



Home Office

Country Policy and Information Note

Jamaica: Medical and healthcare issues

Version 1.0

March 2020

Preface

Purpose

This note provides country of origin information (COI) for decision makers handling cases where a person claims that to remove them from the UK would be a breach Articles 3 and / or 8 of the European Convention on Human Rights (ECHR) because of an ongoing health condition.

It is not intended to be an exhaustive survey of healthcare in Jamaica.

Country of origin information

The country information in this note has been carefully selected in accordance with the general principles of COI research as set out in the [Common EU \[European Union\] Guidelines for Processing Country of Origin Information \(COI\)](#), dated April 2008, and the Austrian Centre for Country of Origin and Asylum Research and Documentation's (ACCORD), [Researching Country Origin Information – Training Manual, 2013](#). Namely, taking into account the COI's relevance, reliability, accuracy, balance, currency, transparency and traceability.

The structure and content of the country information section follows a [terms of reference](#) which sets out the general and specific topics relevant to this note.

All information included in the note was published or made publicly available on or before the 'cut-off' date(s) in the country information section. Any event taking place or report/article published after these date(s) is not included.

All information is publicly accessible or can be made publicly available, and is from generally reliable sources. Sources and the information they provide are carefully considered before inclusion.

Factors relevant to the assessment of the reliability of sources and information include:

- the motivation, purpose, knowledge and experience of the source
- how the information was obtained, including specific methodologies used
- the currency and detail of information, and
- whether the COI is consistent with and/or corroborated by other sources.

Multiple sourcing is used to ensure that the information is accurate, balanced and corroborated, so that a comprehensive and up-to-date picture at the time of publication is provided of the issues relevant to this note.

Information is compared and contrasted, whenever possible, to provide a range of views and opinions. The inclusion of a source, however, is not an endorsement of it or any view(s) expressed.

Each piece of information is referenced in a brief footnote; full details of all sources cited and consulted in compiling the note are listed alphabetically in the [bibliography](#).

MedCOI

MedCOI is an Asylum and Migration Integration Fund financed project to obtain medical country of origin information. The project allows 11 European Union member states plus Denmark, Norway and Switzerland to make use of the services of the 'MedCOI' team in the Netherlands and Belgium.

The MedCOI team makes enquiries with qualified doctors and other experts working in countries of origin. The information obtained is reviewed by the MedCOI project team before it is forwarded to the UK or other national COI teams. Previous MedCOI responses are stored on its database which participating states are able to access.

Feedback

Our goal is to continuously improve our material. Therefore, if you would like to comment on this note, please email [the Country Policy and Information Team](#).

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Assessment

Updated: 2 March 2020

Guidance on medical claims

For general guidance on considering cases where a person claims that to remove them from the UK would be a breach Articles 3 and / or 8 of the European Convention on Human Rights (ECHR) because of an ongoing health condition, see the instruction on [Human rights claims on medical grounds](#).

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Country information

Section 1 Updated: 21 February 2020

1. Overview of the healthcare system

1.1.1 MedCOI stated in a response on 15 October 2015:

'Jamaica's health system involves a mix of public and private sectors. The public sector is the main provider of primary care, public health and hospital services. The public sector consists of the national Ministry of Health (responsible for policy, planning, regulating, and purchasing functions), four Regional Health Authorities (in charge of health service delivery), a network of primary, secondary and tertiary healthcare facilities and the country medical school. The private sector dominates ambulatory services (75 percent of all outpatient care) and the provision of pharmaceuticals (82 percent of all sales).'¹

1.1.2 The response continued:

'In Jamaica there is a limited drug production from imported raw material. The country has set a system of pharmacovigilance to ensure quality maintenance. The majority of the drugs used locally is imported and as prices fluctuate this leads to an increase in costs to the end user. In the long term this is not a sustainable practice.

'In order to improve the access to healthcare and to approach universal coverage, Jamaica took in the 2000's two main policies: the abolition of user fees at public facilities (2008) and the establishment of the Jamaica National Health Fund (NHF). However, the low capacity of the medical system, as shown by low physician and hospital bed density, the lack of resources and the shortage of equipment, continues to hamper improvements in health outcomes. It also drives Jamaicans from all income groups to seek care from private facilities when possible so that household health spending is quite regressive.'²

1.1.3 The National Health Fund (NHF), an agency of the Ministry of Health, in an undated entry, noted:

'The NHF provides financial support to our national healthcare system in order to improve its effectiveness and the affordability of healthcare for the Jamaican population. [The NHF helped] Jamaican residents to access medication in both the public and private health sectors through the provision of the NHF Card and the Jamaica Drug for the Elderly Programme (JADEP) Card and the administration of the Government of Jamaica Health Card; Delivery of in-patient and outpatient pharmacy services for the public health sector. This includes the management of the medical warehouse and of over 118 pharmacy locations in the public health system, providing full time and scheduled services; [Provision of] grants to institutions to improve health

¹ MedCOI, Response, 15 October 2015

² MedCOI, Response, 15 October 2015

care delivery including infrastructure development, training, disaster preparedness, medical equipment and transportation.

‘Project management is an important part of our work which extends to not only internal projects but major projects for our parent Ministry and supported multiple health-promotion programmes to aid in the prevention, reduction and management of non-communicable and communicable diseases. The NHF is ISO 9001:2015 certified and is therefore focused on continuous improvement of our processes to ensure customer satisfaction for both internal and external customers. Good corporate governance and the management of risk are also hallmarks of our operations.’³

1.1.4 Commonwealth Health Online, in an undated entry, stated:

‘The Government of Jamaica is aware of the strategic value of health to the transformation of the Jamaican society and the critical role health must play in reconstructing the social landscape of the country. Since the health system figures predominantly in reversing the cycle of poverty, access to quality services especially for the most vulnerable is atop the development agenda. In keeping with the World Health Organization (WHO) philosophy of health as a fundamental right of every citizen, the Government is keen on providing universal access to quality care at the primary level, while investments are made to improve the infrastructure and service delivery at the secondary and tertiary levels.’⁴

1.1.5 The Commonwealth Health Online also observed:

‘...Jamaica’s outlay of health facilities includes over 330 health centres, 24 public hospitals, the University Hospital of the West Indies, a regional teaching institution partially funded by Regional Governments including Jamaica, 10 private hospitals and over 495 pharmacies. The public health sector accounts for some 5,000 hospital beds, while the private sector provides approximately 200 beds serving a population of 2.7 million. The 24 public hospitals are spread across the nation’s 14 parishes and four Regional Health Authorities and are designated A, B and C based on the range of services offered.’⁵

1.1.6 The Commonwealth Health Online continued:

‘...The Ministry of Health has... invested in a programme of primary healthcare renewal through which it has embarked on the establishment of four Centres of Excellence at the primary care level, one in each of the four Regional Health Authorities and to date has refurbished over 80 health centres islandwide to better equip them to provide optimal service in keeping with the needs of their respective communities.

‘Some of the gains that we boast today have been built on the foundation of a strong primary healthcare system. This is characterized by a good network of community-based health centres, hospitals that are strategically located, active community participation in health and a well-trained and dedicated

³ NHF, ‘Who we are’, undated, [url](#)

⁴ Commonwealth Health Online, Health in Jamaica, Minister of Health, undated, [url](#)

⁵ Commonwealth Health Online, Health in Jamaica, Minister of Health, undated, [url](#)

cadre of healthcare professionals as well as the provision and expansion of the health infrastructure.

‘The Ministry is also keen on achieving these and other health goals through public/private partnerships and greater engagement of the various non-governmental organisation (NGO) communities and other stakeholders. The government is laying the foundation for a brighter, healthier future with an emphasis on providing quality healthcare for all, with universal access at the primary healthcare level. In this way we can achieve the mission of Jamaica being the place of choice to live, work, raise families and do business as outlined in our National Development Agenda, Vision 2030.’⁶

1.1.7 The National Health Fund (NHF), an agency of the Ministry of Health, in undated entries, noted the availability of 3 types of card entitling the holders access to subsidised healthcare:

- ‘The **NHF Card Programme** provides subsidies to every person living in Jamaica at any age for the treatment of 17 chronic illnesses.

‘The NHF Card helps you to pay for a select list of prescription drugs, respiratory devices, diabetic supplies and diagnostic tests via our participating pharmacies, laboratories or doctors offices. The NHF covers a fixed amount of the total cost, and you only pay the balance.

‘The NHF Card can also be combined with a private health insurance provider’s card to cover prescription costs. The NHF is always the first payer, and after the first amount is paid your private health insurance will be applied to the balance allowing you to pay even less out of pocket.’⁷

- ‘... the **Jamaica Drug for the Elderly Programme (JADEP)** improves access to essential drugs through payment subsidies. It provides a 100 per cent subsidy for specific drugs covering 10 chronic illnesses for all residents of Jamaica over the age of 60. The Card holder pays a fee to the pharmacy for dispensing the drugs.’⁸
- ‘Residents of Jamaica seeking healthcare in the public health sector have access to all health services as well as medication on the Vital Essential and Necessary (VEN) list, for no out-of-pocket cost via the **[Government of Jamaica] GOJ Health Card**.

‘The GOJ card when presented with a public sector prescription at selected pharmacies, entitles you to the VEN list of drugs approved by the Ministry of Health for use in public-sector hospitals and health centres. This card can be used at all Drug Serv pharmacies as well as at Public Sector Partner Pharmacies.’⁹

1.1.8 The NHF website, in an undated entry, reported that NHF card holders have access to the ‘[Complete Drug Subsidy List](#)’. The website also stated:

⁶ Commonwealth Health Online, Health in Jamaica, Minister of Health, undated, [url](#)

⁷ NHF, ‘NHF Card’, undated, [url](#)

⁸ NHF, ‘JADEP Card’, undated, [url](#)

⁹ NHF, ‘GOJ Health Card’, undated, [url](#)

'The NHF Card Programme is without age restrictions and provides subsidies to beneficiaries for the treatment of 17 chronic illnesses. These include:

'Asthma & Subsidy for Spacers & Masks

'Arthritis

'Breast cancer & Breast Cancer Receptor Studies Test

;Benign prostatic hyperplasia

'Diabetes & Diabetes Programme

'Epilepsy

'Glaucoma

'High Cholesterol

'Hypertension

'Ischaemic heart disease

'Lupus

'Major depression

'Prostate cancer

'Psychosis

'Rheumatic fever/heart disease

'Sickle cell disease

'Vascular disease'¹⁰

1.1.9 The Foreign and Commonwealth Office travel advice for British Citizens visiting Jamaica noted 'The standard of medical facilities, both private and government operated, can vary throughout Jamaica and may not meet UK standards; getting access to medication can be challenging. Medical treatment can be expensive with doctors and hospitals often expecting immediate cash payment for health services.'¹¹

1.1.10 The US Embassy in Kingston similarly observed:

'Medical care is much more limited than in the United States. Comprehensive but basic emergency medical services are located only in Kingston and Montego Bay, and smaller public hospitals are located in each parish. The availability of prescription drugs, emergency medical care, and ambulance services are limited in outlying parishes. Ambulance service is limited both in the quality of emergency care and in the availability of vehicles in remote parts of the country. Serious medical problems requiring hospitalization and/or medical evacuation to the United States can cost 15,000 – 20,000 USD or more. Private doctors and hospitals in Jamaica often require cash payment prior to providing services, even in emergency cases.'¹²

¹⁰ NHF, 'NHF Card - Illness & Benefits Covered', undated, [url](#)

¹¹ FCO, Foreign Travel Advice, Jamaica, 'Health', updated 24 October 2019, [url](#)

¹² US Embassy, 'Medical Assistance', undated, [url](#)

- 1.1.11 Lists and locations of hospitals, health centres and medical practitioners can be found on
- The [Ministry of Health and Wellness website, undated](#).
 - The British High Commission in Kingston's pages on GOV.UK, updated February 2015
 - The [US Embassy, Kingston](#), undated

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2. Noncommunicable diseases

2.1.1 The Commonwealth Health Online observed:

'Over the past decade or more there has been a shift in Jamaica's epidemiological profile from communicable to noncommunicable diseases (NCDs) arising largely from lifestyle changes. These rapid changes in the conditions and pattern of diseases as a result of changes in the global environment continue to have a major impact on Jamaica's health conditions.

'Since 1982 cardiovascular diseases, diabetes and cancers have been the leading causes of death in Jamaica. 2009 figures show that NCDs accounted for approximately 60% of deaths among men and 75% of deaths among women. Hypertensive diseases and ischemic heart disease were ranked third and fourth while breast cancer and cervical cancer ranked sixth and eighth.

'The four underlying risk factors – tobacco use, unhealthy diets, physical inactivity and the harmful use of alcohol – are largely responsible for the development of NCDs. These risk factors are fairly common in Jamaica. The 2008 Jamaica Health and Lifestyle Survey shows that 65 percent of the population 15-74 years old currently uses alcohol. By the age of 16 years, 19 percent of smokers had initiated smoking and 14.5 percent currently smoke cigarettes. Almost a half of the adult population was classified as having low physical activity or being inactive. Over 90 percent of persons who were diagnosed as being obese, having a high blood pressure and having high cholesterol were not on a specific diet for their condition and about 99 percent of Jamaicans currently consume below the daily recommended portions of fruits and vegetables.'¹³

2.1.2 The Jamaica Information Service, a Jamaican news outlet, reported on 8 May 2018:

'Regional Health Promotion and Education Officer at the Western Regional Health Authority (WRHA), Marceleen Wheatle, says non-communicable diseases (NCD) have emerged as the leading cause of death in Jamaica over the past 30 years.

'Speaking at a JIS Think Tank at the agency's Montego Bay Regional Office on Monday (May 7), Ms. Wheatle noted that the Health Ministry continues to push healthy eating and physical activity as the primary tools in the fight

¹³ Commonwealth Health Online, Health in Jamaica, Minister of Health, undated, [url](#)

against the NCDs, which include cardiovascular diseases, heart attack and stroke, cancers, chronic respiratory diseases and diabetes...

'Acting Parish Health and Promotion and Education Officer, Julian Grandison-Mullings, said the 'Jamaica Moves' campaign, which was launched by the Ministry of Health, has helped to garner the interest of persons and keep physical activity on the health agenda.

'She said the gains from the campaign will be reinforced through the staging of World Move for Health Day on Thursday, May 10.

'The St. James Public Health Services is collaborating with the Ministry on the staging of a day of activity at Sam Sharpe Square, Montego Bay.

'It is hoped that the planned activities will educate and empower individuals to make physical activity and healthy eating a part of their daily routine," Mrs. Grandison-Mullings said.'¹⁴

- 2.1.3 Dr. the Hon. Christopher Tufton, MP Minister of Health mentioned in a statement at the United Nations General Assembly on the prevention of and control of non-communicable diseases, in New York on 27 September 2018:

'The burden of non-communicable diseases (NCDs) affects countries worldwide but with a growing trend in developing countries. As a small island developing state, Jamaica has been especially hard hit, with cardiovascular disease, cancer, diabetes and chronic respiratory disease, significant public health threats to the island's development.

'The prevalence of NCDs is high among the population. Currently, 1 in 3 Jamaicans has hypertension and 1 in 8 has diabetes...

'Still, we are encouraged by the progress of the last several years. Jamaica has set national targets for the NCD response and undertaken research to direct policy and programmes, as well as approved the National Strategic and Action Plan for the Prevention and Control of NCDs in Jamaica 2013 – 2018, with mental health, sickle cell disease, and violence and injuries addressed in the plan...

'In 2017, the Jamaica Moves campaign was launched, with a focus on prevention through the promotion of physical activity, healthy eating and age-appropriate health checks. The programme is now being implemented in schools, workplaces and community settings.

'Our Ministry of Health and our Ministry of Education, Youth and Information are collaborating on the development and implementation of a National School Nutrition Policy, as well as a plan to promote healthy lifestyle and increase physical activity in schools through the Jamaica Moves in Schools campaign.'¹⁵

- 2.1.4 The Ministry of Health and Wellness has a non-communicable disease unit¹⁶. It outlines its main strategies to reduce NCDs:

'The Unit employs three main strategies to reduce the burden of NCDs in Jamaica: (i) tracking the disease burden and utilizing the data to guide

¹⁴ Jamaica Information Service, 'NCDs leading cause of death in Jamaica', 8 May 2018, [url](#)

¹⁵ Government of Jamaica, Statement of minister for health, , 27 September 2018, [url](#)

¹⁶ Ministry of Health and Wellness, 'The non-communicable disease unit', undated, [url](#)

policies and programmes (ii) reducing exposure of Jamaicans to the common risk factors for non-communicable diseases and injuries and (iii) strengthening health care systems for people with non-communicable diseases.

‘The Unit will know it has been successful when the risk factors, incidence, prevalence and mortality for non-communicable diseases including injuries decline.’¹⁷

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3. Blood disease

3.1.1 A MedCOI response of 7 June 2019 stated that the following tests and treatments are available:

- Blood transfusion – available at the public facility Kingston Public Hospital in Kingston
- Inpatient treatment by a haematologist – available at the public facility University Hospital of the West Indies in Kingston
- Outpatient treatment and follow up by a haematologist – available at the public facility University Hospital of the West Indies in Kingston
- Laboratory research/ monitoring of full blood count; e.g Hb, WBC and platelets – available at the private facility AHF Wellness Clinic in Kingston
- Outpatient treatment and follow up by an internal specialist (internist) – available at the private facility AHF Wellness Clinic in Kingston
- Inpatient treatment by an internal specialist (internist) – available at the private facility AHF Wellness Clinic in Kingston
- Diagnostic research: measuring blood oxygen/arterial blood gas (Astrup) – available at the public facility Kingston Public Hospital in Kingston.
- Medical devices pulmonology: oxygen therapy with device and nasal catheter – available at the public facility Kingston Public Hospital in Kingston
- Intravenous saline (NaCl) treatment – available at the public facility Kingston Public Hospital in Kingston
- Outpatient treatment and follow up by a paediatrician – available at the public facility Bustamante Hospital for Children in Kingston
- Inpatient treatment by a paediatrician – available at the public facility Bustamante Hospital for Children in Kingston¹⁸

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3.1.2 The MedCOI response of 7 June 2019 stated that the following medication is available:

¹⁷ Ministry of Health and Wellness, ‘The non-communicable disease unit’, undated, [url](#)

¹⁸ MedCOI, Response, 7 June 2019

- Ferrous gluconate: against anemia – available at the private facility York Pharmacy in Kingston
- Ferrous sulphate + folic acid (vit B9): against anemia – available at the private facility York Pharmacy in Kingston
- Erythropoietin: hematopoietic growth factor – available at the public facility University Hospital of the West Indies in Kingston
- Hydroxycarbamide (hydroxurea): preventing vaso-occlusive periods in e.g sickle cell anemia – available (but currently experiencing supply problems) at the private facility AHF Wellness Clinic in Kingston and the public facility University Hospital of the West Indies in Kingston
- Morphine: strong pain medication – available at the public facility University Hospital of the West Indies in Kingston
- Tramadol: strong pain medication – available at the private facility York Pharmacy in Kingston
- Folic acid: vitamins – available at the private facility York Pharmacy in Kingston
- Hydroxocobalamin: vitamins – available at the public facility University Hospital of the West Indies in Kingston¹⁹

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4. Heart disease

4.1 Treatment

4.1.1 A MedCOI response of June 2019 noted that the following treatments are available at the University Hospital of the West Indies in Kingston²⁰:

- Cardiac catheterization
- Catheter ablation; procedure to remove a faulty electrical pathway of the heart
- Heart valve surgery
- Open heart surgery
- Diagnostic imaging: electro cardio gram (ECG)
- Pediatric heart surgery²¹

4.1.2 Additional treatments available at the hospital include:

- Diagnostic imaging by means of cardiac stress test
- Diagnostic imaging by means of magnetic resonance imaging (MRI)
- Diagnostic imaging by means of specific transoesophageal echocardiogram (TEE)
- Diagnostic imaging by means of x-ray radiology

¹⁹ MedCOI, Response, 7 June 2019

²⁰ MedCOI, Response, 4 June 2019

²¹ MedCOI, Response, 4 June 2019

- Inpatient treatment by a cardiac surgeon
- Outpatient treatment and follow up by a cardiac surgeon
- Outpatient treatment and follow up by a a pediatric cardiologist
- Inpatient treatment by a pediatric cardiologist
- Placement of pacemaker
- Maintenance and follow up of pacemaker
- Diagnostic imaging by means of ultrasound of the heart (echocardiography)
- Procedure with electrical cardioversion (a treatment which aims to get... [an] abnormal heart rhythm (arrhythmia) back to a normal pattern)²²
- Diagnostic imaging by means of Holter monitor/ambulatory ECG device²³ (a test which monitors the heart's rhythm and electrical activity, 'the electrodes are connected to a small portable machine worn at your waist so your heart can be monitored at home for 1 or more days'²⁴).

4.1.3 The following treatment is available in the Revamp Comprehensive Rehabilitation Centre in Kingston (private facility):

- short-term cardiac rehabilitation
- long-term cardiac rehabilitation²⁵

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4.2 Medication

4.2.1 A MedCOI response of June 2019 noted that the following drugs are available at the FONTANA pharmacy in Kinsgton²⁶.

- Warfarin (anti blood clotting)
- Apixaban (anti blood clotting e.g pulmonary embolism (PE) or deep venous thrombosis (DVT)
- Rivaroxaban (anti blood clotting e.g PE or DVT)
- Acetylsalicylic acid (Aspirin) (anti blood clotting atiplatelet aggregation)
- Enoxaparin sodium (anti blood clotting LMWH)
- Heparin (anti blood clotting LMWH)
- Captopril (anti hypertension; ACE inhibitor)
- Enalapril (anti hypertension; ACE inhibitor)
- Lisinopril (antu hypertension; ACE inhibitor)
- Candesartan (anti hypertension; angiotensine 2 antagonist)

²² BHF, 'Cardioversion', undated, [url](#)

²³ MedCOI, Response, 4 June 2019

²⁴ NHS, 'Electrocardiogram (ECG)', 20 June 2018, [url](#)

²⁵ MedCOI, Response, 4 June 2019

²⁶ MedCOI, Response, 4 June 2019

- losartan (anti – hypertension; angiotensine 2 antagonist)
- Valsartan (anti – hypertension; angiotensine 2 antagonist)
- Atenolol (anti – hypertension; betablockers)
- Bisoprolol (anti – hypertension; betablockers)
- Metoprolol (anti – hypertension; betablockers)
- Nebivolol (anti – hypertention; betablockers)
- Amlodipine (anti – hypertension; calcium antagonist)
- Nifedipine (anti – hypertension; calcium antagonist)
- Indapamide (anti – hypertension; calcium antagonist)
- Bumetanide (anti – hypertention; loop diuretics)
- Furosemide (anti – hypertension; loop diuretics)
- Hydrochlorothiazide (anti – hypertension; thiazide diuretics)
- Digoxin (cardiac glycosides)
- Ivabradine (for angina pectoris/ischaemic heart disease²⁷)

4.2.2 [The National Health Fund](#) listed the medication available for hypertension in Jamaica, revised on 31 December 2018.

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5. Diabetes

5.1 Prevalence

5.1.1 diG Jamaica, a Jamaican information website²⁸, reported on 13 June 2018 that approximately 10,000 children under 15 suffer from diabetes in Jamaica, whilst over 220,000 Jamaicans between 15 and 74 have diabetes²⁹. The source noted that the disease is the ‘second leading cause of death for Jamaicans under 70 years old’³⁰.

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5.2 Treatment

5.2.1 MedCOI noted in its response of 16 August 2018 that ‘inpatient and outpatient treatment [of diabetes] and follow up by an Endocrinologist is available at University Hospital of the West Indies’ a public facility in Kingston. Furthermore, ‘the Laboratory research of blood glucose... and laboratory research of renal/ kidney function... are all available at the same hospital in Kingston’³¹.

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²⁷ MedCOI, Response, 4 June 2019

²⁸ diG, ‘What is diG?’, undated, [url](#)

²⁹ diG, ‘Diabetes in Jamaica’, 13 June 2018, [url](#)

³⁰ diG, ‘Diabetes in Jamaica’, 13 June 2018, [url](#)

³¹ MedCOI, 16 August 2018

5.3 Medication

5.3.1 A MedCOI response of August 2018 stated that the following drugs used to treat diabetes are available:

- Insulin: intermediate acting (12-24hr); insulin NPH / isophane like ® Insulatard;
- Insulin: long acting (24hr); insulin glargine like ®Lantus;
- Insulin, premixed: aspart (rapid acting) and aspart protamine (intermediate acting) like ® Novomix;
- Insulin: rapid acting (2-5hr); insulin aspart like ®Novorapid.³²

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6. Cancer

6.1 Treatment

6.1.1 The National Health Fund reported on 3 January 2019:

‘MORE Jamaicans can now access world-class cancer treatment with the opening of a National Cancer Treatment Centre at the St Joseph’s Hospital compound on Deanery Road in Kingston.

‘It is the second such facility to be opened by the National Health Fund (NHF). The other, which was opened a year ago, is located at Cornwall Regional Hospital in Montego Bay, St James.

‘...Of significance is that cancer patients will have access to treatment using state-of-the-art linear accelerators, a shift from cobalt radiation therapy.

‘Medical authorities emphasise that the LINAC devices will increase the efficacy of cancer radiation treatment as well as accessibility to cancer care in Jamaica. Services include external beam radiation treatments, image-guided radiation treatment, intensity-modulated radiation treatment, and high-dose brachytherapy.’³³

6.1.2 The Jamaica Cancer Society, a non-profit and non-governmental organisation³⁴, noted that:

‘...the Jamaica Cancer Society provides the Jamaican public with a range of cancer control and prevention services which includes fixed and mobile screening for cancer of the breast, cervix uteri, and prostate at a highly subsidized user fee. Its public health education programmes on cancer of the breast, cervix uteri, prostate, lung, and colon are offered free of charge to corporate organisations, churches, schools, service and community groups. The Society also offers to the medical community, CME credits to participate in its medical symposiums. Provision of counselling and support for newly diagnosed cancer patients and their families extends to hospital and home visits. Through its fundraising efforts, the Society offers financial aid to its

³² MedCOI, 16 August 2018

³³ NHF, ‘National Cancer Treatment Centre opens...’, 3 January 2019, [url](#)

³⁴ Jamaica Cancer Society, ‘About us – who we are’, updated 2019, [url](#)

most vulnerable customers to access diagnostic checks, surgery, radiation, and chemotherapy services.³⁵

- 6.1.3 The organisation's website mentioned that it 'carries out screening for cervical, breast and prostate cancer as well as selected diagnostic and treatment services'³⁶. Furthermore: 'Mammograms are done for women over 40 years old. A referral from a doctor is only required for women below this age. The office at 16 Lady Musgrave Road, Kingston 5 provides screening onsite. It is recommended that persons wishing to have this test done make an appointment by calling 927-4265.'³⁷
- 6.1.4 The organisation also provides mobile mammography³⁸ as well as mobile pap smear screening³⁹ for women living in 'geographic and economic isolation'.⁴⁰ Further services provided by the Jamaica Cancer Society include counselling services and outreach programmes⁴¹.
- 6.1.5 MedCOI noted in a response of 9 March 2018 that 'inpatient and outpatient treatment and follow up by an Oncologist is available at University Hospital of the West Indies', in Kingston⁴².
- 6.1.6 MedCOI stated in a response of 7 June 2019 that the following medical treatments are available at the University Hospital of the West Indies, a public facility in Kingston:
- Diagnostic imaging by means of mammography
 - Prostate Specific Antigen (PTA) test
 - Gynecology: Pap/ cervical smear
 - Diagnostic imaging by means of MRI
 - Urology: diagnostics; check up by cystometry
 - Outpatient treatment and follow up by an urologist
 - Inpatient treatment by an urologist
 - Inpatient treatment by a gynaecologist
 - Outpatient treatment and follow up by a gynaecologist
 - Gynaecological surgery: curettement / curettage / excochleation
 - Gynecological surgery for myoma
 - Reconstructive surgery by a plastic surgeon
 - Gynaecological surgery: laparoscopy

³⁵ Jamaica Cancer Society, 'About us – who we are', updated 2019, [url](#)

³⁶ Jamaica Cancer Society, 'Our services – clinic services', updated 2019, [url](#)

³⁷ Jamaica Cancer Society, 'Our services – Mammography', updated 2019, [url](#)

³⁸ Jamaica Cancer Society, 'Our services – Mammography', updated 2019, [url](#)

³⁹ Jamaica Cancer Society, 'Our services – Mobile pap smear screening', updated 2019, [url](#)

⁴⁰ Jamaica Cancer Society, 'Our services – Mammography', updated 2019, [url](#)

⁴¹ Jamaica Cancer Society, 'Our services – clinic services', updated 2019, [url](#)

⁴² MedCOI, Response, 9 March 2018

- Laboratory research / monitoring of full blood count; eg hb [haemoglobin], WBC [white blood cell] and platelets⁴³

6.1.7 The following medical treatments are available at the Kingston Public Hospital, a public facility⁴⁴:

- Diagnostic imaging by means of ultrasound
- Diagnostic imaging by means of computed tomography (CT scan)
- Oncology: radiation therapy
- Inpatient treatment by an oncologist
- Outpatient treatment and follow up by an oncologist
- Oncological surgery⁴⁵

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6.2 Medication

6.2.1 MedCOI noted in a response of 7 June 2019 that the following drugs are available:

- Tamoxifen (oncology: anti – hormones: anti – estrogens) – available at the private facility, York Pharmacy, in Kingston.
- Anastrozole (oncology: anti – hormones; aromatase – inhibitors) – available at York Pharmacy in Kingston.
- Exemestane (oncology: anti – hormones; aromatase – inhibitors) – available at York Pharmacy and Fontana Pharmacy in Kingston.
- Letrozole (oncology: anti – hormones; aromatase – inhibitors) – available at York Pharmacy in Kingston.
- Buserelin acetate (oncology: hormones) – available at York Pharmacy and Fontana Pharmacy in Kingston.
- Degarelix acetate (oncology: hormones) – available at University Hospital of the West Indies in Kingston.
- Goserelin (oncology: hormones) – available at University Hospital of the West Indies in Kingston.
- Leuprorelin acetate (oncology: hormones) – available at York Pharmacy in Kingston⁴⁶.

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7. Dengue fever

7.1.1 The World Health Organization reported on 4 February 2019:

‘On 3 January 2019, the International Health Regulations (IHR) National Focal Point of Jamaica notified WHO of an increase in dengue cases in Jamaica.

⁴³ MedCOI, 7 June 2019, last accessed: 19 February 2020

⁴⁴ MedCOI, 7 June 2019, last accessed: 19 February 2020

⁴⁵ MedCOI, 7 June 2019, last accessed: 19 February 2020

⁴⁶ MedCOI, 7 June 2019, last accessed: 19 February 2020

'From 1 January though 21 January 2019, 339 suspected and confirmed cases including six deaths were reported. In 2018, a total of 986 suspected and confirmed cases of dengue including 13 deaths have been reported. The number of reported dengue cases in 2018 was 4.5 times higher than that reported in 2017 (215 cases including six deaths). Cases reported to date for 2019 exceed the epidemic threshold...

'By the end of 2018, the largest number of reported cases were notified by Kingston and Saint Andrew parishes. In 2019 so far, the largest proportion of cases have been reported by Saint Catherine parish.

'Laboratory tests have identified DENV3 as the dengue serotype currently circulating.'⁴⁷

7.1.2 Loop Jamaica, a 'source for Caribbean-wide local, regional and glocal content'⁴⁸, reported on 10 October 2019 that since January 2019, there have been 88 dengue-related deaths according to health minister, Dr Christopher Tufton⁴⁹.

7.1.3 The source reported:

'Tufton noted that despite the efforts of the Government, the reduction in the number of cases has not been sustained sufficiently below the epidemic threshold. He pointed out that, after a dengue outbreak was declared in January, there was a "steady decline in the number of cases reported between January and June."

'However, there was an uptick in the number of cases in July and, as at August 28, 2019, some 4,400 presumed, suspected and confirmed cases of dengue were reported.

'The government has committed to spending \$350 million to fight the mosquito-borne virus.

"Since January 2019, the ministry has intensified its dengue prevention and control activities, with further intensification in July and again in September. Response activities involved strengthening surveillance case management and vector control management. The vector control management strategy includes strengthening human resource capacity and supporting efforts to decrease the the *Aedes Aegypti* mosquito island wide," Tufton said.

'More than 20 health centres and clinics islandwide continue to operate under extended work hours, until 10 pm, to accommodate persons and free up space in emergency units at public hospitals, Tufton revealed.'⁵⁰

7.1.4 Jamaica Information Service reported on 1 October 2019:

'Dr. Johnson-Campbell advised that staff at public health institutions across St. James have been working diligently to facilitate persons with suspected cases of dengue fever.

⁴⁷ World Health Organization, 'Dengue Fever – Jamaica', 4 February 2019, [url](#)

⁴⁸ Loop Jamaica, 'About us', undated, [url](#)

⁴⁹ Loop Jamaica, 'Dengue-related deaths almost double this year ...', 10 October 2019, [url](#)

⁵⁰ Loop Jamaica, 'Dengue-related deaths almost double this year ...', 10 October 2019, [url](#)

“Whether they come to the Cornwall Regional Hospital or to our health centres, we have sought to increase staffing to accommodate persons who need to be seen,” she informed...’⁵¹

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8. Zika virus

8.1.1 The Foreign and Commonwealth Office noted in its foreign travel advice that ‘UK health authorities have classified Jamaica as having a risk of Zika virus transmission’.⁵²

8.1.2 As of 15 February 2018, WHO listed Jamaica under Category 2 on the Zika Virus classification table – ‘an area either with evidence of virus circulation before 2015 or area with ongoing transmission that is no longer in the new or re-introduction phase, but where there is no evidence of interruption.’⁵³

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9. Gynaecological conditions

9.1.1 A MedCOI response of 15 October 2018 stated that an inpatient and outpatient treatment and follow up by a Gynaecologist is available at University Hospital of the West Indies’ in Kingston, which is a public facility.⁵⁴

9.1.2 Additional centres that provide care are:

- [Island Laparoscopy and Medical Care](#)
- [The Obstetrics and Gynaecology \(TOG\) Centre](#)

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10. Hepatitis

10.1 Hepatitis A, B and C

10.1.1 Dig Jamaica stated in a 2017 report:

‘In Jamaica, the most common forms of the virus are hepatitis A, B and C. According to Marsha Clarke [a speciality pharmaceutical representative⁵⁵], “Each year, between 150 and 450 persons are identified with either the hepatitis B or C virus, while being screened through the blood-donation process in Jamaica.” She surmises that more than 40,000 Jamaicans could be living with the hepatitis viruses without being aware – that is 0.5 per cent to 1.5 per cent of the donors screened by the Blood Transfusion Service of Jamaica. This number does not take into account the thousands of others who could be affected and are never screened for blood transfusions.’⁵⁶

10.1.2 CPIT could not find any further information in the sources consulted.

⁵¹ Jamaica Info. Service, ‘Persons urged to be aware of dengue fever symptoms’, 1 Oct 2019, [url](#)

⁵² Gov.uk, ‘Foreign Travel Advice – Jamaica’, updated 24 October 2019, [url](#)

⁵³ WHO, ‘Zika Virus classification table’, 15 February 2018, [url](#)

⁵⁴ MedCOI, 15 October 2018. Last accessed: 21 February 2020

⁵⁵ The Gleaner, ‘Danger facing Jamaica’, 28 July 2013, [url](#)

⁵⁶ diG, ‘Hepatitis and Jamaica: Stats & facts’, 19 May 2017 [url](#)

10.2 Sickle cell

10.2.1 The health minister, Dr the Hon Christopher Tufton stated at the UN General Assembly in September 2018 that sickle cell disease was addressed in the National Strategic and Action Plan for the Prevention and Control of NCDs in Jamaica between 2013 and 2018⁵⁷.

10.2.2 A MedCOI response of 7 June 2019 stated that the following medical treatment is available at the public facility University Hospital of the West Indies in Kingston:

- Clinical treatment in case of sickle cell crises⁵⁸

11. HIV/AIDS

11.1 Prevalence and treatment

11.1.1 UNAIDS observed that in Jamaica in 2018:

- 40,000 people were living with HIV
- HIV incidence per 1000 uninfected—the number of new HIV infections among the uninfected population over one year—among all people of all ages was 0.83.
- HIV prevalence—the percentage of people living with HIV—among adults (15–49 years) was 1.9%.
- 2,400 people were newly infected with HIV.
- 1,500 people died from an AIDS-related illness.⁵⁹

11.1.2 The same source further mentioned:

‘The 90–90–90 targets envision that, by 2020, 90% of people living with HIV will know their HIV status, 90% of people who know their HIV-positive status will be accessing treatment and 90% of people on treatment will have suppressed viral loads. In terms of all people living with HIV, reaching the 90–90–90 targets means that 81% of all people living with HIV are on treatment and 73% of all people living with HIV are virally suppressed. In 2018 in Jamaica:

- 31% of people living with HIV were on treatment.
- 25% of people living with HIV were virally suppressed.

‘Of all adults aged 15 years and over living with HIV, 31% were on treatment, while 51% of children aged 0–14 years living with HIV were on treatment...

‘Of the 40 000 adults living with HIV, 15 000 (37.5%) were women. New HIV infections among young women aged 15–24 years were about half of those among young men. HIV treatment was higher among women than men, with

⁵⁷ Government of Jamaica, Statement of minister for health, , 27 September 2018, [url](#)

⁵⁸ MedCOI, Response, 7 June 2019

⁵⁹ UNAIDS, ‘Jamaica – overview’, undated, [url](#)

47% of adult women living with HIV on treatment, compared to 22% of adult men...

'Only 39.04% of women and men 15–24 years old correctly identified ways of preventing the sexual transmission of HIV...' ⁶⁰

11.1.3 The Jamaica Observer reported in June 2019:

'ALMOST 1,200 new cases of HIV/AIDS were diagnosed in Jamaica last year as the number of persons across the island living with the disease climbed to 26,426.

'This moved the country's HIV/AIDS prevalence to 1.8 per cent in the general population, up from 1.7 in 2017.

'The figures are contained in the 2018 Economic & Social Survey Jamaica published by the Planning Institute of Jamaica (PIOJ)...

'It noted that 621, or 52 per cent, of the 1,197 new HIV/AIDS cases recorded in Jamaica last year were males, with persons in the 20 to 39 age group accounting for the largest share.

'More females living with HIV/AIDS were found in the age group 20-29 years, while males dominated the 30–39 age group...

'According to the PIOJ, although Jamaica has successfully increased access to treatment and care services, analysis of the data related to retention in care has shown increased loss-to- follow-up among patients on antiretroviral treatment.

'Regarding linkage to care, 75.0 per cent of patients diagnosed have been linked to care, and of those linked, 62.0 per cent have been retained in care. Of those retained in care, 95.0 per cent are on ARVs but only 52.0 per cent are virally suppressed

'The PIOJ said there is now an emphasis on closing the gaps regarding loss to follow-up and viral suppression at all sites and this process will continue.' ⁶¹

11.1.4 The report further noted:

'Jamaica's strategic/policy priorities for HIV are guided by the National Integrated Strategic Plan (NISP) for Sexual and Reproductive Health 2014–2019.

'The NISP is consolidated around five priority areas with associated interventions, key actions and outcomes.

'These are prevention and sexual and reproductive health outreach; universal access to treatment, care and support and services; enabling environment and human rights; monitoring and evaluation of HIV, family planning and sexual health responses and sustainability, governance and leadership.

'Last year Jamaica's efforts to tackle the HIV/AIDS problem was boosted by grants from international partners including the United States Agency for

⁶⁰ UNAIDS, 'Jamaica – overview', undated, [url](#)

⁶¹ Jamaica Gleaner, 'Slight uptick in number of HIV/AIDS cases...', 30 June 2019, [url](#)

International Development (USAID) which provided US\$7.6 million (J\$985.9 million) to the Ministry of Health for the National Response to HIV.

'The American agency also donated US\$3 million (J\$389.2 million) to Jamaica's Health Policy Plus project which seeks to strengthen advocacy to reduce the spread of HIV and improve access to HIV/AIDS programmes and services.

'USAID also provided assistance amounting to US\$1.8 million (\$233.5 million) for the LINKAGES project which aims to address gaps in the HIV responses and services network by strengthening community outreach, HIV testing and counselling, and linkage to care and treatment services.

'The Global Fund to Fight AIDS, tuberculosis and Malaria also provided a grant which supported the implementation of the national HIV/AIDS programme, focusing on reducing AIDS-related morbidity and mortality with effective biomedical and supporting interventions.

'A total of US\$4.0 million (J\$518.9 million) was disbursed compared with US\$5.2 million (J\$674.5 million) in 2017.'⁶²

11.1.5 The Ministry of Health and Wellness (MHW) noted:

'Jamaica increased public access to [anti-retro viral] ARV treatment with the support of the Global Fund to Fight AIDS, Tuberculosis and Malaria in September 2004. Additionally, Global Fund resources enabled the purchase of diagnostic and monitoring equipment (CD4, viral load etc.) and support to improve adherence to treatment.

'There has been rapid development and implementation of an extensive system of care, which includes screening and diagnostic services, counselling, psychological and social support, provision of specialized clinical care and improved access to antiretroviral medications. These services are also offered in the provision of treatment in the Prevention of Mother-to-Child Transmission programme, the provision of care and support to Orphans and Vulnerable Children (OVC) as well as targeted outreach testing to unearth new positives and to provide linkages to relevant treatment, care and support services.'⁶³

11.1.6 Regarding programmes offered, the MHW website mentioned the 'Prevention of Mother-to-Child Transmission (PMTCT+)' and the 'Orphans made vulnerable by HIV (OVC)'.⁶⁴

11.1.7 For the Prevention of Mother-to-Child Transmission, the MHW website stated:

'...triple therapy is now to be offered to all HIV positive pregnant mothers, as a more viable option with regards to the patients' long-term health. As at 31 March 2009 over 5,600 persons were ever started on antiretroviral therapy which exceeded the GF Target. Facilitating this are nineteen treatment sites (paediatric and adult) across the island with trained team of providers in each facility.

⁶² Jamaica Observer, 'Slight uptick in number of HIV/AIDS cases...', 30 June 2019, [url](#)

⁶³ Ministry of Health and Wellness, HIV Treatment and Care, page updated 18 February 2020, [url](#)

⁶⁴ Ministry of Health and Wellness, HIV Treatment and Care, page updated 18 February 2020, [url](#)

‘The Prevention of Mother-to-Child Transmission (PMTCT+) Programme continues to make significant gains. Routine opt-out HIV testing of antenatal clinic attendees resulted in testing of over 90 percent of pregnant women. More than 90 percent of HIV-exposed infants received anti-retroviral to lower the risk of transmission of HIV. The transmission rate of HIV from mother to child is estimated to be less than 10% coming from a baseline of 25%.

‘The major challenges to providing adequate access to health care services include the high proportion of infected individuals that do not know their HIV status; do not access antiretroviral (ARV) drugs or access care at a later stage of disease progression or do not adhere to the medication. Other challenges to access include continued stigma and discrimination that prevent many from getting tested, poor health-seeking behaviours and failure to disclose HIV status to partner(s).’⁶⁵

11.1.8 In addition, UNAIDS stated that in 2018, ‘more than 95% of pregnant women living with HIV accessed antiretroviral medicine to prevent transmission of the virus to their baby.’⁶⁶

11.1.9 For Orphans made Vulnerable by HIV programme, the MHW noted:

‘The programme consists of three major components:

1. OVC Situational Analysis – This was a follow-up to the one done by the National AIDS Committee in 2005.
2. Training – A two and a half (2 & ½) day training for approximately one hundred (100) health care workers in public and private children’s home including health education officers (HEOs) from the Ministry of Education (MOE) who assist OVCs in schools.
3. Island Wide Mapping – A list was created of places that OVCs can go to access support services.’⁶⁷

11.1.10 Regarding HIV testing, the MHW observed:

‘Voluntary counselling and testing sites have been established in all major health centres with over 95% of relevant staff (Contact Investigators, Social Workers, Public Health Nurses, etc.) trained in VCT protocol. For screening of HIV in outreach settings, the National HIV/STI Programme (including the behaviour change communication teams in all the regional health authorities) uses either the “finger prick” test (Uni Gold brand) or the oral test (Ora Quick brand).

‘All sexually active persons should be offered an HIV test. Individuals at high risk should consider annual HIV testing (at the minimum); there should be reinforcement of risk reduction leading to safer sexual behaviour.’⁶⁸

11.1.11 A MedCOI response of 7 June 2019 stated that the following tests and treatment are available:

⁶⁵ Ministry of Health and Wellness, HIV Treatment and Care, page updated 18 February 2020, [url](#)

⁶⁶ UNAIDS, ‘Jamaica – overview’, undated, [url](#)

⁶⁷ Ministry of Health and Wellness, HIV Treatment and Care, page updated 18 February 2020, [url](#)

⁶⁸ Ministry of Health and Wellness, HIV Treatment and Care, page updated 18 February 2020, [url](#)

- Laboratory research HIV: CD4 count – available at the private facility, AHF Wellness Clinic in Kingston.
- Laboratory research HIV: viral load – available at the private facility, AHF Wellness Clinic in Kingston.
- Specialist in pediatric HIV (in and out patient) – available at the public facility, Bustamante Hospital for Children in Kingston.
- Inpatient treatment by an internal specialist (internist) – available at the private facility, AHF Wellness Clinic in Kingston.
- Inpatient treatment by a HIV specialist – available at the private facility, AHF Wellness Clinic in Kingston.
- Outpatient treatment and follow up by a HIV specialist – available at the private facility AHF Wellness Clinic in Kingston.⁶⁹

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11.2 Medication

11.2.1 A MedCOI response of 7 June 2019 stated that the following medication are available in Jamaica:

- Abacavir (infections: HIV; antiretrovirals) – available at the private facility AHF Wellness Clinic in Kingston.
- Atazanavir (infections: HIV; antiretrovirals) – available at the private facility AHF Wellness Clinic in Kingston.
- Darunavir (infections: HIV; antiretrovirals) – available at the public facility, University Hospital of the West Indies in Kingston.
- Dolutegravir (infections: HIV; antiretrovirals) – available at the private facility AHF Wellness Clinic in Kingston.
- Efavirenz (infections: HIV; antiretrovirals) – available at the private facility, AHF Wellness Clinic in Kingston.
- Emtricitabine (infections: HIV; antiretrovirals) – available at the private facility, AHF Wellness Clinic in Jamaica.
- lamivudine (infections: HIV; antiretrovirals) – available at the private facility, AHF Wellness Clinic in Kingston.
- Ritonavir (infections: HIV; antiretrovirals) – available at the private facility, AHF Wellness Clinic in Kingston.
- Tenofovir alafenamide (infections: HIV; antiretrovirals) – available at the private facility, AHF Wellness Clinic in Kingston.
- Tenofovir disoproxil (infections: HIV; antiretrovirals) – available at the private facility, AHF Wellness Clinic in Kingston.
- Atripla (Atripla® (efavirenz + emtricitabine + tenofovir disoproxil) (infections: HIV; antiretrovirals; combinations – available at the private facility, AHF Wellness Clinic in Kingston.

⁶⁹ MedCOI, Response, 7 June 2019

- Truvada® (combination of tenofovir disoproxil/ emtricitabine), (infections: HIV; antiretrovirals; combinations) – available at the private facility, AHF Wellness Clinic in Kingston.⁷⁰

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12. Malaria

12.1.1 On 31 December 2019, the Jamaican Ministry of Health reported that ‘Jamaica remains Malaria free’.⁷¹

12.1.2 On 26 February 2018, the Jamaica Information Service reported that ‘locally, malaria has been successfully eradicated through programmes focused on public education, early detection and vector control’.⁷²

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13. Mental health

13.1 Overview

13.1.1 The Ministry of Health and Wellness stated:

‘The Mental Health Unit is a part of the Health Services, Planning and Integration Branch of the Ministry of Health...

‘The Mental Health Unit is primarily charged with the responsibility of developing policies and plans to address the promotion of mental health, the prevention of mental disorders and the development of a comprehensive range of services to facilitate early detection, treatment and rehabilitation across the lifespan, for affected persons. Important outputs of this process are the National Mental Health Policy and National Strategic Plan for Mental Health. Another important aspect of work of the Mental Health Unit is the recommendation of legislative amendments to ensure that Jamaica’s Mental Health Legislation is in keeping with international best practice standards.

‘The Director of the Unit advises the Senior Directorates and the Minister of Health on matters related to mental health. The provision of a Director for the Child and Adolescent Mental Health Portfolio highlights the commitment of the Ministry of Health to ensuring that youth related matters are given the importance they deserve. It is recognized that the majority of persons with mental illness would have been showing signs and symptoms prior to age fourteen (14) years. Hence much attention must be paid in these years to prevention, early detection and treatment. Although not directly supervising the work of the Regional Health Authorities, and the Bellevue Hospital, technical guidance is provided through policies, plans and the development of treatment protocols and guidelines.

‘Officers of the Unit also carry out regular monitoring and evaluation of services to ensure adherence to the standards developed by the Ministry of Health. The Mental Health Unit participates in much collaborative initiatives both intra-sectorally and inter-sectorally. Furthermore, there is wider

⁷⁰ MedCOI, Response, 7 June 2019

⁷¹ Ministry of Health and Wellness, ‘Jamaica remains Malaria free...’, 31 December 2019, [url](#)

⁷² Jamaica Information Service, ‘Get the facts’, 26 February 2018, [url](#)

collaboration with multisectoral organisations and non-governmental organisations, in the interest of achieving the stated goals.’⁷³

13.1.2 The Jamaica Observer stated in a September 2018 report:

‘Acting Director of Mental Health and Drug Abuse in the Ministry of Health Dr Kevin Goulbourne says stigma still remains a significant part of the problems facing persons with mental health illnesses.

‘He said, however, that persistent efforts are being made to reduce stigma and encourage families to seek help for their loved ones...

‘According to Dr Goulbourne, mental health authorities are not only seeking to educate the general public, but also health workers themselves, including doctors, who sometimes have negative attitudes towards psychiatric patients

‘Dr Goulbourne, meanwhile, noted that there is also the long-standing stigma attached to institutionalisation for psychiatric illnesses. He said a part of the thrust is to help persons who can to reintegrate into the society, and thereby assist with removing stigma. He said, too, that work would continue on plans for the deinstitutionalisation of patients at the island's only psychiatric hospital — Bellevue

‘Classification of patients at Bellevue Hospital has already been undertaken and a Cabinet submission is being prepared, seeking authorisation for separation and changes in staffing arrangements, said the medical doctor.

‘Mental health services are available across the ministry's four health regions, administered by psychiatrists, and mental health officers, assisted by psychiatric aides.

‘Dr Goulbourne said services can be accessed at community health centres, hospitals and there are also 24-hour emergency services, including response to calls for assistance.’⁷⁴

13.1.3 The Jamaica Observer further reported on 13 January 2019:

‘The Human Resource Management Association of Jamaica (HRMAJ), in collaboration with Essential Medical Services (EMS), will be tackling the issue of mental well-being in the workplace in an upcoming seminar, given statistics which show that Jamaica has the lowest productivity rates in the Americas.

‘...the Jamaica Health and Lifestyle survey (2016-2017), released by the Ministry of Health last year, showed a national estimate of 14.3 per cent in the prevalence of depression. For women, this prevalence was 18.5 per cent, and 9.9 per cent among men.’⁷⁵

13.1.4 In addition, the Jamaica Observer reported on 3 January 2020:

‘ONE of the country's senior health officials is urging Jamaicans silently suffering from depression and mental health disorders to break that silence and seek help.

⁷³ The Ministry of Health and Wellness, ‘Mental Health Unit’, undated, [url](#)

⁷⁴ Jamaica Observer, ‘Ministry trying to remove stigma...’, 12 September 2018, [url](#)

‘Noting that people with anxiety and depression problems can be helped before they escalate, Dr Goulbourne said the majority of patients seen in the island’s public clinics have psychotic problems. He noted further that “in the general population, the majority of persons who have mental health problems are those with depression and anxiety”...

“We are urging persons to use the helpline so they can be connected to help. It is toll free. Call and get an expert assessment from our psychologists who will help through an initial evaluation and connect you to help. We do know that if you can intervene with anxiety and depression early it will result in savings, not just to the individuals but to their families and the nation, and not just savings financially but socially and emotionally as well,” he said.⁷⁶

- 13.1.5 The response of 15 October 2018 noted that Sertraline and Citalopram (Psychiatry: antidepressants; SSRI) and Topiramate and Gabapentin (Psychiatry: medication as off-label use) are available⁷⁷.

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13.2 Treatment

- 13.2.1 Bellevue Hospital in Kingston stated on its website that its mission and vision is ‘to be responsible and committed to providing the highest quality psychiatric care, ensuring that medical treatment, nursing and rehabilitative care, is carried out in a clean and safe environment.’⁷⁸ It has ‘just over seven hundred patients’ and ‘twenty three wards’. The hospital’s website also stated that it is ‘divided in[to] acute, sub-acute, psycho-medical, mental subnormal, long stay, psycho geriatric and rehabilitative wards.’⁷⁹
- 13.2.2 The Jamaica Information Service stated that Bellevue hospital has ‘the legal responsibility to accept all persons needing psychiatric care.’⁸⁰
- 13.2.3 Two MedCOI responses of 10 August 2018 and 15 October 2018 stated that ‘inpatient and outpatient treatment follow up by a Psychiatrist and Psychiatric treatment by means of psychotherapy: e.g. cognitive behavioural therapy is available at University Hospital of the West Indies, (Public Facility)’^{81 82}
- 13.2.4 MedCOI stated in a 6 June 2019 response that the following treatments are available at the public facility, University Hospital of the West Indies in Kingston, Jamaica:
- Inpatient treatment by a child psychologist
 - Inpatient treatment by a pediatric psychiatrist
 - Outpatient treatment and follow up by a child psychologist
 - Outpatient treatment and follow up by a pediatric psychiatrist
 - Inpatient treatment by a psychologist

⁷⁶ Jamaica Observer, ‘Speak up and seek help’, 3 January 2020, [url](#)

⁷⁷ MedCOI, Response, 15 October 2018

⁷⁸ Bellevue Hospital, ‘Mission and Vision’, undated, [url](#)

⁷⁹ Bellevue Hospital, ‘Brief history’, undated, [url](#)

⁸⁰ Jamaica Information Service, ‘Bellevue Hospital’, undated, [url](#)

⁸¹ MedCOI, Response, 15 October 2018

⁸² MedCOI, Response, 18 August 2018

- Outpatient treatment and follow up by a psychologist
- Psychiatric clinical treatment (short term) by a psychiatrist
- Psychiatric crisis intervention in case of suicide attempt
- Psychiatric forced admittance in case necessary
- Psychiatric long term clinical treatment (e.g for chronic psychotic patients) by a psychiatrist
- Outpatient treatment and follow up by a psychiatrist
- Psychiatric treatment of drug addiction; outpatient care
- Psychiatric treatment of alcohol drug addiction in a specialised clinic (detox)
- Psychiatric treatment of drug addiction in a specialised clinic (rehab)
- Psychiatric treatment of PTSD: related to sexual violations
- Psychiatric treatment of PTSD by means of narrative exposure therapy
- Psychiatric treatment of PTSD by means of cognitive behavioural therapy
- Psychiatric treatment of PTSD by means of EMDR
- Psychiatric treatment by means of psychotherapy e.g cognitive behavioural therapy
- Psychiatric treatment by means of psychotherapy: other than cognitive behavioural therapy⁸³

13.2.5 The following medical treatment is available at the private facility, Ferdies house in Kingston:

- Psychiatric treatment in the form of sheltered housing (e.g for chronic psychotic patients)⁸⁴

13.2.6 The following medical treatment is not available in Jamaica, in neither a private or public facility:

- Psychiatric treatment: assisted living / care at home by psychiatric nurse. However, sheltered group homes with 24h assistance exist (example Ferdies House), but home visits and home care is not available⁸⁵.

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13.3 Medication

13.3.1 MedCOI stated in its June 2019 response, that the following medication is available in Jamaica:

- Escitalopram, for psychiatry: antidepressants – available at the private facility, Fontana Pharmacy in Kingston

⁸³ MedCOI, Response, 6 June 2019

⁸⁴ MedCOI, Response, 6 June 2019

⁸⁵ MedCOI, Response, 6 June 2019

- Fluoxetine, for psychiatry: antidepressants - available at the private facility, Fontana Pharmacy in Kingston
- Mirtazapine, for psychiatry: antidepressants – available at the private facility, York Pharmacy in Kingston.
- Paroxetine, for psychiatry: antidepressants – available at the private facility, Fontana Pharmacy in Kingston
- Sertraline, for psychiatry: antidepressants - available at the private facility, Fontana Pharmacy in Kingston
- Venlafaxine, for psychiatry: antidepressants - available at the private facility, Fontana Pharmacy in Kingston
- Amitriptyline, for psychiatry: antidepressants; TCA - available at the private facility, Fontana Pharmacy in Kingston
- Clozapine, for psychiatry: antipsychotics; modern atypical – available (but currently experiencing supply problems) at the public facility University Hospital of the West Indies in Kingston, and the private facility York Pharmacy in Kingston.
- Olanzapine, for psychiatry: antipsychotics; modern atypical - available at the private facility, Fontana Pharmacy in Kingston
- Quetiapine, for psychiatry: antipsychotics; modern atypical – available at the private facility, Fontana Pharmacy in Kingston
- Risperidone, for psychiatry: antipsychotics; modern atypical – available at the public facility, Fontana Pharmacy in Kingston.
- Lithium carbonate, for psychiatry: bipolar disorder/ manic depression – available at the private facility, Fontana Pharmacy in Kingston
- Trihexyphenidyl, for psychiatry: for side effects of antipsychotics/ anti Parkinsonism – available at the private facility, Fontana Pharmacy in Kingston⁸⁶

13.3.2 The following medication is not available in either private or public facilities:

- Trazodone, for psychiatry: antidepressants
- Nortriptyline, for psychiatry: antidepressants; TCA
- Haloperidol decanoate depot injection, for psychiatry: antipsychotics classic; depot injections
- Haloperidol, for psychiatry: antipsychotics; classic
- Aripiprazole, for psychiatry: antipsychotics; modern atypical
- Paliperidone, for psychiatry: antipsychotics; modern atypical
- Olanzapine pamoate depot injection, for psychiatry: antipsychotics; modern atypical depot injections

⁸⁶ MedCOI, Response, 6 June 2019

- Risperidone depot injection, for psychiatry; modern atypical depot injections
- Biperidene, for psychiatry: for side effects of antipsychotics/ anti Parkinsonsim
- Methadone, for psychiatry: medication used for addiction treatment⁸⁷

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14. Neurology

14.1.1 MedCOI stated in a 16 August 2018 response that 'inpatient and outpatient treatment and follow up by a Neurologist is available at University Hospital of the West Indies' in Kingston.⁸⁸

14.1.2 CPIT could not find any further information in the sources consulted.

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15. Ophthalmology

15.1.1 A MedCOI response of 24 January 2019 stated that 'inpatient and outpatient treatment and follow up by an Ophthalmologist is available at University Hospital of the West Indies' in Kingston⁸⁹.

15.1.2 The Ophthalmology society of Jamaica is located in the Univeristy Hospital of the West Indies in Kingston and its main objective is 'to promote the best eye-care in Jamaica and the Caribbean through corporative efforts⁹⁰. For more information, see the [The Ophthalmology society of Jamaica](#) website.

15.1.3 In addition, in an article of February 2016 on Sightsavers, an international charity, an ophthalmology unit is located in the Mandeville Regional Hospital in Jamaica which was set up as a jointly funded project by Sightsavers and the European Union⁹¹. The 'aim of the European Union-funded project is to reduce the prevalence of blindness' by:

- 'Helping to train eye health professionals
- 'Developing infrastructure, including operating theatres, vision centres and spectacle labs
- 'Supporting research activities
- 'Creating public awareness
- 'Increasing access to services for people who are blind and visually impaired.'⁹²

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⁸⁷ MedCOI, Response, 6 June 2019

⁸⁸ MedCOI, Response, 16 August 2018

⁸⁹ MedCOI, Response, 24 January 2019

⁹⁰ Ophthalmological Society of Jamaica, 'our objectives', undated, [url](#)

⁹¹ Sightsavers, News/Eye health, 'Sightsavers-supported ophthalmology unit...', February 2016, [url](#)

⁹² Sightsavers, News/Eye health, 'Sightsavers-supported ophthalmology unit...', February 2016, [url](#)

16. Paediatrics

- 16.1.1 MedCOI stated in a 16 August 2018 response that ‘inpatient and outpatient treatment and follow up by an Ophthalmologist is available at University Hospital of the West Indies’⁹³, in Kingston⁹⁴.
- 16.1.2 The South East Regional Health Authority (SERHA), a statutory body of the Jamaican Ministry of Health⁹⁵, stated that Bustamante Hospital for Children: ‘...has the distinction of being the only specialist paediatric hospital in the English Speaking Caribbean. With a bed capacity of 253, this remarkable institution caters to patients from birth to 12 years, providing a comprehensive range of diagnostic, preventive, curative, rehabilitative and ambulatory services in paediatric medical and surgical specialties and sub-specialties.
- ‘The hospital caters to not only patients from across Jamaica, but other neighbouring Caribbean countries.’⁹⁶

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17. Palliative care

- 17.1.1 CPIT could not find information about the availability of palliative care in the sources consulted (see [Bibliography](#)).

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18. Renal disease

- 18.1.1 Loop Jamaica stated in a October 2019 report:
- ‘Up to 150,000 Jamaicans are afflicted by some form of kidney disease, Health and Wellness Minister, Dr Christopher Tufton has indicated.
- ‘The number includes those in the early stages of the disease, and in some instances at the end stage when dialysis is required, Tufton said.
- ‘The minister said the Government is “very concerned about the numbers”, and as such, has been working on a list of things to address the issues, “starting with prevention, because what we’re advocating now is how do we make curative treatment methods more affordable...,” he said.
- ‘Tufton added that the Government is also looking to expand the kidney transplant programme.
- ‘Regarding renal failure and the need for dialysis, he cited that the public health system offers some support, but noted that there is always a waiting list.
- ‘Tufton pointed out that those who access treatment in the private sector are forced to fork out up to \$80,000 per week.

⁹³ MedCOI, 16 August 2018, last accessed: 21 February 2020

⁹⁴ MedCOI, 16 August 2018, last accessed: 21 February 2020

⁹⁵ SERHA, ‘About us’, undated, [url](#)

⁹⁶ SERHA, Bustamante Hospital for Children, undated, [url](#)

‘He said while the Government provides some support, “The question is whether or not we can afford to give the levels of support that everybody needs.”

‘The Government has determined that this is not possible at this point in time, he added.

‘Meanwhile, Tufton told the House that patients in the public health system can now access diagnostic and radiology services paid for by the Government at 10 privately-run facilities.

‘Apex Radiology, Danhope Radiology, Dynamic Imaging Services, Erin Radiology, Imaging and Intervention Associates, Khris Radiology, North Coast Imaging, Radiology West, St Jago Ultrasound and X-Ray and the University Hospital of the West Indies (UHWI).

‘The test procedures/investigations that are covered under the arrangement are CT scans, MRI scans, ultrasounds, endoscopy (colonoscopy), mammography, x-ray services, among others. There is no requirement for patients to apply for assistance in regards to accessing the applicable services.

“Where a public hospital does not have the capacity in-house to provide the required diagnostic/radiology tests, whether due to lack of equipment or equipment malfunctioning, patients will be referred to a contracted service provider by the hospital administration based on the recommendation of the attending physician, for the required tests to be administered,” Tufton outlined.

‘He said the programme applies to hospital patients only, such as in-patients, accident and emergency patients and persons being seen at out-patient clinics...’⁹⁷

- 18.1.2 A MedCOI response of 4 December 2019, stated that laboratory research of renal/kidney function (creatinine, ureum, proteinuria, sodium, potassium levels) is available at the public facility University Hospital of the West Indies in Kingston⁹⁸.

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19. Tuberculosis

- 19.1.1 The Jamaica Observer reported on 26 September 2018 that ‘Caribbean countries have the lowest incidence of tuberculosis (TB) and are on the road to elimination, the Pan American Health Organization/World Health Organization (PAHO/WHO) said yesterday.’⁹⁹
- 19.1.2 CPIT could not find information about the availability of the treatment in the sources consulted (see [Bibliography](#)).

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⁹⁷ Loop Jamaica, ‘150,000 J’cans have kidney disease...’, 31 October 2019, [url](#)

⁹⁸ MedCOI, Response, 4 December 2019

⁹⁹ Jamaica Observer, ‘Caribbean countries in the forefront to eliminate TB’, 26 September 2018, [url](#)

Terms of Reference

A 'Terms of Reference' (ToR) is a broad outline of what the CPIN seeks to cover. They form the basis for the [country information section](#). The Home Office's Country Policy and Information Team uses some standardised ToRs, depending on the subject, and these are then adapted depending on the country concerned. For this particular CPIN, the following topics were identified prior to drafting as relevant and on which research was undertaken:

- Overview of the healthcare system
 - Healthcare in Jamaica
 - Standard of healthcare and medical facilities
 - Public and private institutions
 - Noncommunicable diseases (NCDs)
- Heart disease
 - Treatment
 - Medication
- Diabetes
 - Statistics
 - Treatment
 - Medication
- Cancer
 - Treatment
 - Medication
- Dengue fever
- Zika Virus
- Gynaecological conditions
- Hepatitis
- Haematology
 - Treatment
 - Medication
 - Sickle cell
- HIV/AIDs
 - Treatment
 - Medication
- Malaria
- Mental Health

- Overview
 - Treatment
 - Medication
 - Hospitals and psychiatric facilities
- Neurology
- Ophthalmology
- Paediatrics
- Palliative care
- Renal disease
 - Overview
 - Treatment
- Tuberculosis

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Version control

Clearance

Below is information on when this note was cleared:

- Version **1.0**
- valid from **2 March 2020**

Changes from last version of this note

New CPIN

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