

**HIV EPIDEMIOLOGICAL PROFILE 2015,
Facts & Figures**



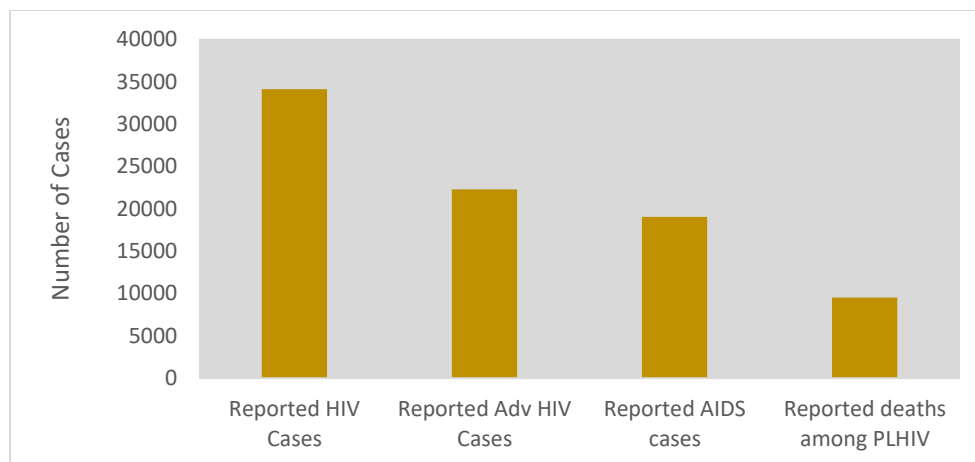
**Ministry of Health
Jamaica**

In this surveillance report, *HIV* cases include persons reported with HIV infection (non-AIDS), advanced HIV (non-AIDS) and AIDS within a given year. **It is also important to note that the report is a reflection of the lowest known status of all reported PLHIV. Therefore, persons reported as Advanced HIV, AIDS or even AIDS deaths in 2015 may include previously reported cases that have only just been reported as having a later disease stage.** However, the data does not include HIV-infected persons who have not been tested for HIV or persons whose positive test results have not been reported to the Ministry of Health (MOH).

OVERVIEW OF HIV-INFECTED POPULATION INCLUDING REPORTED HIV INFECTIONS, AIDS CASES AND DEATHS RELATED TO HIV

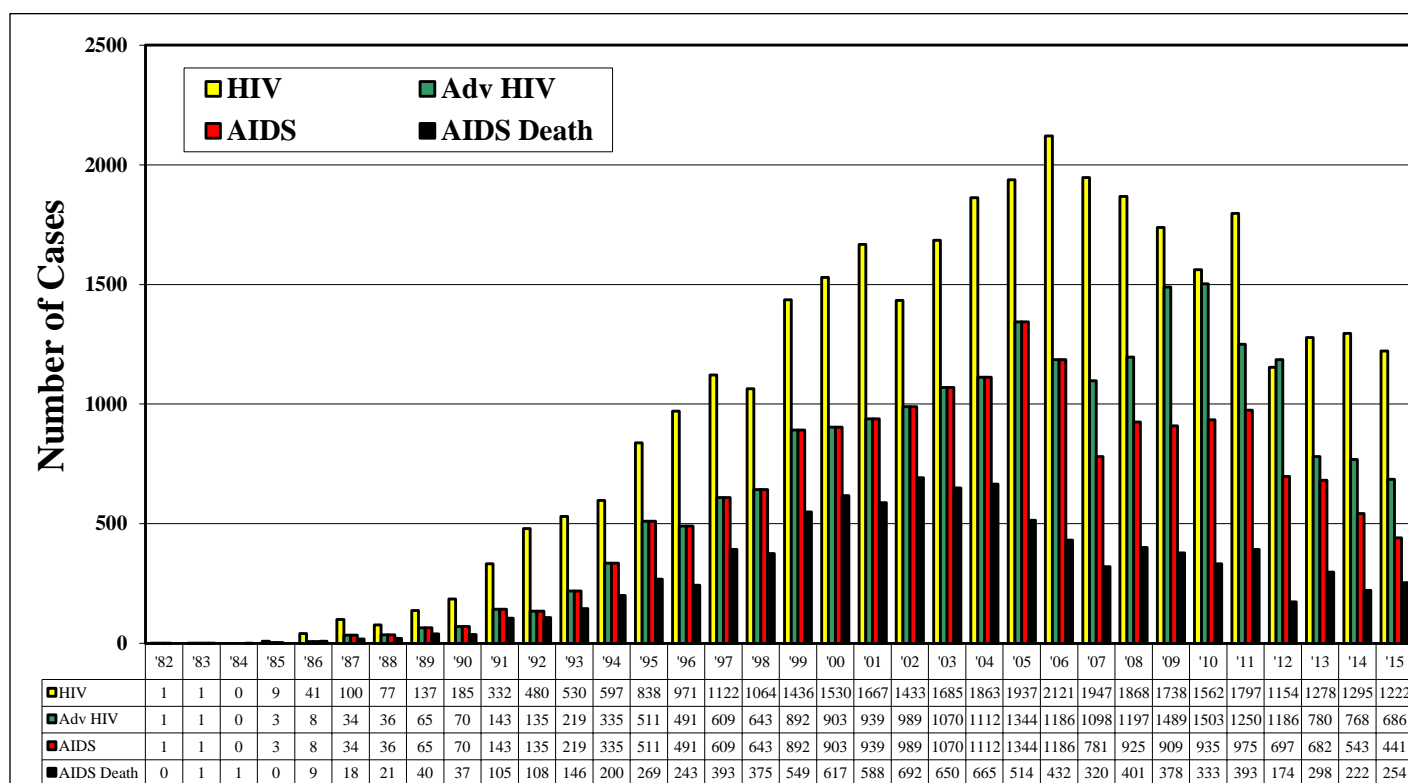
- Jamaica has an estimated HIV prevalence of 1.6% among the general population. Based on both modelled estimates and the case-based surveillance data, it is estimated that 29,000 persons are currently living with HIV in Jamaica; but approximately 16% are unaware of their status. Between January 1982 and December 2015, thirty-four thousand one hundred and twenty-five (34,125) cases of HIV were reported to the Ministry of Health. Of these, 9,517 (27.9%) are known to be deceased.
- The MOH began monitoring cases of advanced HIV in July 2005 to reflect the need for treatment at an earlier stage of disease. Persons with advanced HIV include persons with CD4 count <350. In 2015, six hundred and eighty-six (686) persons with advanced HIV (349 males and 337 females) were reported compared to 764 in 2014.

Figure 1: Total Number of HIV, Advanced HIV Cases, AIDS and Deaths Reported, 1982 - 2015



Source: HATS Database, 2015

Figure 2: Annual reported cases of HIV, Advanced HIV, AIDS and AIDS Deaths

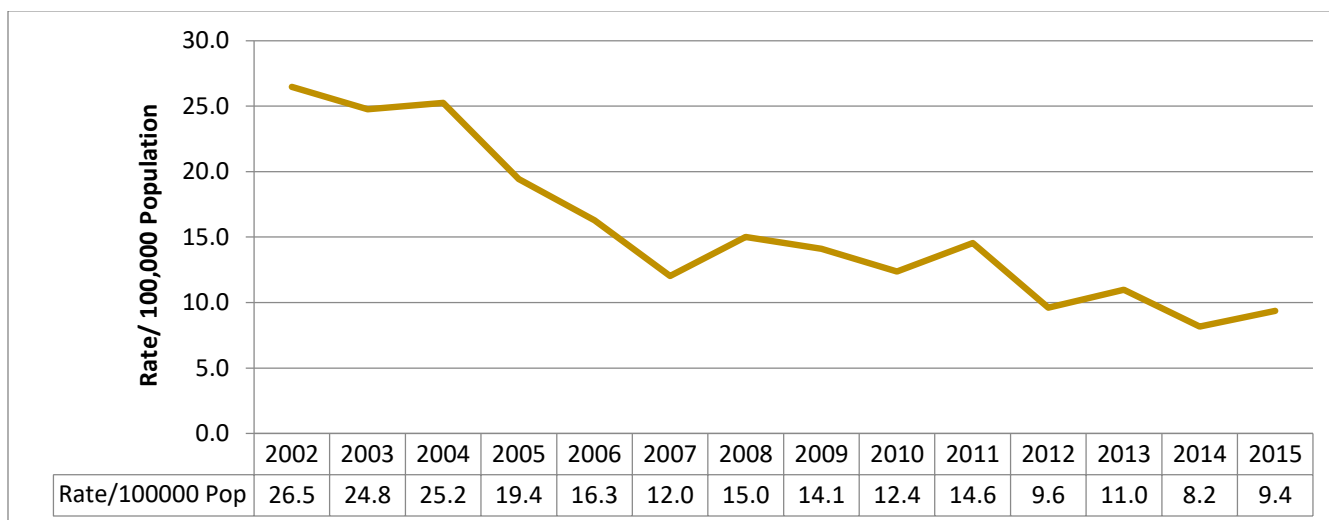


Source: HATS Database, 2015

- In the early part of the epidemic, the number of deaths was ~ 50% or more of the number of AIDS cases reported. Since 2004, this has improved where the number of reported deaths are ~ <50% when compared to the number of reported AIDS cases.

- The AIDS mortality rate as shown in Figure 3 mirrors this trend. The rate has declined from 25 deaths/100,000 population in 2004 to just over 9 deaths/100,000 population in 2015 which represents a 64% decrease since the inception of universal access to ARVs in 2004.
- Additionally, *Spectrum* modelling estimates also confirm this declining trajectory of AIDS deaths, but suggest that there may be several deaths that are not being reported as our reported deaths are only approximately 21% of the estimated number of deaths.
- In addition to the introduction of public access to antiretroviral treatment in 2004, scaling up of the national VCT programme and use of rapid test kits allowing for earlier diagnosis, availability of prophylaxis against opportunistic infections and improved laboratory capacity to conduct investigations such as CD4 counts, viral load and PCR tests are believed to have contributed to the decrease in deaths.
- However, although Jamaica has successfully increased access to treatment and care services; analysis of data related to retention in care has shown increased loss-to-follow-up among patients on HAART. Failure to adhere to treatment and care is a barrier to further reducing AIDS morbidity and mortality.

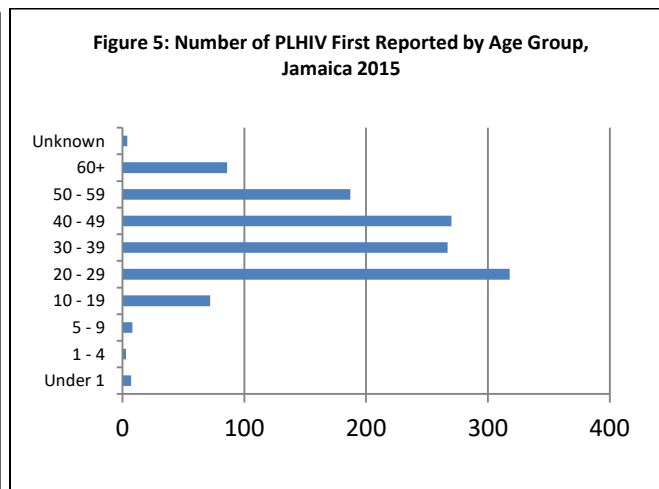
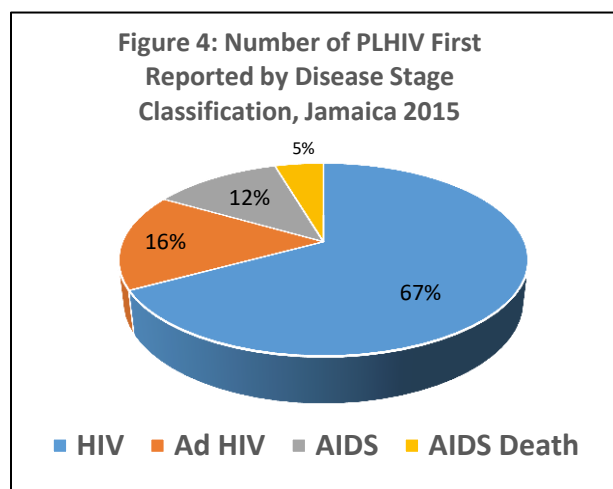
Figure 3 AIDS Mortality Rate/100,000 Population, Jamaica 2002 - 2015



Source: HATS Database, 2015; STATIN Mid-Year Populations 2002 - 2014

NEWLY DIAGNOSED CASES 2015

- There were 1,222 newly diagnosed cases in 2015. Approximately two thirds (67%) of these newly diagnosed PLHIV were 1st diagnosed with CD4 \geq 350 which likely is a reflection of scaled-up HIV testing and counselling efforts, particularly with Provider Initiated Testing and Counselling, in order to facilitate early diagnosis. However, there is still need for wider testing as 58 (5%) of these cases were still notified to the National Epidemiology Unit for the first time as deaths.
- The proportion of newly diagnosed males and females were roughly equal with the males (609) accounting for slightly less (49.8%) newly diagnosed cases than females (613; 50.2%); with the age group 20 – 29 year-olds accounting for the largest proportion (26%) of newly diagnosed cases.



ANALYSIS BY GEOGRAPHIC AREA

- Sixty-three percent (63%) of reported HIV cases in 2015 were from the most urbanized parishes (KSA, St. Catherine, and St. James). This proportion is slightly higher than it was last year (52%), but has decreased from 70% of cases in 2008 (Table 1).
- However, despite the general decreasing trend in proportion of reported cases, the most urbanized parishes have the highest cumulative AIDS case rates: Kingston & St. Andrew – 1,033.4 cases per 100,000 persons, and St. James – 1,515.2 HIV cases per 100,000 persons. In fact, KSA and St. James have cumulative case rates that exceed the national case rate (698.2 cases/100,000 population).
- In addition to the urbanized parishes, parishes with significant tourism-based economies have the next highest level of cumulative number of reported AIDS cases since the start of the epidemic: 776.0 cases

per 100,000 persons in Westmoreland, 695.6 cases per 100,000 persons in Trelawny, 683.7 cases per 100,000 persons in St. Ann, and 679.7 cases per 100,000 persons in Hanover. Of note, all parishes in the Western Region are counted among those with the highest cumulative number of HIV cases.

Figure 6: Case Rates by STATIN Communities, 1983 - 2015, Jamaica

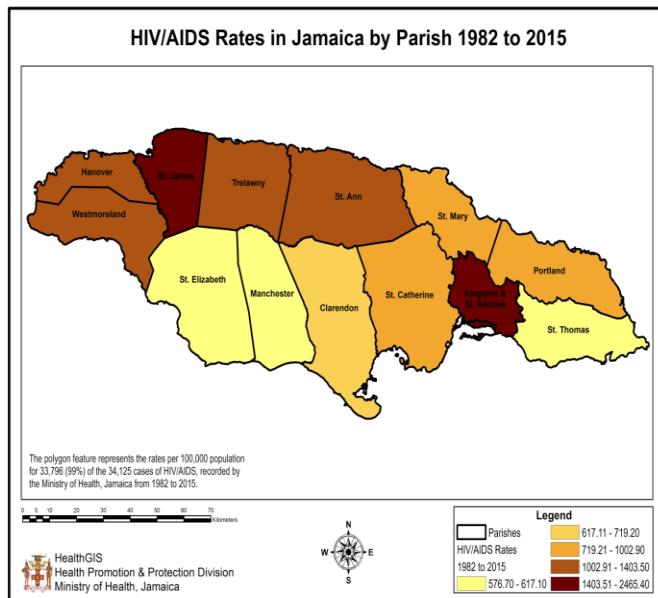


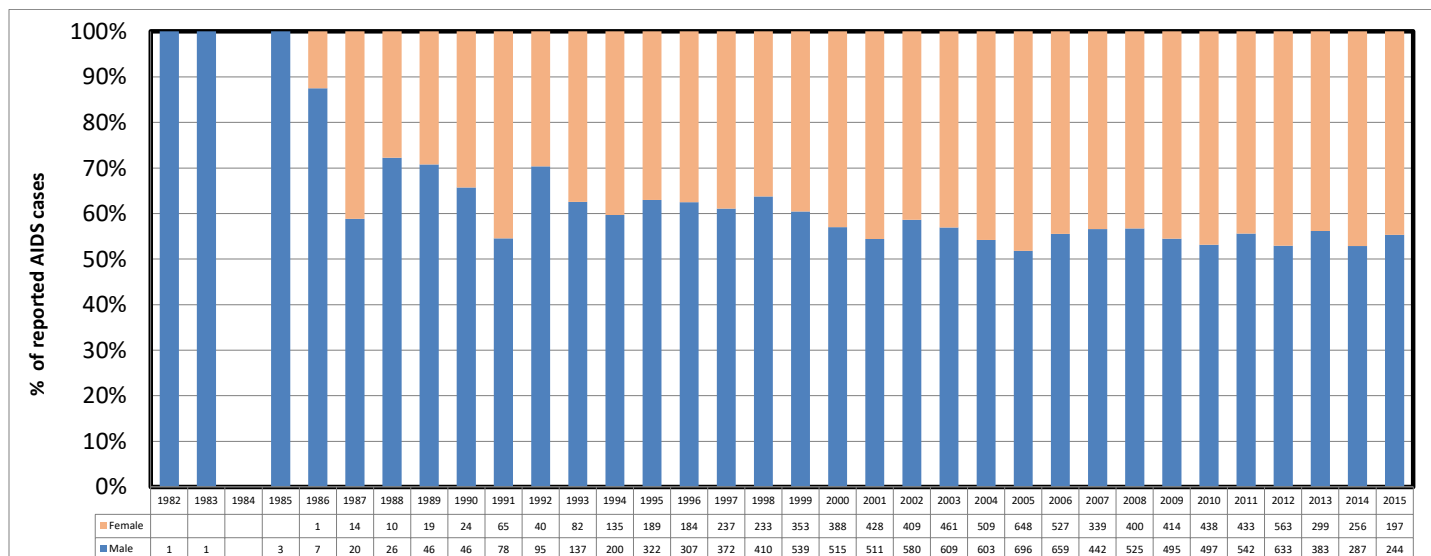
Table 1: Annual HIV cases reported by parish 2011 – 2015, Jamaica

PARISH	2011	2012	2013	2014	2015
KINGSTON & ST. ANDREW	525	430	354	363	290
ST. THOMAS	13	12	7	27	22
PORTLAND	34	27	35	26	39
ST. MARY	78	34	65	56	35
ST. ANN	132	4	63	106	108
TRELAWNY	60	36	79	33	37
ST. JAMES	252	152	216	199	160
HANOVER	51	34	47	31	54
WESTMORELAND	125	79	98	110	113
ST. ELIZABETH	51	25	36	53	43
MANCHESTER	125	37	65	38	39
CLARENDON	52	71	63	109	99
ST. CATHERINE	235	204	148	138	167
PARISH NOT KNOWN	12	7	0	0	15
OVERSEAS ADDRESS	28	2	2	0	1
Total	1,797	1,154	1,278	1,295	1,222

ANALYSIS BY SEX AND AGE GROUP

- The cumulative male: female ratio for persons reported with AIDS in 2015 was 1.31:1, very similar to the ratio of men: women reported in 2014 (1.32:1). The cumulative AIDS case rates are higher among males (27.8 cases per 100,000) compared to females (21.6 cases per 100,000 females). As figure 5 highlights, although the epidemic affects more men than women, over time females are accounting for an increased proportion of the AIDS cases that are reported annually compared to the beginning of the outbreak.

Figure 7: Annual Female: Male distribution of reported AIDS cases, 1982 – 2015



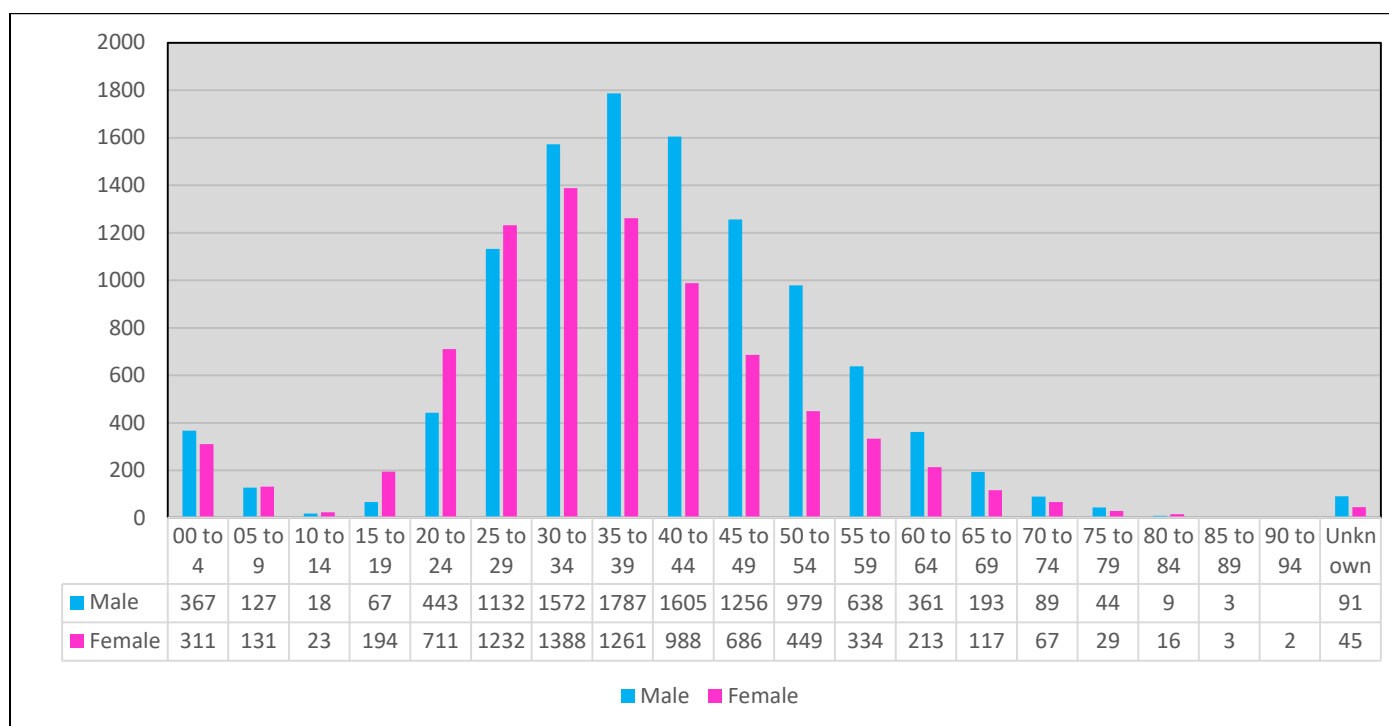
- Approximately 75% of all AIDS cases reported 1982 - 2015 are in the 20 - 49 year old age group and 86% of all AIDS cases reported 1982 - 2015 are between 20 and 59 years old.
- Cumulatively, there is a steep incline in the number of AIDS cases from 10 – 24 years. The number of AIDS cases reported among 20-24 year olds (1,154) is over 4 times the number of cases reported among 15-19 year olds (261 cases) which may possibly be due to testing access.
- There is also variation in the gender distribution of reported AIDS cases across the lifespan. Young females account for the larger share of reported cases in the 10 – 29 age range. In the age group 15 to 19 years old, four times more young women have been reported with AIDS than young men. Similarly, young women aged 20 – 24 years old are one and a half times more likely to be infected than males in the same age group. Adult males account for a larger proportion of the cases reported in the 30 to 79 age group.
- However, the HIV prevalence among young adolescent girls and boys aged 10-14 is equal and is estimated to be 0.1%¹ predominantly the result of mother-to-child transmission of HIV (UNAIDS, 2014). In later adolescence (15 – 19 years), there is an estimated increase in HIV prevalence, consistent with the onset of sexual behaviour; and by the age of 24, there is a further increase in HIV prevalence consistent with increased sexual behaviour as well as survival and transition of HIV-

¹ HIV prevalence estimates presented in this section are based on the final UNAIDS HIV and AIDS estimates for Jamaica (August 2014).

infected adolescents into the early adult years. Consequently, the estimated HIV prevalence rises to 1% in young women aged 20 – 24 and to 1.4% in young men in the same the group.

- In contrast with the estimated HIV prevalence of 0.4 and 0.5 reported in adolescent girls and boys aged 15 – 19 at the national level through the UNAIDS 2014 estimates though, the HIV prevalence among gay and bisexual adolescent boys is estimated to be 14% while HIV prevalence in transgender adolescents is estimated to be 27% (National HIV/STI Programme, 2014) underlining the extreme vulnerability and urgent need for sustained HIV prevention, treatment, care and support response for these adolescents.

Figure 8 Cumulative AIDS Cases Reported by Age Group and Sex, 1982 - 2015



RISK BEHAVIOUR AND TRANSMISSION OF HIV

- In Jamaica, HIV is primarily transmitted through sexual intercourse. Among all reported adult HIV cases on whom data about sexual practices are available (78% of cases), heterosexual practice is reported by 95% of persons.
- As of 2015, the sexual practice of 41% of men ever reported with HIV (and 40% of men reported with AIDS) was unknown. This is due to inadequate investigation and reporting of cases as well as

unwillingness among men who engage in sex with other men to disclose their sexual practices. Of the total number of men reported with HIV, 4% (713) were identified as bisexual and 4% (683) identified as homosexual. The annual figures for 2015 reflected similar proportions as the cumulative figures. In 2015, the sexual practice of 41% of men ever reported with HIV (and 45% of men reported with AIDS) was unknown. Of the total number of men reported with HIV in 2015, 5.7% (35) were identified as homosexual and 3.2% (20) identified as bisexual.

- Cumulatively, the number of PLHIV who reported being a commercial sex worker was 824 (2.4%) with the greater proportion of commercial sex workers being female (85%,703) females and 15% males (121). The annual figures also reflect similar proportions. In 2015, a total of 28 PLHIV (2.2%) reported being a commercial sex worker, with the sex breakdown among them showing 64% (18) females to 36% (10) males.
- Among reported HIV cases on whom risk data are available, the main risk factors were multiple sex partners, history of STIs, crack/cocaine use, and sex with sex workers. ‘No high risk behaviour’ was reported for a notable proportion of HIV cases and this may represent persons who have one sex partner who was HIV infected by another partner (Table 1). In 2015 specifically, the pattern of risk remained the same with the most commonly reported risk behaviours were multiple sex partners and STI history.

Table 2: Annual Reported risk behaviours among adults with HIV (1982 – Dec 2015 cumulative)

RISK	No. of Persons (%) -2015	No. of Persons (%) 1982 - 2015
Sex with Sex workers	114 (9.3%)	4,667 (13.7%)
Crack , Cocaine Use	17 (1.4%)	1,357 (4.0%)
STI History	300 (24.6%)	11,167 (31.3%)
IV Drug Use	2 (0.2%)	196 (0.57%)
Multiple Sexual Partners/contacts	341 (28%)	4,841 (14.2%)
No high risk behaviour	146 (12%)	5,321 (15.6%)

Of the 196 cases of IV Drug use reported since 1982, 89 (45%) were reported in the period 2008 - 2015. This notable increase in IDU in the last couple of years might reflect increased coverage among homeless drug users; as well it could indicate an important shift in the modes of transmission of HIV in Jamaica.

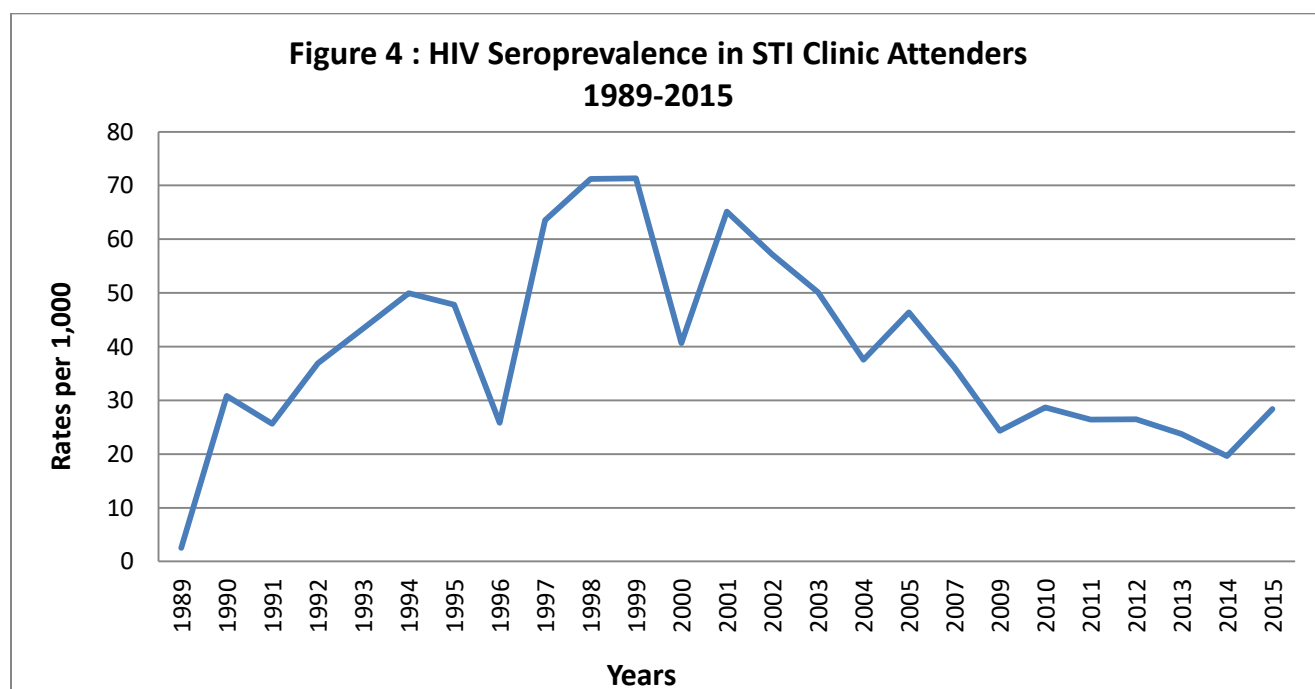
MOST AT RISK POPULATIONS

- Jamaica has features of both a generalized and concentrated HIV epidemic. The prevalence in the general population is estimated at 1.6%, however surveys show higher HIV prevalence in at-risk groups.
- Data from surveillance of STI clinic attendees in 2015 indicated that for every 1,000 persons with a sexually transmitted infection, approximately 28 were infected with HIV. Further, 68% of STI attendees tested in the sentinel surveillance were females – 2.03% of these females tested positive for HIV compared to 4.6% of male STI attendees.

Table 3: HIV Seroprevalence Rate Among STI Clinic Attendees by Parish 2015

PARISH	Total Tested	Total Positive	% Positive	(95% CI) exact
Kingston & St Andrew	1,241	49	3.95	2.94 – 5.19
Manchester	419	1	0.24	0.01 – 1.32
St Ann	626	8	1.28	0.55 – 2.50
St Catherine	974	32	3.29	2.26 – 4.61
St James	380	14	3.68	2.03 – 6.10
Westmoreland	381	10	2.62	1.27 – 4.77
TOTAL	4,021	114	2.84	2.34 – 3.40

*Survey conducted between April and September 2015



KEY POPULATIONS

- A 2014 survey of sex workers found that 2.9% of female sex workers were HIV infected.
- In 2011, a survey of 453 men who have sex with men (MSM) found that approximately 1 out of every 3 MSM was HIV infected.
- A 2006 survey of prison inmates indicated that approximately 3.3% of inmates are HIV positive.
- A 2014 survey among homeless drug users² identified that 12.9% were HIV positive.

ANNUAL ANTENATAL SURVEILLANCE

- In 2015, for every one thousand pregnant women attending public antenatal clinics, approximately 10 were HIV infected.

Between 1989 and 1996 the HIV prevalence among antenatal women increased from 0.14% to 1.96%. The prevalence has declined over the last 15 years, with the 2013 and 2014 prevalence rates remaining at 1% and below. This overall decline likely reflects the success of Behavior Change strategies among the general population.

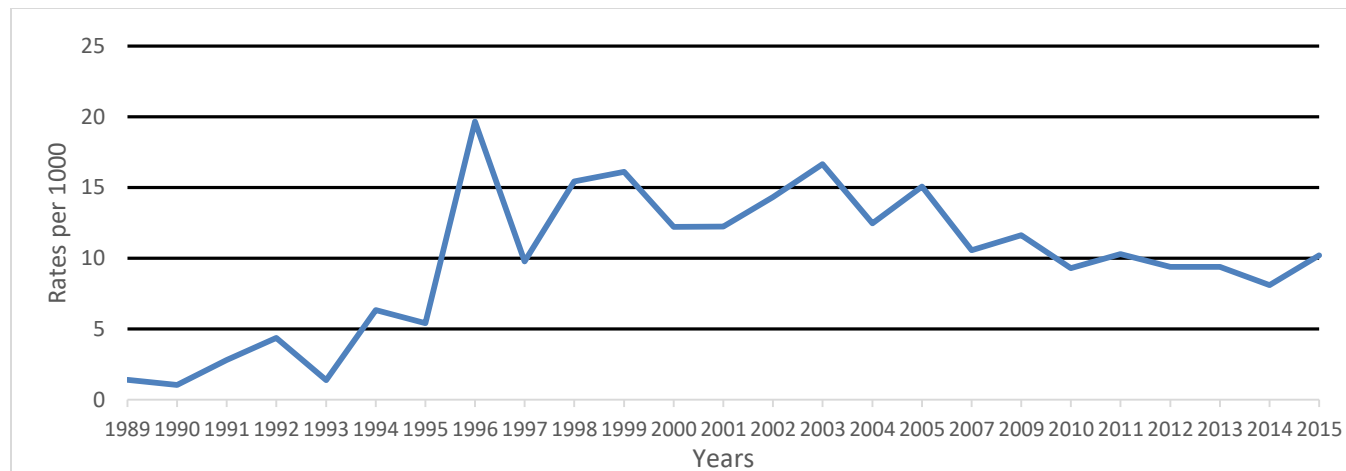
Table 3: HIV Seroprevalence Rate among ANC Attendees By Parish 2015

PARISH	Total Tested	Total Positive	% Positive	(95% CI) exact
Kingston & St Andrew	1,421	20	1.4	0.86 – 2.17
Manchester	588	3	0.5	0.11 – 1.48
St Ann	524	2	0.4	0.05 – 1.37
St Catherine	1,028	7	0.7	0.27 – 1.40
St James	418	12	2.9	1.49 – 4.96
Westmoreland	412	1	0.2	0.01 – 1.34
TOTAL	4,391	45	1.0	0.75 – 1.37

Source: Sentinel Surveillance, 2015

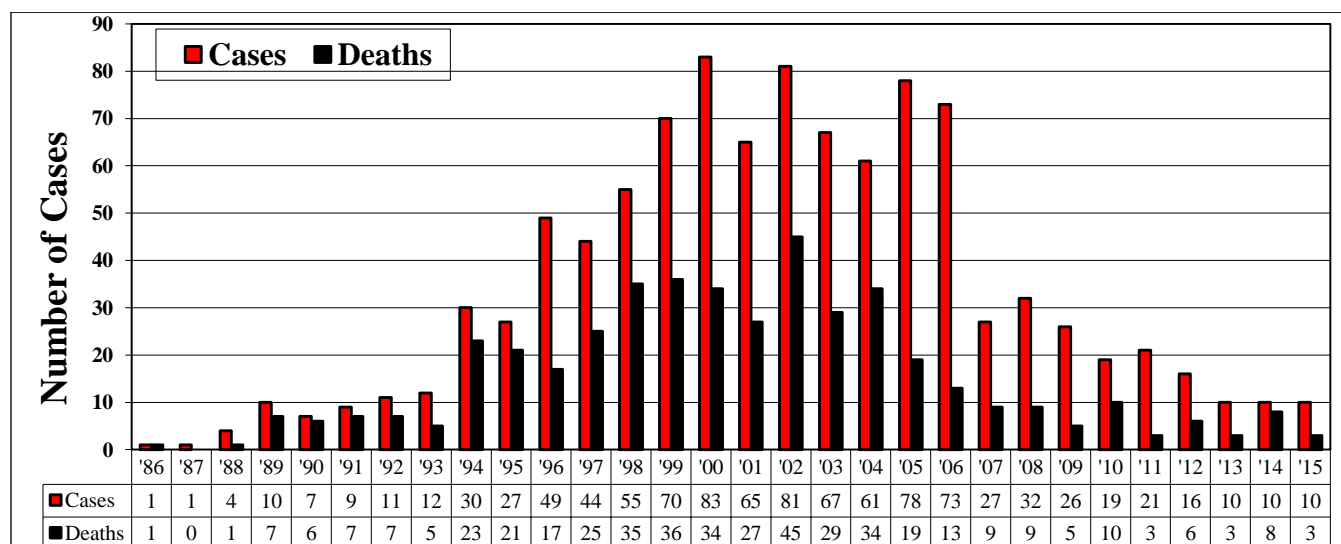
² Homeless drug users do not specifically refer to injecting drug use but rather, speaks to homeless persons that use any kind of drug. The increased risk behaviour is thus primarily sexual in nature rather than through needle-sharing.

Figure 10: HIV Case Rate in ANC attendees, 1989 – 2015



- In 2015, a total of 6 paediatric AIDS cases (children 0 to 9 years old) were reported compared to 76 paediatric AIDS cases in 2005. This significant decrease reflects the success of the pMTCT programme in reaching HIV-infected women.

Figure 11: Number of Paediatric AIDS Cases and Deaths reported annually, 1986 – 2015



Three (3) paediatric AIDS deaths were reported in 2015, compared to 34 in 2004. This represents a 90% decrease in the number of paediatric AIDS deaths over this period.

**FACTS AND FIGURES 2015
DATA TABLES**

TABLE 1: SUMMARY OF HIV CASES REPORTED BY YEAR AND SEX, 1982 TO 2015

YEAR	MALE (%)	FEMALE (%)	UNKNOWN (%)	TOTAL
1982 to 1995	2123 (63.8)	1171 (35.2)	34 (0.01)	3328
Jan – Dec 1996	577 (59.4)	390 (40.2)	4 (0.4)	971
Jan - Dec 1997	690 (61.5)	430 (38.3)	2 (0.2)	1122
Jan – Dec 1998	633 (59.5)	430 (40.4)	1 (0.1)	1064
Jan – Dec 1999	805 (56.1)	629 (43.8)	2 (0.1)	1436
Jan - Dec. 2000	824 (53.9)	706 (46.1)	0 (0.0)	1530
Jan - Dec. 2001	835 (50.1)	827 (49.6)	5 (0.3)	1667
Jan - Dec. 2002	737 (51.4)	695 (48.5)	1 (0.1)	1433
Jan –Dec 2003	840 (49.9)	844 (50.1)	1 (0.0)	1685
Jan – Dec 2004	860 (46.2)	1003 (53.8)	0 (0.0)	1863
Jan – Dec 2005	884 (45.6)	1053 (54.4)	0 (0.0)	1937
Jan - Dec 2006	1006 (47.4)	1114 (52.5)	1 (0.1)	2121
Jan - Dec 2007	930 (47.8)	1015 (52.1)	2 (0.1)	1947
Jan - Dec 2008	875 (46.8)	993 (53.2)	0 (0.0)	1868
Jan - Dec 2009	835 (48.0)	903 (52.0)	0 (0.0)	1738
Jan - Dec. 2010	803 (51.4)	759 (48.5)	0 (0.0)	1562
Jan – Dec 2011	901 (50.1)	896 (49.9)	0 (0.0)	1797
Jan – Dec 2012	803 (51.8)	748 (48.2)	0 (0.0)	1551
Jan – Dec 2013	677 (53.0%)	601 (47%)	0 (0.0)	1,278
Jan – Dec 2014	657 (50.7%)	638 (49.3%)	0 (0.0)	1,295
Jan – Dec 2015	609 (49.8%)	613 (50.2%)	0 (0.0)	1,222
Total	17,780 (52.1%)	16,293 (47.7%)	52 (0.2%)	34,125

TABLE 2: SUMMARY OF PERSONS WITH ADVANCED HIV* IN JAMAICA, 2005 to 2015

PERIOD	TOTAL	MALE (%)	FEMALE (%)
Cumulative 1982-2015	22,287	12,132 (54.5)	10,155 (45.5)
Jan – Dec 2005	1,333	692 (51.8)	641 (48.2)
Jan - Dec 2006	1,183	659 (55.6)	527 (44.4)
Jan - Dec 2007	1,090	590 (53.7)	508 (46.3)
Jan - Dec 2008	1,194	618 (51.6)	579 (48.4)
Jan - Dec 2009	1,477	704 (47.3)	785 (52.7)
Jan – Dec 2010	1,493	711 (47.3)	792 (52.7)
Jan – Dec 2011	1,245	661 (52.9)	589 (47.1)
Jan – Dec 2012	1,883	944 (50.0)	944 (50.0)
Jan – Dec 2013	778	423 (54.2)	357 (45.8)
Jan – Dec 2014	753	398 (52.9)	355 (47.1)
Jan – Dec 2015	686	349 (50.9)	337 (49.1)

*In July 2005, the national programme began monitoring cases of advanced HIV (i.e. persons with CD4 counts < 350). Figures reported for AIDS cases between July 2005 and December 2007 included persons with advanced HIV.

TABLE 3: SUMMARY OF AIDS CASES IN JAMAICA, 1982 to 2015

PERIOD	TOTAL	MALE (%)	FEMALE (%)
1982-1995	1,557	980 (62.9)	577 (37.1)
Jan – Dec 1996	490	306 (62.5)	184 (37.5)
Jan - Dec 1997	609	372 (61.1)	237 (38.9)
Jan – Dec 1998	643	410 (63.7)	233 (36.2)
Jan – Dec 1999	890	537 (60.4)	353 (39.5)
Jan - Dec. 2000	901	514 (57.0)	387 (43.0)
Jan - Dec. 2001	935	509 (54.4)	426 (45.6)
Jan - Dec. 2002	978	574 (58.6)	404 (41.4)
Jan –Dec 2003	1,059	602 (57.0)	457 (43.0)
Jan – Dec 2004	1,110	602 (54.2)	508 (45.8)
Jan – Dec 2005	1,333	692 (51.8)	641 (48.2)
Jan - Dec 2006	1,183	658 (55.6)	525 (44.4)
Jan - Dec 2007	777	441 (56.6)	336 (43.4)
Jan - Dec 2008	923	524 (56.7)	399 (43.2)
Jan - Dec 2009	906	492 (54.4)	414 (45.6)
Jan - Dec. 2010	930	497 (53.2)	433 (46.8)
Jan - Dec. 2011	973	541 (55.6)	432 (44.4)
Jan - Dec. 2012	1,194	631 (52.9)	563 (47.1)
Jan – Dec 2013	682	383 (56.2)	299 (43.8)
Jan – Dec 2014	539	311 (57.7)	228 (42.3)
Jan – Dec 2015	441	244 (55.3)	197 (44.7)
Total	19,053	10,820 (56.8)	8,223 (43.2)

**TABLE 4: SUMMARY OF HIV/AIDS CASES BY PARISH IN JAMAICA, 1982 – DEC 2015
(BY DATE OF REPORTING)**

PARISH	Jan - Dec 2015	1982 – Dec 2015 Cumulative Total	RATE PER 100,000 POPULATION
KINGSTON & ST. ANDREW	290	11,983	1,787.6
ST. THOMAS	22	548	576.7
PORTLAND	39	756	914.0
ST. MARY	35	1,153	1,002.9
ST. ANN	108	2,447	1,403.5
TRELAWNY	37	941	1,237.4
ST. JAMES	160	4,582	2,465.4
HANOVER	54	889	1,264.2
WESTMORELAND	113	1,931	1,324.9
ST. ELIZABETH	43	919	604.7
MANCHESTER	39	1,185	617.1
CLARENDON	99	1,783	719.2
ST. CATHERINE	167	4,679	896.9
PARISH NOT KNOWN	15	296	n/a
OVERSEAS ADDRESS	1	33	n/a
TOTAL	1,222	34,125	1,250.5

TABLE 5: SUMMARY OF AIDS CASES BY PARISH IN JAMAICA, 1982 -2015 (BY DATE OF REPORTING)

PARISH	Jan - Dec 2015	1982 – Dec 2015 Cumulative Total	RATE PER 100,000 POPULATION
Kingston & St Andrew	137	6,927	1,033.4
St Thomas	5	302	317.8
Portland	19	393	475.1
St Mary	14	611	531.5
St Ann	15	1,192	683.7
Trelawny	10	529	695.6
St James	60	2,816	1,515.2
Hanover	23	478	679.7
Westmoreland	38	1,131	776.0
St Elizabeth	13	507	333.6
Manchester	16	653	340.0
Clarendon	4	882	355.8
St Catherine	83	2,600	498.4
Parish Unknown	4	19	n/a
Overseas Address	0	13	n/a
<i>Total</i>	441	19,053	698.2

TABLE 6: SUMMARY OF AIDS DEATHS IN JAMAICA, 1982 – DEC 2015

PERIOD	TOTAL	MALE	(%)	FEMALE	(%)
1982 - Dec 2013	9,517	5,695	(59.8)	3,822	(40.2)
Jan – Dec 2000	617	358	(58.1)	259	(41.9)
Jan -Dec. 2001	587	329	(56.0)	258	(44.0)
Jan -Dec. 2002	690	405	(58.7)	285	(41.3)
Jan - Dec 2003	649	380	(58.6)	269	(41.4)
Jan - Dec 2004	663	376	(56.6)	287	(43.3)
Jan – Dec 2005	514	310	(60.3)	204	(39.7)
Jan – Dec 2006	432	262	(60.6)	170	(39.4)
Jan - Dec 2007	320	201	(62.8)	119	(37.2)
Jan - Dec 2008	400	236	(58.9)	164	(41.1)
Jan - Dec 2009	378	234	(61.9)	144	(38.1)
Jan – Dec 2010	332	197	(59.2)	135	(40.8)
Jan – Dec 2011	392	234	(59.5)	158	(40.5)
Jan – Dec 2012	259	155	(60.0)	104	(40.0)
Jan – Dec 2013	298	169	(56.7)	129	(43.3)
Jan – Dec 2014	219	122	(55.7)	99	(44.6)
Jan – Dec 2015	254	136	(53.5)	118	(56.7)

**TABLE 7: SUMMARY OF AIDS DEATH BY PARISH IN JAMAICA, 1982 – DEC 2015
(BY DATE OF REPORTING)**

PARISH	January - Dec 2015	1982 – Dec 2015 Cumulative Total
KINGSTON & ST. ANDREW	62	3,531
ST. THOMAS	3	119
PORTLAND	22	204
ST. MARY	8	359
ST. ANN	6	416
TRELAWNY	11	297
ST. JAMES	45	1,597
HANOVER	17	291
WESTMORELAND	25	652
ST. ELIZABETH	7	268
MANCHESTER	14	310
CLARENDON	1	268
ST. CATHERINE	32	1,185
PARISH NOT KNOWN	1	12
OVERSEAS ADDRESS	0	7
TOTAL	254	9,517

TABLE 8: SUMMARY OF PAEDIATRIC AIDS CASES (AGE 0 - 9 YEARS), 1986 – 2015

PERIOD	TOTAL	MALE	(%)	FEMALE	(%)
1986- Dec 2015	1,008	533	(53.3)	475	(46.7)
Jan- Dec 2000	84	50	(59.0)	34	(41.0)
Jan - Dec. 2001	64	37	(60.0)	27	(40.0)
Jan - Dec. 2002	81	37	(45.7)	44	(54.3)
Jan – Dec 2003	69	38	(53.7)	31	(46.3)
Jan-Dec 2004	61	29	(47.5)	32	(42.5)
Jan – Dec 2005	76	39	(53.8)	37	(46.2)
Jan – Dec 2006	76	40	(50.7)	36	(49.3)
Jan - Dec 2007	26	14	(51.9)	12	(48.1)
Jan - Dec 2008	33	19	(59.4)	14	(40.6)
Jan - Dec 2009	24	15	(65.4)	9	(34.6)
Jan – Dec 2010	19	10	(52.6)	9	(47.4)
Jan – Dec 2011	20	14	(71.4)	6	(28.6)
Jan – Dec 2012	19	10	(52.6)	9	(47.4)
Jan – Dec 2013	10	3	(30.0)	7	(70.0)
Jan – Dec 2014	10	4	(40.0)	6	(60.0)
Jan – Dec 2015	6	3	(50.0)	3	(50.0)

TABLE 9: SUMMARY OF PAEDIATRIC AIDS CASES BY PARISH IN JAMAICA (BY DATE OF REPORTING), 1986 – 2015

PARISH	Cumulative Total	RATE PER 100,000 POPULATION 2006 Est. STATIN 0-9 age group
KINGSTON & ST. ANDREW	409	308.1
ST. THOMAS	28	133.2
PORTLAND	16	89.7
ST. MARY	29	115.9
ST. ANN	36	96.8
TRELAWNY	18	110.2
ST. JAMES	137	349.4
HANOVER	17	114.0
WESTMORELAND	39	124.3
ST. ELIZABETH	26	83.9
MANCHESTER	40	101.0
CLARENDON	57	101.5
ST. CATHERINE	153	145.3
PARISH NOT KNOWN	2	n/a
OVERSEAS ADDRESS	1	n/a
TOTAL	1,008	177.6

TABLE 10: SUMMARY OF PAEDIATRIC AIDS DEATHS, 1986 -2015

PERIOD	TOTAL	MALE (%)	FEMALE (%)
1986 - Dec 2015	454	233 (51.4)	221 (48.6)
Jan – Dec 2000	34	20 (58.8)	14 (41.2)
Jan - Dec. 2001	27	14 (51.9)	13 (48.1)
Jan - Dec. 2002	45	22 (48.9)	23 (51.1)
Jan - Dec 2003	29	17 (58.6)	12 (41.4)
Jan - Dec 2004	34	17 (50.0)	17 (50.0)
Jan – Dec 2005	19	12 (63.2)	7 (36.8)
Jan – Dec 2006	13	11 (84.6)	2 (15.4)
Jan - Dec 2007	9	4 (44.4)	5 (55.6)
Jan - Dec 2008	9	4 (44.4)	5 (55.6)
Jan - Dec 2009	5	3 (60.0)	2 (40.0)
Jan – Dec 2010	10	8 (80.0)	2 (20.0)
Jan – Dec 2011	3	2 (66.7)	1 (33.3)
Jan – Dec 2012	7	4 (57.1)	3 (42.9)
Jan – Dec 2013	3	1 (33.3)	2 (66.6)
Jan – Dec 2014	8	4 (50.0)	4 (50.0)
Jan – Dec 2015	3	1 (33.3)	2 (66.6)

TABLE 11: SUMMARY OF AIDS CASES BY 5-YEAR AGE GROUPS, 1986 – DEC. 2015, JAMAICA

AGE GROUP	MALE	FEMALE	TOTAL
00 to 4	367	311	678
05 to 9	127	131	258
10 to 14	18	23	41
15 to 19	67	194	261
20 to 24	443	711	1,154
25 to 29	1,132	1,232	2,364
30 to 34	1,572	1,388	2,960
35 to 39	1,787	1,261	3,048
40 to 44	1,605	988	2,593
45 to 49	1,256	686	1,942
50 to 54	979	449	1,428
55 to 59	638	334	972
60 to 64	361	213	574
65 to 69	193	117	310
70 to 74	89	67	156
75 to 79	44	29	73
80 to 84	9	16	25
85 to 89	3	3	6
90 to 94	0	2	2
Unknown	130	78	208
<i>Total</i>	10,820	8,233	19,053

TABLE 12: ADULT HIV CASES BY SEXUAL PRACTICES (1982 – DEC 2015 CUMULATIVE)

Sex Practice Category	Male	Female	Unknown**	Total
Heterosexual	8,582	15,504	0	24,086
Homosexual	683	0	0	683
Bisexual Males	713	0	0	713
Not Stated	6,951	1	29	6,981
<i>Total</i>	16,929	15,505	29	32,463
Child	851	788	23	1,662
<i>Total</i>	17,780	16,293	52	34,125

**29 reported as Unknown Gender

TABLE 13: REPORTED RISK BEHAVIOURS AMONG ADULTS WITH HIV (1982 – DEC 2015 CUMULATIVE)
N=34,125

RISK	No. of Persons (%)
Sex with Sex workers	4,667 (14.4%)
Crack , Cocaine Use	1,357 (4.2%)
STI History	11,167 (34.4%)
IV Drug Use	196 (0.6%)
Multiple Sexual Partners/contacts	4,841 (13.1%)
No high risk behaviour	5,217 (16.8%)

TABLE 14: HIV STATUS OF PREGNANT WOMEN BY PARISH 2015*, JAMAICA

Parish	Total Tested	Total Positive	Percent Positive (95% C.I.)
Kingston & St Andrew	1,421	20	1.4 (0.86-2.17)
Manchester	588	3	0.5 (0.11-1.48)
St Ann	524	2	0.4 (0.05-1.37)
St Catherine	1,028	7	0.7 (0.53-3.02)
St James	418	12	2.9 (1.49-4.96)
Westmoreland	412	1	0.2 (0.01-1.34)
Total	4,391	45	1.00 (0.75-1.37)

*Survey conducted between April and September 2015

TABLE 15: HIV STATUS OF STI CLINIC ATTENDEES BY PARISH 2015*, JAMAICA

Parish	Total Tested	Total Positive	Percent Positive (95% C.I.)
Kingston & St Andrew	1,241	49	3.95 (2.94-5.19)
Manchester	419	1	0.24 (0.01-1.32)
St Ann	626	8	1.28 (0.55-2.50)
St Catherine	974	32	3.29 (2.26-4.61)
St James	380	14	3.68 (2.03-6.10)
Westmoreland	381	10	2.62 (1.27-4.77)
Total	4,021	114	2.84 (2.34-3.40)

*Survey conducted between April and September 2015

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Website www.nhpjamaica.org
Helpline telephone #s 967-3830, 967-3764
Toll free 1-888-991-4444