

# Jamaica Population Health Status Report

**1995 - 2023**

National Epidemiology Branch

Ministry of Health and Wellness, Jamaica 2025





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1995 - 2023

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# Foreword

Health is essential to human capital development and, therefore, key to national development and social well-being. The health sector has celebrated numerous successes in health and the prevention, management and control of diseases. Improvements in life expectancy and the decline in transmission of HIV from mother to child attest to the efforts of the people and the consistent policies of governments throughout time, however, challenges remain.

The Ministry of Health & Wellness is charged with the responsibility for the health of the people of Jamaica and is focused on developing and implementing national strategies for improving health, delivering effective quality health services, setting standards and regulations and carrying out essential public health functions while promoting inter-sectoral actions for health.

Our central challenge today is how to ensure that all Jamaicans, regardless of their socioeconomic condition, age, and gender, can be empowered to achieve their fullest potential in health, leaving no one behind. As a nation, bold decisions and choices have to be made in order to respond to the current health needs and safeguard future generations. A new paradigm to transform health and healthcare delivery is needed.

This Report, the Jamaica Population Health Status Report, examines the progress made in health over the last 25 years, 1995 - 2023. To provide an overview of the country's health status, a thoughtfully selected list of more than 100 indicators was used to highlight areas where the country is doing well or areas of health that need improvement. Additionally, it provides policymakers with valuable insights to make informed decisions, allocate resources efficiently, and design targeted interventions to enhance the health and well-being of the Jamaican populace.

The Ministry of Health & Wellness is committed to driving the necessary changes “to ensure the provision of quality health services and promote healthy lifestyles and environmental practices” to achieve our vision of “Healthy People, Healthy Environment.”

Dr. the Hon. Christopher Tufton, MP  
MINISTER OF HEALTH & WELLNESS



# Abbreviations

<b>AIDS</b>	Acquired Immunodeficiency Syndrome	<b>MMR</b>	Measles-Mumps-Rubella Vaccine
<b>ART</b>	Antiretroviral Therapy	<b>MSM</b>	Men who have sex with men
<b>BCG</b>	Bacille Calmette-Guérin Vaccine	<b>NCD</b>	Non-communicable Diseases
<b>BMI</b>	Body Mass Index	<b>NSU</b>	National Surveillance Unit
<b>CPS</b>	Contraceptive Prevalence Survey	<b>Polio</b>	Poliomyelitis
<b>DPT3</b>	Diphtheria Tetanus Toxoid and Pertussis Vaccine	<b>PLHIV</b>	People living with HIV
<b>DRE</b>	Digital Rectal Exam	<b>PPD</b>	Policy Planning and Development Division
<b>EPI</b>	Expanded Programme on Immunization	<b>PSA</b>	Prostate-Specific Antigen
<b>ESSJ</b>	Economic & Social Survey of Jamaica	<b>RGD</b>	Registrar General's Department
<b>GDP</b>	Gross Domestic Product	<b>SDG</b>	Sustainable Development Goals
<b>GKMA</b>	Greater Kingston Metropolitan Area	<b>STATIN</b>	Statistical Institute of Jamaica
<b>HPV</b>	Human Papillomavirus	<b>TB</b>	Tuberculosis
<b>ICD-10</b>	International Classification of Diseases	<b>UNAIDS</b>	Joint United Nations Programme on HIV/AIDS
<b>JSLC</b>	Jamaica Survey of Living Conditions	<b>VPD</b>	Vaccine-preventable diseases
<b>KMA</b>	Kingston Metropolitan Area	<b>WHO</b>	World Health Organization
<b>MOFPS</b>	Ministry of Finance and the Public Services		
<b>MOHW</b>	Ministry of Health & Wellness		



# Executive Summary

## Overview

The latest edition of the Jamaica Population Health Status Report examines the progress made in health over the last 29 years, 1995 - 2023. To provide an overview of the country's health status, a thoughtfully selected list of just over 100 indicators was used to highlight areas where the country is doing well or areas of health that need improvement. This will aid in evidence-based decision making as the indicators provide evidence of inequalities, gaps, and progress in health status.

## Selected Indicators

The selected indicators span various domains, including sociodemographics, health status, risk factors, service coverage, and health systems. The indicators were further grouped into specific health topics: mortality, fertility, demographics, nutrition, screening, and health financing.

## Data Sources

The data sources used to compile the data points for the indicators reported in this report vary. Most indicators were calculated using local data or extracted directly from surveys and technical reports.

## Key Findings

### Sociodemographic

Births in Jamaica have declined by more than 50% between 1995 and 2023, with the crude birth rate declining from 26.2 to 10.7 per 1,000 live births. This pattern is consistent with the decrease in the national fertility rate, the population under the age of 15 years and the total child dependency ratio.

### Health Status

The three leading causes of death in Jamaica in 2023 were diabetes mellitus, cerebrovascular diseases, and hypertensive disease. From 1995 to 2023, prostate cancer remained the leading cause of cancer-related deaths among men, while breast cancer was the leading cause of cancer-related deaths among women since 1997.

### Risk Factors

The percentage of women who exclusively breastfeed in Jamaica more than doubled from 15.2% to 33.0% between 2005 and 2022. Additionally, there was a notable decline in the number of children under five who are stunted, wasted, or underweight, reflecting positive trends in child nutrition and health between 1995 and 2018.

### Service Coverage

Between 2004 and 2023, the percentage of pregnant women receiving antiretroviral medication for Human Immunodeficiency Virus (HIV) more than doubled from 47.0% to 97.0%. In addition to this improvement, the incidence of HIV-infected infants has decreased from 0.3 per 1,000 live births in 2017 to 0.1 per 1,000 live births in 2023.

### Health Systems

The density of physicians, pharmacists, and dentists more than doubled between 1995 and 2022. In parallel, the frequency of outpatient visits to public hospitals rose from 1521.0 to 2179.9 per 10,000 population between 2000 and 2023.



# Executive Summary

## Navigating the Report

This report has five chapters based on the health domains listed, with each chapter further segmented into health topics, each having health indicators relevant to that topic. The chapters contain charts and infographics, which visually represent the data. Additionally, technical notes are included in each chapter to explain specific indicators. Definitions of each indicator, a Sustainable Development Goals progress report table, and datasheets are included at the end of the report.

## Challenges

In some instances, this report used secondary data sources from agencies outside the Ministry of Health and Wellness (MOHW). This document does not provide the methodologies used to calculate the indicators. Although we aimed to report on data from 1995 to 2023, not all indicators had data available for all years.

## Conclusion

Through this report, stakeholders can gain valuable insights into Jamaica's healthcare system, enabling them to make informed decisions, allocate resources effectively, and design targeted interventions to enhance the health and well-being of the Jamaican population.

# Introduction

Population health status refers to a group of people's overall health and well-being within a particular geographic area. It involves assessing and analysing various health indicators and outcomes to understand a population's health.<sup>1</sup>

The overarching goal of the Ministry of Health and Wellness is to achieve optimal health for all Jamaicans and eliminate health disparities.<sup>2</sup> Tracking historical trends in healthcare is essential to achieving this desired outcome for the Jamaican population. This process involves monitoring key health indicators such as birth rates, morbidity, health care financing, risk factors, life expectancy, etc., categorised into five health domains: health status, risk factors, service coverage, health system and sociodemographic.

Health status indicators such as mortality and fertility rates quantify health problems and define or monitor health priorities and goals.<sup>3,4</sup> A risk factor increases an individual's chances of developing a disease.<sup>5</sup> This includes indicators relating to nutrition, environment, behaviour, injuries and violence.<sup>4</sup> Service coverage indicators reflect priorities across the spectrum of health services including reproductive, maternal, newborn, child and adolescent etc.<sup>4</sup> Indicators that measure health systems assess the quality of health services and include indicators of health system inputs and outputs such as diagnostic activities, treatment, care and human resources.<sup>4</sup>

For this health report, over a hundred simple, practical, and relevant health indicators were selected across these five domains to highlight the health status of the Jamaican population from 1995 to 2023. Each health indicator in this report stands alone, but collectively, they provide insight into significant factors shaping our lives towards health. For instance, disaggregation of mortality

indicators by age and sex offer insights into how death rates vary among different age groups and between sexes within a population. These indicators are crucial in understanding health disparities and informing healthcare and public health policies. They reveal that certain age groups and sexes may be more vulnerable to specific health conditions and diseases, helping to effectively target interventions and allocate resources to improve overall population health and reduce inequalities.

This report is a valuable tool for narrowing health gaps in Jamaica and preventing illness among the most vulnerable.

This report aims to provide data on health indicators to offer Jamaicans a glimpse into our nation's health. Additionally, it provides policymakers with valuable insights to make informed decisions, allocate resources efficiently, and design targeted interventions to enhance the health and well-being of the Jamaican populace.

## References

1. Samet JM, Hussein S. Population health and population health metrics. *Population Health Metrics*. 2024;22(1). doi:<https://doi.org/10.1186/s12963-024-00339-9>
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# Sociodemographic

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This chapter provides evidence on health-related sociodemographic indicators that evaluate the progression of social and demographic factors influencing health. The topics covered in this chapter include:

## Demographics

- Total population
- Population <15 years
- Population > 65 years
- Annual population growth rate
- Dependency ratio
- Births
- Crude birth rate
- Death
- Crude death rate

## Socioeconomics

- Unemployment rate
- Annual GDP growth rate
- Inflation rate (annual average)
- GINI Index
- Prevalence of poverty

# Demographics

## Total Population

Jamaica's total population was 2,734,092 in 2019, compared to 2,656,669 in 2005 and 2,498,358 in 1995. This reflects a 9.4% increase in twenty-four years.<sup>1</sup>

## Population >65 years

While the younger population declined over the last two decades, the elderly population grew by 40.1% from 186,805 in 1995 to 261,750 in 2019.<sup>1</sup>

## Population <15 years

The child population (0 - 14 years) of Jamaica declined by 31.0 per cent between 1995 and 2019. In 2019, 576,738 (21.1%) of Jamaicans were aged 15 years and under compared to 784,601 (29.7%) in 2005 and 835,281 (33.6%) in 1995.<sup>1</sup>

## Urban Population

Data from the last census in 2011 shows that approximately 54.0% of the Jamaican population resided in urban areas.<sup>2</sup>

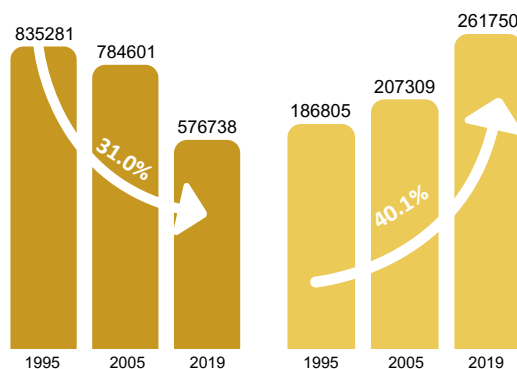
### Total Population in Jamaica, 1995 - 2019

Year	Total	Female	Male
1995	2498358	1270976	1227282
2000	2597080	1319015	1278065
2005	2656669	1347862	1308807
2010	2705827	1373074	1332752
2015	2719470	1373191	1346729
2019	2734092	1381983	1352109

### Comparison of Population <15 Years & >65 Years in Jamaica 1995 -2019

#### Population <15 Years

#### Population >65 Years



## Annual Population Growth Rate

Over the past two decades, Jamaica has experienced a decline in population growth. In 1995, the rate was 1.5%. This decreased to 0.7% in 1998 and has continued to decline, remaining below 0.0% since 2020.<sup>2</sup>

## Dependency Ratio

Dependency ratio measures the number of non-working-age persons dependent on the working-age population (ages 15 - 64). Jamaica's dependency ratio has fallen steadily from 75.4 per 100 working-age persons in 1995 to 47.2 in 2021.<sup>3</sup>

The dependency ratio can be broken down into two

components: the child dependency ratio and the elderly dependency ratio. The child dependency ratio reflects the number of children (ages 0 - 14) per 100 working-age persons, while the elderly dependency ratio indicates the number of people aged 65 and older per 100 working-age persons.<sup>3</sup>

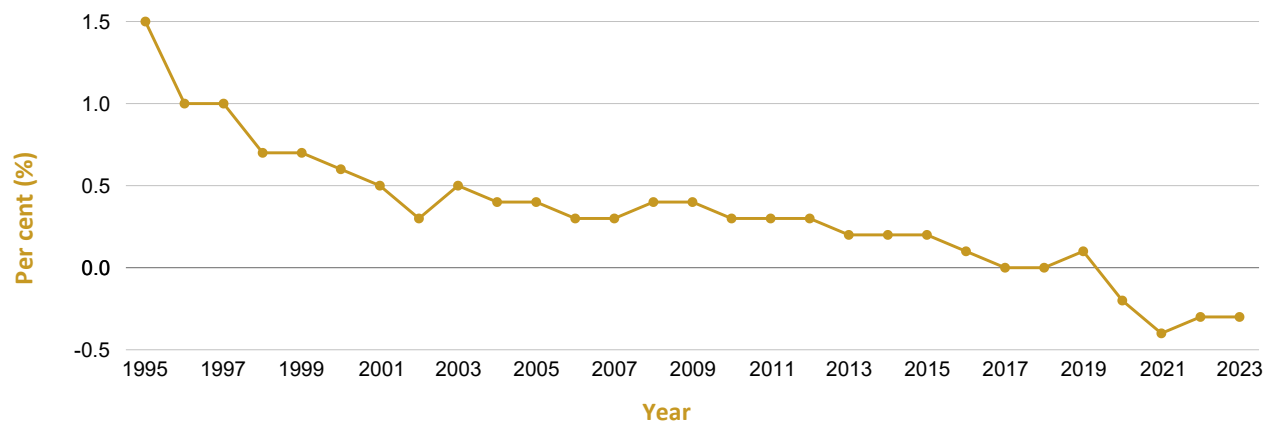
### Child Dependency

In 1995, for every 10 working-age adults, approximately 6 children were dependent on them. This declined to 5.5 children in 2005 and 3.2 children in 2021.<sup>3</sup>

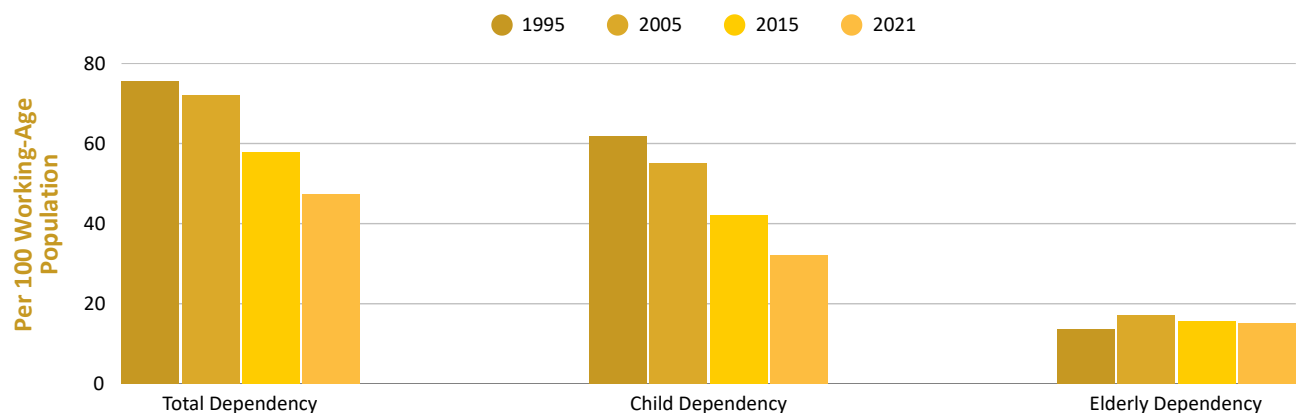
### Elderly Dependency

In 1995, the elderly dependency ratio was 13.5 per 100 working-age population. By 2021, it had increased to 15.1.<sup>3</sup>

### Annual Population Growth Rate in Jamaica, 1995 - 2023



### Dependency Ratio in Jamaica, 1995 - 2021



## Births

In 2023, there were 29,439 live births, a 54.7% decline from the 65,111 live births in 1995.<sup>1</sup>

## Deaths

Jamaica's total deaths rose from 15,365 in 1995 to 21,223 in 2023, reflecting a 38.2% increase compared to 1995.<sup>1</sup>

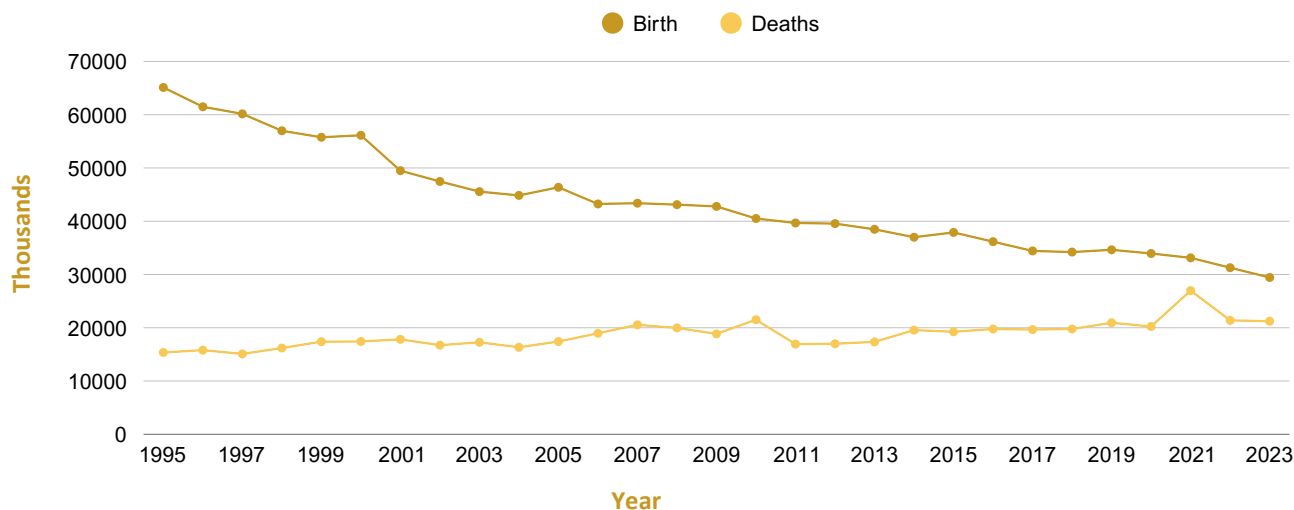
## Crude Birth Rate

In 1995, the crude birth rate was 26.2 per 1,000 population which decreased to 17.5 in 2005. Preliminary data shows that the crude birth rate for 2023 further declined to 10.7 per 1,000 population.<sup>4</sup>

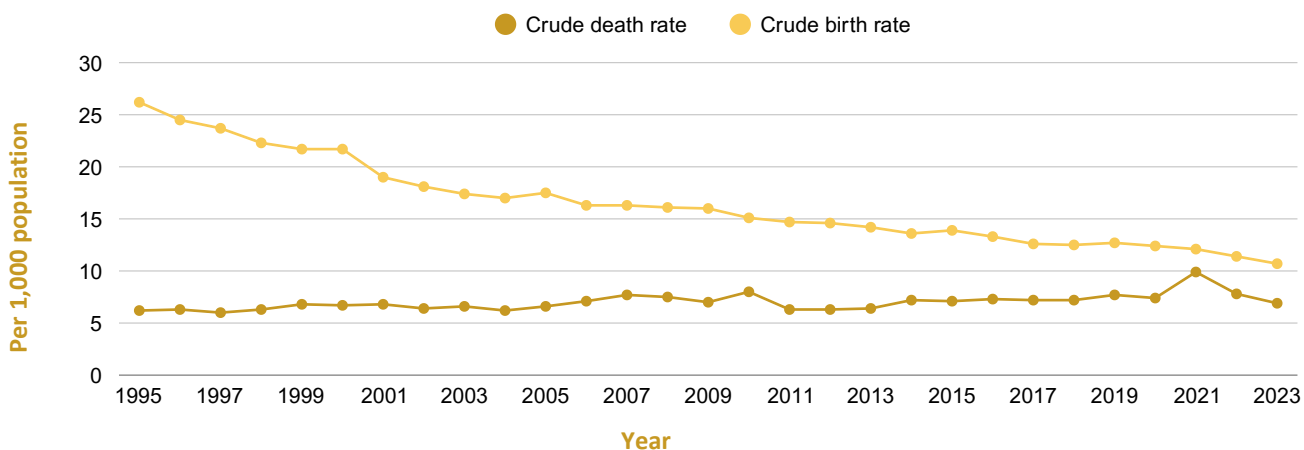
## Crude Death Rate

In 1995, Jamaica's crude death rate was 6.2 per 1,000 population, this increased (25.8%) to 6.9 deaths per 1,000 population in 2023. During this period, the highest crude death rate was in 2021 at 9.9 deaths per 1,000 population.<sup>4</sup>

### Births and Deaths in Jamaica, 1995 - 2023



### Crude Birth Rate and Crude Death Rate in Jamaica, 1995 - 2023







# Socioeconomics

## Unemployment Rate

The unemployment rate is linked to Sustainable Development Goal (SDG) 8, which aims to promote continuous, inclusive, and sustainable economic growth, as well as full and productive employment, and decent work for everyone by 2030.<sup>5</sup>

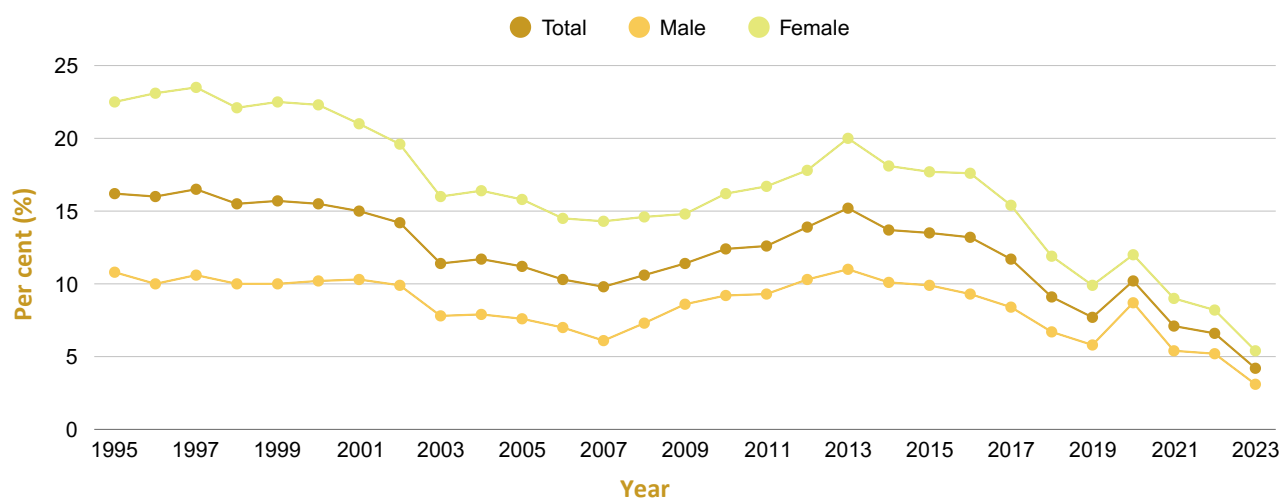
In 1995, the unemployment rate was 16.2%, which decreased to 15.5% in 2000. By 2010, it decreased to 12.4%, further decreasing to 4.2% in 2023. The unemployment rate was higher among females

(1995; 22.5%, 2023; 5.4%) than males (1995; 10.8%, 2023; 3.1%). In 2022, Jamaica's youth unemployment rate was 16.7% compared to 33.0% in 2001.<sup>2</sup>

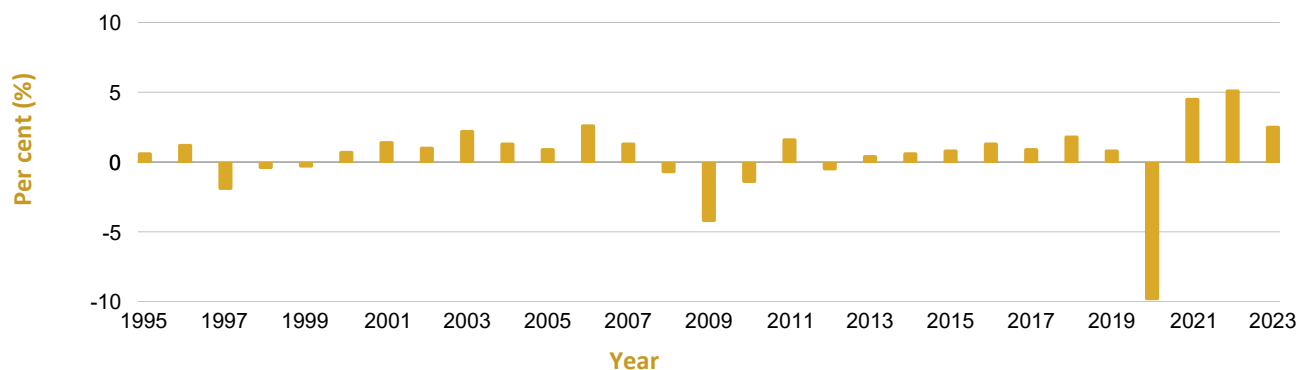
## Annual GDP Growth Rate

Jamaica's gross domestic product (GDP)<sup>1,2</sup> increased from 0.7% in 1995 to 2.6% in 2023. The annual GDP growth rate is a SDG target (8.1), which aims for sustained economic growth of at least 7% GDP annually in developing countries.<sup>5</sup>

### Unemployment Rates in Jamaica, 1995 - 2023



### Annual GDP Growth Rate in Jamaica, 1995 - 2023



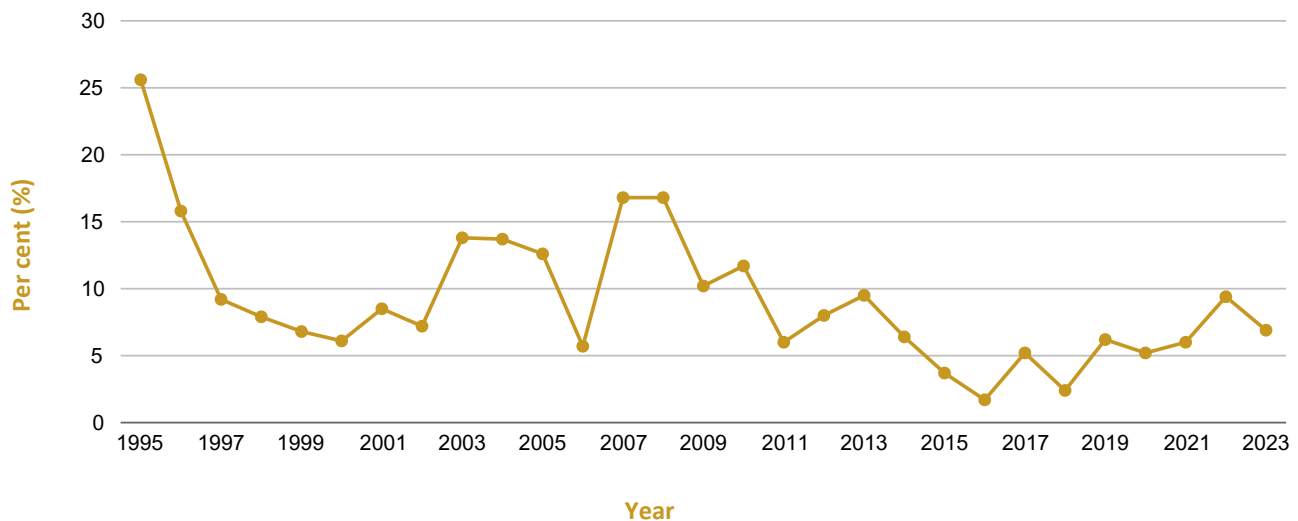
## Inflation Rate (Annual Average)

Inflation is the rate of increase in prices over a given period. Jamaica experienced an average annual inflation rate of 25.6% in 1995, which decreased to 12.6% by 2005. The rate had further declined to 6.9% by 2023. The year with the lowest inflation rate was 2016 at 1.7%.<sup>6</sup>

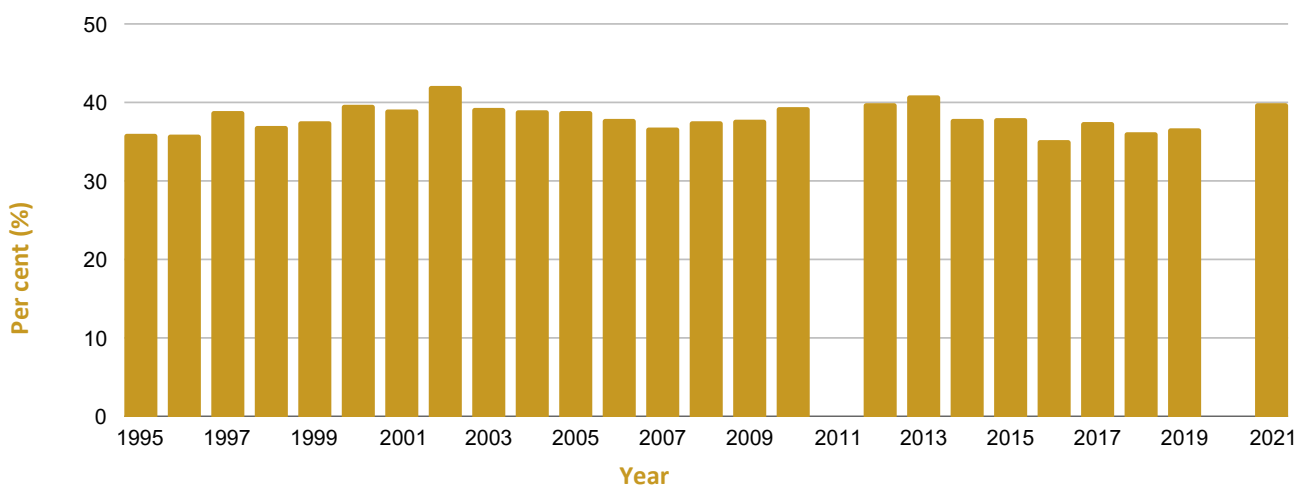
## GINI Index

The GINI index assesses economic disparities within a population, with zero indicating perfect equality and 100 indicating perfect inequality.<sup>7</sup> Jamaica has consistently worked towards keeping a relatively stable GINI index, with reported figures of 36.0% in 1995, 38.9% in 2005, and 39.9% in 2021.<sup>1,3</sup>

### Inflation Rates in Jamaica, 1995 - 2023



### GINI Index in Jamaica, 1995 - 2021

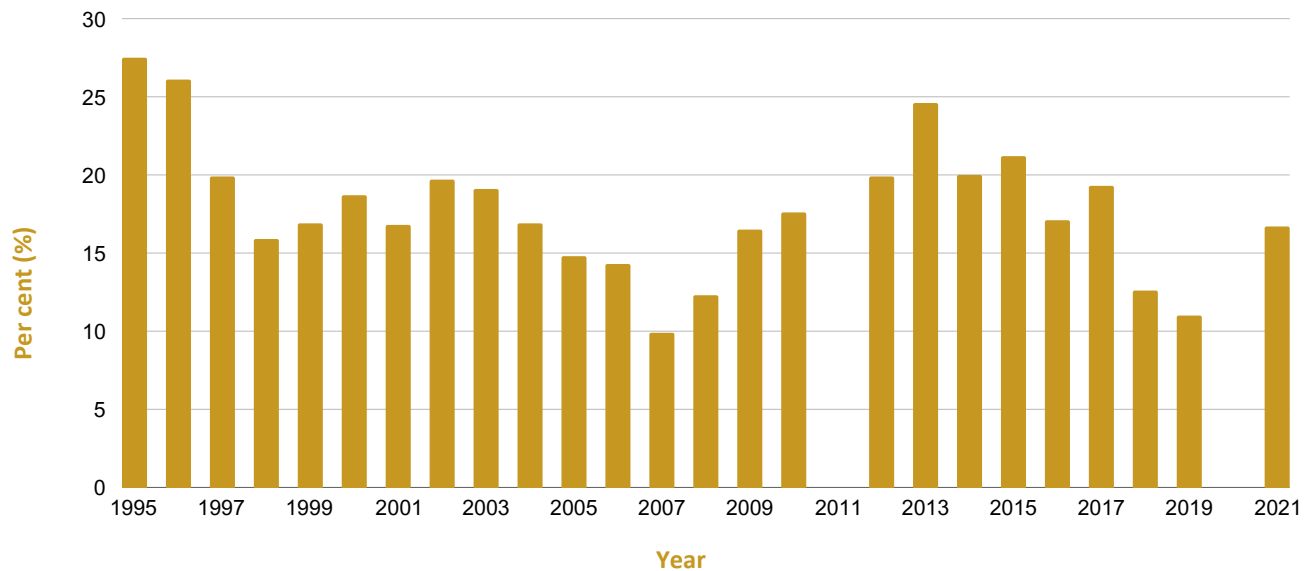


## Prevalence of Poverty

In 1995, the prevalence of poverty was 27.5%, which decreased to 16.7% in 2021. The lowest recorded prevalence of poverty occurred in 2007, at 9.9%.<sup>3</sup>

This reduction in poverty from 2015 to 2021 demonstrates progress in achieving the SDG target 1.2, which aims to reduce poverty worldwide by 2030.<sup>5</sup>

### Prevalence of Poverty in Jamaica, 1995 - 2021



## Technical Notes

### Total Population Estimates:

At the time of the publication of this report, the 2019 population estimates were the latest available data produced by the Statistical Institute of Jamaica (STATIN). Therefore, indicators that were calculated for years beyond 2019 were done using the 2019 mid-year population estimates.

### Population <15 years and Population ≥ 65 years:

Calculated using the mid-year population estimates.

### Total Births and Total Deaths:

a) The 1995 to 1999 values are the total number of births and deaths registered in those years. This number may include births and deaths that occurred in other years and may not include all the births and deaths that occurred in the reporting year.

### Crude Birth Rate and Crude Death Rate:

(a) 1995-1999- These estimates were calculated using the total births (registered) and total deaths (registered) divided by the total mid-year population. Births registered and deaths registered may be overestimated or underestimated, as the numbers may include births and deaths from different years or may not include all the births and deaths that occurred in the reporting year. (b) 2000-2023 estimates were calculated using total births (occurring) and deaths (occurring) data which were obtained from the STATIN. The Statistical Institute of Jamaica is the official data reporting agency for births and deaths data. This data is adjusted for under coverage and may differ from those published by the Registrar General's Department (RGD). (c) The 2023 crude birth rate and crude death rate estimates are preliminary and are therefore subject to change.

### Annual GDP Growth:

The data sources for these estimates are the Economic and Social Survey Jamaica (ESSJ) and STATIN. Notes from ESSJ regarding the 2021 and 2022 estimates state, "Due to the unavailability of real GDP data at the time of writing, Total Gross Value Added in Basic Values at Constant Prices is used as a proxy for real GDP".

### Inflation (Annual Average):

The annual average inflation rate has been revised and updated with values published by the Bank of Jamaica.

### Poverty Incidence:

Poverty incidence data was obtained from the Jamaica Survey of Living Conditions (JSLC); the survey was not done in 2011 or 2020. In the older publications, the region was disaggregated into the following: Kingston Metropolitan Area (KMA), Other Urban, and Rural, while in the latest publications, the region is disaggregated into: Greater Kingston Metropolitan Area (GKMA), Other Urban, and Rural.

## Data Sources

1. Statistical Institute of Jamaica
2. Economic & Social Survey Jamaica (1990-2022)
3. Jamaica Survey of Living Conditions (1991 - 2021)
4. Registrar General's Department (1995-1999) (Numerator), Statistical Institute of Jamaica (Denominator); Statistical Institute of Jamaica (2000-2022) (Numerator), Statistical Institute of Jamaica (Denominator)
5. United Nations, Sustainable Development Goals
6. Bank of Jamaica
7. The World Bank





# Health Status

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Health status indicators are primarily mortality and morbidity indicators. These indicators quantify health problems and define or monitor health priorities and goals. They measure prevalence and incidence and are a good source of cause-of-death information. The topics covered in this chapter include:

## Fertility

- Total Fertility Rate
- Adolescent Birth Rate

## Mortality by Age and Sex

- Life Expectancy
- Infant Mortality Rate
- Under-five Mortality Rate
- Stillbirth Rate
- Neonatal Mortality Rate

## Mortality by Cause

- Deaths from Communicable Diseases, Maternal, Perinatal & Nutritional Conditions
- Respiratory Disease Mortality Rate
- Maternal Mortality Ratio
- Cancer Mortality Rate
- AIDS-related Mortality Ratio
- Prostate Cancer Mortality Rate
- TB Mortality Ratio
- Breast Cancer Mortality Rate
- Deaths from Non-Communicable Disease
- Cervical Cancer Mortality Rate
- Premature Non-Communicable Disease Mortality
- Colorectal Cancer Mortality Rate
- Diabetes Mellitus Disease Mortality Rate
- Corpus Uteri Cancer Mortality Rate
- Cerebrovascular Diseases Mortality Rate
- Number of Deaths, Missing Persons and Persons Affected by Disaster
- Hypertensive Disease Mortality Rate
- Mortality from Unintentional Poisoning
- Ischaemic Heart Disease Mortality Rate
- Deaths from Injuries
- Death Rate Due to Traffic Injuries

## Morbidity

- New Cases of Vaccine-Preventable Diseases
- TB Incidence Rate
- HIV Prevalence Rate
- Cancer Incidence by Type of Cancer
- HIV Incidence Rate



# Fertility

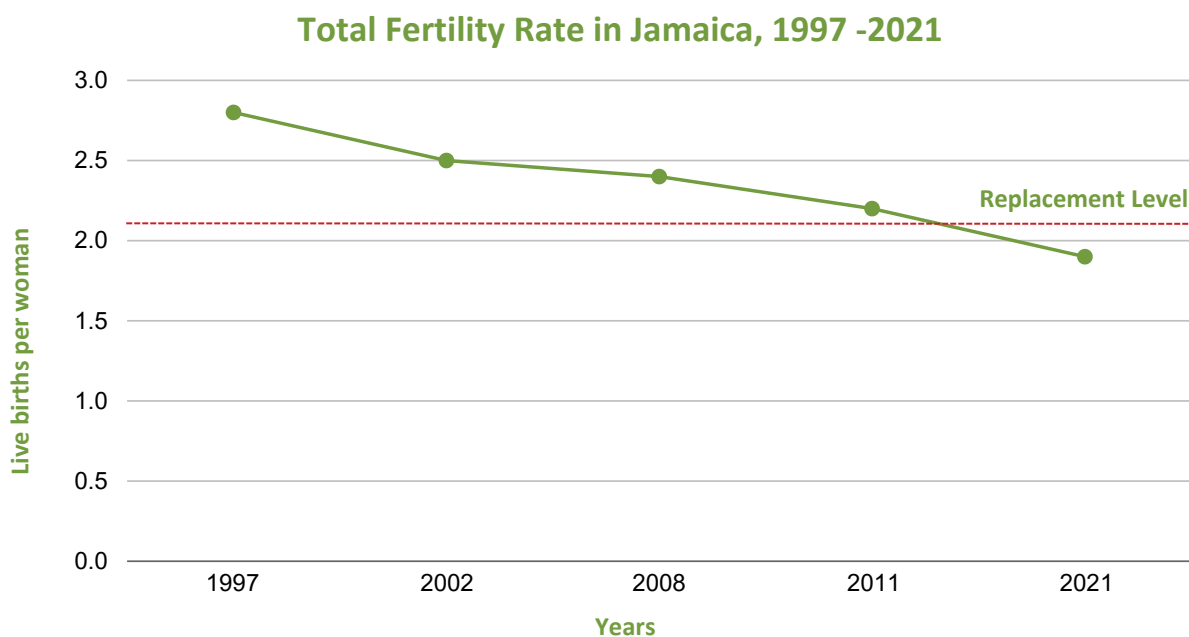
## Total Fertility Rate

In 1997, Jamaican women had on average three children. By 2002, that number had decreased to 2.5 children, declining to 1.9 in 2021.<sup>1,2,3</sup> This is below the fertility replacement level of 2.1 children per woman.<sup>4</sup>

## Adolescent Birth Rate

The adolescent birth rate is a key indicator for achieving SDG target 3.7, which aims to provide everyone with access to sexual and reproductive health services.<sup>5</sup>

In 2021, the adolescent (15-19 years) birth rate in Jamaica was 34 births per 1,000 girls. This is a decline from 79 births in 2002 and 112 births in 1997.<sup>1,2,3</sup>



# Mortality by Age and Sex

## Life Expectancy at Birth

In 2023, Jamaicans lived an average of 74.2 years, marking an increase of two years from the 1995 average of 72.2 years.<sup>6</sup>

## Child Mortality Rate

The SDG target 3.2 aims to end preventable deaths among newborns and children under five years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-five mortality to at least as low as 25 per 1,000 live births.<sup>5</sup>

### Under-five Mortality Rate

In 1996, Jamaica's under-five mortality rate was 12.1 per 1,000 live births. This increased to 21.0 per 1,000 live births in 2022.<sup>7</sup> However, Jamaica

has managed to remain below the SDG target of 25 deaths per 1,000 live births since 2015.<sup>6</sup>

### Neonatal Mortality Rate

In 1996, Jamaica had a neonatal mortality rate of 5.3 per 1,000 live births. Over the last two decades, this rate increased, reaching 15.7 per 1,000 live births as of 2022.<sup>6,7</sup>

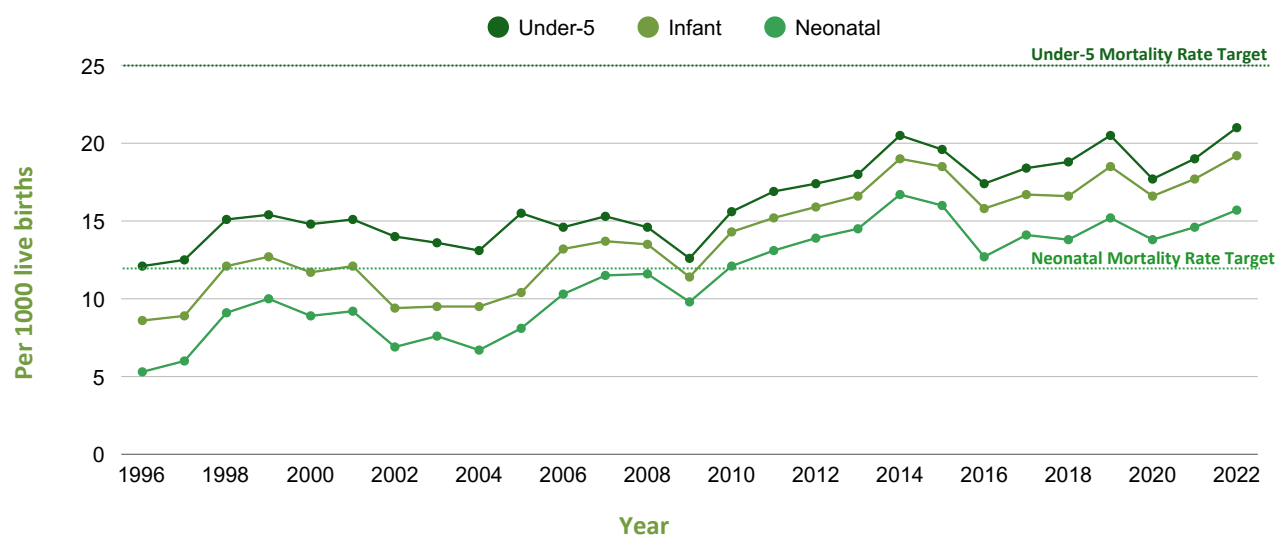
### Infant Mortality Rate

Jamaica's infant mortality rate increased from 8.6 per 1,000 live births in 1998 to 19.2 per 1,000 live births in 2022.<sup>6</sup>

## Stillbirth Rate

In 2023, the stillbirth rate in Jamaica was 14.7 per 1,000 live births, compared to 14.6 per 1,000 live births in 1998.<sup>8</sup>

## Child Mortality Rate in Jamaica, 1996 - 2022





# Mortality by Cause

## Deaths from Communicable Disease, Maternal, Perinatal & Nutritional Conditions

The proportion of deaths resulting from communicable diseases (including influenza, HIV, TB and dengue), maternal, perinatal and nutritional conditions declined between 2006 and 2020. The percentage of deaths decreased from 11.2% in 2006 to 9.9% in 2018 and increased to 14.6% in 2022. In 2023, the percentage of deaths decreased to 10.3%.<sup>7</sup>

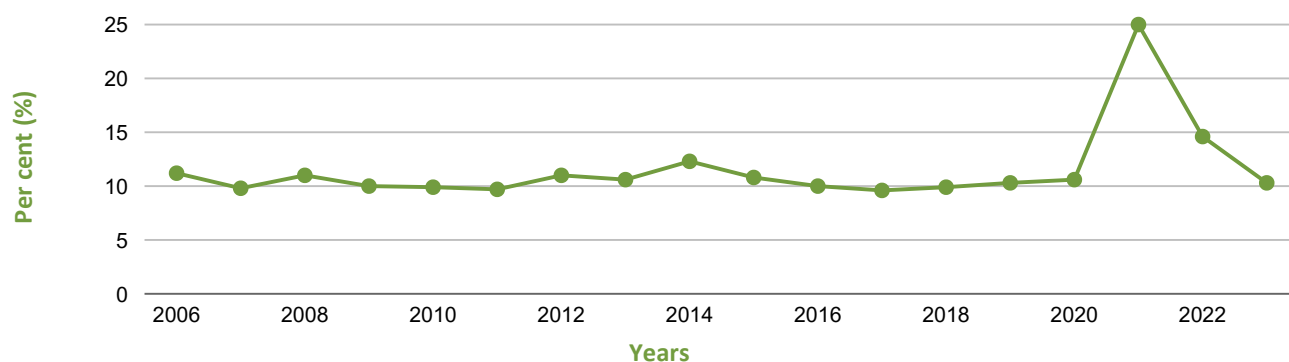
In 2021, the percentage of deaths due to communicable, maternal, and perinatal diseases increased to 25.0%, possibly due to the emergence and spread of diseases primarily COVID-19 and possibly dengue.<sup>7</sup>

## Maternal Mortality Ratio

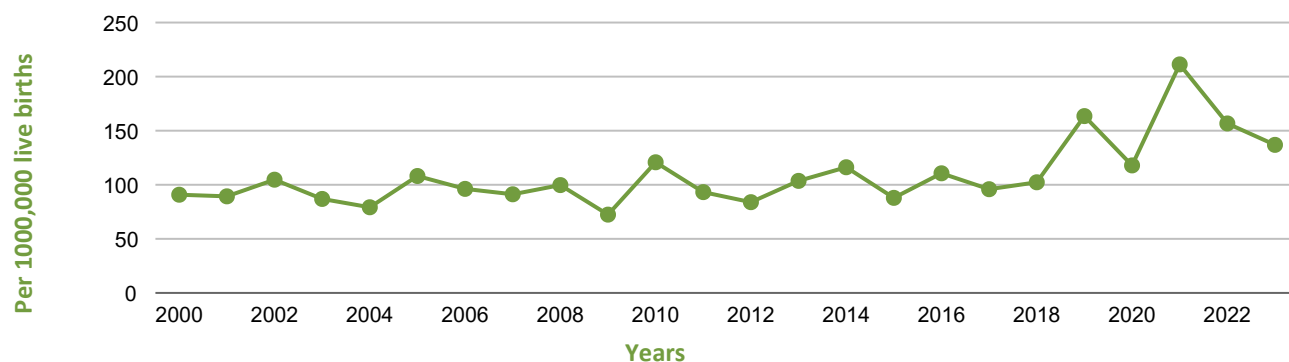
SDG target 3.1 aims to decrease global maternal mortality to 70 per 100,000 live births by 2030.<sup>4</sup> Over the past two decades, Jamaica has not achieved a maternal mortality rate below 70 per 100,000 live births. The closest figure was recorded in 2009 at 72 per 100,000 live births.<sup>9</sup>

Since 2016, Jamaica's maternal mortality ratio has exceeded 100 per 100,000 live births, peaking at 211.3 in 2021 due to the impact of the COVID-19 pandemic. By 2023, the preliminary data for maternal mortality ratio decreased to 136.9 per 100,000 live births.<sup>9</sup>

### Deaths from Communicable Diseases, Maternal, Perinatal & Nutritional Conditions in Jamaica, 2006 - 2022



### Maternal Mortality Ratio in Jamaica, 2000 - 2022





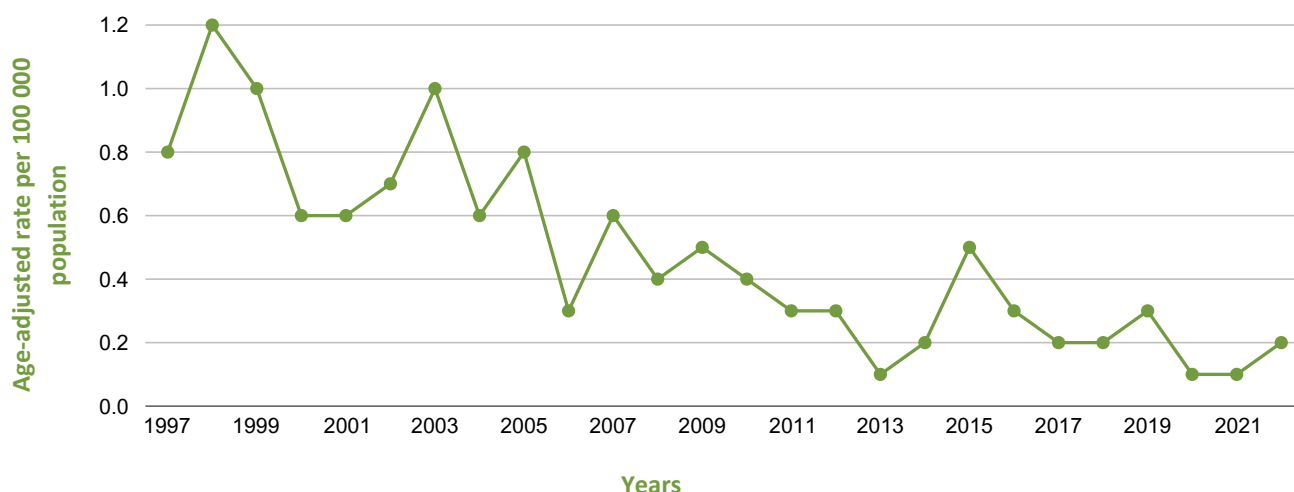
## AIDS-related Mortality Ratio

Acquired immunodeficiency syndrome (AIDS) is the late stage of the HIV infection that attacks the body's immune system. Between 1982 and 2022, there were 40,929 cases of HIV reported to the national surveillance programme, including 13,604 deaths (due to HIV-related and unrelated causes). The mortality rate from AIDS was 10.4 per 100,000 population in 2021 compared to 10.8 per 100,000 population in 1995.<sup>10</sup>

## TB Mortality Ratio

The tuberculosis (TB) mortality ratio declined from 0.8 per 100,000 people in 1997 to 0.2 in 2022. In that year (2022), data from RGD showed that six deaths were attributed to TB in Jamaica compared to 17 in 1997.<sup>7</sup>

**TB Mortality Rate in Jamaica, 1997 - 2021**



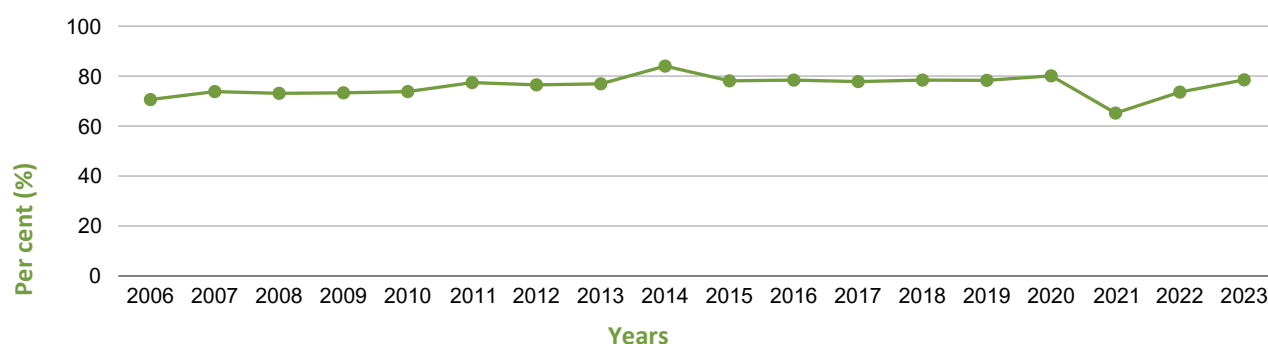
## Deaths from Non-Communicable Diseases

Non-communicable diseases (NCDs) such as diabetes and cardiovascular diseases are the leading causes of death in Jamaica. In 2023, the proportion of all deaths attributed to NCDs was 78.5%. This equates to 17,180 (males, 8,842; females, 8,338) Jamaicans dying that year from NCDs. Although the total number of deaths from NCDs was higher in males than females, proportionately more of the female deaths (86.2%) than male deaths (72.3%) in 2023 were due to NCDs.<sup>7</sup>

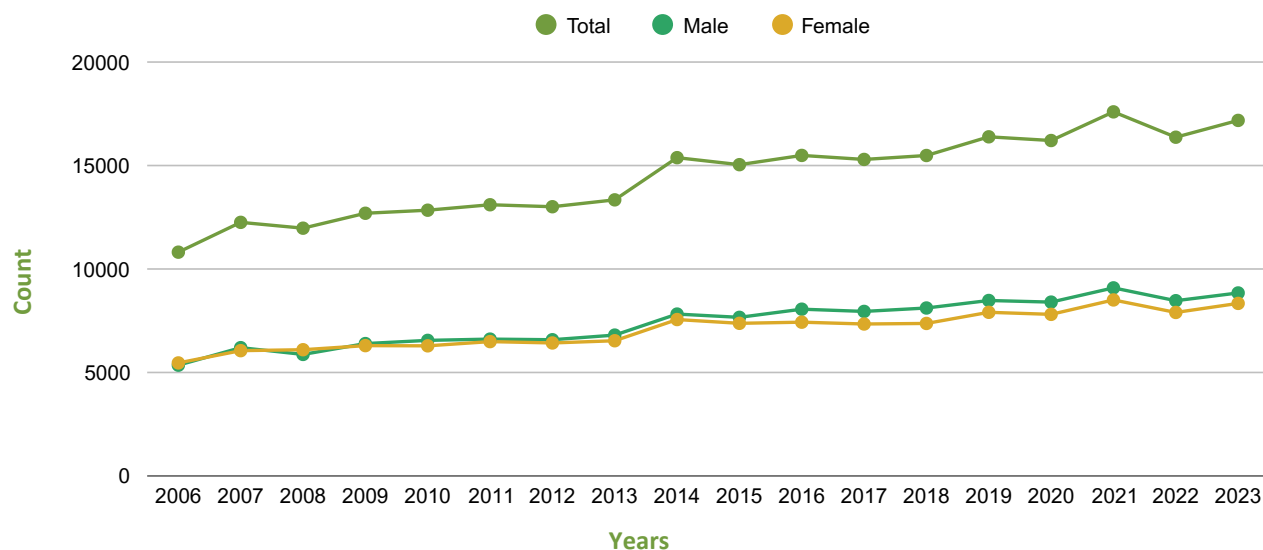
## Premature Non-Communicable Disease Mortality

The SDG target 3.4, aims to reduce by one-third premature mortality from non-communicable diseases by 2030 through prevention and treatment and promotion of mental health and well-being.<sup>5</sup> In 2022, the probability of a 30-year-old Jamaican dying before reaching their 70th birthday from cardiovascular diseases, cancers, diabetes, or chronic respiratory diseases was 20.0%. This figure represents a slight increase from 19.7% in 1997.<sup>7</sup>

### Deaths from Non-Communicable Disease as a Per cent of all Deaths in Jamaica, 2006 - 2022



### Deaths from Non-Communicable Disease in Jamaica, 2006 - 2022



## Diabetes Mellitus Disease Mortality Rate

Diabetes mellitus was ranked as the leading cause of death among Jamaicans in 2023. In 2023, diabetes mellitus accounted for 79.9 deaths per 100,000 population, this represents an increase from 1996, when the mortality rate was 60.2 per 100,000 population.<sup>7</sup>

Deaths from diabetes mellitus between 1996 and 2023 have been higher in Jamaican females than males. In 2023, there were 87.4 deaths per 100,000 population among females and 70.8 among males attributed to diabetes.<sup>7</sup>

## Cerebrovascular Diseases Mortality Rate

Cerebrovascular diseases for example, stroke was the second leading cause of death in 2023, with a mortality rate of 78.2 deaths per 100,000 population. This represents a decline from 84.7 deaths per 100,000 population in 1996.<sup>7</sup>

Throughout the period from 1997 to 2023, mortality rates from these diseases were consistently higher in males than in females.<sup>7</sup>

# Diabetes Mellitus



# #1

**Leading cause of death in  
Jamaica in 2022**





## Hypertensive Disease Mortality Rate

Hypertensive disease became the third leading cause of death in Jamaica in 2023. In 1996, 37.0 per 100,000 population died as a result of hypertensive disease, this increased to 52.1 per 100,000 population in 2023.

Between 1996 and 2023, male and female deaths from hypertensive diseases increased by 45.7% and 37.1% respectively.<sup>7</sup>

## Ischaemic Heart Disease Mortality Rate

In 1996, 39.9 people in every 100,000 Jamaicans died from ischaemic heart disease such as heart attack, compared to 47.5 in 2023. Throughout the period, the number of deaths from ischaemic heart disease was consistently higher in males than in females.<sup>7</sup>

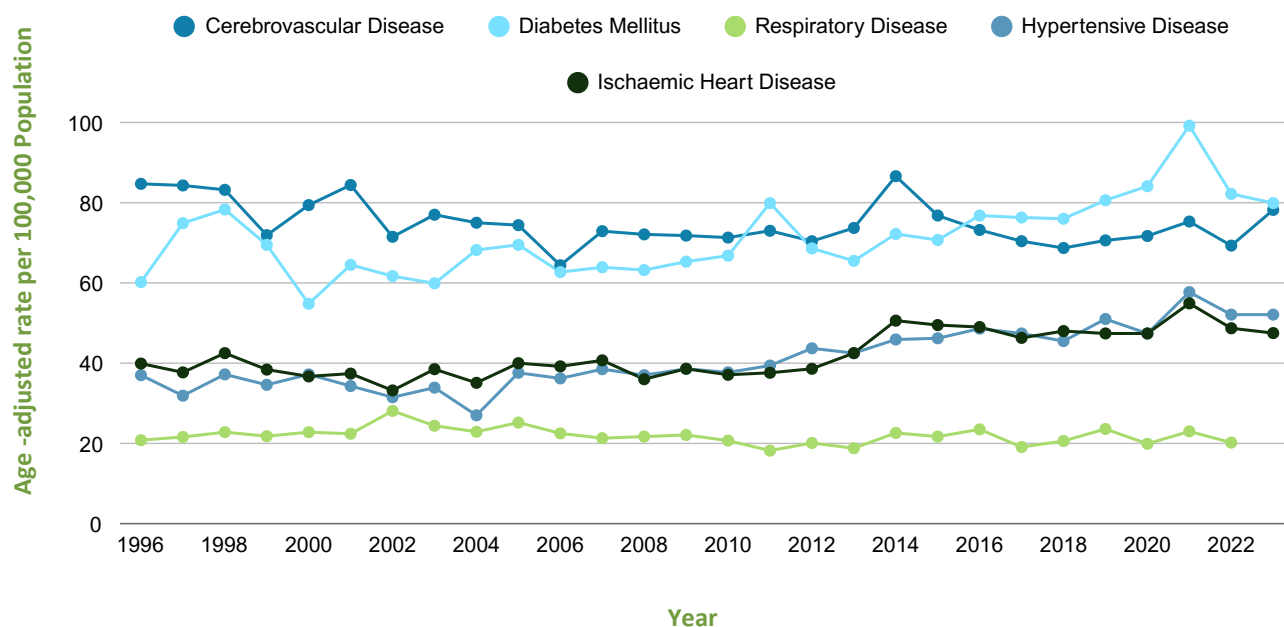
## Respiratory Disease Mortality Rate

Deaths from respiratory diseases fluctuated from 1996 to 2022. In 1996, the mortality rate was 20.8 per 100,000 population; 23.0 in 2021, and 20.2 per 100,000 population in 2022. Throughout the period, more males died from respiratory diseases than females.<sup>7</sup>

## Cancer Mortality Rate

Deaths from cancer in Jamaica increased from 109.3 per 100,000 in 1996 to 134.5 per 100,000 in 2023. In 2023, the cancer mortality rate among men was 147.3 per 100,000 population, compared to 124.9 per 100,000 population among women.<sup>7</sup>

## Top Five Non-Communicable Disease Age Standardized Mortality Rate in Jamaica, 1996 - 2023



## Prostate Cancer Mortality Rate

In 2023, prostate cancer was the seventh leading cause of death for Jamaican men and continued to be the top cause of cancer-related deaths.<sup>7</sup>

In 2023, 46.3 men per 100,000 population (716 deaths) died from prostate cancer. This represents a 31.5% increase from 35.2 per 100,000 population in 1996.<sup>7</sup>

## Breast Cancer Mortality Rate

Breast cancer is the leading cause of death due to cancer in Jamaican women. Between 1996 and 2023 there was an increase in breast cancer deaths. In 2023, 299 women died from breast cancer. This equates to 32.3 deaths per 100,000 women compared to 17.0 deaths per 100,000 women in 1996.<sup>7</sup>

## Cervical Cancer Mortality Rate

In 2023, there were 175 deaths due to cervical cancer. There was a general decline in cervical cancer deaths between 1996 (18.0 deaths per 100,000) and 2023 (11.6 deaths per 100,000 women).<sup>7</sup>

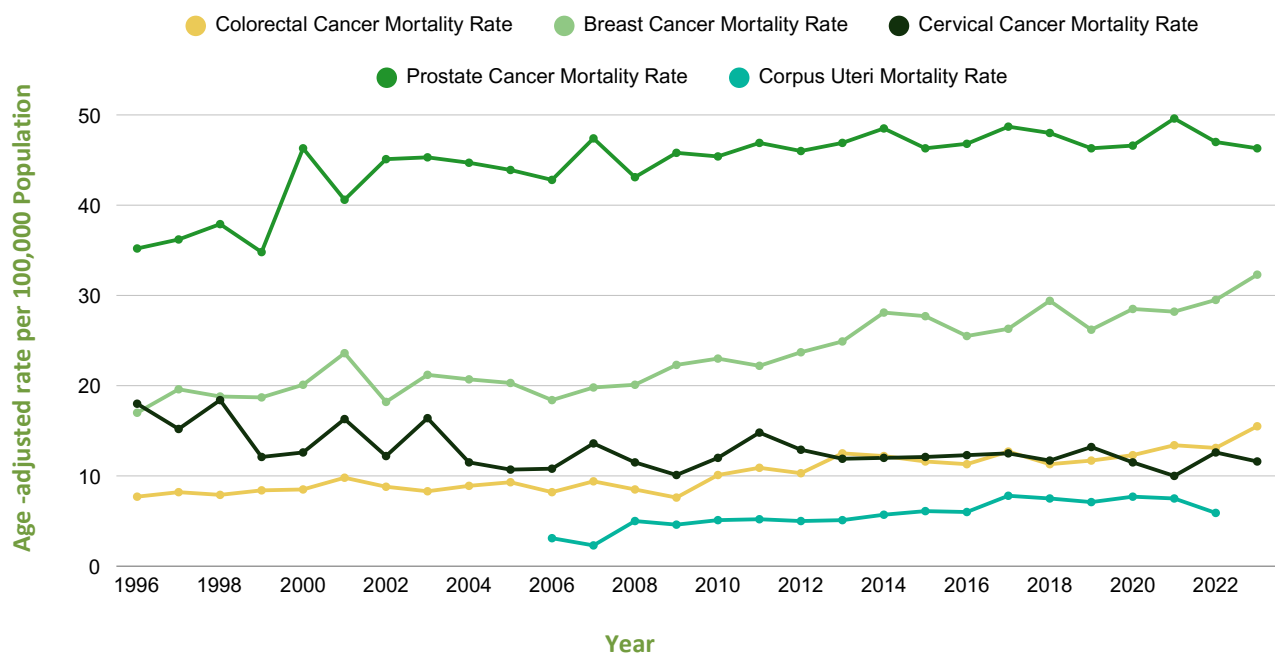
## Colorectal Cancer Mortality Rate

Colorectal cancer, commonly referred to as colon cancer, affects both men and women. In 1996, in every 100,000 Jamaicans, 7.7 people died from colon cancer, which increased to 15.5 in 2023. This equates to 480 deaths from colon cancer in 2023.<sup>7</sup>

## Corpus Uteri Cancer Mortality Rate

Endometrial cancer, which affects the lining of the uterus, resulted in 96 deaths in 2022. This equates to 5.9 deaths per 100,000 Jamaican women, an increase from 3.1 per 100,000 women in 2006.<sup>7</sup>

## Cancer Mortality Rate in Jamaica, 1996 - 2023



## Number of Deaths, Missing Persons and Persons Affected by Disaster

The number of deaths, missing persons and persons affected by disaster is a key indicator that supports three SDG targets:

1. SDG target 1.5 - by 2030, build the resilience of the poor and vulnerable exposed to climate-related extreme events;
2. SDG target 11.5 - by 2030, significantly reduce the number of deaths and the number of people affected by disasters and;
3. SDG target 13.1 - to strengthen resilience and adaptive capacity to climate-related and natural disasters in all countries.<sup>5</sup>

## Mortality from Unintentional Poisoning

By 2030, SDG target 3.9 aims to substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination.<sup>5</sup> In 1995, 0.2 Jamaicans in every 100,000 people died of unintentional poisoning compared to 0.1 in 2022.<sup>7</sup>

Number of Deaths, Missing Persons and Persons Affected by Disasters in Jamaica 2002 - 2017 (Per 100,000 People) <sup>11</sup>				
Year	Adverse Weather Events	Number of Deaths	Number of Missing Persons	Number of Persons Affected
2002	Flood Rains	0.3	0.0	50,021
2004	Hurricane Ivan	0.6	0.0	14,009
2005	Hurricane Dennis & Emily	0.3	0.0	12,521
2005	Hurricane Wilma	0.1	0.0	13,669
2007	Hurricane Dean	0.2	0.0	6,744
2008	Tropical Storm Gustav	0.4	0.0	16,842
2010	Tropical Storm Nicole	0.5	0.1	18,873
2012	Hurricane Sandy	0.1	0.0	25,150
2017	March to June Rains	0.0	0.0	90,613

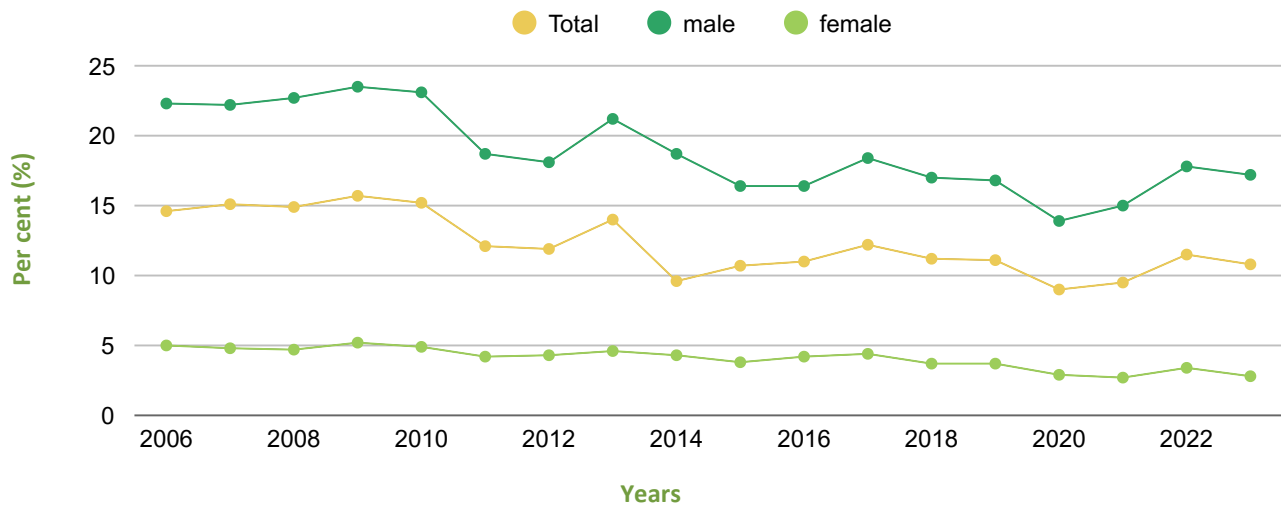
## Deaths from Injuries

In 2006, 14.6% of all deaths were due to injuries, this equates to 2,232 Jamaicans. By 2023, 2,371 Jamaicans (10.8% of all deaths) lost their lives due to injury-related causes. Over these years, more men died from injuries they sustained compared to women. In 2023, of all the males who died, 17.2% died from injuries, while only 2.8% of female deaths were due to injuries.<sup>2</sup>

## Death Rate Due to Traffic Injuries

In 1995, road traffic crashes accounted for 14.7 deaths per 100,000 population in Jamaica. By 2023, this increased to 15.6 per 100,000 population.<sup>12</sup>

### Deaths from Injuries as a Per Cent of Total Deaths in Jamaica, 2006 - 2022



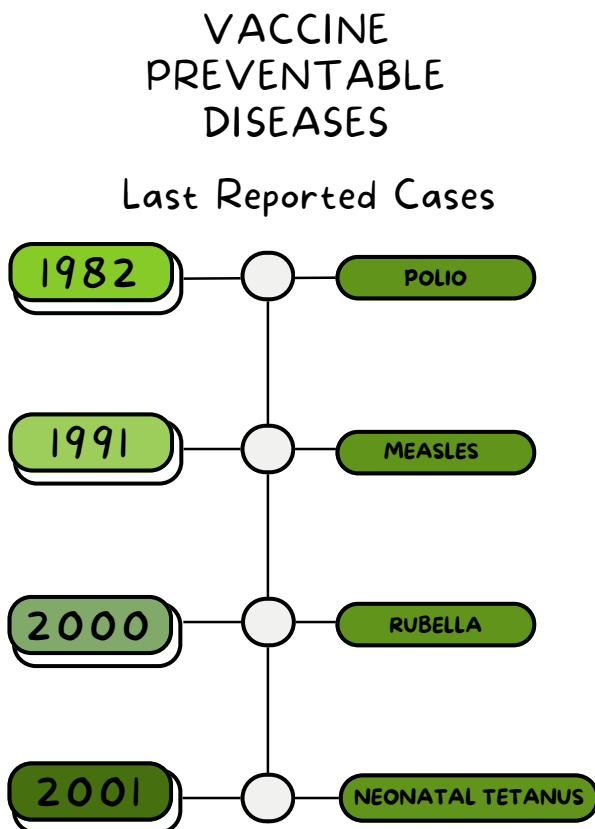
# Morbidity

## New Cases of Vaccine-Preventable Diseases

Diseases that can be prevented with vaccines are referred to as vaccine-preventable diseases (VPDs) and are usually caused by bacteria and viruses. They are transmitted through respiratory droplets, direct physical contact, and faecal-oral matter.<sup>13</sup>

Since 1991, no indigenous measles cases have been confirmed in Jamaica.<sup>9,14</sup>

The last endemic case of neonatal tetanus was reported in Jamaica in 2001.<sup>9,14</sup>



## HIV Prevalence Rate

In Jamaica, the number of people aged 15 to 49 living with HIV has declined over the years. In 1995 and 2000, the HIV prevalence rate was 1.6%. By 2010, that number had decreased to 1.4% and declined to 1.1% by 2023.<sup>15</sup>

A similar trend was observed in younger adults aged 15 to 24. In 1995, 0.8% of this age group had HIV. By 2022, that number had decreased to 0.5%.<sup>15</sup>



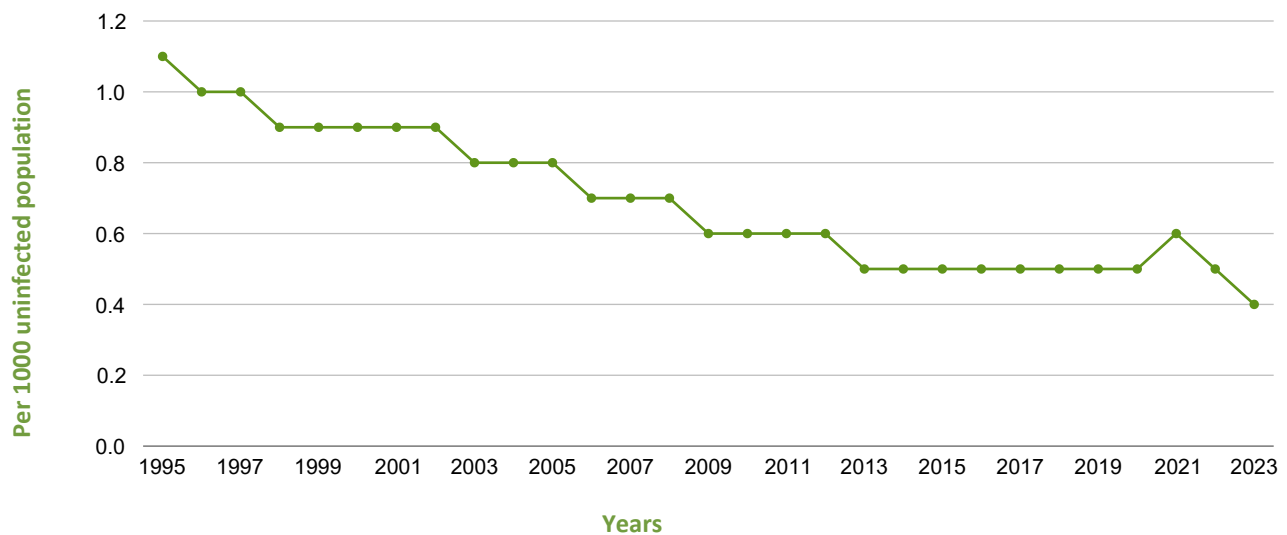
## HIV Incidence Rate

The SDG target 3.3 aims to end the epidemics of AIDS and TB by 2030.<sup>5</sup> Based on the Joint United Nations Programme on HIV/AIDS (UNAIDS) estimates, the HIV incidence rate in 2023 was 0.4 per 1,000 uninfected population. This marks a decrease from 1.1 per 1,000 uninfected individuals in 1995 and 0.9 in 2000.<sup>15</sup>

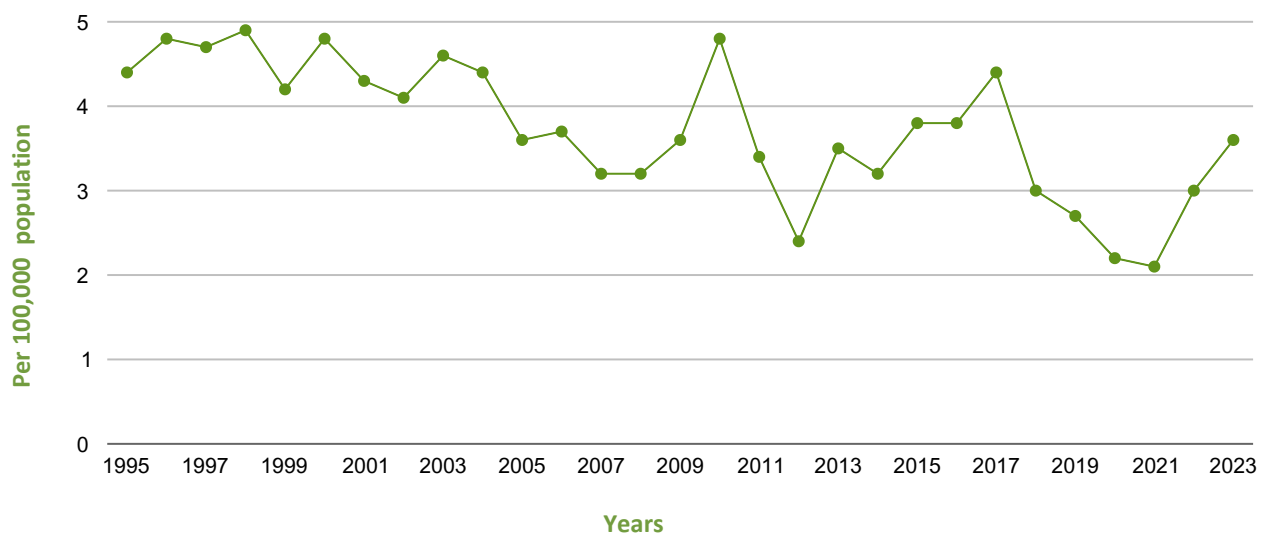
## TB Incidence Rate

In 2023, the number of people who had TB was 3.6 cases per 100,000 population. This is a decrease from 4.4 cases in 1995.<sup>10,14</sup> The TB incidence rate is an important indicator for achieving SDG target 3.3.<sup>5</sup>

### HIV Incidence Rate in Jamaica, 1995 - 2023



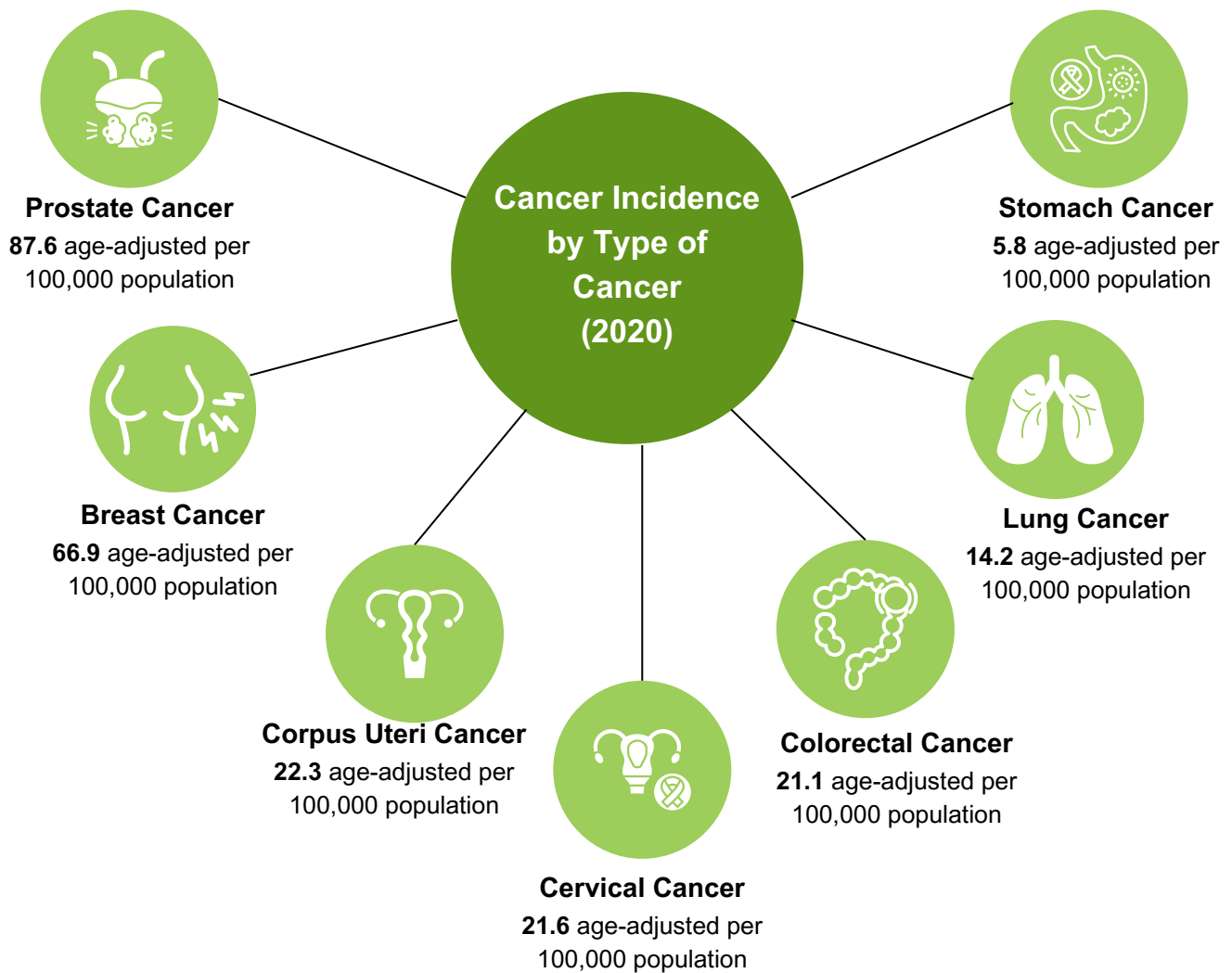
### TB Incidence Rate in Jamaica, 1995 - 2023



## Cancer Incidence by Type of Cancer

Cancer is a common non-communicable disease in Jamaica, with a self-reported prevalence of 0.8% in 2019 and an estimated 16,080 persons being diagnosed.<sup>16</sup>

According to data from Globocan, prostate cancer had the highest estimated incidence rate at 87.6 per 100,000 population in 2020.<sup>17</sup>





## Technical Notes

### The Fertility Rate:

The fertility rate for 1993 was obtained from the Contraceptive Prevalence Survey (CPS). In that year, the survey included only women aged 15-44 years. The Reproductive Health Survey that succeeded the CPS includes women 15-49 years.

### Child Mortality Rates:

The under-5 mortality, infant mortality, and neonatal mortality rates have been revised from the first report, and as a result, some estimates have been updated.

### Age-Standardized Mortality Rates:

The disease-specific age-standardized mortality rates (ASMR) were revised from the first report. The 2020 ASMR for most indicators has changed.

### AIDS-Related Mortality Ratio:

The data used to calculate AIDS mortality were obtained from the National Surveillance Unit (NSU) and the population data from STATIN. The AIDS mortality rates for 2019 and 2020 include deaths for which the date of death was unknown and was assigned to these reporting periods pending further investigation. Therefore, estimates for these years were excluded.

### Disease-Specific Mortality Rates:

The definition and ICD-10 codes used to calculate these estimates were obtained from:

<https://opendata.paho.org/en/core-indicators/technical-specification> Additionally, mortality rates were adjusted for age by direct standardization by applying estimated age-specific mortality rates to the World Health Organization (WHO) World Standard Population.

### Number of Deaths, Missing Persons & Persons Affected by Disaster:

The data points correspond with specific disaster events: 2002, Flood Rains; 2004, Hurricane Ivan; 2007, Hurricane Dean; 2008, Tropical Storm Gustav; 2010, Tropical Storm Nicole; 2012, Hurricane Sandy and 2017-March to June rains.

### HIV prevalence and HIV incidence:

Estimates were produced by UNAIDS. These estimates were calculated using local data.

## Data Sources

1. Contraceptive Prevalence Survey (1997)
2. Reproductive Health Survey (2002, 2008 & 2021)
3. Multiple Indicator Cluster Survey (2011)
4. Replacement level fertility and future population growth
5. United Nations, Sustainable Development Goals
6. Economic & Social Survey Jamaica
7. Registrar General's Department (Numerator); Statistical Institute of Jamaica (Denominator)
8. Registrar General's Department
9. Ministry of Health & Wellness, National Surveillance Unit
10. Ministry of Health & Wellness, National Surveillance Unit (Numerator); Statistical Institute of Jamaica (Denominator)
11. Jamaica Voluntary Statistics
12. National Road Safety Council
13. BC Centre of Disease Control, Vaccine-Preventable Diseases
14. Ministry of Health and Wellness, Annual Report (1998)
15. Joint United Nations Programme on HIV/AIDS Spectrum Estimates
16. Ministry of Health & Wellness, Vitals, Non-Communicable Diseases Edition (2023)
17. Jamaica Cancer Society: GLOBOCAN Estimates

# Health Status

Indicators	Unit of Measurement	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
<b>Fertility</b>													
Total Fertility Rate <sup>1,2,3</sup>	Live births per woman	-	-	2.8	-	-	-	-	2.5	-	-	-	-
Adolescent Birth Rate <sup>1,2,3</sup>	Per 1000 females	-	-	112.0	-	-	-	-	79.0	-	-	-	-
<b>Mortality by Age and Sex</b>													
Life Expectancy <sup>4</sup>	Years	72.2	72.2	72.2	72.2	72.2	72.2	72.0	72.0	72.3	73.3	72.2	72.7
Under-five Mortality Rate <sup>5</sup>	Per 1000 live births	-	12.1	12.5	15.1	15.4	14.8	15.1	14.0	13.6	13.1	15.5	14.6
Neonatal Mortality Rate <sup>5</sup>	Per 1000 live births	-	5.3	6.0	9.1	10.0	8.9	9.2	6.9	7.6	6.7	8.1	10.3
Infant Mortality Rate <sup>5</sup>	Per 1000 live births	-	8.6	8.9	12.1	12.7	11.7	12.1	9.4	9.5	9.5	10.4	13.2
Stillbirth Rate <sup>6</sup>	Per 1000 total births	-	-	-	14.6	10.7	11.0	12.3	10.1	15.2	13.5	14.2	11.5
<b>Mortality by Cause</b>													
Deaths from Communicable Diseases, Maternal, Perinatal & Nutritional Conditions <sup>5</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	-	11.2
Male		-	-	-	-	-	-	-	-	-	-	-	10.4
Female		-	-	-	-	-	-	-	-	-	-	-	12.1
Maternal Mortality Ratio <sup>7</sup>	Per 100 000 live births	-	-	-	-	-	90.8	89.3	104.7	86.9	79.2	108.1	96.2
AIDs-related Mortality Ratio <sup>8</sup>	Per 100 000 population	10.8	9.7	15.4	14.7	21.2	23.8	22.5	26.0	25.0	25.1	19.6	16.4
TB Mortality Ratio <sup>5</sup>	Age-adjusted per 100 000 population	-	-	0.8	1.2	1.0	0.6	0.6	0.7	1.0	0.6	0.8	0.3
Deaths from Non-Communicable Disease <sup>5</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	-	70.6
Male		-	-	-	-	-	-	-	-	-	-	-	63.1
Female		-	-	-	-	-	-	-	-	-	-	-	79.8
Premature Non-Communicable Disease Mortality <sup>5</sup>	Per cent	-	-	19.7	20.2	18.0	19.4	19.2	17.8	18.0	18.6	18.6	16.3
Male		-	-	20.9	21.8	19.0	20.7	20.1	18.8	19.5	18.7	20.5	17.8
Female		-	-	18.6	18.6	17.1	18.1	18.4	17.0	16.6	17.9	16.6	14.9
Diabetes Mellitus Disease <sup>5</sup>	Per 100 000 population	-	60.2	74.9	78.3	69.5	61.6	64.5	61.7	59.9	68.2	69.5	62.7
Male		-	54.9	61.6	63.7	55.8	52.9	50.1	50.2	44.2	53.6	58.7	51.3
Female		-	64.8	86.4	91.6	81.6	68.2	77.2	71.6	74.3	80.6	78.4	72.5
Cerebrovascular Disease <sup>5</sup>	Age-adjusted per 100 000 population	-	84.7	84.3	83.2	71.9	79.4	84.4	71.5	77.0	75.0	74.4	64.4
Male		-	89.2	80.0	84.2	73.1	79.6	84.1	72.8	77.2	75.1	71.7	63.7
Female		-	80.3	86.9	81.4	70.2	78.4	84.2	71.6	76.2	73.9	75.8	64.8
Hypertensive Disease <sup>5</sup>	Age-adjusted per 100 000 population	-	37.0	31.9	37.2	34.6	37.2	34.3	31.5	33.9	27.0	37.6	36.2
Male		-	37.0	29.7	34.6	34.5	36.8	35.1	26.5	34.4	24.7	37.5	34.4
Female		-	36.4	33.6	39.2	34.4	37.2	33.3	35.6	33.5	29.1	37.2	37.3
Ischaemic Disease <sup>5</sup>	Age-adjusted per 100 000 population	-	39.9	37.7	42.5	38.4	36.7	37.4	33.2	38.5	35.1	40.0	39.2
Male		-	42.7	43.0	47.5	43.8	40.6	40.9	35.3	45.1	41.6	47.0	42.9
Female		-	37.2	32.9	37.9	33.2	33.1	35.4	31.1	32.5	29.1	33.4	35.5
Respiratory Disease <sup>5</sup>	Age-adjusted per 100 000 population	-	20.8	21.6	22.8	21.8	22.8	22.4	28.1	24.4	22.9	25.2	22.5
Male		-	27.9	33.9	34.3	31.9	34.0	35.0	42.5	35.9	35.3	40.9	34.6
Female		-	13.9	11.0	13.0	13.1	13.2	11.6	15.5	14.7	12.4	11.6	12.0

Data Sources: <sup>1</sup>Contraceptive Prevalence Survey (1997), <sup>2</sup>Reproductive Health Survey (2002, 2008 & 2021), <sup>3</sup>Multiple Indicator Cluster Survey (2011), <sup>4</sup>Economic & Social Survey Jamaica, <sup>5</sup>Registrar General's Department (Numerator); Statistical Institute of Jamaica (Denominator), <sup>6</sup>Registrar General's Department, <sup>7</sup>Ministry of Health & Wellness, National Surveillance Unit, <sup>8</sup>Ministry of Health & Wellness, National Surveillance Unit (Numerator), Statistical Institute of Jamaica (Denominator), <sup>9</sup>Jamaica Voluntary Statistics, <sup>10</sup>National Road Safety Council, <sup>11</sup>UNAIDS Spectrum Estimates, <sup>12</sup>Ministry of Health and Wellness, Annual Report (1998), <sup>13</sup>Jamaica Cancer Society: GLOBOCAN Estimates

# Health Status

2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Fertility																
-	2.4	-	-	2.2	-	-	-	-	-	-	-	-	-	1.9	-	-
-	72.0	-	-	70.0	-	-	-	-	-	-	-	-	-	34.0	-	-
Mortality by Age and Sex																
72.7	72.7	72.7	72.7	72.7	72.7	73.1	74.1	74.1	74.1	74.3	74.3	74.2	74.2	74.2	74.2	74.2
15.3	14.6	12.6	15.6	16.9	17.4	18.0	20.5	19.6	17.4	18.4	18.8	20.5	17.7	19.0	21.0	-
11.5	11.6	9.8	12.1	13.1	13.9	14.5	16.7	16.0	12.7	14.1	13.8	15.2	13.8	14.6	15.7	-
13.7	13.5	11.4	14.3	15.2	15.9	16.6	19.0	18.5	15.8	16.7	16.6	18.5	16.6	17.7	19.2	-
13.8	14.6	12.1	12.6	15.6	14.6	14.5	13.6	13.8	14.6	13.9	14.6	13.3	14.3	14.0	14.1	14.7
Mortality by Cause																
9.8	11.0	10.0	9.9	9.7	11.0	10.6	12.3	10.8	10.0	9.6	9.9	10.3	11.0	25.0	14.6	10.3
10.0	10.9	9.6	9.7	9.3	10.5	10.6	12.9	10.6	10.2	9.3	9.3	9.6	10.5	23.6	14.4	10.1
9.5	11.2	10.5	10.3	10.2	11.5	10.7	11.6	11.1	9.9	9.8	10.6	11.1	10.7	26.7	14.8	10.6
91.2	99.7	72.4	120.8	93.2	83.9	103.6	116.2	87.9	110.6	95.9	102.3	163.5	117.9	211.3	156.7	136.9
12.1	16.2	15.2	16.1	14.5	13.7	11.2	12.0	11.5	17.3	17.1	14.0	-	-	10.4	-	-
0.6	0.4	0.5	0.4	0.3	0.3	0.1	0.2	0.5	0.3	0.2	0.2	0.3	0.1	0.1	0.2	-
73.8	73.1	73.3	73.8	77.4	76.5	76.9	84.0	78.1	78.4	77.8	78.4	78.3	80.1	65.2	73.6	78.5
66.7	65.7	66.1	66.4	71.4	70.9	70.6	82.2	72.7	72.9	71.9	73.1	73.2	75.4	61.1	67.5	72.3
84.1	82.8	83.0	83.6	84.8	83.4	84.8	85.8	84.8	85.4	85.3	85.1	84.8	86.0	70.3	81.5	86.2
17.1	14.7	17.1	16.8	17.5	17.2	17.4	18.7	19.1	19.0	18.9	19.4	19.2	21.0	21.1	20.0	-
18.4	15.1	18.3	17.8	18.9	18.5	18.7	19.9	20.6	21.1	18.4	18.4	18.8	22.7	22.9	21.5	-
15.9	14.9	15.7	15.8	16.1	15.9	16.0	17.5	17.6	16.9	19.3	20.4	19.6	19.3	19.2	18.4	-
63.9	63.2	65.3	66.8	79.9	68.6	65.5	72.2	70.7	76.8	76.3	76.0	80.6	84.1	99.2	82.2	79.9
55.5	51.3	54.5	58.7	68.9	60.1	56.8	59.7	59.8	68.7	68.7	69.4	71.4	74.1	86.9	74.1	70.8
71.3	73.2	74.4	74.0	89.1	76.1	73.3	83.0	79.9	83.6	82.5	81.5	88.2	92.0	109.6	88.9	87.4
72.9	72.1	71.8	71.3	73.0	70.4	73.7	86.6	76.8	73.2	70.4	68.7	70.6	71.7	75.3	69.3	78.2
71.6	70.4	73.6	74.7	76.3	71.0	76.3	90.2	79.9	78.2	75.6	75.0	76.8	80.0	82.3	77.1	85.6
73.5	72.7	69.2	68.2	69.4	69.8	70.8	83.1	73.4	68.1	65.3	62.7	64.6	63.8	68.0	61.4	70.6
38.5	37.0	38.6	37.7	39.4	43.7	42.5	45.9	46.2	48.6	47.4	45.5	51.0	47.4	57.7	52.1	52.1
35.2	35.9	38.9	35.9	42.5	43.1	43.5	50.7	48.1	51.7	48.1	47.4	54.1	57.1	61.4	55.6	53.9
40.9	37.5	38.1	38.7	36.4	44.0	41.5	41.3	44.2	45.3	46.4	43.2	47.9	38.5	44.2	48.7	49.9
40.7	36.0	38.6	37.1	37.6	38.6	42.5	50.6	49.5	49.0	46.3	48.0	47.4	47.4	54.9	48.7	47.5
45.3	39.1	42.9	44.5	43.2	45.5	45.7	58.4	57.6	55.3	52.7	58.0	54.3	57.1	62.2	57.5	56.5
36.0	32.8	34.5	30.4	32.2	32.3	39.4	43.3	41.6	42.9	40.0	38.4	40.8	38.5	48.1	40.4	38.8
21.3	21.7	22.1	20.7	18.2	20.1	18.8	22.6	21.7	23.5	19.1	20.6	23.6	19.9	23.0	20.2	-
33.6	33.4	34.5	33.1	29.0	30.6	29.9	34.1	33.2	37.9	29.4	30.2	36.9	29.8	35.8	30.0	-
10.7	11.7	11.7	10.2	9.2	11.0	8.9	12.6	11.8	10.7	10.0	12.3	12.1	11.2	11.8	11.8	-

Data Sources: <sup>1</sup>Contraceptive Prevalence Survey (1997), <sup>2</sup>Reproductive Health Survey (2002, 2008 & 2021), <sup>3</sup>Multiple Indicator Cluster Survey (2011), <sup>4</sup>Economic & Social Survey Jamaica, <sup>5</sup>Registrar General's Department (Numerator); Statistical Institute of Jamaica (Denominator), <sup>6</sup>Registrar General's Department, <sup>7</sup>Ministry of Health & Wellness, National Surveillance Unit, <sup>8</sup>Ministry of Health & Wellness, National Surveillance Unit (Numerator), Statistical Institute of Jamaica (Denominator), <sup>9</sup>Jamaica Voluntary Statistics, <sup>10</sup>National Road Safety Council, <sup>11</sup>UNAIDS Spectrum Estimates, <sup>12</sup>Ministry of Health and Wellness, Annual Report (1998), <sup>13</sup>Jamaica Cancer Society: GLOBOCAN Estimates

# Health Status

Indicators	Unit of Measurement	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
<b>Mortality by Cause</b>													
Cancer Mortality Rate <sup>5</sup>	Age-adjusted per 100 000 population	-	109.3	112.8	120.5	103.0	118.2	119.3	117.9	118.2	113.5	113.8	111.5
Male		-	134.5	123.2	144.7	122.3	143.2	138.7	145.8	145.0	133.8	136.6	136.3
Female		-	88.5	106.1	101.4	87.5	97.9	104.3	95.3	96.2	97.3	95.2	90.8
Prostate Cancer Mortality <sup>5</sup>	Age-adjusted per 100 000 population	-	35.2	36.2	37.9	34.8	46.3	40.6	45.1	45.3	44.7	43.9	42.8
Breast Cancer Mortality <sup>5</sup>	Age-adjusted per 100 000 population	-	17.0	19.6	18.8	18.7	20.1	23.6	18.2	21.2	20.7	20.3	18.4
Cervical Cancer Mortality <sup>5</sup>	Age-adjusted per 100 000 population	-	18.0	15.2	18.4	12.1	12.6	16.3	12.2	16.4	11.5	10.7	10.8
Colorectal Cancer Mortality <sup>5</sup>	Age-adjusted per 100 000 population	-	7.7	8.2	7.9	8.4	8.5	9.8	8.8	8.3	8.9	9.3	8.2
Corpus Uteri Mortality Rate <sup>5</sup>	Age-adjusted per 100 000 population	-	-	-	-	-	-	-	-	-	-	-	3.1
Number of Deaths, Missing <sup>9</sup> Person & Persons Affected by Disasters													
Number of deaths	Per 100 000 population	-	-	-	-	-	-	-	0.3	-	0.6	-	-
Number of missing persons		-	-	-	-	-	-	-	0.0	-	0.0	-	-
Number of persons affected		-	-	-	-	-	-	-	50021	-	14009	-	-
Mortality from Unintentional <sup>5</sup> Poisoning	Per 100 000 population	0.2	0.4	0.2	0.5	0.0	0.2	0.2	0.2	0.0	0.2	0.5	0.3
Deaths from Injuries <sup>5</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	-	14.6
Male		-	-	-	-	-	-	-	-	-	-	-	22.3
Female		-	-	-	-	-	-	-	-	-	-	-	5.0
Death Rate Due to Traffic <sup>10</sup> Injuries	Per 100 000 population	14.7	13.6	14.6	13.9	11.4	12.9	13.8	15.6	14.8	13.6	12.3	13.9
<b>Morbidity</b>													
New Cases of Vaccine- Preventable Diseases <sup>7</sup>													
Measles	Count	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Mumps		0.0	0.0	0.0	0.0	0.0	10.0	9.0	11.0	4.0	1.0	3.0	2.0
Neonatal tetanus		0.0	0.0	0.0	1.0	0.0	0.0	1.0	0.0	0.0	0.0	0.0	0.0
Diphtheria		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Rubella		0.0	0.0	0.0	0.0	3.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0
Poliomyelitis		0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
HIV Prevalence Rate <sup>11</sup> Adults (15-49 years)	Percent	1.6	1.6	1.6	1.6	1.6	1.6	1.5	1.5	1.5	1.5	1.4	1.4
Young people (15-24 years)		0.8	0.8	0.8	0.7	0.7	0.7	0.7	0.6	0.6	0.6	0.6	0.6
HIV Incidence Rate <sup>11</sup>	Per 1000 Uninfected population	1.1	1.0	1.0	0.9	0.9	0.9	0.9	0.9	0.8	0.8	0.8	0.7
TB Incidence Rate <sup>12</sup>	Per 100 000 population	4.4	4.8	4.7	4.9	4.2	4.8	4.3	4.1	4.6	4.4	3.6	3.7
Cancer Incidence by Type <sup>13</sup> of Cancer													
Prostate cancer	Age-adjusted per 100 000 population	-	-	-	-	-	-	-	-	-	-	-	-
Breast cancer		-	-	-	-	-	-	-	-	-	-	-	-
Corpus uteri cancer		-	-	-	-	-	-	-	-	-	-	-	-
Cervical cancer		-	-	-	-	-	-	-	-	-	-	-	-
Colorectal cancer		-	-	-	-	-	-	-	-	-	-	-	-
Lung cancer		-	-	-	-	-	-	-	-	-	-	-	-
Stomach cancer		-	-	-	-	-	-	-	-	-	-	-	-

Data Sources: <sup>1</sup>Contraceptive Prevalence Survey (1997), <sup>2</sup>Reproductive Health Survey (2002, 2008 & 2021), <sup>3</sup>Multiple Indicator Cluster Survey (2011), <sup>4</sup>Economic & Social Survey Jamaica, <sup>5</sup>Registrar General's Department (Numerator); Statistical Institute of Jamaica (Denominator), <sup>6</sup>Registrar General's Department, <sup>7</sup>Ministry of Health & Wellness, National Surveillance Unit, <sup>8</sup>Ministry of Health & Wellness, National Surveillance Unit (Numerator), Statistical Institute of Jamaica (Denominator), <sup>9</sup>Jamaica Voluntary Statistics, <sup>10</sup>National Road Safety Council, <sup>11</sup>UNAIDS Spectrum Estimates, <sup>12</sup>Ministry of Health and Wellness, Annual Report (1998), <sup>13</sup>Jamaica Cancer Society: GLOBOCAN Estimates

# Health Status

2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Mortality by Cause																
117.1	113.6	119.4	117.8	122.9	119.2	121.4	124.8	125.2	121.0	125.3	123.7	122.0	123.2	124.0	119.2	134.5
144.9	136.6	142.5	137.8	142.7	143.0	141.4	146.9	146.4	141.4	148.6	143.0	141.4	138.6	143.0	108.1	147.3
94.7	95.0	101.1	102.5	107.8	100.0	105.0	106.9	107.7	104.0	105.9	108.1	105.9	110.7	108.4	133.6	124.9
47.4	43.1	45.8	45.4	46.9	46.0	46.9	48.5	46.3	46.8	48.7	48.0	46.3	46.6	49.6	47.0	46.3
19.8	20.1	22.3	23.0	22.2	23.7	24.9	28.1	27.7	25.5	26.3	29.4	26.2	28.5	28.2	29.5	32.3
13.6	11.5	10.1	12.0	14.8	12.9	11.9	12.0	12.1	12.3	12.5	11.7	13.2	11.5	10.0	12.6	11.6
9.4	8.5	7.6	10.1	10.9	10.3	12.5	12.2	11.6	11.3	12.7	11.3	11.7	12.3	13.4	13.1	15.5
2.3	5.0	4.6	5.1	5.2	5.0	5.1	5.7	6.1	6.0	7.8	7.5	7.1	7.7	7.5	5.9	-
0.2	0.4	-	0.5	-	0.1	-	-	-	-	0.0	-	-	-	-	-	-
0.0	0.0	-	0.1	-	0.0	-	-	-	-	0.0	-	-	-	-	-	-
6744	16842	-	18873	-	25150	-	-	-	-	90613	-	-	-	-	-	-
0.0	0.0	0.1	0.2	0.0	0.1	0.0	0.4	0.0	0.0	0.2	0.2	0.4	0.3	0.2	0.1	-
15.1	14.9	15.7	15.2	12.1	11.9	14.0	9.6	10.7	11.0	12.2	11.2	11.1	9.0	9.5	11.5	10.8
22.2	22.7	23.5	23.1	18.7	18.1	21.2	18.7	16.4	16.4	18.4	17.0	16.8	13.9	15.0	17.8	17.2
4.8	4.7	5.2	4.9	4.2	4.3	4.6	4.3	3.8	4.2	4.4	3.7	3.7	2.9	2.7	3.4	2.8
12.9	12.8	12.9	11.8	11.4	9.6	11.3	12.2	14.0	13.9	11.8	14.3	16.1	15.8	17.8	17.9	15.6
Morbidity																
0.0	2.0	0.0	0.0	1.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
0.0	0.0	0.0	1.0	4.0	0.0	0.0	0.0	0.0	2.0	3.0	0.0	0.0	0.0	0.0	0.0	0.0
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.3	1.1
0.6	0.6	0.6	0.6	0.6	0.6	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	-
0.7	0.7	0.6	0.6	0.6	0.6	0.6	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.6	0.5	0.4
3.2	3.2	3.6	4.8	3.4	2.4	3.5	3.2	3.8	3.8	4.4	3.0	2.7	2.2	2.1	3.0	3.6
-	-	-	-	-	-	-	-	-	-	-	-	-	87.6	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	66.9	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	22.3	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	21.6	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	21.1	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	14.2	-	-	-
-	-	-	-	-	-	-	-	-	-	-	-	-	5.8	-	-	-

Data Sources: <sup>1</sup>Contraceptive Prevalence Survey (1997), <sup>2</sup>Reproductive Health Survey (2002, 2008 & 2021), <sup>3</sup>Multiple Indicator Cluster Survey (2011), <sup>4</sup>Economic & Social Survey Jamaica, <sup>5</sup>Registrar General's Department (Numerator); Statistical Institute of Jamaica (Denominator), <sup>6</sup>Registrar General's Department, <sup>7</sup>Ministry of Health & Wellness, National Surveillance Unit, <sup>8</sup>Ministry of Health & Wellness, National Surveillance Unit (Numerator), Statistical Institute of Jamaica (Denominator), <sup>9</sup>Jamaica Voluntary Statistics, <sup>10</sup>National Road Safety Council, <sup>11</sup>UNAIDS Spectrum Estimates, <sup>12</sup>Ministry of Health and Wellness, Annual Report (1998), <sup>13</sup>Jamaica Cancer Society: GLOBOCAN Estimates

# Risk Factors

Risk factor indicators measure factors that indirectly influence health and are typically linked to lifestyle choices that can be modified through health promotion. The topics covered in this chapter include:

## Nutrition

- Incidence of Low Birth Weight among Newborns (<2500g)
- Early Initiation of Breastfeeding
- Exclusive Breastfeeding Rate 0 - 5 Months of Age
- Children Under Five Years who are Stunted
- Children Under Five Years who are Wasted
- Children Under Five Years who are Underweight
- Children Under Five Years who are Overweight
- Anaemia Prevalence in Women of Reproductive Age (15 - 49 years)

## Infections

- Prevention of HIV in Key Populations

## Environmental Risk Factors

- Population Using Safely Managed Drinking-water Services

## Non-Communicable Diseases Risk Factors

- Prevalence of Alcohol Use (15 - 74 Years)
- Prevalence of Alcohol Use in Students (13 - 17 years)
- Prevalence of Tobacco Use (15+ Years)
- Prevalence of Tobacco Use in Students (13 - 17 years)
- Salt Intake
- Raised Blood Pressure among Adults (15 - 74 years)
- Raised Blood Glucose/Diabetes among Adults (15 - 74 years)
- Overweight & Obesity in Adults
- Insufficient Physical Activity in Adults

## Injuries/Harmful Traditional Practices

- Intimate partner violence prevalence
- Non-partner Sexual Violence Prevalence
- Seatbelt Wearing Rate
- Motorcycle Helmet Wearing Rate

# Nutrition

## Incidence of Low Birth Weight among Newborns (<2500g)

In 2023, the percentage of newborns delivered in public health facilities with low birth weight was 13.6%, an increase from 9.8% in 1996. Infants born with low birth weight face a greater risk of mortality within their first month. Additionally, these babies are more prone to growth challenges and various health complications, including NCDs.<sup>1,2</sup>

## Early Initiation of Breastfeeding

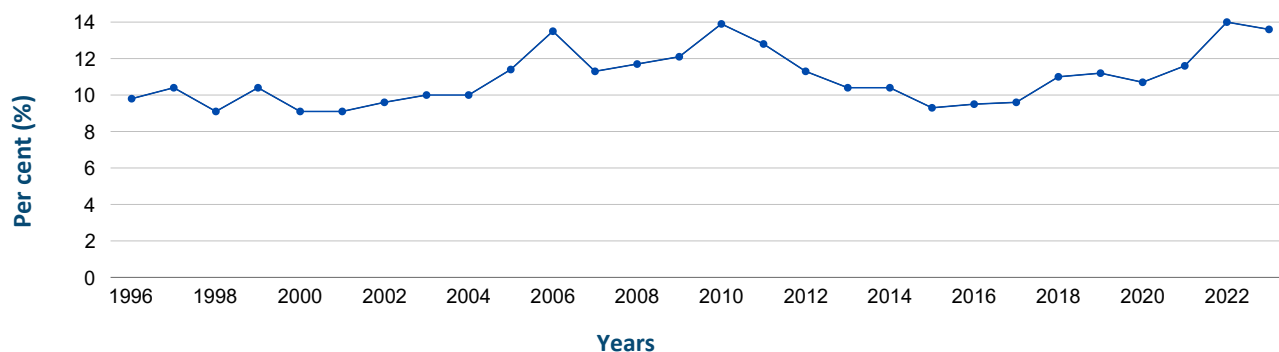
Breastfeeding is highly recommended for infants from birth to at least the first six months of age.<sup>3</sup>

Breast milk is uniquely suited to meet a baby's nutritional needs and provides a range of health benefits.<sup>3</sup> In 2011, 64.7% of newborns were breastfed within the first hour of birth an increase from 62.3% in 2005.<sup>4</sup>


## Exclusive Breastfeeding Rate 0 - 5 Months of Age

In 2022, 33.0% of children were exclusively breastfed before six months an increase from 15.2% in 2005.<sup>4</sup>

**Incidence of Low Birth Weight among Newborns (<2500g) in Jamaica, 1996 - 2022**



## Breastfeeding Rates in Jamaica

		2005	2011	2022
	Exclusive Breastfeeding Rate 0-5 Months of Age	15.2%	23.8%	33.0%
	Early Initiation of Breastfeeding	62.3%	64.7%	-



## Malnutrition in Children Under Five

The SDG target 2.2 aims to end all forms of malnutrition by 2030, which includes stunting and wasting.<sup>5</sup> Stunting refers to a condition in which a child is too short for their age, indicating long-term undernutrition and impaired growth, while wasting is a child being too thin for their height, usually due to acute malnutrition and rapid weight loss.<sup>6</sup>

### Children under five years who are stunted

In 2018, 4.1% of children under five years were stunted compared to 6.8% in 1995.<sup>7</sup>

### Children under five years who are wasted

In 2018, 3.3% of children under five years were wasted compared to 4.0% in 1995.<sup>7</sup>

## Children aged under five years who are underweight

In 2018, 2.6% of children under five years were underweight compared to 5.1% in 1995.<sup>7</sup>

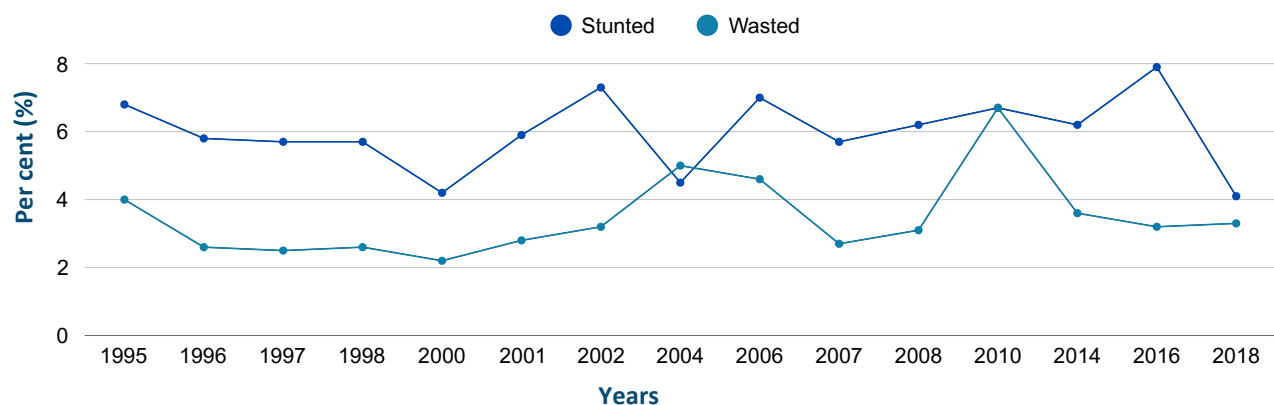
## Children aged under five years who are overweight

In 2018, 5.9% of children under five years were overweight compared to 4.3% in 1997.<sup>7</sup>

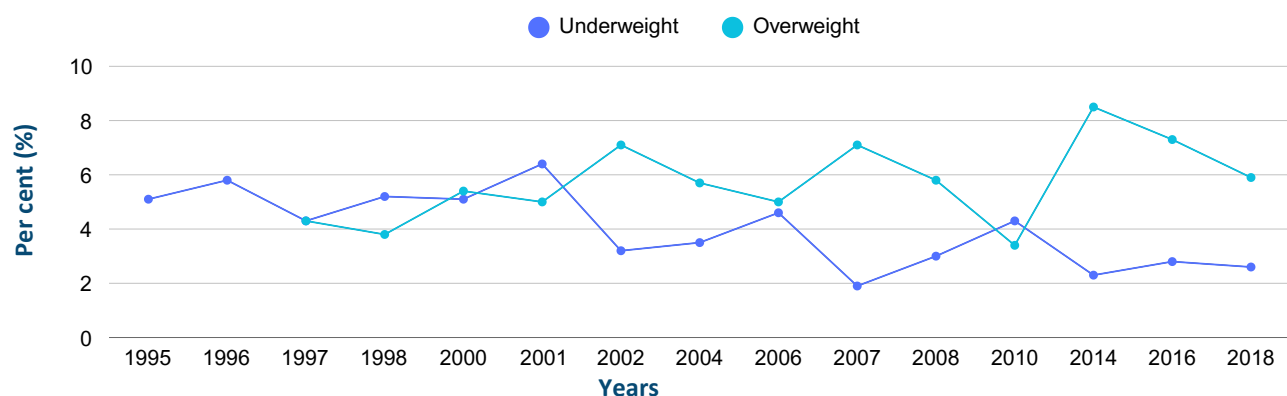
## Anaemia Prevalence in Women of Reproductive Age (15-49)

The prevalence of anaemia in women of reproductive age (15 - 49 years) in 2017 was 28.5%.<sup>8</sup>

### Stunting and Wasting in Children Under Five in Jamaica 1995 -2018



### Underweight and Overweight in Children Under Five in Jamaica, 1995 - 2018



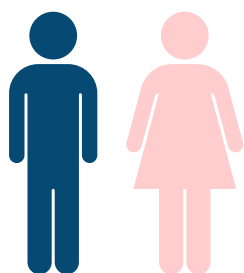
# Infections

## Prevention of HIV in Key Populations

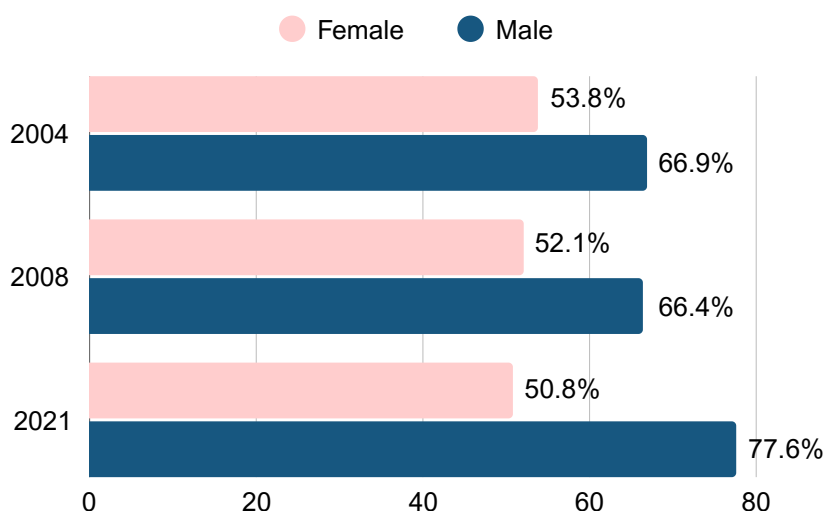
In 2021, 50.8% of women and 77.6% of men 15 – 49 years who had sex with multiple partners in the last 12 months reported that they used a condom at their last sexual encounter. This is in comparison to 2004 with 53.8% women and 66.9% men.<sup>9,10,11</sup>

In 2017, 76.6% of sex workers reported that they used a condom with their most recent paid client.<sup>9,10,11</sup>

In 2017, 65.4% of men who have sex with men (MSM) reported that they used a condom during their last sexual encounter compared to 75.5% in 2011.<sup>9,10,11</sup>



Per cent of women and men (15-49 years) with multiple partners in the last 12 months who used condom at last sex



# Environmental Risk Factors

## Population Using Safely Managed Drinking-water Services

Diarrhoeal diseases have been linked to contaminated and unsafe drinking water. In response, SDG target 6.1 aims to achieve universal and equitable access to safe and

affordable drinking water for all by 2030.<sup>5</sup>

In 2021, 75.2% of Jamaicans had access to treated water sources, including water from indoor or outdoor taps/pipes, public standpipes, bottled water, and trucked water from private or public-owned companies. Between 2000 and 2021, access to treated water was relatively stable.<sup>7</sup>

**In 2021, approximately 8 out of 10 Jamaicans had access to treated water sources.**



# Non-Communicable Diseases

## Risk Factors

### Prevalence of Alcohol Use (15 - 74 Years)

The prevalence of lifetime alcohol use by Jamaicans 15 years and older was 68.2% in 2008. This decreased to 60.7% in 2017. In both years, the prevalence of alcohol use was greater in males (2008, 84.1%; 2017, 75.5%) than in females (2008, 53.0%; 2017, 46.6%).<sup>8</sup>

### Prevalence of Alcohol Use in Students (13 - 17 years)

In 2017, data from the Global School Health Survey showed that almost half (48.9%) of students 13 – 17 years reported drinking alcohol. More male (58.7%) than female (39.9%) students drank alcohol.<sup>12</sup>

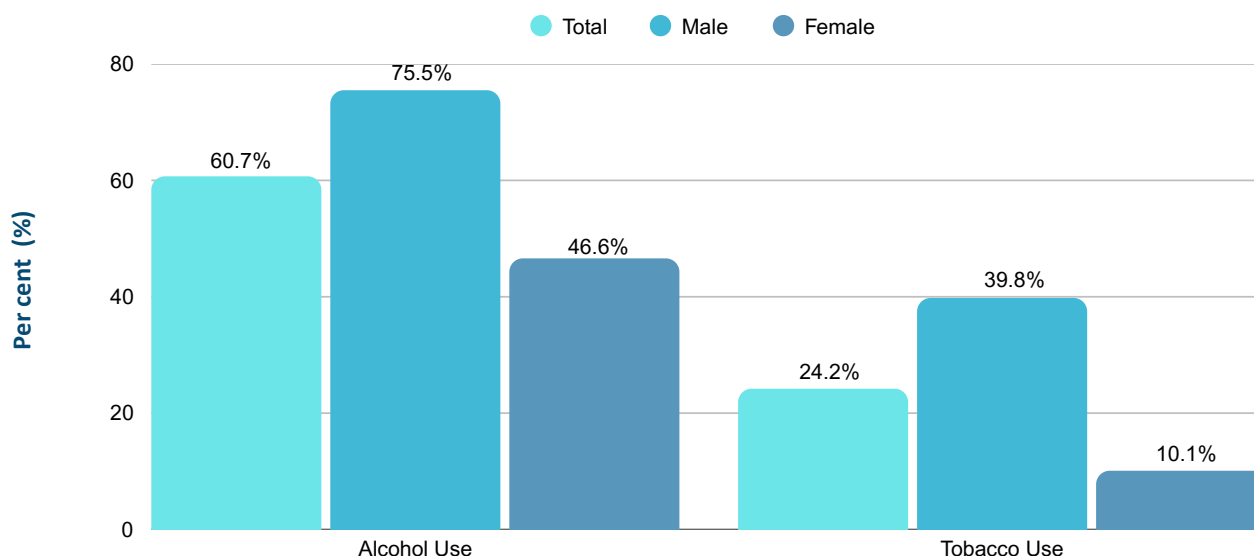
### Prevalence of Tobacco Use (15+ Years)

In 2017, 24.2% of Jamaicans 15 years and older reported currently using tobacco compared to 31.1% in 2008. Tobacco use in 2017 was 39.8% in males and 10.1% in females.<sup>8</sup>

### Prevalence of Tobacco Use in Students (13 - 17 years)

In 2017, 14.9% of Jamaican students 13-17 years were currently smoking tobacco. In 2017, tobacco use in male students was 19.1% and 11.0% in female students.<sup>12</sup>

### 2017 Prevalence of Alcohol and Tobacco Use in Jamaicans 15 years and older



## Salt Intake

Recommended salt intake is less than 5g or one teaspoon of salt daily. Exceeding this limit may lead to high blood pressure and increase the likelihood of developing heart disease and stroke. In 2017, the average salt intake among Jamaicans was 9.0g, almost 2 teaspoons of salt per day.<sup>8</sup>

## Raised Blood Pressure among Adults (15 - 74 years)

Hypertension is a leading factor in cardiovascular disease. It is a chronic condition when the pressure in your blood vessels is consistently high (140/90 mmHg or higher). In 2017, an estimated 31.5% of Jamaicans aged 15 to 74 years had hypertension compared to 20.8% in 2001.<sup>8</sup>

## Raised Blood Glucose/Diabetes among Adults (15 - 74 years)

Diabetes is one of the most common chronic diseases in Jamaica. In 2017, approximately 236,191 Jamaicans 15 years and older had diabetes. In that same year, diabetes was more prevalent in Jamaican females than males. The proportion of Jamaican adults aged 15 to 74 with raised glucose ( $\geq 7.0$  mmol/L) increased from 7.1% in 2001 to 10.2% in 2017.<sup>8</sup>



## BLOOD PRESSURE LEVELS

Category	Systolic (mm hg) Top Number	Diastolic (mm hg) Bottom Number
Normal	Below 120	Below 80
Elevated	120 - 139	80 - 89
Stage 1 Hypertension	140 - 159	90 - 99
Stage 2 Hypertension	160 or higher	100 or higher



## Overweight & Obesity in Adults

Individuals who are overweight or obese have abnormal or excessive fat that may affect their health. An overweight adult has a body mass index (BMI) greater or equal to 25, and an obese adult has a BMI greater than 30.<sup>13</sup>

### Overweight

In 2017, 25.1% of Jamaicans aged 15 to 74 years were overweight compared to 26.1% in 2001.<sup>8</sup>

### Obese

In 2017, 28.9% of Jamaicans aged 15 to 74 years were obese compared to 19.7% in 2017.<sup>8</sup>

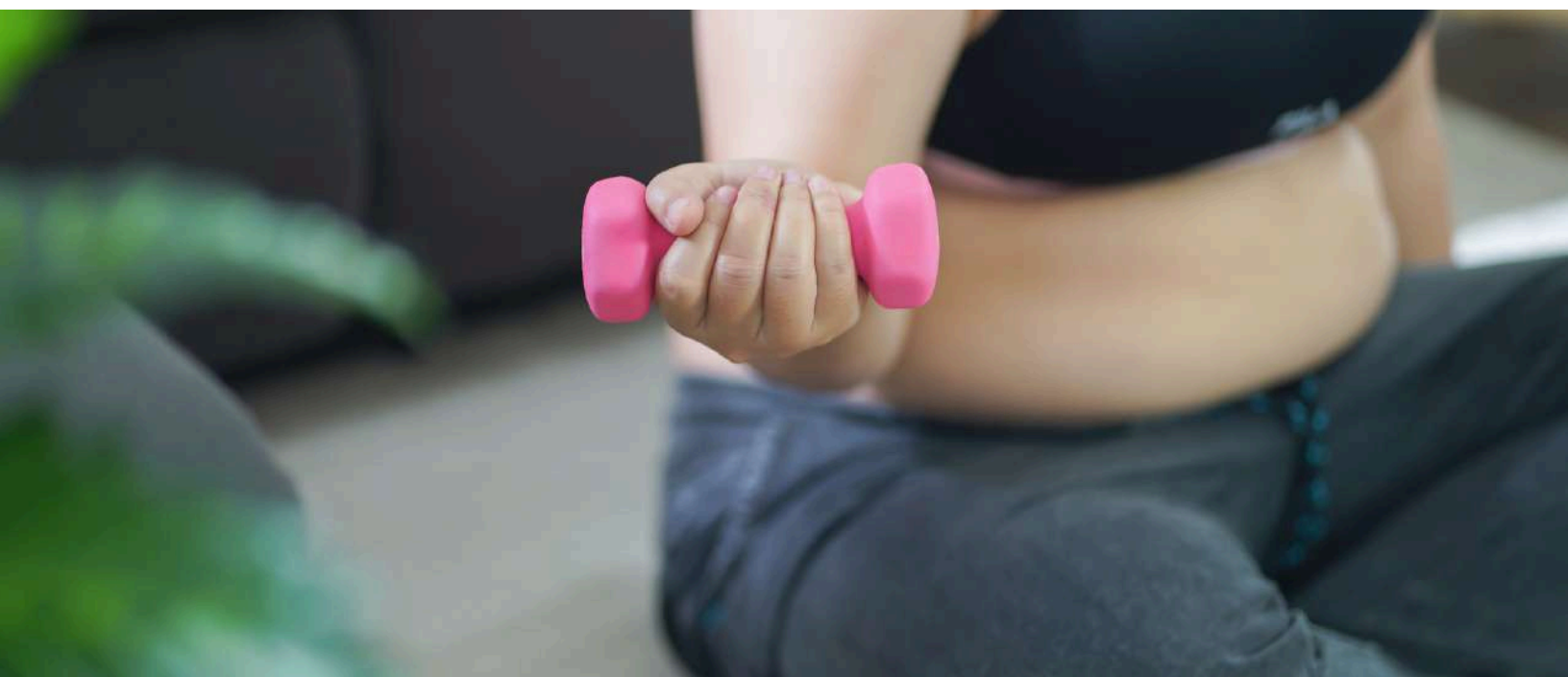
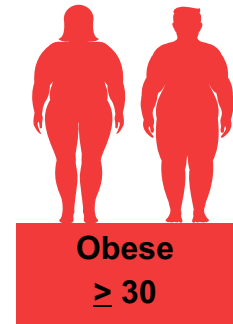
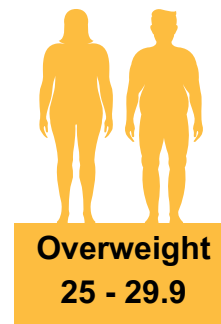
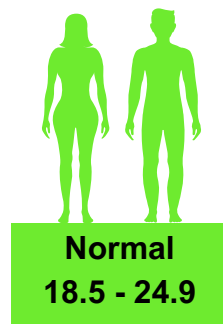
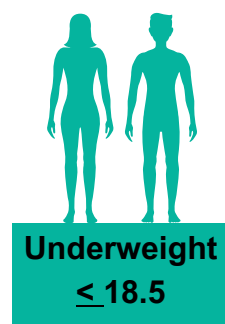
## Insufficient Physical Activity in Adults

In 2017, 34.7% of Jamaicans aged 15 to 74 years and older had insufficient physical activity levels compared to 34.4% in 2001.<sup>8</sup>

Engaging in physical activity can lower the risk for chronic non-communicable diseases such as stroke and diabetes.

It is recommended that adults should do at least 150-300 minutes of moderate-intensity aerobic physical activity per week.<sup>14</sup>

## ADULT BODY MASS INDEX RANGE



# Injuries/Harmful Traditional Practices

## Intimate Partner Violence Prevalence

The SDG 5.2 target is to eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking, sexual, and other types of exploitation.<sup>5</sup>

In 2021, about 17.1% of Jamaican women and girls aged 15 to 49 years experienced physical, sexual or psychological violence by a current or former intimate partner.<sup>15</sup>

## Non-partner Sexual Violence Prevalence

The proportion of girls aged 15 years and older who were subjected to sexual violence by persons other than an intimate partner is a key indicator measuring the achievement of the SDG target 5.2.<sup>5</sup>

In 2016, approximately 3.0% of Jamaican women experienced sexual violence by someone other than their partner.<sup>16</sup>

## Seatbelt Wearing Rate

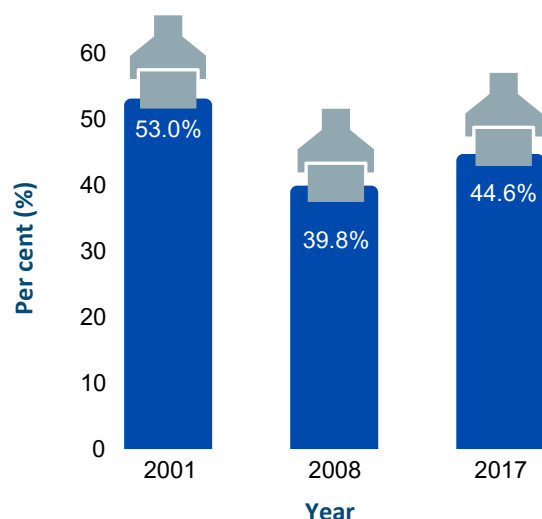
In 2017, 44.6% of Jamaican drivers aged 15 to 74 years, reported that they always wear their seatbelts while driving compared to 53.0% in 2001.

In 2017, 37.8% of front-seat passengers reported that they always wear a seatbelt. Among backseat passengers aged 15 and older, only 3.4% reported that they always wear a seatbelt.<sup>17</sup>

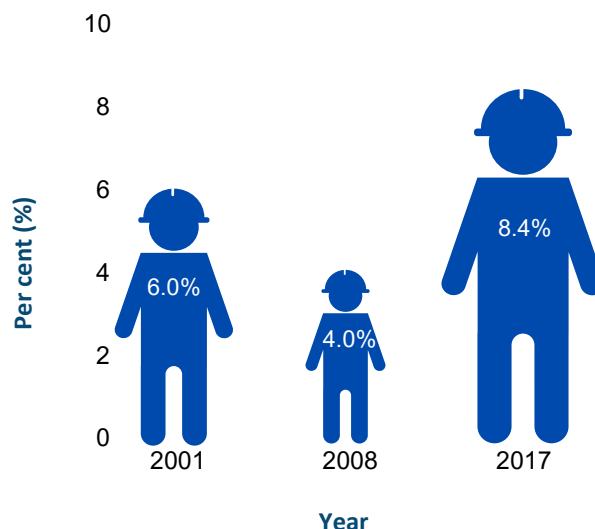
## Motorcycle Helmet Wearing Rate

In 2017, 8.4% of motorcyclists reported that they always wear a helmet while riding compared to 6.0% in 2001.<sup>17</sup>

Seat-belt Wearing Rate among Jamaican Drivers, 2001 - 2017



Motorcycle Helmet Wearing Rate among Jamaican Riders, 2001 - 2007





## Technical Notes

Most of the indicators found in the risk factor domain are obtained from population-based surveys. These surveys are done periodically; therefore, data points are only available for the survey years.

### **Incidence of Low Birth Weight:**

Some figures have been updated based on the latest information acquired from the MOHW, Policy Planning and Development Division (PPD).

### **Population Using Safely Managed Drinking Water Services:**

The data points for this indicator were obtained from JSLC. The proportion of households using improved drinking water services (water from indoor or outdoor taps/pipes, public standpipes, bottled water and trucked water from private or public-owned companies) is a proxy indicator of access to safe drinking water services.

## Data Sources

1. Ministry of Health & Wellness, Policy Planning and Development Division: Estimates Calculated from Hospital Monthly Statistical Report
2. Ministry of Health & Wellness, Annual Report (1996 - 2007)
3. UNICEF, Breastfeeding
4. Multiple Indicator Cluster Survey
5. United Nations, Sustainable Development Goals
6. World Health Organization, Malnutrition
7. Jamaica Survey of Living Conditions
8. Jamaica Health and Lifestyle Survey
9. HIV/AIDS Knowledge, Attitude, Behaviour & Practices Survey (2004, 2008, 2012)
10. PLACE Study (2017)
11. 876 Study (2017)
12. Global School-based Health Survey
13. World Health Organization, Obesity and Overweight
14. World Health Organization Guidelines on Physical Activity and Sedentary Behaviour
15. Reproductive Health Survey (2002, 2008 & 2021)
16. Women's Health Survey
17. Jamaica Health and Lifestyle Survey III (Unpublished Data)

# Risk Factors

Indicators	Unit of Measurement	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
<b>Nutrition</b>													
Incidence of Low Birth Weight among Newborns (<2500g) <sup>1,2</sup>	Per cent	-	9.8	10.4	9.1	10.4	9.1	9.1	9.6	10.0	10.0	11.4	13.5
Early Initiation of Breastfeeding <sup>3</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	62.3	-
Exclusive Breastfeeding Rate 0-5 Months of Age <sup>3</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	15.2	-
Children Under Five Years <sup>4</sup> who are Stunted	Per cent	6.8	5.8	5.7	5.7	-	4.2	5.9	7.3	-	4.5	-	7.0
Male		8.0	6.3	6.0	5.9	-	5.8	7.9	7.3	-	4.8	-	5.7
Female		5.5	5.2	5.3	5.4	-	2.4	3.8	7.3	-	4.3	-	8.3
Children Under Five Years <sup>4</sup> who are Wasted	Per cent	4.0	2.6	2.5	2.6	-	2.2	2.8	3.2	-	5.0	-	4.6
Male		4.0	2.9	2.0	3.0	-	2.1	3.7	3.4	-	4.4	-	4.6
Female		4.0	2.2	2.9	2.3	-	2.4	1.9	3.1	-	5.6	-	4.6
Children Under Five Years <sup>4</sup> who are Underweight	Per cent	5.1	5.8	4.3	5.2	-	5.1	6.4	3.2	-	3.5	-	4.6
Male		4.8	6.1	4.8	5.6	-	5.4	8.0	3.7	-	3.5	-	3.9
Female		5.4	5.5	3.9	4.7	-	7.4	4.8	2.7	-	3.6	-	5.3
Children Under Five Years <sup>4</sup> who are Overweight	Per cent	-	-	4.3	3.8	4.1	5.4	5.0	7.1	-	5.7	-	5.0
Male		-	-	4.3	3.6	3.4	4.8	4.2	5.3	-	5.3	-	6.8
Female		-	-	4.3	3.9	4.8	7.1	5.8	8.8	-	6.0	-	3.2
Anaemia Prevalence in <sup>5</sup> Women of Reproductive Age (15-49 years)	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
<b>Infections</b>													
Prevention of HIV in Key Populations <sup>6,7,8</sup>													
Per cent of women and men with multiple partner in last 12 months who used condom at last sex													
Male (15-49 years)	Per cent	-	-	-	-	-	-	-	-	-	66.9	-	-
Female (15-49 years)		-	-	-	-	-	-	-	-	-	53.8	-	-
Per cent of sex workers who used condom with most recent clients)		-	-	-	-	-	-	-	-	-	-	-	-
Per cent of MSM who used condom at last sex with male partner		-	-	-	-	-	-	-	-	-	-	-	-
<b>Environmental Risk Factors</b>													
Population Using Safely Managed Drinking-water Services <sup>4</sup>	Per cent	-	-	-	-	-	79.8	-	-	-	75.9	-	77.3
<b>Non-communicable Diseases Risk Factors</b>													
Prevalence of Alcohol Use <sup>5</sup> (15-74 years)	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Male		-	-	-	-	-	-	-	-	-	-	-	-
Female		-	-	-	-	-	-	-	-	-	-	-	-

Data Sources:<sup>1</sup> Ministry of Health & Wellness, Policy Planning and Development Division: Estimates Calculated from Hospital Monthly Statistical Report, <sup>2</sup> Ministry of Health & Wellness Annual Report (1996 - 2007), <sup>3</sup> Multiple Indicator Cluster Survey (2005, 2011 & 2021), <sup>4</sup> Jamaica Survey of Living Condition, <sup>5</sup> Jamaica Health and Lifestyle Survey, <sup>6</sup> HIV/AIDS Knowledge, Attitude, Behaviour & Practices Survey (2004, 2008, 2012), <sup>7</sup> PLACE Study (2017), <sup>8</sup> 876 Study (2017), <sup>9</sup> Global School-based Health Survey, <sup>10</sup> Reproductive Health Survey, (2002, 2008 & 2021)

# Risk Factors

2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Nutrition																
11.3	11.7	12.1	13.9	12.8	11.3	10.4	10.4	9.3	9.5	9.6	11.0	11.2	10.7	11.6	14.0	13.6
-	-	-	-	64.7	-	-	-	-	-	-	-	-	-	-	-	-
-	-	-	-	23.8	-	-	-	-	-	-	-	-	-	-	33.0	-
5.7	6.2	-	6.7	-	-	-	6.2	-	7.9	-	4.1	-	-	-	-	-
4.8	7.3	-	7.5	-	-	-	8.7	-	8.5	-	6.0	-	-	-	-	-
6.7	5.0	-	6.9	-	-	-	3.3	-	7.3	-	1.9	-	-	-	-	-
2.7	3.1	-	6.7	-	-	-	3.6	-	3.2	-	3.3	-	-	-	-	-
2.6	3.1	-	7.4	-	-	-	3.5	-	3.6	-	3.4	-	-	-	-	-
2.6	3.1	-	6.0	-	-	-	3.7	-	2.7	-	3.2	-	-	-	-	-
1.9	3.0	-	4.3	-	-	-	2.3	-	2.8	-	2.6	-	-	-	-	-
1.7	3.5	-	5.7	-	-	-	2.9	-	4.0	-	4.4	-	-	-	-	-
2.3	2.4	-	2.9	-	-	-	1.7	-	1.4	-	0.7	-	-	-	-	-
7.1	5.8	-	3.4	-	-	-	8.5	-	7.3	-	5.9	-	-	-	-	-
6.4	5.5	-	3.0	-	-	-	8.1	-	7.3	-	6.0	-	-	-	-	-
8.0	6.1	-	3.8	-	-	-	8.9	-	7.3	-	5.8	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	28.5	-	-	-	-	-	-
Infections																
-	66.4	-	-	-	-	-	-	-	-	-	-	-	-	77.6	-	-
-	52.1	-	-	-	-	-	-	-	-	-	-	-	-	50.8	-	-
-	-	-	-	-	-	-	-	-	-	76.6	-	-	-	-	-	-
-	-	-	-	75.5	-	-	-	-	-	65.4	-	-	-	-	-	-
Environmental Risk Factors																
78.7	80.9	81.3	77.4	-	81.3	81.4	79.7	80.1	-	-	-	76.6	-	75.2	-	-
Non-Communicable Diseases Risk Factors																
-	68.2	-	-	-	-	-	-	-	-	60.7	-	-	-	-	-	-
-	84.1	-	-	-	-	-	-	-	-	75.5	-	-	-	-	-	-
-	53.0	-	-	-	-	-	-	-	-	46.6	-	-	-	-	-	-

Data Sources: <sup>1</sup>Ministry of Health & Wellness, Policy Planning and Development Division: Estimates Calculated from Hospital Monthly Statistical Report, <sup>2</sup>Ministry of Health & Wellness Annual Report (1996 - 2007), <sup>3</sup>Multiple Indicator Cluster Survey, Jamaica Survey of Living Conditions, <sup>4</sup>Jamaica Health and Lifestyle Survey, <sup>5</sup>HIV/AIDS Knowledge, Attitude, Behaviour & Practices Survey (2004, 2008, 2012), <sup>6</sup>PLACE Study (2017), <sup>7</sup>876 Study (2017), <sup>8</sup>Global School-based Health Survey, Reproductive Health Survey, (2002, 2008 & 2021), <sup>9</sup>Women's Health Survey, <sup>10</sup>Jamaica Health and Lifestyle Survey III (Unpublished data), <sup>11</sup>MOHW Annual Report (1996 - 2007)

# Risk Factors

Indicators	Unit of Measurement	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Prevalence of Alcohol Use <sup>9</sup> in Students (13-17 years)	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
<i>Male</i>		-	-	-	-	-	-	-	-	-	-	-	-
<i>Female</i>		-	-	-	-	-	-	-	-	-	-	-	-
Prevalence of Tobacco <sup>5</sup> Use (15+ years)	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
<i>Male</i>		-	-	-	-	-	-	-	-	-	-	-	-
<i>Female</i>		-	-	-	-	-	-	-	-	-	-	-	-
Prevalence of Tobacco <sup>9</sup> Use in Students (13-17 years)	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
<i>Male</i>		-	-	-	-	-	-	-	-	-	-	-	-
<i>Female</i>		-	-	-	-	-	-	-	-	-	-	-	-
Salt Intake <sup>5</sup>	Grams	-	-	-	-	-	-	-	-	-	-	-	-
Raised Blood Pressure <sup>5</sup> among Adults (15 - 74 years)	Percent	-	-	-	-	-	-	20.8	-	-	-	-	-
<i>Male</i>		-	-	-	-	-	-	19.9	-	-	-	-	-
<i>Female</i>		-	-	-	-	-	-	21.7	-	-	-	-	-
Raised Blood <sup>5</sup> Glucose/Diabetes among Adults (15 - 74 years)	Percent	-	-	-	-	-	-	7.1	-	-	-	-	-
<i>Male</i>		-	-	-	-	-	-	6.3	-	-	-	-	-
<i>Female</i>		-	-	-	-	-	-	8.0	-	-	-	-	-
Overweight in Adults (15 - <sup>5</sup> 74 years)	Percent	-	-	-	-	-	-	26.1	-	-	-	-	-
<i>Male</i>		-	-	-	-	-	-	21.2	-	-	-	-	-
<i>Female</i>		-	-	-	-	-	-	30.8	-	-	-	-	-
Obesity in Adults (15 - 74 <sup>5</sup> years)	Percent	-	-	-	-	-	-	19.7	-	-	-	-	-
<i>Male</i>		-	-	-	-	-	-	9.0	-	-	-	-	-
<i>Female</i>		-	-	-	-	-	-	30.0	-	-	-	-	-
Insufficient Physical <sup>5</sup> Activity in Adults	Percent	-	-	-	-	-	-	34.4	-	-	-	-	-
<i>Male</i>		-	-	-	-	-	-	27.5	-	-	-	-	-
<i>Female</i>		-	-	-	-	-	-	41.0	-	-	-	-	-
<b>Injuries/Harmful Traditional Practices</b>													
Intimate Partner Violence <sup>10</sup> Prevalence	Percent	-	-	-	-	-	-	-	-	-	-	-	-
Non-partner Sexual <sup>11</sup> Violence Prevalence	Percent	-	-	-	-	-	-	-	-	-	-	-	-
Seat-belt Wearing Rate <sup>12</sup> (15-74 Years)													
<i>Driver</i>	Percent	-	-	-	-	-	-	53.0	-	-	-	-	-
<i>Front seat passenger</i>		-	-	-	-	-	-	-	-	-	-	-	-
Motorcycle Helmet <sup>12</sup> Wearing Rate (15-74 Years)													
<i>Rider</i>	Percent	-	-	-	-	-	-	6.0	-	-	-	-	-

Data Sources: <sup>1</sup>Ministry of Health & Wellness, Policy Planning and Development Division: Estimates Calculated from Hospital Monthly Statistical Report, <sup>2</sup>Ministry of Health & Wellness Annual Report (1996 - 2007), <sup>3</sup>Multiple Indicator Cluster Survey, <sup>4</sup>Jamaica Survey of Living Conditions, <sup>5</sup>Jamaica Health and Lifestyle Survey, <sup>6</sup>HIV/AIDS Knowledge, Attitude, Behaviour & Practices Survey (2004, 2008, 2012), <sup>7</sup>PLACE Study (2017), <sup>8</sup>76 Study (2017), <sup>9</sup>Global School-based Health Survey, <sup>10</sup>Reproductive Health Survey, (2002, 2008 & 2021), <sup>11</sup>Women's Health Survey, <sup>12</sup>Jamaica Health and Lifestyle Survey III (Unpublished data), <sup>12</sup> MOHW Annual Report (1996 - 2007)

# Risk Factors

2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
-	-	-	-	-	-	-	-	-	-	48.9	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	58.7	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	39.9	-	-	-	-	-	-
-	31.1	-	-	-	-	-	-	-	-	24.2	-	-	-	-	-	-
-	45.1	-	-	-	-	-	-	-	-	39.8	-	-	-	-	-	-
-	18.0	-	-	-	-	-	-	-	-	10.1	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	14.9	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	19.1	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	11.0	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	9.0	-	-	-	-	-	-
-	25.2	-	-	-	-	-	-	-	-	31.5	-	-	-	-	-	-
-	25.0	-	-	-	-	-	-	-	-	30.2	-	-	-	-	-	-
-	25.5	-	-	-	-	-	-	-	-	32.8	-	-	-	-	-	-
-	7.9	-	-	-	-	-	-	-	-	10.2	-	-	-	-	-	-
-	6.4	-	-	-	-	-	-	-	-	7.7	-	-	-	-	-	-
-	9.3	-	-	-	-	-	-	-	-	12.6	-	-	-	-	-	-
-	26.6	-	-	-	-	-	-	-	-	25.1	-	-	-	-	-	-
-	26.0	-	-	-	-	-	-	-	-	23.9	-	-	-	-	-	-
-	27.1	-	-	-	-	-	-	-	-	26.2	-	-	-	-	-	-
-	25.2	-	-	-	-	-	-	-	-	28.9	-	-	-	-	-	-
-	12.3	-	-	-	-	-	-	-	-	14.8	-	-	-	-	-	-
-	37.5	-	-	-	-	-	-	-	-	42.0	-	-	-	-	-	-
-	38.4	-	-	-	-	-	-	-	-	34.7	-	-	-	-	-	-
-	29.2	-	-	-	-	-	-	-	-	26.5	-	-	-	-	-	-
-	34.4	-	-	-	-	-	-	-	-	42.9	-	-	-	-	-	-
Injuries/Harmful Traditional Practices																
-	16.9	-	-	-	-	-	-	-	-	-	-	-	-	17.1	-	-
-	-	-	-	-	-	-	-	-	3.0	-	-	-	-	-	-	-
-	39.8	-	-	-	-	-	-	-	-	44.6	-	-	-	-	-	-
-	40.1	-	-	-	-	-	-	-	-	37.8	-	-	-	-	-	-
-	4.0	-	-	-	-	-	-	-	-	8.4	-	-	-	-	-	-

Data Sources:<sup>1</sup>Ministry of Health & Wellness, Policy Planning and Development Division: Estimates Calculated from Hospital Monthly Statistical Report, <sup>2</sup>Ministry of Health & Wellness Annual Report (1996 - 2007), <sup>3</sup>Multiple Indicator Cluster Survey, <sup>4</sup>Jamaica Survey of Living Condition, <sup>5</sup>Jamaica Health and Lifestyle Survey, <sup>6</sup>HIV/AIDS Knowledge, Attitude, Behaviour & Practices Survey (2004, 2008, 2012), <sup>7</sup>PLACE Study (2017), <sup>8</sup>76 Study (2017), <sup>9</sup>Global School-based Health Survey, <sup>10</sup>Reproductive Health Survey, (2002, 2008 & 2021), <sup>11</sup>Women's Health Survey, <sup>12</sup>Jamaica Health and Lifestyle Survey III (Unpublished data), <sup>12</sup> MOHW Annual Report (1996 - 2007)

# Service Coverage

Service coverage indicators measure the proportion of people receiving the health services they need and that using these health services does not cause financial hardship such as HIV care coverage and antenatal care coverage.

## Reproductive, Maternal, Newborn, Child & Adolescent Health

- Proportion of Births Attended by Skilled Health Personnel
- Antenatal Care Coverage
- Contraceptive Prevalence Rate (15 - 49 years)
- Unmet Need for Family Planning (15 - 44 years)
- Women (15 - 49 years) Accessing Prenatal Care in the First Trimester

## Immunization

- Immunization Coverage Rate by Vaccine for each Vaccine in the National Schedule

## HIV/TB

- People Living with HIV who Know their Status
- HIV Viral Load Suppression
- Antiretroviral Therapy (ART) Coverage
- Prevention of Mother-to-Child Transmission
- 95-95-95 Target
- Per cent TB Patient with Known HIV Status
- Per cent of all Registered TB Patients who had Documented HIV Status Recorded who are HIV-positive
- Per cent of HIV-positive TB Patients on ART

## Screening & Preventative Care

- Cervical Cancer Screening (30 - 49 years)
- Breast Cancer Screening (40 years and older)
- Prostate Cancer Screening (40 years and older)

# Reproductive, Maternal, Newborn, Child & Adolescent Health

## Proportion of Births Attended by Skilled Health Personnel

The proportion of births attended by skilled health personnel is a key indicator towards achieving SDG target 3.1, which aims to reduce the global maternal mortality ratio to less than 70 per 100,000 live births.<sup>1</sup>

In 2021, 99.8% of births were attended by skilled healthcare personnel, including nurses, doctors, and midwives in Jamaica, an increase from 83.3% in 1997.<sup>2</sup>

## Antenatal Care Coverage

In 2021, 83.6% of Jamaican women who gave birth received antenatal care at least four times from a healthcare provider, compared to 87.0% in 2008.<sup>3,4</sup>

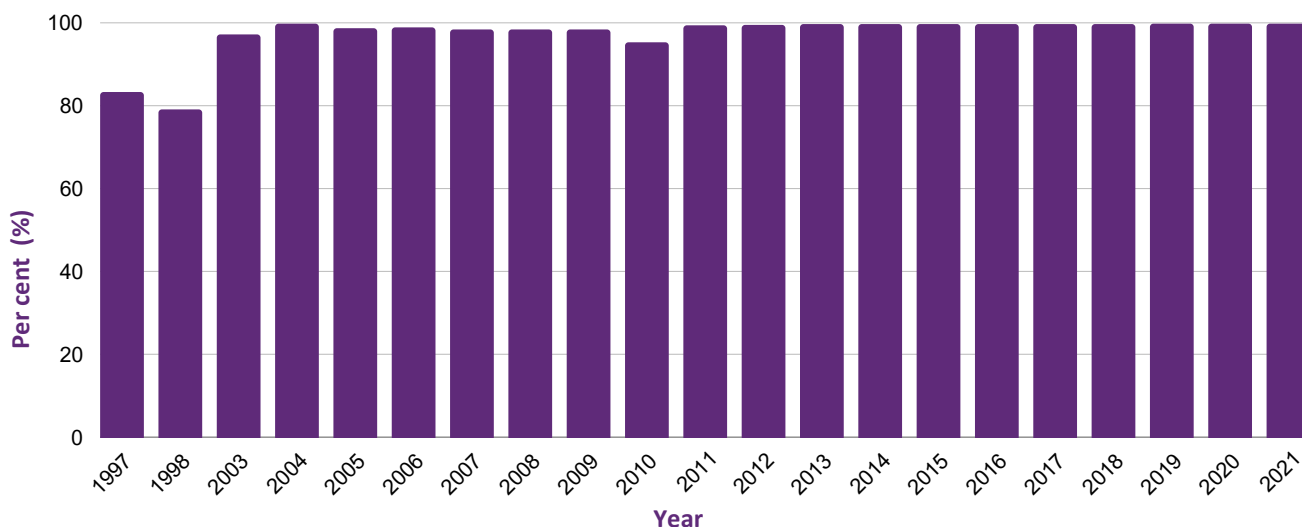
## Contraceptive Prevalence Rate (15 - 49 years)

Between 1997 and 2021, the highest recorded contraceptive prevalence was 72.5% in 2008, and the lowest was 60.6% in 2021. In 1997, 65.9% of Jamaican women who were married or in other partnered relationships reported that they or their partner currently use a method of contraception.<sup>3</sup>

## Unmet Need for Family Planning (15 - 44 years)

The proportion of Jamaican women with unmet family planning needs was 7.2% in 2021, a decrease from 9.0% in 1997. This indicator measures the percentage of women who are in unions, fertile and sexually active but are not using any modern method of contraception.<sup>3</sup>

Proportion of Births Attended by Skilled Health Personnel In Jamaica, 1997 - 2021





## Women (15 - 49 years) Accessing Prenatal Care in the First Trimester

In 2021, 47.2% of Jamaican women accessed prenatal care services such as routine health checks, nutrition counselling, ultrasound scans and blood tests for anaemia and sexually transmitted infections in the first trimester of pregnancy. This is a decrease from 60.6% in 2008.<sup>3</sup>




# Immunization

## Immunization Coverage Rate by Vaccine for each Vaccine in the National Schedule

A key aspect of SDG target 3.b is to enhance access to affordable essential medicines and vaccines. This involves tracking the percentage of the target population that receives all vaccines included in the national programme.<sup>1</sup>

Jamaica established the Expanded Programme on Immunization (EPI) in 1978. The programme aims to achieve greater than 95.0% coverage for all recommended vaccines. Jamaica successfully eliminated poliomyelitis in 1982, measles in 1991 and rubella in 2000, while the last case of congenital rubella syndrome was recorded in 1998.<sup>5</sup>



# Jamaica's Immunization Schedule

AGE OF CHILD	TYPE OF VACCINE GIVEN		
Birth	BCG		
6 weeks	1st Polio	1st DPT/Hepatitis B/Hib (Pentavalent)	
3 months	2nd Polio	2nd DPT/Hepatitis B/Hib (Pentavalent)	
6 months	3rd Polio	3rd DPT/Hepatitis B/Hib (Pentavalent)	
12 Months	1st MMR		
18 months	2nd MMR	1st Booster Polio	1st Booster DPT
FOR ENTRY TO NURSERY AND BASIC SCHOOL, ALL THE ABOVE VACCINES ARE NECESSARY			
4-6 Years	2nd Booster Polio	2nd Booster DPT	
FOR ENTRY TO PRIMARY SCHOOL, ALL THE ABOVE VACCINES ARE NECESSARY			

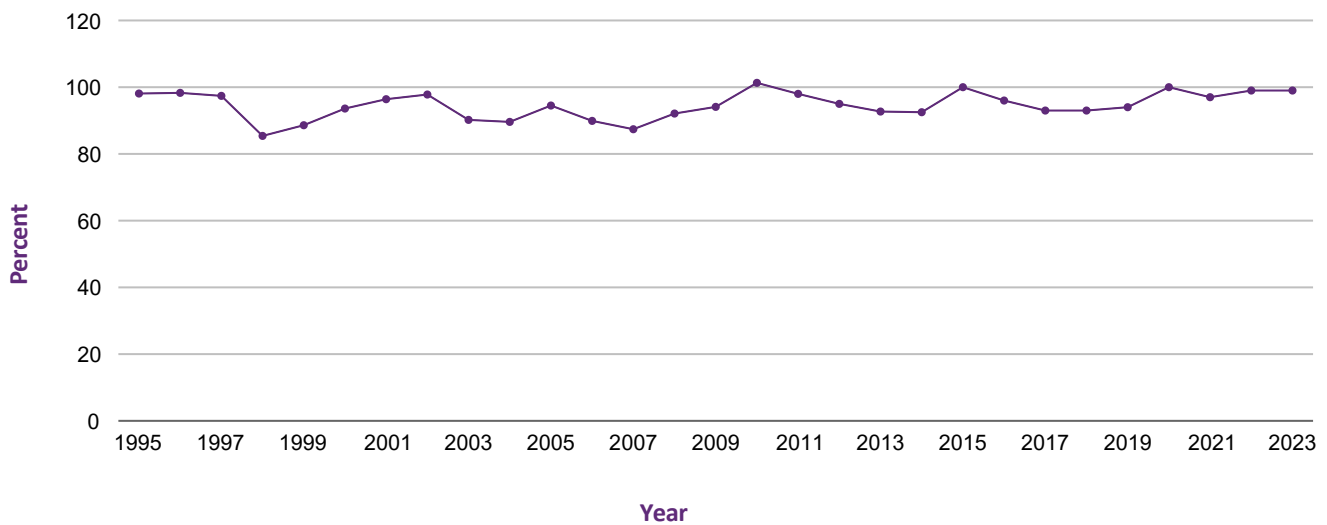
## BCG Immunization Coverage for Children Under 1-Year-Old

Bacille Calmette–Guérin (BCG) vaccine protects against tuberculosis (TB). In 1995, BCG immunization coverage for children under one-year-old was 98.1% and 99.0% in 2023. During the period, BCG coverage was 100% in 2010, 2015 and 2020.<sup>6,7</sup>

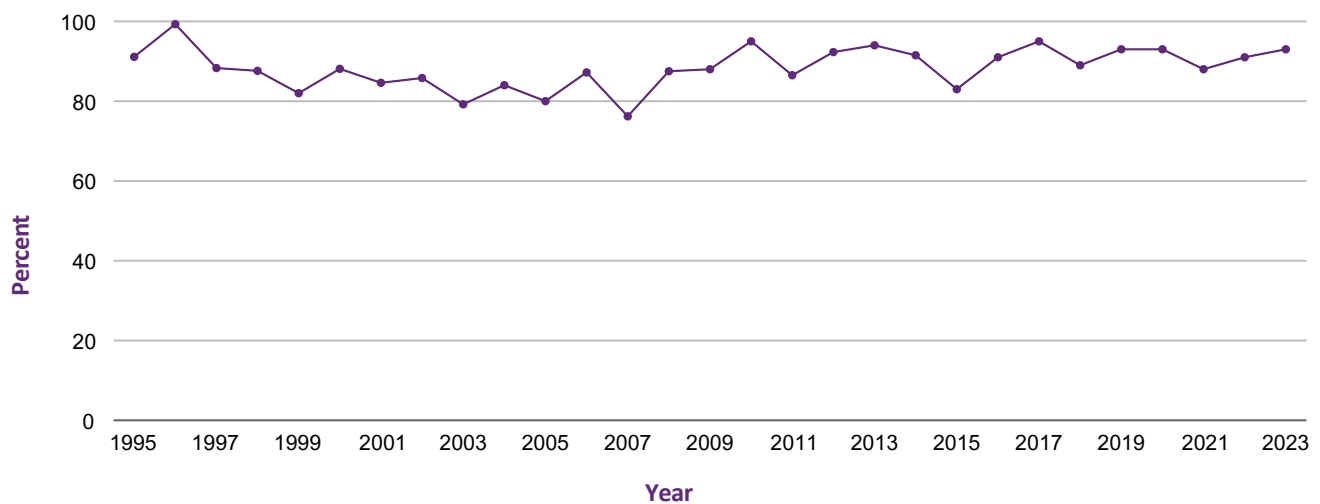
## MMR1 Immunization Coverage of 1-Year-Old

The measles-mumps-rubella (MMR) vaccine protects against three diseases: measles, mumps, and rubella. Between 1995 and 2023, MMR1 coverage among one-year-olds exceeded 95% in 1996, 2010 and 2017. In 2023, MMR1 coverage was 93.0%.<sup>6,7</sup>

### BCG Immunization Coverage for Children Under 1-Year-Old in Jamaica, 1995 - 2023



### MMR1 Immunization Coverage of 1-Year-Old in Jamaica, 1995 - 2023



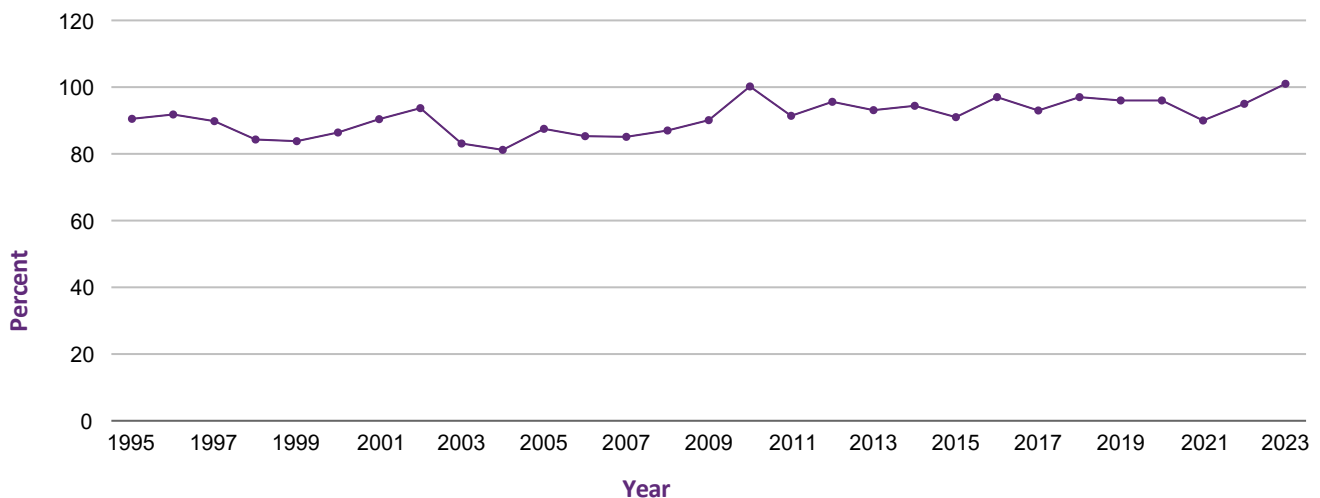
## DPT3 Immunization Coverage for Children Under 1-Year-Old

The diphtheria, pertussis, and tetanus toxoid (DPT3) vaccine prevents diphtheria, pertussis (whooping cough), and tetanus. In 1995, DPT3 coverage among children under one year old was 90.5%. Jamaica first exceeded the 95% target in 2010 with 100% coverage. In 2023, DPT3 coverage was 100%.<sup>6,7</sup>

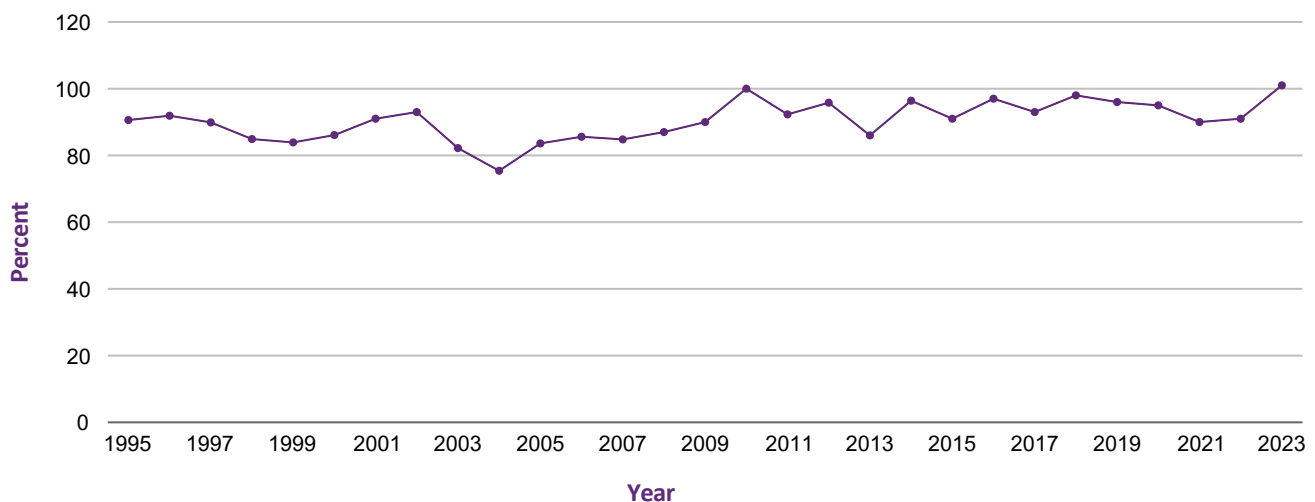
## Polio-3 Immunization Coverage for Children Under 1-Year-Old

The poliomyelitis (Polio-3) vaccine is given to prevent poliomyelitis. Polio-3 coverage among children under one-year-old first exceeded the 95% target in 2010, with 100% coverage. Since then, the target was exceeded in 2012, 2014, 2016, 2018, 2019 and 2020. In 2023, Polio-3 coverage was 100%.<sup>6,7</sup>

**DPT3 Immunization Coverage for Children Under 1-Year-Old in Jamaica, 1995 - 2023**



**Polio-3 Immunization Coverage for Children Under 1-Year-Old in Jamaica, 1995 - 2023**



# HIV and TB

## People Living with HIV who Know their Status

In 2023, an estimated 91.0% of Jamaicans living with HIV were aware of their status compared to 69.0% in 2010. Jamaicans who are aware of their status can access the necessary HIV care and treatment services and live a healthy life.<sup>8</sup>

## HIV Viral Load Suppression

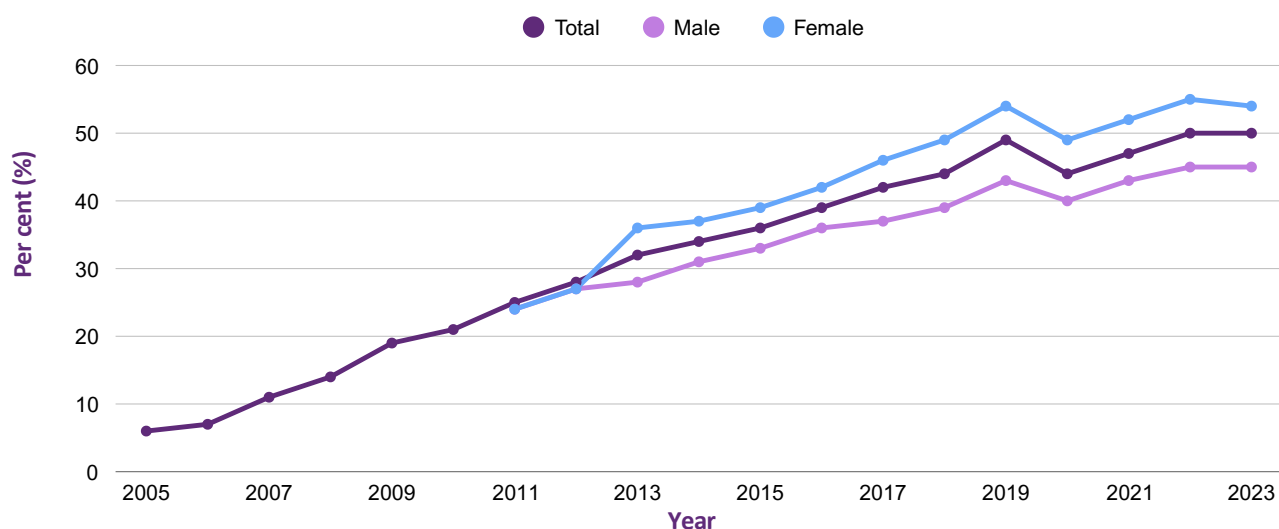
Persons living with HIV can lower their viral load to undetectable levels if they consistently take their HIV medication. Between 2010 and 2022, the proportion of persons living with HIV who attained viral suppression increased from 12.0% to 45.0%. However, by 2023, this decreased to 39.0%. During this period, females 15 years and older had a higher HIV viral load suppression rate than males 15 years and older.<sup>8</sup>

## Antiretroviral Therapy (ART) Coverage

In 2023, 50.0% of Jamaicans living with HIV were on antiretroviral therapy (ART). This was an increase from 6.0% in 2005. Over the years ART coverage was higher in women. In 2023, ART coverage in females was 54.0% and 45.0% in males.<sup>8</sup>



Antiretroviral Therapy (ART) Coverage in Jamaica, 2005 -2023

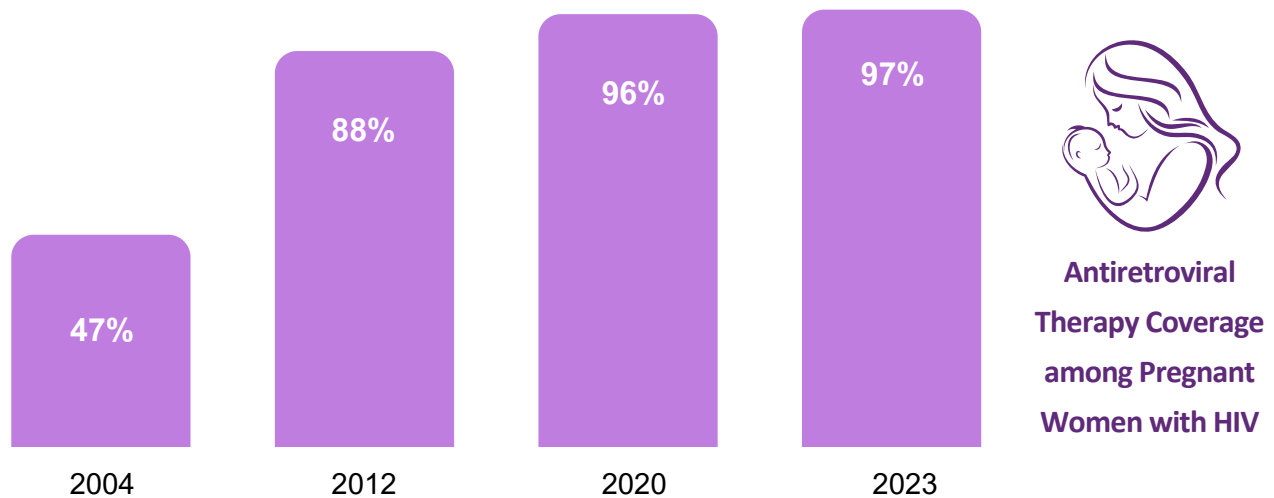


## Prevention of Mother-to-Child Transmission

To prevent the transmission of HIV from mother to child, pregnant women with HIV are given ART and are provided an alternative option to breastfeeding. Antiretroviral therapy coverage among pregnant women increased from 47.0% in 2004 to 97.0% in 2023.<sup>8</sup>

## Incidence of HIV-infected Infants

Regular screening and interventions, such as providing ART to reduce viral load and implementing safe delivery practices, can reduce the transmission of HIV from mother to child. From 2017 to 2023, the incidence of HIV-infected infants has declined from 0.3 per 1,000 live births to 0.1 per 1,000 live births.<sup>8</sup>



## 95-95-95 Target

The 95-95-95 target set by the UNAIDS aims for 95% of individuals with HIV to be aware of their HIV status, 95% of those diagnosed to undergo continuous antiretroviral therapy, and 95% of those on antiretroviral therapy to achieve viral suppression by the year 2030.<sup>9</sup>

At the end of 2023, of the estimated number of persons living with HIV in Jamaica, 91.0% were aware of their status. Of that number, 54.0% were on ART, and of those on ART, 79.0% were virally suppressed.<sup>8</sup>

## Per cent TB Patient with Known HIV Status

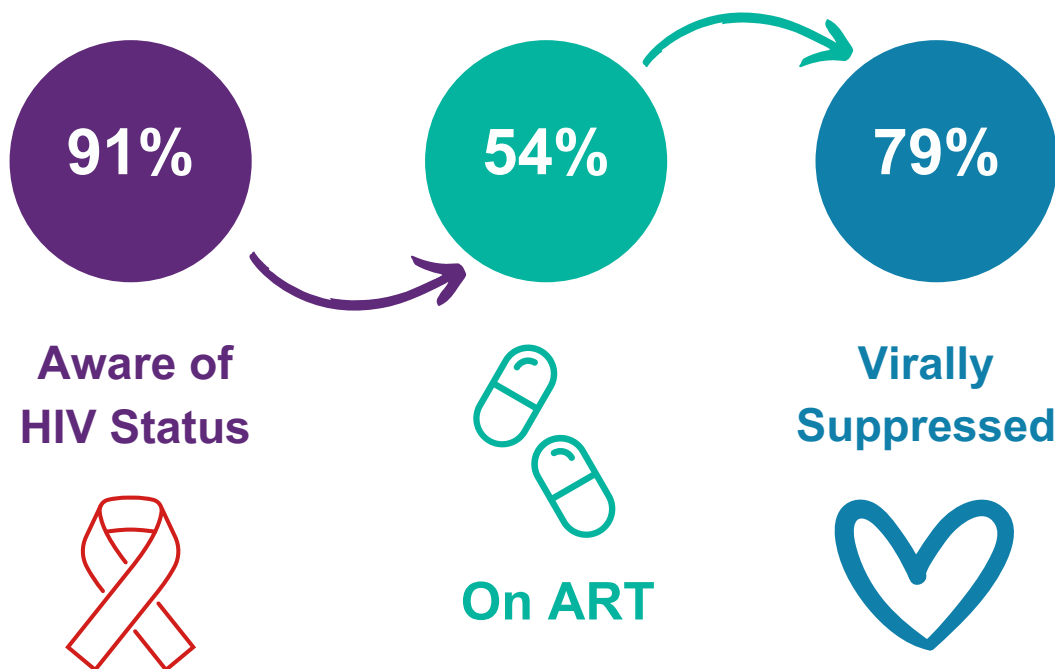
In 2023, 96.0% of new and relapse TB patients had an HIV test result recorded in a TB registry compared to 87.2% in 2014.<sup>10</sup>

## Per cent of all Registered TB Patients who had Documented HIV Status Recorded who are HIV-positive

Of the 96.0% of TB patients with a recorded HIV test result in 2023, 17.0% were HIV positive.<sup>10</sup>

## Per cent of HIV-positive TB Patients on ART

In 2023, 81% of HIV-positive TB patients were on ART while being treated for TB.<sup>10</sup>



## 95-95-95 Target, Jamaica, 2023



# Screening & Preventative Care

## Cervical Cancer Screening (30 - 49 years)

Cervical cancer is one of the most common gynaecological cancers among Jamaican women. In 2020, there were a reported 386 new cases of cervical cancer.<sup>12</sup>

There are two main screening methods for cervical cancer: pap smears and human papillomavirus (HPV) tests. In 2017, among Jamaican women aged 30-49 years, 51.9% reported having done a pap smear in less than three years while 34.2% reported that the last time they did a pap smear was over three years ago.<sup>11</sup>

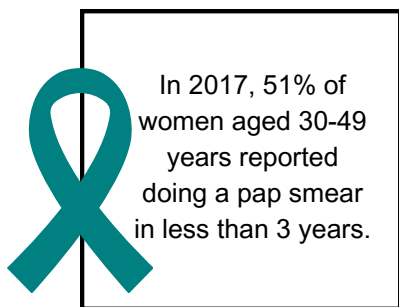
## Breast Cancer Screening (40 years and older)

In 2017, 7.9% of Jamaican women 40 years and older reported doing a mammogram less than a year ago. While 28.1% reported doing a mammogram over one year.<sup>11</sup>

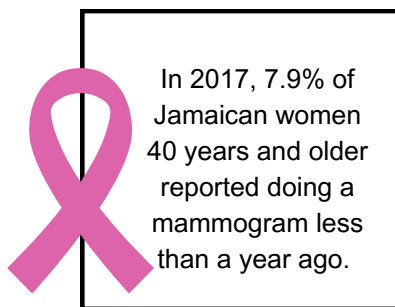
## Prostate Cancer Screening (40 years and older)

It is recommended that Jamaican males screen for prostate cancer annually beginning at age 40. Prostate cancer screening can be done by testing for prostate-specific antigen (PSA) levels or by digital rectal exam (DRE). Testing for PSA levels in the blood is the preferred screening method for prostate cancer in Jamaica.<sup>13</sup>

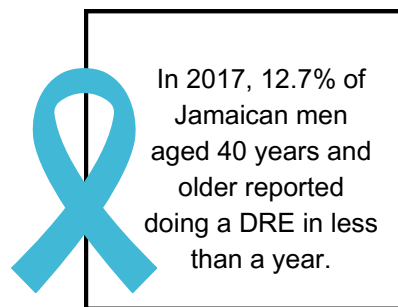
In 2017, 78.7% of Jamaican men aged 40 years and older reported that they had ever done a PSA blood test to screen for prostate cancer. In that same year, 12.7% of Jamaican men aged 40 years and older reported doing a DRE in less than a year.<sup>11</sup>



**Cervical Cancer Screening**



**Breast Cancer Screening**



**Prostate Cancer Screening**

## Technical Notes

The HIV indicator estimates (**people living with HIV who know their status, prevention of mother-to-child transmission, antiretroviral therapy coverage, HIV viral load suppression and 95-95-95 target**) were produced by UNAIDS. These were calculated using local data.

## Data Sources

1. United Nations, Sustainable Development Goals
2. Registrar General's Department (Numerator), Statistical Institute of Jamaica (Denominator)
3. Reproductive Health Survey (2002, 2008 & 2021)
4. Multiple Indicator Cluster Survey
5. Case Study: Checking Vaccination Status at Entry to, or During School
6. Economic & Social Survey Jamaica
7. Ministry of Health & Wellness, Family Health Unit
8. Ministry of Health & Wellness, HIV/STI/TB Unit (HIV Programmatic Data)
9. Science Centers for Diseases Control and Prevention, Enhancing Public Health
10. Ministry of Health & Wellness, National Surveillance Unit: Estimates Calculated from TB Report (2008-2023)
11. Jamaica Health and Lifestyle Survey III (Unpublished data)
12. Ministry of Health & Wellness, Non-communicable Disease & Injury Prevention Control
13. Jamaica Cancer Society



# Service Coverage

Indicators	Unit of Measurement	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
<b>Reproductive, Maternal, Newborn, Child &amp; Adolescent Health</b>													
Proportion of Births <sup>1</sup> Attended by Skilled Health Personnel	Per cent	-	-	83.3	79.1	-	-	-	-	97.2	99.8	98.7	98.9
Antenatal Care Coverage <sup>2,3</sup> (at least 4 visits)	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Contraceptive Prevalence <sup>2</sup> Rate (15 - 49 years)	Per cent	-	-	65.9	-	-	-	-	69.1	-	-	-	-
Unmet Need for Family <sup>2</sup> Planning (15 - 44 years)	Per cent	-	-	9.0	-	-	-	-	8.5	-	-	-	-
Women (15 - 49 years) <sup>2</sup> Accessing Prenatal Care in the First Trimester	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
<b>Immunization</b>													
Immunization Coverage <sup>4,5</sup> Rate by Vaccine for each Vaccine in the National Schedule													
Immunization coverage of 1 year old (%), MMR1	Per cent	91.1	99.3	88.3	87.6	82.0	88.1	84.6	85.8	79.2	84.0	80.0	87.2
Immunization coverage of under-1 year old (%), BCG		98.1	98.3	97.4	85.4	88.6	93.6	96.4	97.8	90.2	89.6	94.5	89.9
Immunization coverage of under-1 year old (%), DTP3		90.5	91.8	89.8	84.3	83.8	86.4	90.4	93.7	83.1	81.2	87.5	85.3
Immunization coverage of under-1 year old (%), Polio-3		90.6	91.9	89.9	84.9	83.9	86.1	91.0	93.0	82.2	75.4	83.6	85.6
<b>HIV</b>													
People Living with HIV who <sup>6</sup> Know their Status	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Male (15+)		-	-	-	-	-	-	-	-	-	-	-	-
Female (15+)		-	-	-	-	-	-	-	-	-	-	-	-
HIV Viral Load suppression <sup>6</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Male (15+)		-	-	-	-	-	-	-	-	-	-	-	-
Female (15+)		-	-	-	-	-	-	-	-	-	-	-	-
Antiretroviral Therapy <sup>6</sup> (ART) Coverage	Per cent	-	-	-	-	-	-	-	-	-	-	6.0	7.0
Male (15+)		-	-	-	-	-	-	-	-	-	-	-	-
Female (15+)		-	-	-	-	-	-	-	-	-	-	-	-
Prevention of Mother-to- <sup>6</sup> Child Transmission	Per cent	-	-	-	-	-	-	-	-	-	47.0	65.0	85.0
Incidence of HIV-infected infants	Per 1000 live births	-	-	-	-	-	-	-	-	-	-	-	-
95-95-95 Target <sup>6</sup>													
95 % PLHIV who know their status	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
95% of PLHIV who know their status to be on ART		-	-	-	-	-	-	-	-	-	-	-	-
95% of PLHIV on ART to be virally suppressed		-	-	-	-	-	-	-	-	-	-	-	-

Data Sources: <sup>1</sup>Registrar General's Department(Numerator), Statistical Institute of Jamaica (Denominator), <sup>2</sup>Reproductive Health Survey, (2002, 2008 & 2021), <sup>3</sup>Multiple Indicator Cluster Survey, <sup>4</sup>Economic & Social Survey Jamaica (ESSJ), <sup>5</sup>Ministry of Health & Wellness: Family Health Unit, <sup>6</sup>Ministry of Health & Wellness: HIV/STI/TB Unit (HIV Programmatic Data), <sup>7</sup>Ministry of Health & Wellness, National Surveillance Unit: Estimates Calculated from TB report (2008-2023), <sup>8</sup>Jamaica Health and Lifestyle Survey III (Unpublished data)

# Service Coverage

2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Reproductive, Maternal, Newborn, Child & Adolescent Health																
98.4	98.4	98.4	95.3	99.4	99.5	99.7	99.7	99.7	99.7	99.7	99.7	99.8	99.8	99.8	-	-
-	87.0	-	-	85.6	-	-	-	-	-	-	-	-	-	83.6	-	-
-	72.5	-	-	-	-	-	-	-	-	-	-	-	-	60.6	-	-
-	7.2	-	-	-	-	-	-	-	-	-	-	-	-	7.2	-	-
-	60.6	-	-	-	-	-	-	-	-	-	-	-	-	47.2	-	-
Immunization																
76.2	87.5	88.0	95.0	86.5	92.3	94.0	91.5	83.0	91.0	95.0	89.0	93.0	93.0	88.0	91.0	93.0
87.4	92.1	94.1	101.3	98.0	95.0	92.7	92.5	100.0	96.0	93.0	93.0	94.0	100.0	97.0	99.0	99.0
85.1	87.0	90.1	100.2	91.4	95.6	93.1	94.4	91.0	97.0	93.0	97.0	96.0	96.0	90.0	95.0	101.0
84.8	87.0	90.0	100.0	92.3	95.8	86.0	96.4	91.0	97.0	93.0	98.0	96.0	95.0	90.0	91.0	101.0
HIV																
-	-	-	69.0	73.0	77.0	79.0	82.0	84.0	87.0	89.0	90.0	93.0	95.0	93.0	92.0	91.0
-	-	-	-	69.0	73.0	76.0	79.0	82.0	85.0	88.0	88.0	91.0	94.0	92.0	92.0	90.0
-	-	-	-	79.0	83.0	85.0	87.0	89.0	91.0	93.0	93.0	96.0	98.0	95.0	94.0	91.0
-	-	-	12.0	14.0	16.0	19.0	22.0	23.0	24.0	28.0	32.0	38.0	37.0	47.0	45.0	39.0
-	-	-	-	14.0	16.0	17.0	20.0	21.0	23.0	25.0	29.0	34.0	33.0	43.0	41.0	35.0
-	-	-	-	14.0	16.0	22.0	24.0	25.0	27.0	32.0	36.0	43.0	41.0	52.0	50.0	43.0
11.0	14.0	19.0	21.0	25.0	28.0	32.0	34.0	36.0	39.0	42.0	44.0	49.0	44.0	47.0	50.0	50.0
-	-	-	-	24.0	27.0	28.0	31.0	33.0	36.0	37.0	39.0	43.0	40.0	43.0	45.0	45.0
-	-	-	-	24.0	27.0	36.0	37.0	39.0	42.0	46.0	49.0	54.0	49.0	52.0	55.0	54.0
85.0	-	83.0	86.3	49.9	87.8	88.2	86.4	90.0	-	97.0	97.9	97.8	96.0	95.0	97.0	97.0
-	-	-	-	-	-	-	-	-	-	0.3	0.2	0.3	0.1	0.1	0.1	0.1
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	92.0	91.0
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	53.0	54.0
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	77.0	79.0

Data Sources: <sup>1</sup>Registrar General's Department(Numerator), Statistical Institute of Jamaica (Denominator), <sup>2</sup>Reproductive Health Survey, (2002, 2008 & 2021), <sup>3</sup>Multiple Indicator Cluster Survey, <sup>4</sup>Economic & Social Survey Jamaica (ESSJ), <sup>5</sup>Ministry of Health & Wellness: Family Health Unit, <sup>6</sup>Ministry of Health & Wellness: HIV/STI/TB Unit (HIV Programmatic Data), <sup>7</sup>Ministry of Health & Wellness, National Surveillance Unit: Estimates Calculated from TB report (2008-2023), <sup>8</sup>Jamaica Health and Lifestyle Survey III (Unpublished data)

# Service Coverage

Indicators	Unit of Measurement	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
<b>HIV/TB</b>													
Per cent TB Patient with Known HIV Status <sup>7</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Per cent of all Registered TB Patients who had Documented HIV Status Recorded who are HIV-positive <sup>7</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Per cent of HIV-positive TB Patients on ART (Antiretroviral Therapy) <sup>7</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
<b>Screening and Preventive Care</b>													
Cervical Cancer Screening <sup>8</sup> (30 - 49 years)	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Less than 3 years ago		-	-	-	-	-	-	-	-	-	-	-	-
More than 3 years ago		-	-	-	-	-	-	-	-	-	-	-	-
Breast Cancer Screening <sup>8</sup> (40 years and older)	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Less than 1 year		-	-	-	-	-	-	-	-	-	-	-	-
1 year or more		-	-	-	-	-	-	-	-	-	-	-	-
Prostate Cancer Screening <sup>8</sup> (40 years and older)													
Prostate Specific Antigen Test	Per cent	-	-	-	-	-	-	-	-	-	-	-	-
Digital Rectal Exam (DRE)													
Less than 1 year		-	-	-	-	-	-	-	-	-	-	-	-
1 year or more		-	-	-	-	-	-	-	-	-	-	-	-

Data Sources: <sup>1</sup>Registrar General's Department(Numerator), Statistical Institute of Jamaica (Denominator), <sup>2</sup>Reproductive Health Survey, (2002, 2008 & 2021), <sup>3</sup>Multiple Indicator Cluster Survey, <sup>4</sup>Economic & Social Survey Jamaica (ESSJ), <sup>5</sup>Ministry of Health & Wellness: Family Health Unit, <sup>6</sup>Ministry of Health & Wellness: HIV/STI/TB Unit (HIV Programmatic Data), <sup>7</sup>Ministry of Health & Wellness, National Surveillance Unit: Estimates Calculated from TB report (2008-2023), <sup>8</sup>Jamaica Health and Lifestyle Survey III (Unpublished data)

# Service Coverage

2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
HIV/TB																
-	-	-	-	-	-	-	87.2	64.1	54.4	82.6	79.3	66.7	29.5	100.0	69.9	96.0
-	-	-	-	-	-	-	25.3	22.7	50.0	20.0	15.4	14.0	77.8	14.0	17.2	17.0
-	-	-	-	-	-	-	94.7	100.0	89.3	55.0	-	100.0	-	100.0	100.0	81.0
Screening and Preventive Care																
-	-	-	-	-	-	-	-	-	-	70.0	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	51.9	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	34.2	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	31.0	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	7.9	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	28.1	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	78.7	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	12.7	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	27.4	-	-	-	-	-	-

Data Sources: <sup>1</sup>Registrar General's Department(Numerator), Statistical Institute of Jamaica (Denominator), <sup>2</sup>Reproductive Health Survey, (2002, 2008 & 2021), <sup>3</sup>Multiple Indicator Cluster Survey, <sup>4</sup>Economic & Social Survey Jamaica (ESSJ), <sup>5</sup>Ministry of Health & Wellness: Family Health Unit, <sup>6</sup>Ministry of Health & Wellness; HIV/STI/TB Unit (HIV Programmatic Data), <sup>7</sup>Ministry of Health & Wellness, National Surveillance Unit: Estimates Calculated from TB report (2008-2023), <sup>8</sup>Jamaica Health and Lifestyle Survey III (Unpublished data)



# Health Systems

Health systems indicators measure the quality of health services such as diagnostic activities, treatment, care and human resources.

## Quality & Safety of Care

- ART Retention Rate

## Utilization & Access

- Outpatient Service Utilization
- Hospital Bed Density
- Bed Occupancy Rate
- Mean Length of Stay

## Health Workforce

- Health Worker Density

## Health Information

- Birth Registration
- Mortality Garbage
- Ill-defined and Unknown Cause of Death

## Health Financing

- Total Current Expenditure on Health as a % of Gross Domestic Product
- Out-of-Pocket Expenditure as a % of Total Health Expenditure
- General Government Health Expenditure as a % of Total Health Expenditure
- General Government Health Expenditure as a % of GDP
- Private Expenditure on Health as a % of Total Health Expenditure

## Governance

- Existence of National Health Sector Policy/Strategy/Plan

# Quality & Safety of Care

## ART Retention Rate

In 2017, the antiretroviral therapy (ART) retention rate was 79.9% compared to 75.0% in 2000. This rate represents the percentage of adults and children with HIV who are alive and are on ART at 12 months after initiating treatment.<sup>1</sup>



# Utilization & Access

## Outpatient Service Utilization

In 2023, there were 595,654 visits to specialist outpatient departments in public hospitals. This is equivalent to 2,179.9 out of every 10,000 Jamaicans accessing outpatient departments in public healthcare facilities, reflecting an increase from 1,521.0 persons per 10,000 population in 2000.<sup>2</sup>

## Bed Occupancy Rate

The percentage of hospital beds occupied by patients in Jamaica in 2023 was 79.6% compared to 55.0% in 1995.<sup>3,4</sup>

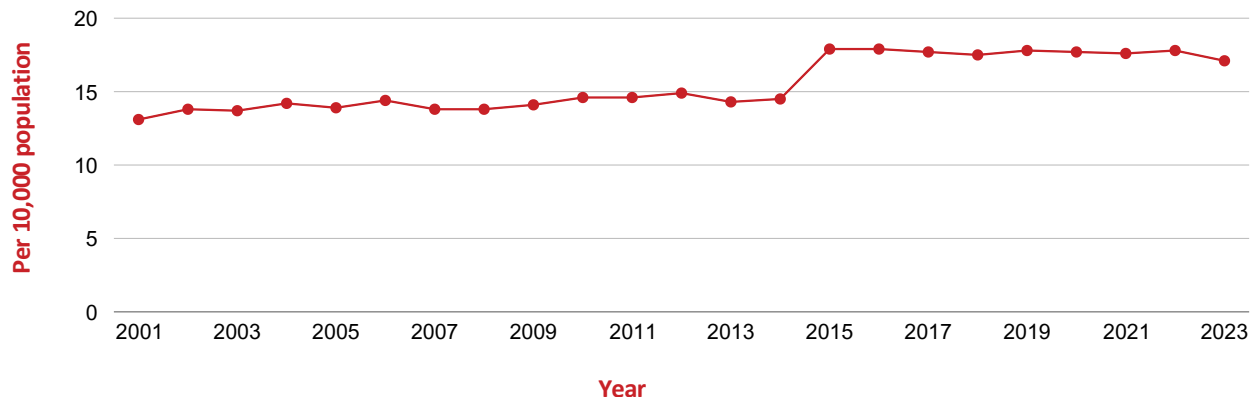
## Mean Length of Stay

In 2023, Jamaicans admitted to public health facilities spent an average of 6.8 days. While in 1995, people spent an average of 5.8 days and 4.9 days in 2000.<sup>3,4</sup>

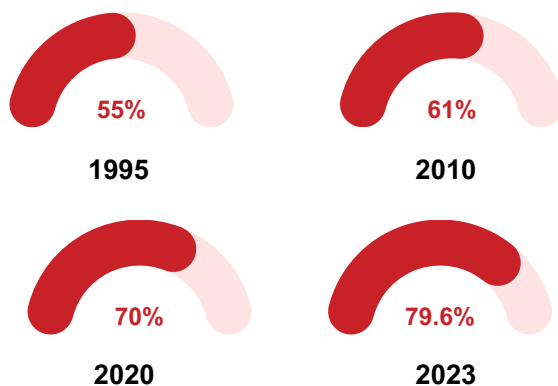
## Hospital Bed Density

In 2023, Jamaica had 17.1 hospital beds per 10,000 population compared to 13.1 beds per 10,000 in 2001. The highest bed density was in 2015 and 2016 at 17.9 beds per 10,000 population.<sup>2</sup>

Hospital Bed Density in Jamaica, 2001 - 2023



Bed Occupancy Rate in Jamaica, 1995 - 2023



Mean Length of Hospital Stay in Jamaica, 1995 - 2023





# Health Workforce

## Health Worker Density

Health worker density is a key indicator for SDG target 3.c., which aims to substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least-developed countries and Small Island Developing States.<sup>5</sup>

Health worker density evaluates whether there are enough healthcare workers to meet the population's healthcare needs and whether these resources are distributed effectively to ensure access to healthcare services in various areas. Health workers include doctors, nurses, and pharmacists.<sup>6</sup>

## Physicians

In 1995, there were 4.4 physicians per 10,000 population, this increased to 17.9 in 2023.<sup>7</sup>

## Nurses

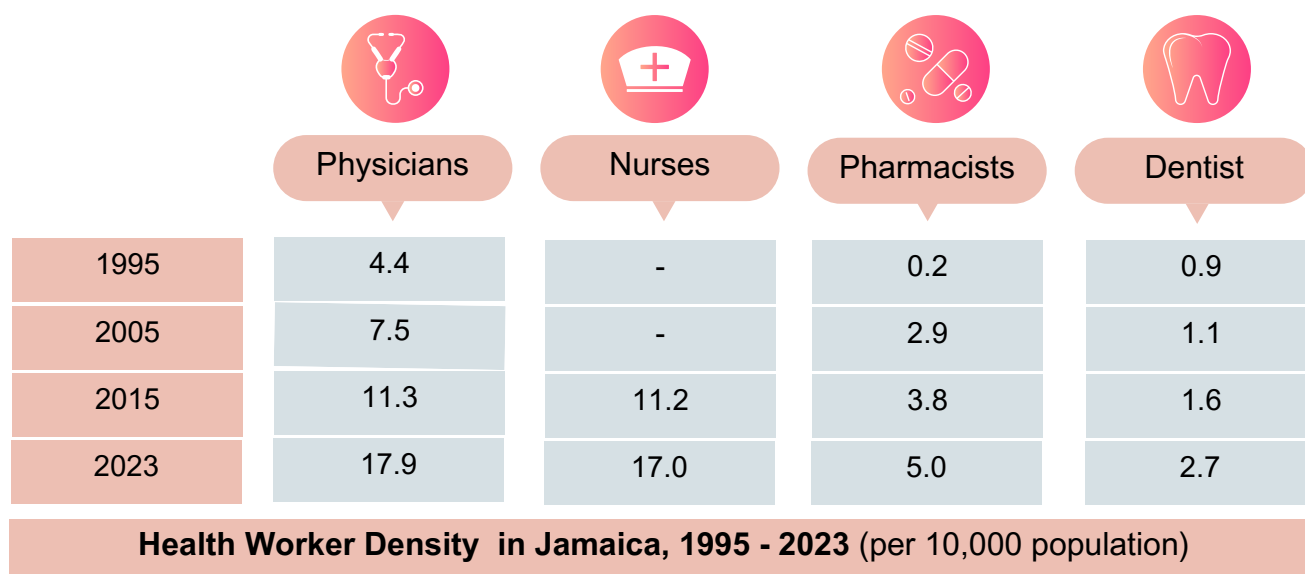
In 2012, there were 10.6 nurses per 10,000 population, this increased to 17.0 in 2023.<sup>8</sup>

## Pharmacists

In 1995, there were 0.2 pharmacists per 10,000 population, this increased to 5.0 in 2023.<sup>9</sup>

## Dentists

In 1995, there were 0.9 dentists per 10,000 population, this increased to 2.7 in 2023.<sup>10</sup>





# Health Information

## Birth Registration

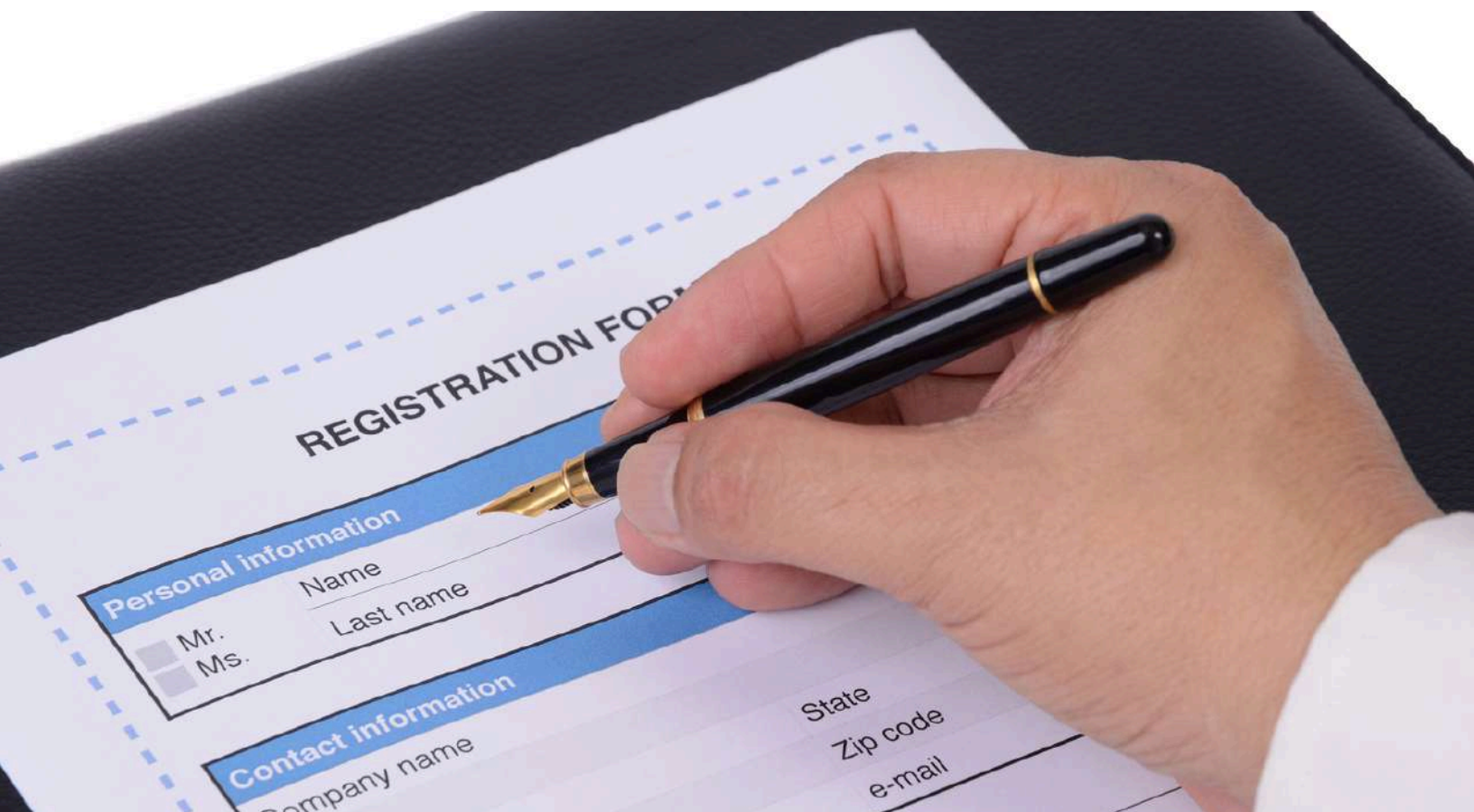
The SDG target 16.9 aims to provide legal identity for all, including birth registration, by 2030.<sup>5</sup> In 2022, 99.1% of Jamaican children under five years old had their births registered with the Registrar General's Department, an increase from 95.2% in 1995.<sup>11,12</sup>

## Mortality Garbage Codes

A garbage code refers to anything marked as a cause of death on a death certificate that cannot kill you. In 2022, 12.9% of such entries were made on death certificates in Jamaica, compared to 16.2% in 2006.<sup>13</sup>

## Ill-defined and Unknown Causes of Death

The International Classification of Diseases (ICD-10) codes R00 - R99 are used to classify deaths in which the underlying cause of death is unknown.<sup>14</sup> During 2022, only 0.4% of deaths that were registered corresponded to ill-defined and unknown causes of death. This is a decrease from 2.7% in 2006.<sup>13</sup>



# Health Financing

## Total Current Expenditure on Health as a % of Gross Domestic Product

Between 2000 and 2022 the highest percentage of gross domestic product expenditure on health care was 8.3% in 2022, an increase from 5.6% in 2000.<sup>15</sup>

## Out-of-Pocket Expenditure as a % of Total Health Expenditure

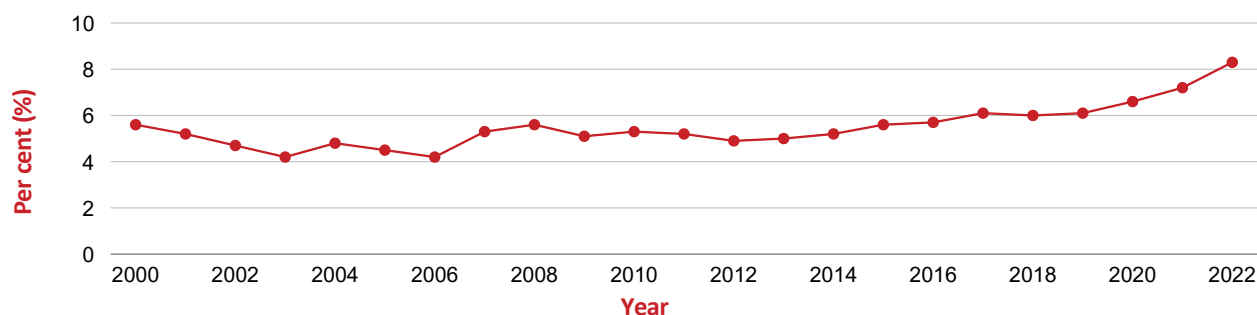
In 2000, approximately 29.6% of health expenditure was out of pocket. In May 2007, Jamaica introduced a no-user fee policy for children under 18 years, which was later extended

to all Jamaicans in April 2008. In 2008, out-of-pocket expenditure was 30.2%,<sup>16</sup> which decreased to 15.8% in 2022.<sup>15</sup>

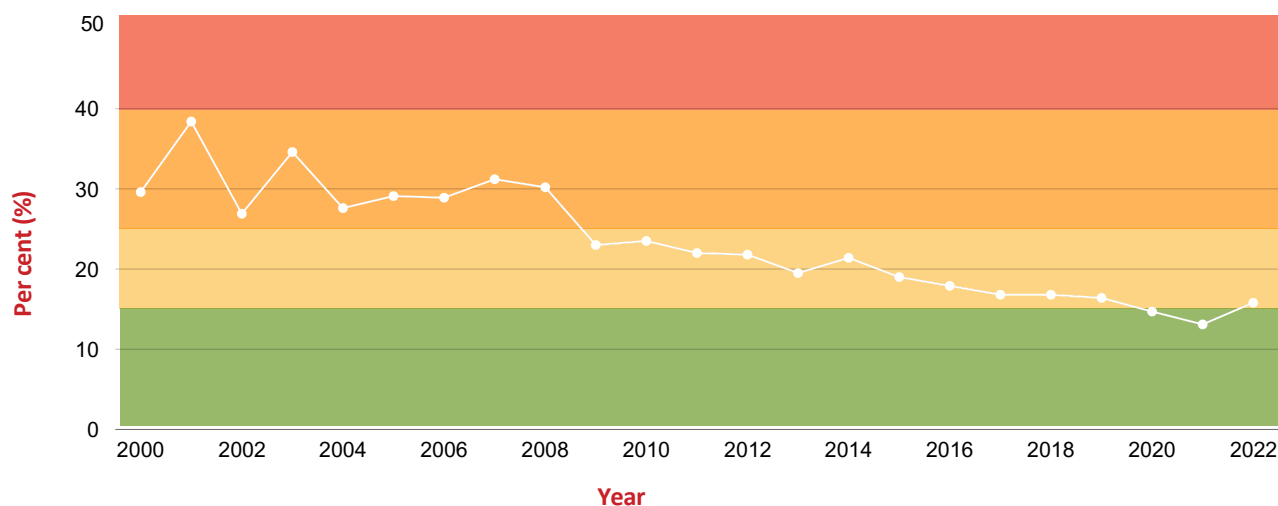
## General Government Health Expenditure as a % of Total Health Expenditure

In 2022, the Jamaican government funded 65.3% of healthcare spending compared to 56.5% in 2000. This includes funding from government budgets, taxes, social insurance contributions, and other government sources.<sup>15</sup>

**Total Current Expenditure on Health as a % of Gross Domestic Product in Jamaica, 2000 - 2022**



**Out-of-Pocket Expenditure as a % of Total Health Expenditure in Jamaica, 2000 - 2022**





## General Government Health Expenditure as a % of GDP

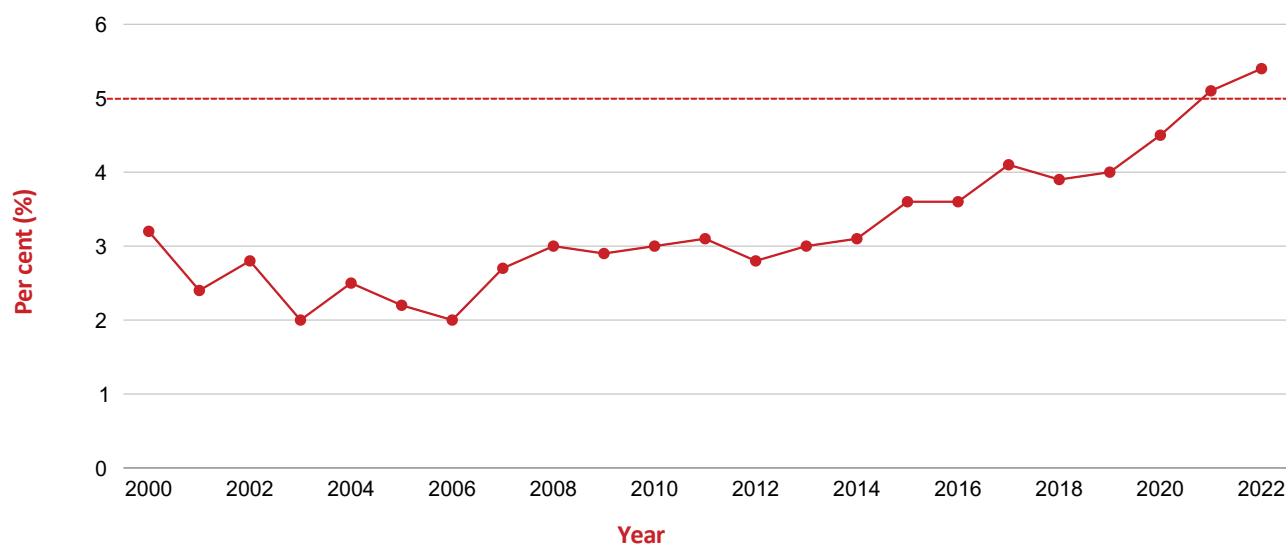
In 2022, 5.4% of government resources were used to fund Jamaica's health expenditure. Government expenditure on health should at least be 5.0% of GDP.<sup>15</sup>

## Private Expenditure on Health as a % of Total Health Expenditure

The percentage of healthcare costs that individuals and private entities pay for out of their own pockets or through private insurance in 2022 was 27.6%, compared to 43.3% in 2000.<sup>15</sup>

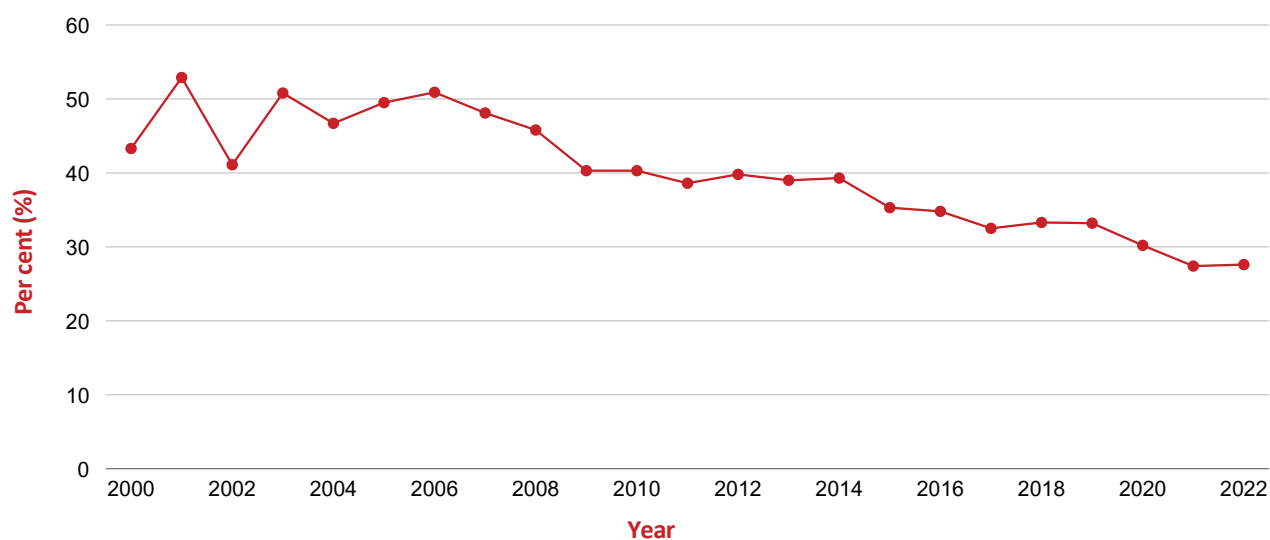
### General Government Health Expenditure as a % of GDP

in Jamaica, 2000 - 2022



### Private Expenditure on Health as a % of Total Health Expenditure

in Jamaica, 2000 - 2022



# Governance

## Existence of National Health Sector Policy/Strategy/Plan

The Ministry of Health and Wellness produces a rolling Strategic Business Plan/Corporate Plan that is submitted annually to the Ministry of Finance and the Public Service (MOFPS) and the Office of the Cabinet in accordance with the Financial Administration and Audit (FAA) Act. In addition, the Health Ministry in 2019 published its Vision for Health 2030 - Ten Year Strategic Plan 2019-2030.

These plans outline the country's goals and objectives for its healthcare system. The Vision for Health 2030 provides a clear and comprehensive roadmap for developing and improving Jamaica's healthcare services. It aims to enhance the quality, accessibility, and sustainability of healthcare, reduce health disparities, and ultimately improve the overall health and well-being of Jamaica's population between 2019 and 2030. The Vision for Health 2030 and the rolling Corporate Plans are highly aligned with Vision 2030 Jamaica and the United Nations, SDGs.<sup>17,18,19</sup>



## Technical Notes

### **Outpatient Service Utilization, Hospital Bed Density and Bed Occupancy Rate:**

The estimates for these indicators represent rates in public health facilities only.

### **Hospital Bed Density:**

The numbers from the previous report have been revised using updated figures obtained from the MOHW, Policy Planning and Development Division.

### **Health Worker Density:**

(1) The density of physicians has been revised. The numbers reported in this publication were calculated using the total number of physicians with local addresses only. The previous report included physicians who had both local and overseas addresses. (2) The density of dentists was revised for 2021-2022. The updated figures were obtained from the Dental Council of Jamaica.

### **Health Finance Indicators:**

Health Financing Indicators were obtained from the WHO National Health Accounts database. These estimates were calculated using data supplied by Jamaica.

## Data Sources

1. Ministry of Health & Wellness, ARV Monitoring Database
2. Ministry of Health & Wellness, Policy Planning and Development Division: Estimates Calculated from Hospital Monthly Statistical Report
3. Economic & Social Survey Jamaica (ESSJ)
4. Ministry of Health & Wellness, Policy Planning and Development Division, Monthly Clinical Summary Report 2006-2022
5. United Nations, Sustainable Development Goals
6. Health Workforce Requirements for Universal Health Coverage and the Sustainable Development Goals
7. Estimates were calculated using data from the Medical Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator)
8. Estimates were calculated using data from the Nursing Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator)
9. Estimates were calculated using data from the Pharmacy Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator)
10. Estimates were calculated using data from the Dental Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator)
11. Jamaica Survey of Living Conditions
12. Multiple Indicator Cluster Survey
13. Numerator (Registrar General's Department), Denominator (STATIN)
14. ICD-10 Version:2019
15. WHO, National Health Accounts (data supplied by Jamaica)
16. Ministry of Health and Wellness, 2018
17. Ministry of Health and Wellness 10-year Strategic Plan
18. Ministry of Health and Wellness Strategic Business Plan
19. Ministry of Health and Wellness, Corporate Plan

# Health Systems

Indicators	Unit of Measurement	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
<b>Quality &amp; Safety of Care</b>													
ART Retention Rate <sup>1</sup> <i>ART at 12 months</i>	Per cent	-	-	-	-	-	75.0	-	-	-	-	-	-
<b>Utilization and Access</b>													
Outpatient Service <sup>2</sup> Utilization	Per 10,000 population	1521.0	1627.9	1788.5	1760.7	1854.1	1776.1	1796.3	1705.1	1455.0	1913.6	1805.1	1833.2
Hospital Bed Density <sup>2</sup>	Per 10,000 population	-	-	-	-	-	-	13.1	13.8	13.7	14.2	13.9	14.4
Bed Occupancy Rate <sup>3,4</sup>	Per cent	55.0	56.1	57.3	58.0	52.3	74.9	81.8	76.6	87.8	73.3	54.6	51.3
Mean Length of Stay <sup>3,4</sup>	Days	5.8	5.7	5.8	5.5	5.1	4.9	6.0	6.9	6.4	6.8	6.3	6.6
<b>Health Workforce</b>													
Health Worker Density <i>Physicians</i> <sup>5</sup>	Per 10,000 population	4.4	4.6	5.0	5.2	5.5	5.5	6.0	6.4	6.7	6.9	7.5	7.8
<i>Nurses</i> <sup>6</sup>		-	-	-	-	-	-	-	-	-	-	-	-
<i>Pharmacists</i> <sup>7</sup>		0.2	0.1	0.2	0.2	0.2	0.1	0.1	2.4	2.8	2.8	2.9	2.8
<i>Dentists</i> <sup>8</sup>		0.9	0.9	0.9	0.9	0.9	0.9	1.0	1.0	1.0	1.1	1.1	1.1
<b>Health Information</b>													
Birth Registration <sup>9,10</sup>	Per cent	95.2	97.2	95.3	97.1	-	97.1	94.5	95.9	-	96.4	89.0	91.3
Mortality Garbage Codes <sup>11</sup>	Per cent	-	-	-	-	-	-	-	-	-	-	-	16.2
Ill-defined and Unknown <sup>11</sup> Causes of Death	Per cent	-	-	-	-	-	-	-	-	-	-	-	2.7
<b>Health Financing</b>													
Total Current Expenditure <sup>12</sup> on Health as % of Gross Domestic Product	Per cent	-	-	-	-	-	5.6	5.2	4.7	4.2	4.8	4.5	4.2
Out-of-Pocket Expenditure <sup>12</sup> as % of Total Health Expenditure	Per cent	-	-	-	-	-	29.6	38.4	26.9	34.6	27.6	29.1	28.9
General Government <sup>12</sup> Health Expenditure as % of Total Health Expenditure	Per cent	-	-	-	-	-	56.5	46.6	58.2	48.5	51.5	49.1	47.5
General Government <sup>12</sup> Health Expenditure as a % of GDP	Per cent	-	-	-	-	-	3.2	2.4	2.8	2.0	2.5	2.2	2.0
Private Expenditure on, <sup>12</sup> Health as a % of Total Health Expenditure	Per cent	-	-	-	-	-	43.3	52.9	41.1	50.8	46.7	49.5	50.9
<b>Governance</b>													
Existence of National <sup>13,14,15</sup> Health Sector policy/strategy/plan	Yes	-	-	-	-	-	Ministry of Health Strategic Business/ Corporate Plan						
		-	-	-	-	-	-	-	-	-	-	-	-

Data Sources:<sup>1</sup> Ministry of Health & Wellness; ARV Monitoring Database,<sup>2</sup> Ministry of Health & Wellness; Policy Planning and Development Division; Estimates Calculated from Hospital Monthly Statistical Report,<sup>3</sup> Economic & Social Survey Jamaica,<sup>4</sup> Ministry of Health & Wellness, Policy Planning and Development Division, Monthly Clinical Summary Report 2006-2022,<sup>5</sup> Estimates calculated using data from the Medical Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator),<sup>6</sup> Estimates calculated using data from the Nursing Council of Jamaica (numerators) & Statistical Institute of Jamaica (denominator),<sup>7</sup> Estimates calculated using data from the Pharmacy Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator),<sup>8</sup> Estimates calculated using data from the Dental Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator),<sup>9</sup> Jamaica Survey of Living Conditions,<sup>10</sup> Multiple Indicator Cluster Survey,<sup>11</sup> Registrar General's Department (numerator), Statistical Institute of Jamaica (denominator),<sup>12</sup> World Health Organization; National Health Accounts (data supplied by Jamaica),<sup>13</sup> Ministry of Health and Wellness 10 year Strategic Plan,<sup>14</sup> Ministry of Health and Wellness Strategic Business Plan,<sup>15</sup> Ministry of Health and Wellness, Corporate Plan.

# Health Systems

2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
Quality & Safety of Care																
87.6	-	91.0	-	-	-	-	60.1	58.8	80.4	79.9	-	-	-	-	-	-
Utilization and Access																
1836.2	2102.3	2209.0	2108.4	2328.7	2453.7	2470.8	2130.0	2347.3	2406.8	2363.2	2342.9	2358.2	1762.0	1809.2	2119.0	2179.9
13.8	13.8	14.1	14.6	14.6	14.9	14.3	14.5	17.9	17.9	17.7	17.5	17.8	17.7	17.6	17.8	17.1
53.0	61.1	67.2	61.0	61.9	67.8	73.6	75.7	73.0	76.5	66.2	76.5	87.3	70.0	71.9	62.0	79.6
5.6	5.5	5.4	-	5.8	5.0	5.5	5.7	5.9	6.9	6.1	6.2	5.9	6.5	6.6	6.6	6.8
Health Workforce																
8.0	8.4	8.7	9.0	9.5	9.9	10.2	10.7	11.3	12.1	12.8	13.6	14.6	15.4	16.3	17.1	17.9
-	-	-	-	-	10.6	8.7	12.6	11.2	8.9	-	12.2	17.5	17.1	18.7	18.1	17.0
2.6	2.9	2.9	2.9	3.0	3.1	3.4	3.8	3.8	4.7	4.0	4.2	4.2	4.4	4.6	4.8	5.0
1.2	1.2	1.2	1.2	1.3	1.3	1.3	1.5	1.6	1.7	2.0	2.1	2.2	2.3	2.4	2.6	2.7
Health Information																
95.6	97.8	-	98.1	-	99.5	-	99.1	-	99.3	-	-	-	-	-	99.1	-
12.8	13.4	12.9	12.2	12.4	12.9	12.5	13.7	13.4	13.6	12.6	12.4	12.2	12.6	10.3	12.9	-
1.3	1.0	1.0	0.9	0.8	0.6	0.3	0.3	0.4	0.5	0.5	0.6	0.4	0.4	0.3	0.4	-
Health Financing																
5.3	5.6	5.1	5.3	5.2	4.9	5.0	5.2	5.6	5.7	6.1	6.0	6.1	6.6	7.2	8.3	-
31.2	30.2	23.0	23.5	22.0	21.8	19.5	21.4	19.0	17.9	16.8	16.8	16.4	14.7	13.1	15.8	-
50.1	52.6	57.3	57.5	59.1	57.0	60.0	59.3	63.3	63.6	66.1	65.2	65.2	68.3	71.2	71.2	-
2.7	3.0	2.9	3.0	3.1	2.8	3.0	3.1	3.6	3.6	4.1	3.9	4.0	4.5	5.1	5.4	-
48.1	45.8	40.3	40.3	38.6	39.8	39.0	39.3	35.3	34.8	32.5	33.3	33.2	30.2	27.4	27.6	-
Governance																
Ministry of Health Strategic Business/ Corporate Plan																
-	-	-	-	-	-	-	-	-	-	-	-	Vision for Health 2030-Ten Year strategic Plan 2019-2030				

Data Sources:<sup>1</sup> Ministry of Health & Wellness; ARV Monitoring Database,<sup>2</sup>Ministry of Health & Wellness; Policy Planning and Development Division; Estimates Calculated from Hospital Monthly Statistical Report,<sup>3</sup>Economic & Social Survey Jamaica,<sup>4</sup>Ministry of Health & Wellness, Policy Planning and Development Division, Monthly Clinical Summary Report 2006-2022,<sup>5</sup>Estimates calculated using data from the Medical Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator),<sup>6</sup>Estimates calculated using data from the Nursing Council of Jamaica (numerators) & Statistical Institute of Jamaica (denominator),<sup>7</sup>Estimates calculated using data from the Pharmacy Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator),<sup>8</sup>Estimates calculated using data from the Dental Council of Jamaica (numerator) & Statistical Institute of Jamaica (denominator),<sup>9</sup>Jamaica Survey of Living Conditions,<sup>10</sup>Multiple Indicator Cluster Survey,<sup>11</sup>Registrar General's Department (numerator), Statistical Institute of Jamaica (denominator),<sup>12</sup>World Health Organization; National Health Accounts (data supplied by Jamaica),<sup>13</sup>Ministry of Health and Wellness 10 year Strategic Plan,<sup>14</sup>Ministry of Health and Wellness Strategic Business Plan,<sup>15</sup>Ministry of Health and Wellness, Corporate Plan.

# Errata

Please take note of the following corrections to errors that were published in the first edition of the Jamaica Population Health Status Report 2000 - 2022:

Page No.	Indicator	Corrections
11	Total Fertility Rate	On the chart entitled "Total Fertility Rate", the data point for 2008 should read, "2.4" instead of "2.1".
12	Child Mortality Rates	In the table titled "Child Mortality Rate in Jamaica, 2000-2021 (per 1 000 live births)", the 2000 child mortality values should be corrected with the figures below.  Under-5 mortality rate: 14.8 Infant mortality rate: 11.7 Neonatal Mortality rate: 8.9
15	Corpus Uteri Cancer Mortality Rate	The narrative should read, "Often referred to as endometrial cancer, cancer of the uteri accounted for 7.1 deaths per 100,000 Jamaican women in 2021 compared to 5.0 per 100,000 women in 2008. "Instead of " Often referred to as endometrial cancer, cancer of the uteri accounted for 19.1 deaths per 100,000 Jamaican women in 2021 compared to 18.0 per 100,000 women in 2008."
24	Prevalence of Alcohol use in Students (13-17 years)	The narrative under the heading "Prevalence of Alcohol use in students (13-17 years)" should read "In 2017, data from the Global School Health Survey showed that 48.9% of Jamaican students 13-17 years were currently consuming alcohol. More males (58.7%) than females (39.9%) drank alcohol". Instead of "In 2017, data from the Global School Health Survey showed that 14.9% of Jamaican students 13-17 years were currently consuming alcohol. More males (19.1%) than females (11.0%) drank alcohol."
24	Tobacco use among Students (13 - 17 years)	The narrative under the heading "Tobacco use among students (13 - 17 years)" should read "In 2017, 14.9% of students 13-17 years reported current tobacco use (i.e., cigarettes). More males (19.1%) than females (11.0%) students smoked tobacco". Instead of "In 2017, almost half (48.9%) of students 13 - 17 years reported current tobacco use (i.e. cigarettes). More males (58.7%) than females (39.9%) students smoked tobacco."

The following corrections are for data sheets towards the back of the report (pages 55 & 57)

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Under-5 Mortality Rate	14.8	15.1	14.0	13.6	13.1	15.5	14.9	15.3	14.6	12.6	15.9	16.9	17.4	18.0	20.5	19.6	17.4	18.4	19.4	20.5	17.7	19.0
Infant Mortality Rate	11.7	12.1	9.4	9.5	9.5	10.4	13.4	13.7	13.5	11.4	14.5	15.3	15.9	16.6	19.0	18.5	15.8	16.7	16.6	18.5	16.6	17.7
Neonatal Mortality Rate	8.9	9.2	6.9	7.6	6.7	9.7	10.3	11.5	11.6	9.8	12.4	13.1	13.9	14.5	16.7	16.0	12.7	14.1	13.8	15.2	13.8	14.6
Total Fertility Rate	-	-	2.5	-	-	-	-	-	2.4	-	-	2.2	-	-	-	-	-	-	-	-	-	1.9
Corpus Uteri Cancer Mortality Rate	-	-	-	-	-	-	-	-	5.0	4.6	5.1	5.2	5.0	5.1	5.7	6.1	6.0	7.8	7.5	7.1	7.7	7.5

# Errata

Please take note of the following corrections to errors that were published in the first edition of the Jamaica Population Health Status Report 2000 - 2022:

	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
<b>Tobacco use among Students (13 - 17 years)</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	14.9	-	-	-	-
<i>Male</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	19.1	-	-	-	-
<i>Female</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11.0	-	-	-	-
<b>Prevalence of Alcohol use in Students (13-17 years)</b>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	48.9	-	-	-	-
<i>Male</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	58.7	-	-	-	-
<i>Female</i>	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	39.9	-	-	-	-



# Health Indicator Definitions

<b>AIDS-related Mortality Ratio</b>	Estimated number of adults and children who have died due to AIDS-related causes in a specific year, expressed as a rate per 100,000 population.
<b>Anaemia Prevalence in Women of Reproductive Age</b>	Percentage of women aged 15–49 years with a haemoglobin concentration less than 120 g/L for non-pregnant women and lactating women, and less than 110 g/L for pregnant women, adjusted for altitude and smoking.
<b>Annual GDP growth</b>	Annual percentage growth rate of GDP at market prices based on constant local currency. GDP is the sum of gross value added by all resident producers in the economy plus any product taxes and minus any subsidies not included in the value of the products. It is calculated without making deductions for the depreciation of fabricated assets or for the depletion and degradation of natural resources.
<b>Annual Population Growth Rate</b>	The annual average rate of change of population size, for a given country, territory, or geographic area, during a specified period. It expresses the ratio between the annual increase in the population size and the total population for that year, usually multiplied by 100. The annual increase in the population size is defined as a sum of differences: the difference between births less deaths and the difference between immigrants and emigrants, in a given country, territory or geographic area in a given year.
<b>Antenatal Care Coverage</b>	Percentage of women aged 15–49 years with a live birth in a given time period who received antenatal care, four times or more times from any provider.
<b>Antiretroviral Therapy Coverage</b>	Percentage of people living with HIV currently receiving ART among the estimated number of adults and children living with HIV.
<b>Antiretroviral Therapy Retention Rate</b>	Percentage of adults and children with HIV alive and on ART at 12 months (or 24, 36, 48 and 60 months) after initiating treatment among patients initiating ART during a specified time period.
<b>Bed Occupancy Rate</b>	Percentage of available beds that have been occupied over a given period.
<b>Birth Registration</b>	Proportion of children under 5 years of age whose births have been registered with a civil authority.
<b>Births</b>	Total number of estimated births expected in a specific year, for a given country, territory, or geographic area.
<b>Breast Cancer Mortality Rate</b>	The total number of deaths from breast cancer in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Breast Cancer Screening</b>	Percentage of women 45–64 years old who have a screening mammogram within 12 months as a proportion of the eligible population.
<b>Cancer Incidence, by type of Cancer</b>	Number of new cancers of a specific site/type occurring per 100,000 population.

# Health Indicator Definitions

<b>Cancer Mortality Rate</b>	The total number of deaths from cancer in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Cerebrovascular Disease Mortality Rate</b>	The total number of deaths from cerebrovascular diseases in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Cervical Cancer Mortality Rate</b>	The total number of deaths from cervical cancer in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Cervical Cancer Screening</b>	The proportion of women aged 30 - 49 years who report they were screened for cervical cancer using any of the following methods: visual inspection with acetic acid/vinegar (VIA), pap smear, and human papillomavirus (HPV) test.
<b>Children Under-5 Years who are Overweight</b>	Prevalence of weight-for-height in children aged 0 - 59 months is defined as above +2 standard deviations of the WHO Child Growth Standards median.
<b>Children Under-5 Years who are Stunted</b>	Percentage of stunted (moderate and severe) children aged 0 - 59 months (moderate = height-for-age below -2 standard deviations from the WHO Child Growth Standards median; severe = height-for-age below -3 standard deviations from the WHO Child Growth Standards median).
<b>Children under-5 Years who are Underweight</b>	Number of children aged 0 - 59 months who are below -2 standard deviations from the median for weight-for-age for the WHO child growth references.
<b>Children Under-5 Years who are Wasted</b>	Number of children aged 0 - 59 months who are below -2 standard deviations from the median for weight-for-age for the WHO child growth references.
<b>Colorectal Cancer Mortality Rate</b>	The total number of deaths from colorectal cancer in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Contraceptive Prevalence Rate</b>	Percentage of women aged 15 - 49 years, married or in union, who are currently using, or whose sexual partner is using, at least one method of contraception, regardless of the method used.
<b>Corpus Uteri Cancer Mortality Rate</b>	The total number of deaths from corpus uteri cancer in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Crude Birth Rate</b>	The ratio between the number of births in a population during a given year and the total mid-year population for the same year, usually multiplied by 1,000.

# Health Indicator Definitions

<b>Crude Death Rate</b>	The ratio between the number of deaths in a population during a given year and the total mid-year population for the same year, usually multiplied by 1,000.
<b>Death Rate Due to Traffic Injuries</b>	Number of road traffic fatal injury deaths per 100,000 population.
<b>Deaths from Communicable Disease, Maternal, Perinatal &amp; Nutritional Conditions</b>	The total number of deaths from communicable diseases in a population of a given sex, after removing the effect of differences in the age distribution, divided by the total number of this population, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Deaths from Injuries</b>	Recorded or estimated number of deaths related to drowning, falls, burns, poisoning, homicide and violence, road traffic injuries, and suicide.
<b>Deaths from Non-Communicable Disease</b>	The total number of deaths from non-communicable diseases in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Deaths</b>	Total number of estimated deaths expected in a specific year, for a given country, territory, or geographic area.
<b>Dependency Ratio</b>	The average number of economically dependent population per 100 economically productive population, for a given country, territory, or geographic area, at a specific point in time. In demographic terms, an economically dependent population is defined as the sum of the population under 15 years of age plus the population 65 years of age and over; an economically productive population is defined as the population between 15 and 64 years of age, for the same country, territory, or geographic area, at the same specific point in time.
<b>Diabetes Mellitus Mortality Rate</b>	The total number of deaths from diabetes mellitus, in the total population or of a given sex and/or age, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Early Initiation of Breastfeeding</b>	Percentage of newborns breastfed within 1 hour of birth in a specified period.
<b>Exclusive Breastfeeding Rate 0-5 months of age</b>	Percentage of infants 0 - 5 months of age (<6 months) who are fed exclusively with breast milk.
<b>Existence of National Health Sector policy/strategy/plan</b>	Existence of a comprehensive national health sector policy/strategy/plan with goals and targets, updated within the last 5 years.
<b>General Government Health Expenditure as % of Total Health Expenditure</b>	The level of general government expenditure on health (GGHE) expressed as a percentage of total expenditure on health (THE).

# Health Indicator Definitions

<b>General Government Health Expenditure as a % of Total Health Expenditure</b>	The level of general government expenditure on health (GGHE) expressed as a percentage of total expenditure on health (THE).
<b>General Government Health Expenditure as a % of GDP</b>	The share of general government expenditures on health from domestic sources expressed as a percentage of GDP.
<b>GINI Index</b>	The GINI measures the income inequality of a national economy. The GINI is zero if everyone has the same income and is 100 if a single person has all the income.
<b>Health Worker Density</b>	Density of health workers per 10,000 population.
<b>HIV Incidence Rate</b>	Number of new HIV infections per 1,000 uninfected population. The incidence rate is the number of new cases per population at risk in a given period.
<b>HIV Prevalence Rate</b>	Percentage of people living with HIV. Prevalence measures the frequency of existing disease in a defined population at a specific time.
<b>HIV Viral Load Suppression</b>	Percentage of people on ART who are virologically suppressed (VL level $\leq$ 1,000 copies/mL).
<b>Hospital Bed Density</b>	Total number of hospital beds per 10,000 population in a geographic area.
<b>Hypertensive Disease Mortality Rate</b>	The total number of deaths from hypertensive diseases in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Ill-defined and Unknown Causes of Death</b>	The number of deaths registered in a given year for which the underlying cause of death corresponds to ill-defined and unknown causes of death (ICD-10 codes: R00-R94 and R96-R99), expressed as a percentage of the total registered deaths in the same year, in a given country, territory, or geographic area.
<b>Immunization Coverage Rate by Vaccine for each Vaccine in the National Schedule</b>	Percentage of the target population that has received the last recommended dose of the basic series for each vaccine recommended in the national schedule. This should include all vaccines within a country's routine immunization schedule (e.g., Bacillus Calmette–Guérin (BCG); polio; pneumococcal conjugate vaccine (PCV); rotavirus; diphtheria, tetanus, pertussis (DPT3-cv) containing vaccines, Hepatitis B containing vaccines, Haemophilus influenzae type b containing vaccines; measles-containing vaccine (MCV); rubella containing vaccines; human papillomavirus (HPV); tetanus toxoid (TT); tetanus-diphtheria toxoids (Td); influenza; and others as determined by the national schedule).
<b>Incidence of Low Birth Weight among Newborns (&lt;2500g)</b>	Percentage of live births that weigh less than 2,500 g.

# Health Indicator Definitions

<b>Infant Mortality Rate</b>	The probability that a child born in a specific year or period will die before reaching the age of 1 year, if subject to age-specific mortality rates of that period, expressed as a rate per 1,000 live births.
<b>Inflation</b>	Inflation as measured by the consumer price index reflects the annual percentage change in the cost to the average consumer of acquiring a basket of goods and services that may be fixed or changed at specified intervals, such as yearly.
<b>Insufficient Physical Activity in Adults</b>	Age-standardized prevalence of insufficiently physically active persons aged 18+ years (percentage of adults aged 18+ years not meeting any of the following criteria: 150 minutes of moderate-intensity physical activity per week; 75 minutes of vigorous-intensity physical activity per week; an equivalent combination of moderate and vigorous-intensity physical activity accumulating at least 600 metabolic equivalent minutes per week (minutes of physical activity can be accumulated over a week but must be of a duration of at least 10 minutes).
<b>Intimate Partner Violence Prevalence</b>	The proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner in the previous 12 months.
<b>Ischaemic Heart Disease Mortality Rate</b>	The total number of deaths from ischaemic heart disease in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Life Expectancy at Birth</b>	The average number of years that a newborn could expect to live if he or she were to pass through life exposed to sex- and age-specific death rates prevailing at the time of his or her birth, for a specific year, in a given country, territory or geographical area.
<b>Maternal Mortality Ratio</b>	The number of maternal deaths in a given year and the number of live births in that same year for a given country, territory, or geographic area, as reported by the national health authority. Maternal death is defined as the death of a woman while pregnant or within the 42 days after the termination of that pregnancy, regardless of the length and site of the pregnancy, due to any cause related to or aggravated by the pregnancy itself or its care but not due to accidental or incidental causes (ICD-10: A34, O00-O95, O98-O99).
<b>Mean Length of Stay</b>	The number of days (on average) that a patient spends in the hospital.
<b>Mortality from Unintentional Poisoning</b>	Number of deaths from unintentional poisonings (per 100,000 population), for the year indicated.
<b>Mortality Garbage Codes</b>	The number of deaths registered in a given year for which the underlying cause of death corresponds to garbage codes is expressed as a percentage of the total registered deaths in the same year, in a given country, territory, or geographic area.
<b>Motorcycle Helmet Wearing Rate</b>	Estimate of the proportion of helmet use among users of motorized two-wheelers.

# Health Indicator Definitions

<b>Neonatal Mortality Rate</b>	The probability that a child born in a specific year or period will die in the first 28 days of life (0–27 days) if subject to age-specific mortality rates of that period, expressed per 1,000 live births.
<b>New Cases of Vaccine-Preventable Diseases</b>	Number of confirmed new cases of vaccine-preventable diseases that are included in the WHO recommended standards for surveillance of selected vaccine-preventable diseases, and vaccine-preventable diseases reported on the WHO-UNICEF reporting form in a specified period.
<b>Non-partner Sexual Violence Prevalence</b>	The proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 2 months.
<b>Number of Deaths, Missing Person &amp; Persons Affected by Disasters</b>	<p><b>Deaths:</b> Number of people who died during the disaster, or directly after, as a direct result of the hazardous event.</p> <p><b>Missing:</b> Number of people whose whereabouts are unknown since the hazardous event. It includes people who are presumed dead although there is no physical evidence. The data on the number of deaths and number of missing are mutually exclusive.</p> <p><b>Affected:</b> People who are affected, either directly or indirectly, by a hazardous event.</p> <p><b>Directly affected:</b> People who have suffered an injury, illness or other health effects; who were evacuated, displaced, relocated or have suffered direct damage to their livelihoods, economic, physical, social, cultural and environmental assets.</p> <p><b>Indirectly affected:</b> People who have suffered consequences, other than or in addition to direct effects, over time due to disruption or changes in economy, critical infrastructures, basic services, commerce, work or social, health and psychological consequences.</p>
<b>Out-of-Pocket Expenditure as a % of Total Health Expenditure</b>	The share of total current expenditure on health paid by households out-of-pocket, expressed as a percentage of total current expenditure on health (this is the households' out-of-pocket expenditure).
<b>Outpatient Service Utilization</b>	Number of outpatient department visits per person per year.
<b>Overweight &amp; Obesity in Adults</b>	Percentage of adults (18+ years) who are overweight (defined as having a BMI $\geq 25$ kg/m <sup>2</sup> ) and obese (defined as having a BMI $\geq 30$ kg/m <sup>2</sup> ).
<b>People Living with HIV who Know their Status</b>	Percentage of people living with HIV who know their status.
<b>Per cent of all Registered TB Patients who had Documented HIV Status Recorded who are HIV-positive</b>	Number of registered TB patients with documented HIV status on the TB register who are HIV-positive, expressed as a proportion of the total number of all registered TB patients with documented HIV status over the reporting period.

# Health Indicator Definitions

## Per cent of HIV-positive TB Patients on ART

Number of HIV-positive TB patients who started on or continued previously initiated ART during their TB treatment, expressed as a percentage of all HIV-positive TB patients registered over the reporting period.

## Per cent TB Patient with Known HIV Status

Percentage of TB patients who had an HIV test result recorded in the TB register.

## Population <15 Years

The proportion of the population under 15 years of age and over as a percentage of the corresponding population of a country, territory, or geographic area at a specific point of time, usually mid-year.

## Population 65 Years & Over

The proportion of the population 65 years of age and over as a percentage of the corresponding population of a country, territory, or geographic area at a specific point of time, usually mid-year.

## Population Using Safely Managed Drinking-water Services

Population using an improved drinking water source (piped water into dwelling, yard or plot; public taps or standpipes; boreholes or tube wells; protected dug wells; protected springs, rainwater, packaged or delivered water) which is located on-premises, available when needed, and free of faecal and priority chemical contamination.

## Premature Non-communicable Disease Mortality

Unconditional probability of death between ages 30 and 70 years from cardiovascular diseases, cancer, diabetes, and chronic respiratory diseases.

## Prevalence of Alcohol Use

Total alcohol per capita is the total amount (sum of recorded alcohol per capita three-year average and unrecorded alcohol per capita) of alcohol consumed per adult (15+ years) in a calendar year, in litres of pure alcohol. Recorded alcohol consumption refers to official statistics (production, import, export, and sales or taxation data), while unrecorded alcohol consumption refers to alcohol, which is not taxed and is outside the usual system of government control. In circumstances in which the number of tourists per year is at least the number of inhabitants, tourist consumption is also taken into account and is deducted from a country's recorded alcohol per capita.

## Prevalence of Poverty

The percentage of the population whose consumption (or any other suitable measure of living standard) is below the poverty line. An increase in this indicator implies a worsening of the poverty situation.

## Prevention of HIV in Key Populations

**Sex workers:** Percent reporting condom use with most recent client.

**Men who have sex with men:** % reporting condom use at last anal sex with a male partner.

**Injection drug users:** needles/syringes distributed per person.

**General population:** % of women and men who had more than one partner in the past 12 months who used a condom during their last sexual intercourse.

## Prevention of Mother-to-Child Transmission

Percentage of HIV-positive pregnant women provided with ART to reduce the risk of mother-to-child transmission during pregnancy.



# Health Indicator Definitions

<b>Private Expenditure on Health as a % of Total Health Expenditure</b>	The level of private expenditure on health expressed as a percentage of total expenditure on health.
<b>Proportion of Births Attended by Skilled Health Personnel</b>	Percentage of live births attended by skilled health personnel during a specified period.
<b>Prostate Cancer Mortality Rate</b>	The total number of deaths from prostate cancer in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Prostate Cancer Screening</b>	Percentage of men 40 years and old who have a screening PSA blood test or DRE within 12 months as a proportion of the eligible population.
<b>Raised Blood glucose/diabetes among Adults</b>	Age-standardized prevalence of raised blood glucose/diabetes among persons aged 15+ years or on medication for raised blood glucose (defined as fasting plasma glucose value $\geq 7.0$ mmol/L (126 mg/dL) or on medication for raised blood glucose among adults aged 15+ years).
<b>Raised Blood Pressure among Adults</b>	Age-standardized prevalence of raised blood pressure among persons aged 15+ years (defined as systolic blood pressure $\geq 140$ mmHg and/or diastolic blood pressure $\geq 90$ mmHg), and mean systolic blood pressure.
<b>Respiratory Disease Mortality Rate</b>	The total number of deaths from respiratory diseases in the total population or of a given sex, divided by the total number of this population, after removing the effect of differences in the age distribution, expressed per 100,000 population, for a given year, in a given country, territory, or geographic area.
<b>Salt Intake</b>	Age-standardized mean population intake of salt (sodium chloride) per day in grams in persons aged 18+ years.
<b>Seatbelt Wearing Rate</b>	National estimate of the proportion of car occupants (i.e., drivers and passengers) who use seatbelts.
<b>Stillbirth Rate</b>	Number of stillbirths per 1000 total births. Stillbirths can occur antepartum or intrapartum. In many cases, stillbirths reflect inadequacies in antenatal care coverage or intrapartum care. For purposes of international comparison, stillbirths are defined as third-trimester fetal deaths ( $\geq 1,000$ g or $\geq 28$ weeks).
<b>TB Incidence Rate</b>	Estimated number of new and relapse TB cases (all forms of TB, including cases in people living with HIV) arising in a given year, expressed as a rate per 100,000 population.
<b>TB Mortality Ratio</b>	Estimated number of deaths caused by TB in a given year, expressed as a rate per 100,000 population.
<b>Tobacco Use Among Persons</b>	The percentage of the population aged 15 years and over who currently use any tobacco product (smoked and/or smokeless tobacco) on a daily or non-daily basis. Tobacco products include cigarettes, pipes, cigars, cigarillos, water pipes (hookah, shisha), bidis, kretek, heated tobacco products, and all forms of smokeless (oral and nasal) tobacco. Tobacco products exclude e-cigarettes (which do not contain tobacco), "e-cigars", "e-hookahs", JUUL and "e-pipes".

# Health Indicator Definitions

<b>Total Current Expenditure on Health as a % of Gross Domestic Product</b>	The total current expenditure on health as a percentage of gross domestic product. Share of general government expenditures on health from domestic sources of GDP.
<b>Total Fertility Rate</b>	Mean number of children a woman would have by age 50 if she survived to age 50 and was subject, throughout her life, to the age-specific fertility rates observed in a given year. The total fertility is expressed as the number of children per woman. Total fertility is computed as the sum of age-specific fertility rates divided by 1,000.
<b>Total Population</b>	The population of a country, territory or geographic area, total or for a given sex and age group, at a given point in time.
<b>Under-5 Mortality Rate</b>	The probability of a child born in a specific year or period dying before reaching the age of 5 years, if subject to age-specific mortality rates of that period, expressed per 1,000 live births.
<b>Unemployment Rate</b>	The number of members of the total population or of a given sex of the economically active population, who are unemployed but are available to work and seeking employment. This includes members who have lost their jobs and those who have voluntarily left work, at a specific point in time, expressed as a percentage of the economically active population in total or by sex. An economically active individual is considered employed if he or she falls into one of the following categories: has in-currency or in-kind paid employment, is self-employed, works in a family business, or is not working temporarily for a particular reason.
<b>Unmet Need for Family Planning</b>	The percentage of women of reproductive age (15–49 years) who desire either to have no (additional) children or to postpone the next child and who are currently using a modern contraceptive method.
<b>Urban Population</b>	The proportion of a country's population, territory or geographic area that resides in areas defined as urban at a given time.
<b>Women (15-49) Accessing Prenatal Care in the First Trimester</b>	The number of pregnant women who have received a health care visit by a health professional from the first trimester of their pregnancy, expressed as a percent of the live births, in a given year.

# Sustainable Development Goals

SDG Targets	SDG Indicators
<b>Goal 1. End poverty in all its forms everywhere</b>	
<b>1.2</b> By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions	<b>1.2.1</b> Proportion of population below the poverty line
<b>1.5</b> By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters	<b>1.5.1</b> Number of deaths, missing persons and persons affected by disaster per 100,000 people
<b>Goal 2. End hunger, achieve food security and improved nutrition and promote sustainable agriculture</b>	
<b>2.2</b> By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons	<b>2.2.1</b> Prevalence of stunting (height for age <-2 standard deviation from the median of the World Health Organization (WHO) Child Growth Standards) among children under 5 years of age  <b>2.2.2</b> Prevalence of malnutrition (weight for height >+2 or <-2 standard deviation from the median of the WHO Child Growth Standards) among children under 5 years of age, by type (wasting and overweight)
<b>Goal 3. Ensure healthy lives and promote well-being for all at all ages</b>	
<b>3.1</b> By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births	<b>3.1.1</b> Maternal mortality ratio  <b>3.1.2</b> Proportion of births attended by skilled health personnel
<b>3.2</b> By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births	<b>3.2.1</b> Under-5 mortality rate  <b>3.2.2</b> Neonatal mortality rate
<b>3.3</b> By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases	<b>3.3.1</b> Number of new HIV infections per 1,000 uninfected population, by sex, age and key populations  <b>3.3.2</b> Tuberculosis incidence per 1,000 population
<b>3.4</b> By 2030, reduce by one-third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being	<b>3.4.1</b> Mortality rate attributed to cardiovascular disease, cancer, diabetes or chronic respiratory disease

# Sustainable Development Goals

SDG Targets	SDG Indicators
<b>3.5</b> Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol	<b>3.5.2</b> Harmful use of alcohol, defined according to the national context as alcohol per capita consumption (aged 15 years and older) within a calendar year in litres of pure alcohol
<b>3.6</b> By 2020, halve the number of global deaths and injuries from road traffic accidents	<b>3.6.1</b> Death rate due to traffic injuries
<b>3.7</b> By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes	<b>3.7.1</b> Proportion of women of reproductive age (aged 15–49 years) who have their need for family planning satisfied with modern methods  <b>3.7.2</b> Adolescent birth rate
<b>3.9</b> By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination	<b>3.9.3</b> Mortality rate attributed to unintentional poisoning
<b>3.a</b> Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate	<b>3.a.1</b> Age-standardized prevalence of current tobacco use among persons aged 15+ years
<b>3.b</b> Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all	<b>3.b.1</b> Proportion of the target population covered by all vaccines included in their national programme
<b>3.c</b> Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States	<b>3.c.1</b> Health worker density and distribution
<b>Goal 5. Achieve gender equality and empower all women and girls</b>	
<b>5.2</b> Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation	<b>5.2.1</b> Intimate partner violence prevalence  <b>5.2.2</b> Non-partner sexual violence prevalence

# Sustainable Development Goals

SDG Targets	SDG Indicators
<b>Goal 6. Ensure availability and sustainable management of water and sanitation for all</b>	
<b>6.1</b> By 2030, achieve universal and equitable access to safe and affordable drinking water for all	<b>6.1.1</b> Population using safely managed drinking-water services
<b>Goal 8. Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all</b>	
<b>8.1</b> Sustain per capita economic growth in accordance with national circumstances and, in particular, at least 7 per cent gross domestic product growth per annum in the least developed countries	<b>8.1.1</b> Annual GDP growth (%)
<b>8.5</b> By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value	<b>8.5.2</b> Unemployment rate, by sex, age and persons with disabilities
<b>Goal 11. Make cities and human settlements inclusive, safe, resilient and sustainable</b>	
<b>11.5</b> By 2030, significantly reduce the number of deaths and the number of people affected and substantially decrease the direct economic losses relative to global gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations	<b>11.5.1</b> Number of deaths, missing persons and persons affected by disaster per 100,000 people
<b>Goal 13. Take urgent action to combat climate change and its impacts</b>	
<b>13.1</b> Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries	<b>13.1.1</b> Number of deaths, missing persons and persons affected by disaster per 100,000 people
<b>Goal 16. Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels</b>	
<b>16.9</b> By 2030, provide legal identity for all, including birth registration	<b>16.9.1</b> Proportion of children under 5 years of age whose births have been registered with a civil authority, by age

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Environmental Health Unit  
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Health Services Planning & Integration Branch  
HealthGIS  
HIV/STI/TB Unit  
National Epidemiology Branch  
National Surveillance Unit  
Non-communicable Disease & Injury Prevention and Control Unit  
Nutritional Unit  
Policy, Planning and Development Division  
Public Relations & Communications Unit  
Technical Services Division

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