

MEASURE Evaluation in Jamaica

With 1.7 percent of its adult population infected with HIV/AIDS, Jamaica's HIV epidemic may seem less serious than that of other developing countries; many of which have HIV prevalence rates at least double Jamaica's. However, estimates indicate that more than half of Jamaicans carrying the virus do not realize they are infected. High poverty and unemployment rates, gender inequality, and a growing commercial sex trade (including sex tourism) added to the high level of people infected unknowingly, making Jamaica extremely vulnerable to a more severe HIV epidemic.

The pervasiveness of risky sexual behaviors, such as multiple sex partners, exchanging sex for money, engaging in sex at an early age, and having casual sex without using condoms, contributes heavily to HIV infections in Jamaica. Men and women between 20 and 44 years old account for 65 percent of AIDS cases, and adolescent females are infected at a rate 2.7 times that of adolescent males. Females overall face a higher risk of becoming infected with HIV in Jamaica partly because they find it difficult to negotiate safe sex with their partners.

MOST AT-RISK POPULATIONS

The HIV prevalence rate in Jamaica's general population belies a more insidious spread in certain subgroups. Nearly 32 percent of men who have sex with men are estimated to have the virus, and up to 9 percent of sex workers in Jamaica are infected. However, collecting accurate data on these groups and providing them with treatment and prevention services remains extremely difficult because of the social stigma attached to these populations, particularly homosexuals. Homosexual behavior is illegal in the country and being gay is generally unacceptable among most Jamaicans. Other most-at-risk groups include inmates and sex workers.



COUNTRY FLAG



DEMOGRAPHY

Population: 2,868,380

Population Growth Rate: 0.733%

Age Structure:

0–14 years: 30.1%

15–64 years: 62.3%

65 years and over: 7.6%

Death Rate: 6.54 deaths/1,000 population

HIV-RELATED DATA

Adult HIV Prevalence: 1.7% (2009 est.)

People Living with HIV: 32,000 (2009 est.)

OTHER RELEVANT DATA

Infant Mortality Rate: 14.6 infant deaths/1,000 live births

Total Fertility Rate: 2.17 children born/woman

Maternal Mortality Ratio: 111 maternal deaths/100,000 live births (2001 est.)



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In 1988, Jamaica's government responded to the country's burgeoning epidemic by creating the National HIV/STD Prevention and Control Program and the National AIDS Committee (NAC). NAC includes more than 100 member organizations and works under Jamaica's Ministry of Health to bring together efforts of the government, the private sector, and non-governmental organizations to coordinate the national response to the country's epidemic. For more than a decade, MEASURE Evaluation has been one of the partners working in Jamaica to help strengthen the country's monitoring and evaluation system.

MEASURE EVALUATION IN JAMAICA

MEASURE Evaluation initiated its activities in Jamaica with a PLACE study conducted in 1999/2000. PLACE refers to "Priorities for Local AIDS Control Efforts," a rapid assessment tool used to monitor and improve HIV/AIDS prevention program coverage at venues where transmission is likely to occur, such as bars where people meet new sexual partners and places where intravenous drug users share needles. Sharon Weir and Ties Boerma developed the original PLACE protocol for MEASURE Evaluation in 1999. PLACE has since been revised, adapted, and implemented in more than 14 countries and contexts. The PLACE approach has been recommended by the World Health Organization, USAID, and the World Bank as a useful way to collect data on at-risk groups and document gaps in HIV prevention programs.

"Since that first PLACE study," said Stephanie Watson-Grant, "our colleagues in Jamaica have been using the PLACE methodology to collect more rounds of data on the island's most-at-risk populations, particularly men who have sex with men and sex workers." Watson-Grant is a Country Portfolio Manager at MEASURE Evaluation and serves as the Country Focal Person for Jamaica.

MARP Surveys

In 2010, MEASURE Evaluation began providing technical assistance to the latest round of Jamaica's National HIV/STI Program survey of most at-risk populations (MARP). The National Monitoring and Evaluation Plan calls for these surveys to be conducted every two years. The purpose of the MARP surveys, which focus on men who have sex with men (MSM), sex workers and patrons

of sex workers, is to provide data for the continued surveillance of the country's HIV epidemic.

"These surveys target what are now the main drivers of the HIV epidemic in Jamaica," Watson-Grant explained. "Even though the HIV prevalence rate in the general population is estimated at 1.6 percent, it is much higher in the most-at-risk subpopulations—approximately 32 percent among MSM and 9 percent among sex workers. Learning more about sub-groups where the infection rate is already so high will allow the national HIV program to better target its response."

Pilot Test of UNAIDS MARP M&E Guidelines

Years of PLACE data collection made Jamaica an ideal setting for pilot-testing the UNAIDS Guidelines for Monitoring and Evaluation of most at-risk populations. Piloting of the guidelines will include calculating and reporting the key indicators, using data from previous PLACE studies to estimate the size of MARPs, and facilitating the use of MARP survey data to inform policy and improve programs.

"In a lot of countries, it's difficult to assess programs for most at-risk populations because we don't know how big those populations are," Watson-Grant said.

The MARP guidelines show program officials how to go about estimating these population sizes and associated modes of HIV transmission, and how to collect the data needed for a program impact evaluation.

"If you know how HIV is being transmitted, you can design and target more effective prevention programs," Watson-Grant explained. "And impact evaluation can tell people how an intervention ultimately affects health outcomes, which in turn helps them to design more effective programs." Watson-Grant believes this process has great potential for improving Jamaica's M&E system. "Jamaica is one of two countries selected to test these guidelines and reap the benefits of going through a number of the steps in the M&E process," said Watson-Grant.

Capacity Building

In the context of Jamaica's national response to the HIV epidemic, MEASURE Evaluation continues a focused effort to build M&E capacity among the country's primary HIV stakeholder organizations. These include

the national HIV program, government ministries, non-governmental organizations providing HIV services, and international development partners. A key objective of this effort is to build or update the skills needed in the various stakeholder groups to develop M&E systems capable of collecting complete and accurate data in a timely manner. A related objective is to increase stakeholder capacity to evaluate intervention activities and then use the evaluation data to inform HIV program decision making.

MEASURE Evaluation is also engaged in capacity-building activities relating specifically to the country's HIV/AIDS Treatment Database. This database is intended to compile and make accessible critically important data on people receiving antiretroviral treatment and other related services. MEASURE Evaluation's work focuses on identifying and resolving information

gaps and weaknesses in the system that can lead to omissions in the database.

A significant effort toward building M&E capacity in Jamaica has been achieved through MEASURE Evaluation's five-year collaboration with the national working group formed to collaborate with the M&E Unit of the NHP and assist with developing products such as the M&E Operations Manual that was rolled out in October 2010.

"Working with the national program on the M&E Operations Manual was a truly collaborative experience," Watson-Grant said. "It pulled together a number of assessments that had been done over the past years. We expect it to significantly improve the quality of collection, reporting and analysis of HIV-related data in Jamaica."