



ANNUAL REPORT 2011/2012

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NATIONAL FAMILY PLANNING BOARD
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ACKNOWLEDGEMENT

The fiscal year 2011/2012 was another challenging period for the organisation as it tried to secure adequate resources for the programme. The organisation once again acknowledges the funding provided by some international agencies for targeted activities.

I wish to express wholeheartedly, my appreciation to all members of staff whose team effort and unwavering commitment have allowed us through our many challenges to achieve our strategic objectives.

For the fiscal year 2012/2013, we will continue to align our performance to the strategic goal and objectives of the organisation. We anticipate the integration of the Family Planning and the National HIV programmes as the commonality of both programmes in safeguarding the reproductive health of the nation's people cannot be overlooked.

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VISION STATEMENT

The Vision of the National Family Planning Board is to have,
"An engaged and informed society with persons taking full responsibility
for their sexual health, and a first class system of health services that
facilitates their Reproductive Health intentions"

MISSION STATEMENT

The Mission of the National Family Planning Board is to
... enable individuals to achieve good reproductive health
through the provision of high quality, voluntary family
planning and family life education services implemented
efficiently and effectively

GOAL

The goal of the organisation is to prepare, carry out and promote the carrying out of
family planning programmes in Jamaica. The organisation has been able to achieve its
goal through the effective implementation of its Mission Statement.

ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
CHAs	Community Health Aides
ECP	Emergency Contraceptive Protection
FAA	Finance and Audit Act
FP	Family Planning
GoJ	Government of Jamaica
HFLE	Health and Family Life Education
HIV	Human Immunodeficiency Virus
IAS	International Accounting Standards
IEC	Information, Education and Communication
IUCD	Intrauterine Contraceptive Device
JIS	Jamaica Information Service
KSA	Kingston and St. Andrew
MCSR	Monthly Clinic Summary Report
MSRHC	Male Sexual and Reproductive Health Caucus
MoH	Ministry of Health
NFPB	National Family Planning Board
PBCJ	Public Broadcasting Corporation of Jamaica
PIOJ	Planning Institute of Jamaica
PSA	Public Service Announcement
RHS	Reproductive Health Survey
RJR	Radio Jamaica Limited
STIs	Sexually Transmitted Infections
SDC	Social Development Commission
SERHA	South East Regional Health Authority
STATIN	Statistical Institute of Jamaica
UNFPA	United Nation Population Fund
WABA	World Alliance for Breastfeeding Action
WCJF	Women Centre of Jamaica Foundation
WHO	World Health Organisation
YMCA	Young Men's Christian Association

MESSAGE FROM THE CHAIRMAN

The National Family Planning Board's team must be congratulated for the effort and support given towards completing the activities planned in an efficient and comprehensive manner.

I would also like to take this opportunity to recognise the commitment that has been shown by the newly appointed Board of Governors, who has taken on the Board's mandate and is forging ahead. As we seek to fulfill on of Jamaica's Nation development goals of attaining a healthy and stable population, the integration of Family Planning, Sexual and Reproductive Health and HIV/STI programmes remain on the agenda. This will advance the efficient and effective service provision and we now await a Cabinet Submission for the integration of these programmes.

As we approach the new fiscal year 2013/2014, the Board is energized to implement a rejuvenated plan to improve sexual and reproductive health outcomes for Jamaican families; promoting healthy families for a healthy nation. We are committed to the task that we are to undertake, we understand the dedication that it will take, but we will not be daunted. Healthy Families for a Healthy Nation!

Sandra Knight (Dr.)
CHAIRMAN

CORPORATE GOVERNANCE

1. Board of Directors

The Board was appointed on August 18, 2008 for a period of three (3) years and was subsequently asked to continue until further advised. It consists of twelve (12) members, of whom eleven (11) are non-executive members.

The principal business considered at the Board meetings were inter alia to:

1. Receive and consider reports from the Executive Director on the work of the organisation.
2. Approve recommendations from the sub-committees, which include monthly financial statements and the external auditors' report.

Eleven (11) meetings were held during the fiscal year, at which secretarial services were provided by the Personnel and Administrative Officer/Board Secretary

2. Finance and Audit Sub-committee

The Finance and Audit Sub-committee consists of the following members: Chairman, two (2) Board Members, the Director of Finance and the Internal Auditor.

The Terms and Reference of the Finance and Audit Sub-committee are as follows:

1. To review the entity's internal system of audit and finance controls and the results of internal audits.
2. To review the annual audit plan and periodic status reports
3. To review and investigate any matter pertaining to the integrity of management, including conflicts of interest or adherence to standards of business conduct as required in the policies of the entity.
4. To discuss with management and the independent auditor, as appropriate, any audit problems or difficulties and management's response to issues raised in audit reports.
5. To discuss with management and the independent auditor the annual audited financial statements.

In accordance with the Terms and Reference, two (2) meetings were held to address the following:

1. Financial statements and other financial reports
2. Internal Auditor's report
3. Investments (in accordance with the approved Government of Jamaica Investment Policy)
4. Annual Budget

3. Publicity Sub-Committee

The Publicity Sub-committee held eight (8) meetings during the period to consider matters relating to advertising campaigns and to provide guidelines in the area of publicity programmes. The committee members consist of the Chairman and one other Board Member, the Director of Outreach, the Communications Officer (Writer) and the Communications Officer (Production).

4. Personnel Sub-Committee

The Personnel Sub-committee under the delegated authority of the Board:

1. Participates in the selection process of senior posts within the organisation.
2. Deals with all matters relating to general staffing, grievance and disciplinary issues in accordance with the Board's established policies.
3. Deals with matters referred to it by either individual staff members or the Executive Director.
4. Acts as a panel for appeal hearing
5. Monitors the Performance Management Development System in the context of the strategic objectives of the Board and in line with the requirements of national agreements.
6. Develops strategies and policies in matters related to motivation of staff.

During the reporting period, one (1) meeting was held.

See Table 1 overleaf for Directors' compensation for the fiscal year 2011/2012.

TABLE 1: SENIOR EXECUTIVE COMPENSATION

Position of Senior Executive	Year	Salary (\$)	Gratuity or Performance Incentive (\$)	Travelling Allowance or Value of Assignment of Motor Vehicle (\$)	Total (\$)
Executive Director	2011/2012	3,638,433.61	n/a	796,500	4,434,933.61
Director, Policy Formulation, Monitoring & Evaluation	2011/2012	88,492.80 (Resigned April 6, 2011)	Nil	6,904.10	95,396.90
Director, Human Resource & Administration	2011/2012	(a) 1,482,799.55 (Acted April – Jan) (b) 265,311.83 (Assumed duties Feb. 6, 2012)	Nil	420,000	1,902,799.55
Director, Finance	2011/2012	1,959,310.64	Nil	420,000	2,379,310.64
Director, Outreach	2011/2012	1,793,897.17	Nil	420,000	2,213,897.17

TABLE 1b: DIRECTORS COMPENSATION

Position of Director	Fees (\$)	Motor Vehicle Upkeep/Travelling or Value of Assignment of Motor Vehicle (\$)	Honoraria (\$)	All Other Compensation including Non-Cash Benefits as applicable (\$)	Total (\$)
Chairman	76,000.00				76,000.00
Deputy Chairman	61,500.00				61,500.00
Director	33,000.00				33,000.00
Director	49,500.00				49,500.00
Director	60,500.00				60,500.00
Director	55,000.00				55,000.00
Director	44,000.00				44,000.00
Director	55,000.00				55,000.00
Director	33,000.00				33,000.00
Director	44,000.00				44,000.00
Director	38,500.00				38,500.00

SUMMARY OF ACHIEVEMENTS

1. Media Use

- Rotation of twelve (12) Public Service Announcements (PSAs) on contraceptive choices on five (5) radio stations promoting Dual Method Use to adult females; promoting the concept of two-child family; contraceptive myths/misconceptions; accepting a method that is right for the peri-menopausal women and the sexually active woman; promoting emergency contraception; benefits of limiting family size; addressing negative sexual behaviours among males and condom use.
- Production and airing of 24 x 24 minutes Television Magazine programmes targeting teens.
- The radio airing of fifty (50) weekly programmes - Marge Roper Counselling Service.
- Twenty-seven (27) fortnightly Advice Columns were placed with a newspaper that has a readership of approximately 438,000.

2. Workshops

All sixty (60) workshops planned for the reporting period were held reaching 2,249 persons. This exceeds the targeted number of persons to be reached by 39.

3. Health Fairs/HFLE Presentations/Rap Sessions

- The NFPB supported by the HIV Unit in specific instances participated in thirty-two (32) health fairs/exhibitions and reached 9,458 persons.
- Twenty-nine (29) HFLE presentations/Rap Sessions were conducted with a combined audience of 6,367 persons.

4. New Acceptors

New Acceptors of implant increased by 150 percent; with the age group 20-29, being the cohort with the largest number of acceptors.

5. Male Sexual and Reproductive Health Caucus

Three (3) meetings were held. The Caucus participated in a Youth Congress hosted by the New Testament Church of God and was also represented at the National Water Commission's Male Wellness Clinic.

6. Visits at Public Sector Clinics

The frequency of male visits at public health clinics increased by 23.5 percent; all the regions reported increases.

7. Information Packages

Information Packages on the following topics were sent to Guidance Counsellors in 62 schools in Kingston and St. Andrew:

- Teen Access to Reproductive Health Information
- HIV in Jamaica: The Adolescent Perspective
- Bridging the Gap: HFLE for the Teen in Transition
- Teenage Pregnancy: Responsibilities and Limitations

8. National Family Planning Board Website

The NFPB's Website was updated and among the different documents added to the site is an article entitled "The Influence of Popular Culture on Male Sexual and Reproductive Health Behaviour.

ACHIEVEMENTS

For the reporting period, five (5) strategies as outlined in the organisation's Corporate Plan 2011/2012 were pursued through the various programmatic activities.

1. Achieve more effective synergy between the HIV prevention and Family Planning Programmes.
2. Empower adolescents and youth to take responsibility and reduce sexual risk taking behaviours.
3. Promote self efficacy and the complementary roles of males through the availability and access to Reproductive Health information and services.
4. Organise and implement activities to enhance and promote the visibility of the family planning programme.
5. Implement initiatives to effect continued reduction in the unmet need for family planning and the proportion of unplanned pregnancies.

Strategy 1: Achieve more effective synergy between the HIV prevention and Family Planning Programmes

Achieving more effective synergy between the HIV prevention and Family Planning Programmes is significant in safeguarding the reproductive health of the nation's people. Among the activities undertaken to achieve a more effective synergy were:

1. Capacity building of health providers for integrated FP/HIV/AIDS counselling in clinical and non-clinical settings.

In fulfillment of this requirement, one x 1-day workshop was held with thirty-three (33) Health Education Officers, who represented all regions as part of their continuing education. The areas covered were:

- Family Planning Integration with HIV Services
- Contraceptive Options in FP/HIV Integration
- Family Planning Counselling

2. Develop and implement campaign to promote integrated services to specifically defined segments of the population

In an effort to promote integrated services of the FP/HIV Programmes to defined segments of the population, the following Radio and TV Public Service Announcements (PSA) were aired:

1x 30 seconds on promoting Dual Method Use to adult females were aired along with the current radio bookings with Independent Radio (Power 106 FM) and CVM TV such as:

- 2 x 30 seconds on contraceptive choices-promoting the two-child family
- 7 x 30 seconds on contraceptive myths/misconceptions
- 2 x 30 seconds on accepting a method that is right for the perimenopausal and the sexually active woman
- 1 x 30 seconds on promoting emergency contraceptive
- 3 x 30 seconds on benefits of limiting family size
- 1 x 30 seconds on advice on Reproductive Health issues - condom use.
- 1 x 30 seconds addressing negative sexual behaviour among males
- 1 x 30 seconds on promoting the benefits of abstinence

3. Distribution of Condoms

During Family Planning Week (October 2011) and Safe Sex Week (February 2012), the staff distributed condoms (male and female) islandwide. The selection of the parishes was based on those with a high unmet need. Included in the list of recipients were most-at-risk populations – sex workers (male and female), clients of sex workers, substance users and homeless persons. A total of 48 cartons of male condoms and 5 cartons of female condoms were distributed.

4. Promote Healthy Lifestyle Behaviours

In promoting healthy lifestyle behaviours, through the Marge Roper Counselling Service, 50 x 15 minutes interview programmes were aired as part of the show Dorraine's Coffee Break on RJR 94 FM. Some of the topics aired were:

- Contraceptive methods for men
- Reducing risky sexual behaviours in men
- Benefit of abstinence
- Tips on how to abstain
- Interviews with girl and boy concerning decision to abstain
- Importance of dual method use
- Tips on using the female condom
- What is Safe/Safer Sex?
- When to test for STIs

- Risky business-Multiple Sex Partners
- Importance of using a condom every time
- The Emergency Contraceptive Pill

5. Partnership with HIV and SDC

The alliance with the HIV programme continued with collaboration taking place on six (6) activities reaching 215 persons. These engagements included:

(a) Workshops

- A Parenting Workshop on “Using abstinence to achieve your goals” conducted in collaboration with the South East Regional Health Authority’s HIV (SERHA’s HIV) programme in which 40 persons from the Lawrence Tavern community participated.
- The HIV/STI Unit Summer Camp on “Abstinence” held at Devon House where 56 participants were reached.
- A SERHA/HIV/STI programme Parenting Workshop on “Understanding your sexuality” was held at the Trench Town Multipurpose Centre for 30 participants
- Two Peer Educators Workshops on Sexual and Reproductive Health were held at Norman Gardens Primary and Junior High and Central Branch Primary and Junior High Schools. A total of 70 students attended.

(b) Health Fairs/Exhibitions

The NFPB participated in thirty-two (32) health fairs/exhibitions and reached 9,458 persons. These included participation in the Accountant General’s Department Safe Sex Week Health Fair, the Shortwood Teachers’ College Health Fair and the Spanish Town Police Station Health Fair. Other occasions were the community health fair at St. William’s Basic School, the Firearm Licensing Authority Health Fair and the Fellowship Tabernacle Health Fair.

On a quarterly basis the NFPB collaborated with the HIV Unit on health fairs.

Strategy 2: Empower Adolescents and Youth to take Responsibility and Reduce Sexual risk taking Behaviours

Exploration of the sexual behaviours of adolescents is paramount as these young persons represent potential “reproducers” whose sexuality is influenced by peers, hormones, media images among other things, which can put them at risk. In order to bring about

desired behaviour changes in adolescents, the NFPB collaborated with Guidance Councillors, communities, schools, the media, peer associations and the HIV programme to provide knowledge and change attitudes to effectively influence behaviours. The following programmes were implemented.

(1) Workshops

- Two (2) 1-day workshops on Sexual and Reproductive Health issues were held at the Knockpatrick Seventh Day Adventist Church and the Manchester Health Department for out-of-school youth. A total of 92 persons attended.
- Four (4) 1-day workshops were held for 136 Guidance Counsellors and Health Care Providers in the parishes of Portland, Manchester, Kingston and St. James. The topics covered were the Adolescent Sexual Behaviour Survey; Adolescent Vulnerabilities, Risk-taking behaviours and their consequences; Adolescent Behaviour and Life Skills. Of the targeted audience, 90 persons attended.
- Four (4) x 1 day workshops were held for 183 adolescents and youth at the Manchester Health Department and the Kingston-based YMCA. The course covered Adolescent Vulnerability, Risk-taking Behaviours and their consequences, Defining a sexually healthy adolescent-levels of risk, Who is at highest risk for an STI, and Decision making.

(2) Rap Sessions

The NFPB organised and participated in fetes, talks, sporting events and other social activities that had a focus on adolescents and youth, for example.

- The Marge Roper Counsellor/HIV Unit personnel collaborated on a Rap Session and addressed 31 Peer Educators on Abstinence at the St. Anne's High School.
- Four (4) Rap Sessions were hosted by the Marge Roper Counsellor at Ardenne High School, St. Hugh's High School, St. Georges College, and Boys Town Training Centre. A total of 343 students attended.
- The Marge Roper Counsellor participated in the Manchester Health Department's Youth Forum that attracted 450 students. The Counsellor spoke to the topic 'Abstinence'.

(3) Health and Family Life Education (HFLE)

Health and Family Life Education (HFLE) is a very important aspect of the schools' curriculum. The Marge Roper Counsellor accepted the invitation from twenty (20) schools where presentations on HFLE were made to 3,000 students.

For the reporting period, a total of twenty-nine (29) HFLE presentations were made in which 6,367 persons were reached.

In order to expand access to information to parents and guardians who are the preferred HFLE sources for adolescents, the articles entitled '*Setting the stage for confident and effective parenting*' and '*Children are people too*' were published in the Gleaner magazine *Positive Parenting* as shown in Figure 1.

Figure 1: Cover of magazine Positive Parenting that had the article "Children are people too"



(4) Teen Seen

Teen Seen is a television magazine programme for teens that addresses the sexual and reproductive health issues of adolescents and youth. Twenty-four (24) x 24 minutes episodes of the programme were produced and aired on CVM TV at 6:00 p.m. on Saturdays and re-broadcast on Thursdays at 6:00 p.m. The programmes were also shared with the government-owned and operated entity, Public Broadcasting Corporation of Jamaica (PBCJ) that aired them free of cost, based on an agreement between the agencies.

The objectives of Teen Seen were to:

- Provide factual information on physiology, contraception and reproduction.
- Debunk myths about sex and sexuality
- Reinforce positive experiences and/or situations which will encourage the target group to develop wholesome attitudes towards sex and male/female relationship
- Educate parents, teachers and others who can influence the target group in their development
- Specify which contraceptive methods are being targeted to teens.

5. Posters/Brochures

During the reporting period, the NFPB focused on Sexual and Reproductive Health to ensure that adolescents had the services and information readily available to increase their knowledge about the impact of risky sexual behaviours and their awareness about methods to prevent unwanted pregnancy and sexually transmitted infections. When sex is initiated early in life, the longer is one's time span in the reproductive cycle. That is why adolescents as a target group are crucial in maintaining the health of the country.

One thousand (1000) copies each of the poster, '*Resist the Urge*' and the brochure on '*Abstinence and Teen Relationships*' were produced and distributed as shown below in Figure 2 and overleaf in Figure 3.

Figure 2: Resist the Urge

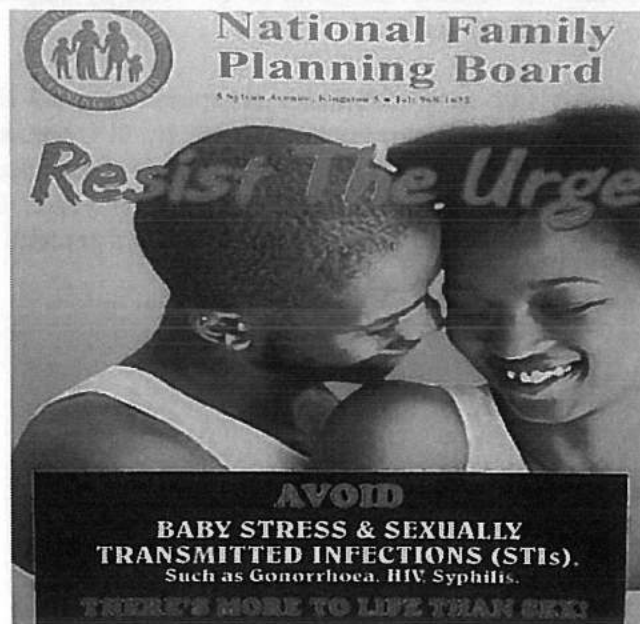
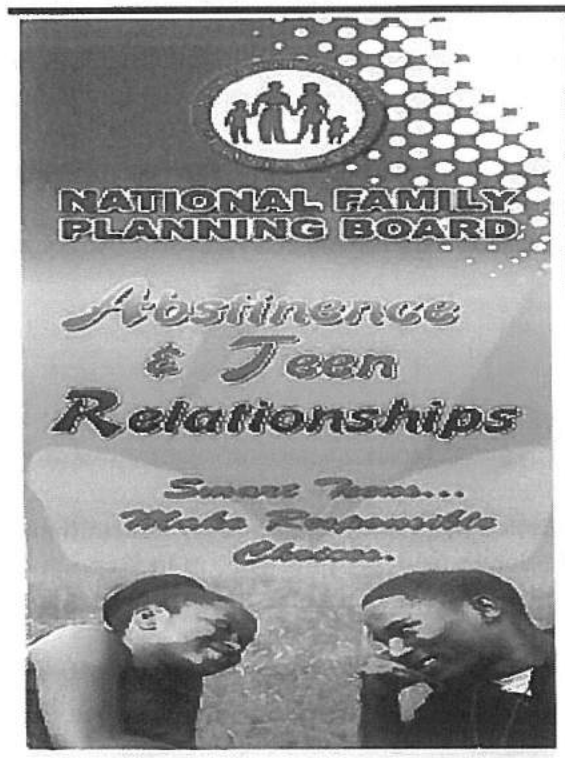


Figure 3: Abstinence and Teen Relationship



6. A Comparison of New Adolescent Acceptors 10-19 Years by Region and Parish
2010 and 2011

Table 2 (overleaf) shows that new adolescent acceptors aged 10-19 years within the Public Sector Family Planning Programme declined by 0.7 percent when data was compared (2010 and 2011). There were 7,861 new acceptors, compared to 7,914 from the previous year. The South-East region recorded the only increase (3.8 percent) while declines were seen in the North-East (-2.2) and Southern (-8.8 percent) regions.

Table 2: New Adolescent Acceptors 10-19 Years by Region and Parish, 2010 & 2011

Location	2010	2011	Change (%)
South-East	3,189	3,310	3.8
K.S.A	1,697	1,732	2.1
St. Thomas	293	301	3.1
St. Catherine	1,199	1,277	6.5
North-East	1,188	1,162	-2.2
Portland	249	180	-27.7
St. Mary	409	430	5.1
St. Ann	530	552	4.2
Western	1,854	1854	0.0
Trelawny	285	274	-3.9
St. James	656	716	9.1
Hanover	262	287	9.5
Westmoreland	651	577	-11.4
Southern	1,683	1,535	-8.8
St. Elizabeth	429	409	-4.7
Manchester	407	424	4.2
Clarendon	847	702	-17.1
Jamaica	7,914	7,861	-0.7

Source: MOH MCSR, 2010 & 2011

Strategy 3: Promote self efficacy and the complementary roles of males through the availability and access to Reproductive Health information and service

In promoting self efficacy among males through the availability and access of Reproductive Health information and service, the NFPB in collaboration with other entities hosted educational and social events that were exclusively male-centered in order to encourage men to be involved in Reproductive Health. The following workshops, presentations, development of materials and the Male Sexual and Reproductive Health Caucus were initiated.

1. Workshops

A total of thirty (30) workshops were held as outlined below:

- Two (2) workshops were held in Clarendon and Kingston for forty (40) Community Male Facilitators. The goal of the workshop was to strengthen the capacity of Male facilitators to deliver quality reproductive health services to men. Seventy (70) Community Male Facilitators were targeted.
- Two (2) 1-day workshops were held for Nurse Practitioners in the area of counselling for male clients. The goal of the workshops was to provide service providers with knowledge and skills to address continued reduction in unmet need for family planning and unplanned pregnancy. Seventy-four (74) Nurse Practitioners attended the training; 29 in the Southern/Western region and 45 in the South-East Region.
- Thirteen (13) 1-day workshops were to be held for 390 Community Health Aides (CHAs) in all fourteen (14) parishes. The goal of the workshop was to strengthen the capacity of CHAs to deliver quality reproductive health services to men.

Ultimately, five hundred and seventy-five (575) CHAs were trained on the following topics:

- The importance of involving men in reproductive health
 - Men's problems/disorder: a review;
 - The range of men's reproductive health services
 - Anatomy and Physiology,
 - Myths and Facts and Common Client concerns
- Thirteen (13) 1-day workshops were organised with a view to reach 320 males to improve the knowledge, attitude and skills of their participation in Sexual and Reproductive Health workshops held in all parishes. A total of Four hundred and thirty-nine (439) men attended the workshops.

The topics covered were:

- Why involve men in Reproductive Health
- Chat 'bout-the importance of couple communication on Reproductive Health matters
- Contraception-Not jus' women business
- Strategies for improving men's participation in Sexual and Reproductive Health

2. Presentations.

Reaching males with information that pertains to their health, means, finding them in their own space and bringing it to them in order to better serve their needs. The following presentations were made.

- (a) One (1) presentation on 'Parenting the right way' at the Kings Seventh Day Adventist Church to approximately twenty-four (24) fathers.
- (b) One (1) presentation on 'The role/responsibility of fathers' was conducted for the Delacree Park Baptist Church Men's Ministry to an audience of approximately 31 persons.
- (c) Five (5) HFLE presentations on Abstinence and Reproductive Health were conducted in schools, homes and male facilities for 895 males as follows:
 - Boys Town Training Centre – 65 participants
 - Kingston College – 130 students
 - St George's College – 400 students
 - Cornwall College – 280 students
 - Caymanas Jockey School – 20 males

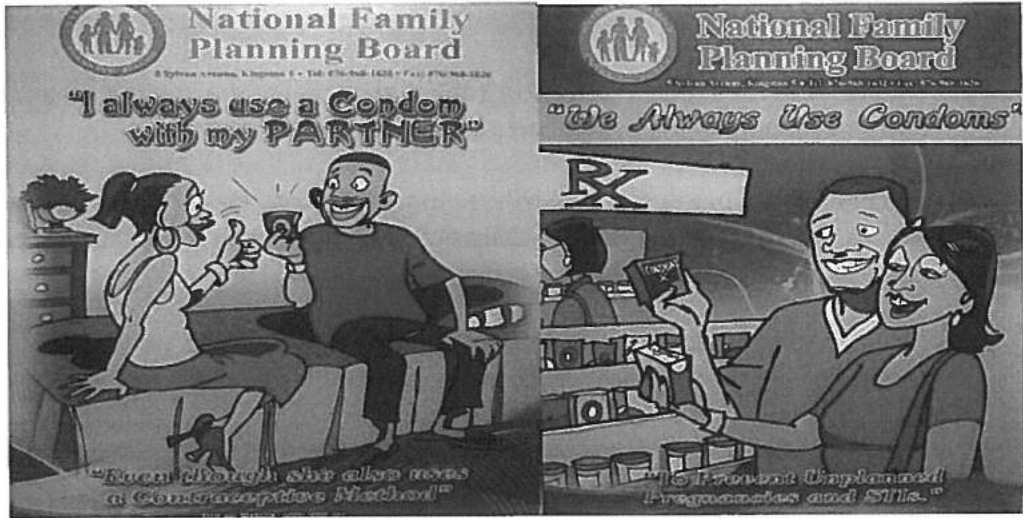
3. Cartoon Posters

The popular local cartoonist Clovis created images for three (3) posters with scenarios conveying:

- Young and adult males initiating contraceptives use/communication
- Benefits of male sexual responsibility
- Benefits of a small family with the adult male (father) as the centre of attention.

One thousand (1,000) copies of each poster as shown overleaf were produced and distribution commenced.

Figure 4: Three new posters with messages aimed at improving Reproductive Health among males



4. Male Sexual and Reproductive Health Caucus (MSRHC)

In providing Reproductive Health Services to men, the Southern Caucus was formed in August 2010 and met in the last month of each quarter. A decision was taken to join both the Southern and South-East Caucus meetings, since the South-East caucus had not met since 2009. For the reporting period, the MSRHC had three (3) meetings.

The Caucus participated in a Youth Congress hosted by the New Testament Church. At the Congress, caucus members gave information on the activities of their organisations. The Caucus was also represented at the National Water Commission's Male Wellness Clinic.

Active members of the Southern Caucus included:

- The National Family Planning Board;
- The New Testament Church of God;
- The Missionary Church;
- The Leo Club of Clarendon;
- Sistren Theatre Collective;
- Youth Opportunities Unlimited;
- The Jamaica Social Investment Fund;
- The Jamaica Foundation for Life-Long Learning
- The National Centre for Youth Development.
- The Alpha Boys home;
- The Women's Centre of Jamaica Foundation;
- The Boy's Brigade;
- Young Men Christian Association

5. 'Ask Marge' Radio Programme

The radio advice programme, 'Ask Marge' dedicated four (4) programmes to the promotion of improved health seeking behaviours among males. The topics covered were: Involving men in Family Planning, Risky Sexual Behaviours and Men, Contraceptive methods for Men and Reproductive Health Services for Men.

Strategy 4: Organise and implement activities to enhance and promote the visibility of the Family Planning Programme

To promote the visibility of the Family Planning programme, several articles, advisories, and advertorials were prepared and distributed to the media.

1. Articles

The following five (5) SRH articles were submitted to Health Desks at the Daily Gleaner, Jamaica Observer and the Sunday Herald and subsequently posted on the NFPB's website:

- An article entitled 'Healthy families come from family planning' was written and included in a feature on the Family Planning Programme published in the Gleaner on Tuesday October 25, 2011.
- An article entitled 'How to shop...for a contraceptive method' was written and circulated in electronic format to The Gleaner, Jamaica Observer and The Sunday Herald. The article was printed in the Daily Observer's magazine *All Woman* on November 28, 2011. It has since been posted on the Internet by The Daily Observer.
- An article entitled 'Family Planning Board participates in World Contraception Day 2011' was submitted to the Daily Gleaner and Jamaica Observer.
- Two articles were submitted to the Jamaica Observer:
 1. The effects of teenage sexuality and information dissemination on the decline in teenage pregnancies; and
 2. Preserving your fertility with contraception

2. Advisories/Interviews

One (1) advisory on outreach IEC activities was submitted once per month to Community Notice Boards at JIS, RJR 94FM, IRIE FM and Power 106. Surpassing the target of 12 advisories, 19 advisories were disseminated to the media. These included among others, the Message for Family Planning Week from the Honourable Minister of Health and the schedule for Family Planning Week 2011 distributed to eleven (11) media houses.

Figure 5: Quarter Page ad in the Gleaner that outlined the activities for Family Planning Week 2011



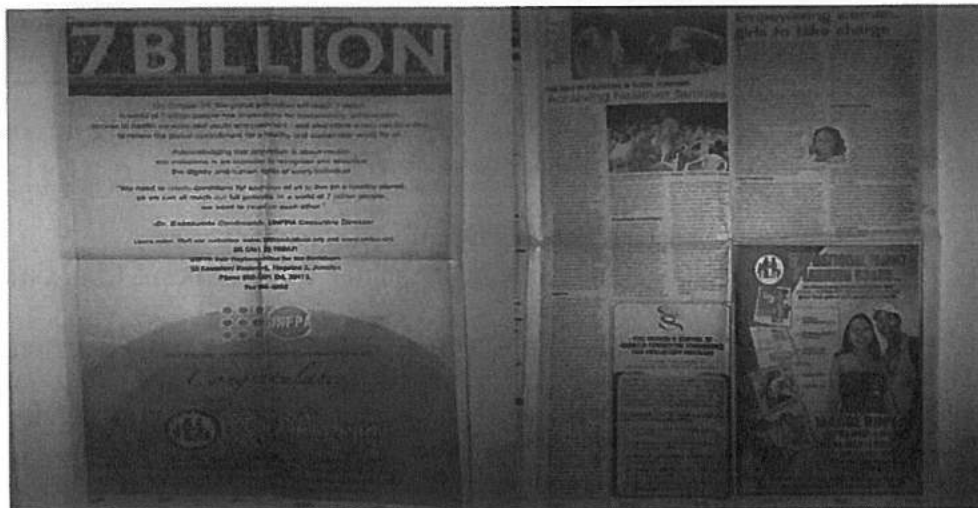
- A news release/advisory titled “Local Expert for Global Forum on Multipurpose Prevention Technologies for Reproductive Health” was circulated via email to five (5) media houses/operatives – The Gleaner Company, Jamaica Observer, The News, The Sunday Herald and the JIS Media Centre.
- An advisory titled “Condom giveaway ahead of Valentine’s Day” was written and circulated via email to five media houses – The Gleaner Company, Jamaica Observer, the JIS Media Centre, Minister of Information and the Press Secretary.
- HITZ 92 FM’s Jenny Jenny interviewed a member of staff on “The Importance of Abstaining”.
- Based on a request from the parent ministry, the following information was submitted to the MoH, Power 106 FM and JIS:
 - Family Planning Board’s Far reaching work
 - The National Family Planning Board strikes a Chord with our Jamaican men.
 - National Family Planning Board: targeting the Youth and Communities.

- A five (5) page Feature, which contained the message for FP Week from the Honourable Minister of Health, Executive Director, the Director UNFPA Sub-Regional Office for the Caribbean, articles from STATIN, the Hugh Wynter Advanced Training and Research and Fertility Management Unit (See Figure 6 & Figure 7 below) was published.

Figure 6: The pages of the Advertorial for Family Planning Week 2011



Figure 7: The pages of the Advertorial for Family Planning Week 2011



Feature 8: The Advertorial for Family Planning Week 2011



(d) The Star Column

Twenty-seven (27) Star columns were placed with responses to letters from incoming mail and telephone calls. Enquiries were received from persons of reproductive age seeking information/advice on topics such as contraceptives, pregnancy, menstruation, abortion, sexually transmitted infections and relations. On average, three (3) letters were printed in the fortnightly production.

(e) Workshops

Training programmes were developed for different categories of providers that include a component on the Family Planning Programme:

- 13 x 1-day workshops were held for 390 service providers including midwives and General Practitioners. The topics covered were a review of unmet need/unplanned pregnancy; providers' role in addressing unmet needs and unplanned pregnancy; update of existing and new contraceptive methods and counselling on the correct use of methods.

There is a reduced number of midwives in the system and therefore, the participants for the sessions had to be made up with Public Health Nurses, Registered Nurses and others. The number of persons attended was four hundred and fifty (450).

- 2 x 1-day workshops for Pre-service Nurses. The goal of the workshop was to enhance and promote the visibility of the family planning programme and activities. Fifty-four (54) Pre-service nurses at the Cornwall School of Midwifery and fifty-six (56) Pre-service nurses from the Kingston School of Nursing attended the workshops. Collectively, one hundred and ten (110) Pre-service Nurses were trained.

Strategy 5: Implement initiatives to effect continued reduction in the unmet need for family planning and the proportion of unplanned pregnancies

The following activities were implemented to effect continued reduction in the unmet need for family planning and unplanned pregnancies.

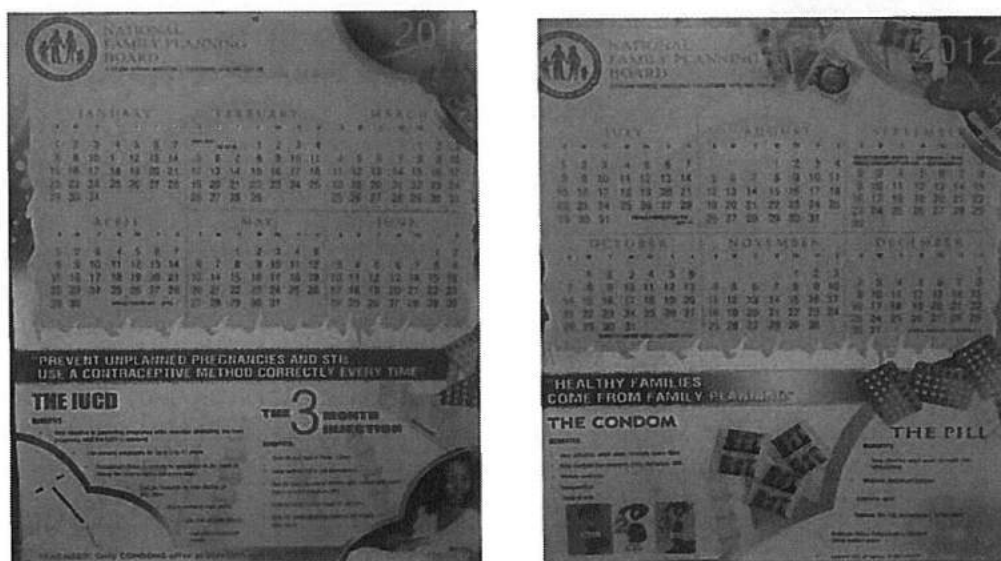
1. Printing and Distribution of Newsletters

One thousand five hundred (1,500) copies of newsletter for health providers and influential others highlighting concerns and development of reproductive health were printed and distributed during the first quarter.

2. Printing of Calendars

One thousand (1,000) copies of the 2012 calendar, which addressed the benefits of the most popular and more effective contraceptive methods, the IUCD, the three month injectable, the condom and the pill. (See Figure 9 below) were printed and distributed to clinics, walk-in clients and staff.

Figure 9: The NFPB's two-sided calendar for 2012



The strategic objectives mentioned above were met as evidenced by the following statistical data and activities.

1. Provision of Reproductive Health Services for Men

The frequency of male visits at public health clinics increased from 20,652 in 2010 to 25,492 in 2011, which represents an increase of 23.4 percent as shown in Table 3. All the regions reported increases.

Table 3: Male visits at Family Planning Centres by Region for the period January to December 2010 and January to December 2011

Region	2010	2011	Change (%)
South-East	3,041	5,308	74.5
North-East	2,437	2,812	15.4
Western	7,640	9,330	22.1
Southern	7,534	8,042	6.7
Jamaica	20,652	25,492	23.4

Source: MoH MCSR

2. New Acceptors of IUCD and Implant by Age Group

A total of 160 new acceptors of implants were recorded in 2011, an increase of 150 percent more than the comparable period 2010. The 20 – 29 age group had the largest number of acceptors of IUCDs and Implants.

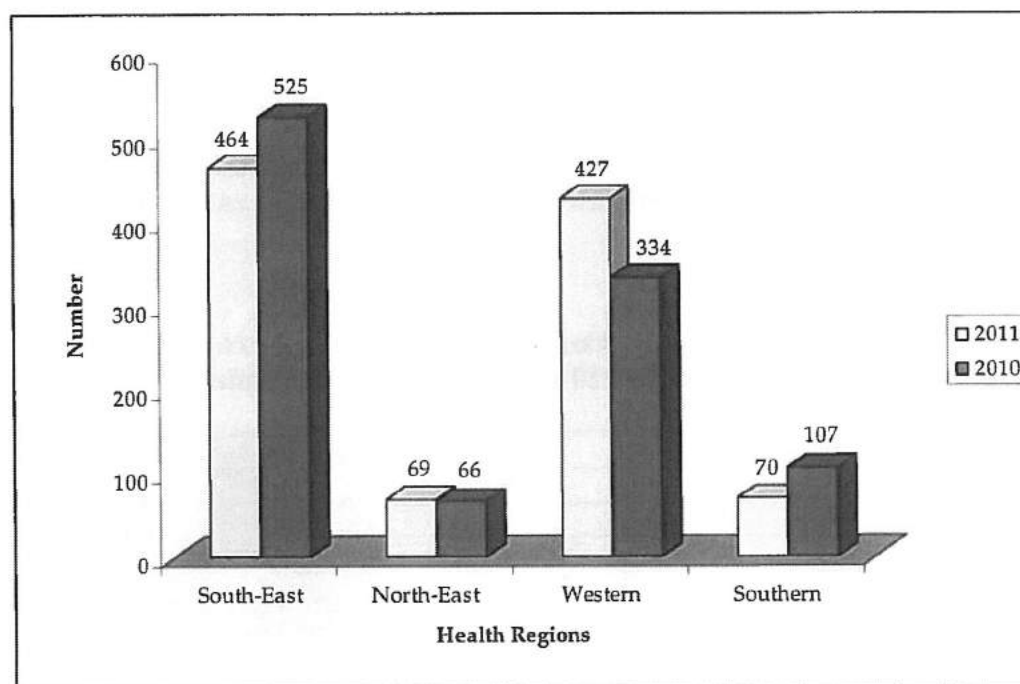
Table 4: New Acceptors of IUCD and Implant by Age Group, 2010 & 2011

Age Group	IUCD				Implant*			
	10- 19	20- 29	30+	Total	10-19	20-29	30+	Total
2010	111	535	386	1,032	5	41	18	64
2011	114	523	393	1,030	15	79	66	160

Source: MOH HMSR, 2010 and 2011

*It must be noted however that data from the Fertility Management Unit, Beth Jacobs Clinic, Spanish Town Hospital, Clarendon Health Department and Victoria Jubilee indicate that there were additional Jadelle acceptors than what was reported in MCSR data.

Figure 10: New Acceptors of IUCD, 2010 and 2011



Source: MoH MCSR Data, 2010 & 2011

For the calendar year 2011, the total number of new acceptors of contraceptives increased by 3.7 percent, (See Table 5 below). During 2011, while new acceptors for condom and implant increased by 36.3 percent and 150 percent, respectively, the Pill, Sterilisation, Injection and IUCD decreased by 12.6, 3.5, 1.5 and 0.2 percent, respectively.

Table 5: New Acceptors of Family Planning by Method Comparing January to December 2010 and January to December 2011

FP Options	2 010	2011	Change (%)
Injection	21,692	21,358	-1.5
Pill	8,606	7,523	-12.6
Condom	7,962	10,854	36.3
IUCD	1,032	1,030	-0.2
Implant	64	160	150
Sterilisation	1,626	1,569	-3.5
Total	40,982	42,494	3.7

Source: MoH and NFPB, 2010 & 2011

The overall number of female sterilisation procedures at the public health facilities declined by 3.5 percent from 1,626 in 2010 to 1,569 in 2011 (See Table 5). The estimated Family Planning acceptors using Tubal Ligation (sterilisation) decreased in the South-East and Western regions 7.6 percent and 28.6 percent, respectively. The North-East and Southern regions reported increases in the number of operations by 0.4 percent and 21.6 percent, respectively, (See Table 6 below).

Table 6: Sterilisation Acceptors per Region from January to December 2010 and January to December 2011

Parish	Procedures		Acceptors	
	2010	2011	2010	2011
South-East	<u>827</u>	<u>764</u>	<u>8,270</u>	<u>7640</u>
K.S.A	358	345	3,580	3,450
St. Thomas	89	42	890	420
St. Catherine	377	377	3,770	3770
North-East	<u>256</u>	<u>257</u>	<u>2,560</u>	<u>2570</u>
Portland	29	29	290	290
St. Mary	102	80	1,020	800
St. Ann	102	148	1,020	1480
Western	<u>224</u>	<u>160</u>	<u>2,240</u>	<u>1,600</u>
Trelawny	0	20	0	200
St. James	203	140	2,030	1,400
Hanover	0	0	0	0
Westmoreland	21	0	210	0
Southern	<u>319</u>	<u>388</u>	<u>3,190</u>	<u>3,880</u>
St. Elizabeth	31	39	310	390
Manchester	188	233	1,880	2,330
Clarendon	100	116	1,000	1,160
Jamaica	<u>1,626</u>	<u>1,569</u>	<u>16,260</u>	<u>15,690</u>

Source: MoH HMSR, 2010 & 2011

4. Provision of Library Service

The National Family Planning Board is guided by its mission to play a lead role in identifying, developing, promoting and coordinating national policies and programmes that recognise the rights of the individual to high quality Family Planning services appropriate to their Reproductive Health needs and status.

The Board maintains a Special Library from which both the staff and the public can access information. The organisation recognised the importance of using information as an empowerment tool for individuals and this process is facilitated through the materials the library provides. Twenty-eight (28) new books were added to the collection in the Library as well as six (6) research studies and five (5) programme briefs.

New publications in the Library include:

(a) Adolescent Sexuality

- Music, Media and Adolescent Sexuality in Jamaica (2010) by Marcia Forbes
- The 'What's happening to my body?' (2007) book for girls by Lynda Madaras with Area Madaras

(b) Reproductive Health

- 2008 Reproductive Health Survey (RHS) Final Report
- 2008 Reproductive Health Survey (RHS) Young Adults Report
- 2008 Reproductive Health Survey (RHS) Regional Report

(c) Men-Family Planning

- Male Sexual Awareness: increasing sexual satisfaction (1998) by Barry and Emily McCarthy
- Male Underachievement in high school education in Jamaica, Barbados and St. Vincent and the Grenadines (2000) by Odette Parry

(d) Demographics

- The Jamaica Survey of Living Conditions (Collaboration between the Statistical Institute of Jamaica (STATIN) and the Planning Institute of Jamaica (PIOJ))
- The Economic and Social Survey of Jamaica (PIOJ)
- The Demographic Statistics (STATIN)

The Library also organised and mounted displays in observance of the following special events:

(a) World Health Day (April 7, 2011)

The display explored the relationship between urbanisation and health which included the social and environmental effects of urbanisation.

(b) Child's Month (May 2011)

The theme for that display was "All I want is a chance to grow up" which explored the rights of the child and violence against children among other relevant issues.

(c) World Population Day (July 11, 2011)

The theme was "Everyone Counts" and the display explored the history of Family Planning and how the Board uses population data for development.

(c) Breastfeeding month (September 2011)

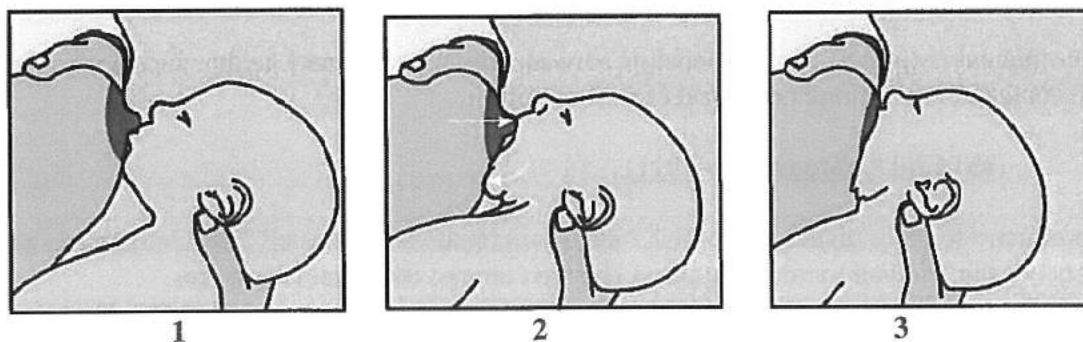
The theme "Talk to me! Breast Feeding—a 3D Experience". In the past, Breastfeeding was seen in two (2) dimensions:

1. Time (from pre-pregnancy to weaning)
2. Place (the home, community, and health care system).

This year, the World Alliance for Breastfeeding Action (WABA) added a third dimension, *Communication*.

3. Communication is an essential element of promoting, protecting and supporting breastfeeding. Through communication, the sharing of knowledge and experiences among women who breastfed will enable a wider outreach of support. (See Figure 11 overleaf for steps in breastfeeding)

Figure 11: Steps in Breastfeeding



1
Tickle the baby's lips to encourage him/her to open wide.

2
Pull your baby close so that the chin and lower jaw moves into your breast first.

3
Watch the lower lip and aim it as far from base of nipple as possible so that the baby takes a large mouthful of the breast.

(d) World Contraception Day (September 26, 2011)

The theme "Your life, your voice" looked at a conversation between "Barbara" and her mother. Barbara was in the process of planning her wedding to "David" but with her focus on finishing her education, she was not sure she was ready for children just yet. The conversation therefore explores some Family Planning options for the couple.

(e) World AIDS Day (December 1, 2011)

The theme "Universal Access and Human Rights" focused on the National HIV/AIDS Policy and responding to HIV/AIDS in the workplace among many other issues.

(f) Safer Sex Week (February 9-14, 2012)

Safer Sex Week had the theme of "Protect your love, use a glove" and explored the meaning of safe sex, gave condom factors and answered some interesting questions regarding safe sexual practices.

(g) International Women's Day (March 8, 2012)

International Women's Day 2011 focused on the theme "Educating and Training"-Decent work for women, and looked at what constitutes decent work and also gave examples of women who played a pivotal role in Family Planning and Reproductive Health in Jamaica.

5. Information Packages

The National Family Planning Board seeks to provide valuable information on Reproductive Health to the public through the development and distribution of Information Packages to Guidance Counsellors within various High, Junior High, Technical High and All-ages schools in Kingston and St. Andrew (KSA).

Information Packages were developed on the following topics:

- Teen Access to Reproductive Health Information (May 2011)
- HIV in Jamaica: The Adolescent Perspective (August 2011)
- Bridging the Gap: HFLE for the Teen in Transition (November 2011); and
- Teenage Pregnancy: Responsibilities and Limitations (February 2012).

6. The National Family Planning Board Website

The National Family Planning Board completed its most recent update; among the different documents added to the site is an article entitled “The Influence of Popular Culture on Male Sexual and Reproductive Health Behaviour” and the latest Information Packages sent to Guidance Counsellors in KSA.

7. Dissemination of the NFPB’s 2011-2015 Strategic Plan

The 2011-2015 Strategic Plan is the embodiment of activities which primarily drive the Family Planning Programme. The elements that guided the formulation of the programme components were the 2008 Reproductive Health Survey findings and the assumptions of future programme directions.

The NFPB in finalising its 2011-2015 Strategic Plan disseminated the plan in all four (4) health regions. The aim of presenting the strategic plan was to sensitise Health Providers of how the gaps shown in the 2008 RHS translated in the development of the 2011-2015 strategic plan as well as to receive necessary feedback using key programme tools to assist in finalising the plan. Those involved were the Regional Nursing Supervisors, Senior Public Health Nurses, Registered Midwives, Community Peer Educators, Health Promotion Officers, Medical Officers and Regional Technical Directors.

8. Support Programmes

All programmes were supported in financial and human resource management as follows:

Human Resource and Administration (HR&A)

The Unit is responsible for the management of human resources and the general administrative functions of the organisation, which includes recruitment, selection, training and development, staff welfare, and the maintenance of the building and properties.

In order to improve staff morale, productivity and efficiency, the following activities were conducted:

1. Training

- Two (2) in-house training sessions for staff on basic knowledge on contraceptive methods were held.
- One (1) Training Officer participated in a five-day training course for “Child Participation Trainers”.
- The Network Manager participated in two seminars:
 - Transforming the Internet
 - Discover the power of an HP Multi-Seat Solution
- The Director of HR and Administration and the Personnel and Administrative Officer participated in a two-day training course on “Introduction to GOJ Procurement Policies and Procedures Programme”
- A presentation was made to all members of staff on “Retirement, Financial and Lifestyle Planning”

2. Staffing

With the resignation of five (5) members of staff and the retirement of two (2), approval was sought and granted from Post Operations Committee in the Ministry of Finance and Planning for all five posts to be filled. The posts were filled within three (3) months of approval.

3. Long Service Awards

Thirteen (13) members of staff were acknowledged for their services of ten years and over.

4. Performance Appraisal

Performance Appraisals were conducted and employees who earned a score of seventy-five percent and over, received an incremental increase or a seniority allowance, in accordance with the Staff Orders. While, for an employee who received less than seventy-five percent, a Development Plan was signed by both the employee and the supervisor to rectify or alleviate the problem(s) which contributed to the employee's inability to achieve satisfactory performance standards.

Finance

The Finance Unit ensures that the organisation abides by the relevant accounting regulations such as the FAA and the IAS Acts, its financial statements are accurately prepared in a timely manner and that the annual audits are done by a government approved audit.

The Unit is responsible for managing the company's financial resources including grants provided by donor agencies.

The report of the financial statement provided by the external auditors is attached.

NATIONAL FAMILY PLANNING BOARD

FINANCIAL STATEMENTS

31 MARCH 2012

NATIONAL FAMILY PLANNING BOARD

FINANCIAL STATEMENTS

31 MARCH 2012

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INDEPENDENT AUDITORS' REPORT

To the Members of
National Family Planning Board

Report on the Financial Statements

We have audited the financial statements of National Family Planning Board set out on pages 3 to 24, which comprise the statement of financial position as at 31 March 2012 and the statements of comprehensive income, changes in reserves and cash flows for the year then ended and a summary of significant accounting policies and other explanatory notes.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with International Financial Reporting Standards and the National Family Planning Act. This responsibility includes: designing, implementing and maintaining internal controls relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error; selecting and consistently applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with International Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditors consider internal controls relevant to the company's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal controls. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Basis for Qualified Opinion

Inventories included in the financial statements are stated at cost. However, IAS 2 requires inventories to be valued at the lower of cost and net realizable value (NRV). Due to the fact that inventories were acquired to be sold at the nominal value or no charge, it is impracticable to calculate NRV.

INDEPENDENT AUDITORS' REPORT (CONT'D)

To the Members of
National Family Planning Board

Qualified Opinion

In our opinion, except for the matter discussed in the Basis for Qualified Opinion paragraph, the financial statements give a true and fair view of the entity's financial position as at 31 March 2012, and of its financial performance, changes in reserves and cash flows for the year then ended in accordance with International Financial Reporting Standards and comply with the provisions of the National Family Planning Board Act.

The financial statements for the year ended 31 March 2011 were audited by other independent accountants, whose report dated 19 September 2011 expressed a qualified opinion on those statements.

Report on additional requirements of the National Family Planning Board Act

Except for the matter discussed in the Basis for Qualified Opinion paragraph, we have obtained all the information and explanations, which to the best of our knowledge and belief, were necessary for the purposes of our audit.

In our opinion, except for the matter discussed in the Basis for Qualified Opinion paragraph, proper accounting records have been kept and the financial statements are in agreement therewith, and give the information required by the Act, in the manner so required.



Chartered Accountants

20 August 2012

NATIONAL FAMILY PLANNING BOARD
STATEMENT OF COMPREHENSIVE INCOME
YEAR ENDED 31 MARCH 2012

	<u>Note</u>	<u>2012</u> ₤	<u>2011</u> ₤
<u>Income</u>	5		
Government grants		76,223,000	72,305,000
Sale of contraceptives		19,352,995	38,178,894
CDC		3,103,501	3,824,030
Donation operations receipts		17,328,300	20,182,161
Other	6	<u>244,412</u>	<u>4,345,453</u>
		<u>116,252,208</u>	<u>138,835,538</u>
<u>Expenses</u>			
CDC operations expenses		(2,400)	(253,731)
Donation operations expenses		(11,258,564)	(13,871,954)
Administrative and other overhead expenses		(75,243,392)	(81,020,261)
Net change in contraceptive stock		<u>(16,533,248)</u>	<u>(26,401,214)</u>
		<u>(103,037,604)</u>	<u>(121,547,160)</u>
Operating surplus for the year before transfers	7	13,214,604	17,288,378
Other income			
Gain on property revaluation		25,376,458	-
Net transfer from CDC fund		(3,101,101)	(8,186,775)
Net transfer to donation fund		(6,069,736)	(7,375,017)
Transfer of interest to revolving loan interest fund		<u>(5,233)</u>	<u>(8,115)</u>
Net surplus for the year being, total comprehensive income		<u>29,414,992</u>	<u>1,718,471</u>

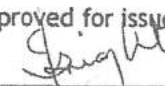
NATIONAL FAMILY PLANNING BOARD

STATEMENT OF FINANCIAL POSITION

31 MARCH 2012

	<u>Note</u>	<u>2012</u> \$	<u>2011</u> \$
ASSETS			
NON-CURRENT ASSETS:			
Property, plant and equipment	8	75,547,585	50,128,537
Intangible assets	9	<u>218,434</u>	<u>445,999</u>
		<u>75,766,019</u>	<u>50,574,536</u>
CURRENT ASSETS:			
Inventories	10	20,228,712	16,885,100
Receivables	11	1,603,835	9,610,662
Taxation recoverable		8,683,241	6,668,982
Related parties	12	5,674,500	5,553,880
Cash and cash equivalents	13	<u>159,161,199</u>	<u>143,895,922</u>
		<u>195,351,487</u>	<u>182,614,546</u>
		<u>271,117,506</u>	<u>233,189,082</u>
RESERVES, FUNDS AND LIABILITIES			
Reserves:			
Capital reserves	14	18,956,297	18,956,297
Revaluation reserve	15	80,082,978	54,706,520
Accumulated surplus		<u>15,301,393</u>	<u>11,262,859</u>
Total reserves		<u>114,340,668</u>	<u>84,925,676</u>
Funds			
CDC	16	61,118,262	58,017,161
Donation	17	83,175,217	77,105,481
Reproductive health and other projects	18	445,324	445,324
Revolving loan interest	19	<u>166,316</u>	<u>161,083</u>
		<u>144,905,119</u>	<u>135,729,049</u>
CURRENT LIABILITIES:			
Payables	20	<u>11,871,719</u>	<u>12,534,357</u>
		<u>271,117,506</u>	<u>233,189,082</u>

Approved for issue by the Board of Directors on 20 August 2012 and signed on its behalf:


 Dr. Sandra Knight - Chairman


 Donovan Brown - Director

NATIONAL FAMILY PLANNING BOARD
STATEMENT OF CHANGES IN RESERVES
YEAR ENDED 31 MARCH 2012

	<u>Capital Reserve</u> ₤	<u>Revaluation Reserve</u> ₤	<u>Accumulated Surplus</u> ₤	<u>Total</u> ₤
Balance at 1 April 2010	18,956,297	54,706,520	9,544,388	83,207,205
Total comprehensive income	-	-	<u>1,718,471</u>	<u>1,718,471</u>
Balance at 31 March 2011	18,956,297	54,706,520	11,262,859	84,925,676
Total comprehensive income	-	<u>25,376,458</u>	<u>4,038,534</u>	<u>29,414,992</u>
Balance at 31 March 2012	<u>18,956,297</u>	<u>80,082,978</u>	<u>15,301,393</u>	<u>114,340,668</u>

NATIONAL FAMILY PLANNING BOARD

STATEMENT OF CASH FLOWS

YEAR ENDED 31 MARCH 2012

	<u>2012</u> £	<u>2011</u> £
CASH FLOWS FROM OPERATING ACTIVITIES:		
Operating surplus for the year	13,214,604	17,288,378
Adjustments for:		
Depreciation	1,586,760	2,489,370
Amortisation	227,565	-
Interest income	(7,767,083)	(9,109,146)
Operating cash flows before movements in working capital	7,261,846	10,668,602
Change in operating assets and liabilities:		
Inventories	(3,343,612)	12,565,397
Receivables	8,731,388	(4,111,712)
Withholding tax	(2,014,259)	(2,849,212)
Related parties	(120,620)	-
Payables	(662,638)	2,839,938
Net cash provided by operating activities	<u>9,852,105</u>	<u>19,113,013</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of property, plant and equipment	(1,629,350)	(5,648,468)
Interest received (net of withholding tax)	<u>7,042,522</u>	<u>8,581,031</u>
Net cash provided by investing activities	<u>5,413,172</u>	<u>2,932,563</u>
NET INCREASE IN CASH AND CASH EQUIVALENTS	15,265,277	22,045,576
Cash and cash equivalents at beginning of year	<u>143,895,922</u>	<u>121,850,346</u>
CASH AND CASH EQUIVALENTS AT END OF YEAR (note 13)	<u>159,161,199</u>	<u>143,895,922</u>

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS

31 MARCH 2012

1. IDENTIFICATION AND PRINCIPAL ACTIVITY:

- (a) The National Family Planning Board (the Board) is a statutory body incorporated under The National Family Planning Act 1970 and domiciled in Jamaica. Its registered office is 5 Sylvan Avenue, Kingston 5.
- (b) The principal activities of the Board include preparing and promoting family and population planning programmes in Jamaica. The Board also provides programmes and services in research, project and educational materials, community outreach and clinical and counseling services, as well as procures and distributes contraceptives to and on behalf of the public health system in Jamaica.
- (c) The Board is managed by a Board of directors appointed by the Minister of Finance and the activities of the Board is monitored by the Ministry of Health.

2. REPORTING CURRENCY:

These financial statements are presented using the Jamaican dollars which is considered the currency of the primary economic environment in which the company operates ("the functional currency").

3. SIGNIFICANT ACCOUNTING POLICIES:

The principal accounting policies applied in the preparation of these financial statements are set out below. The policies have been consistently applied to all the year presented. Where necessary, prior year comparatives have been restated and reclassified to conform to current year presentation.

(a) Basis of preparation -

These financial statements have been prepared in accordance with International Financial Reporting Standards (IFRS) and their interpretations adopted by the International Accounting Standards Board, and have been prepared under the historical cost convention. They are also prepared in accordance with provisions of the National Family Planning Act.

The preparation of financial statements to conform to IFRS requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, contingent assets and contingent liabilities at the end of the reporting date and the total comprehensive income during the reporting period. The Board makes estimates and assumptions concerning the future. The resulting accounting estimates will, by definition, seldom equal the related actual results. The estimates and underlying assumptions are reviewed on an ongoing basis and any adjustments that may be necessary would be reflected in the year in which actual results are known. The areas involving a higher degree of judgment in complexity or areas where assumptions or estimates are significant to the financial statements are discussed below:

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

3. SIGNIFICANT ACCOUNTING POLICIES (CONT'D):

(a) Basis of preparation (cont'd) -

(i) Allowance for impairment losses on receivables

In determining amounts recorded for impairment losses on receivables in the financial statements, management makes judgements regarding indicators of impairment, that is, whether there are indicators that suggest there may be measurable decrease in estimated future cash flows from receivables, for example, through unfavourable economic conditions and default. Management will apply historical loss experience to individually significant receivables with similar characteristics such as credit risk where impairment indicators are not observable in their respect.

(ii) Net realizable value of inventories

Estimates of net realisable value are based on the most reliable evidence available at the time the estimates are made, of the amounts the inventories are expected to realise. These estimates take into consideration fluctuations of price or costs directly relating to events occurring after the end of the year to the extent that such events confirm conditions existing at the end of the year.

(iii) Expected useful life and residual value of property, plant and equipment

Expected useful live and residual value of an asset are reviewed at least each financial year end. Useful life of an assets is defined in terms of the asset's expected utility of the entity.

(iv) Fair value of financial assets

The management uses its judgment in selecting appropriate valuation techniques to determine fair values of financial assets adopting valuation techniques commonly used by market practitioners supported by appropriate assumptions.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

3. **SIGNIFICANT ACCOUNTING POLICIES (CONT'D):**

(a) **Basis of preparation (cont'd) -**

Standards, interpretations and amendments to published standards effective in the reporting period

During the reporting period, the following standards, amendments and interpretations became effective. Those considered relevant to the entity are as follows:

IAS 1 (Amended) Presentation of Financial Statements - Amendments resulting from May 2010 Annual Improvements to IFRS removing the requirement for each item of other comprehensive income to be presented separately in the statement of changes in equity (effective for annual periods beginning on or after 1 January 2011)

IAS 24 (Revised) Related Party Disclosures - Revision removing the requirement for government related entities to disclose details of all transactions with the government and other government related entities (effective for annual periods beginning on or after 1 January 2011)

Standards, interpretations and amendments to published standards that are not yet effective.

At the date of authorization of these financial statements, there were certain new standards, amendments and interpretations to existing standards which were in issue but which were not yet effective. Those which are considered relevant to the Board are as follows:

IFRS 9 Financial Instruments Part 1: Classification and Measurement - replaces parts of IAS 39 relating to the classification and measurement of financial assets (effective for annual periods beginning on or after 1 January 2013)

IFRS 13 Fair Value Measurement: defines fair value, establishes a framework for measuring fair value and sets out disclosure requirements for fair value measurements (effective for annual periods beginning on or after 1 January 2013).

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

3. **SIGNIFICANT ACCOUNTING POLICIES (CONT'D):**

(a) **Basis of preparation (cont'd) -**

Standards, interpretations and amendments to published standards that are not yet effective (cont'd).

The directors anticipate that the adoption of the standards, amendments and interpretations, which are relevant in future periods, is unlikely to have any material impact on the financial statements.

(b) **Foreign currency translation -**

Transactions in foreign currencies are converted at the exchange rates prevailing at the dates of the transactions. At the end of the reporting period, monetary assets and liabilities denominated in foreign currency are translated using the exchange rate ruling at that date. Exchange differences arising from the settlement of transactions at rates different from those at the dates of the transactions and unrealized foreign exchange differences on unsettled foreign currency monetary assets and liabilities are recognized in the statement of comprehensive income.

Exchange differences on non-monetary financial assets are a component of the change in their fair value. Depending on the classification of a non-monetary financial asset, exchange differences are either recognized in the statement of comprehensive income (applicable for financial assets fair valued through profit or loss), or within other comprehensive income if the non-monetary financial assets are equity instruments which are designated as fair valued through other comprehensive income.

(c) **Property, plant and equipment -**

Property, plant and equipment are initially recorded at cost. Freehold land and building are subsequently shown at their revalued amounts, being the fair value at the date of the revaluation, less subsequent accumulated depreciation and impairment losses. Revaluation are performed with sufficient regularity such that the carrying amounts do not differ materially from those that would be determined using fair values at the statement of financial position date. All other property, plant and equipment are stated at historical cost less accumulated depreciation and impairment losses. Freehold land is not depreciated.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

3. **SIGNIFICANT ACCOUNTING POLICIES (CONT'D):**

(c) **Property, plant and equipment (cont'd) -**

Depreciation is calculated on the straight-line basis at annual rates estimated to write off the carrying value of the assets over the period of their estimated useful lives. Annual rates are as follows:

Freehold buildings	2.5%
Plant, machinery, furniture, fixtures and equipment	10%
Motor vehicles	20%
Equipment	20% & 33 1/3%

Property, plant and equipment are reviewed periodically for impairment. Where the carrying amount of an asset is greater than its estimated recoverable amount, it is written down immediately to its recoverable amount.

(d) **Inventories -**

Inventories are valued at cost determined on a first-in-first out (FIFO) basis. Cost comprises invoiced value plus applicable landing charges.

Donated inventories are valued at the value supplied by the donor or at the cost of a similar purchased item.

(e) **Financial instruments -**

A financial instrument is any contract that gives rise to both a financial asset for one entity and a financial liability or equity of another entity.

Financial assets

The Board classifies its financial assets in the following categories: at fair value through profit and loss, loans and receivables and available for sale. The classification depends on the purpose for which the financial assets were acquired. Management determines the classification of its financial assets at initial recognition and re-evaluates this designation at every reporting date.

Financial assets at fair value through comprehensive income

This category includes financial assets held for trading.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

3. **SIGNIFICANT ACCOUNTING POLICIES (CONT'D):**

(e) **Financial instruments (cont'd) -**

Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They arise principally through the provision of goods and services, but also incorporate other types of contractual monetary assets. They are initially recognized at fair value plus transaction costs that are directly attributable to their acquisition or issue, and are subsequently carried at amortized cost using the effective interest rate method, less provision for impairment.

The board's loans and receivables comprise trade receivables and other receivables, amounts due from related entities and cash and cash equivalents in the statement of financial position.

Available-for-sale financial assets

Available-for-sale financial assets are non-derivatives that are either designated in this category or not classified in any other categories. Changes in the fair value of financial assets classified as available-for-sale are recognized in other comprehensive income.

Financial liabilities

The Board's financial liabilities are initially measured at fair value, and are subsequently measured at amortized cost using the effective interest method. These liabilities are classified as payables and are included in current liabilities on the statement of financial position.

(f) **Impairment -**

The carrying amounts of the Board's assets are reviewed at each reporting date to determine whether there is any indication of impairment. If any such indication exists, the asset's recoverable amount is estimated. An impairment loss is recognized whenever the carrying amount of an asset or the cash-generating unit to which it belongs exceeds its recoverable amount. Impairment losses are recognized in the statement of revenue and expenses.

(g) **Cash and cash equivalents -**

Cash and cash equivalents are carried in the statement of financial position at cost. For the purposes of the cash flow statement, cash and cash equivalents comprise cash at bank, in hand, deposits and short term highly liquid investments with original maturities of three months or less, net of bank overdraft.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

3. SIGNIFICANT ACCOUNTING POLICIES (CONT'D):

(h) Trade and other receivables -

Trade receivables are carried at amortized cost less provision made for impairment losses. A provision for impairment of trade receivables is established when there is objective evidence that the Board will not be able to collect all amounts due according to the original terms of receivables. Other receivables are stated at amortized cost less impairment losses.

(i) Trade and other payables -

Trade payables are stated at amortized cost.

(j) Provisions -

Provisions are recognized when the Board has a present legal or constructive obligation as a result of past events, it is probable that an outflow of resources will be required to settle the obligation, and a reliable estimate of the amount can be made.

(k) Taxation -

The board is exempt from income tax under section 12(b) of the Income Tax Act.

(l) Revenue recognition -

Revenue is recognized in the statement of comprehensive income when the significant risks and rewards of ownership have been transferred to the buyer, recovery of the consideration is probable, the associated costs and possible return of goods can be estimated reliably and there is no continuing management involvement with the goods. Revenue from the sale of goods is measured at the fair value of the consideration received or receivable, net of returns and allowances and discounts.

Interest income is recognised in the income statement for all interest bearing instruments on an accrual basis unless collectibility is doubtful.

Government grants are recognized in the income statement on the cash basis, when received.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

4. **FINANCIAL AND CAPITAL RISK MANAGEMENT:**

(a) **Financial risk factors -**

The Board's activities expose it to a variety of financial risks: market risk (including currency risk and price risk), credit risk, liquidity risk, interest rate risk and operational risk. In common with all other business, the board is exposed to risk that arise from its use of financial instruments. The board's overall risk management policies are established to identify and analyze the risks faced by the company and to set appropriate risk limits and controls and to monitor risk and adherence to limits. The principal instruments used by the company, from which financial instrument risk arise are as follows:

(i) **Market risk**

Price risk

Price risk is the risk that the value of a financial instrument will fluctuate as a result of changes in market prices. The company manages its exposure by maintaining only short term investments.

The statement of financial position at year end include short-term deposits of \$122,904,207 (2011 - \$117,194,639).

Currency risk

Currency risk is the risk that the value of a financial instrument will fluctuate because of changes in foreign exchange rates. The board manages its foreign exchange risk by holding foreign currency balances.

The statement of financial position at year end include net foreign assets US\$1,794 (2011 - US\$1,738).

(ii) **Interest rate risk**

Interest rate risk is the risk that the value of a financial instrument will fluctuate due to changes in market interest rates. The Board manages this risk by monitoring its interest bearing instruments closely and procuring the most advantageous interest rates, fixed for the life of the contract where possible.

The Board invests excess cash in short-term deposits and maintains interest earnings bank accounts with licenced financial institutions. Deposits are invested for periods between 30 days and 6 months at fixed rates of interest up to the date of maturity and are not influenced by market fluctuations up to that date. Interest earning bank accounts are maintained at interest rates subject to fluctuations based on prevailing market rates.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

4. **FINANCIAL AND CAPITAL RISK MANAGEMENT (CONT'D):**

(a) **Financial risk factors (cont'd) -**

(iii) **Credit risk**

Credit risk is the risk that one party to a financial instrument will fail to discharge an obligation and cause the other party to incur a financial loss. The Board has limited concentrations of credit risk. The Board has policies in place to ensure that sales of products and services are made to customers with an appropriate credit history. Cash transactions are limited to high credit quality financial institutions. The Board manages its credit risk by screening its customers, establishing credit limits and the rigorous follow-up of receivables; and ensuring investments are low-risk or, are held with reputable licenced financial institutions.

(iv) **Liquidity risk**

Liquidity risk is the risk that the Board will encounter difficulty in raising funds to meet commitments associated with financial instruments. The Board manages this risk by maintaining an appropriate level of liquid or near-liquid resources. The Board invests cash and some short term deposits for periods up to 90 days to meet liquidity requirements.

(v) **Capital risk**

Capital risk is the risk that the Board fails to comply with mandated regulatory requirements resulting in breach of those requirements. The Board's objectives when managing capital are to comply with capital requirements, safeguard the Board's ability to continue as a going concern and to maintain strong capital base to support the development of its business.

(vi) **Operational risk**

Operational risk is the risk of direct or indirect loss arising from a variety of causes associated with the Board's processes, personnel, technology and external factors, other than financial risks, such as generally accepted standards of corporate behaviour. The Board manages operational risk so as to avoid financial loss and damage to its reputation.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

4. **FINANCIAL AND CAPITAL RISK MANAGEMENT (CONT'D):**

(b) **Fair value of financial instruments -**

Fair value is the amount for which an asset could be exchanged, or a liability settled, between knowledgeable, willing parties in an arm's length transactions.

The fair value of financial instruments that are not traded in an active market is determined using valuation techniques. The Board uses a variety of methods and makes assumptions that are based on a market conditions existing at each statement of financial position date.

The amounts included in the financial statements for cash and cash equivalents, receivables payables and related party balances reflect their approximate fair value because of the short term maturity of these instruments.

5. **INCOME:**

These represents the primary sources of revenue for the entity:

	<u>2012</u> \$	<u>2011</u> \$
Government grant	76,223,000	72,305,000
Sale of contraceptives	19,352,995	38,178,894
CDC operations receipts	3,103,501	3,824,030
Donations operations receipts	17,328,300	20,182,161
Other (note 6)	<u>244,412</u>	<u>4,345,453</u>
	<u>116,252,208</u>	<u>138,835,538</u>

6. **OTHER OPERATING INCOME:**

	<u>2012</u> \$	<u>2011</u> \$
Contributions to mass media productions	-	3,587,350
Training and seminars recoveries	-	257,467
Rent	120,000	120,000
Interest	5,233	8,115
Publications	48,750	365,000
Photocopying	6,510	7,521
Miscellaneous	<u>63,919</u>	<u>-</u>
	<u>244,412</u>	<u>4,345,453</u>

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

7. SURPLUS:

Surplus for the year before transfers is stated after charging/(crediting) -

	<u>2012</u>	<u>2011</u>
	£	£
Depreciation	1,586,760	2,344,714
Amortisation	277,565	144,656
Directors' fees	630,460	780,945
Key management compensation	11,627,263	10,773,667
Auditors' remuneration	735,000	800,000
Interest income	<u>(7,767,082)</u>	<u>(9,109,146)</u>

8. PROPERTY, PLANT AND EQUIPMENT:

	<u>Land and Building</u>	<u>Furniture, Fixtures and Equipment</u>	<u>Motor Vehicles</u>	<u>Total</u>
	£	£	£	£
At cost/valuation -				
At 1 April 2010	47,500,000	15,374,573	4,314,009	67,188,582
Additions	-	5,242,177	-	5,242,177
At 31 March 2011	47,500,000	20,616,750	4,314,009	72,430,759
Additions	-	1,629,350	-	1,629,350
Revaluation	<u>21,900,000</u>	-	-	<u>21,900,000</u>
At 31 March 2012	<u>69,400,000</u>	<u>22,246,100</u>	<u>4,314,009</u>	<u>95,960,109</u>
Accumulated Depreciation:				
At 1 April 2010	2,348,958	13,562,915	4,045,635	19,957,508
Charge for the year	1,127,500	948,846	268,368	2,344,714
At 31 March 2011	3,476,458	14,511,761	4,314,003	22,302,222
Charge for the year	-	1,586,760	-	1,586,760
Revaluation	<u>(3,476,458)</u>	-	-	<u>(3,476,458)</u>
At 31 March 2012	<u>-</u>	<u>16,098,521</u>	<u>4,314,003</u>	<u>20,412,524</u>
Net Book Value -				
31 March 2012	<u>69,400,000</u>	<u>6,147,579</u>	<u>6</u>	<u>75,547,585</u>
31 March 2011	<u>44,023,542</u>	<u>6,104,989</u>	<u>6</u>	<u>50,128,537</u>

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

8. PROPERTY, PLANT AND EQUIPMENT (CONT'D):

- (a) Over the years, the Board has received donations of equipment and motor vehicles from donor agencies, including the United States Agency for International development (USAID), as part of those agencies' technical assistance to the Board's family planning programmes and development. The value of these gift has been included in capital reserves. In addition, profits realized from the disposal of such gifts have been credited to capital reserve (note 14).
- (b) The Board's freehold land and buildings at 5 Sylvia Avenue and 14 retirement Road, Kingston 5 were revalued in March 2012 by Allison Pitter & Company, professionally qualified property appraisers and valuers. The valuations were done on the basis of open market value. The increase in valuation was credited to the revaluation surplus, (note 15).
- (c) Under the cost model, the carrying amount of revalued land and building at 5 Sylvan Avenue and 14 Retirement Road would be \$1,564,683 (2011 - \$1,604,283) at the end of the reporting period. The revalued amount includes a revaluation surplus of \$80,082,978 (2011-\$54,617,554).
- (d) Included in land and buildings at valuation is a warehouse with a carrying amount of \$17,700,000 (2011 - \$9,479,166), [carrying amount at cost \$1,396,017 (2011 - \$1,429,144)] which was purchased with CDC funds; included in furniture and equipment are equipment with a carrying amount of \$25 (2011 - \$25) which were purchased with Donation funds.

9. INTANGIBLE ASSETS:

	<u>Computer Software</u>
	<u>\$</u>
At cost/valuation	
At 1 April 2010	1,888,533
Additions	406,291
At 31 March 2011	<u>2,294,824</u>
Additions	-
At 31 March 2012	<u>2,294,824</u>
Accumulated Amortisation:	
At 1 April 2010	1,704,169
Charge for the year	144,656
At 31 March 2011	<u>1,848,825</u>
Charge for the year	227,565
At 31 March 2012	<u>2,076,390</u>
Net Book Value -	
31 March 2012	<u>218,434</u>
31 March 2011	<u>445,999</u>

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

10. INVENTORIES:

	<u>2012</u>	<u>2011</u>
	\$	\$
Donated contraceptives	13,928,641	7,307,072
GOJ contraceptives	<u>6,300,071</u>	<u>9,578,028</u>
	<u>20,228,712</u>	<u>16,885,100</u>

11. RECEIVABLES:

	<u>2012</u>	<u>2011</u>
	\$	\$
Accounts receivable	107,330	79,700
Staff loans	80,665	63,234
Deposit on equipment	-	423,335
Advance	246,124	8,203,645
Prepayments and deposits	301,474	278,283
Other	<u>868,242</u>	<u>562,465</u>
	<u>1,603,835</u>	<u>9,610,662</u>

The aging of trade receivables is as follows:

	<u>2012</u>	<u>2011</u>
	\$	\$
0-30 days		
31-60 days		
61-90 days		
Over 90 days	<u>107,330</u>	<u>79,700</u>

12. RELATED PARTIES:**(a) Key management compensation**

	<u>2012</u>	<u>2011</u>
	\$	\$
Remuneration	9,321,287	10,107,205
Pension contributions	568,285	666,462
Gratuity - current year	909,609	-
- Prior year	<u>828,082</u>	<u>-</u>
	<u>11,627,263</u>	<u>1,773,667</u>

NATIONAL FAMILY PLANNING BOARD
 NOTES TO THE FINANCIAL STATEMENTS
 31 MARCH 2012

12. RELATED PARTIES (CONT'D):

(a) Year-end balances arising from sales of goods

	<u>2012</u> \$	<u>2011</u> \$
Due from - Health centers	<u>5,674,500</u>	<u>5,553,880</u>

13. CASH AND CASH EQUIVALENTS:

	<u>2012</u> \$	<u>2011</u> \$
<u>Cash at bank and in hand</u>		
Cash in hand	6,000	6,000
GOJ Current Account	34,073,258	24,559,572
GOJ Savings Account	67	67
GOJ US\$ Savings Account	155,091	148,706
Donations Current Account	660,910	660,910
Donations Savings Account	<u>1,361,666</u>	<u>1,336,028</u>
	<u>36,256,992</u>	<u>26,711,283</u>

Deposits and short term instruments

Fixed Deposit - Mayberry Investments Limited	55,434,894	53,149,069
Fixed Deposit - Proven Wealth Limited	<u>67,469,313</u>	<u>64,035,570</u>
	<u>122,904,207</u>	<u>117,184,639</u>
	<u>159,161,199</u>	<u>143,895,922</u>

(a) Included in deposits and short term instruments is interest receivables net of withholding tax as follows:

	<u>2012</u> \$	<u>2011</u> \$
Mayberry Investments Limited	65,509	157,664
Proven Wealth Limited	<u>659,052</u>	<u>137,520</u>
	<u>724,561</u>	<u>295,184</u>

(b) Deposit and short term instruments are interest bearing.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

14. CAPITAL RESERVES:

The movement in capital reserves during the year is as follows:

	<u>2012</u> \$	<u>2011</u> \$
At 1 April		
Value of equipment donated to the Board by Donor Agencies	14,035,200	14,035,200
Profit on disposal of equipment donated by Donor Agencies	<u>4,921,097</u>	<u>4,921,097</u>
At 31 March	<u>18,956,297</u>	<u>18,956,297</u>

15. REVALUATION RESERVES:

The movement on revaluation reserve during the year is as follows:

	<u>2012</u> \$	<u>2011</u> \$
At 1 April		
Revaluation surplus	54,706,520	54,706,520
	<u>25,376,458</u>	<u>-</u>
At 31 March	<u>80,082,978</u>	<u>54,706,520</u>

16. CDC FUND:

	<u>2012</u> \$	<u>2011</u> \$
Balance at beginning of year	<u>58,017,161</u>	<u>49,830,386</u>
Transactions for the year		
Interest income	3,103,501	3,824,030
Expenditure and net change in inventory value	(2,400)	(253,731)
Surplus for the year	3,101,101	3,570,299
Funds transferred from Board's operations	-	4,616,476
Net transfer to CDC fund	<u>3,101,101</u>	<u>8,186,775</u>
Balance at end of year	<u>61,118,262</u>	<u>58,017,161</u>

The fund is represented by property, plant and equipment, inventory, interest receivables, taxation recoverable, short-term investments and bank balances.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

17. DONATION FUND:

	<u>2012</u> ₤	<u>2011</u> ₤
Balance at beginning of year	<u>77,105,481</u>	<u>69,730,464</u>
Transactions for year -		
Receipts and donations		
Contraceptive sales	7,352,610	4,568,660
Donations	5,317,342	10,336,500
Interest	<u>4,658,348</u>	<u>5,277,001</u>
	17,328,300	20,182,161
Expenditure and net change in inventory value	<u>(11,258,564)</u>	<u>(13,871,954)</u>
Surplus for the year	6,069,736	6,310,207
Funds transferred from Board's operations	-	1,064,810
Net transfer to donations fund	<u>6,069,736</u>	<u>7,375,017</u>
Balance at end of year	<u>83,175,217</u>	<u>77,105,481</u>

This fund is represented by donations received by the Board from various companies and donor agencies for use in its operations. Expenditure from this fund is made at the Board's discretion. The fund is represented by property, plant and equipment, inventory, interest receivable, taxation recoverable, short-term investments and bank balances.

18. REPRODUCTIVE HEALTH AND OTHER PROJECTS FUND:

	<u>2012</u> ₤	<u>2011</u> ₤
Balance at beginning of year		
UNICEF	2,173	2,173
UNFPA	<u>443,151</u>	<u>443,151</u>
Balance at end of year	<u>445,324</u>	<u>445,324</u>

The above represent undisbursed balance of funds received from the United Nations International Children's Fund (UNICEF) and the United Nations Population Fund (UNFPA) to fund a reproductive health project and an adolescent educational programme. The balances are held in designated bank accounts.

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

19. REVOLVING LOAN INTEREST FUND:

	<u>2012</u>	<u>2011</u>
	\$	\$
Balance at beginning of year	161,083	152,968
Interest earned during the year	<u>5,233</u>	<u>8,115</u>
Balance at end of year	<u>166,316</u>	<u>161,083</u>

The Board made a decision to set up a fund to capitalise interest-earned on staff loans, however, the balance is not represented by a separate bank account.

20. PAYABLES:

	<u>2012</u>	<u>2011</u>
	\$	\$
Staff costs	6,427,627	4,532,457
Audit fees	735,000	800,000
Accruals	2,801,709	5,258,642
Other	<u>1,907,383</u>	<u>1,943,258</u>
	<u>11,871,719</u>	<u>12,534,357</u>

NATIONAL FAMILY PLANNING BOARD
NOTES TO THE FINANCIAL STATEMENTS
31 MARCH 2012

21. EXPENSES BY NATURE:

Total direct, selling, administration and other operating expenses:

	<u>2012</u>	<u>2011</u>
	£	£
Advertising and promotion	13,493,956	12,044,623
Amortisation	227,565	144,656
Auditors' remuneration	735,000	800,000
Cost of inventory recognized as expenses	27,791,812	40,270,768
Depreciation and amortisation	1,586,760	2,344,714
Directors' fees	630,460	780,945
Insurance	1,128,964	972,323
Office expenses	3,774,491	3,099,195
Other	46,045	44,105
Professional fees	40,026	1,174,875
Provision for doubtful debt	-	927,688
Repairs and maintenance	1,539,728	2,118,369
Reproductive health - current year	77,322	195,681
- prior year	(2,500,000)	-
Staff costs (note 22)	47,458,146	48,770,867
Training and seminars	2,664,878	4,043,399
Travelling, entertainment and subsistence	981,875	987,485
Utilities	<u>3,360,576</u>	<u>2,827,467</u>
	<u>103,037,604</u>	<u>121,547,160</u>

22. STAFF COSTS:

	<u>2012</u>	<u>2011</u>
	£	£
Employee benefits for non-executive staff:		
Salaries, wages and related expenses	33,100,118	35,142,336
Gratuity	285,480	39,334
Pension contributions	1,773,979	2,236,180
Uniform, medical and other staff benefits	<u>671,306</u>	<u>579,350</u>
	<u>35,830,883</u>	<u>37,997,200</u>
Key management compensation comprises:		
Management remuneration	9,321,287	10,107,205
Pension contributions	568,285	666,462
Gratuity - current year	909,609	-
- prior year	828,082	-
	<u>11,627,263</u>	<u>10,773,667</u>
	<u>47,458,146</u>	<u>48,770,867</u>

The number of persons employed by the board at the end of the year was 34 (2011-36)



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INDEPENDENT AUDITORS' REPORT

To the Directors of
National Family Planning Board

The supplementary information presented on page 26 to 29 has been taken from the accounting records of the entity and has been subjected to the tests and other auditing procedures applied in our examination of the financial statements of the entity for the year ended 31 March 2012, upon which we have issued a qualified opinion.

In our opinion, this information, although not necessary for a fair presentation of the entity's state of affairs, results of operations, changes in reserve or cash flows is fairly presented in the form and context in which it appears.

Chartered Accountants

20 August 2012

NATIONAL FAMILY PLANNING BOARD
 DETAILED STATEMENT OF ACCOUNT
 YEAR ENDED 31 MARCH 2012

	<u>2012</u>	<u>2011</u>
	\$	\$
<u>Income</u>		
Government grants	76,223,000	72,305,000
Sale of contraceptives	19,352,995	38,178,894
CDC (Page 28)	3,103,501	3,824,030
Donations operations receipts	17,328,300	20,182,161
Other	<u>244,412</u>	<u>4,345,453</u>
	<u>116,252,208</u>	<u>138,835,538</u>
 <u>Expenses</u>		
CDC operations expenses (Page 28)	2,400	253,731
Donations operations expenses	11,258,564	13,871,954
Administrative and other overhead expenses (Page 27)	75,243,392	81,020,261
Net change in contraceptive inventory	<u>16,533,248</u>	<u>26,401,214</u>
	<u>103,037,604</u>	<u>121,547,160</u>
 Operating surplus for the year	 <u>13,214,604</u>	 <u>17,288,378</u>

NATIONAL FAMILY PLANNING BOARD

ADMINISTRATIVE AND OTHER OVERHEAD EXPENSES

YEAR ENDED 31 MARCH 2012

	<u>2012</u>	<u>2011</u>
	\$	\$
Advertising, promotion and mass media	13,493,956	12,044,623
Audit fees	744,300	800,000
Bank charges	34,345	32,976
Cleaning and sanitation	912,656	824,724
Depreciation and amortisation	1,814,325	2,244,370
Directors' fees	630,460	780,945
Electricity and water	3,360,576	2,827,467
Executive remuneration	11,627,263	10,107,205
Insurance	1,128,964	972,323
Motor vehicle expenses	460,194	302,211
Printing and stationery	1,914,117	1,364,023
Professional fees	40,026	1,174,875
Provision for doubtful debt	-	927,688
Repairs and maintenance	1,079,534	1,816,157
Reproductive health survey	(2,422,678)	195,681
Salaries, wages and related	35,830,883	38,663,662
Subscriptions	76,191	67,504
Telephone, postage and cable	947,718	910,447
Training and seminars	2,588,687	3,975,895
Travelling, entertainment and subsistence	981,875	987,485
	<u>75,243,392</u>	<u>81,020,261</u>

NATIONAL FAMILY PLANNING BOARD
SCHEDULE OF INCOME AND EXPENSES - COMMERCIAL DISTRIBUTION OF
CONTRACEPTIVES (CDC)
YEAR ENDED 31 MARCH 2012

	<u>2012</u> \$	<u>2011</u> \$
<u>Other income</u>		
Interest income	<u>3,103,501</u>	<u>3,824,030</u>
<u>Expenses</u>		
Loss of foreign exchange	-	(6,331)
Bank charges	(2,400)	(2,400)
Depreciation charge	-	(245,000)
	<u>(2,400)</u>	<u>(253,731)</u>
Surplus for the year	<u>3,101,101</u>	<u>3,570,299</u>

NATIONAL FAMILY PLANNING BOARD
SCHEDULE OF INCOME AND EXPENSES - DONATIONS
YEAR ENDED 31 MARCH 2012

	<u>2012</u> ₹	<u>2011</u> ₹
SALES:		
Sale of contraceptives	<u>7,352,610</u>	<u>4,568,660</u>
COST OF SALES:		
Opening inventory of contraceptives	7,307,072	10,840,126
Inventory received	<u>17,880,133</u>	<u>10,336,500</u>
	25,187,205	21,176,626
Closing stock of contraceptives	<u>(13,928,641)</u>	<u>(7,307,072)</u>
	<u>11,258,564</u>	<u>13,869,554</u>
Operating surplus	(3,905,954)	(9,300,894)
OTHER INCOME:		
Donations	5,317,341	10,336,500
Interest income	<u>4,658,349</u>	<u>5,277,001</u>
	6,069,736	6,312,607
EXPENSES:		
Bank charges	-	(2,400)
SURPLUS FOR THE YEAR	<u>6,069,736</u>	<u>6,310,207</u>

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