILITATE IMPROVED ACCEPTANCE? HOW TO WORK WITH THE COMMUNITY?

J-FLAG has made visits to churches and had been brainstorming on how to engage

the church. The community had not been getting any positive response from the churches. Noted that many individuals in the community attended church and want to be more involved.

Moderator encouraged CSOs and agencies represented at the meeting to share their contact information.

The session had raised questions about what needed to be done about mental health in terms of policy? What were the current policies? What were the guiding principles in making the shift in mental health? A call was made to J-FLAG to partner with organisations and international partners to attempt to get involved in this conversation and to advocate policy change. The discussion revealed that it was open to: leaving no one behind; partnership and collaboration; coordinated efforts; seeing how to make the LGBT community full citizens of Jamaica and to promote their full protection and ability to access the health and wellness services. Much work to be done. Will make Jamaica “the place of choice to live, work, raise families and do business.”

Panel 2:

Creating Safe Spaces in the Educational System

Context

Legislative and other barriers impacted negatively on the ability of LGBT citizens to access and afford services critical to their mental health. Consequently, the community did not feel safe. It was therefore necessary to address the need for policies to deal with homophobia and transphobia which affected the development of children. Families needed support to be able to understand and provide for their LGBT children. The stigma and discrimination meted out to LGBT children by other students, family members and others in the communities in which they lived continue to result in homelessness among young LGBT individuals. Mental, emotional and physical health had to be highlighted and addressed. Panellists would explore what else could be done. The session would identify the issues faced by LGBT youth in educational spaces.



WHAT WERE THE REALITIES FACED BY LGBT CHILDREN IN THE EDUCATION SYSTEM?

It was noted that it was important to understand that the educational level had a bearing on the experience of the student, their ability to participate, level of comfort and feeling of involvement in the education system. It was noted that the secondary level was more rigid, and rules based than the tertiary level. LGBT students at this level would be reluctant to make themselves visible as there was no consideration for their well-being. They experienced bullying as well as other psychological issues such as suicide, isolation, and depression. The tertiary level was somewhat freer, although one's sexual identity still posed a problem as there was no mechanism in place to support that journey. The exclusionary nature of the system did not facilitate involvement.

The experience was seen to be different for all individuals. Those who could mask their sexual identity found it easier to cope than those who could not. Most LGBT individuals had to hide who they were as being themselves would result in ridicule by teachers, peers and even guidance counsellors. When they had problems, they should be able to share with guidance counsellors, but persons who should help did not because they identified as LGBT members. The suggestion was made that there should be a system for catering to LGBT in the school system. The challenge in secondary institutions was reiterated. Transgender individuals were particularly challenged. Safety was a major issue.

MOEYI emphasised that interventions at the secondary level could not disregard parents and caregivers, because they were children and the responsibility of adults. The MOEYI had to be cautious and responsible in their approach. It was suggested that there were individuals that students trusted and they did consult them. However, these individuals also had responsibilities for reporting and referral. Suicidal cases, it was noted, were referred to more skilled and appropriate institutions and professionals.

WHAT WERE SOME OF THE MAJOR CHALLENGES FACED BY CHILDREN AND THE LGBT COMMUNITY IN PARTICULAR?

The work of UNICEF in over 170 countries across the globe was based on the Convention of the Rights of Child. Jamaica, as a signatory to that treaty, was one of the countries in which the organisation worked. The local Child Care Protection Act arose from the Convention. UNICEF worked in partnership with government and non-governmental organisations (NGOs) to uphold and advocate for children's rights. One of the areas of focus in Jamaica was the violence that children were exposed to in schools and in the community. There was data showing that six out of 10 children were bullied in school and eight out of 10 had witnessed bullying. The objective was for children to feel safe going to and from school and to feel safe at school. Work was being undertaken with the MOEYI on the Safe Schools Policy which addressed bullying and cyberbullying. It was observed that there were instances of acts of suicide being committed online. UNICEF was trying to advocate within the legal system to remove corporal punishment from the law. As the law

stands, children over six years can be beaten by their parents as well as in schools. While it is not as frequent as in the past, it still occurs. It was emphasised that children needed extra support during adolescence, when they are testing boundaries, and experiencing greater peer pressure. At this time, they needed greater parenting, tolerance and understanding. UNICEF worked with NGOs in the health system to find ways to break down barriers and build support structure in schools by increasing capacity of guidance counsellors and exposing them to more positive approaches that are child-centred.

UNICEF was very clear that ALL children have right to equal opportunity.

HOW HAS THE GOVERNMENT ADDRESSED BULLYING IN SCHOOL?

The Ministry of Education, Youth and Information (MOEYI) had wanted the safety and security officers to attend the forum as it was an opportunity for learning and they would have benefitted by strategies discussed to support the LGBT community and to ensure that the Safety and Security Unit was playing its part to support the LGBT community. It was underscored that bullying and cyberbullying affected all students not only those classified as vulnerable.

Reference as made to the Child Protection Study conducted on bullying and cyberbullying which revealed that eight out of 10 students were, at least, aware of bullying. The study showed that the various players involved in bullying included: the perpetrator; the victim; and those watching from the side-lines, often cheering the act on. Noted that schools were largely unresponsive to needs of the bullied. The study pointed to the need to sensitise

the guidance counsellors, in particular, and ask that they take the matter seriously. It was shared that documentation, by the schools, of acts of bullying was required to be detailed and to describe the full extent of the issue. It was also necessary to ensure that students understood the gravity of the situation and the role that they needed to play to minimise these occurrences.

The MOEYI was currently working on a policy dealing with bullying and cyberbullying. The opportunity for one-on-one conversations was being provided. There was also the recognition that perpetrators were also victims. The Ministry's response to all parties – victim, perpetrators, onlookers – was to ensure that issue was comprehensively dealt with.

WHAT OPPORTUNITIES EXIST FOR ADDRESSING DISCRIMINATORY POLICIES? WHAT OF UNCONTROLLABLE CHILDREN AS IDENTIFIED IN THE ACT? LGBT CHILDREN MAY BE DESCRIBED AS UNCONTROLLABLE.

Even laws designed to protect our children might manifest indirect discrimination. When a provision was made too general, particular groups or individuals might be disproportionately disadvantaged. When an LGBT student sought the advice of a guidance counsellor, the counsellor might see his/her responsibility to report the problem to the relevant authority. For example, in Jamaica there was no differentiation between the act of buggery and the homosexual identity. Buggery and homosexuality were both illegal. That child might then be seen as needing protection. This could prevent LGBT students from seeking out the regular channels

available. In order to recognise opportunities, it was necessary to understand the lived experiences of LGBT children to respond more appropriately to their needs.

While the MOEYI was working to address bullying among all children, what was being done to protect LGBT children. Much of the discrimination against LGBT children came from the institution, itself, which might be identified as the fourth player in bullying cycle. The institution was seen to be responsible for training staff to recognise LGBT challenges.

It was suggested that a way of supporting young people was to provide opportunities to reach out through avenues from which they can get guidance and information. UNICEF, along with partners, was working on establishing a message-based health help line. Messages would be answered by individuals who had received training and who could guide youth to available services. UNICEF also partnered with the MOHW to create a Teen Hub - a space that was adolescent friendly - in the HWT Transportation Centre. That model would be replicated in other parishes with St Thomas being identified as the location of the next teen hub. Ways had to be found to assist children and to create spaces in which their voices could be heard without fear of censorship.

It was observed that the findings of the J-FLAG survey had demonstrated that as a society Jamaica had made significant progress, although there was still a far way to go. The survey had shown that in schools, children were more tolerant of diversity than adults. J-FLAG was encouraged to disseminate the survey findings more widely and to celebrate the incremental progress. The training for champions of the cause was also recommended.

There was a recommendation for the LGBT advocates to review the first draft of the safe school policy and provide recommendations that would address the challenges of the LGBT community. Other policies being worked on currently were the bullying policy and the policy on prevention of child trafficking. It was critical for the LGBT advocates to make their

contribution during the consultation phase

J-FLAG indicated interest in the training of guidance counsellors. Some training had started previously and then stopped without any explanation. What were the proper channels through which to reintroduce this conversation?

Discussion



Comments highlighted:

- Stopping bullying is an important first step. How could students be made to feel valued and having a place?
- Some “trusted” individuals do exploit LGBT children.
- Those LGBT individuals who could hide their identity had an easier time at school than, say, someone who was effeminate or trans.
- The community should look beyond having an environment in which they were safe to gaining wider tolerance and recognition, for example where teachers instructed in more gender-neutral terms.
- The issue of diversity should receive increased attention.
- UNICEF had financed a consultant to review the Safe Schools Policy. It was shared that the draft was ready and in October/November there would be public consultations in which advocates should participate. Other documents for review included the Bullying/Cyberbullying Policy. The UNDP was working, with another development partner, on a document addressing the prevention of child trafficking. Advocates must become involved in the review of these documents. Champions in the various ministries, agencies and departments should be identified. The National Family Life Unit was said to be an important partner in helping to train trainers.

WHAT WAS BEING DONE TO TRAIN GUIDANCE COUNSELLORS?

The MOEYI was satisfied that many guidance counsellors were, in fact, doing a good job and they were impressed with their work. The point was made that there were LGBT students who were harassing other students, for example students at the Grade 7 level were afraid to go to the rest rooms because they were afraid of being targeted and harassed. Hence, there were two sides of the coin: LGBT members who were scared because of their sexual orientation and young children who feared being targeted by LGBT individuals.

In response to LGBT students harassing other students, this topic had to be part of the training conversation. It did not connect, however, as their desires were ostracised desires.

A curriculum targeted at guidance counsellors had been prepared and, through collaboration Ashe there had been conducting island wide training, which had been well received and well supported by the MOEYI. The point was made that the government would probably not be prepared to fund such training at this time. Therefore, external funding would have to be acquired. The approach was critical as there needed to strike a balance to get the support of not just schools but also parents. The relationship now enjoyed with the MOHW had to be replicated in the MOEYI. It must be to be understood that the MOEYI was much more complex than MOHW as its focus was the children in its care.

WHAT SUPPORT WAS THERE FOR PARENTS OF LGBT CHILDREN?

The Jamaica Association of Guidance Counsellors was trained to handle psychosocial issues. The counsellors would first work with the children as they had to be ready to share their orientation with their parents. They would then decide how to work with family members. Outside of school space, the guidance counsellors had to receive the permission of parents to make referrals to specialists or resource agencies which had the appropriate expertise. The MOEYI had no authority to act without the approval of the parent or guardian. If the child does not wish the parents to be informed they would have to identify another family member. The MOEYI always attempts to empower children and parents and always to work in the best interest of the child.

WHAT WAS THE RELATIONSHIP BETWEEN THE NATIONAL PARENTING SUPPORT COMMISSION AND THE MOEYI?

It is an agency of the MOEYI to with responsibility to help to strengthen the family unit by empowering Jamaican parents. The National Parent Teachers' Association also works with parents. The organisations represented opportunities to establish relationships with the education system.

WHAT OPPORTUNITIES EXIST FOR DIVERSITY TRAINING AMONG STAKEHOLDERS IN THE EDUCATION SYSTEM?

The Health & Family Life Education curriculum was critical to addressing diversity training for students and other members of education system including support staff. The issue of sexual grooming had arisen in a particular school and had to look at the broader school community to address. Organised sensitization on the issue. It was highlighted that often behaviour perceived as normal might be interpreted otherwise under the Child Care and Protection Act. Thus, teachers had to be careful about their behaviour and relationship with students. Changes in behaviour among children and teachers are now required and this type of sensitivity training was necessary

Positive and proactive approaches are being taken by guidance counsellors. They had to carry out research on an annual basis and detailed plans outlined based on the research undertaken. Annual audits were also done in relation to safety and security. These would provide the data needed to design appropriate programmes to address the issues.

WHAT HAPPENED WHEN A STUDENT WAS RAPED?

J-FLAG could not provide any response as they do not engage students/youth under the age of 18. In the event that the family reached out to the organisation, they would then be able to give some assistance.

Under the law in Jamaica, a male student cannot be raped as only male-female rape was recognised. Under the Child Care and

Protection Act, a male child who had been raped would be considered as needing protection. Consequently, a guidance counsellor would be legally responsible to report this and an investigation would ensue. If this came to the attention of the Children's Advocate, they would be required to inform parents. Sexual intercourse with children under 16 was considered diversionary offence. Buggery, however, was not categorised as a diversionary offence. Both victim and perpetrator would be required to navigate the justice system.

The role of SUMA was introduced in this regard. If a child reports such an event, the person to whom the report is made was duty bound to respond, but with respect for absolute confidentiality. An emerging trend related to sexual abuse – boy or girl – families were aware of what was happening but were afraid to make reports because of the influence of the perpetrator. However, if this is reported in school, it must the institution must make the report. Such children become damage and may in turn damage others.

HOW MUCH CONTROL DID THE MOEYI HAVE TO INFLUENCE CURRICULUM DEVELOPMENT?

Some units in the MOEYI collaborated closely with teacher training institutions to develop curricula. Advocates in the LGBTI community had a role to impact the content of teacher training institutions. Trained educators, in collaboration with UNICEF was in the process of developing a programme in safety and security. Advocates will play a crucial role in the development of this initiative. The suggestion was made to explore the work that was done by Jamaicans For Justice in relation to uncontrollable children.

COULD AN UPDATE BE PROVIDED ON THE REVIEW OF THE CHILD CARE AND PROTECTION ACT?

They were going ahead to include recommendations that had come out of the Joint Select Committee on the Sexual Offences Act. There would need to be a wider consultation on the Act. We might need to demand that they revisit the Child Care and Protection Act (CCPA) for targeted attention. The issue of uncontrollable children had not been raised at that time. The report had said that the issue of incarceration of young children would not be removed. It was acknowledged that the CCPA needed more rigorous discussion. The movement of policy and legislation was plagued by bureaucracy.

The Jamaica Teaching Council was another entity to be engaged in terms of diversity training. The Anti Bullying initiative would be hosting some events in October that might provide platform for advocates. UNICEF was collaborating with the MOEYI in rolling out the Schoolwide Positive Behaviour and Support programme which involved capacity building, awareness raising within the school community about different core values of respect. The framework has worked been evaluated locally and internationally and an effort was now being made to scale it up within the system – student, safety, diversity acceptance, etc.

Wrap Up

The moderator highlighted the discussion on the role and significance of parenting and the type of support that might be provided for parents. There was the question of assisting a parent to understand diversity and that when a child recognised sexual identity it might not be what was accepted. How could parents be encouraged to display understanding and how could children in a disapproving society navigate this? The ones who felt safe were those with family support. How could parents be engaged in this discussion?

The discussion had also addressed the need to further dissect current legislation to ensure that they effectively and appropriately represented the needs of citizens.

The issue of diversity training for guidance counsellors was underscored. There was a clear indication of the need for partnership in moving forward. The MOEYI and UNICEF and other international partners were willing to partner and support the progress of the agenda forward.

Participants were thanked for the robust discussion and panellists thanked for their excellent contribution. A great deal was achieved and all looked forward to tomorrow's discussion.

National Dialogue on Human Rights in Jamaica **DAY 2**

Day 1 Recap

The presence of the organisers was acknowledged – the Equality for All Foundation in partnership with the UNDP’s Regional Hub in Panama and with support from the USAID.

The two major areas covered on Day 1 were health and wellness and creating safe spaces in education. The day’s proceedings demonstrated a well-defined partnership between civil society and government, however it was necessary to include the directorates – ministers and permanent secretaries – in the conversations. It was stressed that research findings had to be shared with the directorate. Civil society had the opportunity to become involved in the mental health dialogue which was a priority for the minister.



The conversation on creating safe spaces in education was robust. UNICEF representatives shared the policies that were underway. A major take home message was the need to create a structured partnership between the government, parenting associations and civil society. A gap identified was the need to engage parents. The participation of audience was impressive.

Summary of LGBT Community Surveys

The moderator shared the findings from the two surveys shared previously – The Covid 19 Survey and the Needs Assessment Survey. (See pages 5-8)

Panel 3:

Access to Justice

The moderator welcomed and introduced the panellists for the Access to Justice session.

A civilian member of the panel was asked to share her experience with the police. A 2016 incident that occurred in the vicinity of Mary Seacole Hall on the University of the West Indies, Mona Campus, was related, as follows:

After leaving an event which she had attended at Mary Seacole Hall, she and a group of friends were waiting for a taxi when they were accosted by the police some time after 10:00 p.m. They explained that they were waiting for a cab and were not students but had been invited to an event on campus. They were asked if they came from August Town and when this was answered in the negative, they were physically abused. They were arrested and appeared in court five days later. The lawyers defending the officers said they were arrested at 1:00 pm (the arrest took place between 10:00 and 11:00 pm). The judge decided that the matter should be sent

to trial. An article published in the Jamaica Observer identified the group as transgender. The process was a drawn out one as the case was consistently deferred for one reason or another. The victim expressed that the entire ordeal was quite tiring and traumatising. The group was unlawfully arrested. The case had negatively impacted her life. She was very scared and no longer wanted to attend UWI because of that experience.

JFJ noted that they were familiar with the case previously described where groups had been charged under the University Securities Act. Certain areas of the university campus were restricted, but not identified as such. The offences under the Act were only strictly enforced against members of the LGBTQ community. Another challenge faced was the overt homophobia demonstrated in the court system. Members of the LGBT community who faced the court, typically, experienced aggression from the clerks of court and even judges

JFJ reported that they recently represented a client, charged under the UWI Securities Act, who was beaten by a group of men. The clerk of court, in describing the incident in court, displayed a micro-aggressive attitude. Her description did not include the allegations. The judge was also inappropriate and micro aggressive in her response, “Yes I can only imagine, I can imagine clearly what those allegations were.” The LGBT community suffered from this type of discrimination whether they were the victim or the accused. When represented by an attorney, the micro aggression was reduced and redirected at the attorney. However, few members of the community enjoyed access to attorneys. Consequently, with support from the global fund, JFJ was now providing pro bono services for members of the community. JFJ was also engaging the police to help them to be more sensitive to the community. The organisation was also embarking on a sensitisation training programme for court personnel intended to help them to assist LGBTQ members without being abusive.

The Office of the Public Defender (OPD) was described as being unique as it was in a position to review legislation and make recommendations to Parliament for amendment, replacement or repeal. The organisation also investigated actions of the State that infringed on human rights. The meeting was informed that the current public defender was instrumental in the formation of J-FLAG. The OPD was willing and able to offer services to help the LGBTQ community in Jamaica to ensure they had full and equal access to justice.

It was noted that the LGBT community did not use the services of the OPD, perhaps it was a lack of confidence in the organisation’s ability to provide justice. The OPD had made

every effort to be visible in the sphere and offered a welcoming atmosphere to all clients. Despite all efforts, they had not received any complaints so there was nothing to investigate thus no opportunity to expand access to justice. Over the years, the organisation had done outstanding work in the spheres of advocacy, education and protection and it sought to complement these works by helping to expand access to justice for the LGBT community. Services were free of cost.

The importance of reporting attacks to the police was emphasised. As a follow up, they should then make the report to the OPD which would liaise with the police to ensure that complaints were dealt with. The OPD had a good working relationship with the JCF and other law enforcement stakeholder groups and was able to apply pressure to ensure that complaints were dealt with.

The OPD’s participation in the forum would facilitate a better understanding of LGBTQ issues to be able to curate services to fit needs of the community.

WHAT OPPORTUNITIES FOR LEGAL REFORM FOR GREATER HUMAN RIGHTS PROTECTION AND FOR IMPROVING CONDITIONS FOR LGBTQ JAMAICA EXISTED?

The Legal Reform Unit of the Ministry of Justice noted that it operated on the basis of government policy. However, any type of harm done to any citizen was always seen as tragic. The discussion, so far, demonstrated that the LGBT community’s experience very much paralleled that of the general population. It was acknowledged that there was a major problem with justice in Jamaica. It was suggested that a broader approach

to advocacy which pushed for increased professionalism across the board would also benefit the LGBTQ community. The sensitization training of court personnel was commended.

A push by the Public Defender for work on a victim's charter was proposed as being timely. This could be guided by the UN standards. The victim's charter would assist in improving the justice services for all Jamaicans.

It was noted that the earlier reports on LGBT community surveys showed that there was hope for improvement in the community's future conditions. An opportunity was shared in relation to the process of transformation

which was being undertaken in the justice sector to engage in the process to access fair treatment for vulnerable groups, particularly in courts and law enforcement arms. In addition, the government was committed to the establishment of a human rights Institute and every effort should be made to ensure that that promise was fulfilled.

WHAT IS THE MINISTRY'S POSITION ON ANTI-DISCRIMINATION LEGISLATION?

It was noted that at this point there was no directive or policy in that regard.

Discussion



The response to the issue of non-reporting raised by OPD was that few LGBTQ citizens were willing to come out in this way about their sexuality. It was not a lack of confidence in the OPD. It was explained that the unwillingness to come forward affected the attempts to redress bias and discrimination. The OPD assured confidentiality, but, to provide assistance to victims, required the divulgence of full information. The type of discrimination had to be shared for any redress to be achieved. This type of sharing might also contribute to legislative change as the OPD was a commission of Parliament.

WHAT AGENCIES PROVIDED PSYCHOSOCIAL SUPPORT TO PEOPLE WHO EXPERIENCED DISCRIMINATION, ABUSE, OR VIOLENCE?

It was clarified that JFJ provided strictly legal services and where applicable could provide referrals to other appropriate partners for psychosocial services. They were now in the process of hiring psychologists to contribute in that sphere.

The OPD did not offer psychosocial support but was in the process of establishing partnerships with other stakeholder groups that were able to provide that type of support.

WHAT ADVICE WAS THERE FOR ADVOCATES OF ANTI-DISCRIMINATION LEGISLATION?

Engagement with parliamentarians and ministers of government was advised. One immediate opportunity was engaging the Joint Select Committee that was currently looking at a sexual harassment bill.

WHAT CAN BE DONE TO MAKE LGBTQ COMMUNITY MORE COMFORTABLE IN MAKING COMPLAINTS AND SEEKING REDRESS?

Empowerment was needed. The community must know their rights and have confidence in the system. It was important to give the community legal assistance. It was acknowledged that most matters were dealt with in open court, which was intimidating. It would take confidence and both legal and psychological support. It would require time. In addition, continued training of justice system personnel re sensitivity of the community

had to be pursued. It was recognised to be a personal decision as to how far one was prepared to go in pursuing individual justice.

It was suggested that the first step need not be in the court. The reality was that the more LGBTQ individuals that sought redress the better it would be.

HOW CAN THE MEMBERS OF LEGAL COMMUNITY, WHO ARE SUPPORTING LGBTQ RIGHTS, PUBLICISE THEIR SUPPORT OUTSIDE OF THE LEGAL COMMUNITY?

JFJ shared that they executed social media campaigns to publicise services. It also maintained a website. The JFJ partnered with CSOs and NGOs that worked with vulnerable groups. The organisation received a large number of complaints from a diverse cross-section of people including LGBTQ citizens.

The OPD representative, indicated that the Public Defender would have to speak on this matter. The organisation was revamping its website and social media platforms to better expose its abilities. It had a weekly radio talk show guided largely by matters being investigated. The Public Defender always showed support to the community.

J-FLAG promoted the institutions that aided the community.

WERE THERE ANY OPPORTUNITIES FOR JFJ AND OPD TO WORK WITH EACH OTHER?

The OPD agreed that there were opportunities for such a collaboration. JFJ's educational resources would boost the work of the OPD. The OPD carried out human rights

training among police in western Jamaica. It was suggested that training should begin at the Police Training Academy and within the Jamaica Defence Force (JDF). The Public Defender was said to welcome partnerships and this was an excellent time for such an approach to be made.

JFJ concurred that such a partnership would be beneficial. JFJ currently trained officers at the Police Academy. The directorship of both organisations would have to make decisions relating to the design and execution of such a partnership.

WHAT CHANGES WOULD THE LGBTQ COMMUNITY LIKE TO SEE?

The community would like the police to be more empathetic and to be aware of the challenges of the community. They made assumptions about the community, and while they were open to answering questions, they were unhappy with the disrespect shown, use of expletives, etc. Some police stations did a better job of dealing with the community, one police officer showed knowledge of the community and asked for the preferred pronoun. The community also had to understand that the process would be tedious but must persevere.

WHAT ARE THE MAJOR CHALLENGES IN THE SLOW PROCESS OF JUSTICE REFORM?

It was observed that the process of reform had been in progress since the 19th century. Justice reform was delayed by lack of focus and investment. A Justice Training Institute was needed to facilitate ongoing training for personnel in the court system. The desirability

for a Victims' Charter had been discussed for several decades. It was critical to identify champions to keep advocating for specific aspects of the system.

WAS THERE ANY SCOPE FOR LEGAL REFORM UNIT TO MAKE RECOMMENDATIONS ON LAW REFORM AND WHAT OPPORTUNITIES EXISTED FOR CSOs TO WORK WITH A TASK FORCE?

A task force had been formed several years ago and the Unit was in the process of working on those reforms. One of the recommendations was for the establishment of a human rights institute. Reiterated that it was best, in terms of advocacy, to engage the political representatives and ministers who could then champion any issues.

On the point of reform, sexual offences were not categorised as diversionary offences in the original bill. It included rape and sexual assault and sex with a person under 16. It did not, however, include buggery which demonstrated a disparity which impacted the LGBT community. Heterosexual sex between two 15-year-olds was considered a diversionary offence, but it was not the same for two 15-year-old boys.

WHAT IS THE SCOPE FOR ISSUES SUCH AS THIS TO BE CONSIDERED?

There was a lot of anomalous legislation to be sorted. There was a committee looking at the Sexual Offences Act and Child Protection Act. There would have to be a resolution of these issues. The advocacy and championship roles were highlighted as being most important for progress to be made.

Panel 4:

Inclusion & Integration Vision 2030

Context

The panel would identify opportunities in Jamaica's national development goals for greater inclusion and integration of the LGBT community.

WHAT WERE SOME OF THE KEY THINGS MISSING OR NEEDED SCALING UP TO PUSH THE HUMAN RIGHTS AGENDA FORWARD AND MAKE JAMAICA A MORE HOSPITABLE PLACE FOR LGBT PEOPLE?

Education was needed to build awareness on the LGBT community to displace the stereotypes and misunderstanding around it. It was necessary also to understand that infringements on the right of the most marginalised represented an infringement on the rights of all. The legislative reforms that followed on greater awareness would ensure the inclusion of most marginalised, including the LGBT community, and that they were able to access the rights and privileges due to all citizens. Public education should include training on sensitivity among policymakers and state stakeholders.

A symbiotic relationship existed between human rights and development; therefore, a people-centred approach must be pursued. Post-independent Jamaica had to be guided by inclusiveness. It was necessary to understand: how LGBT people fared in development priorities; how they are affected; what challenges they face; how different categories of LGBT people managed in their daily lives and taking an intentional approach to addressing their needs. It was shared that the Caribbean Policy Research Institute (CAPRI) had done a study which showed the detrimental impact of discrimination on the economy.

Increased public education was needed, increased engagement of policymakers, and duty bearers needed to understand that human rights were not special things but were fundamental, foundational building blocks for the development of the country. Consequently, greater support was needed for organisations such as J-FLAG, TransWave, and We-Change, etc. Advocates needed a better understanding of development priorities and how the United Nations and other international development organisations, for example, were supporting the development of Jamaica and how that knowledge can be used in the community's advocacy campaigns. LGBT organisations, typically, focus on a narrow set of policies and this approach needed to be broadened.

As a development partner the UNDP understood the call for greater public awareness. There also had to be a space for coming together in partnerships. There needed to be the appreciation not to programme for but, rather, in collaboration

with. The policymakers and community must collaborate to better understand the issues and identify the gaps to support evidence-based decision making. It should also be understood that policymakers also had biases and thus re-sensitisation was needed to understand that human rights is the rights of human beings first and then the intersectionalities and vulnerabilities to bridge the gap in understanding.

One of the gaps was the leadership to address issues that had already been articulated in several reports and surveys. There were different perspectives about human rights in the society. The observation was made that the average person did not fully understand the concept of human rights. They saw it primarily as protecting criminals and having to do with the death penalty. The challenge was to change this perception so everyone understood that human rights applied to each and every one and so the way it impacted others would also impact them.

As a part of the development agenda, it was important to recognise that people had to be placed at the heart of that comprehension; to put young people and the disabled at the centre of development. The LGBT population was one population to be addressed. It was important to step back to see how best to identify the range of actors that were critical to the agenda and ensure that no one is left behind.

THE CAPRI REPORT

The overarching message of the CAPRI report (The Economic and Societal Costs of Sexuality Based Discrimination in Jamaica) was that the wider cost of discrimination against the LGBT community was costing

the country millions of dollars. Specifically, the report indicated that there was a cost of exclusion amounting to \$79 million as well as the cost related to the lack of preventative and inclusion related to HIV amounted to \$474 million; a huge loss of income had been incurred as a result of exclusion, lack of awareness and public education about the rights of the LGBT community. It revealed that LGBT persons were 20 times more likely to be victims of sexual assault, experience mental health issues as a result of bullying in schools and discrimination in the workplace based on their sexual orientation.

Recommendations included:

- the repeal of the Offences Against the Person Act, sections 76, 77 and 79 which criminalise anal sex;
- reform for neutrality of gender in the Sexual Offences Act, more specifically the definition of rape and sexual assault which minimized the other types of sexual behaviours experienced by LGBT;
- implementation of anti-discrimination laws in workplace as well as in schools.
- That there was work to be done regarding education in schools in accordance with UN and WHO guidelines. Also addressing bullying in schools. Training in private and public sector to increase awareness of how to approach LGBT community.

THE J-FLAG PERSPECTIVE

From the J-FLAG perspective, advocates had to have an appreciation and understanding of Jamaican culture – dancehall, language,

music, etc. It was acknowledged that although information on human rights is at our fingertips through the internet, the average person is not going to do so. Consequently, these persons needed to be engaged continuously. For example, at a health care worker training session at the Ministry of Health, it was revealed that over 90 per cent of health care workers had never been trained in working with the LGBT community.

Partnership and collaboration were critical to moving the agenda forward. It was necessary to understand how things connect. Understanding connections (intersectionality) was important.

Patience, it was noted, is critical in advocacy. Also, important to appreciate the difference between advocacy and activism. Advocacy was the background work.

HOW THE UNDP PROVIDES SUPPORT

The UNDP supported CSOs in the following ways:

- Provided assistance in building resources – financial and capacity.
- Supported the development of research papers. A key example was assisting J-FLAG with their “National Survey on Attitudes and Perceptions of Jamaicans to LGBT Jamaicans” in 2018.
- Supported capacity development of human rights defenders/champions who were very clear on what the rights the population were and facilitated advocacy inside and outside the gates.
- Provided grants to support capacity building in the areas of

entrepreneurship development and working on public awareness campaigns and the developments of knowledge products.

- Sensitisation training of journalists to ensure the full understanding and accurate reporting of issues.
- Worked closely with CSOs. A recent project was the social context training of over 1,000 justice sector workers.
- Best practices. One key best practice was voice and participation. From project development and design through to evaluation, it was important to have the persons that programme was being implemented for are at the table, so it becomes programming with. Baseline data was necessary to determine the starting gaps were. Youth for example, require a certain approach and attention as theirs would be the outstanding voices in 10 years. Beneficiaries must be at table through life of project design to help in guiding implementation. It was also important to learn from the lessons of previous projects.

One of the best practices in working with international NGOs identified was learning how to communicate in a way that was not offensive. Language was to be used to unite rather than divide. It was also important to understand the government’s development agenda. The UNDP has learnt to support through demand-driven programming rather than support-driven programming. The objective was to see how to support government while also pushing your organisation’s agenda.

Discussion



BREAK DOWN DEVELOPMENT GOALS THAT ADVOCACY PLAYERS HAD BEEN AND COULD CONTINUE TO USE TO MAKE PROGRESS IN THE SHORT AND LONG TERM.

The Caribbean Vulnerable Communities Coalition (CVCC) identified gender equality as the most obvious sustainable development goal. Much of the work being done in relation to gender equality hinged on the inclusion of the LGBTQ community in the national development agenda and ensuring that the policy and legislative framework addressed the diverse identities within the community. Much work had been accomplished in the HIV field.

Poverty was identified as a critical issue affecting the LGBT community, with the trans community most seriously affected as they suffered from homelessness and a lack of employment. The development agenda would take a broader approach to address poverty for entire LGBT community.

The other development challenge was related to health. Again, a lot of work had been done with HIV. There was a higher rate of HIV among MSM and trans communities. Some was tied to the economic factor which impacted access to health and health care. This community had special requirements and thus health services had to know the questions to ask and the clients had to be prepared to answer them. This was particularly important with regard to MSM and gay health where anal health had to be addressed.

Access to accommodation was seen as another challenge. Could LGBT individuals secure appropriate housing. In many instances they are required pay higher than usual rent. There is the need to find ways to ensure equitable access to shelter.

Access to justice was also identified as a challenge. However, there was need to brace the legislative landscape to facilitate increased access to justice. It was stated that there should be no barriers to justice outside of the legislation itself. The observation was made that the JCF had had to institute a specific policy to ensure that members of the LGBT community would be able to visit a police station and receive the same service as other citizens. Deliberate actions such as this might be required on the part of duty bearers to ensure that members of the community were not disenfranchised and not left behind.

J-FLAG noted that beyond communication, a lack of understanding of the development agenda was missing. Advocates did not understand the development agenda. It had to be appreciated that Jamaica was not a utopia but the community had to be prepared to chip away, bit by bit, to get there. The discussion had shown that there was the opportunity for

collaboration among UNDP, J-FLAG, TransWave and other interested organisations to develop this understanding. The agenda for advocates was to understand the government's objectives for development and to find a space in which to operate. The community had to be prepared to take small steps for incremental change. Advocates had to learn how to forge alliances. Buggery and same sex marriage were not the only concerns of the LGBT community, there was a wide range of needs to be addressed so advocacy organisations have to also expand how they work.

The CVCC underscored the presence of a LGBTQ voice that was represented at all levels. There had to be an understanding of the thinking of development practitioners to be able to take it back to the community so as to develop strategies to move the community's development forward by becoming a part of the development agenda. It was critical to be a part of the planning at all stages of the process. It was suggested that the UNDP has a significant voice at the development table and could assist in sharing the concerns of partners.

CAPRI stated that disparity was often seen between policy and action occurred across all areas of governance, and thus monitoring is necessary for alignment. There had to be an appreciation for the fact that all people had diverse identities and needs. Issues such as bullying in school, lack of access to housing and to health care affected many people, therefore a multi-sectoral approach was the most practical. These issues affected us all as humans.

In expanding on the message of the CAPRI study, what was evident was that there were many issues which were not isolated to the LGBT community but impacted the wider society also. For example, the country was losing income from the brain drain as many skilled, educated Jamaicans, including LGBT people, migrated as they didn't find employment or did not feel comfortable living in Jamaica. In reference to sexual health there was reference to anal health as if it were specific to the homosexual community when it applied across the board. In terms of advocacy there was the need to connect the issues which affected the whole society. The report also provided a voice for organisations, such as J-FLAG, which provided a wealth of information on the LGBTI community.

SO MUCH OF THE EXCLUSION OF THE LGBT COMMUNITY SEEMED TO BE BASED ON CULTURAL UNDERSTANDING OF WHAT IS JAMAICAN. A LARGE PART HAD TO DO WITH CHURCH. WAS THERE ANY ENGAGEMENT WITH CHURCH?

Rejection, hatred, fear filters into policymaking. When doing advocacy with emphasis on a particular marginalised community results in a high degree of frustration. HOW DO YOU NAVIGATE THAT FINE LINE BETWEEN HATING MORE EXPOSURE TO GAIN MORE UNDERSTANDING?

J-FLAG had engaged some church leaders over the years. Courtesy calls had been made on key stakeholders, including church leaders. Reverend Devon Dick had been engaged at one point and he invited members of LGBTI to his church; several persons attended. There had been engagement through the HIV programme and the Family Planning Board and MOHW. There was activity behind the scenes and more LGBT individuals were finding churches in which they felt comfortable.

The advocates had to help the church to understand the issues and to understand what was being asked of them. Many members of the LGBT community were members of the church and the group needed to use them more in the work being done. A Caribbean interfaith network had been recently established which included church leaders and LGBT members. It was highlighted that building an alliance with the church community was critical.

In regards to policymaking the most effective approach was to advocate for a better Jamaica. One could look at reducing crime and violence by helping to reduce violence against LGBT members, as well as addressing homelessness nationally. It was important to form partnerships and keep the trajectory of advocacy positive. We-Change, for example, looked at issues of LGBTQ women while also addressing women's issues generally. Making connections and reasoning with people to help them to understand these issues was key.

CaPRI underscored the importance of sharing comprehensive information. Research had shown that Jamaicans had chosen the death penalty because there was a lack of information on other options for punishment. It was suggested that when Jamaica's indigenous culture was examined, there was no evidence of homophobia. It was observed that the Jamaican patois was gender neutral and despite dancehall's reputation for homophobia there were elements that were homoerotic. It was necessary to highlight aspects of indigenous culture that were antithetical to homophobia.

Wrap Up and Next Steps

The moderator recommended that the development conversation should begin by putting Jamaicans at the centre. The idea of leaving no one behind addressed those who needed assistance most; those who were most disadvantaged. It might be unattached youth who may also be LGBT. It was stressed that the approach be holistic and meaningful. There were occasions when one had to be the advocate for the advocate as only one who understood and knew a condition could best explain it.

The recommendation was made that members of the LGBT community should be referred to as LGBT citizens.

The moderator thanked the panellists and participants for their active engagement and participation. She was privileged to have moderated this programme, had learnt a lot and enjoyed the experience.

The UNDP thanked all involved, observing that many important recommendations had emerged from the national dialogue over the two days. The moderator was commended for a job well done, was engaging and dynamic and had contributed much to the national discussion. The UNDP would continue to partner with the LGBT community in Jamaica.



One of the follow-up actions would be the announcement of small grants to CSOs who were following up on some of the recommendations from the dialogue. The organisation would continue with its research activities and was planning the compilation of a LGBTI in Jamaica report. In February 2021, the national discussions would be taken to the regional level, including all seven countries participating in the project. Everyone – all participants and panellists – were thanked for their contribution.

J-FLAG thanked all panellists for their involvement. It was noted that the discussions on all four panels were robust and the recommendations from the government representatives were particularly appreciated. The idea that LGBT members should be referred to as citizens was endorsed as they were Jamaicans first. J-FLAG thanked all who assisted in organising the national dialogue and the moderator for a great job.

In terms of the way forward – many potential areas for collaboration had been highlighted. Was most excited about what the process had kick-started and looked forward to working with all potential partners.

Recommendations

These recommendations were made by panellists and participants:

- J-FLAG to partner with organisations and international partners to get involved in this conversation and to advocate policy changes
- Continued training of health sector workers is critical to improved health care.
- The integration of LGBTI issues into the curricula of health care training institutions. J-FLAG had worked in association with the MOHW to carry out some training and this need to be intensified.
- Sharing information gleaned from various surveys with the MOHW directorate. However, it had to be appreciated that LGBT issues were not in the top 10 list of issues that the MOHW had to deal with. The community's advocates had to push the agenda by finding ways of integrating LGBT issues in the major national surveys implemented by government agencies and departments.
- Identifying champions among the directorate and policymakers.
- The OPD and JFJ noted that there were opportunities for collaboration in the provision of sensitivity training to avoid duplication and maximise efforts of both parties
- the need for increased public education, engagement of policymakers, and duty bearers to facilitate the understanding that human rights were not special things but were foundational building blocks for development.
- advocates needed a better understanding of development priorities and how the United Nations and other international development organisations, for example, were supporting the development of Jamaica and how that knowledge can be used in the community's advocacy campaigns.

- LGBT organisations, typically, focus on a narrow set of policies and this approach needed to be broadened as there was a wide range of needs to be addressed. The community had to be prepared to chip away, bit by bit, to achieve their goals. The discussion revealed that there was the opportunity for collaboration among UNDP, J-FLAG, TransWave and other interested organisations to develop this understanding.
- . There needed to be advocacy for policy and legislative changes which could impact service delivery. An understanding of the playing field was critical to determining the appropriate interventions at various levels.
- The point was made that the buy-in of the directorate – ministers and permanent secretaries – was key. They had to be convinced to approve additional work.
- The community should find ways of integrating LGBT issues in the major national surveys implemented by government agencies and departments, such as the Jamaica Health and Lifestyle Surveys, to generate data needed on the community. National surveys were key in collecting data on the LGBT community.
- The importance of identifying allies and champions among directorate and policymakers was emphasized. J-FLAG was advised that it was now timely to resubmit their customer service proposal.
- It was noted that outside of J-FLAG’s work in the MOHW, Ministry of Youth and Ministry of National Security, there had not been much diversity training, but the organisation was interested in working with policymakers.
- The capacity of the Mental Health Unit was limited in its capacity and therefore partnerships with NGOs would be key to effectively pushing the agenda.
- The Ministry is currently operating under an IDB loan and a mental health plan had been developed. It was suggested that LGBT and NGOs working in the area of mental health access and review that document which laid out the plan for the next three to four years.
- It was noted that the LGBT community needed to work with the National Family Planning Unit to help parents to understand their children better
- It was recommended that J-FLAG should undertake research among parents of LGBTQ individuals so they could share their own emotional turmoil as they brought up their children, not wanting to displace their children or having them fall behind in school, but not knowing how to deal with children who were different.
- A recommendation was to seek the assistance of the National Parenting Support Commission in this regard.

- There was a recommendation for the LGBT advocates to review the first draft of the safe school policy and provide recommendations that would address the challenges of the LGBT community. Other policies being worked on currently were the bullying policy and the policy on prevention of child trafficking. It was critical for the LGBT advocates to make their contribution during the consultation phase.
- The Jamaica Teaching Council was another entity to be engaged in terms of diversity training. The Anti Bullying initiative would be hosting some events in October that might provide platform for advocates. UNICEF was collaborating with the MOEYI in rolling out the Schoolwide Positive Behaviour and Support programme which involved capacity building, awareness raising within the school community about different core values of respect. The framework has worked and has been evaluated locally and internationally, and an effort is now being made to scale it up within the system – student, safety, diversity acceptance, etc.
- Advocates of anti-discrimination legislation? Was encouraged to engage with parliamentarians and ministers of government. One immediate opportunity was engaging the Joint Select Committee that is currently looking at a sexual harassment bill.



NATIONAL DIALOGUE

ON HUMAN RIGHTS IN JAMAICA

SEPTEMBER 23-24, 2020

Day 1

Location: Zoom | **Date:** Wednesday, September 23, 2020 | **Time:** 9:00 am - 3:00 pm |

Moderator: Karlene Temple-Anderson

9:00 AM - 9:15 AM

Welcome & Greetings

Karlene Temple-Anderson, Moderator
Denise Antonio, Resident Representative, UNDP
Jason Fraser, Country Representative, USAID Jamaica
Jaevion Nelson, Executive Director, J-FLAG

9:15AM - 9:30AM

Summary of LGBT Community Surveys

Karlene Temple-Anderson, Moderator

9:30AM - 11:20AM

Health & Wellness Panel

Dr. Nicola Skyers, Director, Disease Prevention & Control, Ministry of Health & Wellness
Doraine Young, Psychologist
Shawna Stewart, Co-Director, WE-Change
Jhanille Brooks, Chairperson, Jamaica Mental Health Advocacy Network

11:20AM - 11:40AM

Q&A and Discussion

Karlene Temple-Anderson, Moderator

12:30PM - 2:30PM

Creating Safe Spaces in Education Panel

Richard Troupe, Acting Director, Safety & Security Unit, Ministry of Education
Dr. Rebecca Tortello, Education Specialist, UNICEF Jamaica
Christopher Brown, Equality Youth Jamaica
Christopher Harper, Jamaica Youth Advocacy Network

2:30PM - 3:00PM

Q&A and Discussion

Karlene Temple-Anderson, Moderator



NATIONAL DIALOGUE

ON HUMAN RIGHTS IN JAMAICA

SEPTEMBER 23-24, 2020

Day 2

Location: Zoom | **Date:** Thursday, September 24, 2020 | **Time:** 9:00 am - 3:30 pm |

Moderator: Karlene Temple-Anderson

9:00 AM - 9:10 AM

Welcome & Day 1 Recap

Karlene Temple-Anderson, Moderator

9:10AM - 9:20AM

Summary of LGBT Community Surveys

Karlene Temple-Anderson, Moderator

9:20AM - 11:20AM

Access to Justice Panel

Arlene Harrison Henry, Public Defender

Anika Walsh, Community Member

Nastassia Robinson, Legal Officer, Jamaicans For Justice

11:20AM - 11:40AM

Q&A and Discussion

Karlene Temple-Anderson, Moderator

12:30PM - 2:30PM

Inclusion & Integration: Vision 2030 Panel

Dr. Leanne Levers, Director of Advocacy, Caribbean Policy Research Institute (CaPRI)

Ivan Cruickshank, Executive Director, Caribbean Vulnerable Communities Coalition

Jaevion Nelson, Executive Director, J-FLAG

Ava Whyte-Anderson, Officer in Charge, Programmes, UNDP Jamaica

2:30PM - 3:00PM

Q&A and Discussion

Karlene Temple-Anderson, Moderator

3:00PM - 3:30PM

Wrap Up & Next Steps

Karlene Temple-Anderson, Moderator

Alicia Bowen McCulskie, Programme Coordinator, UNDP Jamaica

Glenroy Murray, Director, Strategy & Impact, J-FLAG



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