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## Sexual and Reproductive Health and Rights Spotlight Report on St. Vincent and the Grenadines

### Introduction

#### The VNR and St. Vincent and the Grenadines

From 1979, **Saint Vincent and the Grenadines** has been a Sovereign State that is Anglo-Caribbean. It is an island archipelago in the Lesser Antilles island arc in the southeast Windward Islands, which lies in the West Indies at the southern end of the eastern border of the Caribbean Sea where the latter meets the Atlantic Ocean. The small island nation is a member of the United Nations and has been newly appointed to the UN Security Council in 2019; it is also a member of the Group of Latin American and Caribbean Countries (GRULAC), CARICOM and the Organization of Eastern Caribbean States (OECS). The country took part in the previous Universal Periodic Review cycles and is earmarked for the third in the year 2021. However, the purpose of this report is with relevance to its upcoming first **Voluntary National Review** (VNR) on the 15<sup>th</sup> July, 2020 to the High Level Political Forum, under the auspices of the Economic and Social Council.

“Voluntary national reviews (VNRs) are an important tool, rolled out globally, for demonstrating how far countries are progressing toward realizing the Sustainable Development Goals (SDGs). The theme of this year’s forum will be *“Accelerated action and transformative pathways: realizing the decade of action and delivery for sustainable development”*. VNR’s are designed in a manner to allow the country to share its experiences, including successes, challenges and lessons learned with a view to accelerating the implementation of the 2030 Agenda.

The focus of the Spotlight report is on the SDGs 3: Good Health and Wellbeing, 4: Quality Education and 5: Gender Equality, respectively. But before we look at each from the standpoint of civil society please permit me to shed some light on the overall context from a country perspective.

With the advent of the COVID-19 pandemic the obvious barriers and obstacles which limit the implementation of Agenda 2030 can only be expected to worsen in light of the socio-economic decline. With the gaps between CSOs and Governments expected to widen, we can only hope a proactive and dynamic approach can steady the tide. This initiative is one that must be championed by youth energy with the support and guidance of the more experienced, providing a positive atmosphere and environment to build the capacity of young people. This

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report has been prepared by a youth advocate from the Caribbean [RHRN platform](#) that centers young people as drivers of change.

For the purpose of this review four major government ministries were approached for insight as to the proceedings for the VNR process. Namely the Ministry of National Mobilization, Social Development, Family, Gender Affairs, Persons with Disabilities and Youth, Ministry of Health Wellness and the Environment, Ministry of Education, National Reconciliation and Information, and the Ministry of Finance, Economic Planning, Sustainable Development and Information Technology.

- In St. Vincent and the Grenadines the unemployment rate for 2018 stood at **19.76%**, a **0.03%** increase from 2017. According to a report published by the UNDP in 2019, “the continuing sluggishness in economic activity, especially in manufacturing, tourism and the distributive trades, coupled with the ongoing difficulties in bananas' agriculture, contributed to some stagnation in the levels of employment.” **The youth unemployment rate as reported recently by the Youth Affairs Department stands at 40% of the total unemployed.**

Unemployment is seemingly one of the major challenges that confront the Government of St. Vincent and the Grenadines.

- If this issue is left unaddressed, it would not only be a challenge for the reason that where there is no income there is poverty. Poverty creates a burden of debt leading to economic and social problems. The trickle-down effect of this high level of unemployment can also be recognized on a daily basis in service provision, especially in healthcare. One who is unemployed often struggles to afford the best healthcare on offer and the government of the day, despite its efforts, has challenges coping with the expansive demand of the country's healthcare system. The Government has increased healthcare expenditure yearly since it has been in office. From \$50.6 million in 2001, expected expenditure is \$103.7 million in 2020. Healthcare employment moved from 66 doctors, to now 113. From 526 nurses, to 678. We spent \$6.9 million on medicine, now we spend \$15.4 million.
- However, due to a lack of lasting networks between relevant government departments, NGOs, and CSOs at one point or the other, the level of control and room for advancement pertinent to reaching minorities is daunting, but it is a challenge both are willing to embark on. There is simply a need for compromise and more transparency with communication. Unfortunately, the many gaps within our legislation also add to the ever mounting pressure where healthcare is concerned; especially regarding Sexual and Reproductive Health and Rights.

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Abortion is still illegal, minorities such as the LGBTQ community have limited provisions for protection by law and Comprehensive Sexuality Education (CSE) is still absent from the education curriculum.

- Historically, St. Vincent and the Grenadines has been a very guarded country where the laws surrounding Sexual and Reproductive Health and Rights are concerned. Even more so where general human rights for minorities such as the LGBTQ community are concerned and the laws relevant to abortion and Comprehensive Sexuality Education. **The country's constitution remains enshrined by the colonial laws which Great Britain herself has since moved away from.** Despite many amendments over the years, the laws around SRHR remain predominantly the same. There have been many recommendations from various treaty bodies, and members of the UN towards changing such laws.
- *"The CEDAW noted that abortion was illegal except in cases of rape, incest, risk to the life or physical or mental health of the pregnant woman or severe foetal impairment, as stipulated in section 149 of the Criminal Code. It recommended that Saint Vincent and the Grenadines remove penalties imposed on women who undergo abortion and ensure that section 149 of the Criminal Code is properly implemented to guarantee access to legal and safe abortion in cases of rape, incest, risk to the life or health of the pregnant woman or severe foetal impairment. It also recommended that the state ensure that women and girls have confidential access to adequate post-abortion care, including in cases of backstreet abortions. (Para 54)"* extract from the UPR Sexual Rights Database. **This recommendation was rejected.**
- At the 11<sup>th</sup> session of UPR May, 2011, Brazil recommended to St. Vincent and the Grenadines changing the criminal laws on same sexual practices: to consider revising its Criminal Code, in particular with a view to decriminalizing sexual relations between consenting adults of the same sex. **This recommendation was rejected.**
- The greatest contributory factor to such resistance in legislative amendments is the strong influence of the church on the ideals of the citizens of the country; namely the catholic and Anglican Churches alongside the cohesive movement of the Christian Council.

**Women and youth** Where women and youth are concerned there have been an increased number of women holding positions in important spaces of government. **In fact over eighty percent (80%) of the permanent secretaries, a post held by an officer responsible for administration in each department, are women.** The present representation of the Queen, the Governor General is her Excellency Susan Dougan, a female. Prior to this every single Governor General was male. We have also maintained female senators in the house of parliament

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though largely outnumbered by male Ministers and senators alike. Our Chief Medical Officer that was very active during the COVID19 pandemic is also a woman, along with the Cabinet Secretary and Deputy Speaker of the House of Assembly. Hence in regard to prominent and influential positions within governance women do play a role, though the extent of that role is debatable.

- With regards to youth development, the government provides education opportunities through scholarships to study locally and abroad, notably the tuition scholarship. There has been an increase in vocational training opportunities and even more recently the inception of the PRYME programme which provides grants for young small business owners and entrepreneurs. There are also the SET and YES programmes which provide internships for a limited number of young people with the requisite qualifications.

Let's take a look at the works of the relevant pillars of government where healthcare, education and rights of minorities are addressed, then the works of the various CSOs under those pillars and their accomplishments and recommendations. We will also analyze the laws governing these components of SRHR as well as highlight the efforts and challenges of CSOs as we dive deeper into this report.

The method used for gathering data included emails to various CSOs and government departments, in person interviews, research via the net and conversations via the telephone. The questions asked were based on the structured questionnaire used to gather data for the country's VNR. This format was shared with me by an economist working on the VNR.

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## Gender Affairs Department

Let's have a look first at the Gender Affairs Department. The department was open to sharing a list of programs which are continuously active with respects to each goal. They are:

### **SDG Goal 1- No Poverty**

- Single Parents Programme – Social Empowerment Programme for single persons leading households. Over 55% are females. Provide interventions, counseling, cash transfers, capacity building and self-sufficiency.
- Teen Mothers Programme- geared towards adolescent girls that got pregnant and dropped out of school. Provide them with means to get back into school. Therapeutic intervention and cash assistance.

### **SDG Goal 4 - Quality Education**

- Teen Mothers Programme.

### **SDG Goal 5 – Gender Equality**

- Victim Support Programme – Victims of domestic violence, gender based violence, gain access to justice. However, the Domestic Violence Act 2015 does not provide inclusivity of the LGBTQ community.
- The department however, does assist with some level of cash for LGBTQ. Also where advocacy is needed.

### **SDG Goal 10 – Reduced Inequalities**

- Positive Reinforcement Programme for the Rehabilitable – perpetrators of domestic violence can be rehabilitated through counseling.

### **SDG Goal 16 – Peace, Justice and Strong Institutions**

- Anti-Violence Campaign.

### **Major achievements of the Department programmes**

- Undertaken a comprehensive review of the sexual offences provisions within the Criminal Code that discriminates against women, girls and vulnerable groups.

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- The economic and social empowerment of vulnerable groups.

**Increased access to educational opportunities and tertiary level education for teen mothers using the second chance initiative.**

## **Challenges:**

- Limited financial and human resources that impede the implementation of current and desired programmes.
- Low priority given to gender equality and gender mainstreaming that is cross-cutting across all SDGs.**

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## The programme/ initiatives /solutions proposed thus far to advance progress towards achieving Goals.

- The development of a Monitoring and Evaluation toolkit that incorporates data collection that would improve decision-making and assist in the development of national reports that can be validated.
- The prioritization of gender equality which must be considered and mainstreamed across all sectors.
- The identification of gender focal points across agencies/sectors to ensure gender mainstreaming.

## Lessons Learned:

- The need for collaboration with key stakeholders (national, regional, international) that share common goals.
- The establishment of a Gender Equality Commission (formerly National Commission on Gender-Based Violence) that serves as a national oversight body in promoting and guaranteeing equality for all.
- The need for extensive stakeholder consultation/engagement during the entire process of programme development, implementation and evaluation.

The Gender Affairs department works under the guidance of the **Domestic violence act 2015**. It came into effect from the 16th of November, 2016. The Act provides greater protection for victims of domestic violence and strives to make provisions for the granting of protection orders. **Unfortunately, this act does not provide for LGBTQ claimants. To be more precise Part 1 of Act, Preliminary states: “Cohabitant” means a person who is living with a person of the opposite sex as a husband or wife although not legally married to that person. There are no provisions for same sex couples or LGBTQ persons. This section of the law should be tasked for amendments.**

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There is also the **Child Justice Act 2019** but it has not taken effect as yet. Despite the limitations by law, the department does ally itself with activities geared towards assisting the LGBTQ where gender equalities, advocacy and education is concerned. The most notable example is the realization of a Human Rights, Gender and Sexual Diversity Training Toolkit which was facilitated by the Gender department in collaboration with the SVG Plan Parenthood Association and Vincy Chap, an LGBTQ organization in St. Vincent and the Grenadines. The department has a connection to civil society due to its presence on committees such as the National Adolescent Steering Committee where it has a strong voice through representation by the Gender Coordinator. It is evident that if not for the limitations within the law and policy that under primed leadership a lot more can be done. That said, the department deserves praise for the continuous works done with struggling young women within SVG, alongside notable mentions such as the Guadeloupe home for girls and the Marion House. The Gender Affairs department shared a document which assesses the Sexual Offences Laws in SVG and concludes that the current legislation suffers from a number of key deficiencies, including:

- A general lack of gender neutrality across the sexual offences provisions and thus the existence of discriminatory provisions on the basis of sex, age and sexual orientation;
- **No explicit criminalization of rape in marriage;**
- The offence of rape is narrowly defined and does not cover all forms of sexual penetration;
- **The language used throughout the sexual offence laws is outdated reflecting the historical conception of sexual assault being a crime against morality and modesty;**
- **Consensual same-sex sexual activity between adults in private is criminalized;**
- Discriminatory and degrading treatment of people living with disabilities, including the criminalization of consensual sexual activity with people with disability and the use of derogatory language; and there is a lack of consistency in ages of consent, and with no appropriate close-in-age defenses to avoid criminalizing consensual sexual activity where one or both people are under the age of consent and they are peers. **We move on to a CSO that has built the capacity of many women and young men alike in SVG, the Marion House:**

Marion House is a non-Government, not for profit, professional Counseling Centre that offers a wide range of services to the Vincentian public through “walk in”, individual, group, parent, family, employer Court, or institution referral.

Marion House is the ONLY “WALK IN” Counseling Centre in St Vincent & the Grenadines. Due to demand for its services, it is locally, nationally, regionally and internationally recognized and therefore receives tremendous credit for its productivity and often funded by reputable funding institutions.



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## Mission

“A presence of people who care, guiding the individual on the road to wholeness”

## How Does it Function

Policy decisions, inclusive of employment and termination of staff fall within the jurisdiction of the Board of Directors, headed by a Chair. Administrative matters of a day to day nature are the business of the Director. However, any policy matters pertaining to binding the institution to income or expenditure, legal agreements etc. are to be discussed with and approved by the Board.

## Services Offered

### 1. THERAPEUTIC/COUNSELLING:

- Individual,
- Marital,
- Group Therapy,
- Family Therapy,
- Chemical Dependency.

2. YOUTH GUIDANCE through a Youth Assistance Programme; YAP at the Centre, as well as A Satellite programme at Georgetown,

3. YOUTH & YOUNG PARENTS EMPOWERMENT PROGRAMME; YPEP, DEVELOPMENT OF YOUTH OR PARENT EMPOWERMENT PROGRAMMES BASED ON TARGET GROUP IDENTIFIED,

### 4. YOUTH AT RISK:

Youths that are experiencing Psycho-social issues. Therapeutic & Empowerment Programme for Parent & Youth

v. Resource Centre on HIV/AIDS,

vi. Resource Library,

vii. Referral & Networking,

viii. Research & Documentation,

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The services of the Marion House are quite expansive, catering to youth on a wide range of issues. Their services are aligned with goals 1- No Poverty, 4 - Quality Education, 5 – Gender Equality, and 10 – Reduced Inequalities.

A short and brief meeting was held with the present chair where she expressed her discontent as it regards the implementation of the SDGs and believes government interventions and assistance is necessary to reach more young people efficiently. The NGO schools on average one hundred and ten (110) students yearly and its management is of the belief that there's a need for stronger synergies and youth appropriate programs for youth development backed by stronger financial support. They are proud of the work they have done alongside networks such as the SVG Network of NGOS. Their greatest challenge is as it regards the bottlenecks in the system of governance. **Her number one recommendation is a system that demands civil servants within the government service to execute their duties with transparency and due diligence in a timely manner.** This recommendation was strongly backed by misunderstandings between the CSO and personnel at a relevant government department. The Marion House does not discriminate against LGBTQ, though their program is general and in no way specific to the needs of said group. In fact the country's most renowned LGBTQ organization, the Vincy Chap's office is within the confines of the Marion house. **The chair also believes that civil society can be more active together than apart and the separation enables gaps within the country's frameworks. A united focus and sense of direction can permit timely change and development.**

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## The National Family Planning Programme

**The Ministry of Health, Wellness and the Environment: Public Health department**

### **National Family Planning program**

The National Family Planning Program is the host of the National Adolescent Steering Committee.

It is governed by the National Adolescent Health and Development policy. This policy has as its basic principles:

- Adolescent Active Participation in all areas of Development
- Enabling a safe environment
- Rights based approach
- Community Participation and Active Involvement
- Multi-sectoral Collaboration
- Primary Health Care Approach
- Healthy Settings Approach

Referencing the section under health and wellbeing of the act, accessibility and affordability to comprehensive health care is highlighted, encouraging the inclusion and participation of adolescents in the decision-making process, especially as it relates to their health and wellbeing, which can also be noted as being in line with SRH. **However, apart from the general service to any person that seeks assistance, in my reserved opinion, I cannot agree that it is comprehensive.** There are obvious limitations within the scope of service from a personal, social perspective. That being said, the work the NASC implements with youths is commendable to say the least and with funding and stronger government support can be even more productive in the area of health awareness. **Also objective one of the policy refers to strengthening the Health and Family Life Education (HFLE) Program in schools. However, in reality this is not interpreted as the inclusion of a Comprehensive Sexuality Education within the School curriculum as many are advocating for. There is seemingly an invisible thin line between what is admissible, what is seen as educative and what is categorized as harmful.**

With regards to the SDGs, the following information was shared by the National Family Planning Program:

### **SDG3: Good Health and Wellbeing**

The National Family Planning Programme is a unit within the Primary Health Care Services in the Ministry Of Health Wellness and the Environment.

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## **The Mission Statement:**

*To Provide and sustain a sexual Reproductive Health Service that is confidential, Acceptable, accessible and affordable to individuals through the participation of all sectors of the society.*

## **SWOT ANALYSIS**

**Strengths:** Stable population growth, support from administration to ensure the achievement of stated goals and good intra-sectoral and inter-sectoral linkages.

**Weaknesses:** The unavailability of a vehicle at the department and the transfer and migration of health care providers who have been trained in Sexual and Reproductive Health issues.

**Opportunities:** Availability and use of data collection tools to enable good forecasting and availability of funded training programme to meet the needs of healthcare providers and program manager.

**Threats:** **Lack of youth-friendly spaces and services to address the unmet needs of the adolescents** and high dependency on intra-sectoral and inter-sectoral collaboration to ensure objectives are met.

**Critical Issues facing the department: The varying between the age of consent and the age to access Family Planning method.**

## **Program Objectives**

- To make Reproductive Health Services available and appropriate to all individuals in the reproductive age group.
- Provide services and conduct educational programmes targeted to address the unmet needs of adolescents and youths.
- Maintain the Sexual and Reproductive Health Commodities Logistics Management System.
- Conduct training in Reproductive Health Services for all Health Care Providers at Health Centers.
- Monitor and evaluate the Family Planning Programme at Health Centers to ensure quality care is received by the consumer.
- Conduct health assessment and health education for men in workplaces and other settings.

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## Summary of 2019

Teenage births nationally were 212 for 2019, a decrease from 225 in 2018 (14.9 percent of births).

There are ten (10) adolescents group functioning within the country.

Three adolescents' group presidents received training from OAS in Barbados on Drug Use Prevention from October 21st - 25th 2019.

All adolescents' president workshop was held on December 12th 2019 along with the adolescents committee to plan for the year 2020.

Four educational sessions were conducted during the year, two at the St. Joseph Convent Kingstown with forms three students; one at the JP Eustace Secondary School with forms three and four students and one at the Clare valley Primary school with grade six students.

There was one (1) teen mother program conducted in collaboration with Gender Affairs at the Girl Guides hut in April 2019.

The National Adolescent Steering committee met during the year and conducted evaluations and plans in relations to adolescents. A consultant was contracted in collaboration with UNFPA and Gender Affairs to develop a protocol for a teenage pregnancy survey within the country.

## Sexual Reproductive commodities distributed are as followed:

Methods	2019	
Pills	6,779	
Injections	9,344	
Male Condoms	200,287	
Female Condoms	3668	
IUCD	10	
BTL (2018)	191	
Year	Active Acceptors	Attendances
2016	7,819	15,879
2017	7,362	16,409
2018	7,716	16,810

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Men's Health symposiums were held at the following time and place;

- 10th April Fancy
- 29th May in Chateaubelair
- 13th June in Paget Farm
- 14th June in Port Elizabeth
- 17th October Park Hill
- 22nd November Barrouallie

A total of 294 men were seen. A total of 241 women were also seen at some of these events, making this a combined effort of 535 persons being seen at these men health symposiums. HIV testing was also done at each session, there was only one female noted 'positive' and she was referred to the ID clinic for further evaluation and treatment.

The Barrouallie Alcohol Anonymous Group is still functioning. An attempt to start one in Layou is on the way.

The number who received Family Planning Services for 2018 is 16,810 with three clinics data missing from this stats.

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## SVG Planned Parenthood Association

Working in similar alignment to the National Family Planning Program is the SVG Planned Parenthood Association. Evidently both entities have partnered on various occasions. We will now look at the workings of the SVGPPA.

The SVGPPA holds a seat on the National Adolescent Steering Committee and its representative acts as chair. It is also a nationalized NGO that receives government intervention and support from time to time via the Health Ministry.

They are governed by the Health Policy and their mandate is aligned with SDGs 3: Good Health and Wellbeing 4: Quality Education, 5: Gender Equality, 10: Reduced Inequalities & 16: Peace, Justice and Strong Institutions.

### Activities

Two community outreach activities are done per year, focusing on two vulnerable communities for a day offering free clinic services such as pap smear testing, breast exams, STI screening, Anti-natal, pre-natal care, HIV tests, Diabetes testing.

In 2019 there was a visit to the Sandy Bay village where 81 persons turned out. The majority of clients were females. The youngest was 17 and the eldest 52. They also provide services in-house at a minimum rate for all.

*Note: Interestingly enough in the light of an absence of a youth club, the Director has elected to adopt clubs from the National Adolescent Steering Committee through the provision of consultations with the intent of building the capacity of the youth membership.*

Thirdly, the use of bar stops is also frequently used. This entails traveling into random communities and selecting a hot spot where patrons usually gather and facilitate a presentation relevant to healthcare. Example: on the last bar stop presentation was done on the role of men in contraceptive care. 37 persons were present, 29 males and 8 females.

Gender based violence screening is also done via questionnaires and intimate partner violence counseling is also offered upon request.

The SVGPPA has also partnered with other NGOs such as the congress of women in 2018 on a campaign for breast cancer, safe sex, and sensitization on HIV/ AIDS.

Initially, youth was the focus of the SVGPPA until the appointment of the present director, who has added elderly care to the priority list of clientele. Now both young and old are seen as a major focus where service is concerned. Prostate exams for men especially, has changed for the better, with the timely investment in other methodologies for testing, men are more receptive to the use of machines instead of the physical examination for prostate cancer.

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In October, 2019 the SVGPPA partnered with the Gender Affairs Department and the Vincy Chap to facilitate the Human Dignity Workshop Trust out of London to produce a training manual geared towards gender and sexual diversity. The document provides government workers with the tools or knowledge for creating space for gender diversity. Representatives from various government ministries inclusive of the Royal SVG Police Force and the Nursing Division were in attendance.

In general, government reception has been positive where implementation of the work pertaining to healthcare is concerned, except for when faced with the suggestion of including a more comprehensive Sexuality Education within the Health and Family Life Education Curriculum.

## Challenges

- Given the more recent situation arising globally, operating at maximum capacity with limited funding is one of the outstanding challenges noted. The SVGPPA has been more flexible and hard pressed in its operations within recent times.
- The LGBTQ community though small in St. Vincent and the Grenadines has proved challenging to infiltrate from a service perspective. Due to lived stigmas, persons are not very open when seeking health services. Despite this reality the SVGPPA has taken non-discriminatory steps as part of policy when addressing clients for examinations or otherwise. There is mandatory confidentiality and operations are mostly done on a referral basis when accommodating someone from the LGBTQ community. For example, a client can speak directly with the case worker who made the initial connection without the need for sharing their information or situation to any other employee at SVGPPA.



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The data below illustrates the number of LGBTQ community members serviced at different intervals over the past three years by the SVGPPA

2017

Homosexual - 33  
Bisexual males - 72  
Bisexual females - 102  
Lesbian - 15

2018

Homosexual - 24  
Bisexual Male - 114  
Bisexual Female - 176  
Lesbian - 9

2019

Homosexual - 52  
Bisexual male - 92  
Bisexual female- 236  
Lesbian - 41

2020

Homosexual - 23  
Bisexual Male - 42  
Bisexual female - 39  
Lesbian - 7

## **Recommendation to the Government:**

- To adopt a holistic approach, which includes involving youth at every level of decision making and the promotion of healthy lifestyles using entertainment and sports to convince youths it's a necessary practice.
- A more inclusive HFLE curriculum that is flexible to accommodate the need of the modern requirements in learning.

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## Vincy Chap

Vincy Chap: operates under SDGs 3: Good Health and wellbeing, 5: Gender equality, 4: Quality education

One of the more renowned LGBTQ organizations on the island, Vincy Chap provides healthcare services to persons living with and affected by HIV/aids, provide programmes for such persons: geared towards both LGBTQ and youth in general, outreach programmes: HIV/aids awareness, and education awareness.

The Chap provides both a safe house and safe space.

They conduct antidiscrimination workshops and advocacy work and have collaborated with gender organization in their advocacy. Facilitate Know your rights' campaigns which target community animators and allies.

### Challenges:

- Deficiencies within the country from the standpoint of governance, policy, legislation.
- Need for stronger support from other CSOs and government agencies.
- A lack of adherence to international treaties, such as the ratification of human rights treaties, including the International Covenant on Civil and Political Rights and its optional protocol.

### Lessons learned:

- **The LGBTQ community in SVG is cultured differently to those on most Caribbean islands. They are more reserved and less so public with their way of life. Fear of excessive scrutiny is an obvious contributor to this.**
- A percentage of LGBTQ individuals grew up in Christian homes and hence possess conflicting beliefs.
- The influence of the church is a reality that affects change for the betterment of the LGBTQ in St. Vincent and the Grenadines. Hence changing the extent of the stigma is to change culture influenced by religion, but it must be done.

*Note: In 2014 UNAIDS interviewed 788 citizens as part of its survey of Public Attitudes on Gender Inequality, Sexual and Reproductive Health and Discrimination: Saint Vincent. The study found that fifty three percent (53%) of the respondents indicated that they "hated" homosexual persons. Thirty eight percent (38%) of the respondents were of the view that it was acceptable to treat people differently because of their sexual orientation. Extract from the Human Rights, Gender and Sexual Diversity Training Toolkit.*

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## Recommendations:

- A discrimination free approach and change of attitude towards the delivery of services to people in general.
- Call for the adoption of policies which guide secrecy and confidentiality.

## Government and NGO partnerships in past:

Partnered with SVG planned Parenthood Association, Care SVG, the Infectious Disease Unit in the Ministry of health, Wellness and the Environment, Marion house, SVG Network of NGOs, Country Coordinated Mechanism: comprises both Government and non- governmental, global fund HIV/ AIDS project for key populations.

*Note: The Health Department has been communicative when called upon for information and support.*

**Greatest accomplishment of the organization has been the registration of the organization despite internal friction and the creation of a safe space for the LGBTQ community.**

The following tables illustrate the findings of a St. Vincent MSM study, univariate analysis:

Question: what do you consider your gender to be: masculine, feminine, or other?

	F	%
Masculine	180	53.6
Feminine	22	6.5
Don't Know	4	1.2
Other	2	.6
Total	206	61.9
Values	128	36.1
Overall total	336	100.0

Question: Do you consider yourself to be Transgender?

	F	%
YES	5	1.5
NO	330	98.2
DON'T KNOW	1	.3
TOTAL	336	100.0

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Question: What do you consider sexual orientation to be- gay, straight, bisexual, or other?

	F	%
Gay Homosexual	123	36.6
Bisexual	196	58.3
Straight or Heterosexual	9	2.7
Don't know	3	.9
Refusal	3	.9
Other	2	.6
Total	336	100.0

Note: St. Vincent and the Grenadines has approximately 111,000 citizens living there.

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## Education Department, Curriculum Unit

### Curriculum Unit

With respects to this report the following information was provided by the Education Department, Curriculum Unit.

Though limiting where detail is concerned it gives us a clear view of the focus and functionality of the department with regards to education within schools more specifically Health and Family Life Education.

This falls under SDG 4: Quality Education.

- 
1. Monitored the delivery of HFLE in both primary and secondary schools
  2. Monitored the implementation of the draft Life Skills-Based Curriculum
  3. Conducted training workshops with teachers from all primary and secondary schools in the teaching of HFLE
  4. Finalize revision of the HFLE draft primary curriculum
  5. Organized and up-kept communication with the teachers that make up the review team.
  6. Prepared and distributed materials to support teaching and learning (draft curriculum, lesson plan format/sample lesson plan, Life Skills information sheet, sample rubric for assessing taught life skills).
  7. Training workshops for Principals, teachers, counsellors and Social Workers in life skills education in preparation for addressing Gender-Based Violence from a school's perspective (CDB Life Skills/Gender-Based Violence project).
  10. Conclusion of the initial revision of the Draft Primary curriculum.
  11. Continued working along with CDB Consultant on Life Skills GBV Project (Stakeholder Consultation, Stakeholders training workshop, curriculum).
  12. Work on Champions for Change Club Intervention (related to no. 13).
- 
13. Work with Consultants on Drug Demand Reduction strategy in selected Schools.
  14. Review of the first draft of the Life Skills/GBV Curriculum.
  15. Secondary Schools' observation of World AIDS Day (December 1<sup>st</sup> 2019/a time more suited to our situation)
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## Conclusion:

According to an analysis conducted by the Economic Planning Department, the National Economic and Social Development Plan of St. Vincent and the Grenadines is 60% in line with the focus of the implementation plan of the 2030 Agenda. Of course, as was the realization with the Millennium Development goals, the alignment differ, as the context from country to country differs. The lived reality of citizens in a third world country is vastly different to that of a first world super power.

That aside, this stat is a positive step in the right direction. With stronger networking between government and civil society, issuing greater connectivity on the ground amongst the beneficiaries, what seems a formidable task, can be achieved despite the recent changes in the world economy. After all the old saying goes, people make changes in this world, not structures or ideas, but a united execution of a single vision that is accepted and desired by all.

There are many gaps still present, especially where human rights are concerned. There needs to be appropriate changes.

## Recommendations:

- There is a need for a national human rights council that is independent of government, impartial with its rulings and guided by the UN standards with great and necessary input from civil society.
- There needs to be an initiative for sensitization of citizens geared towards removing the stigma endured by minority groups.
- A joint program between government and CSOs, implemented by a mutually accepted consultant to enact training of public and private sector personnel in gender and diversity annually.