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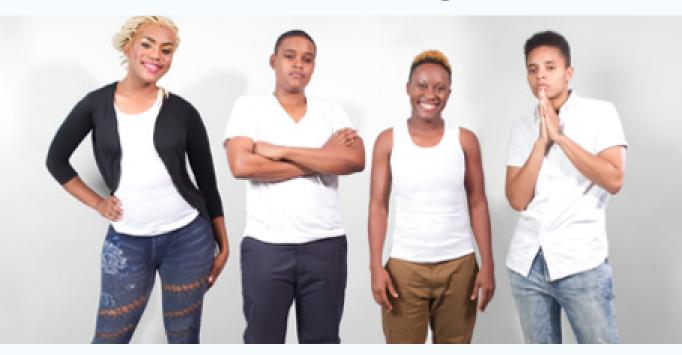
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TransWave was launched in August 2015 and since its inception the organization has been actively promoting transgender health and well-being in Jamaica. In November 2015, for Transgender Awareness Week (November 14-20) TransWave, through funding from J-FLAG, launched a visibility campaign on social media that was effective in promoting the stories and voices of the Jamaican transgender community.

### "Our Voices, Our Stories"



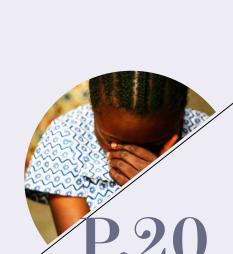
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### Publisher's Note



f it's one thing we can learn from children, it's how they face their fears head on with no hesitation. In that case J-FLAG and its staff can be considered children, working fearlessly to make Jamaica a better place for members of the LGBT community to live, work, raise families and do business.

### As Jamaicans would say, "Weh fear a guh?"

Since conception we have stood against all odds. In an environment where impossibilities, sadness and gloom could have crippled us, we have not only defied but continue to grow and persevere in the face of adversity. Like a small flower bursting from concrete, we have beaten the odds and almost 18 years later we can look back and say with confidence that we have matured in our advocacy and scope where human rights and social justice, strategy and team work are concerned. We stand ready and capable to tackle the next decade of challenges!

**PRIDEJA issue 1** focuses on the work we, our partners and allies have accomplished and how we continue to tackle issues around HIV stigma and discrimination, gender-based violence and civic engagements. The issue will also give you a glimpse of other initiatives and projects the team has been undertaking.

Kudos to the J-FLAG team and partners on the outstanding work that has been done!

### Here's to a bigger better 2016.

#### Suelle Anglin

Social Media and Communications Coordinator

### CONTRIBUTORS



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TRACEY-ANN MULLINGS



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CREATIVE LAYOUT: SUELLE ANGLIN COVER PHOTO: ARRC CREATIVE MEDIA LTD. SPECIAL THANKS TO OUR WRITERS, STAFF, CONTRIBUTORS, ALLIES AND PARTNERS.

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# Jamaica AIDS Support for Life

amaica AIDS Support for Life's (JASL's) genesis was in the late 1980's when a group of friends, responded to the needs of a peer who had become infected with the then highly stigmatized HIV and was facing discrimination in the health care system. This act led other individuals who were facing similar challenges to the group who could not ignore their plight.

Additionally, existing government response was preventive and not targeted to include the most vulnerable groups which included persons already infected with HIV, men who have sex with men and sex workers.

In 1991 the organization was first established as Jamaica AIDS Support (JAS), and was the first NGO specifically responding to HIV. JAS was charged by the Ministry of Health to continue the work among PLHIV, MSM and SWs as trust had been established through the provision of a stigma free zone in which everyone could access testing, counselling and treatment irrespective of sexual orientation, gender, race, occupation, colour, class economic status or religion. The agency opened "Life", an AIDS Hospice which provided treatment and care for PLHIV from 1992 - 1997 when individuals were able to source acceptable treatment at clinics and hospitals island-wide.

JASL today operates three Chapters across the island, and has expanded its programmes further to include and meet the needs of MSM, OVC, and women (especially those who are vulnerable to and have experienced violence). With a relatively small team, the organisation is able to reach its tentacles into almost all the social issues which increase vulnerability to HIV and other STI infection and violence. The organization also operates an income generating project "Life's Work" which provides employment for PLHIV and support the work of the organization.

Today, JASL continues to empower, educate, advocate and provide HIV services to groups most vulnerable to HIV and PLHIV from its three chapters across the island in Kingston, Montego Bay and Ocho Rios - with a suite of expanded services (including, but not limited to: full service clinic, inclusive of psychologist; gender-based violence screening and counselling; general counselling; and skills building).

JASL is proud to celebrate 25 years of service to Jamaica. The successes made in these 2 and a half decades have been due to a great team, and strong partnerships.







### The Brainchild of Latoya McNugent

■ omen's Empowerment for Change [WE-Change] is a rights-based, womenled, community-based advocacy group committed to increasing the participation of lesbians, bisexual and transgender [LBT] women in social justice advocacy in Jamaica and the Caribbean. WE-Change was founded by twenty LBT women out of a need to strengthen the women's movement within the LGBT community, given LGBT advocacy spaces in Jamaica have been largely controlled by, and focused on men, which has inadvertently marginalised and invisibilised women.

The organisation was officially launched on Friday, May 15, 2015 in Kingston, Jamaica. Our Vision: WE-Change envisions a society where the rights of every person are recognised, respected, and protected, and where duty bearers and caregivers commit to creating an enabling environment for every person to contribute to the sustainable development of Jamaica. Our Mission: Community empowerment and vocalisation for change to: increase the participation of LBT women in local and regional social justice advocacy create alternative and safe spaces for the LBT women's community reduce homophobia and transphobia among duty bearers and caregivers.

On the evening of Thursday, March 10, 2016 WE-Change in partnership with UN Women Caribbean & J-FLAG hosted #HerLegacy in celebration of inspiring women in families, communities, Jamaica and the Caribbean. #HerLegacy was held at the New Kingston

Conference Centre in Kingston, Jamaica and featured a gallery of 16 powERFul women, a series of oral tributes, spoken word and music performances, a special reading from the author of Anansesem, and the personal testimony of a VAW survivor.

The evening was soulful and magical.

Let's continue to honour #HerLegacy, not just during International Women's Week, but throughout the year.

WE will continue empower women to transform communities.



### Why do WE tell our Stories?

Y tories are important. hey always have been.

And will continue to be. Stories personalise experiences.

We cry. Sometimes we smile.

But always, a story shifts something in us.

There are many ways that we can share our stories.

Many reasons for sharing.

WE-Change is almost 10 months old.

WE focus primarily on increasing women's participation in advocacy and leadership; we tackle homophobia among duty bearers, and we create what we consider to be safe and alternative spaces for lesbians, bisexual and transgender women.

So allow me to tell you a little bit about the role that storytelling has played in supporting our work and impacting change especially personal and social change...

Shortly after we launched in May last year, we convened a support group for LBT women.

The group was scheduled to meet every week for three months. It was aimed at providing a safe space for women who identified as lesbian, bisexual and/or transgender.

In this space women shared very intimate and personal life experiences with each other, supported each other with listening ears, compassionate hearts, and blooming optimism.

We didn't force, compel or even encourage each other to speak. We just listened, sometimes we would sit in silence until someone offered to share.

Many of the stories that were shared over the period were tear-jerking.

They would sometimes water the eyes of the speaker and those who listened.

But it was okay, because tears release us even just a little bit, from pain.

After the first few weeks the two hours didn't feel like sufficient time.

After a while everyone wanted to share.

We were all getting bolder and more vocal. We were willing to talk about our experiences, not matter how painful they were, because there was a room full of

women ready to lend support.

The sharing of the myriad of stories in our little support group also helped the organisation to tailor its programmes and initiatives.

We rejoiced each time happy stories were shared; you could see the joy and delight on each other's faces.

A special bond was created.

We became a family.

Friendships were formed; friendships that continue to flourish today.

Many participants also begun to increase their participation in several additional initiatives undertaken by the organisation and its partners

They participated in beach clean up activities with JET, they participated in advocacy training programmes, they shared their personal experiences in several other safe spaces, they are more vocal about social justice issues and how they affect vulnerabilised populations, they were contributing in their own way to community organising particularly within the LBT women's community, and some are now serving as volunteers for the organisation.

The group shared their own needs, desires, aspirations, and even their skills!

Stories, WE BELIEVE, CAN, multiply impact!

That summer during June, the month celebrated worldwide in some countries as PRiDE month, we released a short video that featured 3 couples, where at least one partner identified as lesbian, bisexual or

Celebrating pride with love is what we called the video.

It featured snappy quotes from the lovers with photo and video footage of each couple.

It was important for us to share these love stories because they humanised lesbians, bisexual and trans\* folks - the video depicted them as human beings in love, capable of being sprung, playful, love struck, and committed to their partners for a very long time.

Today the couples we featured then, are still together still committed to the dream of sharing the rest of their lives together.

One of the activities WE-Change undertook as part

of commemorating the 16 Days of Activism to end violence against women, was a special event called #OrangeLights.

#OrangeLights was also another storytelling safe space we created for LBT women and allies, a space that also welcomed the general population.

This was quite a powerful and inspirational experience for us. Through personal testimonies, short stories and poetry, we heard the screams of agony and felt the brokenness of the heart of women around us who personally experienced or knew someone who experienced all sorts of violence against their bodies, including murder.

One of the women who shared her story with the audience, spoke of the pain she had to endure as she remained vigilant in her quest for justice as a survivor of sexual violence, to ensure that the perpetrator was brought to justice. This woman who shared her very heartrending experience was a part of the support group I mentioned earlier; can you imagine, she was one of the quiet ones! Today she is bolder and braver and continues to raise awareness about sexual violence and violence against women and inspiring survivors to seek

We also listened intently to a gnashing libation poem for Jamaican women and how we resisted and survived the ugliness and pain of slavery, colonialism and oppression of the woman's body and mind.

I remember one member of the audience saying they never knew all of this, all the experiences of violence against women was happening around us, so close to us.

Violence against women was no longer just an academic issue that advocates and academics discussed, it was real, it was happening, and it was being challenged and resisted by many women who are affected and by their allies...

As an organisation, WE recognise just how richly stories can contribute to social change with varying levels of impact, and for this reason, we incorporate it in most of the advocacy work that we do.

Stories touch lives and inspire us to act. So we will continue to invite the sharing of stories in all their forms, because thru stories WE-Change can effect Social Change.

### Gender-Based Violence One Step Forward...and then Another Step?

# Has it just become a part of the landscape?

o matter what else is going on in society, it seems gender-based violence is still with us. It's there, in the background. Are we making any headway? What tangible strides has Jamaica made in tackling this seemingly intractable problem?

Let's be clear: gender-based violence is not only violence against women and girls, although those statistics are frightening enough. It is violence against men, women and children, whether old or young, gay or straight, uptown or downtown, because of their gender. Consistently, for example, over twenty per cent of adolescent girls are reporting "forced sex" (let's call it rape). This is a fundamental human rights issue.

In numerous forums and seminars, we have agonized over the statistics (which, one senses, represent just the "tip of the iceberg") and reviewed the problems. Once the complexities of gender-based violence are identified and nailed down through discussions and analyses, then let's figure out where we can take steps forward, towards solutions.

Each factor - each bullet point - needs to be addressed separately. The forward steps might be hesitant and tentative at first. However every project or program - whether large or small - must contribute towards

this progress. Gender-based violence often remains something just under the surface; something whose presence we are always aware of. Now, we need to pull it out from under the carpet where it has been swept for too long.

As was noted in a recent forum, gender-based violence has a ripple effect in the society. It has a significant cost in terms of dollars, and is a barrier to economic development. It cannot be separated from the crime and violence that forms a backdrop in far too many communities, both rural and urban. It is part of that picture. It is also a part of the picture of HIV/AIDS, syphilis and other sexually transmitted diseases.

As Government officials love to say, a "multi-sectoral, multi-agency approach" is needed. It's a nice catchphrase, but true. Here's another favorite buzzword: "partnerships." Both these phrases underline the fact that lots of things need to be happening at the same time, in different areas but with the same goals, to reduce the prevalence of gender-based violence. Interestingly, it is starting to happen. Here are a few ways in which we are starting to move forward:

Social media has helped to raise public awareness, and several non-governmental organizations have been making excellent use of this medium, including J-FLAG affiliate Women's Empowerment for Change - WE-Change. One carefully crafted meme, photograph or short video can make a huge impact. With its rights-based approach, the advocacy group for lesbians, bisexual and transgender [LBT] women - which is still very young - has not shied away from the issue of violence - through its successful #KickOutGBV campaign, for example. A highlight of last year's International Day for the Elimination of Violence Against Women was WE-Change's "Orange Lights" - a coming together of survivors, friends and supporters,

who translated their experiences into poetry, prose and song. It was a powerful evening – not only cathartic, but also an exploration of the challenges, and the overcoming of those challenges. WE-Change has partnered with a number of organizations, including Mary Seacole Hall's Young Women's Leadership Initiative and other student organizations, to raise awareness in innovative and creative ways, on and offline. Offline activities tend to be very interactive, such as Mary Seacole Hall's Clothesline Project last year, where students and others designed and created vibrant messages on T shirts related to gender-based violence.

This is an area where social media is very strong: storytelling, and sharing.

Eve for Life, which works with young mothers living with HIV, has many stories to tell – not fiction, but reality. "Ashley's Diary," the powerful testimony of a girl who was raped by her uncle from the age of 12 – 15 years, is one example. Most of the girls Eve works with are survivors of rape, incest and violence; they have formed their own support group, "ROAR." Again, social media effectively plays its part.

But we need much more; civil society and government must collaborate far more closely - yes, we need those "partnerships" - towards the same goal. The 51% Coalition (Women in Partnership for Development and Empowerment) is currently engaged in a program funded by UN Women that includes conversations with rural and urban women. The discussions focus on human rights - including human trafficking, as presented by Professor Rosalea Hamilton's initiative Fi Wi Jamaica. The results of the Coalition's research, as well as recommendations, will be presented to Minister for Gender Affairs Olivia Grange at the end of the project. Again, the focus is on empowerment and solutions, in the context of strengthened women's leadership.

The role of law enforcement is critical. So, the Domestic Violence, Sexual and Gender-Based Violence Project (jointly funded by the British and U.S. Governments) launched on April 4 is particularly welcome at this time. It is in fact a continuation of an earlier program

that ended several years ago. Such training for law enforcement officers and other frontline responders needs to be continuous and ongoing in order to develop and nurture a different mindset, creating a protective culture of caring and compassion on the part of police officers and other public servants. The non-governmental organization Woman Inc, which for years has fought a somewhat lonely battle on behalf of survivors of gender-based violence, has for some time partnered with the Jamaica Constabulary Force (in particular with the hard-working Deputy Commissioner of Police Novelette Grant) to change police officers' approach to gender-based violence.

It is significant, however that after all these years, the island still only has one temporary shelter for women (and often their children) operated by Woman Inc in immediate danger, in Kingston. Jamaica needs at least one in each parish!

This takes us to the issue of political priorities. One hopes that the new administration is aware of the unmistakable connections between gender-based violence, economic development, gender inequality and social cohesion. Minister Grange stated at a recent meeting that the Bureau of Gender Affairs is currently drafting an Action Plan on gender-based violence. She intends to submit this for Cabinet approval by the end of May. The Minister has also stated that another shelter is a priority. The Sexual Harassment Bill, belatedly tabled in Parliament last December, is also a matter of urgency.

With so many public sector agencies and civil society engaged and ready to work together, a coordinated approach can and will eventually work. Meanwhile, here are a few things I would like to see happen. It's not an exhaustive list, of course:

- More small grant funding available for grassroots projects that will sensitize communities to the issue;
- More discussions at community level, not only at seminars where we are often "preaching to the converted:"
- A much stronger focus and more sensitive reporting - on gender-based violence in the traditional media:
- More "safe spaces" for survivors both physical and psychological, with much stronger psycho-social support;
- · Much more information for survivors and concerned relatives etc. re: resources available, where to report and so on:
- · More mentorship programs for young men and
- Build a network of trust, support and co-operation on the ground among the police, health workers, community members (families and neighbors);
- · Involve men and women, young and old, the LGBT community and family members of all ages in workshops, projects etc. Everyone is affected by gender-based violence;
- · More accurate and detailed data is needed on which to base programs.

So, it's not a question of taking "one giant step," as the astronauts said. All the players - those who can take action in some way, and that means all of us - must take a step forward. We must show up; we must volunteer; we must lend support, on a personal level or within an organization.

Where do we go from here? It's an uphill task, but we need to start climbing, putting one foot in front of the other, arm in arm. Many Jamaicans and organizations are paving the way. Go and check them out, and get involved.

# The Colour Foundation

olour Pink Group (CPG) was founded under a tree at Devon House by Jermaine Burton now Lady Jessica Burton. That was a product of her experience; being homeless and a part of the LGBT community, so she felt the need to create a group that advocated for the rights of Homeless and Sofa Surfing Gay Men, Men who have sex with Men and other bisexual men, and Transgender persons (GMT).



2016 will be celebrated as our 5th Anniversary, and CPG has made significant strides in the community. Through partnerships with Heart Trust NTA, CPG has offered vocational training to 30 homeless and sofa surfing GMT persons since 2013. Cohort 3 is scheduled to begin April 2016. Another partnership formed was with the AIDS Healthcare Foundation, who awarded us a grant to engage and train 23 homeless transgender women living in Jamaica. We were also tasked with creating a Trans Ecological Toolkit and a Reference Manual, which will assist these individuals by providing them with substantive information regarding transitioning, building self-esteem, and accessing services to meet their needs. These tools are the first of their kinds. CPG also created Workplace Environment Safety Tips (WEST) for Transgender Sex workers. This provides these individuals with tips and techniques on how to be safe while working.

Lady Jessica has passed on the baton to the new Executive Director, Ms. Kendra Frith, who with the help from the new Director of Projects and Planning, Mr. Akeem Vassel and the team will be taking CPG to the next level. Being the only organization whose main focus is to advocate for the homeless and sofa surfing population, we are mindful that there is much work to be done, but it is our passion for advocacy that will assist us in meeting our vision of a Jamaica that is free from prejudice, discrimination, injustice and oppression, while achieving our vision of guaranteeing community members access to Health, Education and Employment without discrimination.

### HIV/AIDS & Human Rights in Jamaica

### Reality or Rhetoric?

IV/AIDS is a communicable disease that we've heard about for decades. It used to be considered a death sentence until better research, education and \_\_\_advances in treatment improved quality of life for persons living with HIV (PLHIV). Coordinated efforts among international donors, the government via the National HIV/STI programme, and civil society groups, make HIV/AIDS one of the most supported public health issues. Does the LGBTQIA community, and specifically trans persons, benefit from this bounty?

#### What's the situation in Jamaica?

International aid as it relates to disease control and reduction has shifted towards more partnership with local government and civil society groups to implement programmes. In (i)July 2015, the Ministry of Health recently announced that The Global Fund-an international financial institution created to combat HIV/AIDS. TB and malaria-will invest in Jamaica's National HIV/STI programme for the next three years. PEPFAR (United States President Emergency Plan for AIDS Relief) will also fund the programme. At that press briefing, and recently at the World Learning Caribbean Grant Solicitation Management (CGSM) Programme, Ferguson placed the government's mission within the framework of human rights – he was committed to reducing stigma and discrimination. In naming vulnerable groups, it's important to note that he acknowledged the transgender community specifically: In the (ii) JIS report, JFLAG, along with the National AIDS Committee, and Eve for Life, are listed as groups in partnership with Nat HIV/STI programme. These are important steps – for far too long there has been no targeted research of the trans community. Trans women, especially, were grouped under MSM, leaving the problem obscured. However, prejudicial laws against sexual orientation and gender identity remain in such critical documents as the constitution; the Sexual Offences Act; the Offences against the Persons Act; and, in relation to (iii) sex work, the Constabulary Act and the Towns and Communities Act. This prevents the government from creating and implementing a truly comprehensive policy that would enable all Jamaicans to access the best healthcare possible. As we are stigmatised or invisible in the eyes of the law, it follows elsewhere. Released in 2014, the (iv) National HIV/STI annual 2013 HIV epidemiological profile conflated sexual orientation with sexual practices. Risk behavioral factors are described as "heterosexual practice" versus homosexual or bisexual. This limits the

usefulness of the data. If persons felt comfortable enough to provide more accurate personal data, government and civil society groups could create better profiles of the various sub-groups in the population and modify plans to better address and target their needs. Indeed, "44% of men reported with HIV (and 41% of men reported with AIDS)" did not disclose their sexual practices, which was partly attributed to such a reluctance.

There is no data provided on female "homosexual practice".

As it relates to gender, the situation is worse. TransWave is still trying to find the source of Minister Ferguson's statistics as it relates to transgender persons, for only "male" and "female" are covered in the MoH 2013 profile. (Is it local or international data?) There is a strange column in the sexual practices data table for "Unknown Gender" but the term is not defined. Without reliable data we cannot expect to get the best value from the millions donated. Groups like J-FLAG, Colour Pink, and Jamaica AIDS Support for Life (JASL) work to identify key population groups like the transgender community and collect data which can help to fill in the gaps. The Health Policy Project (funded by PEPFAR & USAID) run training workshops in the Caribbean to equip medical professionals to best serve transgender health care needs. However, the reality is that the government is the major provider for health care in the island. Civil society groups – who progress in an environment which hinders rather than enhances their efforts - can only work in complement to and not act as a sufficient substitute. Our regional medical universities, partlyfunded by CARICOM, ought to be at the forefront of research in this area.

While TransWave applauds the government's support of civil society organisations who address such marginalised groups as LGBTQIA and sex workers, its tendency to only address such groups within a HIV/ AIDS narrative only helps to "other" the community as victims and creates associations with issues perceived as "societal problems". It promotes stigmatisation. (It's a common complaint among trans activists groups in the region that they can only get funding for HIV/AIDS projects.)

The government should take its human rights

agenda to heart. Once Jamaica commits to respecting and honouring the inherent dignity in all citizens, everyone can be empowered to do the best work for it and each other.

For counselling, support or info on how to get tested:

J-FLAG Social Services: (876) 754-2130 JASL: (876) 925-0021/2; email: info@jasforlife.org

#### Neish McClean



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### How do I see Gender Based Violence

- Tracey Ann Mullings

or as far back as I can remember there have been stories about and reports of gender based violence. While men and boys are also at risk, it is our women who make up the majority of the numbers of people affected by GBV. The fact that our women and girls are constantly at risk is troubling and as much as we might try to deny it, gender based violence is by far one of the most common violations of human rights to date. It is also a major hindrance to global development as it affects the health – both mental and physical, wellness and security of many women and girls.

What is even more unfortunate is that victims of GBV, oftentimes do not speak out about the issue because it is still considered taboo. This can lead to mental health issues such as depression and anxiety and poses great risks to sexual and reproductive health such as unwanted pregnancies, unsafe abortions which are sometimes carried out by unlicensed or untrained individuals and numerous sexually transmitted infections including HIV. The worst possible effect however, is that GBV can even result in death.

Let us look a little closer at this issue. What exactly is gender based violence? Research and Communication Coordinator at Jamaica Aids Support for Life, Nicolette Jones, defines GBV as "any act which is carried out by an individual to intentionally harm another person whether physically, emotionally, psychologically or otherwise based on that person's gender identity".

According to the World Health Organization (WHO), it can be defined as "any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life." While I'm not sure of the actual numbers because they change daily, it is my opinion that GBV is far too common in Jamaica and the wider Caribbean.

Organizations such as Jamaica Aids Support for Life (JASL), The Bureau of Women's Affairs and Jamaica Federation for Lesbians, All-Sexuals and Gays have been doing great work in Jamaica in order to eradicate the presence of GBV. I recall a silent protest executed in Half Way tree in the latter part of 2015 by JASL under the theme, #SilenceSpeaks. My only wish is that all these organizations continue to do good work. My wish for Jamaica and the world over is that GBV will become a thing of the past and our affected women will stop being afraid to share their experiences for fear of being ridiculed or worse - targeted for shedding light.

No more domestic and physical violence. No more emotional violence. No more sexual violence. No more threats to the health and wellness of women. We must all join the fight, if we are to move forward. Every hand helps another.

### THE MEN OF J-FLAG



J-FLAG Changing the
HIV Treatment and
Support Approach

he Health team has been over the last three years working with partners such as Ministry of Health HIV and STI Programme, The National Family Planning Board and Civil Society partners through efforts to increase knowledge and understanding about sexual orientation, homophobia and how existing policies and laws impact on and increase the vulnerability of MSM to HIV transmission as well as promote the rights of LGBT people.

The programmes are targeted and tailored towards the sensitization of healthcare workers and users of healthcare facilities, policy makers and technocrats to foster the development of an enabling environment where LGBT people's right to health are promoted in an effort to safeguard their health and well-being by increasing access to healthcare among the population.

### In our programme year 2014-2015 the following were achieved by a hardworking and dedicated team:

- 1. Fifty-Three (53) Non- Medical Healthcare workers trained
- One Hundred (100) Medical Healthcare workers trained
- 3. Twenty-Five Healthcare Workers Sensitized about transgender people and their health needs
- 4. Three Hundred and Ninety-Four service users from 6 healthcare facilities sensitized about the rights of LGBT people and the Ministry of Health Client Complaint Mechanism
- 5. Twenty-Five (25) advocacy meetings conducted with Thirty-Six (36) Ministers of Government, other parliamentarians, business leaders, technocrats, policy makers and Civil Society.
- 6. The following Policies/protocols were developed/revised:
  - Guide on how to develop and maintain LGBT friendly public health facilities and programmes
  - ii. Screening Guidelines revised
  - iii. Standards developed for the Treatment, Care and Support of LGBT Clients
  - iv. Transgender healthcare guidelines developed for healthcare workers
- 7. Conducted 18 outreach sessions with civil society partners and healthcare providers to promote the Ministry of Health Client Complaints Mechanism to increase reporting of human rights violation against LGBT people
- 8. Sensitized 613 persons on issues affecting LGBT people in public health sector (around HIV) at two HIV/AIDS forums

### Plans for 2015-2016

- To conduct a situational analysis at eighteen (18) health facilities that offer services to the LGBT population
- 2. To develop/revise at least three policies/ protocols that will help to improve access to health services for LGBT people
- 3. Develop Guide for HCWs on interacting/ engaging with Key Population
- Develop a Social Media Campaign to Promote HIV Testing and Counselling
- To develop an advocacy plan for NGOs to advocate for tailored programmes in healthcare facilities for LGBT population
- 6. Continue to increase knowledge of healthcare workers on the rights and dignity of LGBT persons, including LGBT people living with HIV
- 7. To train healthcare workers on protocols/ policies/ codes of conduct related to reducing stigma and discrimination
- Continue to sensitize service users, including LGBT persons on the right to access HIV information, programmes, commodities and services
- 9. Continue to promote the Ministry of Health's Complaints Mechanism amongst service users to increase reporting of human rights violations against LGBT people
- 10. Conduct advocacy training sessions and 10 MSM and transgender persons, 10 NGOs staff to advocate for tailored programmes in Healthcare facilities

- Develop a human rights curriculum to standardize human rights sensitization and capacity building training for NGOs, CBOs, PLHIV and key populations.
- 12. Convene Community Human Rights Literacy Sensitization Sessions in 5 Parishes with 1000 persons





## THE NEW ERA OF J-FLAG

### PRiDEJA Magazine

# Premier



#### Hi Ashley can you tell us a little about yourself?

Here are 5 words that best describe who I am: Brave. Positive. Fashionista. Fun. Loving

### How did you identify in your childhood/ teenage years and what were some of the challenges you faced with your gender identity throughout your youth?

As a child growing up I always felt like a girl. I was always uncomfortable to do boy stuff but as I grow older I realize I am definitely a girl on the inside. Everything I do is natural. I was born this way.

### How has your identity, sexual orientation and gender expression changed or progressed through your adult-life?

Nothing much has changed as it relates to my gender identity and sexual orientation. I am more confident within myself and the decisions I made are truly how I feel in my heart.

### What is it like to identify as a transgender woman, living and working in Jamaica? What are some of the challenges you face?

It's very difficult because contrary to popular belief, trans women are not sex objects and prostitutes. This is not true. The opportunities are very limited. This is my life and I'm 100% responsible for every decision I make so I have to do whatever it takes to survive without selling my body. No judgment to those who choose that path though.

### Tell us about your blog and your professional journey?

I've always loved fashion and dressing up growing up and because I never got to graduate from high school to become an accountant as planned. My love for fashion never dies so I decided to start a fashion blog in late 2011. With me being consistent with my blog it has given me alot of opportunities some of which I capitalize from. I just want to keep on striving and dream big no matter what challenges or obstacles I may face ahead in life.

### Do you have a support network? What are some of the resources that help you navigate life in Jamaica as a transgender woman?

My ONLY support is me, myself and God. No one gives me anything. Everything I achieve thus far is me believing in myself and go out there and making a way.

### What are some of the changes you wish to see regarding the accessibility to healthcare for transgender men and women in Jamaica and the wider Caribbean?

One of the most important changes is I would love to see is for trans women to be able to get hormone treatment here because as it is right now I don't know of anyone or doctor that does that offer treatment of that kind in Jamaica.

#### Do you face any other challenges you wish to discuss further?

I don't really face any other challenges and I'm thankful. I get criticism everyday when I'm going about my daily business. It's my normal now because I'm grown and I have a strong spirit.

### What advice would you give to transgender men and women living Jamaica and the wider Caribbean?

Stay in school. Get an education. Believe in yourself. Don't worry too much over people's words. It's powerless and does not matter.

Visit Ashley's blog at http://ashslay.blogspot.com/

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## LGBT Youth Social Justice Advocacy Programme

Building Capacity | Boosting Participation | Bolstering Development

FLAG's youth project titled "Facilitating the Empowerment of LGBT Youth to Participate in Social Justice Advocacy" is funded by the UK-based charity organisation Comic Relief, and aims, among other things, to build the capacity of LGBT youth and allies around human rights, public policy, law and programme development to advocate and facilitate their meaningful and effective participation in policy and decision making bodies, as well as to aid in their overall development.

The programme arose out of evidence that suggests that there are low levels of LGBT youth participation in social justice advocacy and decision-making. Additionally, LGBT youth feel disenfranchised and are uniquely affected by stigma, stereotype, hate crime, bullying and harassment, and to date there has been no single programme that comprehensively addresses the challenges they face. Essentially, they have not been fully empowered to challenge the status quo of stigma and discrimination, of violence and all forms of homophobia and transphobia at the grassroots and policy levels. As such, the specific objectives of the programme are:

- To build the capacity of LGBT youth around human rights, public policy, law and programme development to advocate and facilitate their meaningful and effective participation in policy and decision making bodies.
- To raise awareness among at least 150 LGBT persons and allies about human rights, and their role in engendering change by engaging policy and decision making spaces on key issues that affect the community.
- To raise awareness among 360 persons about LGBT human rights issues and the impact of stigma and discrimination.
- To reduce negative attitudes towards LGBT persons in at least 250 persons

In order to achieve the objectives, the programme has a number of different components that are designed to work in tandem to make the participants rounded advocates who utilize evidence-based approaches in their advocacy. Some of the activities being pursued over the lifespan of the programme are:

- Capacity Building Training workshops
- Community Sensitisation & Empowerment Sessions
- Focus Group Discussions
- Parliamentary Visits
- Mentorship Programme
- Volunteer Programme
- Internship Programme



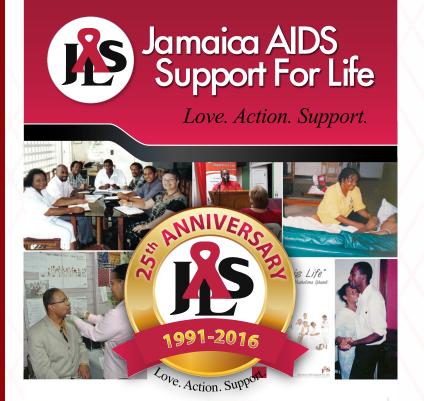
The programme uses a multifaceted approach inclusive of, but not limited to experiential learning, case study, role play, simulation, field visits, discussion, and cooperative learning to meet the needs of participants. Using this multifaceted approach also provide opportunities for LGBT youth and allies to facilitate their own empowerment in an effort to create a platform for action for the LGBT community.

Year one commenced in September 2015 and will end in August 2016. There are 28 participants, divided into two cohorts in the programme and they are all between 18 and 24 years old. The participants come from diverse backgrounds and realities, including gender, sexual orientation, education and geographic location.

Being the first year of the project and a pilot of sorts, there have been some lessons learnt. One of the most instructive lessons learnt thus far has been the importance of forming new partnerships and strengthening existing ones as the programme requires support from a wide cross-section of persons, groups, organisations, institutions, businesses, and government agencies.

The young people enrolled in the programme have shown tremendous growth and continue to challenge themselves. We are pleased with their hard work and excited about their continued dedication to the objectives of the programme and to their personal development.

Karen A. Lloyd Youth Coordinator/ Project Manager



"...Celebrating 25 years of preserving the dignity and rights of persons living with HIV and AIDS, and fighting against the spread of the epidemic in Jamaica."



### National Family Planning Board's S&D and Gender Mainstreaming Interventions

ome of the barriers that limit and or hinder access Reproductive Health. Among the outcomes were law to HIV and other SRH service provision and delivery have been identified as: (i) stigma and discrimination; (ii) the lack of privacy and confidentiality; (iii) limited gender sensitive and adolescent-friendly legislation and policies; and (iv) limited knowledge and understanding of rights and available services and (v) gender inequality, harmful cultural norms and social marginalisation of the most vulnerable populations. As such, the National Family Planning Board has developed high quality evidence based interventions/programmes, targeted at addressing these challenges characterized by a strong organizational strategy principle of gender mainstreaming in order to achieve its vision of "All Jamaicans enjoying optimum health in an environment where their sexual and reproductive rights are respected, protected and fulfilled."

This emphasis on the right to health for all, which includes reducing stigma, as well as pursuing the removal of legal barriers to access health care, and the provision of health services in a non-discriminatory manner. The Enabling Environment strategy employed in Jamaica was for sub-national partners to pursue and implement anti-discrimination and protective practices and policy guidelines- derived from human rights standards- to eliminate stigma, discrimination and violence that impede greater access of vulnerable and key population to integrated HIV and Sexual

reviews, policies and practices; greater multi-sector dialogue among policymakers, government leaders and civil society, and meaningful engagement of stakeholders from key population communities that support the implementation and scale up of services for all populations in Jamaica.

The national response benefitted from the establishment of a National Enabling Environment and Human Rights Technical working Group which was established in January 2014. The group was established to strengthen and coordinate the collaboration between agencies and organizations advocating for a supportive environment that is guided by human rights principles while setting the national EEHR agenda. The EEHR Unit/NFPB provided technical support to a Youth and Adolescent Technical Working Group being managed by UNICEF. The GIPA Capacity Building Programme is an approach of the MOH and NFPB to empowering PLHIV (especially key affected populations) by strengthening their capacity for meaningful involvement and participation in the response to reduce stigma and discrimination.

A three-pronged approach was utilised to address the reduction of stigma and discrimination in the health sector: building awareness of healthcare workers and their clients on a human rights approach to the delivery of health services, coordinating partnerships geared to strengthen and improve awareness of the MOH and RHA Complaint Management System to increase demand for accountability and redress geared at reducing stigma and discrimination and advocating for a bisexual men. systematic approach to monitoring the implementation of policies, protocols and quidelines through policy monitoring workshops with health care workers. The MOH and NFPB conducted an assessment of service delivery and the Complaint Management System in the Western Regional Health Authority. The assessment report included recommendations to guide the revamping of the orientation programme in order to ensure HCWs are sensitized on confidentiality and providing "key population and PLHIV friendly services." The findings and recommendations served to guide advocacy for the revision of the WRHA's orientation programme and implementation of a pilot project in all Regional Health Authorities.

The NFPB supported the MOH to develop Health Information Protection Regulations/Codes of Practice Policy Provisions and a gap analysis of existing provisions related to the protection of personal health information for the health sector to be incorporated into National Data Protection Act for Jamaica to ensure the protection and ethical use of personal health information and the rights of patients. The NFPB is in the process of public consultations geared at completing the revision and updating of the National HIV/AIDS Policy by 2016. The Ministry of Health and the National Family Planning Board facilitated the establishment of JFLAG's partnership with the Regional Health Authorities implemented through a project entitled "Mitigating Risks and Enabling Safe Public

Health Spaces for LGBT Jamaicans." The intent was to foster the development of an enabling environment where LGBT people's right to health are promoted and respected and LGBT people are able to seek essential HIV and AIDS services and support free from stigma and discrimination. Through this partnership. healthcare providers were trained or sensitized in how to effectively provide health care services to gay and

Furthermore, the NFPB supported the UNDP in providing sensitization sessions to judges of the Court Management Services/MOJ which examined human rights issues in relation to PLHIV 'and other vulnerable groups to HIV transmission such as LGBT individuals, Sex Workers, Women and Girls; as well as sessions to other stakeholders on the availability and accessibility of social protection mechanism, minimum/ standard package of services for PLHIV and the roles of communities in monitoring and assessing the quality of

The NFPB supported the engagement of a Project Officer to guide the development of HIV policies for denominations and expand the multi-sectoral response to HIV in Jamaica. In 2015 through a multi-sectoral Steering Committee comprised of Government (NFPB), civil society (Caribbean Vulnerable Communities Coalition - CVCC), international development partner (HPP) and academia (UWIHARP) a one-year Policy Monitoring Pilot Project was implemented that allowed CSOs and representatives from key populations, to more effectively participate in policy dialogue and decision-making processes to reduce stigma and discrimination. Between September - November 2015, the National Family Planning Board conducted 15 consultations, reaching 539 participants on the Jamaican human rights framework with the intent of sensitizing the populace on human rights and garnering

their feedback on the proposed establishment of a National Human Right Institution (NHRI) by the Ministry of Justice. The NFPB finalised a Redress Directory of Services in 2015 which is designed to benefit individuals and communities whose SRH rights are threatened or violated. A total of 250 Police recruits were reached in 2015 with information on Basic HIV Facts, Stigma and Discrimination and human rights. The Jamaica Constabulary Force (JCF) Diversity Policy was utilised to engender a human rights approach to service delivery. The NFPB also collaborated with the Private Security Regulation Authority (PSRA) and provided financial support to effect consultations that would facilitate the development of a Code of Conduct for private security officers

Efforts to address gender inequality are evidenced through support from UN Women, Phase I (2015) and Phase II (2016) to undertake a Gender Empowerment Pilot Project. The project entails sensitisation sessions on self-esteem, goal settings, gender and social impact, STIs inclusive of Zika awareness and impact, HIV and condom negotiation, contraceptive methods, dealing with S&D, understanding human rights, development initiative - e.g. resume writing, seminars on small business operations, facilitating the opening of credit union and savings accounts, exploring career opportunities, etc. There is also a parenting workshop, men's and women's health issues (male and female anatomy). In addition, the project encourages the greater involvement of men/partner support to address men's norms and behaviours by constructively engaging men in advancing gender equity, preventing violence, coercion, addressing alcohol and substance abuse, cross-generational sex, multiple concurrent partnerships and by promoting sexual and reproductive health for themselves and their partners. Through the project Introductory to Policy Monitoring Workshops have been conducted in which 60 health care workers have participated been exposed to information on Gender Definitions, Understanding LGBT issues and Monitoring Policies with gender lens.

This initiative is also supported by ongoing parenting workshops led by the Prevention Unit supported by the NFPB Counsellors working with youths in and out of schools, developing the capacity of Guidance Counsellors and other stakeholders, Male Empowerment Workshops, providing financial support to select populations to facilitate vocational training/education to improve their ability to access services, support themselves and their children, and avoid coercive and high risk activities that increase vulnerability to adverse SRH and HIV.

Other upcoming interventions include: couples counselling; collaborating with stakeholders to develop and implement protocols to identify women with signs and symptoms indicative of intimate partner violence (i.e. clinical inquiry); provision of appropriate clinical care and referrals to support services; the inclusion of GBV in pre-service curricula for all categories of health providers; as well as the provision of a gender mainstreaming monitoring tool for the health sector in 2016 to ensure that programmes developed and services offered will not be gender neutral but gender specific. The NFPB has committed to assisting JFLAG in proposed community sensitisation on human rights that are planned for 2016. Through assistance from USAID and Global Fund, upcoming interventions in 2016 will seek to improve the employability skills of PLHIV and key populations and discussions are underway to strengthen the provision of psycho-social services to the various communities.

# Scial



Javion Nelson Director of Projects & Strategy shares a photo with Ambassador Susan Rice and other activists at the Human Rights Campaign Global Summit in Washington



Guests share a tranquil moment at the WE-Change #RememberingRwanda event



J-FLAG staff, community members and allies share a group photo at the Kingston edition of their #PlanandChill community Lymes

Jaevion Nelson, Director of Projects & Strategy, center right

shares a photo with activists at the Human Rights Campaign

Summit in Washington DC





Members of the WE-Change team shares lens with Nadeen Spence of Mary Seacole Hall and guests at their #RemebreingRwanda event.



Abbey Sade shares a photo with a friend at Beach Jouvert 2016



J-FLAG volunteers share a group photo at the JET Palisadoes beach cleanup



Latoya McNugent, Director of Education and Training at J-FLAG and Founding menber of WE-Change snaps a photo at the UN #CSW60 Diverse Women event in



Blogger Emma Lewis shares a phto with J-FLAG volunteers at a Birdwatching event



Dane Lewis, right shares a photo with David Issacs 'DJ David' at his Velocity event



The J-FLAG teamshared a group photo at the Sagicor Annual Sigma 5K Run



J-FLAG staff and volunteers share a group photo at the Global Shapers #HashtagLunchBag event



Participants of the J-FLAG Youth Project shares a photo with Taitu Heron of UN Women after their Social Justice Advocacy Policy Training.



Nicolette Bryan, Youth Porgramme Officer of J-FLAG shares lens with a friend at Beach Jouvert 2016





J-FLAG staff and vlounteers share a photo at their Hellshire coastline beach cleanup



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