

REGIONAL REPORT

EXECUTIVE SUMMARY

The 2008 Regional Report summarises the findings of the Reproductive Health Survey (RHS) conducted in Jamaica in 2008 by the country's health regions. It is one (1) of the three (3) volumes of the final report that is based on the findings from the survey. From 1997 the report of the RHS has been presented in three (3) volumes consisting of the Final Report, the Young Adults Report and the Regional Report. The 2008 survey is a continuation of a series of surveys conducted by the National Family Planning Board with financial support from the United States Agency for International Development (USAID). The Statistical Institute of Jamaica (STATIN) conducted the survey with technical assistance from the Centres for Disease Control and Prevention (CDC) Division of Reproductive Health.

The survey was instrumental in providing information at the national and at the regional level on Reproductive Health issues in Jamaica among women aged 15–49 years and men 15-24 years. It has provided information on Family Planning including contraceptive knowledge and use; sexual activity; pregnancy history; Maternal and Prenatal care and other matters related to Reproductive Health.

Jamaica is divided into 14 parishes and the Ministry of Health (MoH) has divided the country into four (4) Regional Administrative Health Authorities to provide health care to the nation. These are:

1. Health Region 1 - the South East Regional Health Authority (SERHA) comprising the parishes of Kingston, St. Andrew, St. Thomas and St. Catherine.
2. Health Region 2 – the North-East Regional Health Authority (NERHA) covering the parishes of Portland, St. Mary and St. Ann.
3. Health Region 3 – the Western Regional Health Authority (WRHA) serving the parishes of Trelawny, St. James, Hanover and Westmoreland.
4. Health Region 4 – the Southern Regional Health Authority (SRHA) which encompasses the parishes of St. Elizabeth, Manchester and Clarendon.

The main purpose of the 2008 Regional Report is to provide updated information on the Reproductive Health of females and males in each health region. Specifically, the report is designed to assess health conditions covering Maternal-child Health and behavioural risk factors relating to contraception. The report covers for each health region fertility; planning status of last or current pregnancy; knowledge of contraceptives; contraceptive use - pill use and condoms; sources of contraceptives; women's health and prenatal care. Topics for young adults such as family life, sex education class, sexual experience, contraceptive use at first sexual intercourse and main source of contraceptive method are also included.

Health Region 1

Total Fertility Rate (TFR) and Age-Specific Fertility Rate

The TFR for Health Region 1, which is also lower than the national rate, has declined from 2.3 in 2002 to 2.1 in 2008.

Comparing the survey years 2002 and 2008, the ASFR trend for Health Region 1 showed declines among the younger age groups and increases among the older age groups. The ASFR for the 15-19 age group decreased from 88 in 2002 to 60 in 2008, a decline of 28 births per 1,000 women or 32 per cent. Declines of three (3) births, 30 births and 16 births per 1,000 women were noted for the 20-24, 25-29 and 30-34 age groups.

Increases were evident in the 35-39 age group where births per 1,000 women increased from 51 in 2002 to 52 in 2008 representing a two (2) per cent increase. The largest increase was seen in the 40-44 age group where births per 1,000 women increased from 15 in 2002 to 49 in 2008, an increase of 34 births per 1,000 women. The 45-49 age groups also had an increase of two (2) births per thousand women comparing the two (2) survey years.

Planning Status of Pregnancies

When compared with Jamaica, Health Region 1 had a similar percentage of planned pregnancies (49.8% for Jamaica vs. 49.7 % for Health Region 1). The percentage of mistimed pregnancies only differed from the national level by 1.2 percentage points, while the percentage of unwanted pregnancies differed from the national level by 1.3 percentage points.

Knowledge of Contraception

Over 95 per cent of women aged 15-49 years knew about the male and female Condoms, the Pill, Injectables and Tubal Ligation. This was very similar to responses in 2002 with the exception of the Female Condom, which was the method identified during that survey. Awareness was lowest for Spermicides and Natural Methods. Further comparison with the 2002 RHS showed that awareness increased for all but four (4) methods: Injectable, Intra- Uterine Device (IUD), Vasectomy and Spermicides (tablets and creams).

All young adult men were aware of the Male Condom, 96 per cent knew about the Pill and 90 per cent had heard of the Female Condom. Awareness was lowest for Natural Method/Calendar and Rhythm (25.2%), tablets and cream/Spermicides (26.55); IUD (28.1%), Implants (33.45) and Diaphragm (38.4%). A similar response pattern also emerged from the 2002 RHS results.

Contraceptive use

In 2008, approximately 72 per cent of the women in union in Jamaica were using a method of contraception; higher than the 69 per cent reported in 2002. This was no different for women in Health Region 1 which had 72 per cent current users; a two (2) percentage point increase compared with 2002.

Condom use

Approximately 76 per cent in women were using the condom to prevent both pregnancy and STIs. This was an improvement from 48 percent in 1997 and 62 per cent in 2002.

Young Adults

The proportion of sexually active young adults increased with age and males were more sexually experienced than their female counterparts within the two (2) age groups.

Health Region 2

Total Fertility Rate (TFR) and Age-Specific Fertility Rate

In 2008, the TFR for Health Region 2 was slightly higher than the national average (2.5 vs. 2.4). The TFR for Health Region 2 remained constant at 2.5 when comparing the 2002 and 2008 RHSs.

Comparing the survey years 2002 and 2008, unlike the trend seen in Health Region 1, there was no set pattern observed. The ASFR for the 15-19 age group decreased from 70 to 68, representing a two (2) births per 1,000 women decline or three (3) per cent. The ASFR for the 20-24 age group also declined from 155 in 2002 to 128 in 2008, representing a decline of 27 births per 1,000 women or 17.4 per cent. Increases in ASFR were however observed for the 25-29, 30-34 and 35-39 of 13, 17 and five (5) births per thousand women respectively.

Declines were also seen for the 40-44 and 45-49 age groups. The ASFR for the 40-44 age group declined from 42 in 2002 to 25 in 2008, a decline of 17 births per thousand women or 40.5 per cent. The ASFR for the 45-49 age group only experienced a slight decrease from seven (7) in 2002 to six (6) in 2008, a decline of one (1) birth per 1,000 women or 14 per cent.

Planning Status of Pregnancies

When compared with Jamaica, Health Region 2 also had a similar percentage of planned pregnancies (49.8% for Jamaica vs. 47.7 % for HR2). The percentage of mistimed pregnancies only differed from the national level by 1.5 percentage points, while the percentage of unwanted pregnancies differed from the national level by 2.3 percentage points.

Knowledge of Contraception

Almost all of the women in Health Region 2 have heard of the Condom (100%), pill (99%) and Injectables (99.2%); while some 95 per cent have heard of Tubal Ligation (95.2%) and the Female Condom. Four (4) out of every five (5) women have heard of withdrawal (85.9%), Emergency Contraceptive Pill (81.6%) and IUD (81.3%). Three (3) of the least known contraceptive methods were Spermicides (49.5%), Natural Methods (55.5%) and Vasectomy (59.2%).

In 2008, two (2) of the most common methods which young adult men had heard of were condoms (99.8%) and pills (92.4%); very similar to the 2002 RHS findings. This was followed by the Female Condom (83.4%), the Injectables (79.7%) and Tubal Ligation (61.6%). There was an observed decline in the awareness of all methods except the Condom, Implant and the Emergency Contraceptive when compared to 2002.

Contraceptive use

At the national level, the overall level of use of these methods was 72 per cent in 2008, compared with 69 per cent in 2002. These figures were below the comparative levels in Health Region 2 in both years (75.2% and 72% respectively).

Condom use

A higher percentage (20.1%) of women aged 25-49 years used condoms as a means of preventing pregnancy in 2008, compared with 17 per cent in 2002. On the other hand, in 2008, 18 per cent used condoms to prevent STIs, when compared to 17 per cent in 2002. Those who used condoms for both purposes showed a slight decline in 2008 (61.7 %) from the 2002 level (63.3%).

Young Adults

At the regional level, in 2008, 81 per cent of the female respondents used a method of contraception, compared with 64 per cent in 2002. There was also a significant increase in the proportion of males who used a method at their first sexual intercourse, moving from 40 per cent in 2002 to 61 per cent in 2008.

Health Region 3

Total Fertility Rate (TFR) and Age-Specific Fertility Rate

In Health Region 3 there was a decline in the TFR from 2.8 in the year 2002, to 2.5 in the year 2008.

Comparing the survey years 2002 and 2008, the ASFR declined for every age group except the 15-19 age group which increased from 68 in 2002 to 98 in 2008, an increase of 30 births per 1,000 women or 44.1 per cent. The largest decrease was observed in the 25-29 age group which had an ASFR of 133 in

the year 2002 and an ASFR of 92 in the year 2008 which represents a decline of 41 births per 1,000 women or 31 per cent.

Planning Status of Pregnancies

When compared with Jamaica, Health Region 3 had a higher percentage of planned pregnancies (49.8% for Jamaica vs. 55.9 % for HR 3). The percentage of mistimed pregnancies differed from the national level by 2.9 percentage points, while the percentage of unwanted pregnancies differed from the national level by 3.1 percentage points.

Knowledge of Contraception

Of women aged 15-49, their knowledge of Condom, Pill Injectable and Tubal Ligation (99.9%, 99.8%, 99.1% and 95.6% respectively in 2008) have remained relatively high from the 1997 to the 2008 survey. Knowledge of the female condom at 95 per cent which was not asked in previous surveys, proved to be high in 2008. Approximately 83 per cent of the women had knowledge about the IUD, 90 per cent about Withdrawal and 61 per cent about Diaphragm. Knowledge about methods such as Vasectomy (56.1%), tablets/creams (38.3%), Calendar/Rhythm (52.1%), and Implant (42.6%) tended to be low and has been declining since the 2002 survey. Knowledge of the ECP increased significantly from 37 per cent in 2002 to 81 per cent in 2008.

Knowledge of contraception for young adult males was similar to that of females for Condom, Pill and Injectable. All of the male respondents (100%) reported knowledge of Condom, 97 per cent reported knowledge of the Pill and 92 per cent of Injectable. Notably, knowledge of other methods such as withdrawal (85.1%) and ECP (70.7%) has been on the increase since 2002. However, there was a slight decrease in knowledge of Tubal Ligation where it moved from 84 per cent in 2002 82 per cent in 2008. Although knowledge of the other methods was fairly low, there was some improvement over the 2002 survey, except for Diaphragm, (41.3%) which in 2008 declined from 48 per cent.

Contraceptive use

Contraceptive use for the region declined marginally comparing the years 2002 and 2008 by two (2) percentage points, moving from 73 per cent in 2002 to 71 per cent in 2008.

Condom use

For the region, there has been a continuous increase in the percentage of women who used condoms, both for protections against pregnancy and to prevent STIs including HIV (50% in 1997, 59.9% in 2002 and 71.8% in 2008). Similarly, for women who indicated that they used condoms to prevent STIs, there was also a continuous decrease in the percentage from 31 per cent in 1997 to 21 per cent in 2002 and 21 per cent in 2008.

Young Adults

For Health Region 3, just over 43 per cent of the females in the 15-19 age group and 94 per cent of those in the 20-24 age group had sexual experience. Likewise, just over 49 per cent of the males ages 15-19 years and 92 per cent of those in the 20-24 age group had sexual experience.

Health Region 4

Total Fertility Rate (TFR) and Age-Specific Fertility Rate

Comparing the past two (2) survey years, the TFR for Health Region 4, has been greater than the TFR for the nation. In 2008 the TFR for Health Region 4 was 2.7, down from 2.6 in the year 2008. This exceeded the national level for both years as Jamaica's TFR was 2.5 in 2002 and was 2.4 in 2008.

Comparing survey years 2002 and 2008, the ASFRs for Health Region 4 have not shown a steady pattern or trend. The ASFR for the 15-19 age group declined from 76 births per 1,000 women to 72 births, a decline of four (4) births or 5.2 per cent. The ASFR for the 25-29 age group also declined from 123 in 2002 to 102 in 2008, a decline of 21 births or 17.1 per cent. Declines were also observed in the 35-39 age group and the 40-44 age group; these declines were by 20 births and one (1) birth per 1,000 women respectively.

The only increases observed were for the 20-24 age group and the 30-34 age group. The ASFR for the 20-24 age group increased from 142 births per 1,000 women to 160, an increase of 18 births or 13 per cent.

Planning Status of Pregnancies

When compared with Jamaica, Health Region 4 had a lower percentage of planned pregnancies (49.8% for Jamaica vs. 46 % for Health Region 4). The

percentage of mistimed pregnancies differed from the national level by 1.2 percentage points, while the percentage of unwanted pregnancies differed from the national level by 3.8 percentage points.

Knowledge of Contraception

Virtually all women in Health Region 4 have heard of the Condom (100%), Pill (99.7%), Injectables (98.8%) and Tubal Ligation (96.7%). Almost 90 per cent have heard of the withdrawal method. The Diaphragm, Implant, Natural Methods and Spermicides were less well known. Also, knowledge of the IUD and ECP was higher in 2008 than in 2002.

Among young adult men, the best known methods were condoms (99.7%), the Pill (94.6%) and Injectables (89.4%). Knowledge of other methods such as Tubal Ligation (69.9%), IUD (15%) and Vasectomy (32.6%) declined since 2002. Knowledge of the Emergency Contraceptive method on the other hand, increased from 37 per cent in 2002 to 67 per cent in 2008.

Contraceptive use

In 2008, the overall level of contraceptive use in Health Region 4 at 74 per cent was marginally higher than the 72 per cent at the national level.

Condom use

Data from Health Region 4 showed that the majority of women who used condoms did so both to prevent pregnancy and to prevent themselves from contracting STIs (69%). Approximately 21 per cent of condom users did so as a disease prevention measure only and nine (9) per cent used to condom to prevent pregnancy only.

Young Adults

For Health Region 4, 51 per cent of females and 61 per cent of males in the 15-19 age group were sexually experienced and by the age of 25 years, nearly all women and men were sexually experienced. This pattern was similar to that seen in 2002 and 1997.