### **Global Survey ICPD Beyond 2014**

#### **COUNTRY QUESTIONNAIRE**

Name of Country / Territory: Ireland

Name of Global Survey Coordinator: Multilateral Section Irish Aid Department

Foreign Affairs and Trade DFAT

Email address(es):

**Phone number(s) – Landline: Mobile:** 

Fax(es):

**Interview date(s): n/a** 

#### **Brief summary of Global Survey completion process:**

The Department Foreign Affairs and Trade coordinated the interdepartmental response to this questionnaire between Dec. 2012 and Jan2013. Departments consulted included Foreign Affairs and Trade; Children and Youth Affairs; Education and Skills; Environment, Community and Local Government; Health; Justice and Equality; and Social Protection.

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	ACRONYMS
AIDS	Acquired Immune Deficiency Syndrome
ASRH	Adolescent Sexual Reproductive Health
CD	Communicable Disease
CEDAW	Convention on the Elimination of all forms of Discrimination Against
Women	<u> </u>
CRC	Convention on the Rights of the Child
CSCs	Citizen Service Centers
BCC	Behaviour Change Communication
EmOC	Emergency Obstetric Care
FBOs	Faith Based Organisations
FGM/C	Female Genital Mutilation/Cutting
GBV	Gender-Based Violence
HIV	Human Immunodeficiency Virus
ICPD	International Conference on Population and Development
(held in Caire	o Egypt in 1994)
ICPD+5	5 <sup>th</sup> Anniversary of the ICPD (which was marked in 1999)
ICPD+10	10 <sup>th</sup> Anniversary of the ICPD (which was marked in 2004)
ICPD+15	15 <sup>th</sup> Anniversary of the ICPD (which was marked in 2009)
IDP	Internally Displaced Person
INGO	International Non-Governmental Organisation
M&E	Monitoring and Evaluation
MDGs	Millennium Development Goals
MSM	Men having Sex with Men
NCD	Non-Communicable Disease
NDS	National Development Strategy
NGO	Non-Governmental Organisation
ODA	Official Development Assistance
OiC	Officer-in-Charge
PETS	Public Expenditure Tracking Survey
PoA	Programme of Action
PLHIV	People Living with HIV
PMTCT	Preventing Mother-to-Child Transmission (PMTCT) to HIV
PRSP	Poverty Reduction Strategy Paper
QSDS	Quantitative Service Delivery Surveys
RHCS	Reproductive Health Commodity Security
SRH	Sexual and Reproductive Health
STI	Sexually Transmitted Infection
VCT	Voluntary Counselling and Testing

## SECTION 1: POPULATION, SUSTAINED ECONOMIC GROWTH AND SUSTAINABLE DEVELOPMENT (CHAPTER III)

Name(s) of the primary respondent(s) and position(s): Name(s) of institution(s)/department(s): Dept. of Environment Community and Local Government E-mail address(es): Phone number(s) – Landline: Fax(es): Interview date(s):					
1.1. Does the countrexplicitly addresses the					
1) Yes	o, skip to 1.3)	on population wa			
1.2. If YES, please profor implementing th timeframe or the year	e policy, progran	nme and/or str		-	
(1)	(2)	(3)	(4)	(5)	
Name of policy, programme and/or strategy addressing the interaction between population and	Туре	Status	Main responsible institution	Implementation timeframe or year of inception/ revision	
sustainable development					
a)	1) Policy	1)Drafted			
b)	1) Policy	1)Drafted			
c)	1) Policy	1)Drafted			
d)	1) Policy	1)Drafted 2)Implemented			
e)	1) Policy	1)Drafted 2)Implemented			
1.3. Has the country of the interaction between 1) Yes (if no	•			sues related to	

1.4. If YES, please indicate the name(s) of the institutional entity(ies) and the year of establishment.

(1)	(2)
Other institutional entities addressing issues related to the interaction between	Year of establishment
population and sustainable development	
a)	
b)	
(c)	
(d)	
(e)	

## 1.5. Addressing ICPD issues regarding in the national context during the last five (5) years.

(1)	(2)	(3)	(4)	(5)
ICPD issues related to the interaction of population and sustainable development	Was this issue addressed in any existing policy/programme/strategy or through an institutional entity? If yes, in which one(s)?	Was budget allocated to this issue?	Has the country taken concrete implementatio n measures to address this issue?	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
a) Eradication of poverty	1) Yes 🛚	1) Yes 🗌	1) Yes 🛛	
with special attention to income generation and employment strategies	National Action Plan for Social Inclusion 2007 – 2016 National Reform Programme under the Europe 2020 Strategy	2) No Resources are provided as part of annual	The National Action Plan for Social Inclusion specifies over 150 actions 2) No ☐ (Go to the	1 🗆 2 🖾 3 🗆 4 🗀
b) Strengthening food	2) No [ (Go to the next issue)	Budget	next issue) 1) Yes	
security	1) Yes Name 2) No (Go to the next issue)	1) Yes	Describe  2) No	1 🗆 2 🗆 3 🗆 4 🗆
c) Promoting	1) Yes Name_		1) Yes  Describe	1 🗆 2 🗆 3 🗆 4 🗆
Environmental resources management	2) No [ (Go to the next issue)	1) Yes  2) No	2) No [ (Go to the next issue)	1 2 3 4
d) Reducing territorial inequalities	1) Yes  \ Name	1) Yes	1) Yes Describe	1 🗆 2 🗔 3 🗀 4 🗀
	2) No [ (Go to the next issue)	2) No 🗌	2) No [ (Go to the next issue)	
e) Achieving fair trade relations	1) Yes  \[ \] Name	1) Yes	1) Yes Describe	1 🗆 2 🗔 3 🗔 4 🔲
	2) No [ (Go to the next issue)	2) No 🗌	2) No [ (Go to the next issue)	
f) Improving solid Waste management	1) Yes \( \sum \) Name 2) No \( \sum \) (Go to the next issue)	1) Yes	1) Yes Describe 2) No (Go to the	1 🗆 2 🗀 3 🗀 4 🗀
a) Fantan ayata'n abla	, _ ,		next issue)	
g) Foster sustainable	1) Yes Name	1) Yes 🗌	1) Yes 🗌	1 🗆 2 🗔 3 🗔 4 🔲

resource use and preventing environmental degradation	2) No [ (Go to the next issue)	2) No 🗌	Describe  2) No	
h) Address the population trends/dynamics in ecologically vulnerable areas.	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗔
i) Address the implications of population trends in large urban agglomerations	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
j) Addressing the needs of people living within or on the edge of fragile ecosystems	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe 2) No (Go to the next issue)	1 🗆 2 🗔 3 🗔 4 🗔
k) Other , specify	1) Yes  \[ \] Name 2) No \[ \]	1) Yes	1) Yes	1 🗆 2 🗔 3 🗔 4 🗔
by copying this table – e	tors and barriers. List as ma ach table is for one (1) identifulation and sustainable developmen	ied issue.		
a) Name of the issue (mentioned in question 2.5 above) b) Key achievements	F	to recvance to		
a) Name of the issue (mentioned in question 2.5 above)		of recvance of		
a) Name of the issue (mentioned in question 2.5 above) b) Key achievements		t of retevance to		
a) Name of the issue (mentioned in question 2.5 above) b) Key achievements c) Facilitators* d) Barriers* *See list of facilitators and bar  1.7. Considering the nat interaction between poconsiders priority for prive (5) issues.	riers in the questionnaire interviewer ional context, what are the mopulation and sustainable ublic policy for the next five	ost relevant development, (5) to ten (10	issues regarding , that the cour 0) years? Cite u	the ntry p to

-, -	S At th	ne national level	only, please cit	e report(s)	
2) Yes	<ol> <li>Yes</li></ol>				
3) Yes					
4) No			<b>r</b>	1 - (1)	
	•				levelopment for
	regarding the vide example	O	ulation-related	issues in the las	st five years? If
				_	arding population-related issues
1) Yes			ulation projections /		
		ation and poverty			
	Cite example(s) curvey on Incom	e and Living Cond	itions by the nationa	al statistical body. th	ne Central Statistics Office
b) annual re		me to monitor pov			Social Protection and the Economic
2) No 🗌					
1) Yes 🔲			nent and natural reso		
2) No	s between popul	ation trends and su	stained economic g	rowth	
2) No 🗌					
		ation trends and en	nployment		
2) No					
2) No	s. on a scale	of 0 to 5 where	0 is low and 5 i	s high, to what	extent has
2) No			0 is low and 5 i		
2) No			0 is low and 5 i		
2) No					sions?
2) No   1.10. If ye research (Low	on population	n dynamics info	ormed resource	allocation deci	sions? High 5
2) No	on population 1 s, on a scale	of 0 to 5 where	ormed resource	allocation deci	sions? High 5
2) No   1.10. If ye research (Low)  1.11. If ye informed	on population 1 s, on a scale	n dynamics info	ormed resource	allocation deci	sions?  High  5  extent it has
2) No   1.10. If ye research ( Low )  1.11. If ye nformed Low	n population  1  s, on a scale other policie	2 of 0 to 5 where s /strategies?	3 0 is low and 5 i	allocation deci	sions? High 5 extent it has
2) No	on population 1 s, on a scale	of 0 to 5 where	ormed resource	allocation deci	sions?  High  5  extent it has
2) No   1.10. If ye research ( Low )  1.11. If ye informed Low	n population  1  s, on a scale other policie	2 of 0 to 5 where s /strategies?	3 0 is low and 5 i	allocation deci	sions? High 5 extent it has
2) No   1.10. If ye research ( Low )  1.11. If ye informed Low )	s, on a scale other policie	of 0 to 5 where s /strategies?	ormed resource 3 0 is low and 5 i	allocation deci 4 s high, to what	sions?  High  5  extent it has  High  5
2) No   1.10. If ye research (Low 0)  1.11. If ye informed Low 0  1.12. Nam	s, on a scale other policie	of 0 to 5 where s /strategies?	0 is low and 5 i	s high, to what  4  SOs) whom the	sions?  High  5  extent it has  High  5  government has
2) No   1.10. If ye research of Low  1.11. If ye informed Low  1.12. Nampartnered	s, on a scale other policie  1  1  1  1  1  1  1  1  1  1  1  1  1	of 0 to 5 where s /strategies?	3 0 is low and 5 i	s high, to what  4  SOs) whom the t. Cite the type	High 5 extent it has High 5 government has of CSO, the name
2) No   1.10. If ye research ( Low )  1.11. If ye nformed Low )  1.12. Nampartnered of the gov	s, on a scale other policies  1  1  ne up to three with in the sernment uni	of 0 to 5 where s /strategies?	3 0 is low and 5 i	s high, to what  4  SOs) whom the t. Cite the type	sions?  High  5  extent it has  High  5  government has
2) No   1.10. If ye research ( Low )  1.11. If ye nformed Low )  1.12. Nampartnered of the gov	s, on a scale other policie  1  1  1  1  1  1  1  1  1  1  1  1  1	of 0 to 5 where s /strategies?	3 0 is low and 5 i	s high, to what  4  SOs) whom the t. Cite the type	High 5 extent it has High 5 government has of CSO, the name

Name of the CSO	Type of CSO	Name of the Government unit which partnered with the CSO	Area of CSO involvement	Activities conducted
a)	1) National NGO  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)	1) National NGO  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)	1) National NGO  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

.13 Does the country have a policy or strategy that promotes information,
education and communication on issues related to sustainable development?

1) Yes	Describe <sub>.</sub>		
2) No			

1.14. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area sustainable development. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

	(1)	(2)	(3)	(4)
gov	of country and ernment unit providing iternational ooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
of Fore	and, Department eign Affairs and Irish Aid	Malawi, Ministry of Agriculture and Food Security      Dedza and Ntcheu traditional authorities	1) Financial            2) Technical                 9) Other, specify	1. Farm Input Subsidy Programme (FISP): In an effort to improve crop productivity and soil fertility management, Irish Aid supports Malawian government's FISP which helps resource poor smallholder farmers access affordable fertilisers and quality maize and legume seeds. Hoped that in the long run this will promote

			adoption of these improved technologies.
			2. Local Development Support Programme Three year funding to Clioma ltd
			who provide technical assistance on the implementation of a stove
			programme which promotes use of fuel efficient stoves in 32,000 households in Dedza and Ntcheu.
b) Ireland, Department of Foreign Affairs and Trade, Irish Aid	Mozambique, ProAgri (Government of Mozambique's sector support programme in Agriculture)	1) Financial  2) Technical  9) Other, specify	Activities under the sector programme included adaptive practices related to Forestry, Environmental Education and Training, Environmental Policy and Administrative Management, actions to reduce slash and burn and the monitoring of reforestation country-wide; increasing technical knowledge of extension workers on mitigation and adaptation, studies on environmental issues in relation
		1) 5:	to the agriculture sector in Mozambique among others.
c) Ireland, Department of Foreign Affairs and Trade, Irish Aid	Tanzania, Ministry of Agriculture, Food Security and Cooperatives	1) Financial  2) Technical  9) Other, specify	Agriculture Sector Development Programme: This programme has a sub component on national irrigation development that focuses on increasing the area under irrigation as well as adopting water saving technologies such as drip irrigation, lining of all main canals and identification of areas suitable for water storage reservoirs in all irrigation interventions. Irish Aid effectively engaged into the sector reviews and dialogue and contributed in the discussions on climate change adaptation issues. Irish Aid contributed €4.25m in 2010 and €4.00m in 2011 to support the implementation of ASDP.

# SECTION 2: POPULATION GROWTH AND STRUCTURE (CHAPTER VI)

Name(s) of the primary respondent(s) and pos	ition(s):
Name(s) of institution(s)/department(s): Dept.	Children Youth and Adolescents; Dept of Health; Dept.
of Justice	
E-mail address(es):	
Phone number(s) – Landline:	Mobile:
Fax(es):	
Interview date(s):	

#### Addressing the needs of adolescents and youth

2.1. Does the country have a national policy, programme and/or strategy addressing the needs of adolescents and youth (10-24 years) that is/are currently being drafted or implemented?

1) Yes	
2) No	$\square$ (if no, skip to 2.3)

2.2. If YES, provide the name, the type, status, the main institution responsible for implementing the policy, programme and/or strategy, the targeted population groups and the implementation timeframe or the year of inception/revision.

(1)	(2)	(3)	(4)	(5)	(6)
Name of policy, programme and/or strategy addressing the needs of adolescents and youth (10-24 years)	Туре	Status	Main responsible institution	Targeted population groups*	Implementation timeframe or year of inception/ revision
a) Initial work being progressed	1) Policy	1)Drafted	Department		To be finalised
on the development of a Youth	2) Programme	2)Implemented	of Children		late 2013
Policy Framework	3) Strategy		and Youth		
			Affairs		
b)	1) Policy	1)Drafted			
	2) Programme	2)Implemented			
	3) Strategy				
(c)	1) Policy	1)Drafted			
	2) Programme	2)Implemented			
15	3) Strategy	1)D 6 1			
d)	1) Policy	1)Drafted			
	2) Programme  3) Strategy	2)Implemented			
e)	1) Policy	1)Drafted			
	2) Programme	2)Implemented			
	3) Strategy				

<sup>\*</sup>See targeted population groups list in the questionnaire interviewer's guide

2.3. Has the country established any institutional entities to address issues regarding the needs of adolescents and youth (10-24 years)?

1) Yes	$\boxtimes$
2) No	$\square$ (if no, skip to 2.5)

### 2.4. If YES, indicate the name(s) of the institutional entity(ies) and the year of establishment.

(1)	(2)
Institutional entities addressing the needs of adolescents and youth (10-24 years)	Year of establishment
a) Child and Family Support Agency to be established	2013
b)	
(c)	
(d)	
(e)	

2.5. Addressing ICPD issues regarding the needs of adolescents and youth (10-24 years) in the national context during the last five (5) years.

years) in the national co	(2)	(3)	(4)	(5)
ICPD issues regarding adolescents and youth (10- 24 years)	Was this issue addressed in any existing policy/programme/strate gy or through an institutional entity? If yes, in which one(s)?	Was budget allocated to this issue?	Were concrete implementatio n measures taken to address this issue?	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
a) Creating employment opportunities for youth	Yes ⊠ Name     Aspects of the Youth in Action     Programme and the Special     Projects for Youth Funding     schemes have regard to this issue     No ☐ (Go to the next issue)	1) Yes  Not specifically for this issue, however funding provided is occasionally used to address this issue by service providers 2) No	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗀
b) Addressing the adverse effects of poverty on adolescents and youth	1) Yes ☑ Name Special Projects for Youth Scheme; the Young People's Facilities and Services Funds 1 & 2; and Drugs Funding	1) Yes ⊠ 2) No □	1) Yes √ □ Via monitoring and regular progress reports: quantitative and qualitative and via the National Quality Standards Framework for youth work Describe □  2) No □ (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗀
c) Addressing the violence, exploitation and abuse of children, adolescents and youth, including sexual exploitation and commercial sexual	1) Yes Name_ Funding for national youth work organisations and also for a dedicated Child Protection Unit based in the National Youth Council of Ireland_  2) No (Go to the next issue)	1) Yes 🔀 2) No 🔲	1) Yes  Via monitoring and regular progress reports: quantitative and qualitative and via the National Quality Standards Framework for	1 🗆 2 🗔 3 🖾 4 🗀

exploitation			youth work	
			Describe	
			2) No [] (Go to the next issue)	
d) Instituting concrete procedures and mechanisms for adolescents and youth to participate in the planning, implementation and evaluation of development activities that have a direct impact on their lives	1) Yes Name Via Youth Affairs funding schemes and programmes and also through the Innovative work of the Participation Unit within the DCYA which runs the national youth parliament and other local structures  2) No  (Go to the next issue)	1) Yes⊠ 2) No □	1) Yes  \Boxed Via monitoring and regular progress reports: quantitative and qualitative and via the National Quality Standards Framework for youth work Describe	1 🗆 2 🗀 3 🗀 4 🖾
e) Ensuring that adolescents and youth have the same rights and access to sexual and reproductive health services, including HIV prevention services	1) Yes Name Not specifically, however aspects of this would be covered by the work of the National Youth Health Programme which provides advice, training and resource development to the youth sector in the area of health 2) No (Go to the next issue)	1) Yes ⊠ 2) No □	1) Yes  \Boxed Via monitoring and regular progress reports: quantitative and qualitative and via the National Quality Standards Framework for youth work  Describe  2) No  \Boxed (Go to the next issue)	1 🗆 2 🗀 3 🖾 4 🗀
f) Collecting age and sex disaggregated data on the socio-economic status of adolescents and youth	1) Yes ⊠ Name Such information is collected centrally via the Central Statistics Office through periodic census returns 2) No ☐ (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 _ 2 _ 3 _ 4 _
g) Other, specify	1) Yes  \[ \] Name 2) No \[ \]	1) Yes	1) Yes	1 🗆 2 🗔 3 🗀 4 🗀
2.6. Achievements in add Among the issues relate most relevant in the na comment on facilitators copying this table – each	d to the needs of adoles tional context, briefly and barriers. List as n table is for one (1) iden	scents and you list achieveme nany issues as ntified issue.	th (10-24 years) nts (citing repo are deemed rel	) that are orts), and levant by
8 8	needs of adolescents and you	th (10-24 years) re	elevant to the natio	onal context
a) Name of the issue (mentioned in question 2.5				
above)				
b) Achievements (cite the reports)				
c) Facilitators*				
d) Barriers*				
<b>4</b> C 1: ( C C ·1: ( 11 1		. 1 .1		

youth work

<sup>\*</sup>See list of facilitators and barriers in the questionnaire interviewer's guide

CSO which partnered with the CSO							
b) Ensuring an enhanced focus on addressing youth unemployment c) Ensuring greater coordination in responses to the needs of young people d) e)  2.8 Has the country conducted an assessment/situation analysis on the needs of adolescents and youth (10-24 years) at the national and/or subnational level in the last five (5) years? IF YES, cite the report(s).  1) Yes  At the national level only, cite the report(s)	_						
c) Ensuring greater coordination in responses to the needs of young people  d)  2.8 Has the country conducted an assessment/situation analysis on the needs of adolescents and youth (10-24 years) at the national and/or subnational level in the last five (5) years? IF YES, cite the report(s).  1) Yes ☐ At the national level only, cite the report(s) ☐  2) Yes ☐ At the subnational level only, cite the report(s) A consultation process was carried out at national and at the subnational level, cite the report(s) A consultation process was carried out at national level with young people under 18 which is informing the development of a national overarching Children and Young People's Strategy. Subsequent to this a Youth Policy Framework will be developed which will comprehend the themes and trends pertinent to the 10 − 24 age range ☐  4) No ☐  2.9. Name up to three (3) civil society organisations (CSOs) whom the government has partnered with in the area of adolescents and youth (10-24 years) over the past five (5 years. Cite the type of CSO, the name of the government unit which partnered with it its area(s) of involvement, and the activities conducted.  (1) (2) (3) (4) (5)  Name of the CSO  a) Youth Work Ireland: Foroige: Name of the Government unit which partnered with the CSO a) Youth Work Ireland: Foroige: Name of the Government unit which partnered with the CSO a) Youth Groups ☐  3) National Youth Council etc  1) National NGO Council etc  9) Other, ☐ 9) Other,				oyment			
2.8 Has the country conducted an assessment/situation analysis on the needs of adolescents and youth (10-24 years) at the national and/or subnational level in the last five (5) years? IF YES, cite the report(s).  1) Yes							
2.8 Has the country conducted an assessment/situation analysis on the needs of adolescents and youth (10-24 years) at the national and/or subnational level in the last five (5) years? IF YES, cite the report(s).  1) Yes					•		
2.8 Has the country conducted an assessment/situation analysis on the needs of adolescents and youth (10-24 years) at the national and/or subnational level in the last five (5) years? IF YES, cite the report(s).  1) Yes  At the national level only, cite the report(s)							e)
adolescents and youth (10-24 years) at the national and/or subnational level in the last five (5) years? IF YES, cite the report(s).  1) Yes							
its area(s) of involvement, and the activities conducted.  (1) (2) (3) (4) (5)  Name of the CSO  Name of the Government unit which partnered with the CSO  1) Youth Work reland; Foroige; National Youth Council etc  1) National NGO  3) Youth Groups  4) Academic/research centers  9) Other,  9) Other,    Specify	on mi stra n v	is information is information in the general section is substituted by the section is substitute	on process was ming the strategy.  It will government has the past five (5)	ational level, cite the reported report(s) A consultation under 18 which is informand Young People's Stawill be developed which the 10 – 24 age range  tions (CSOs) whom the grouth (10-24 years) over	al level only, cite the tional level only, cite the tional level only, cite attional and at the subnational level, citevel with young penal overarching Chiuth Policy Framew and trends pertined civil society organica of adolescents are	Yes At the nation Yes At the subnaryes At both the mational and at the stried out at national levelopment of a nation obsequent to this a Youngrehend the themes No   Tame up to three (3) ered with in the are	1) \( \) 2) \( \) 3) \( \) the car dev Sub cor \( \) 4) \( \) 2.9. \( \) partner
Name of the CSO    Name of the Government unit which partnered with the CSO     Area of CSO involvement   Activities condition   Activit			,	ducted.	and the activities	ea(s) of involvement	its are
Name of the CSO    Type of CSO   Government unit which partnered with the CSO     A Youth Work Ireland; Foroige; National Youth Council etc   1) National NGO   DCYA   1) Service Delivery     Provision of service young people	H		(5)	(4)		(2)	(1)
1) Youth Work reland; Foroige; National Youth Council etc  1) National NGO		ment	Activities conducted	rea of CSO involvement	Government unit which partnered	Type of CSO	
National Youth Council etc  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify  12)Research and Data Collection  3)Advocacy and Policy Formulation  4) Awareness Raising and social mobilisation  5) Monitoring and legal counsel  6) Education and training	F			Service Delivery	DCYA	4) 37 .1 .1 .2	
Council etc  3) Youth Groups  4) Academic/research centers  9) Other, specify specify  3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training	У		Provision of services to		DCIII	1) National NGO	Youth Work
3) Youth Groups		llection			Dem		
Formulation  4) Academic/research centers  5) Monitoring and legal counsel specify  6) Education and training				esearch and Data Collection	Delli		and; Foroige;
4) Academic/research centers social mobilisation ☐ 5) Monitoring and legal counsel ☐ 6) Education and training		_			Dem	2) International NGO	and; Foroige; tional Youth
centers  Social mobilisation   5) Monitoring and legal counsel Specify 6) Education and training		(1 I		dvocacy and Policy_	Bem	2) International NGO 3) Youth Groups	and; Foroige; tional Youth
5) Monitoring and legal counsel 6) Education and training				dvocacy and Policy	Bem	2) International NGO 3) Youth Groups	and; Foroige; tional Youth
9) Other, counsel 6) Education and training				Advocacy and Policy mulation   Awareness Raising and	Jem .	2) International NGO 3) Youth Groups	and; Foroige; tional Youth
specify 6) Education and training				Advocacy and Policy mulation  Awareness Raising and ial mobilisation	<b>Bern</b>	2) International NGO  3) Youth Groups  4) Academic/research	and; Foroige; tional Youth
				Advocacy and Policy mulation  Awareness Raising and ial mobilisation  Monitoring and legal	<b>Bern</b>	2) International NGO 3) Youth Groups 4) Academic/research centers	and; Foroige; tional Youth
		nd		Advocacy and Policy mulation   Awareness Raising and ial mobilisation   Monitoring and legal  nsel	<b>Bern</b>	2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,	and; Foroige; tional Youth
		nd		Advocacy and Policy mulation   Awareness Raising and ial mobilisation   Monitoring and legal  nsel	<b>Bern</b>	2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,	and; Foroige; tional Youth
9) Other, specify		nd		Advocacy and Policy mulation  Awareness Raising and ial mobilisation  Monitoring and legal nsel  Education and training	<b>Bern</b>	2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,	and; Foroige; tional Youth
National Devices No. 100 Devices Devic		nd		Advocacy and Policy mulation  Awareness Raising and ial mobilisation  Monitoring and legal nsel  Education and training	<b>Bern</b>	2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,	and; Foroige; tional Youth
	-	nd	young people	Advocacy and Policy mulation  Awareness Raising and ial mobilisation  Monitoring and legal insel  Education and training  Other, specify		2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify	and; Foroige; tional Youth uncil etc
		nd	young people  Research in the areas of	Advocacy and Policy mulation  Awareness Raising and ial mobilisation  Monitoring and legal nsel  Education and training	DCYA	2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify  1) National NGO	and; Foroige; tional Youth uncil etc
		nd ] g	young people	Advocacy and Policy mulation  Awareness Raising and ial mobilisation  Monitoring and legal nsel  Education and training  Other, specify  Service Delivery		2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify	and; Foroige; tional Youth uncil etc  National iversity of

Ireland NUIM

2.7. Considering the national context, what are the most relevant issues regarding the needs of adolescents and youth (10-24 years) that are anticipated to receive further public policy priority for the next five (5) to ten (10) years? Cite up to five (5) issues.

NUIG)			3)Advocacy and Policy	
	4) Academic/research		Formulation	
	centers		4) Awareness Raising and	
			social mobilisation	
	9) Other,		5) Monitoring and legal	
	specify		counsel	
			6) Education and training	
			9) Other, specify	
c) Centre for	1) National NGO	DCYA	1) Service Delivery	Development and
Effective	2) International			implementation of national
Services	NGO 🗌		2)Research and Data Collection	quality standards for youth
	3) Youth Groups			and research and training on
			3)Advocacy and Policy	enhancing the evidence base
	4) Academic/research		Formulation 🖂	for youth work
	centers		4) Awareness Raising and	
			social mobilisation	
	9) Other,		5) Monitoring and legal	
	specify		counsel	
			6) Education and training	
			9) Other, specify	
			l 🗆	

2.10 Name up to three (3) private sector partners whom the government has partnered with in the area of adolescents and youth (10-24 years) over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training	

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
EU Commission	DCYA as national authority via Leargas as national agency	1) Financial 2) Technical 5 9) Other, specify 5	Implementatio n of the EU Youth in Action programme
		1) Financial 2) Technical 9) Other, specify 5	1 - 2
		1) Financial 2) Technical 9) Other, specify	
Phone number(s) – Landline: Fax(es): Interview date(s):	Mobile:		
		_	<u> </u>
2.12 Does the country have ageing and/or the needs drafted or implemented?  1) Yes  2) No (if no, skip to 2.14)  2.13. If YES, provide the	re a national policy, program of older persons (60+ year)  4)  name, the type, status, the programme and/or strategy,	rs) that is/are curi	rently being sponsible for
2.12 Does the country have ageing and/or the needs drafted or implemented?  1) Yes  2) No (if no, skip to 2.14)  2.13. If YES, provide the implementing the policy, provide the provide the policy, provide the provid	of older persons (60+ yea  4)  name, the type, status, the	rs) that is/are curr main institution res , the targeted popula	rently being sponsible for

9) Other, specify\_\_\_\_

a) National Positive Ageing	1) Policy	1)Drafted  2)Implemented	All	All older	To be published
Strategy	3) Strategy	2)Implemented [	Government Departments	people	in 2013
			that have		
			responsibility		
			for policies		
			and services relevant to		
			relevant to older people		
b) National Carers' Strategy	1) Policy	1)Drafted	All		Published in
,	2) Programme	2)Implemented 🛛	Government	All older	2012 –
	3) Strategy		Departments	people	implementation
			that have		has commenced
			responsibility for policies		
			and services		
			relevant to		
			carers		
c) National Housing Strategy for	1) Policy	1)Drafted	Department	7	Published in
People with a Disability (2011 – 2016)	2) Programme  3) Strategy	2)Implemented 🛛	of		2011 –
2016)	o) Stategy Z		Environment, Community		implementation has commenced
			and Local		nas commencea
			Government		
d)Garda Strategy for Older	1) Policy	1)Drafted	An Garda	All older	Published in
People	2) Programme  3) Strategy	2)Implemented 🛛	Siochana	people	2010 –
	3) Strategy				implementation
e) Nursing Home Support	1) Policy	1)Drafted	Department	All older	has commenced Commenced in
Scheme Support	2) Programme 🖂	2)Implemented	of Health/	people	2009
	3) Strategy		Health	1 1	
			Service		
			Executive		
			(HSE)		

## 2.14. Has the country established any institutional entities to address issues regarding ageing and/or the needs of older persons (60+ years)?

1) Yes	
2) No	$\Box$ (if no, skip to 2.16)

### 2.15. If YES, indicate the name(s) of the institutional entity(ies) and the year of establishment.

(1)	(2)
Institutional entities addressing ageing and/or the needs of older persons (60+ years)	Year of establishment
a) Office for Older People, Department of Health	2008
(b)	
(c)	
(d)	
(e)	

# 2.16. Addressing ICPD issues regarding ageing and/or the needs of older persons (60+ years) in the national context during the last five (5) years.

(1)	(2)	(3)	(4)	(5)
ICPD issues regarding ageing and/or the needs of older persons (60+ years)	Was this issue addressed in any existing policy/programme/strategy or through an institutional entity? If yes, in which one(s)?	Was budget allocated to this issue?	Were concrete implementation measures taken to address this issue?	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
a) Enabling older persons to live independently as long as possible	1) Yes \( \subseteq \) The aim of Government policy for older people is to enable to remain in their own homes for as long as possible and practicable. Departments addressing older people's needs in this regard include; Department of Health; Department of Social Protection; Department of Environment, Community and Local Government; Department of Transport, Tourism and Sport;  2) No \( \subseteq \) (Go to the next issue)	1) Yes ⊠ 2) No □	1) Yes ⊠ As described under 2.13 2) No ☐ (Go to the next issue)	1 🗆 2 🗆 3 🖾 4 🗆
b) Providing social services including long-term care	1) Yes ☑ The Nursing Home Support Scheme; Home Care Packages, Community services (e.g. hoe help, meals on wheels, day care centres etc)  2) No ☐ (Go to the next issue)	1) Yes ⊠ 2) No □	1) Yes  The Nursing Homes Support Scheme; is a system of financial support for people who require long-term nursing home care. Under the Scheme, people contribute towards the cost of their care and the State pays the balance. The Health Service Executive carries out a financial assessment, which takes account of a persons income and assets, to determine their contribution.  Home Care Packages; were introduced in 2006 and are Enhanced supports, over and above existing mainstream community services. This is essentially a	1 🗆 2 🗀 3 🖾 4 🗀

			suite of supports,	
			including Home Help in most cases, and an appropriate professional skills mix to support the most vulnerable older people. A key feature of HCPs is to be as flexible as possible to best meet the needs of each individual, in the context of available resources.  2) No (Go to the next issue)	
c) Enabling older persons to make full use of their skills and abilities	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗆 3 🗀 4 🗀
d) Extending or improving old age allowances / pensions and/or other income support schemes for older persons, including noncontributory pensions	1) Yes The two main pensions for older people in Ireland are the nonmeans tested State Pension (Contributory), which is paid to people from the age of 66 who have enough Irish social insurance contributions and the means-tested State Pension (Non-Contributory), which is available to all residents (subject to habitual residence condition) and is currently payable at 66 years of age.  There are also a number of other social protection benefits; which include; free travel; household benefits package; the national fuel allowance; the Carers' Allowance and Benefit and Respite Care Grant	1) Yes ⊠ 2) No □	1) Yes ⊠ Between 2004 and 2012, the State Pension (Contributory) was raised from €167.30 to €230.30 per week - an increase of 38%. Similarly, the State Pension (Non-Contributory) was increased from €154 to €219 per week - an increase of 42%.  2) No ☐ (Go to the next issue)	1 🗆 2 🗆 3 🖾 4 🗆
e) Providing affordable, appropriate and accessible health care to meet the needs of older persons	1) Yes ⊠ 2) No ☐ (Go to the next issue)	1) Yes ⊠ 2) No □	1) Yes  As at b) above  Medical Card: allow people to access a Family Doctor or GP services, community health services, dental services, hospital care and a range of other benefits free of charge. Everyone aged over 70 who applies for a medical card will be subject to a means test. The majority of those aged 70 years and over who apply for the medical card qualify for it after means testing.  2) No  (Go to the next issue)	1 🗆 2 🗀 3 🗀 4 🗀
f) Addressing neglect, abuse and violence against older	1) Yes ☑ The Health Service     Executive (HSE) Elder Abuse Service     2) No ☐ (Go to the next issue)	1) Yes 🛭 2) No 🔲	1) Yes  The Health Service Executive (HSE) Elder Abuse Service is	1 🗆 2 🗆 3 🖾 4 🗆

	persons			comprised of a dedicated staffing structure throughout the country, unified data collection, national and regional oversight mechanisms and awareness raising programmes. A national elder abuse research facility – the National Centre for the Protection of Older People (NCPOP) was established in 2008 and is funded by the HSE. In recent years, the HSE has conducted public awareness raising campaighs to raise awareness of elder abuse in the community. A National Working Group on Financial Abuse was established in 2010. —	
g)	Preventing discrimination against older persons, especially widows	1) Yes  Anti-discrimination legislation - Employment Equality Acts (1998-2008); Equal Status Acts (2000, 2011)  2) No  (Go to the next issue)	1) Yes ☐ 2) No ⊠	1) Yes  Under this legisklation, discrimination is prohibited in relation to employment and access to goods and services under 9 grounds, one of which is age.	1 🗆 2 🗀 3 🖾 4 🗀
h)	Promoting employment opportunities for older workers	1) Yes  2) No (Go to the next issue)	1) Yes	1) Yes  2) No (Go to the next issue)	1 🗆 2 🗆 3 🖾 4 🗆
i)	Providing support to families caring for older persons	1) Yes ☑ National Carers' Strategy 'Recognised, Supported, Empowered' (2012). This is a cost-neutral, cross Department Strategy that addresses s carer specific services.  2) No ☐ (Go to the next issue)	1) Yes □ 2) No ⊠	1) Yes  The Strategy was launched in July 2012. Progress reports on the implementation of the Strategy will be presented to the Cabinet Committee on Social Policy, which is chaired by An Taoiseach. The first progress report will be presented to the Cabinet Committee in December 2012. 2) No  (Go to the next issue)	1 🗆 2 🗆 3 🖾 4 🗆
j)	Collecting age and sex-disaggregated data on the socio-economic status and living conditions of	1) Yes  Census 2011; The Irish Longitudinal Study on Ageing (TILDA) 2) No (Go to the next issue)	1) Yes ⊠ 2) No □	1) Yes  The Census of Population is conducted every four years, with disaggregated data being published on a periodic basis.	1 🗆 2 🗆 3 🖾 4 🗆

older persons				
k) Instituting concrete procedures and mechanisms for older persons to participate in the planning, implementation and evaluation of development activities that have a direct impact on their lives	1) Yes ☑ Public Consultation Process to inform the preparation of the National Positive Ageing Strategy 2) No ☐ (Go to the next issue)	1) Yes □ 2) No ⊠	The Irish Longitudinal Study on Ageing (TILDA) is a nationally representative survey of the older population of Ireland that will act as the foundation on which to plan appropriate health, medical, social and economic policies. The study provides a comprehensive and accurate picture of the characteristics, needs and contributions of older persons in Ireland. Data collection for TILDA takes place every two years and data is published on a periodic basis. The dataset is lodged in the Irish Social Sciences Data Archive and can be accessed by bona fide researchers who wish to conduct their own analysis. The results of the first wave were published in 2011.  2) No (Go to the next issue)  1) Yes Between June 2009 and June 2010 this consultation process comprised:  -a public call for written submissions (190 written submissions (190 written submissions in the community and voluntary sectors, academic and cultural institutions, as well as from older people themselves);  -a series of public regional consultation meetings which were	1 🗆 2 🗆 3 🖾 4 🗆
	2) No [ (Go to the next issue)	2) NO 🔼	meetings which were attended by over 1,100 people; -face to face meetings between the Minister for Older People and groups representing vulnerable and marginalised older people to discuss in greater detail issues raised in their submissions;	
1) Other, specify	1) Yes  Name	1) Yes 🗌	2) No (Go to the next issue)  1) Yes (	
	2) No 🔲	2) No [	Describe	1 🗆 2 🗔 3 🗔 4 🖂

	2) No 🗌	
		1

### 2.17. Achievements in addressing issues related to ageing and/or the needs of older persons (60+ years).

Among the issues related ageing and/or the needs of older persons (60+ years) that are most relevant in the national context, briefly list achievements (citing reports), and comment on facilitators and barriers. List as many issues as are deemed relevant by copying this table – each table is for one (1) identified issue.

ICPD issues regarding ag	ICPD issues regarding ageing and/or the needs of older persons (60+ years) relevant to the national context			
Name of the issue (mentioned in question 2.16 above)	a) Enabling older persons to live independently as long as possible			
Achievements (cite the reports)	Approximately 4.6% of the older population are in residential care, with the vast majority that need care being cared for in the community.  Long Stay Activity Statistics (Department of Health, 2008;2009;2010)			
Facilitators*				
Barriers*	Financial constraints due to economic crisis			

Name of the issue (mentioned in question 2.16 above)	f) Addressing neglect, abuse and violence against older persons
Achievements (cite the reports)	HSE Elder Abuse Service Open your Eyes; Elder Abuse Services (2009; 2010; 2011)
Facilitators*	
Barriers*	Awareness, under-reporting of abuse

Name of the issue (mentioned in question 2.16 above)	i) Providing support to families caring for older persons
Achievements (cite the reports)	Publication of the National Carers Strategy – Recognised, Supported, Empowered (2012)
Facilitators*	Endorsement by national organisations representing the interests of carers and their acknowledgement that, in the short to medium term, actions arising from the Strategy must be cost-neutral.
Barriers*	

Name of the issue	j) Collecting age and sex-disaggregated data on the socio-
-------------------	--

(mentioned in question 2.16 above)	economic status and living conditions of older persons
Achievements (cite the reports)	Government co-funding of The Irish Longitudinal Study On Ageing (TILDA)  Fifty Plus in Ireland – First Results of the Irish Longitudinal Study on Ageing (2011)
Facilitators*	Government acknowledgement of the importance of evidence-based policy making and the need to increase the quantity and quality of information available on the older population
Barriers*	

2.18. Considering the national context, what are the most relevant issues regarding ageing and/or the needs of older persons (60+ years) that are anticipated to receive further public policy priority for the next five (5) to ten (10) years? Cite up to five (5) issues.

	egarding ageing and/or the needs of older persons (60+ years) that are anticipated to receive further colicy priority for the next five (5) to ten (10) years
a)	Access to and quality of community-based health and personal social services and long term residential care services
b)	Income security
c)	Age discrimination
d)	Age friendly housing and the built environment
e)	Safety and Security

- 2.19. Has the country conducted an assessment/situation analysis on ageing and/or the needs of older persons (60+ years) at the national and/or subnational level in the last five (5) years? IF YES, cite the report(s).
  - 1) Yes  $\boxtimes$  At the national level only, cite the report(s)
    - Madrid International Plan of Action on Ageing: National Report for the Second Review 2007 2012;
    - In Our Own Words: Report of the Consultation Process on the National Positive Ageing Strategy (2010)

2) Yes At the subnational level only, cite the report(s)	
3) Yes At both the national and at the subnational level, cite the report(s)	

4) No

2.20. Name up to three (3) civil society organisations (CSOs) whom the government has partnered with in the area of ageing and/or the needs of older persons (60+ years) over the past five (5) years. Cite the type of CSO, the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Government unit which partnered with	Area of CSO involvement	Activities conducted

		the CSO		
a) Trinity College Dublin	1) National NGO  2) International NGO  3) Older Persons' Groups  4) Academic/research centers  9) Other, specify	Department of Health on behalf of Government	1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	The Irish Longitudi nal Study on Ageing (TILDA)
b) Ageing Well Network	1) National NGO  2) International NGO  3) Older Persons' Groups 4) Academic/research centers  9) Other, The Ageing Well Network is an independently convened leadership policy network. The Network is not an advocacy body and does not seek to have a public profile. It is funded by Atlantic Philanthropies. The sixty five members include CEOs, Secretaries General/Assistant Secretaries, Professors and Heads of units with dedicated responsibility for older peoples' issues across the relevant agencies in areas such as health and community care services, transport, social welfare, marketing, research and life-long learning, etc.		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	Influencing the development and implementati on of the proposed National Positive Ageing Strategy and to this end has produced six Position Papers  Promoting the roll out of the The Age Friendly County Programme. Partnering the Department of Health in relation to activities in support of the European Year for Active Ageing and Solidarity Between Generations 2012
c) Age Action Ireland	1) National NGO  2) International NGO  3) Older Persons' Groups 4) Academic/research centers 9) Other, specify	Department of Health	1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	Represented on National Steering Committee convened by the Department of Health to assist in progressing the European Year for Active Ageing and Solidarity Between Generations 2012

2.21. Name up to three (3) private sector partners whom the government has partnered with in the area of ageing and/or the needs of older persons (60+ years) over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a) Several private home care providers (e.g. Home Instead, Comfort Keepers etc)	Health Service Executive	1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	Home Care services for older people
b) Intel and GE Healthcare	St James's Hospital, Dublin	1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	Conducting research to advance the understanding of behavioural markers of disease, and how technology can be applied to produce positive interventions
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

2.22. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of ageing and/or the needs of older persons (60+ years) over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
Ireland, Department of Foreign Affairs and Trade, Irish Aid	Ghana via HelpAge International	1) Financial  2) Technical  3) Other, specify	1.Organised constituency of older peoples groups to monitor access to and delivery of cash transfer and health services. 2. Older people proactively engaging with policy makers to respond to their commitments under the Madrid International Plan of Action on

			Ageing.
b) Ireland, Department of Foreign Affairs and Trade, Irish Aid	Uganda via Help Age International	1) Financial  2) Technical  9) Other, specify	1. Engage with public service providers so that their policies and practices reflect the needs of older people. 2. Provision of socio-legal support to people needing documentation and guidance for accessing services.
c) Ireland, Department of Foreign Affairs and Trade, Irish Aid	Columbia via Help Age international	1) Financial  2) Technical  9) Other, specify	1. Older people participating in the design, monitoring and implementation of social protection and health programmes at district level. 2 Ensure that Government departments and non-state actors are providing accessible information and raising awareness amongst older people on existing benefits.

1 2 3 4 2.20 has	needs of old five (5) year  ) Yes  At  O No  O  Compared we have a compared which a compared we have a compared which a compared we have a compa	to three (3 yith in the ave (5) year d with it, its	(60+ ye, cite the level of conal level of sarea of sarea(s	ars) at the report ( only, cite to the conly, cond at the second at the second are the type ageing and the type of involved) of involved.	the report(s)	ernmen + years	) t
)	(2	)		e of the	(4)		(5)
of the O	Type of	f CSO	Gove unit partne	ernment t which ered with	Area of CSO involvement		Activities conducted
	1) National	NGO 🔲	til	CSO	1) Service Delivery		
	<ul><li>2) Internationa</li><li>3) Older Perso</li></ul>				2)Research and Data Collection 3)Advocacy and Policy Formulation		
		ons Groups			4) Awareness Raising and social mobilisation	on $\square$	
	4) Academic/r	esearch			5) Monitoring and legal counsel		
	centers				6) Education and training		
	9) Other,				9) Other, specify		
	specify  1) National	NGO 🗍			1) Service Delivery		
	2) International	_			2)Research and Data Collection	H	
	3) Older Perso				3)Advocacy and Policy Formulation		
					4) Awareness Raising and social mobilisation	on 🔲	
	4) Academic/r	research			5) Monitoring and legal counsel	님	
	centers 9) Other,				6) Education and training 9) Other, specify	Ш	
	specify				) oner, speeny		
	1) National	NGO 🔲			1) Service Delivery		
	2) Internationa	_			2)Research and Data Collection	님	
	3) Older Perso	ons Groups			<ul><li>3)Advocacy and Policy Formulation</li><li>4) Awareness Raising and social mobilisation</li></ul>		
	4) Academic/r	esearch			5) Monitoring and legal counsel	,	
	centers				6) Education and training		
	9) Other,				9) Other, specify		
	specify						
par	2.21.Name up to three (3) private sector partners whom the government has partnered with in the area of ageing and/or the needs of older persons (60+ years) over the past five (5) years. Cite the name of the government unit which partnered						
	_				activities conducted.		
(1	)	(2)			(3)		(4)

(1

Name CS

a)

b)

c)

Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery	
		2)Research and Data Collection	
		3)Advocacy and Policy Formulation	
		4) Awareness Raising and social mobilisation	
		5) Monitoring and legal counsel	
		6) Education and training 9) Other, specify	
b)		1) Service Delivery	
0)		2)Research and Data Collection	
		3)Advocacy and Policy Formulation	
		4) Awareness Raising and social mobilisation	
		5) Monitoring and legal counsel	
		6) Education and training	
		9) Other, specify	
c)		1) Service Delivery	
		2)Research and Data Collection	
		3)Advocacy and Policy Formulation	
		4) Awareness Raising and social mobilisation	
		5) Monitoring and legal counsel	
		6) Education and training	
		9) Other, specify	

2.22. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of ageing and/or the needs of older persons (60+ years) over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
a)		1) Financial 2) Technical 9) Other, specify	
b)		1) Financial 2) Technical 9) Other, specify	
c)		1) Financial 2) Technical 9) Other, specify	

#### Addressing the needs of persons with disabilities

Name(s) of the primary respondent(s) and position(s):				
Name(s) of institution(s)/department(s):				
E-mail address(es):				
Phone number(s) – Landline:	Mobile:			
Fax(es):				
Interview date(s):				

2.23. Does the country have a national policy, programme and/or strategy addressing the needs of persons with disabilities that is/are currently being drafted or implemented?

1) Yes	$\boxtimes$				
2) No		(if no,	skip	to	2.25)

2.24. If YES, provide the name, the type, status, the main institution responsible for implementing the policy, programme and/or strategy, the targeted population groups and the implementation timeframe or the year of inception/revision.

(1)	(2)	(3)	(4)	(5)	(6)
Name of policy, programme and/or strategy addressing the needs of persons with disabilities	Туре	Status	Main responsible institution	Targeted population groups*	Implementatio n timeframe or year of inception/ revision
a)Disability Act 2005	1) Policy 2) Programme 3) Strategy	1)Drafted ☐ 2)Implemented ☒	Government	People with disabilities	2005
b)Disability Strategy 2004	1) Policy   2) Programme   3) Strategy	1)Drafted 2)Implemented \( \sum \)	Multiple Departments as part of National Disability Strategy Implementatio n Group	People with disabilities	2004
c)	1) Policy	1)Drafted			
d)	1) Policy 2) Programme 3) Strategy	1)Drafted			
e)	1) Policy	1)Drafted			

<sup>\*</sup>See targeted population groups list in the questionnaire interviewer's guide

2.25. Has the country established any institutional entities to address issues regarding the needs persons with disabilities?

1) Yes				
2) No	(if no,	skip	to	2.27)

## 2.26. If YES, indicate the name(s) of the institutional entity(ies) and the year of establishment.

(1)	(2)
Institutional entities addressing issues regarding the needs of persons with	Year of establishment
disabilities	
a) National Disability Authority	1999
b)	
(c)	
(d)	
(e)	

2.27. Addressing ICPD issues regarding the needs of persons with disabilities in the national context during the last five (5) years.

(1)	(2)	(3)	(4)	(5)
ICPD issues regarding adolescents and youth (10- 24 years)	Was this issue addressed in any existing policy/programme/strateg y or through an institutional entity? If yes, in which one(s)?	Was budget allocated to this issue?	Were concrete implementation measures taken to address this issue?	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
(1) (e) re rehab services	(2) 1) Yes Name: National Policy & Strategy for the Provision of Neuro Rehabilitation Services 2011 â 2015	2) No	(4) 1) Yes, establishment of Implementation Group	(5)
policies for the provision of health and	1)Yes Name: Value for Money		Implementation	Not applicable as Implementation Plan is currently being drafted.
(ii) Ensuring that Policies across Government support people with disabilities living in residential	from Congregated Settings Report 2012-	for social	(1) Yes, Implementation Plan being drafted	2

institutions to move into the community.				
(iii) Ensuring that adult day services meet the needs of people with disabilities.	1)Yes Name: New Directions â Review of Adult Day Services Report	2)No	1)Yes, Implementation Plan being drafted	2. 1
disabilities. Among the issues relevant in the natio comment on facilitator copying this table – each	n addressing issues related to the needs of peonal context, briefly listers and barriers. List as not table is for one (1) iden	ersons with t achievement nany issues ntified issue.	disabilities that a ents (citing repor as are deemed relo	re most ts), and
ICPD issues regarding the	e needs persons with disabilitie	es relevant to t	he national context	
a) Name of the issue (mentioned in question 2.27 above)				
b) Achievements (cite the reports)				
c) Facilitators*				
d) Barriers*				
2.29. Considering the the needs of persons	national context, what a with disabilities that are	are the mos	t relevant issues ro l to receive furthe	-
	next five (5) to ten years ( s of persons with disabilities th			public policy
priority for the next five (	5) to ten (10) years			1 1
	ds a person-centred support		11 1	1
	ore accountable needs assess nity living from residential i		ource allocation mode	.1
d) Demographics -	• •	iistitutioiis		
disabilities at the natio cite the report(s).  1) Yes X At the nation Review of Disabi	conducted an assessment/ nal and/or subnational le ional level only, cite the re lity Services in Ireland.	evel in the la	st five (5) years? II	YES,
<u> </u>	enational level only, cite the enational and at the subnate	-	, cite the report(s)	

4)	No	

2.31. Name up to three (3) civil society organisations (CSOs) whom the government has partnered with in the area of persons with disabilities over the past five (5) years. Cite the type of CSO, the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Government unit which partnered with the CSO	Area of CSO involvement	Activities conducte d
a)HRB	1) National NGO	Dept of Health, Disability Unit	2) Research & Data Collection	
b)Voluntary Agencies providing disability services	3)Groups of person with disabilities	HSE	1)Service delivery 3)Advocacy and Policy Formation 6)Education & Training	

2.32. Name up to three (3) private sector partners whom the government has partnered with in the area of persons with disabilities over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

2.33. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area(s) of persons with disabilities over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
Ireland, Department of Foreign Affairs and Trade, Irish Aid	Through support to ILO's Decent Work Programme - Uganda, Tanzania, Kenya	1) Financial	Financial support to ILO who undertake advocay, advisory, legal and technical work. Focus includes disabled women - entrepreneurship and getting to work.
Ireland, Department of Foreign Affairs and Trade, Irish Aid	Tanzania (through NGO) CCBRT works in close collaboration and in partnership with the Government of Tanzania	1) Financial x 2) Technical 9) Other, specify	Financial support for a national NGO (CCBRT) that treats disabilities and rehabilitates disabled people - a range of disabilities. They also repair fistula in women.
Ireland, Department of Foreign Affairs and Trade, Irish Aid	DRC (through NGO)	1) Financial x 2) Technical 9) Other, specify	Financial support to the Christian Blind Misssion for community based rehabiliation - they provide technical assistance for broad social, physical and economic development for disabled.

### Addressing the needs of indigenous people

establishment.

Name(s) of the primary respondence Name(s) of institution(s)/depart E-mail address(es): Phone number(s) – Landline: Fax(es): Interview date(s):  2.34. Does the country has the needs of indigenous properties of the properties of the country for the needs of indigenous properties. If YES, provide the implementing the policy, and the implementation to the country for the properties of the p	ave a national poseoples that is/are and, the type programme and	Mobile:  Dlicy, programme currently being e, status, the maid/or strategy, the	g drafted or i in institution e targeted po	implemented	d? e for
(1)	(2)	(3)	(4)	(5)	(6)
Name of policy, programme and/or strategy addressing the needs of indigenous peoples	Type	Status	Main responsible institution	Targeted population groups*	Implementatio n timeframe or year of inception/ revision
a)	1) Policy	1)Drafted			
b)	1) Policy	1)Drafted			
c)	1) Policy	1)Drafted			
d)	1) Policy	1)Drafted			
e)	1) Policy	1)Drafted			
*See targeted population group.  2.36. Has the country est the needs of indigenous p  1) Yes  2) No (if no, skip to 2.	ablished any ins eoples?			issues regar	rding

(1)	(2)
Institutional entities addressing the needs of indigenous peoples	Year of establishment
a)	
b)	
(c)	
d)	
e)	

2.38. Addressing ICPD issues regarding the needs of indigenous peoples in the national context during the last five (5) years.

(1)		(2)	(3)	(4)	(5)
ICPD issues rega needs of indig peoples	genous	Was this issue addressed in any existing policy/programme/stra tegy or through an institutional entity? If yes, in which one(s)?	Was budget allocated to this issue?	Were concrete implementation measures taken to address this issue?	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
a) Creating ed conditions indigenous to have acc education is own langua respecting to culture	for peoples ess to an n their age and their	1) Yes  Name 2) No  (Go to the next issue)	1) Yes   2) No	1) Yes  Describe 2) No  (Go to the next issue)	1 🗆 2 🗀 3 🗀 4 🗀
b) Ensuring the indigenous individuals particularly have access levels and f public educe the state will discriminat	, v children, s to all forms of cation of thout ion	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗔
c) Creating de opportunition indigenous without discriminat	es for peoples ion	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
d) Ensuring the indigenous have the ac culturally a sexual and	peoples cess to	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗆 3 🗆 4 🗆

	reproductive health care, including HIV prevention services				
e)	Enabling indigenous peoples to have tenure and manage their lands	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗆 3 🗆 4 🗆
f)	Protecting and restoring the natural ecosystems on which indigenous communities depend for their survival and wellbeing	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗀 3 🗀 4 🗀
g)	Instituting concrete procedures and mechanisms for indigenous peoples to participate in the planning, implementation and evaluation of development activities that have a direct impact on their lives	1) Yes  Name 2) No  (Go to the next issue)	1) Yes	1) Yes  Describe  2) No  (Go to the next issue)	1 🗆 2 🗀 3 🗀 4 🗀
h)	Seeking free, prior and informed consent of indigenous peoples in trade agreements, foreign direct investment agreements, and concessions agreements affecting their lives and environment	1) Yes  Name 2) No  (Go to the next issue)	1) Yes  2) No	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗀 3 🗀 4 🗀
i)	Protecting indigenous peoples from discrimination	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗀 3 🗀 4 🗀
j)	Collecting data on the socio-economic status of indigenous peoples disaggregated on the basis of sex, age, place of residence	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe Describe 2) No (Go to the next issue)	1 🗆 2 🗆 3 🗀 4 🗀
k)	Other, specify	1) Yes  \[ \] Name 2) No \[ \]	1) Yes	1) Yes	1 🗆 2 🗆 3 🗆 4 🗆

2.39. Achievements in addressing issues related to the needs of indigenous peoples.

Among the issues related to the needs of indigenous peoples that are most relevant in the national context, briefly list achievements (citing reports), and comment on facilitators and barriers. List as many issues as are deemed relevant by copying this table – each table is for one (1) identified issue.

tab	le – each table is for	one (1) identified issue.
IC	PD issues regarding the	needs indigenous peoples
a)	Name of the issue	
	(mentioned in	
	question 2.38 above)	
b)	Achievements (cite	
	the reports)	
c)	Facilitators*	
d)	Barriers*	
2.4( the	). Considering the needs of indigenou	national context, what are the most relevant issues regarding as peoples that are anticipated to receive further public policy by (5) to ten (10) years? Cite up to five (5) issues.
		of indigenous peoples that are anticipated to receive further public policy priority
	the next five (5) to ten (	
a)		
b)		
c)		
d)		
e)		
indi IF Y	igenous peoples at t YES, cite the report	conducted an assessment/situation analysis on the needs of the national and/or subnational level in the last five (5) years? (s).
2	Yes At the sub	national level only, cite the report(s)
3	S) Yes At both the	e national and at the subnational level, cite the report(s)
4	·) No 🔲	
has the	partnered with in type of CSO, the na	e (3) civil society organisations (CSOs) whom the government the area of indigenous peoples over the past five (5) years. Cite ame of the government unit which partnered with it, its area(s) e activities conducted.

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Government unit which partnered with the CSO	Area of CSO involvement	Activities conducte d
a)	1) National NGO  2) International NGO  3) Indigenous peoples' groups		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation	

4) Academic/research

5) Monitoring and legal counsel

	centers $\square$ 9) Other, $\square$	6) Education and training 9) Other, specify
b)	specify  1) National NGO	1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training
c)	9) Other, specify  1) National NGO	9) Other, specify

2.43. Name up to three (3) private sector partners with whom the government has partnered with in the area of indigenous peoples over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

2.44. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of indigenous peoples over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
a) Ireland, Department of Foreign Affairs and Trade, Irish Aid	Vietnam - Vietnam's Programme, Socio- economic Development of the Most Vulnerable Communes in Ethnic Minority and Mountainous Areas (more commonly known as P-135)	1) Financial x  2) Technical x  9) Other, specify	P-135 addresses the economic gap between the general population and the country's ethnic minority groups. Irish Aid first got involved in 2006, contributing to phase two P135-II of the programme. P135-II's aim was to reduce poverty and promote economic growth in marginalised ethnic minority communities. It is the most decentralised programme in Vietnam with communes nominated to manage significant financial resources. The programme is made up of three components:-  (i) Commune infrastructure such as access roads, irrigation and classrooms; (ii) Agricultural inputs and (iii) Training and capacity building, legal assistance and cultural promotion.
b)		1) Financial  2) Technical  9) Other, specify	
c)		1) Financial  2) Technical  9) Other, specify	

## SECTION 3: URBANIZATION AND INTERNAL MIGRATION (CHAPTER IX)

Name(s) of the primary respondent(s) and position(s):				
Name(s) of institution(s)/department(s): Dept of Environment				
E-mail address(es):				
Phone number(s) – Landline:	Mobile:			
Fax(es):				
Interview date(s):				

3.1. Does the country have a national policy, programme and/or strategy addressing urbanization and internal migration issues that is/are currently being drafted or implemented?

1) Yes	
2) No	$\square$ (If no, skip to 3.3)

3.2. If YES, provide the name, the type, status, the main institution responsible for implementing the policy, programme and/or strategy, the targeted population groups and the implementation timeframe or the year of inception/revision.

(1)	(2)	(3)	(4)	(5)	(6)
Name of policy, programme and/or strategy addressing urbanization and internal migration	Type	Status	Main responsible institution	Targeted population groups*	Implementation timeframe or year of inception/ revision
a) National Spatial Strategy 2002- 2020	1) Policy	1)Drafted	Department of Environme nt Community and Local Governmen t		2002-2020
b)	1) Policy	1)Drafted			
c)	1) Policy 2) Programme 3) Strategy	1)Drafted			
d)	1) Policy	1)Drafted			
e)	1) Policy	1)Drafted			

<sup>\*</sup>See targeted population groups list in the questionnaire interviewer's guide

3.3. Has the country est urbanization and interns	•	onal entities to	address i	ssues	regarding
1) Yes	3.5)				
3.4. If YES, indicate the establishment.	he name(s) of the in	nstitutional en	atity(ies) an	nd th	e year of
Other institutional entities a a) b) c) d)	(1) addressing urbanization an	nd internal distrib	oution	Year	(2) of establishment
3.5. Addressing ICPD i national context during		anization and	internal m	nigrat	ion in the
(1) ICPD issues regarding urbanization and internal migration	Was this issue addressed in any existing policy/programme/stra tegy or through an institutional entity? If yes, in which one(s)?	(3) Was budget allocated to this issue?	(4) Were concrimplements n measure taken to address the issue?	atio es his	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
Promoting the growth of small or medium-sized urban centres	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No Go the next issue)	to 1	1 🗆 2 🗔 3 🗀 4 🗀
b) Promoting rural development strategies to decrease push factors on urbanization	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No Go (Go the next issue)		1 🗆 2 🗀 3 🗀 4 🗀
c) Promoting decentralization	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe 2) No (Go the next issue)		1 🗆 2 🗔 3 🗀 4 🗔
d) Ensuring land, housing, services and livelihood of urban poor	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe 2) No Go the next issue)		1 🗆 2 🗔 3 🗀 4 🗀
e) Facilitating the integration of rural-	1) Yes Name	1) Yes  2) No	1) Yes  Describe	1	1 🗆 2 🗆 3 🗆 4 🗆

		issue)		2) No (Go to	
		15500)		the next issue)	
f)	Promoting environmental management of urban agglomerations	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
g)	Promoting health, education, training and employment support for IDPs (where relevant)	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗔
h)	Proactive planning for urban population growth	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗔
i)	Other, specify	1) Yes  \_ Name 2) No \_	1) Yes	1) Yes	1 🗆 2 🗔 3 🗀 4 🗔
elevan omme opying	nt on facilitators g this table — each	al context, briefly and barriers. List a table is for one (1) i	list achiever s many issue dentified issu	s as are deemed e.	relevant by
elevan comme copying	t in the nation nt on facilitators g this table – each	al context, briefly and barriers. List a table is for one (1) i	list achiever s many issue dentified issu	s as are deemed e.	relevant by
elevan omme opying ICPD is a) Nar (me	t in the nation nt on facilitators this table – each sues regarding urbate me of the issue entioned in stion 3.5 above)	al context, briefly and barriers. List a	list achiever s many issue dentified issu	s as are deemed e.	relevant by
relevan comme copying ICPD is a) Nar (me que b) Ach the	t in the nation at on facilitators that the table – each sues regarding urbane of the issue entioned in stion 3.5 above) nievements (cite reports)	al context, briefly and barriers. List a table is for one (1) i	list achiever s many issue dentified issu	s as are deemed e.	relevant by
comments of the comments of th	t in the nation nt on facilitators to this table – each sues regarding urba me of the issue entioned in stion 3.5 above) nievements (cite	al context, briefly and barriers. List a table is for one (1) i	list achiever s many issue dentified issu	s as are deemed e.	relevant by
relevan comme copying ICPD is a) Nar (me que b) Ach the c) Fac d) Bar	t in the nation at on facilitators this table – each sues regarding urbate the of the issue entioned in stion 3.5 above) nievements (cite reports) illitators*	al context, briefly and barriers. List a table is for one (1) i	list achiever s many issue dentified issu gration relevant	s as are deemed e. to the national con	relevant by
relevan commercopying ICPD is a) Nan (me que b) Ach the c) Fac d) Bar See list of	t in the nation and on facilitators this table – each sues regarding urbate the of the issue entioned in stion 3.5 above) nievements (cite reports) dilitators* riers*  of facilitators and bar ansidering the nation and interview.	aal context, briefly and barriers. List a table is for one (1) in anization and internal mig	list achiever is many issue dentified issue gration relevant interviewer's guidate are the mo	s as are deemed e.  to the national conditional condit	text es regarding
relevan commerce copying ICPD is  a) Nan (me que b) Ach the  c) Fac d) Bar  See list of Issues r	t in the nation at on facilitators this table – each sues regarding urbane of the issue entioned in stion 3.5 above) nievements (cite reports) illitators*  In facilitators and bar in the nation and interior the next five (at the still of the still of the next five (at the still of the still	al context, briefly and barriers. List an table is for one (1) in table is for one (1) in table is for one internal migration and internal migrational context, what had migration that to 5) to ten (10) years?	list achiever is many issue dentified issued issued issued issued issued issued is a reference interviewer's guidant are the mode country contract is a reference in the country of the co	s as are deemed e.  to the national conde	text es regarding y for public
relevan commercopying ICPD is a) Nati (medicular (medic	t in the nation at on facilitators this table – each sues regarding urbase the interest of the issue entioned in stion 3.5 above) nievements (cite reports) illitators*  Infacilitators and bar insidering the nation and interest for the next five (segarding internal metals)	al context, briefly and barriers. List an table is for one (1) in table is for one (1) in table is for one internal migration and internal migrational context, what had migration that to 5) to ten (10) years?	list achiever is many issue dentified issued issued issued issued issued issued is a reference interviewer's guidant are the mode country contract is a reference in the country of the co	s as are deemed e.  to the national conde	text es regarding y for public
relevan commercopying ICPD is a) Nat (me que b) Ach the c) Fac d) Bar See list of Issues r for the	t in the nation at on facilitators this table – each sues regarding urbase the interest of the issue entioned in stion 3.5 above) nievements (cite reports) illitators*  Infacilitators and bar insidering the nation and interest for the next five (segarding internal metals)	al context, briefly and barriers. List an table is for one (1) in table is for one (1) in table is for one internal migration and internal migrational context, what had migration that to 5) to ten (10) years?	list achiever is many issue dentified issued issued issued issued issued issued is a reference interviewer's guidant are the mode country contract is a reference in the country of the co	s as are deemed e.  to the national conde	text es regarding y for public

3.8. Are there any legal or practical restrictions on the movement of people within the country, including the need for a work permit, proof of identity, and proof of employment or legal address at the place of destination, based on HIV status, or, in the cases of women the need to be authorized by the husband or a legal guardian/tutor?

1) Yes, legal
3.9. Has the country conducted an assessment/ situation analysis on internal migration and/or urbanisation at the national and/or subnational level in the last five (5) years? IF YES, cite the report(s).
1) Yes At the national level only, cite the report(s)
3.10. Has the country conducted an assessment/ situation analysis on internally displaced persons and/or refugees in the last five (5) years?
<ol> <li>Yes  Initial assessment to address post-crisis/disaster population displacements</li> <li>Yes  Internally displaced persons profiling exercise</li> <li>Yes  Surveys conducted covering refugee populations</li> <li>No  None of the above (<i>if no, skip to 3.12</i>)</li> </ol>
3.11. If YES, describe the key actions taken to protect and assist refugees and displaced persons based on the above assessments/situation analyses.
3.12. Name up to three (3) civil society organisations (CSOs) whom the government has partnered with in the area of urbanisation and internal migration over the past

3.12. Name up to three (3) civil society organisations (CSOs) whom the government has partnered with in the area of urbanisation and internal migration over the past five (5) years. Cite the type of CSO, the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Governm ent unit which partnered with the CSO	Area of CSO involvement	Activities conducted
a)	1) National NGO  2) International NGO		1) Service Delivery 2)Research and Data Collection	

	3) Migrant Networks	3)Advocacy and Policy Formulation	]
	4) Academic/research centers	4) Awareness Raising and social mobilisation	]
	9) Other, specify	5) Monitoring and legal counsel	]
		6) Education and training	]
		9) Other, specify	]
b)	1) National NGO	1) Service Delivery	
	2) International NGO	2)Research and Data Collection	]
	3) Migrant Networks	3)Advocacy and Policy Formulation	]
	4) Academic/research centers	4) Awareness Raising and social mobilisation	]
	9) Other, specify	5) Monitoring and legal counsel	]
		6) Education and training	]
		9) Other, specify	]
c)	1) National NGO	1) Service Delivery	
	2) International NGO	2)Research and Data Collection	]
	3) Migrant Networks	3)Advocacy and Policy Formulation	]
	4) Academic/research centers	4) Awareness Raising and social mobilisation	]
	9) Other, specify	5) Monitoring and legal counsel	]
		6) Education and training	]
		9) Other specify	1

3.13. Name up to three (3) private sector partners with whom the government has partnered with in the area of urbanisation and internal migration over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

3.14. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of urbanization and internal migration over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international	Type of international cooperation	Activities conducted
a Ireland, Department of	cooperation Myanmar (Burma)	1) Financial	Support to internally displaced persons in
Foreign Affairs and Trade,	Support provided		Kachin and Northern Shan States of Myanmar
Irish Aid	through Non-	2) Technical	through i) provision of food assistance; ii)
111311 7 110	Governmental		provision of basic sanitation facilities
	Organisations	9) Other, specify	iii)provision of safe areas, play areas, and
			temporary day care for children iv) trauma
h Indand Department of	Dama anatia Damahlia	1) Einemaiol	counselling for conflict affected people
b Ireland, Department of	Democratic Republic	1) Financial	Support to internally displaced persons in Eastern DRC through i) provision of non food
Foreign Affairs and Trade, Irish Aid	of Congo (DRC) Support provided	2) Technical	items (blankets, mosquito nets, soap, cooking
IIISII AIG	through Non-		utensils etc) ii)• Strengthen capacity in self-
	Governmental	9) Other, specify	protection for IDPs, returnees and host
	Organisations		families with specific reference to addressing
			Gender Based Violence (GBV), human rights,
			woman & child protection and HIV/AIDS
			prevention
c Ireland, Department of	South Sudan	1) Financial	Support provided to returnees, internally
Foreign Affairs and Trade,	Support provided		displaced persons and other vulnerable
Irish Aid	through Non-	2) Technical	populations in Greater Bahr el Ghazal &
	Governmental		Lakes States through i) provision of cash
	Organisations	9) Other, specify	grants to enable returning populations to
			purchase materials for shelter; ii) the
			provision of seeds & tools; iii) the provision
			of small livestock; iv) the establishment of
			vegetable gardens; v) the provision of safety nets through conditional cash grants to
			vulnerable households; vi) the provision of
			boreholes to enable access to water.

# SECTION 4: INTERNATIONAL MIGRATION AND DEVELOPMENT (CHAPTER X)

Name(s) of the primary responde Name(s) of institution(s)/departm E-mail address(es): Phone number(s) – Landline: Fax(es): Interview date(s):	nent(s): Dept of Jus				
4.1. Does the country have international migration arimplemented?	_	• •			_
1) Yes					
4.2. If YES, provide the na implementing the policy, prand the implementation time	rogramme and/ neframe or the y	or strategy, the treatment of inception	targeted pop /revision.	oulation gro	oups
Nome of policy, programme	(2)	(3) Status	(4) Main	(5)	(6)
Name of policy, programme and/or strategy addressing international migration and development	Туре	Status	responsible institution	Targeted population groups*	Implementation timeframe or year of inception/ revision
a)	1) Policy	1)Drafted			
b)	1) Policy	1)Drafted			
c)	1) Policy	1)Drafted			
d)	1) Policy	1)Drafted			
e)	1) Policy	1)Drafted			
*See targeted population groups list  4.3. Has the country estable international migration and an international migration and a second	ished any instit	utional entities t		ssues regard	ling

### 4.4. If YES, indicate the name(s) of the institutional entity(ies) and the year of establishment.

(1)	(2)
Other institutional entities addressing international migration and development	Year of establishment
a) Inter-Departmental Committee for Development (which deals with the full spectrum	2007
of development and development aid issues)	
b)	
(c)	
(d)	
e)	

4.5. Addressing ICPD issues regarding international migration and development in the national context during the last five years

	(1)	(2)	(3)	(4)	(5)
	ICPD issues regarding international migration and development	Was this issue addressed in any existing policy/programme/strateg y or through an institutional entity? If yes, in which one(s)?	Was budget allocated to this issue?	Were concrete implementation measures taken to address this issue?	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
a)	Addressing the root causes of migration so migration is by choice not necessity	1) Yes ☐ Name  2) No ☒ (Go to the next issue)	1) Yes	1) Yes ☐ Describe  2) No ☒ (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
b)	Protecting migrants against human rights abuses, racism, ethnocentrism and xenophobia	1) Yes ⊠ Name Department of Justice and Equality  2) No ☐ (Go to the next issue)	1) Yes 🔀 2) No 🔲	1) Yes  Describe: National  Action Plan Against  Racism (NPAR) 2005-2008, and the Equal  Status Acts 2000-2011  2) No  (Go to the  next issue)	1 🗆 2 🗀 3 🖾 4 🗀
c)	Taking gender and age into account in formulating immigration policies	Yes □ Name     You ⋈ (Go to the next issue)	1) Yes	1) Yes Describe 2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
d)	Addressing the factors that contribute to forced internal displacement	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes ☐ Describe  2) No ☒ (Go to the next issue)	1 🗆 2 🗔 3 🗆 4 🗀

e)	Strengthening support for international activities to protect and assist refugees and displaced persons	1) Yes □ Name  2) No ☒ (Go to the next issue)	1) Yes	1) Yes ☐ Describe  2) No ☒ (Go to the next issue)	1 🗆 2 🗀 3 🗀 4 🗀
f)	Combat trafficking and/or smuggling of migrants	Yes ⊠ Name Department of Justice and Equality     No ☐ (Go to the next issue)	1) Yes 🔀 2) No 🔲	1) Yes \( \subseteq \) Describe Criminal Law (Human Trafficking) Act 2008 and the National Action Plan to Prevent and Combat Trafficking of Human Beings in Ireland 2009- 2012 2) No \( \subseteq \) (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗀
g)	Facilitate the flow and use of remittances to support development	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗔 4 🔲
h)	Strengthening of dialogue and cooperation between countries of origin, transit and destination	1) Yes ☐ Name  2) No ☒ (Go to the next issue)	1) Yes	1) Yes  Describe  2) No  (Go to the next issue)	1 🗆 2 🗔 3 🗔 4 🗔
i)	Improving disaggregated data on international migration (including forced migration) taking age, sex and other equity and vulnerability variables into account	1) Yes ☐ Name  2) No ☒ (Go to the next issue)	1) Yes	1) Yes ☐ Describe  2) No ☒ (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
a)	Other, specify	1) Yes  \[ \text{Name} 2) No \[ \text{No} \]	1) Yes	1) Yes	1 🗆 2 🗔 3 🗔 4 🗔
			1		

### $\textbf{4.6.} \ \ \textbf{Achievements} \ \ \textbf{in} \ \ \textbf{addressing} \ \ \textbf{issues} \ \ \textbf{related} \ \ \textbf{to} \ \ \textbf{international} \ \ \textbf{migration} \ \ \textbf{and} \ \ \textbf{development.}$

Among the issues related to international migration and development that are most relevant in the national context, briefly list achievements (citing reports), and comment on facilitators and barriers. List as many issues as are deemed relevant by copying this table – each table is for one (1) identified issue.

IC	PD issues regarding inte	ernational migration and development relevant to the national context
a)	Name of the issue	
	(mentioned in	
	question 4.5 above)	
b)	Achievements (cite	
	the reports)	
c)	Facilitators*	

d)	Barriers*	

### 4.7. On a scale of 1-4, indicate to what extent the following international migration priorities are addressed in the current national context

	(1)			(2)	
	International migration priorities	Level	of priority (1= 3=somewhat	=low; 2=some t high; 4=high	
Send	ling countries				
a)	Address the root causes of migration and make remaining in one's country a viable option for all people.	1 🖂	2 🗆	3 🗆	4 🗆
b)	Facilitate inflows of remittances by sound economic policies and adequate banking facilities.	1 🖂	2 🗆	3 🗆	4 🗆
c)	Make provisions for voluntary repatriation and safe return of migrants, including forced migrants	1 🗆	2 🗆	3 🗆	4 ⊠
d)	Facilitating exchange of information on migration policies	1 🗆	2 🗆	3 🗆	4 🖂
e)	Facilitate the reintegration of migrants	1 🗆	2 🗆	3 🗆	4 🖂
f)	Creating mechanisms for promoting diaspora investments and contributions to the communities of origin	1 🖾	2 🗆	3 🗆	4 🗆
Rece	eiving countries				
g)	Ensure the same treatment to documented migrants and members of their family accorded to nationals with regard to basic human rights	1 🗆	2 🗆	3 🗆	4 ⊠
h)	Protect women and children who migrate as family members from abuse and denial of their human rights.	1 🗆	2 🗆	3 🗆	4 🛛
i)	Work towards integration of family reunification into national legislation	1 🗆	2 🗆	3 🗆	4 🖾
j)	Prevent racist and xenophobic actions and policies.	1 🗆	2 🗆	3 □	4 ⊠
k)	Prevent the exploitation of undocumented migrants and protect their basic human rights	1 🗆	2 🗆	3 🗆	4 ⊠
1)	Prevent international trafficking in migrants; and protect them against racism, ethnocentrism and xenophobia.	1 🗆	2 🗆	3 🗆	4 ⊠
m)	Making potential migrants aware of the legal conditions for entry, stay and employment in host countries	1 🗆	2 🗆	3 🗆	4 🛛
n)	Facilitate the integration of migrants, including forced migrants	1 🗆	2 🗆	3 🗆	4 🛛
o)	Preventing discrimination of migrants on the basis of age, sex, race, HIV status, religion or disability	1 🗆	2 🗆	3 🗆	4 ⊠
All c	ountries				
p)	Engaging in bilateral or multilateral negotiations on, inter alia, readmission agreements that protect the basic human rights of undocumented migrants in accordance	1 🗆	2 🗆	3 🗆	4 🛛

<sup>\*</sup>See list of facilitators and barriers in the questionnaire interviewer's guide

2) 3) 4.10 has past	Yes At the subnational	cea of international type of CSO, the of involvement, and (3)  Name of the Government unit which partnered with the CSO	he report(s) hational leve hisations (CS hi migration e name of hid the activi	SOs) whom and devel the govern ties conduc (4)	the gover opment ov ment unit	er the
2) 3) 4.10 has past part	Yes At the subnationary At the subnationary At both the national No No Name up to three (3) constructed with in the artistic (5) years. Cite the need with it, its area(s) (2)	al level only, cite that and at the submitted society organies of internations type of CSO, the of involvement, and (3)  Name of the	he report(s) hational leve hisations (CS hi migration e name of hid the activi	SOs) whom and devel the govern ties conduc	the gover opment ov ment unit	ver the which
2) 3) 4.10 has past part	Yes At the subnationary At both the nation At both the nation No No Name up to three (3) of partnered with in the artive (5) years. Cite the nered with it, its area(s) of the name of the	al level only, cite the nal and at the submitted in the s	he report(s) national leve isations (CS nl migration e name of	l, cite the re SOs) whom and devel the govern ties conduc	the gover opment ov ment unit	ver the which
2) 3) 4.10 has past	Yes At the subnational Yes At both the nation No No Name up to three (3) copartnered with in the artifive (5) years. Cite the	al level only, cite the nal and at the submitted society organizes of international type of CSO, the	he report(s) national leve isations (CS nl migration e name of	l, cite the re SOs) whom and devel	the gover opment ov ment unit	er the
2) 3)	Yes At the subnational Yes At both the nation	al level only, cite th	he report(s)		eport(s)	
2)	Yes At the subnational	al level only, cite th	he report(s)		eport(s)	
/		<u>-</u>	•			
1)	Vac At the notional le	aval only site the	enort(s)			
year	s? IF YES, cite the repor	τ(8).				
migr	Has the country conduct ration and development a	t the national and		•		
(-)						
d) e)						
	cilitating the voluntary repatria				state has expir	red
	omic development oviding State protection to pers	sons who are in genuine	e need of such	protection		
a) P	cy priority for the next five to rioritising initiatives to reform	ten years the immigration syster	n to contribute	e to investmen	t in the State	and to assist in
Issu	es regarding international mig	gration and developm		nticipated to	receive furth	er public
inter	Considering the nationa national migration and ic policy for the next five	development th	at the cou		_	_
	and flows of migrants	monitoring of stocks	1 🗆	<u> 2</u> Ц	э <u></u>	4 ⊠
	Provide access to health service reproductive health services, to Refugees. Support the data gathering and	migrants, IDPs and	1 🗆	2 🗆	3 □	4 🗆
r)	Strengthen support for internat and assist refugees and displac		ect 1 🗆	2 🗆	3 □	4 🛛

4) Awareness Raising and social mobilisation

5) Monitoring and legal counsel

6) Education and training

with relevant international instruments.

specify\_

		9) Other, specify	
b)	1) National NGO  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify	1) Service Delivery  2)Research and Data Collection  3)Advocacy and Policy Formulation  4) Awareness Raising and social mobilisation  5) Monitoring and legal counsel  6) Education and training  9) Other, specify	
c)	1) National NGO  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify	1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

4.11. Name up to three (3) private sector partners with whom the government has partnered with in the area of international migration and development over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery	
		2)Research and Data Collection	
		3)Advocacy and Policy Formulation	
		4) Awareness Raising and social mobilisation	
		5) Monitoring and legal counsel	
		6) Education and training	
		9) Other, specify	
b)		1) Service Delivery	
		2)Research and Data Collection	
		3)Advocacy and Policy Formulation	
		4) Awareness Raising and social mobilisation	
		5) Monitoring and legal counsel	
		6) Education and training	

	9) Other, specify	
c)	1) Service Delivery	
	2)Research and Data Collection	
	3)Advocacy and Policy Formulation	
	4) Awareness Raising and social mobilisation	
	5) Monitoring and legal counsel	
	6) Education and training	
	9) Other, specify	

4.12. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of international migration and development over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
a Ireland, Department of Foreign Affairs and Trade, Irish Aid	Libya, Egypt, Tunisia and other third countries Multilateral support provided through International Organisation for Migration (IOM)	1) Financial  2) Technical  9) Other, specify	Support to the IOM's Libya Evacuation and Stabilisation Unit to:i) facilitate the evacuation of Egyptian nationals from Libya; ii) support the provision of reception and emergency assistance to Egyptians, Tunisians, Libyans and Third Country Nationals at the Egyptian and Tunisian borders; iii) to facilitate the onward repatriation of Third Country Nationals already evacuated to Egypt and Tunisia
b Ireland, Department of Foreign Affairs and Trade, Irish Aid	Syria, Jordan, Lebanon Support provided on multilateral basis through UN agencies (UNHCR, UNWRA, WFP), through the International Committee of the Red Cross and through Non- Governmental Organisations	1) Financial  2) Technical  9) Other, specify	Support to agencies listed in (2) to i) facilitate the operation of reception centres and refugee camps; ii) to ensure the provision of basic essential requirements, including shelter, food assistance and access to water, both to refugees within Syria and refugees from Syria fleeing to Lebanon and Jordan.
c Ireland, Department of Foreign Affairs and Trade	Liberia Multilateral support provided through UN agencies (UNHCR, UNICEF)	1) Financial  2) Technical  9) Other, specify	Support to UNHCR and UNICEF to assist the Government of Liberia in hosting significant numbers of Ivoirian refugees fleeing 2011 political unrest. Financial contribution targeted at: i) establishment of refugee camps; ii) provision of basic essential

	requirements and services to
	refugees, including shelter, food
	assistance and access to water

# SECTION 5: FAMILY, WELLBEING OF INDIVIDUALS AND SOCIETIES (CHAPTER V)

Name(s) of institution(s)/department(s): Department of Education and Skills

Name(s) of the primary respondent(s) and position(s):

E-mail address(es): Phone number(s) - Landline: Mobile: Fax(es): Interview date(s):							
5.1. Does the country have the needs of the family an drafted or implemented?	_	• •			_		
1) Yes 2) No ( <i>If no, skip to 5.3</i> )							
5.2. If YES, provide the na implementing the policy, prand the implementation time	rogramme and/	or strategy, the	targeted pop	-			
(1)	(2)	(3)	(4)	(5)	(6)		
Name of policy, programme and/or strategy addressing the needs the family and the wellbeing of individuals	Туре	Status	Main responsible institution	Targeted population groups*	Implementation timeframe or year of inception/ revision		
a)	1) Policy 2) Programme 3) Strategy	1)Drafted					
b)	1) Policy	1)Drafted					
c)	1) Policy	1)Drafted					
d)	1) Policy 2) Programme 3) Strategy	1)Drafted					
e)	1) Policy	1)Drafted					
*See targeted population groups lis	st in the questionnai	re interviewer's guid	le				
5.3. Has the country establ the needs of the family and	-		to address is	ssues regard	ling		
1) Yes \( \sum \) 2) No \( \sum \) (If no, skip to 5.5)							

### 5.4. If YES, indicate the name(s) of the institutional entity(ies) and the year of establishment.

(1)	(2)
Other institutional entities addressing the needs of the family and the wellbeing of individuals	Year of establishment
a)Department of Children and Youth Affairs (a dedicated Government Department)	2011
b)	
(c)	
d)	
e)	

5.5. Addressing ICPD issues regarding the needs of the family and the wellbeing of individuals in the national context during the last five (5) years.

	(1)	ational context during the Is	(3)	(4)	(5)
ICPD issues regarding the needs of the family and the wellbeing of individuals		Was this issue addressed in any existing policy/programme/strategy or through an institutional entity? If yes, in which one(s)?	Was budget allocated to this issue?	Were concrete implementation measures taken to address this issue?	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
a)	Increasing efforts to ensure health, education and welfare services function collaboratively and effectively	Yes x Name: Health Service     Executive (HSE) - Children and Family     Services  2) No ☐ (Go to the next issue)	1) Yes ☐ 2) No ☐	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗆 4 🗀
b)	Facilitating compatibility between labour force participation and parental responsibilities	1) Yes  Name 2) No  (Go to the next issue)	1) Yes	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
c)	Providing financial and social protection schemes to single parent families	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
d)	Developing the capacity to	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe	1 🗆 2 🗔 3 🗀 4 🗀

	monitor the impact of policies on the wellbeing of families			2) No  (Go to the next issue)	
e)	Providing effective assistance to families and the individuals within them who are affected by specific problems	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
f)	Preventing children's abuse and neglect and provide assistance to children victims of abuse, neglect or abandonment, including orphans	1) Yes x Name: Health Service Executive (HSE) - Children and Family Services 2) No  (Go to the next issue)	1) Yes	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
g)	Assisting families caring for family members with disabilities, and family members living with HIV	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes  Describe  Co to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
h)	Ensuring good quality early childhood care and education for working families, including extended day programs	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes   Describe  2) No  (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
i)	Supporting and assisting vulnerable families (very poor, victims of humanitarian crisis, drought, etc.)	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes  Describe  2) No (Go to the next issue)	1 🗆 2 🗔 3 🗀 4 🗀
j)	Supporting educational programmes concerning	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No (Go to the next issue)	1 🗆 2 🗆 3 🗆 4 🗆

parental roles, parental skills and child development				
k) Other, specify	1) Yes  \[ \] Name 2) No \[ \]	1) Yes	1) Yes Describe	1 🗆 2 🗔 3 🗆 4 🗔

5.6. Achievements in addressing issues related to the needs of families and the wellbeing of individuals.

Among the issues related to the needs of families and the wellbeing of individuals that are most relevant in the national context, briefly list achievements (citing reports), and comment on facilitators and barriers. List as many issues as are deemed relevant by copying this table – each table is for one (1) identified issue.

ICI	ICPD issues regarding the needs of the family and the wellbeing of individuals relevant to the national context						
a)	Name of the issue (mentioned in question 5.5 above)						
b)	Achievements (cite the reports)						
c)	Facilitators*						
d)	Barriers*						

<sup>\*</sup>See list of facilitators and barriers in the questionnaire interviewer's guide

5.7. Does the country provide special support (monetary or in kind) through social protection programmes/schemes to disadvantaged families and individuals?

(1)	(2)	(3)	(4)
Name of social protection programme/scheme	Targeted groups*	Monetary support	In kind support
a)		1) Yes 2) No 2	1) Yes 2) No 2
b)		1) Yes 2) No 2	1) Yes 2) No 2
c)		1) Yes 2) No 2	1) Yes 2) No 2
d)		1) Yes 2) No 2	1) Yes 2 No 2
e)		1) Yes 2) No 2	1) Yes 2 No 2
f)		1) Yes 2 No 2	1) Yes 2) No 2
g)		1) Yes 2) No 2	1) Yes 2) No 2
h)		1) Yes 2 No 2	1) Yes 2 No 2
i)		1) Yes 2 No 2	1) Yes 2 No 2
j)		1) Yes 2) No 2	1) Yes 2 No 2
1)		1) Yes 2) No 2	1) Yes 2) No 2
m)		1) Yes 2) No 2	1) Yes 2) No 2

<sup>\*</sup>See targeted population groups list in the questionnaire interviewer's guide

5.8. Considering the national context, what are the most relevant issues regarding the family and the wellbeing of individuals that are anticipated to receive further public policy priority for the next five (5) to ten (10) years? Cite up to five (5) issues.

<b>pol</b> a)	The establishment of the Child and Family Support Agency (scheduled for early 2012), which will tak over responsibility for the HSE's Children and Family Services, the Family Support Agency and the National
	Educational Welfare Board.
<u>b)</u>	
c)	
<u>d)</u>	
5.9. iee	Has the country conducted an assessment/situation analysis on the family, its ds and composition / structure at the national and/or subnational level in the five (5) years? IF YES cite the report(s)
5.9. nee ast	ds and composition / structure at the national and/or subnational level in the five (5) years? IF YES, cite the report(s).
5.9. nee ast	ds and composition / structure at the national and/or subnational level in the five (5) years? IF YES, cite the report(s).  ) Yes   At the national level only, cite the report(s)
nee ast 1 2	ds and composition / structure at the national and/or subnational level in the five (5) years? IF YES, cite the report(s).

5.10. Name up to three (3) civil society organisations (CSOs) whom the government has partnered with in the area of the family and the wellbeing of individuals over the past five (5) years. Cite the type of CSO, the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Government unit which partnered with the CSO	Area of CSO involvement	Activitie s conducte d
a)	1) National NGO  2) International NGO  4) Academic/research centers 9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)	1) National NGO  2) International NGO  4) Academic/research centers 9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)	1) National NGO  2) International NGO  4) Academic/research centers 9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

5.11. Name up to three (3) private sector partners with whom the government has partnered with in the area of the family and the well-being of individuals over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

5.12. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of the needs of the family and wellbeing of individuals over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
a) Ireland, Department of Foreign Affairs and Trade, Irish	Zambia, Ministry of Community Development, Mother and Child Health	1) Financial YES 2) Technical YES	a) Financial and technical support to the Ministry of Community Development, Mother and Child Health in rolling out the Zambia
Aid		9) Other	Social Protection Expansion

b)	Ireland, Department of Foreign Affairs and Trade, Irish Aid	Mozambique, Ministry of Women and Social Action (MMAS) and National Institute of Social Action (INAS	State Here:	Programme. b) Through a pooled fund in UNICEF financial support is provided for the M&E/MIS and capacity building component of the social protection programme  Support via UNICEF to Governement to strengthening capacity at all levels to roll out and manage the social protection programmes in a quality manner and in coordination with other sectors and creating linkages between social protection programmes, social services and child protection through community case management
c)	Ireland, Department of Foreign Affairs and Trade, Irish Aid	Ethiopia, Ministry of Agriculture and Rural Development (MOARD)		Productive Safety Nets Programme which provides some of the most vulnerable people in Ethiopia wit cash or food on a regular basis in return for work on projects such as land rehabilitation.

# SECTION 6: REPRODUCTIVE RIGHTS AND REPRODUCTIVE HEALTH (CHAPTERVII) AND HEALTH, MORBIDITY AND MORTALITY (CHAPTER VIII)

PLEASE NOTE THAT THIS DOCUMENT RESPONDS ONLY TO ISSUES RELATING TO SEXUAL HEALTH, AS SEXUAL HEALTH AND REPRODUCTIVE HEALTH ARE NOT DEALT WITH AS A SINGLE POLICY AREA IN IRELAND. WHERE QUESTIONS ARE NOT DEEMED RELEVANT THEY HAVE NOT BEEN TRANSCRIBED AND WHERE AN ANSWER IS NOT PROVIDED THIS IS ALSO DUE TO THE QUESTION NOT BEING RELEVANT OR MEANINGFUL FROM THE IRISH PERSPECTIVE.

6.1. Does the country have a national policy, programme and/or strategy addressing sexual and reproductive health and reproductive rights that is/are currently being drafted or implemented?

[Yes]

6.2. If YES, provide the name, the type, status, the main institution responsible for implementing the policy, programme and/or strategy, the targeted population groups and the implementation timeframe or the year of inception/revision.

The Department of Health is in the process of developing a National Sexual Health Strategy that will address sexual health. It will target all population groups and will be published in 2013.

6.3. If YES, indicate whether the national policy, programme and or strategy addressing sexual and reproductive health and reproductive rights include the following HIV prevention, treatment, care and support issues?

HIV prevention, treatment, care and support issues		
a) VCT within family planning	Yes	
b) BCC on HIV within SRH services	Yes	
c) PMTCT within maternal health services	Yes	
d) HIV treatment for people living with HIV	Yes	
e) STI and HIV prevention services	Yes	

**6.4.** Has the country established any institutional entities to address issues regarding sexual and reproductive health and reproductive rights? [Yes]

6.5. If YES, indicate the name(s) of the institutional entity(ies).

The National AIDS Strategy Committee is an institutional entity which was set up by the Department of Health in 1992 to advise on policy and practice in relation to HIV and AIDS.

The Crisis Pregnancy Agency was established initially in 2001 and integrated into the Health Service Executive in 2010 as the Crisis Pregnancy Programme.

**6.6.** Addressing ICPD issues re. sexual and reproductive health and reproductive rights in the national context over the last 5 years

(1)	(2)	(3)	(4)	(5)
ICPD issues	Was this issue	Was budget	Were concrete	In your assessment,
regarding sexual and	included in any	allocated to this	implementation	and based on most
reproductive health	policy/programme/st	issue?	measures taken to	concrete evidence at
and reproductive	rategy or addressed		address this issue?	your disposal and
rights	through an existing			that you may be
	institutional			aware of, how
	arrangement?			would you rate the
				overall progress of
				implementation of
				the measures
				adopted on scale
a) Increasing	1) Yes	1). Yes	1). Yes	3. On schedule
women's	Name: Health		The Crisis	
accessibility to	Service Executive		Pregnancy Agency	
information &	Crisis Pregnancy		was established	
counselling on	Programme		initially in 2001 and	
sexual &	(HSE CPP)		integrated into the	
reproductive health	mandates and		Health Service	
	strategic plans		Executive in 2010.	
			A new Strategy has	
			been published	
			2012-2016 which	
			sets out a number of	
			key actions relevant	
			to this area (this	
			represents its 3 <sup>rd</sup>	
			National Strategy). Main awareness	
			raising campaigns to	
			highlight	1
			information on	
			contraception	
			(prevention	
			mandate) and the	
			availability of free	
			counselling services	
			nationwide	
			(supports during and	
			after a crisis	
			pregnancy mandate)	
			include Think	
	<u> </u>	L	morade Tillin	

			Contraception,	
			Positive Options	
			and Abortion	
			Aftercare. The HSE	
			CPP has increased	
			the availability of	
			free CPC and PTC	
			by over 50%	
			nationally since it	
			was established.	
b) Increasing	1. Yes	1. Yes	1. Yes	3. On schedule
women's access to	All HSE CPP		Part of the mandate	
comprehensive	funded services are		of the HSE Crisis	
sexual and	open to all women,		Pregnancy	
reproductive health	their partners and		Programme is to	
services, regardless	families regardless		fund organisations	
of marital status or	of marital status or		that provide free,	
age	age.		non-judgemental	
uge	age.		crisis pregnancy and	
			post-abortion	
			*	
			counselling services	
			and post-abortion	
			medical check-ups.	
c) Increasing	1) Yes	1) Yes	1) Yes	3 on schedule
	- in part through the	2) No	Yes - Grant Aid	
and cultural	work of the HSE		Agreements in place	
minorities' access to	CPP's Funding and		to deliver relevant	
comprehensive	Research		services. All HSE	
sexual and	Programmes.		CPP funded	
reproductive health			services, both crisis	
_	2) No		pregnancy	
of marital status and			prevention and	
age, including			support services are	
access to			open to all people.	
			Specific funding	
contraception				
			relevant to c) HSE	
			CPP provides	
			funding to Pavee	
			Point for	
			relationships and	
			sexual health	
			education training	
			(organisation	
			representing Irish	
			Travellers), HSE	
			CPP provided	
			funding to AkiDwA	
			(Migrant Women's	
			Network) to provide	
			relationships and	
			sexuality	
			information	
			workshops for	

			asylum seekers/ migrant women	
			which included information on	
			contraception and	
			crisis pregnancy	
			services. HSE CPP	
			funded National	
			University of	
			Ireland, Maynooth to deliver a	
			Masterclass to	
			Service Providers	
			on how to work in a	
			culturally	
			appropriate way with non Irish	
			nationals.	
			nationais.	
			Funded research on	
			Attitudes to	
			Fertility, Sexual	
			Health and Motherhood	
			amongst a Sample	
			of Non-Irish	
			National Ethnic	
			Minority Women	
			Living in Ireland	
			and delivering on dissemination	
			strategy for this	
			research.	
d) Increasing access of persons with	,	1) Yes	1) Yes All HSE funded	3 on schedule
disability to	Research relevant to the area initiated by	2) NO	services are open to	
comprehensive	HSE CPP. Relevant		all women, their	
sexual and	submissions made to		partners and	
	progress work in		families.	
	this area.		Published a	
of marital status and age, including			literature review on the provision of	
access to			accessible and	
contraception			appropriate support	
_			for women with an	
			intellectual	
			disability	
			experiencing a crisis pregnancy and	
			organised seminar	
			for practitioners to	
			disseminate and	

	T	T	11 01 11	1
			discuss findings.	
			Commitments in	
			place to carry out	
			further research.	
e) Increasing men's		1) Yes	1) Yes	3 on schedule
access to sexual and	All HSE CPP	2) No	Specific	
reproductive health	funded services are		promotional	
information,	open to all women,		campaigns carried	
counselling, and	their partners and		out to promote crisis	
services	families.		pregnancy	
			counselling services	
			to men. Services	
			have reported seeing	
			more men at their	
			services. A number	
			of services received	
			specific allocations	
			to provide parenting	
			support classes for	
			fathers.	
f) Provision of	2) No	1) Voc	1) Yes	1 2 3 4
′	2) No	1) Yes	/	1 2 3 4
adequate food and		2) No	Describe	
nutrition to pregnant			2) No (Go to the	
women (including			next issue)	
nutrition				
supplementation)				
	Emergency obstetric	1) Yes	1) The overall	3) On schedule
essential and	care is addressed		health services are	
comprehensive	through the HSE's		undergoing major	
emergency obstetric	primary care, acute		reform which will	
care (EmOC)	hospitals and		address all aspects	
	maternity hospitals		of healthcare	
	network		including obstetrics.	
			An Obstetric &	
			Gynaecological	
			national clinical	
			programme has	
			been established	
			which will drive	
			service quality.	
			This programme	
			has been working	
			on developing	
			national clinical	
			guidelines; those	
			guidelines, those	
			deal with acute	
			emergencies have	
			been prioritised.	
h) Access to	Obstetric care is	1) Yes	The overall health	3) On schedule
antenatal care	delivered through		services are	
	the HSE's primary		undergoing major	
antenatal care	delivered through	1) Yes	services are	5) On schedule
[	me noe s primary		pindergoing major	

	ann and 1		£	
	care system and		reform which will	
	maternity hospitals		address all aspects	
	network. It is a very		of healthcare	
	comprehensive		including obstetrics.	
	service which offers		An Obstetric &	
	mothers various		Gynaecological	
	options in how they		national clinical	
	structure their		programme has	
			been established	
			which will drive	
			service quality. In	
			addition to this	
			there is a	
			commitment to	
			work with the	
			HSE to implement	
			_	
			the	
			recommendations	
			arising from an	
			independent	
			comprehensive	
			review of Dublin	
			maternity services	
			completed in	
			2008. This will	
			see the co-location	
			of these three	
			stand-alone	
			hospitals with	
			Acute Hospitals	
			and the expansion	
			of primary and	
			community based	
			ante natal services	
			as part of the	
			future	
			configuration of	
			maternity and	
			gynaecology	
			services in Dublin	
i) Increasing access	1) Yes Name	1) Yes	′	3 on schedule
to comprehensive	Specific initiatives	2) No	- HSE CPP have a	
sexual and	identified in		number of funding	
reproductive health	previous strategies		arrangements in	
services for	and current Strategy		place with Services	
adolescents	2012-2016 re		to provide	
	working with		relationships and	
	adolescents and		sexuality education	
	their parents in		to adolescents in	
	relation to		both formal and non	
	•	•	*	

	relationships and sexuality education.		formal education settings. The HSE CPP also funds a number of Youth Health Advice Cafes and Youth friendly Health Services which provide positive models for possible replication. HSE CPP also funds training for parents and youth workers in this area. A number of educational resources have also been developed by the HSE CPP and others to assist Parents/Youth Workers/Teachers and other Health Care Professionals in communicating with young people about RSE and	
	1) Yes Name HSE CPP mandates		awareness of local services.  1) Yes In the case of	3. On schedule
medical support for adolescent pregnant women	facilitate delivery of a national funding programme which supports the delivery of certain		medical support a number of services receive grant funding to provide medical services	
	medical services for adolescent pregnant women Other relevant HSE funded services include the Teen		(including contraception services) to young women during and after a crisis pregnancy. This	
	Parent Support Programme (information, support and referral service for teen parents)		includes the availability of free post termination medical check-ups.	
k) Increasing access to STI/HIV		Yes	1) Yes – a widespread information and	3

services for vulnerable population groups and population groups and population groups and populations at risk  1) Increasing access to voluntary and confidential HIV testing mother-to-child transmission of HIV and transmis		h	1	т	
vulnerable population groups and populations at risk and populations at risk l) Increasing access to voluntary and confidential HIV testing m) Eliminating mother-to-child stransmission of HIV pregnant women is and treatment for improving the life expectancy of HIV positive mothers where required.  a) Integration of Shr and HIV services and appropriate treatment provided where required.  b) Breast cancer screening and treatment  c) No		MSM		awareness raising	
population groups and populations at risk  (i) Increasing access (No 1) Yes 2) No Describe 2) No (Go to the next issue)  No Eliminating mother-to-child transmission of HIV and treatment for improving the life expectancy of HIV-positive mothers  a) Integration of SRH and HIV services  a) Integration of SRH and HIV services  b) Breast cancer screening and treatment  c) Breast cancer (P) No 2) No 2) No (Go to the next issue)  c) Breast cancer (P) No 2) No 2) No (Go to the next issue)  c) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion management of the consequences of unsafe abortion occurselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g., youth	services for			campaign was	
and populations at risk i) Increasing access to voluntary and confidential HIV testing m) Eliminating mother-to-child transmission of HIV and freatment for improving the life expectancy of HIV positive mothers n) Integration of SISRH and HIV services n) Breast cancer screening and treatment n) Prevention and management of the consequences of unsafe abortion  1. Yes 1. Ye	vulnerable			conducted to	
and populations at risk i) Increasing access to voluntary and confidential HIV testing m) Eliminating mother-to-child transmission of HIV and freatment for improving the life expectancy of HIV positive mothers n) Integration of SISRH and HIV services n) Breast cancer screening and treatment n) Prevention and management of the consequences of unsafe abortion  1. Yes 1. Ye	population groups			promote testing and	
insk					
Di Increasing access to voluntary and confidential HIV testing   1) Yes   2) No   2) No   2) No (Go to the next issue)   2) No (Go to the next issue)   2) No (Go to the next issue)   3   4   4   4   4   4   4   4   4   4	* *				
to voluntary and confidential HIV testing m Eliminating mother-to-child streaming of all stransmission of HIV and treatment for improving the life expectancy of HIV-positive mothers where required.  a) Integration of SRH and HIV services  a) Breast cancer screening and treatment  b) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  consequences of unsafe abortion  confidential HIV testing m HIV-positive mothers where required.  2) No — this is a programme was piloted and launched nationally in programme was piloted and launched nation		No	1) Yes	1) Yes	1 2 3 4
confidential HIV testing mother-to-child transmission of HIV program of all transmission of HIV prositive mothers and treatment for improving the life expectancy of HIV positive mothers and appropriate resolution and treatment of the consequences of unsafe abortion  1) Prevention and management of the consequences of unsafe abortion  1. Yes  3. On schedule part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g., youth			*	*	
m) Eliminating mother-to-child transmission of HIV and treatment for improving the life expectancy of HIV-positive mothers  n) Integration of SRH and HIV services  n) Integration of SRH and HIV services from the treatment of the consequences of unsafe abortion  n) Integration of SRH and HIV services from the treatment of the consequences of unsafe abortion  n) Integration of SRH and HIV services from the treatment of the consequences of unsafe abortion  n) Integration of SRH and HIV services from the treatment of the consequences of unsafe abortion  n) Integration of SRH and HIV services from the treatment of the consequences of unsafe abortion  n) Integration of SRH and HIV services from the treatment of the consequences of unsafe abortion of the treatment of the consequences of unsafe abortion or unsafe abortion counselling services and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g., youth	•		2)110		
m) Eliminating mother-to-child transmission of HIV and treatment for improving the life expectancy of HIV-positive mothers  n) Integration of SRH and HIV services  n) Breast cancer screening and treatment  n) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  m) I. Yes  1. Yes  2. No schedule  3. On schedule  3. On schedule  3. On schedule  4. Yes  4. Yes  1. Yes  2. No schedule  3. On schedule  3. On schedule  4. Yes  4. Yes				*	
screening of all transmission of HIV pregnant women is and treatment for improving the life expectancy of HIV-positive mothers  No  1) Integration of SRH and HIV services  a) Breast cancer screening and treatment and treatment and treatment and treatment  b) Breast cancer screening and treatment and anagement of the consequences of unsafe abortion  1) Presention and anagement of the consequences of unsafe abortion  1) Presention and post-abortion medical check-ups. The Crisis Pregnancy Programme is to funds organisations and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth		Vac Antonotol	No this is a		2
transmission of HIV and treatment for improving the life expectancy of HIV-positive mothers  a) Integration of SRH and HIV services  a) Breast cancer screening and treatment  b) Prevention and management of the consequences of unsafe abortion  1. Yes  1.	_				3
and treatment for improving the life expectancy of HIV-positive mothers  n) Integration of SRH and HIV services  o) Breast cancer screening and treatment  p) Prevention and management of the consequences of unsafe abortion  p) Prevention and management of the consequences of unsafe abortion  1. Yes  2. No Go to the next issue)  2. No Bescribe  Expansion of age range of existing breast screening programme to 50-69 years.  2. No Go to the next issue)  2. No Go to the next issue  3. On schedule  Part of the mandate of the HSE Crisis Pregnancy  Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis  Pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy  Programme also funds organisations and services that support crisis pregnancy		_	routine programme		
improving the life expectancy of HIV-positive mothers where required.  n) Integration of SRH and HIV services  No  1) Yes 2) No  1) Yes 2) No  1) Yes 2) No (Go to the next issue)  o) Breast cancer screening and treatment  2) No   Go to the next issue)  1) Yes 2) No  Describe				μ	
expectancy of HIV- positive mothers  n) Integration of SRH and HIV services  No  1) Yes 2) No  Describe				launched nationally	
positive mothers treatment provided where required.  n) Integration of SRH and HIV services  No					
where required.  n) Integration of SRH and HIV services  No  1) Yes 2) No  Describe 2) No (Go to the next issue)  o) Breast cancer screening and treatment  2) No   Go to the next issue)  1) Yes 2) No   Go to the next issue)  p) Prevention and management of the consequences of unsafe abortion  1. Yes  1. Y		* * *			
n) Integration of SRH and HIV services    1) Yes	positive mothers	_			
SRH and HIV services  2) No Describe		•			
services  2) No (Go to the next issue)  0) Breast cancer screening and treatment  2) No   Go to the next issue)  p) Prevention and management of the consequences of unsafe abortion  1. Yes  1. Yes  1. Yes  1. Yes  1. Yes  1. Yes  2) No schedule  Part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth		No	· *	*	1 2 3 4
next issue     o) Breast cancer     screening and treatment     2) No   Go to the next issue     2) No   Go to the next issue     2) No   Standard issue     3. On schedule     1. Yes   Standard issue     1. Yes   Standard issue     2. Yes   Standard issue     3. On schedule     3. On schedule     4. Yes   Standard issue     5. Yes   Standard issue     6. Yes   Standard issue     7. Yes   Standard issue     8. Yes   Standard issue     9. Prevention and management of the consequences of unsafe abortion     1. Yes   Standard issue     2. No (Go to the next issue)     1. Yes   Standard issue     2. No (Go to the next issue)     3. On schedule     4. Yes   Standard issue     5. Yes   Standard issue     6. Yes   Standard issue     7. Yes   Standard issue     8. Yes   Standard issue     9. Yes   Standard issue     1. Yes   Standard issue     2. No (Go to the next issue     2. No (Go to the next issue     3. On schedule     4. Yes   Standard issue     5. Yes   Standard issue     6. Yes   Standard issue     7. Yes   Standard issue     8. Yes   Standard issue     9. Yes   Standard issue     9. Yes   Standard issue     1. Yes   Standard issue	SRH and HIV		2) No	Describe	
o) Breast cancer screening and treatment  1) Yes X  2) No ☐ (Go to the next issue)  1) Yes ☐ (Go to the next issue)  2) No ☐ (Go to the next issue)  2) No ☐ (Go to the next issue)  2) No [Go to the next issue)  3. On schedule  Part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth	services			2) No (Go to the	
Screening and treatment  2) No				next issue)	
treatment  2) No Go to the next issue)  2) No Expansion of age range of existing breast screening programme to 50-69 years. 2) No (Go to the next issue)  1. Yes  1. Yes  2) No schedule  Part of the mandate of the HSE Crisis  Pregnancy  Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups.  The Crisis  Pregnancy  Programme also funds organisations and services that support crisis pregnancy pregnancy  Programme also funds organisations and services that support crisis pregnancy pregnancy prevention, by providing e.g. youth	o) Breast cancer	1) Yes X	1) Yes	1) Yes	1 2 X 4
treatment  2) No Go to the next issue)  2) No Expansion of age range of existing breast screening programme to 50-69 years. 2) No (Go to the next issue)  1. Yes  1. Yes  1. Yes  2. Yes  3. On schedule  Part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth	screening and			Describe_	
p) Prevention and management of the consequences of unsafe abortion  1. Yes  1. Yes  1. Yes  1. Yes  1. Yes  3. On schedule  Part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth	treatment	2) No ☐ (Go to the	2) No	Expansion of age	
p) Prevention and management of the consequences of unsafe abortion  1. Yes  1. Yes  1. Yes  3. On schedule Part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth				range of existing breast	
p) Prevention and management of the consequences of unsafe abortion  1. Yes  1. Yes  1. Yes  1. Yes  3. On schedule Part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth				screening programme	
p) Prevention and management of the consequences of unsafe abortion  1. Yes  1. Yes  1. Yes  3. On schedule  Part of the mandate of the HSE Crisis  Pregnancy  Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis  Pregnancy  Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth				to 50-69 years	
p) Prevention and management of the consequences of unsafe abortion  1. Yes  1. Yes  1. Yes  2. On schedule  Part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth				2) No (Go to the	
management of the consequences of unsafe abortion  Part of the mandate of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth				next issue)	
consequences of unsafe abortion  of the HSE Crisis Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth	p) Prevention and	1. Yes	1. Yes	1. Yes	3. On schedule
unsafe abortion  Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth	management of the			Part of the mandate	
unsafe abortion  Pregnancy Programme is to fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth				of the HSE Crisis	
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fund organisations that provide free, non-judgemental crisis pregnancy and post-abortion counselling services and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth					
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and post-abortion medical check-ups. The Crisis Pregnancy Programme also funds organisations and services that support crisis pregnancy prevention, by providing e.g. youth					
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support crisis pregnancy prevention, by providing e.g. youth					
pregnancy prevention, by providing e.g. youth					
prevention, by providing e.g. youth				support crisis	
providing e.g. youth					
				prevention, by	
woult information				providing e.g. youth	
work, information,				work, information,	

q) Cervical cancer screening and treatment	1) Yes □ 2) No □	1) Yes 2) No	counselling and healthcare services.  1) Yes Describe 2) No (Go to the next issue)	1 2 3 4
r) Access to safe abortion services to the extent of the law			3. The Government recently approved the implementation of the judgment of the European Court of Human Rights in the <i>A</i> , <i>B</i> and <i>C</i> v <i>Ireland</i> case by way of legislation with regulations, within the parameters of Article 40.3.3 of the Constitution as interpreted by the Supreme Court in the <i>X</i> case. They also agreed to make appropriate amendments to the criminal law in this area.	
s) Other , specify				

### 6.7 Achievements in addressing issues related to sexual and reproductive health and reproductive rights.

Among the issues related to sexual and reproductive health and reproductive rights that are most relevant in the national context, briefly list achievements (citing reports), and comment on facilitators and barriers. List as many issues as are deemed relevant by copying this table – each table is for one (1) identified issue.

ICPD issues regard	ICPD issues regarding sexual and reproductive health and reproductive rights relevant to		
the national context			
a) Name of the issue (mentioned in 6.6. above)	Increasing access to comprehensive sexual and reproductive health services for adolescents - Teenage Pregnancy		
b) achievements	Reduction in the teenage pregnancy (and teenage abortion) rates - a		

	decrease in the birth rate from 20 per 1000 females aged 15-19 in 2001 to 12 per 1000 females aged 15-19 in 2011. This equates to a reduction of 44% in the number of births to teenagers between 2011 and 2001 (establishment of the former CPA – now HSE CPP).
c) facilitators	Better Relationships and Sexuality education due to a required RSE Programme in all schools, increased subject inspections, the development of standardised resources for use by Teachers, Youth Workers and parents in talking to young people about RSE, funding of training to support professionals and parents in this area, provision of training for young people on RSE in formal and non formal education settings, information on and access to contraception services.
d) barriers	Issues in relation to accessing sexual health services when a person is below the age of consent for sexual intercourse/age to consent to medical treatment. Need to improve delivery of RSE in non formal education settings for early school leavers.

ICPD issues regarding sexual and reproductive health and reproductive rights relevant		
to the national context		
a) Name of the issue (mentioned in 6.6. above)	Increasing women's accessibility to information & counselling on sexual & reproductive health – <b>crisis pregnancy counselling</b>	
b) achievements	Increasing the availability of free State funded crisis pregnancy counselling services by over 50% for women experiencing a crisis pregnancy, their partners or family members. This facilitates space for considering their options, provides for a short waiting time for counselling services which is important in this context, choice of service type and allows for equity of access to services.	
c) facilitators	Grant funding, well established and experienced Service Providers and strategic oversight and planning.	
d) barriers	Maintaining grant assistance at a level to support availability into the future. Providing access for young people below the age of consent to counselling services. Improving uptake of available Services by those who need them most.	

ICPD issues regarding sexual and reproductive health and reproductive rights relevant		
to the national context		
a) Name of the issue (mentioned	Increasing women's accessibility to information & counselling on sexual & reproductive health.	
in 6.6. above)		
b) achievements	Decrease in the number of women giving Irish addresses at UK abortion clinics by 38% since 2001 (2011 data). 10 <sup>th</sup> year that this decrease has been recorded.	
c) facilitators	Prevention Services: Relationships and sexuality education, information on and access to contraception services. Support Services: Crisis Pregnancy Counselling Services and follow on support services for those considering adoption or opting to parent. Grant funding and strategic oversight and planning of CPC services nationwide	
d) barriers	Maintaining focus on RSE, improving access to contraception services and continuing to provide grant assistance to support availability into the future of CPC Services and other follow on support services (including parenting supports). Ensuring those who need the Services most access them.	

#### O. 6.8

Considering the national context, what are the most relevant issues regarding sexual & reproductive health & reproductive rights to receive further public policy priority over next five years

- a) Introducing legislation to bring clarity and certainty in relation to the process for the determination of whether a termination of pregnancy is permissible, i.e. where there is a real and substantial risk to the life, as opposed to the health, of a woman as a result of a pregnancy.
- b) Publication of the Sexual Health Strategy
- c) Introducing legislation to regulate assisted human reproduction
- d) HIV/STI screening and prevention for MSM

e)

#### Q. 6.9.

Have the following accountability mechanisms been used to address peoples' claims on sexual and reproductive health and reproductive rights

a) Judiciary	1. Yes
b) National Human Rights Institutions	2. No
c) Parliamentary commissions	1. No
d) Administrative mechanisms of protection	2. No
e) Other, specify_	

#### Q. 6.10

What issues have been	dealt with and what	different kinds of reme	edies have they provided?

Judiciary – A number of cases around abortion and assisted human reproduction have been heard by the		
Courts in Ireland, two examples are provided in the attached note.*		

#### 0.6.11

Has Ireland conducted an assessment/situation analysis on sexual and reproductive health and reproductive rights...in the last five years?

3) yes – at both national and subnational level – cite the report(s

HSE CPP Strategy 2012-2016 Three large scale population surveys have been carried out since 2003 to provide reliable national data establishing baseline measures and allowing trends to be examined over the past seven years. The most recent is the Irish Contraception and Crisis Pregnancy Study - 2010 (ICCP-2010) – the findings of which have been used extensively to inform the development of the HSE Crisis Pregnancy Programme's third national strategy.

### Q. 6.12

Has Ireland conducted an assessment of unmet needs for family planning...in the last five years?

1) Yes – at the national level

The Irish Contraception and Crisis Pregnancy Study - 2010 (ICCP-2010) - a nationally representative survey.

#### Q. 6.13

If yes, either/both 6.11 or 6.12, explain what priorities were identified.

Improve knowledge and awareness of sexual health and relationships through the delivery of targeted communication campaigns, customised information and educational programmes, and other initiatives across a range of settings.

Ensure high levels of awareness and availability of contraception and contraceptive services so as to increase consistent and correct use of contraception for at-risk groups.

Improve access to consistent, high-quality crisis pregnancy counselling and post-abortion services and promote the availability of community-based post-natal and family supports

Foster the development of strategic partnerships and alliances to increase the participation, resources and collective commitment in improving sexual health in Ireland and the reduction of crisis pregnancy.

Sustain a high-quality research base and increase the application of existing and new research through a comprehensive knowledge transfer strategy directly targeting developments in policy and practice.

**Q. 6.14**Has the country promulgated and/or enforced national laws responding to the following ICPD priority areas related to sexual and reproductive health and reproductive rights?

(1)	(2)	(3)
ICPD Priority Area	Promulgation	Enforcement
a) National law protecting the right to the highest attainable standard of physical and mental health, including sexual and reproductive health		
b) Access to abortion	1) The Government recently approved the implementation of the judgment of the European Court of Human Rights in the <i>A</i> , <i>B</i> and <i>C v Ireland</i> case by way of legislation with regulations, within the parameters of Article 40.3.3 of the Constitution as interpreted by the Supreme Court in the <i>X</i> case. They also agreed to make appropriate amendments to the criminal law in this area.	

c) non-discrimination to comprehensive sexual and reproductive health service, including HIV services	1) Yes – Equality Act 2004	1) Yes
d) Protection again coercion, including forced sterilisation, forced marriage, etc.	1) Yes, various criminal justice acts to protect women from gender-based violence (e.g. Family Law Act 1995, Criminal Justice (FGM) Act 2012, Criminal Law Sexual Offences Act (1993), Domestic Violence Act (1996), Criminal Law (Rape) Act 1981)	1) Yes
e) Protecting the right of people living with HIV	1) Yes – Equality Act 2004	1) Yes

# **Q. 6.15.** Which of the following sexual & reproductive health services are currently offered through the primary care system

Service	Response
Contraceptive services	1) Yes
a. Counselling	1) Yes
b. Information	1) Yes
c. Access to at least 3 contraceptive methods	1) Yes
d. Access to emergency contraception	1) Yes
e. Access to male condoms	1) Yes
f). Access to female condoms	2) Yes
g) information about maternity care, including delivery with a	1) Yes
skilled attendant.	
h) prenatal care	1) Yes
i) essential obstetric care	2) No – hospital provision
j.) emergency obstetric care	2) No – hospital provision
k) post-natal care including contraceptive services	1) Yes
l. Infertility services*	2) No
m. Safe abortion to the extent of the law	2) No
n. Post-abortion counselling	1) Yes
o. Post-abortion care	1) Yes
STIs	
p. prevention	Yes
q. Detection/testing	Yes
r. Treatment and careq	Yes
HIV	
s. Prevention	YES
t. Voluntary counselling and testing	YES
u. Treatment	NO – hospital provision
v. Care and support	YES
w. Prevention of mother to child transmission and treatment for	NO – hospital provision
improving the life expectancy of HIV-positive mothers	

x. Contraceptives services for PLWHIV	1) yes
Reproductive Cancers (including breast, cervical and prostate)	
p. Prevention	1) Yes 🛛 2) No 🗌
q. Detection/testing	1) Yes 🛛 2) No 🗌
aa. Treatment and care	1) Yes 🛛 2) No 🗌
bb. HPV vaccination	1) Yes 🛛 2) No 🗌
cc. Services to detect and treat the consequences of sexual violence	1) Yes 2) No
Obstetric fistula services**	2) No
Female Genital Mutilation/Cutting***	
kk. Prevention	1) Yes
11. Treatment and care	2) No

<sup>\*</sup>Primary care services in Ireland would deal with preliminary testing and referral for infertility services; however, diagnosis is usually dealt with in a secondary care setting by a specialist, and treatment in the form of assisted reproduction services is only available from private providers.

<sup>\*\*\*</sup>Primary care services would only deal with minor symptoms. Care for serious symptoms would be provided by a specialist, e.g. an Obstetrician/Gynaecologist, in an acute setting.

address sexual and reproductive health as an integral part of primary health care system Strategies/actions	Response
a) Standards for SRH service delivery, including maternity care, family planning and STIs/HIV	Yes. Development of national standardised resources on relationships and sexuality education for use by teachers and youth workers which are disseminated through training (Trust and b4udecide.ie lesson plans). Development of a national website for young people called b4udecide.ie to support young people to make healthy, responsible decisions about relationships and sex. Parents, Teachers and Youth Workers are also encouraged to access this site.  Standardised Framework for Crisis Pregnancy Counselling - A Practice Guide. Disseminated through training.
b) Guidelines for SRH service delivery, including maternity care, family planning and STIs/HIV	Yes. Concealed Pregnancy Guidelines developed and

<sup>\*\*</sup>Obstetric fistula is not a major issue in Ireland; treatment would be provided in an acute setting by a specialist, e.g. an Obstetrician/Gynaecologist, rather than in primary care.

	published by former CPA, now HSE CPP - for use in maternity settings. Guideline on the prevention and management of crisis pregnancies developed with ICGP and due for publication shortly (for use by GPs and crisis pregnancy counsellors nationwide). This is an update of two previous Guidelines published by the former CPA in partnership with the ICGP in this area
c) Existence of an SRH costed package integrated into primary health care provision	No
d) Referral mechanisms for SRH services	1) Yes
e) Health information system disaggregated by age	Yes - The Health Protection Surveillance Centre (HPSC) collects data on the number of sexually transmitted infections notified.
f) Health information system disaggregated by sex	Yes - The Health Protection Surveillance Centre (HPSC) collects data on the number of sexually transmitted infections notified.
g) Health personnel trained in SRH, including midwifery skills	1) Yes but not midwifery skills – hospital provision
h) Health personnel trained in HIV/AIDS counselling	1) Yes - HIV/AIDS counselling is available in all state funded HIV/STI clinical settings.
i) Health personnel trained in reproductive rights	2) No
j) Health personnel trained in GBV screening (including FGM/C)	1) Yes The HSE launched its own Policy on Domestic, Sexual and Gender-Based Violence in 2010. One of its objectives is to ensure that all HSE frontline staff are aware of their obligations to recognise and respond to Domestic and/or Sexual Violence.

	In relation to FGM
	specifically, the HSE has
	funded numerous
	initiatives, including:
	imitatives, merading.
	The development of
	professional supports for
	those involved with
	providing care and support
	for women and girls who
	have undergone FGM.
	The development and
	The development and dissemination of
	dissemination of information for health care
	professionals working in
	Ireland on FGM, Female Genital Mutilation:
	Information for Health Care Professionals
	Working Ireland.
	working Heiana.
	The delivery of numerous
	training sessions to up to
	500 health professionals
	working in relevant service
	provision areas, including
	midwives, GPs, public
	health nurses and social
	workers.
	The introduction of the
	National Maternity
	Healthcare Record. This
	new form will be used for
	all women booking for
	maternity care and includes for the first time
	at a national level FGM as
	a risk factor for obstetric
	care.
k) Mechanisms to monitor quality of SRH service delivery	2) No
1) Health personnel trained in elimination of stigma and	2) No
discrimination towards key populations, including young people,	
people living with HIV, sex workers and clients, men having sex	
with men, transgender people and people who use drugs	
m) Mechanisms to guarantee participation of community-based	Yes
organizations	
n) Standards, guidelines and training for health care providers on	1) Yes – through Irish
informed contraceptive choice and provision of non-coercive	College of General
services	Practitioners and
	professional development
	HSE CPP in partnership
	with ICGP has funded

	training for tutors to assist
	in training for GPs/Family
	Planning Practitioners in
	the use of Long Acting
	Reversible Contraception
	(LARC) to support patient
	choices in this area.
o) Other, specify	

### 6.17. Does the national essential medicine list include the full range of sexual and reproductive health medicines defined by WHO?

1) Yes	$\boxtimes$
2) No	

6.18. Are there special sexual and reproductive health programmes and initiatives, including those related to HIV, to reach the below listed groups?

Group	Response Type of service provided*
a) Adolescents and youth	Yes – b4udecide campaign/training for
	youth workers on encouraging young
	people to make healthy, responsible
	decisions and to delay early sex. /'Real u'
	training for Youth Workers and for young
	people/'Real Deal' peer led sexual health
	education programme in formal and non
	formal settings, Youth Health Advice
	Cafes amongst others
	Research underway on the sexual health
	and sexual education needs of young
	people in State residential care and foster
	care placements
b) Extremely poor	Yes – All HSE CPP funded services and
	sex education resources are available free
	of charge to members of the public. A
	number of specific RSE and parenting
	support projects are funded that are
	targeted at young people, including early
	school leavers and parents from lower SES
	backgrounds.
	Current research project aimed at
	identifying the sexual health needs of
a) Indiannous manula	young people in care.  N/A
c) Indigenous people	
d) Ethnic minorities	RSE Workshops for asylum seekers and
a) De aumente d'injerente	migrant women/their partners
e) Documented migrants	RSE Workshops for asylum seekers and
f) Unde sumented misments	migrant women/their partners
f) Undocumented migrants g) IDPs	Not specifically N/A
<i>C</i> <sup>2</sup>	**
h) Refugees	RSE Workshops for asylum seekers and
	migrant women/their partners

i) People living with HIV	YES – Targeted prevention programmes
j) Key populations at higher risk of HIV	YES – Targeted prevention programmes
k) Persons with disabilities	No specific HSE CPP funding in
	this area at present – funded the
	development of a sexual health
	resource library for Health
	Promotion Officers to access
	relevant resources on working with
	people with disabilities around
	relationships and sexual health
	(HSE South)
1) Older persons	National Sexual Health Strategy is
	to take life cycle approach

## 6.19. Which of the following strategies are being used under the current national policy/programme on sexual and reproductive health to reduce financial barriers to services?

For Finance Unit

Strategies	Response
a) Cross-subsidization	No
b) Government taxation (tobacco, alcohol)	Yes
c) Targeted pro-poor subsidies	No
d) Social marketing	No
e) Community-based services	No
f) Peer outreach	No
g) Demand creation (e.g. conditional cash	No
transfers)	
h) National health insurance	No
i) Community insurance schemes	No
j) Free services at point of care	Yes
k) Universal free care	No

# 6.20. Does the country have specific programmes to ensure the access of adolescents and youth to sexual and reproductive health information and services that warrant and respect privacy, confidentiality and informed consent?

There are a number of youth friendly health services available in certain locations across the country which are facilitated through HSE CPP funding – Cork, Donegal, Waterford.

#### 6.21. If YES, in which of the following areas?

	Area	Response
a)	Contraceptives	1) Yes 2) No 2
b)	Sexual violence/sexual exploitation	1) Yes 2) No 2
c)	STIs, including HIV	1) Yes 2) No 2
d)	Gender-based violence and harmful traditional practices	1) Yes 2) No 2
e)	Respect, tolerance and non-discrimination of sexual minorities	1) Yes 2) No 2
f)	Intimate partner violence	1) Yes 2) No 2
g)	Safer sex	1) Yes 2) No 2
h)	Other, specify	

6.22. Does the country have any official legislation and/or regulation to promote ethical standards in research design in the area of sexual and reproductive health? No

**6.23.** Is the geographic distribution of emergency obstetric care facilities adequate\*? Yes

### 6.24. What mechanisms does the country have in place to ensure implementation of policies and programmes to monitor maternal morbidity and mortality?

	Monitoring mechanisms	Response
a)	National health information system	1) Yes X 2) No The Hospital Inpatient Enquiry (HIPE) system exists and collects data on every discharge from public acute hospitals in Ireland.
b)	Direct obstetric case fatality rate monitoring	1) Yes X 2) No  fatalities from direct obstetric causes would be recorded in both HIPE and the CSO's mortality statistics. This would be recorded as Complications of Pregnancy, Childbirth and Puerperium (codes O00-O99) under the International Classification of Diseases (ICD10).
c)	Mandatory notification of maternal deaths	1) Yes X 2) No Mandatory notification of direct obstetric deaths would be recorded in the CSO's mortality statistics as code O00-O99.
d)	Routine maternal death reports at the national level  If YES, provide date of last report  ————	The Confidential Maternal Death Enquiry in Ireland Report was published for the first time in 2012. This covered the period 2009-2011. I am unsure, though, if this is considered a "routine" report. See http://www.mdeireland.com/pub/MDE_report_w_2012.pdf for more details.
e)	Routine data collection on obstetric fistula (indicators collected in national health information system)	1) Yes X 2) No Data on this would be collected under the Hospital Inpatient Enquiry (HIPE) system
f)	Routine data collection on post-partum care	The ESRI publishes a Perinatal Statistics report every year, though this mainly focusses on the outcomes of the infant.  The HSE also collects quarterly data on the % of newborn babies visited by a public health nurse.  Presumably the visit of a public health nurse would be considered post-partum care?
g)	Public independent inquiries (by National Human Rights Institutions, Parliamentary Commissions, Commissions on Women, etc)	1) Yes  2) No
h)	Policy and budget monitoring surveys (PETS, QSDS, CSCs, social audits, etc)	1) Yes 2) No
i)	Other,	
1)	specify	

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Government unit which partnered with the CSO	Area of CSO involvement	Activit s conduc d
a)	1) National NGO  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)	1) National NGO 2) International NGO 3) Youth Groups 4) Academic/research centers 9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)	1) National NGO  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify_		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

partnered with in the area of sexual and reproductive health and reproductive rights over the past five (5) years. Cite the name of the government unit which partnered

(3)

Area of involvement

**(4)** 

**Activities** 

conducted

with it, its area(s) of involvement, and the activities conducted.

**(2)** 

Name of the

**Government unit** 

which partnered with

the private sector

6.25. Does the national health strategy/plan include training curricula for health

care workers to prevent and treat/manage obstetric fistula?

1) Yes 2) No

**(1)** 

Name private

sector partner

a)	1)	Service Delivery		
·	2)1	Research and Data Collection		
	3).	Advocacy and Policy Formulation		
	I *	Awareness Raising and social mobilisation	Π	
		Monitoring and legal counsel	П	
		Education and training	Ħ	
		Other, specify	Ħ	
b)		Service Delivery	一	
	1	Research and Data Collection	Ħ	
	I *	Advocacy and Policy Formulation	Ħ	
	I *	Awareness Raising and social mobilisation	Ħ	
		Monitoring and legal counsel	Ħ	
		Education and training	H	
	I *	Other, specify	H	
c)		Service Delivery	$\exists$	
()		Research and Data Collection	H	
			님	
	I *	Advocacy and Policy Formulation	片	
		Awareness Raising and social mobilisation	片	
		Monitoring and legal counsel	님	
		Education and training	님	
	9)	Other, specify	Ш	

6.28 Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of sexual and reproductive health and reproductive rights over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
a) Ireland, Department of Foreign Affairs and Trade, Irish Aid b) Ireland, Department of Foreign Affairs and Trade, Irish	Ethiopia, Ministry of Health  Mozambique, Ministry of Health	1) Financial  2) Technical  9) Other, specify  1) Financial  2) Technical  9) Other, specify  1) Financial	Improved family planning through health extension worker programme; Expanded social marketing of reproductive health commodities through traditional and non-traditional outlets; Improved access to reproductive health services as part of essential and basic health care packages
Aid c) Ireland, Department of Foreign Affairs and Trade, Irish Aid	Lesotho, Ministry of Health	1) Financial  2) Technical  3) Other, specify  □	In partnership with Clinton Health Access Initiative improving access to reproductive health services and HIV services in remote rural areas

### 6.29. On a scale from 1-4, indicate the level of priority of the following ICPD issues regarding HIV in national programming

ICPD issues regarding HIV	Level of priority 1-4
Total issues regulating in v	(1= low; 2=somewhat low; 3=somewhat high;
	4= high)
a) Protection and promotion of the human	, , , , , , , , , , , , , , , , , , ,
rights of individuals:	
1) People living with HIV	1) 4
<ol><li>Key populations at higher risk*</li></ol>	2) 4
3) Adolescents and youth	3) 4
4) HIV orphans	4) 1
5) People with disabilities,	5) 1
6) Racial, religious, ethnic, linguistic or	6) 1
other minorities	7) 1
7) Indigenous people	7) 1
8) Prisoners and other detained persons,	8) 4
9) Migrants/ un-documented migrants /	9) 3
mobile populations	10) 4
10) Refugees	10) 4
<ul><li>11) 11) Internally displaced persons</li><li>b) Voluntary and confidential HIV testing and</li></ul>	11) 1
counselling	4
c) Increase of female condom access and use	4
d) Increase of male condom access and use	4
e) Elimination of mother-to-child transmission	4
of HIV and improving the life expectancy of	
HIV-positive women	1
f) Provision of antiretroviral therapy for adults	4
g) Provision of antiretroviral therapy for	4
children in paediatric formulation	4
h) HIV prevention services, primary healthcare	4
services and other health services, provide non-	
judgemental, non-stigmatizing and relevant services for people living with HIV, key	
populations at higher risk and young people	
i) Provision of services for the comprehensive	4
management of sexually transmitted infections	4
(STIs)	
j) Access to user-friendly prevention, treatment,	4
care and support services for key populations at	7
higher risk	
k) Management of TB/HIV co-infection	4
1) Outreach to key populations at higher risk	4
m) Support community-led organizations of	4
key populations at higher risk of HIV, young	-
people, people living with HIV and people	
affected by HIV are partners in HIV	
programming	
n) Prevention of stigma and discrimination	4
towards people living with HIV and people	T
affected by HIV through awareness raising	
arrected by fir v till ough awareness raising	

6.30. Name up to three civil society organisations (CSOs) whom the government has partnered with in the area of HIV over the past five (5) years. Cite the type of CSO, the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Government unit which partnered with the CSO	Area of CSO involvement	Activities conducted
a)	1) National NGO		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 7) Design, planning, implementation and monitoring of HIV programmes 9) Other specify	
b)	1) National NGO		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 7) Design, planning, implementation and monitoring of HIV programmes 9) Other specify	
c)	1) National NGO2) International NGO 3) Networks of people living with HIV 4) Academic/ research centers 9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 7) Design, planning, implementation and monitoring of HIV programmes 9) Other specify	

6.31. Name up to three (3) private sector partners with whom the government has partnered with in the area of HIV over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

### 6.32. Which of the following areas on health, morbidity and mortality are considered priorities in the country's national health policy framework or strategy?

(1)	(2)	(3)
Area	Response	Targeted group(s)*
a) Prevention of maternal mortality	1) Yes	
b) Prevention of maternal morbidity	1) Yes	
c) STIs	1) Yes	
d) HIV	1) Yes  2) No (go to next issue)	
e) Prevention/elimination of gender-based	1) Yes	
violence	2) No (go to next issue)	
f) Child mortality	1) Yes  2) No (go to next issue)	
g) Immunization	1) Yes	
h) Malaria	1) Yes 2) No (go to next issue)	
i) Tuberculosis	1) Yes	

	2) No [ (go to next issue)
j) Communicable diseases	1) Yes
	2) No (go to next issue)
k) Non-communicable diseases	1) Yes
	2) No [ (go to next issue)
1) Neglected tropical diseases	1) Yes
	2) No (go to next issue)
m) Nutrition	1) Yes
	2) No (go to next issue)
n) Obesity	1) Yes
	2) No (go to next issue)
a) Mental health	1) Yes
	2) No (go to next issue)
p) Other, specify	1) Yes

<sup>\*</sup>See targeted population groups list in the questionnaire interviewer's guide

# SECTION 7: GENDER EQUALITY, EQUITY AND EMPOWERMENT OF WOMEN (CHAPTER IV)

Name(s) of institution(s)/departm E-mail address(es): Phone number(s) – Landline: Fax(es): Interview date(s):	Mo				
1) Yes \( \sum_{2} \) N= \( \sum_{1} \) (if \( \tau_{1} \) i. \( \tau_{2} \) (2)		en that are curr	enuy being i	mpiemente	a:
2) No (if no, skip to 7.3)  7.2. If YES, provide the n implementing the policy, p and the implementation tin	ame, the type, s rogramme and/ neframe or the y	or strategy, the year of inception	targeted pop /revision.	oulation gro	oups
(1) Name of policy, programme	(2) Type	(3) Status	(4) Main	(5) Targeted	(6) Implementatio
and/or strategy addressing gender equality and empowerment of women	Туре	Status	responsible institution	population groups*	timeframe or year of inception/ revision
a) National Women's Strategy	1) Policy 2) Programme 3) Strategy	1)Drafted ☐ 2)Implemented ⊠	Department of Justice and Equality		2007-2016
b)	1) Policy 2) Programme 3) Strategy	1)Drafted			
c)	1) Policy	1)Drafted			
d)	1) Policy	1)Drafted			
e)	1) Policy 2) Programme 3) Strategy	1)Drafted			
*See targeted population groups li 7.3. Has the country estab gender equality and empoy	lished any instit	tutional entities		ssues regard	ling

#### 7.4. If YES, indicate the name(s) of the institutional entity(ies).

(1)	(2)
Other institutional entities addressing gender equality and empowerment of women	Year of establishment
a) Gender Equality Division in Department of Justice and Equality	
b) Equality Authority	1999
c)	
<u>d</u> )	
e)	

7.5. Addressing ICPD issues regarding gender equality and empowerment of women

in the national context during the last five (5) years **(3)** (4)**(5)** ICPD issues regarding gender Was this issue Were concrete In your assessment, and equality and empowerment of included in any Was budget implementation based on most concrete women policy/programme allocated to measures taken evidence at your /strategy or this issue? to address this disposal and that you addressed through issue? may be aware of, how an existing would you rate the institutional overall progress of arrangement? If implementation of the yes, in which measures adopted on a scale of 1 to 4 as one(s)? follows: 1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule 1) Yes 🗌 a) Increasing women's 1) Yes Name\_ Describe\_ participation in the formal and 1) Yes 🔲 1 🔲 2 🔲 3 🔲 4 🔲 2) No 🗖 2) No [ Go to the informal economy 2) No Go to the next issue) next issue) 1) Yes b) Increasing women's 1) Yes Name\_ Describe\_\_\_ representation in political 1 🗆 2 🗆 3 🗆 4 🗆 2) No [ Go to the processes and public life 2) No [ (Go to the next issue) next issue) c) Ending gender based violence 1) Yes 🖂 Describe\_ Establishment of the National Office for 1) Yes Name\_ the Prevention of 1) Yes 🛛 Domestic, Sexual and 1 🗆 2 🗆 3 🗆 4 🗆 2) No [ (Go to the 2) No  $\Box$ Gender-based next issue) Violence 2) No [ (Go to the next issue) d) Improving the collection, 1) Yes 1) Yes Name\_\_ Describe\_\_\_ analysis, dissemination and use of 1 🗆 2 🗆 3 🗆 4 🗆 2) No [ (Go to the sex and age disaggregated data 2) No [ Go to the next issue) next issue) 1) Yes Name 1) Yes e) Collection and analysis of data 1) Yes 🔲 Describe\_ on the social and economic status 1 🔲 2 🔲 3 🔲 4 🔲 2) No Go to the 2) No 🗌 of women 2) No [ (Go to the next issue)

			next issue)	
			,	
f) Ending child marriage/forced	1) Yes Name		1) Yes  Describe	
marriage	2) No [ (Go to the	1) Yes  2) No		1 🗆 2 🗔 3 🗔 4 🗀
	next issue)	,	2) No (Go to the next issue)	
g) Preventing trafficking and	1) Yes  Name_		1) Yes 🗌	
smuggling in persons,		1) Yes	Describe	1 🗆 2 🗆 3 🗆 4 🗆
particularly girls and women	2) No (Go to the next issue)	2) No 🗌	2) No [Go to the	
h) Improving the welfare of the	1) Yes		next issue) 1) Yes	
girl child, especially with regards		1) Yes 🔲	Describe	1 🗆 2 🗆 3 🗆 4 🗆
to health, nutrition and education	2) No (Go to the next issue)	2) No 🗌	2) No [ (Go to the	
i) Improving the situation of and	,		next issue)  1) Yes	
addressing the needs of rural	1) Yes Name	1) Yes 🔲	Describe	
women	2) No [ (Go to the	2) No 🗌	2) No [ (Go to the	1 🗆 2 🗆 3 🗆 4 🗆
	next issue)		next issue)	
j) Engaging men and boys to promote male participation, equal	1) Yes  Name_	1) Yes 🗍	1) Yes  Describe	
sharing of responsibilities such as	2) No [ (Go to the	2) No	2) No [ (Go to the	1 🗆 2 🗔 3 🗀 4 🗀
care work	next issue)		next issue)	
k) Ending Female Genital	1) Yes 🛛 Name	_	1) Yes Describe	
Mutilation/Cutting	2) No [ (Go to the	1) Yes  2) No		1 🗆 2 🗔 3 🗔 4 🔲
	next issue)	2) No (Go to the next issue)		
1) Other, specify	1) Yes  Name_	1) V □	1) Yes	
		1) Yes 🔲	Describe	1 🔲 2 🔲 3 🔲 4 🔲
	2) No. 🖂	2) No 🗌		
	2) No 🗆	<u> </u>	2) No 🗆	
7.6. Achievements in address of women. Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab	ssing issues related o gender equality al context, briefly I barriers. List as	d to gender eq and empower list achievem many issues a	uality and emporment of women ents (citing repo	that are orts), and
of women. Among the issues related to most relevant in the nation comment on facilitators and	ssing issues related o gender equality al context, briefly l barriers. List as le is for one (1) ide	d to gender eq and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women. Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equal to the issue	ssing issues related o gender equality al context, briefly l barriers. List as le is for one (1) ide	d to gender eq and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women. Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equal to the issue (mentioned in the issue)	ssing issues related o gender equality al context, briefly l barriers. List as le is for one (1) ide	d to gender eq and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equation 7.5 above)	ssing issues related o gender equality al context, briefly l barriers. List as le is for one (1) ide	d to gender eq and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equal to the issue (mentioned in question 7.5 above)  b) Achievements (cite	ssing issues related o gender equality al context, briefly l barriers. List as le is for one (1) ide	d to gender eq and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equation 7.5 above)	ssing issues related o gender equality al context, briefly l barriers. List as le is for one (1) ide	d to gender eq and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equal to the issue (mentioned in question 7.5 above)  b) Achievements (cite the reports)  c) Facilitators*	ssing issues related o gender equality al context, briefly l barriers. List as le is for one (1) ide	d to gender eq and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equal to the issue (mentioned in question 7.5 above)  b) Achievements (cite the reports)	ssing issues related o gender equality al context, briefly l barriers. List as le is for one (1) ide	d to gender eq and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equation 7.5 above)  a) Name of the issue (mentioned in question 7.5 above)  b) Achievements (cite the reports)  c) Facilitators*  d) Barriers*	ssing issues related o gender equality al context, briefly I barriers. List as le is for one (1) ide quality and empowern	d to gender equand empower list achievem many issues a centified issue.	uality and emporment of women ents (citing reports are deemed re	that are orts), and levant by
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equation 7.5 above)  a) Name of the issue (mentioned in question 7.5 above)  b) Achievements (cite the reports)  c) Facilitators* d) Barriers*	ssing issues related of gender equality al context, briefly barriers. List as le is for one (1) idequality and empowern	and empower list achievem many issues a entified issue.	uality and emporment of women ents (citing reports are deemed relevant to the national	that are orts), and levant by
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equal to the issue (mentioned in question 7.5 above)  b) Achievements (cite the reports)  c) Facilitators* d) Barriers*  *See list of facilitators and barriers 7.7. Considering the nation	ssing issues related per equality all context, briefly barriers. List as le is for one (1) idequality and empowern all the questionnaire interest all context, what	and empower list achievem many issues a centified issue.	uality and emporment of women ents (citing reports are deemed relevant to the national relevant to the state of the national relevant issues r	that are orts), and levant by  context  regarding
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equation 7.5 above)  a) Name of the issue (mentioned in question 7.5 above)  b) Achievements (cite the reports)  c) Facilitators* d) Barriers*	ssing issues related of gender equality all context, briefly barriers. List as le is for one (1) idequality and empowern all context, what it is rerment of women	and empower list achievem many issues a entified issue.  The receiver of women related are the most at that are anticed are that are anticed are the most at that are anticed are the most at that are anticed are the most at the most are anticed are the most at the most are anticed are the most at the most are anticed are are anticed are anticed are are anticed are anticed are	uality and emponent of women ents (citing reports are deemed relevant to the national relevant issues recipated to receiv	that are orts), and levant by  context  regarding
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equality and empower public policy priority for the Issues regarding the nation gender equality and empower public policy priority for the Issues regarding gender equality	in the questionnaire intal context, what rement of women and empowerment of an empowerment of a empowerment of a empowerment of a empowerment of a empowe	and empower list achievem many issues a entified issue.  The receiver of the most at that are anticears? Cite up to	uality and emporment of women ents (citing reports are deemed relevant to the national relevant issues recipated to receive of five issues.	that are orts), and levant by  I context  regarding the further
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equality and empower public policy priority for the comment.  Among the issues related to most relevant to the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of the nation gender equality and empower public policy priority for the comment of th	in the questionnaire intal context, what rement of women and empowerment of an empowerment of a empowerment of a empowerment of a empowerment of a empowe	and empower list achievem many issues a entified issue.  The receiver of the most at that are anticears? Cite up to	uality and emporment of women ents (citing reports are deemed relevant to the national relevant issues recipated to receive of five issues.	that are orts), and levant by  I context  regarding the further
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equation (mentioned in question 7.5 above)  b) Achievements (cite the reports)  c) Facilitators* d) Barriers*  *See list of facilitators and barriers 7.7. Considering the nation gender equality and empowe public policy priority for the Issues regarding gender equality the focus for the next five to ten years.	in the questionnaire intal context, what rement of women and empowerment of an empowerment of a empowerment of a empowerment of a empowerment of a empowe	and empower list achievem many issues a entified issue.  The receiver of the most at that are anticears? Cite up to	uality and emporment of women ents (citing reports are deemed relevant to the national relevant issues recipated to receive of five issues.	that are orts), and levant by  I context  regarding the further
of women.  Among the issues related to most relevant in the nation comment on facilitators and copying this table – each tab  ICPD issues regarding gender equality and empower public policy priority for the Issues regarding the nation gender equality and empower public policy priority for the Issues regarding gender equality	o gender equality al context, briefly barriers. List as le is for one (1) idequality and empowern al context, what werment of women and empowerment of and empowerment of and empowerment of	and empower list achievem many issues a entified issue.  The receiver of the most at that are anticears? Cite up to	uality and emporment of women ents (citing reports are deemed relevant to the national relevant issues recipated to receive of five issues.	that are orts), and levant by  I context  regarding the further

c) d)			
e)			
7.8. What monitoring mechani implementation of policies an empowerment of women and add	d programmes promo	ting gen	· ·
(1)			(2)
Mechanisms			quality and empowerment of ncluding gender-based
a) National commissions on women		1) Yes	2) No 🗌
b) National human rights institutions		1) Yes	2) No
c) Parliamentary commissions	or administrativa maghanisms	1) Yes	2) No
<ul><li>d) Social accountability mechanisms and/</li><li>e) Gender statistics dissemination and put</li></ul>		1) Yes	2) No
integrated into management information s		1) 103	2) 110
f) Conducting periodic population-based s		1) Yes	2) No 🗌
g) Other mechanisms, specify		1) Yes	2) No 🗌
2) Yes At the subnational lev	only, cite the report(s) yel only, cite the report(s) and at the subnational leve	l, cite the	report(s)
ICPD Priority area	Promulgation		Enforcement
a) Women's property rights, including right to own, buy, and sell properties or other assets equally with men	1) Yes Name	oriority	1) Yes 2) No
b) Access to financial services, including credit and negotiation of contracts in woman's own name	1) Yes Name2) No (Go the next ICPD parea)	oriority	1) Yes
c) Legal equal rights for women to inheritance	1) Yes Name2) No (Go the next ICPD parea)	oriority	1) Yes
d) Protection of women's property through harmonized laws on marriage, divorce, succession and inheritance	1) Yes Name2) No (Go the next ICPD parea)	oriority	1) Yes
e) Provision against gender discrimination at work (in	1) Yes Name 2) No (Go the next ICPD p	oriority	1) Yes  2) No

	hiring, wages, benefits, etc.)	area)	
f)	Provision against sexual harassment	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
g)	Measures against trafficking and smuggling of persons, particularly women and girls	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
h)	Provision for paid maternity leave	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
i)	Provision for paid paternity leave	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
j)	Criminalization of rape and other forms of sexual exploitation	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
k)	Criminalization of marital rape	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
1)	Criminalization of intimate partner violence	1) Yes Name	1) Yes  2) No
m)	Ensuring men's financial support to their children	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
n)	Provision regarding minimum legal age at marriage for females of less than 18	1) Yes Name	1) Yes  2) No
o)	Criminalization of sexual exploitation of young people, particularly girls	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
p)	Preventing the use of children in pornography	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
q)	Protecting the girl child against harmful practices, including FGM/C	1) Yes Name	1) Yes  2) No
r)	Day-care centres /facilities for breast-feeding mothers (public sector)	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
s)	Day-care centres /facilities breast-feeding mothers (private sector)	1) Yes Name 2) No (Go the next ICPD priority area)	1) Yes  2) No
t)	Discourage polygamy	1) Yes Name 2) No	1) Yes 2) No 2

### 7.11. On a scale of 1-4, indicate to what extent the following priorities on gender equality and empowerment of women are addressed in the current national context

(1)			(2)	
Priorities on gender equality and empowerment of women	Level		(1=low; i what high;	2=somewhat low ; 4=high)
Increasing women's access to banking and credit	1 🗆	2 🗆	3 🗆	4 🗆

b) Institutionalizing gender responsive budgeting	1 🗆	2 🗆	3 🗆	4 🗆
c) Eliminating discrimination against working women, including pregnant working women	1 🗆	2 🗆	3 🗆	4 🗆
d) Increasing provisions to enable both spouses to take family leave	1 🗆	2 🗆	3 🗆	4 🗆
e) Promoting equal access and control over household resources	1 🗆	2 🗆	3 🗆	4 🗆
f) Increasing participation of men and boys in promoting gender equality and empowerment of women (including prevention of GBV and FGM/C)	1 🗆	2 🗆	3 🗆	4 🗆
g) Promoting policies to encourage involved fatherhood including for care work	1 🗆	2 🗆	3 🗆	4 🗆
h) Addressing skewed sex ratios	1 🗆	2 🗆	3 □	4 🗆
<ul> <li>Promoting grass roots and community-based participation in the implementation of policies/programmes on gender equality</li> </ul>	1 🗆	2 🗆	3 🗆	4 🗆
j) Informing communities about the consequences of child marriage and early childbearing	1 🗆	2 🗆	3 🗆	4 🗆

7.12. Name up to three civil society organisations (CSOs) whom the government has partnered with in the area of gender equality and empowerment of women over the past five (5) years. Cite the type of CSO, the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Government unit which partnered with the CSO	Area of CSO involvement	Activitie s conducte d
a)	1) National NGO  2) International NGO  3) Women's Groups  4) Academic/research centers  9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)	1) National NGO  2) International NGO  3) Women's Groups  4) Academic/research centers  9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)	1) National NGO  2) International NGO  3) Women's Groups  4) Academic/research centers  9) Other, specify		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

7.13. Name up to three (3) private sector partners with whom the government has partnered with in the area of gender equality and the empowerment of women over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

7.14. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of gender equality and empowerment of women over the past five (5) years. List the name(s) of the donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country	Name of the country and	Type of international	Activities conducted
and government unit providing	government unit receiving international cooperation	cooperation	
international	mternational cooperation		
cooperation			
a) Ireland,	Uganda:	1) Financial	1. In 2010, Irish Aid
Department of	1.Budget Monitoring Unit	2) Technical	developed a strategic
Foreign Affairs and	Ministry of Finance,	9) Other, specify	partnership with the MFPED
Trade, Irish Aid	Planning and Economic		on gender, chronic poverty and
	Development(MFPED)		vulnerability issues. The

	2. Ministry of Gender, Labour and Social Development in Uganda (with local ministries and CSOs)		objective of the "Gender and Equity Budget Initiative" is to strengthen gender budgeting by helping sector working groups to identify, plan and budget for gender and equity issues
			2. Irish Aid supported the "Joint Programme on GBV" in the Busoga region of Uganda in 2011. This programme is being jointly implemented by Government at central and local level, with civil society and a media production company. Activities included partnership-building meetings, baseline surveys, male peer community mobilisation to support behaviour change, the recruitment of community activists and awareness raising through radio/TV media campaigns.
b) Ireland, Department of Foreign Affairs and Trade, Irish Aid	Zambia - Gender and Child Development Division	1) Financial	Irish Aid has provided financial support to coordination and mainstreaming of gender in the public sector through the Gender and Child Development Division. Total funding in 2011 was €200,000, of that approximately half was spent on GBV related activities.
c) Ireland, Department of Foreign Affairs and Trade, Irish Aid	Ethiopia: Ministry of Women's Affairs (now the Ministry of Women, Children, and Youth Affairs, or MoWCYA) via the Gender Pooled Fund	1) Financial	Funding has been provided on an annual basis to the Gender Pooled Fund designed to provide strategic support to MoWCYA and other key stakeholders in taking forward the National Action Plan on Gender Equality. Various capacity building activities are supported from the Pooled Fund including specific trainings and awareness raising activities around Gender Based Violence

### SECTION 8: POPULATION, DEVELOPMENT AND EDUCATION (CHAPTER XI)

Name(s) of the primary respondent(s) and position(s):					
Name(s) of institution(s)/department(s): Dept of Education and Skills					
E-mail address(es):					
Phone number(s) – Landline:	Mobile:				
Fax(es):					
Interview date(s):					

8.1. Does the country have a national policy, programme and/or strategy addressing education issues that is/are currently being drafted or implemented?

1) Yes	
2) No	$\square$ (if no, skip to 8.3)

8.2. If YES, provide the name, the type, status, the main institution responsible for implementing the policy, programme and/or strategy, the targeted population groups and the implementation timeframe or the year of inception/revision.

(1) Name of policy, programme	(2)	(3) Status	(4) Main	(5)	(6) Implementation
and/or strategy addressing education	Туре	Status	responsible institution	Targeted population groups*	timeframe or year of inception/revision
a)Literacy and Numeracy for Learning and Life- the National Strategy to improve Literacy and Numeracy amoung children and young people	1) Policy	1)Drafted ☐ 2)Implemented ⊠	Dept of Education and Skills	3,4,5,7,10,1	2011-2020
b)DEIS –Delivering Equality of Opportunity in Education: An Action Plan for Educational Inclusion	1) Policy	1)Drafted ☐ 2)Implemented ☒	Department of Education and Skills	3,4,5,7,10,1	2005 to date
c)National Strategy for Higher Education 2030	1) Policy	1)Drafted	Department of Education and Skills and the Higher Education Authority	4,5,7,10,11	2011-2030
d) Traveller Education Strategy	1) Policy	1)Drafted ☐ 2)Implemented ⊠	Department of Education and Skills	10	2005 to date
e)Intercultural Education Strategy	1) Policy	1)Drafted ☐ 2)Implemented ⊠	Department of Education and Skills	11	2010-2015

k C .	. 1 1	. •	1			,	. 1
`See targe	ted nonulai	tion groups	list in the	auestionna	ure in	terviewer	s guide

### 8.3. Has the country established any institutional entities to address issues regarding education?

1) Yes	$\boxtimes$				
2) No		(if no,	skip	to	8.5

#### 8.4. If YES, indicate the name(s) of the institutional entity(ies).

(1)	(2)
Other institutional entities addressing education	Year of establishment
a)Solas (skills strategy, Further Education and Training)	legislation pending
b)Education and Training Boards	legislation pending
c) Dept of Education Migrant Steering Committee (Intercultural Education Strategy)	2010
d) Advisory Committee on Traveller Education ( Traveller Education Strategy)	2005
e) Implemention Oversight Group (Higher education strategy)	2011

8.5. Addressing ICPD issues regarding education in the national context during the last five (5) years

(1)	(2)	(3)	(4)	(5)
ICPD issues regarding education	Was this issue included in any policy/programme/ strategy or addressed through an existing institutional arrangement? If yes, in which one(s)?	Was budget allocated to this issue?	Were concrete implementation measures taken to address this issue?	In your assessment, and based on most concrete evidence at your disposal and that you may be aware of, how would you rate the overall progress of implementation of the measures adopted on a scale of 1 to 4 as follows:  1-deficient 2-behind schedule 3-on schedule 4-ahead of schedule
a) Keeping more girls and adolescents in secondary schools	1) Yes Name_DEIS Name_DEIS Delivering Equality of Opportunity in Education Note: The policy is not gender specific but rather aims to increase retention rates of all adolescents both male and female. 2) No (Go to the next issue)	1) Yes 🔀 2) No 🗔	1) Yes \( \subseteq \) Describe higher pupil teacher rates, DEIS grants Higher book grants, school completion programme, home school liaison, school meals programme  2) No \( \subseteq \) (Go to the next issue)	1 🗆 2 🗔 3 🔀 4 🗀
b) Ensuring equal access of girls to education at all levels (primary, secondary and tertiary)	1) Yes Name Note: This is provided for in national equality	1) Yes	1) Yes Describe 2) No Go to	1 🗆 2 🗔 3 🔲 4 🗀

	1	1	T.	T .
	legislatation and therefore there has been no requirement for additional strategies/policies in this area for this Department 2) No 🖂 (Go to the next issue)		the next issue)	
c) Improving educational infrastructure, such as separate toilet facilities and adequate transportation	1) Yes Name Improving education al infrastructure in general and not specifically for the purposes identified in this question is provided as standard by the Department in its Building programme.  Accordingly, additional policies in this area have not been required  2) No (Go to the	1) Yes	1) Yes ⊠ €2 billion 5 year school building programme, 275 major projects, 25000 permanent school places and over 4000 jobs Describe 2) No ☐ (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗔
IN TO THE STATE OF	next issue)	1) 37	1) 1/2	
d) Facilitating school completion for pregnant girls	1) Yes Name 2) No  (Go to the next issue)	1) Yes	1) Yes \( \subseteq \) Describe_Home Tuition Grants to facilitate the retention of girls at school  2) No \( \subseteq \) (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗔
e) Improving the safety of pupils, especially girls, in and on their way to school	1) Yes Name 2) No (Go to the next issue)	1) Yes	1) Yes Describe  2) No Go to the next issue)	1 🗆 2 🗔 3 🗔 4 🗔
f) Revising the contents of curricula to make them more gender-sensitive	i) Yes Name i)Literacy and Numeracy for Learning and Life- the National Strategy to improve Literacy and Numeracy amoung children and young people  2) No  (Go to the next issue) ii)Civic, Social and Political Education aims to prepare	1) Yes 🔀 2) No 🔲	1) Yes Describe i)Revision of the English and Irish curriculum for primary and post-primary schools: ensure that the reading tastes of all students, including boys, are catered for in the English curriculum  2) No (Go to	1 🗆 2 🗔 3 🖾 4 🗔

	students for active participatory citizenshipThe content of the course already deals with issues such as gender equity, racism and xenophobia, interculturalism, the environment, development, work and unemployment, poverty and homelessness, minorities, and conflict situations. Accordingly, there is no need for additional strategies/policies on this issue		the next issue) ii)Dedicated syllabus, specific teaching guidelines, dedicated support service to embed and enhance the teaching of the curriculum	
g) Revising the contents of curricula to incorporate population issues, where appropriate	The geography curriculum studied in Ireland is concerned with achieving an understanding of the physical, social and economic processes which shape the environment.  The subject is structured around a number of key geographical concepts on one of which includes population, settlement and urbanization patterns. The curriculum is currently being reviewed as part of the Framework for Junior Cycle 2) No (Go to the next issue)	1) Yes ☐ 2) No ⊠	1) Yes Describe_  2) No (Go to the next issue) Curriculum already provides for population issues as one of its three main concepts	1 🗆 2 🗔 3 🔀 4 🗔
h) Promoting non-formal opportunities for education and literacy	1) Yes Name_ i)Literacy and Numeracy for Learning and Life –	1) Yes 🔀 2) No 🗌	i) Yes  i) National  campaign to  promote	1 🗆 2 🗔 3 🖾 4 🗀

	The National Strategy to Improve L & N among Children and Young people 2011-2020 ii) The Vocational Educational Committee (VEC) Adult Literacy Scheme, which is operated by the 33 VECs in Ireland, allows people with reading and writing difficulties to gain		awareness of the important role of parents and community in supporting L&N Information and on-line resources for parents; Cooperation with the public library service to provide materials, library membership schemes and planned library	
	access to literacy education. VECs and the AEOs regularly liaise with the National Adult Literacy Agency (NALA), a voluntary organisation that is concerned with national coordination, training and policy development in adult literacy work, on matters of policy etc_  2) No  (Go to the next issue)		Describe ii)Dedicated Adult Education Officers, Specific funding allocated under the Adult Literacy, Community Education and SPIDAS Scheme (ALCES). Other Adult literacy programmes delivered under the ITABE, DEIS Family Literacy and BTEI Free provision for any individual	
			2) No [] (Go to the next issue)	
Providing training and employment opportunities to out-of-school girls and illiterate adults	1) Yes Name  Youthreach programme provide two years integrated education, training and work experience for unemployed early school leavers without any qualifications or vocational training who are between 15 and 20 years of age. There is a	1) Yes 🔀 2) No 🗌	1) Yes ☐ Describe_Financia I resoursces €900m in 2012 on the provision of 270,00 further education places, Establish of new entities, i.e Solas and Education and Training Boards_  2) No ☐ (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗔

strong emphasis on personal development, on the core skills or literacy/numeracy, communications and IT, along with a choice of vocational options and a work experience programme. A major reform programme involves the establishment of 16 Education and Training Boards to replace 33 Vocational Education Committees. The new Boards will play a central role in building a skills and training sector that is well integrated into the overall education sector. A wide range of programmes are available, serving a variety of purposes for diverse groups of learners - upskilling those at work or providing skills to those who have lost their jubs; assisting young people make the transition to the workplace; providing basic literacy and numeracy skills to disadvantaged adults. A new authority, SOLAS, will be established with responsibility for the co-ordination and funding of further education and training and the development of policy. The policies

are not intended to

	specifically address training ad employment opportunity for out-of—school girls but rather a wide range of learners both male and female  In addition funding is provided by the Department under ALCES for community education which is primarily designed to promote and assist local not-for-profit community education groups address the needs of their community, in particular those with limited formal education.  The Department funds the Adult Literacy Programme through the nationwide network of VECs. The service is available to all adults with			
	literacy needs 2) No [ (Go to the			
j) Promoting age- appropriate sexuality education and counselling in schools	next issue)  1) Yes Name Social, Personal and Health Education (SPHE) in junior cycle education supports the personal development, health and well being of young people. The curriculum is presented in 10 modules one of which includes Relationaship and Sexuality Education (RSE) Implementation of the RSE Programme at senior cycle is also a requirement	1) Yes ⊠ as part of wider curriculum support services 2) No □	1) Yes Describe dedicated syllabus, teaching guidelines, dedicated SPHE support service_to embed and enhance the teaching of the curriculum  2) No (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗀

	for all schools.			
	2) No [] (Go to the			
	next issue)			
k) Incorporating population	1) Yes Name_			
and SRH information into the teachers' training curricula	2) No (Go to the next issue) These issues are already provided for within the curricular areas/syllabi referred to above i.e Geography and SPHE and accordingly are already incorporated into the training curricula. This is further consolidated in the context of ongoing teacher education programmes in these areas. Therefore there has not been any additional requirement for policies/strategies in these areas.	1) Yes	1) Yes  Describe 2) No  (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗔
Conducting information campaigns on population issues in the context of a national population policy	1) Yes Name_ a)_Forum on Patronage to achieve plurality in choice of primary schools in accordance with demand b) Survey on Lifeskills in Primary and Post-Primary Schools. To inform policy and practice in schools in relation to nutrition, exercise, health, growing up, bullying, and other aspects of the Social Personal and Health Education programme  2) No \( \subseteq \) (Go to the next issue)	1) Yes ☐ 2) No ⊠ a&b	a) Yes  a) Describe_Pilot population surveys, awarding patronage of new schools to other patrons, proposed divesting of catholic patronage where demand requires it.  New schools Establishment Group b) issue of survey to all schools  2) No (Go to the next issue)	1 \[ 2 \[ 3 \] 4 \[ \] ongoing in respect of a) and b)
m) Addressing gender-	1) Yes Name		1) Yes 🔀	1 C a C a C a C
based violence and	:, the Department	1) Yes  2) No.	Describe specific	1
bullying in schools	launched its Action	2) No 🛚	actions to help	ongoing

n) Incorporating comprehensive sexuality education into young people's formal education	Plan on Bullying in January 2013 2) No  (Go to the next issue)  1) Yes  Name Relationships and Sexuality Education is a requirement for all schools 2) No  (Go to the next issue)	1) Yes ⊠ as part of wider curriculum support services 2) No □	prevent and tackle bullying, including new anti-bullying procedures for all schools  2) No  (Go to the next issue)  1) Yes  Describe_ Guidelines produced for schools; training provided for teachers.  2) No  (Go to the next issue)	1 🗆 2 🗆 3 🖾 4 🗆
o) Incorporating life planning skills into young people's formal education	1) Yes Name_As in J) above the Social, Personal and Health Education (SPHE) in junior cycle education supports the personal development, health and well being of young people. The curriculum is presented in 10 modules as follows  Belonging and integrating Self-management: a sense of purpose Communication skills Physical health Friendship Relationship and sexuality Emotional health Influences and decisions Substance use  Personal safety Social, Personal and Health Education (is currently being reviewed. The review, which will	1) Yes  yes as part of wider curriculum support services 2) No	1) Yes \( \sum_\) Describe Curriculum produced along with teacher guidelines. Training also provided for teachers  2) No \( \sum_\) (Go to the next issue)	1 🗆 2 🗔 3 🖾 4 🗔

	result in the development of a short course (100 hours), will be completed in 2013 and is due to be introduced in schools from 2014.)  2) No (Go to the next issue)			
p) Incorporating sexual and reproductive health and life planning skills into non-formal education and vocational training for young people	1) Yes Name  2) No (Go to the next issue) As part of the Youthreach Quality Framework Initiative (QFI), the overall social, personal and health education needs of participants are assessed and a programme of learning in the area of SPHE is developed and delivered based on needs  Although not a specific policy in relation to this matter ALCES, a Dept funded programme provides for community education which may as part of its programmes address issues of sexual and reproductive health	1) Yes	1) Yes  Describe  OGo to the next issue)	1 🗆 2 🗔 3 🔀 4 🗔
q) Reaching out-of-school youth with SRH information and services	1) Yes Name  2) No (Go to the next issue) As above and although not a specific policy the issue may be provided as part of a community education programme	1) Yes	1) Yes   Describe  2) No  (Go to the next issue)	1 🗆 2 🗔 3 🗔 4 🗔
r) Other, specify	1) Yes Name	1) Yes  2) No	1) Yes  Describe	1 🗆 2 🗔 3 🗔 4 🖂

2) No 🗌		
	2) No 🗌	

#### 8.6. Achievements in addressing issues related to education.

Among the issues related to education that are most relevant in the national context, briefly list achievements (citing reports), and comment on facilitators and barriers. List as many issues as are deemed relevant by copying this table – each table is for one (1) identified issue.

ICI	ICPD issues regarding education relevant to the national context					
a)	Name of the issue (mentioned in question 8.5 above)	Keeping more girls/adolescents in secondary school				
b)	Achievements (cite the reports)	Retention Rates of Pupils in Second Level Schools				
c)	Facilitators*	Actions taken by the Dept, i.e DEIS additional supports etc				
d)	Barriers*					

ICI	ICPD issues regarding education relevant to the national context					
e)	Name of the issue (mentioned in question 8.5 above)	Addressing gender-based violence and bullying in schools				
f)	Achievements (cite the reports)	Action plan on Bullying				
g)	Facilitators*	Public forum on bullying established in 2012, Dedicated working group and Action Plan				
h)	Barriers*					

IC	ICPD issues regarding education relevant to the national context					
i)	Name of the issue (mentioned in question 8.5 above)	Conducting information campaigns on population issues in the context of a national population policy				
j)	Achievements (cite the reports)	Report of the Advisory Group to the Forum on <b>Patronage</b> and <b>Pluralism</b> in the Primary Sector				
k)	Facilitators*	Forum on Patronage , New schools Establishment Group, cooperation of patron bodies				
1)	Barriers*					

ICI	ICPD issues regarding education relevant to the national context					
m)	Name of the issue (mentioned in question 8.5 above)	Revising the contents of curricula to make them more gender-sensitive				
n)	Achievements (cite the reports)	Literacy and Numeracy for Learning and Life – The National Strategy to Improve L & N among Children and Young people 2011-2020 (Implementation ongoing)				
o)	Facilitators*	Research indicating gender differences in literacy and numeracy assessments; Partnership with education stakeholders including parents, teachers, schools management, students and relevant NGOs.				

p)	p) Barriers* Budgetary;				
ICI	PD issues regarding ed	ucation relevant to the national context			
q)	Name of the issue (mentioned in question 8.5 above)	Promoting non-formal opportunities for education and literacy			
r)	Achievements (cite the reports)	Literacy and Numeracy for Learning and Life – The National Strategy to Improve L & N among Children and Young people 2011-2020 (Implementation ongoing)			
s)	Facilitators*	The need for change: The important role of the parents and community in the promotion of the academic success is well identified by researchers;  Partnerships with National Adult Literacy Agency and adult literacy providers; Department of Children and Youth Affairs; Library Service; National Council for Curriculum and Assessment;  Involvement of civil society and community (school staff, boards of management and parents' associations).			
t)	Barriers*	Budgetary;			
five Issu	(5) to ten (10) year	ticipated to receive further public policy priority for the next rs? Cite up to five (5) issues.  n that are anticipated to receive further public policy priority for the next five (5) to			
a)		and inclusive schools and improving learning outcomes			
b)		mities for upskilling and reskilling to meet the needs of individuals and the labour market			
c)		ality learning, research and innovation opportunities in the higher education sector			
d) e)		riding appropriate infrastructure for learning environments partment is responsible, capable and effective by implementing and progressing public			
	sector reform	artificite is responsible, capable and effective by implementing and progressing public			
<b>nati</b> 1 2	onal and/or subnate  O Yes  At the nate  O Yes  At the subnate  O Yes  O A A A A A A A A A A A A A A A A A A	ional level only, cite the report(s) ionational level only, cite the report(s) in national and at the subnational level, cite the report(s)			
4	) No 🗌				
edu 1) Y	cation in school curves, being implement yes, not yet implement	nted 🗵			
	ocial Personal Health Educat	what ageor grade? ion curriculum is structured in such a way as to treat the social, personal and health dimensions of mer.It provides for the development of a broad range of values, attitudes, skills and understanding			

relevant to the child's health and wellbeing, to other people, and to the society in which he/she lives. At primary level, the curriculum

is delineated at four levels -- infant classes, first and second classes, third and fourth classes, and fifth and sixth classes -- and is divided into three strands. Social, Personal and Health Education (SPHE) in junior cycle education supports the personal development, health and well being of young people and helps them create and maintain supportive relationships. It is presented in 10 modules one of which is Relationship and Sexuality Education. This is delivered from 1st year in post primary / second level school (although issues relating to sexuality are also covered in the Social Personal and Health Education programme in  $5^{th}$  and  $6^{th}$  classes).

# 8.11. Name up to three (3) civil society organisations (CSOs) whom the government has partnered with in the area of education over the past five (5) years. Cite the type of CSO, the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)	(5)
Name of the CSO	Type of CSO	Name of the Government unit which partnered with the CSO	Area of CSO involvement	Activities conducted
a)UNHCR	1) National NGO  2) International NGO  3) Youth Groups 4) Academic/research centers 9) Other,  specify	Integration	1) Service Delivery  2)Research and Data Collection  3)Advocacy and Policy Formulation  4) Awareness Raising and social mobilisation  5) Monitoring and legal counsel  6) Education and training  9) Other, specify	Consultations with stakeholders, preparation of report
b)CPSMA, Educate Together, Islamic Ireland etc	1) National NGO  2) International NGO  3) Youth Groups  4) Academic/research centers  9) Other,  specify		1) Service Delivery  2)Research and Data Collection  3)Advocacy and Policy Formulation  4) Awareness Raising and social mobilisation  5) Monitoring and legal counsel  6) Education and training  9) Other, specify  —	Consultation with stakeholders on forum for Patronage
c)Barnardos	1) National NGO  2) International NGO	Residential Institutions	1) Service Delivery	Family tracing

ı	3) Yo	outh Groups 🔲	Redress Unit	2)Research and Data	
	4) Ac	ademic/research		Collection	
	center				
	9) Otl	her, specify		3)Advocacy and	
				Policy Formulation	
				4) Awareness	
ı				Raising and social	
ı				mobilisation	
ı				5) Monitoring and	
				legal counsel	
ı					
				6) Education and	
ı				training	
				9) Other,	
ı				specify	

8.12. Name up to three (3) private sector partners with whom the government has partnered with in the area of education over the past five (5) years. Cite the name of the government unit which partnered with it, its area(s) of involvement, and the activities conducted.

(1)	(2)	(3)	(4)
Name private sector partner	Name of the Government unit which partnered with the private sector	Area of involvement	Activities conducted
a)ICT Ireland, Irish Software Association and American Chamber of Commerce	Higher Education Authority	1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
b)European Investment Bank	Building Unit	1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	
c)		1) Service Delivery 2)Research and Data Collection 3)Advocacy and Policy Formulation 4) Awareness Raising and social mobilisation 5) Monitoring and legal counsel 6) Education and training 9) Other, specify	

8.13. Name up to three (3) examples where the government has been engaged in international cooperation via the provision or receipt of financial and/or technical assistance in the area of education over the past five (5) years. List the name(s) of the

donor country/government unit as well as the name of the recipient country/government unit, the type of international cooperation and the activities conducted.

(1)	(2)	(3)	(4)
Name of country and government unit providing international cooperation	Name of the country and government unit receiving international cooperation	Type of international cooperation	Activities conducted
a Ireland, Department of Foreign Affairs and Trade, Irish Aid	Zambia Ministry of Education	1) Financial 2) Technical 9) Other State Here:financial and technical	In Zambia the Embassy of Ireland provides financial support towards the implementation of the education sector plan which focusses on improving education access for the most marginalised children. It also provides technical support to improve the quality of the planning process within the ministry
b. Ireland, Department of Foreign Affairs and Trade, Irish Aid	Mozambique Ministry of Education	1) Financial 2) Technical 9) Other State Here:financial and technical	In Mozambique the Embassy of Ireland provides financial support to the ministry of education towards the implementation of its sector plan which focusses on improving quality and reaching the poorest children. Day to day technical support is also provided by the Embassy team in the area of improving public financial management systems and also in tracking the progress of achieving stated objectives.
c. Ireland, Department of Foreign Affairs and Trade, Irish Aid	Lesotho Ministry of Education	1) Financial 2) Technical 9) Other State here:financial and technical	In Lesotho the Embassy of Ireland provides financial support to the Ministry of education towards implementation of its education sector plan. The embasssy team also provide day to day technical support to the Minsitry with monitoring progress of jointly agreed objectives.

<sup>1</sup> Section 2 (a)Identifying how to respond to the challenges and opportunities presented by an ageing population and addressing the needs of older people requires a response from all sectors of Government - at national, local and regional level. While the National Positive Ageing Strategy, referred to in response to Section 2 Question 2.13 will be a high level document outlining Ireland's vision for ageing and older people, it will be an over-arching, cross-departmental policy and implementation framework. It is beyond the scope of this Department to identify all of the relevant strategies, policies, programmes and services which are either currently relevant or are in planning which identify how to respond to ageing and older people. It might therefore be noted that other Government Departments may have significant contributions which could add to the comprehensiveness of the responses to questions in this section.

<sup>2</sup>Q6.10 – Note\*

#### Judiciary:

#### Attorney General v X (1992)

In *Attorney General v X* in 1992, 'X' was a 14 year old girl who became pregnant as a result of an alleged rape. The girl and her parents wished to travel abroad so that she could have an abortion. An injunction was obtained *ad interim* to restrain the girl from leaving the jurisdiction or from arranging or carrying out a termination of the pregnancy.

The High Court granted an interlocutory injunction and the case was appealed to the Supreme Court. The Supreme Court accepted the evidence that had been adduced in the High Court that the girl had threatened to commit suicide if compelled to carry her pregnancy to full term and deemed that this threat of suicide constituted a real and substantial risk to the life of the mother.

A majority of the members of the Supreme Court held that if it were established as a matter of probability, that there was a real and substantial risk to the life, as distinct from the health, of the mother and that this real and substantial risk could only be averted by the termination of her pregnancy, such a termination was lawful. On this basis the High Court injunction was lifted.

#### R v R (2009)

In  $R \ v \ R$ , the issue was the use of three frozen embryos produced during IVF treatment in a fertility clinic in Dublin. The married couple had undergone treatment during which six embryos were produced, of which three were implanted and the remaining three were frozen. A daughter was born as a result of IVF treatment in 2003; however, the marriage broke up shortly afterwards and the couple were judicially separated. On  $19^{th}$ 

December 2005, the woman sought a number of orders from the High Court against the man and the directors of the fertility clinic to allow her to have the remaining three embryos thawed and transferred to her uterus.

The High Court ruled that the man had not given his consent for the frozen embryos to be transferred to the woman's uterus. However, the woman had also sought orders vindicating the right to life of the embryos, and their and her right to a family life, as set out in the Irish Constitution. After examining thee case, the Court ruled against the woman, who then appealed her case in the Supreme Court. The appeal was dismissed by all five judges and the Court was unanimous in deciding that the frozen embryos did not enjoy the protection of Article 40.3.3 of the Constitution, which guarantees the right to life of 'the unborn'.

The embryos will continue to be kept in frozen storage for an undefined period. The State was ordered to pay the legal costs since the case raised points of constitutional law of exceptional public importance, and because of the absence of a legislative or regulatory regime for IVF treatment in Ireland.