



Joint Programme 2023 Annual Progress Report

Building Resilience & Ending Vulnerabilities in Small Island Developing States

Cover page

UNCT/MCO: Dominican Republic

Reporting Period: 1 January - 31 December 2023

JP title: Building Resilience & Ending Vulnerabilities in Small Island Developing States

Thematic SDG Areas: Decent jobs & universal social protection;

Gender Marker: Gender-transformative (for example, the JP explicitly aimed to address the structural and root causes of gender inequality, such as by combining social protection with community dialogues and economic empowerment activities that aim to shift gender social norms and power relations)

Engine Room Activities: Shift in policy and regulatory frameworks;

Total estimated expenditures: USD \$417,400.00

Total estimated commitments (including expenditures): \$552,761.00

Executive Summary

§The government now possesses the tools, institutional structure, professionalized care assistance services, and capacity to formulate and implement the National-Care-Policy (NCP) effectively.

In this sense, the Joint Program (JP) supported the Government in the implementation of a Local-Care-Policy-Pilot in the priority areas. Thanks to the technical support and advice provided, the Government consolidated the Intersectoral Care Table (ICT) with governmental actors and developed a Local Care Table in Azua, involving the participation of diverse key actors. Also, the Government reached an Inter-institutional Collaboration Framework Agreement for the development of the ICT and a methodological guide for the elaboration and structure of the local care plan.

Regarding the creation of an offer of professionalized care assistance services, currently the government has a curricular proposal called "Personal assistance to people with disabilities with support needs", being the first and only program of its kind in the country. This proposal seeks to move towards the coverage of assistance services for people with disabilities with support needs, to carry out daily living activities. The JP also provided specialized technical assistance to review and improve the technical-professional offer of training programs in early childhood care and eldercare, ensuring consistency and coherence between the care training programs developed.

§Improved government capacities and tools have expanded the registry of households in need of care services. This will enhance access for more households, including those traditionally overlooked.

The JP contributed to strengthen statistical and information systems through the support provided in the collection of socioeconomic information from eligible households for the pilot of the NCP, completing 103% of households reached equivalent to 9,246 completed home interviews. Technical work for the design of a quality measurement tool has been implemented and testing is currently in progress. The advisory activities for the development of the registry of demand for care services are also in development with key partners and will culminate in 2024.

§Increased awareness elevates the NCP's significance within public institutions, emphasizing the crucial role of strategic collaborations with non-governmental entities for the NCP's widespread implementation.

This is possible because the government has at its disposal a political argumentation document for the positioning of the Care Agenda in the country and a Methodological Guide with strategies and key steps to achieve the establishment of the Non-Governmental Alliances Space of the ICT. The main objective is to set in motion a process of social mobilization in favor of care that will promote the policy and develop the roles and lines of collaboration that can be promoted by the different non-governmental actors involved. This empowerment of key actors would contribute to the legitimacy and sustainability of the national care system.

Annual Progress

Overall progress against 3 key results in 2023:

The JP aligns with DR's UNSDCF2023-2027, contributing to poverty reduction through universal, inclusive, and resilient social services, shared-prosperity, focusing on transforming the labor-market for marginalized groups. This JP, under RC/UNCT leadership, has been pivotal in implementing the CF and addressing government priorities, by transformative and collaborative-actions.

O1:

The pilot of the NCP has been consolidated through the specialized technical-advice provided under the JP, which emphasized the creation and strengthening of governance and management mechanisms, as well as key strategies for the continuity and sustainability of the model. These included support for the preparation of the ICT-Agreement, Methodological-Guidance (MG) for the design and implementation of Local-Care-Plans and governance and management schemes, as well as various inputs for the identification and services mapping,supply,and demand. The curricular-proposal "Personal assistance to PwD with dependency" was developed and the technical-professional offer of the training-programs in early-childhood and elderly-care was reviewed,improved and unified to strengthen care training offer. Similarly, to ensure communication that promotes

cultural-change and promotes the consolidation of NCP, a communication-strategy was designed in coordination with national-counterparts, to publicize the initiative to civil-society and stakeholders, helping to strengthen public commitment for care-work recognition, appreciation and equitable distribution, as well as to promote care cultural and social changes.

O2:

The JP has supported the strengthening of the statistical-and-informational systems of the NCP, encompassing the collection of socioeconomic information from eligible households and the development of a georeferenced-mapping of care-services. This mapping has allowed the identification of potential candidates for social-benefits and the recognition of private and community-care offerings. The Fund provided support to SIUBEN in the collection of socioeconomic information from eligible households for the NCP-pilot, completing 103% of households reached equivalent to 9,246 completed home-interviews. To ensure effective-management,monitoring, and policy-evaluation, a comprehensive-quality measurement-tool is being developed. This tool will provide a mechanism to assess the main strengths and weaknesses within elderly-care-services. Technical-support is also being provided for the systematic-analysis of dynamics-implementation and operational-management, enabling the identification of key-processes and effectiveness evaluation. Advisory for the development of the demand for care-services registry is underway. Finally, the Communities-of-Care strategy is being systematized to evaluate progress and guide its future implementation, as well as to consider the main challenges and provide key-lessons learned and recommendations to provide feedback for the design,management and strengthening of future policies.

O3:

The JP has promoted the strengthening of the NCP, for the progressive consolidation of a National-Care-System-(NCS), in this regard, the DR-government has at its disposal a Care-Agenda Political-Talking-Points(PoliticalBrief) document. The document is a guide for dialogue between the institutions leading the process of building a NCS and the rest of the governmental-institutions, as well as with actors from the union-sector,Academia,the private-sector and civil-society. Also, DR-Government of has at its disposal a MG with strategies and key-steps to achieve the establishment of the NG-Partnerships-Space of the ICT. The document seeks to provide guidance in the definition of strategies and key-steps to achieve an institutionalized space for social participation establishment for the development of an NCP. The main objective is to set in motion a process of social/NG-actors mobilization in favor of care that will promote the policy,roles,strategic-lines.

Main Challenges, adjustments and lessons:

The government team requested a readjustment in the communications strategy that has implied a change at the contracting level to guarantee its continuity, generating delays in the current planning. A prioritization process has been carried out in collaboration with the government to ensure that the continuation of the work to design the communication strategy can incorporate all assessments and meet the expected standard.

To complement the geo-referenced mapping, a local information survey is being carried out in Azua and Santo Domingo Este, but there is a delay in the delivery of the information due to administrative limitations of the government entities to be surveyed.

The advances in the construction of the national policy by the government team have generated a series of changes in the priorities and actions to be carried out. As a result, there are currently components of the project that are awaiting confirmation of a redefinition by the government team.

It was necessary to assign additional time within the planning to allow for internal consultation and coordination amongst government partners.

Currently, the technical and governance features of the different stakeholders in the Care Board do not allow for the development of a precisely interconnected data system. Therefore, this exercise will focus on mapping and

systematizing the record systems of the partners involved, as well as creating a methodological guide to introduce, visualize, and share information in a common manner.

Priority Cross-cutting Issues

Cross-cutting results/issues

Gender Marker and activities undertook for gender equality

The JP is Gender-transformative (for example, the JP explicitly aimed to address the structural and root causes of gender inequality, such as by combining social protection with community dialogues and economic empowerment activities that aim to shift gender social norms and power relations). Evidence, data collection and analysis (e.g. gender assessments of programmes; policy briefs, costing for scale-up of social services); Adaptation of existing programmes (e.g. revision of eligibility criteria, removal of conditionalities); Capacity development (e.g. training of social workers, local governments, local communities);

SDG Transitions Acceleration

Through the stated achievements, the JP contributed to accelerating progress towards the following SDGs:

SDG 5: Achieve gender equality and empower all women and girls. Women and care workers are being benefited directly from the implementation of pilot Communities of Care. In addition, other groups in situation of dependency in the Care Pilot are beneficiaries including people with disabilities, older persons and children and youth. Through this strategy, progress is being made in the recognition, reduction, and redistribution of unpaid care work, mitigating inequalities in care work, and addressing the obstacles that prevent women from obtaining decent paid work (SDG target 5.4).

SDG 8: Achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value. The ILO's strategy is to promote the professionalization and formalization of care workers who regularly work in informal conditions and face a significant decent work deficit (SDG target 8.5).

SDG 17: - Interinstitutional work at both the national and local levels has been supported and strengthened to achieve a multidimensional approach to the Care Policy.

Annual Reporting on Results

Exit strategy, scaling, sustainability and next steps

Each initiative developed within the framework of the joint program has as its primary requirement the transfer of knowledge to the government team, with the purpose of ensuring the sustainability and expansion of these actions. Planning and consensus with key stakeholders are fundamental aspects in the development of knowledge products, ensuring their proper dissemination and empowerment.

Recommendations and guidance for the implementation and development of the national care strategy have been integrated, covering both technical and financial aspects. Additionally, strategies and guidance for establishing

alliances with governmental and non-governmental entities have been incorporated, ensuring their formation and sustainability. Similarly, the main arguments supporting the decision and commitment to building a care policy in the country have been elaborated.

Currently, work is underway on systematizing the results and progress of the national care strategy and a systematic analysis of the dynamics of implementation and operational management. This involves identifying key processes and assessing their effectiveness in achieving the desired goals and objectives. This process includes documenting best practices and areas of opportunity that can contribute to the improvement of implementation and the strengthening of future development. Furthermore, relevant and viable recommendations will be provided to implement necessary improvements in the strategy's design and management.

In the context of the training of caregivers, to ensure proper assimilation of the contents presented in training programs, and to guarantee that the approach is inclusive and from a human rights perspective, a training of trainers will be conducted.

Throughout 2024, institutional capacities for handling and integrating information operating systems will be strengthened. Additionally, a methodological guide will be created to introduce, visualize, and share information collectively. The quality measurement tool with its implementation guide for adaptation and continuous use by partners will also be ready. At the same time, awareness-raising activities and knowledge production will be done to engage civil society on care, facilitating their empowerment and involvement.

Measuring and reporting on impact

N/A

Overview of progress toward Financial Instrument(s)

Completed transactions

Strategic Partnerships, Documents and Communications

Multi-stakeholder engagement

Stakeholder groups you closely partner with, as part of your JP approach

National Government;Sub-national Governments;Civil Society Organizations;

Brief description of the nature of engagement. Outline the main outcomes and achievements resulting from the partnerships.

The national care strategy is developed by 10 government entities (MIM, MEPyD, MT, Supérate Program, SIUBEN, INAIPI, CONANI, CONAPE, CONADIS, and INFOTEP), with which direct and indirect collaboration takes place for the development of the initiative. These entities have also benefited from the products and actions of the joint program. Civil society organizations are part of government mechanisms (local boards), benefiting from implemented actions. They are also considered and incorporated when designing or shaping any action by the United Nations system.

How did the JP facilitate collaboration with diverse stakeholders

Financial leverage

Financial resources leveraged

N/A

Donor and Strategic events attended by JP in 2022

JP steering committee/ programme board meeting	Strategic partners/ donors event
Yes, in 2023	Yes, in 2023

Explanation if you have not held any key meeting/events for the above question.

N/A

JP contribution to SDG Financing

Drafted a bill, strategy, and/or approved a law increasing the fiscal space for the policy in focus	Produced financing, costing, diagnostic and feasibility analyses as a basis to invest or increase spending on the SDGs	Improved efficiency (cost savings) in the management of programmes/schemes	Improved effectiveness (value for money; i.e. social impact of \$1 spent) of spending	Drafted policies/regulatory frameworks or developed tools to incentivize private sector investment on the SDGs	Structured new financial instruments (public, private or blended) to leverage additional funding
No	No	Yes	No	No	No

Briefly explain how and in which area your JP contributed to enhancing SDG financing

The inter-agency coordination of this project has ensured a strategic relationship that benefits cost savings between UN agencies and the Dominican government. It focuses on directly optimizing the execution of programs in response to integrated development policies. An example of this is the coordination in transportation and representations in meetings by the UN system. To this is added the coordination of other strategic resources.

Focus on LNOB cross cutting principles

Human Rights	Persons with disabilities	Youth	Environmental and social standards
Yes	Yes	No	No

Provide any other comments or descriptions on how your JP contributed to cross-cutting issues and principles.

The joint program aims to support the establishment of a national care strategy, considering a multidimensional approach and emphasizing care as a right that involves and impacts the needs and rights of the entire society. The joint program is framed within a gender equality and women's empowerment perspective, emphasizing the recognition of historically unpaid work performed by women. It promotes shared responsibility while providing tools to make caregiving visible, dignified, and remunerated, ensuring protection for both the caregiver and the care recipient. Similarly, the program addresses the structural inequalities faced by people with disabilities, promoting their visibility and positioning within the strategy.

Beneficiaries

Number of beneficiaries

Percentage (%) of women benefited among the total number	Percentage (%) of children & youth (0-24 years of age) benefited among the total number	Percentage (%) of older persons (age 60 and above) benefited among the total number	Percentage (%) of persons with disabilities benefited among the total number
0	0	0	0

Please briefly explain how people benefited from the joint programme

The estimation mentioned in section 19 refers to the number of officials who have directly benefited from the knowledge transfer provided by the joint program. This knowledge transfer has been conducted through direct consultations, such as workshops and meetings, as well as through the delivery of knowledge products and tools. These resources are designed to guide and drive the implementation of the national care strategy, which is expected to have a direct impact on the beneficiary population (children, elderly people in situations of dependency, and/or people with disability in a situation of dependency). According to government estimates, 550,000 vulnerable individuals require care in Superate Program households.

Did your JP support the localization of SDGs by moving SDG actions to the local level and enhancing abilities of local and regional governments to promote the SDGs?

Raised awareness (e.g. campaigns, communication strategy) ;Conducted diagnostics and studies to contextualize SDGs at the local level;Enhanced capacities of staff in the local and regional governments;Established or enhanced institutional arrangements to ensure adequate multi-level governance.;

Provide information of how your JP supported localization of the SDGs as outlined above:

The joint program supported the localization of the SDGs by translating SDG actions to the local level and enhancing the capacities of local and regional governments, through the following initiatives:

- Communication strategy that promotes awareness of care and its implications among both governmental and non-governmental actors.
- Technical support in the collection of socioeconomic information from eligible households for the pilot of the National Care Policy. A survey identified the demand for care and future candidates for social benefits in vulnerable communities, as part of the Joint Program. The goal was to reach 9,000 households and it stood out by completing 103%, equivalent to 9,246 completed home interviews.
- Improvement of the capacities of local and regional government personnel through multiple consultancies and knowledge products, which have guided and allowed guaranteeing the implementation of the national policy, such as the local care tables and plans. Likewise, the program's sustainability is guaranteed through the creation and adaptation of training plans that allow having profiles adequate to the requirements of the National Care Policy pilot.
- An orienting methodological guide was prepared with strategies and key steps to achieve the establishment of the Non-Governmental Alliances Space of the Dominican Republic's Intersectoral Care Table, which will make it possible to guarantee adequate multilevel governance.

- The tool for measuring the quality-of-care services for older adults will provide the opportunity to contextualize these services' status at the local level.

Communications

Voices from the field

- <https://www.instagram.com/reel/CyEXicBvwgT/?igshid=MTc4MmM1YmI2Ng==>
- https://twitter.com/ONU_RD/status/1710366941263593945?t=wzWpYILhi3NhZ8Ypj4d4Lw&s=08
- <https://www.instagram.com/reel/CzB8sBpA3Of/?igshid=MTc4MmM1YmI2Ng%3D%3D>

Declaration

We hereby confirm that the information provided in this update is duly reviewed and approved by the RC and all PUNOs involved in the Joint Programme.