INFORMATION MEMORANDUM

TO: Sarah-Ann Lynch, Acting Assistant Administrator, LAC Bureau

FROM: Rebecca Robinson, Acting Mission Director

CC: L. Elizabeth Ake, Program Analyst, LAC Bureau

SUBJECT: Revision of Results Framework and Extension for USAID/Jamaica CDCS

DATE: August 14, 2017

For your information, this memo outlines the main findings and recommendation from Jamaica’s mid-course stocktaking exercise in January 2017 and informs you of the update of USAID/Jamaica’s Country Development and Cooperation Strategy (CDCS) that:

- Changes Intermediate Result 3 to reflect a revised focus of the President’s Emergency Plan for AIDS Relief (PEPFAR) on the prevention, treatment and care cascade for key populations affected by HIV/AIDS.
- Extends the end date of the strategy from FY 2018 to FY 2019 per memo dated April 26, 2017 from the Latin America and Caribbean (LAC) Bureau.

Background

The Mission’s CDCS was approved on September 6, 2013. The accompanying Performance Management Plan (PMP) was approved on July 14, 2014. At the time that the CDCS and PMP were developed and approved, the PEPFAR program was undergoing a strategic shift in direction led by the Office of the Global AIDS Coordinator (OGAC). That shift concluded with the approval of the FY 2014 Regional Operational Plan for the Caribbean Regional Program on November 7, 2014, and January 29, 2015.

January 17 through 20, 2017, USAID/Jamaica held a Mid-course Stocktaking Exercise to assess progress made in implementing its CDCS.
Discussion

CDCS Mid-Course Stocktaking

Through discussions with Mission staff, U.S. Embassy Staff, and stakeholders, the following are some of the conclusions from the mid-course stocktaking exercise:

- The current CDCS is focused and looking at the right issues. USAID/Jamaica should continue its activities, but perhaps increase focus on economic growth.
- The IRs should be broadened to be more inclusive. They also need to be more measurable.
- Coordination with civil society and the private sector is important. We should look into growing private sector’s involvement and engaging more with other donors.
- It is important to engage with stakeholders on youth and job creation.
- USAID/Jamaica needs to be more strategic in how it works on integrating gender in its activities. Specifically we need to consciously look at different ways to engage all genders - including boys and men, not just women.
- USAID/Jamaica should look at ways to better link the IRs, including how we work in the most vulnerable communities to reduce the levels of violence so that other efforts can take root.
- USAID/Jamaica needs to figure out means and strategies for translating our work on the ground into actionable policy.

In response to the findings, the Mission has started a Youth Working Group and a Gender Working Group to look at strategies for better integration into activities and engaging with a variety of stakeholders. Additionally, USAID/Jamaica will hold a Partners’ Meeting before the end of FY2017 as part of a strategy to engage with stakeholders. Lastly, the Mission is in the process of amending its Caribbean Basin Security Initiative Project Appraisal Document (PAD) to respond to the emerging concerns of the local citizen security landscape.

Updates to the CDCS

Based on PEPFAR’s strategic shift in Jamaica, the CDCS Results Framework (RF) and PMP were amended. Figure One provides the updated RF.

Under CDCS Intermediate Results (IR 3), “Prevalence of HIV in Key Populations Reduced,” the new sub-IRs are:

- Access along the continuum of Prevention, Care and Treatment among key populations Increased (Sub-IR 3.1); and
- Capacity of Entities Strengthened and the Enabling Environment for Key Populations and People Living with HIV (PLWHIV) to Access Services Improved (Sub-IR 3.2).
Sub-IR 3.1, “Access along the Continuum of Prevention, Care and Treatment among key populations Increased” encompasses activities with Ministry of Health (MOH), Health Policy Plus (HP+), and LINKAGES to scale up activities that address gaps along the continuum of prevention, care and treatment for key populations particularly in locations where 80% of PLHIV were diagnosed. Activities will be scaled up at hotspots that will provide HIV and Sexually Transmitted Infection (STI) risk reduction education and at the Regional Health Authorities where Men who have Sex with Men (MSM), Transgender (TG), and Female Sex Workers (FSW) risk reduction interventions will be increased.

Under Sub-IR 3.2, “Capacity of Entities Strengthened and the Enabling Environment for Key Populations and PLHIV to Access Services Improved”, USAID/Jamaica will seek to build the capacity of civil society partners and the Ministry of Health to support their HIV prevention work with key populations, including: FSWs, MSM, and PLWHIV. Sub-IR 3.2 includes activities implemented by MOH, HP+, and LINKAGES related to policy development, M&E system strengthening, data collection and use, and strengthening systems for reporting and redress of Stigma and Discrimination (S&D), at the policy level.
**CDCS Extension**

Pending additional information on budget and policy priorities of the new administration, all Missions worldwide will have their strategy extended by up to two years and be granted a waiver from meeting the March 2018 deadline for a strategy to be in place. As such, Jamaica’s CDCS was extended on April 26, 2017 through a memorandum from the LAC Bureau.

The Mission has updated the CDCS to reflect the new Results Framework and the new end date of the strategy.