



U.S. Agency for International Development

Bureau for Global Health

COUNTRY PROFILE

HIV/AIDS

JORDAN

The first case of AIDS in Jordan was reported in 1986, and by November 2002, fewer than 1,000 HIV infections and 313 cumulative AIDS cases had been reported to the Jordanian Ministry of Health. The majority of cases (61 percent) have occurred among people aged 25–44. However, due to the absence of a strong HIV/AIDS surveillance system, as well as pervasive fear and stigma associated with HIV/AIDS throughout the country, these statistics may be only a portion of the actual cases.

Estimated number of Adults and Children Living with HIV/AIDS (end 2001)	<1,000
Total Population (2001)	5.05 million
Adult HIV Prevalence (end 2001)	<0.1%
HIV-1 Seroprevalence in Urban Areas	
Population most at risk (i.e., sex workers and clients, patients seeking care for a sexually transmitted infection, or others with known risk factors)	0%
Population not at risk (i.e., pregnant women, blood donors, or others with no known risk factors)	0%

Sources: UNAIDS, U.S. Census Bureau

Social pressure, discrimination, and stigma are enormous problems in combating HIV/AIDS in Jordan. Discussion of sexual practices is culturally unacceptable throughout most of Jordan. Barrier methods of contraception and sexually transmitted infection protection, through the use of male and female condoms, receive little promotion and use. However, condom use has doubled during the past two years. The Islamic moral code forbids adultery and sex before marriage, and homosexuality and sex work are well hidden. Assessment of these vulnerable populations for risk factors rarely occurs.

Little information exists on HIV infections among at-risk groups in Jordan. Sexual transmission is the primary mode of HIV transmission. Forty-five percent of all transmissions occur through heterosexual contact, and blood and blood products account for another 39 percent of transmissions. HIV seroprevalence among blood donors remains below 0.03 percent in Jordan. Screening has been conducted among only a very few sex workers, prostitutes, and men who have sex with men.



Map of Jordan: PCL Map Collection, University of Texas

Jordan faces the following challenges in maintaining a low prevalence of HIV/AIDS:

- Pervasive fear and stigma associated with HIV/AIDS, which discourages frank discussion of the illness and prevention measures;
- Absence of a strong HIV/AIDS surveillance system;
- Lack of education and programs that prevent the spread of HIV and other sexually transmitted infections, dispel misperceptions, and address risky behaviors;
- Widespread lack of condom demand, availability, and use; lack of condom marketing for STI/AIDS prevention;
- Lack of access to reproductive health information or related health care, particularly for young people;

1300 Pennsylvania Avenue NW
Washington, DC
20523-3600

www.usaid.gov

- Limited use of universal prevention precautions; and
- Need to expand the HIV/AIDS response across both health and nonhealth sectors.

NATIONAL RESPONSE

Jordan has established a National AIDS Program within the Ministry of Health and is working with UNAIDS and the World Health Organization on a joint initiative to combat the threat of AIDS. The initiative was launched in late 2001 and is designed to assist the National AIDS Program in expanding its prevention strategy for susceptible groups by raising awareness of the risks associated with sexual transmission and by teaching people how they can protect themselves. The strategy includes a situational analysis to determine awareness levels and behavior patterns among young people, as well as counseling on HIV/AIDS prevention and transmission. The Ministry of Health believes young people are most at risk and that an awareness program to tackle AIDS must be established. During the next two years, the Ministry of Health plans to integrate such a program into the national school curriculum.

In 2001, the Ministry of Health established a national HIV/AIDS Hotline and Counseling Center under the auspices of the National AIDS Program.

USAID SUPPORT

The relatively low-level and stable HIV epidemic in Jordan has not aroused widespread donor action. In general, the donor community is not directly addressing at-risk populations, and HIV/AIDS prevention and care are not the primary focus of most projects.

Jordan is one of 31 countries receiving basic resources from the U.S. Agency for International Development (USAID) to help track the epidemic; maintain technical assistance, training, and commodity support; and leverage additional sources of funding and support. In general, USAID supports surveillance systems and targeted interventions toward the populations most vulnerable.

USAID continues to be the major international donor for family planning services, supplies, information, and training for physicians, nurses, midwives, and pharmacists in Jordan. In FY 2002, USAID's program with the Primary Health Care Initiatives focused on training, service provision, logistics, and management systems for primary and reproductive health. The initiative aims to improve quality, management, and efficiency of reproductive and primary health care services at all 380 Ministry of Health primary health care centers. It includes extensive training programs for personnel and technical assistance to upgrade 200 centers, which will serve as models for high-quality primary, reproductive, and basic health services. The remaining centers will benefit from a basic support package.

USAID proposes to spend \$41.5 million in Economic Support Funds for all health-related expenditures for Jordan in FY 2003. These resources will be used to continue providing technical assistance and training in the Primary Health Care Initiative, the Jordanian Association for Family Planning, health financing, and management programs.

National AIDS Program

Family Health International supported the participation of three representatives to the International HIV/AIDS Conference in Barcelona, Spain, in July 2002. The representatives included IMPACT/Jordan's country director and members of the National AIDS Committee and the Ministry of Health. The participants offered positive feedback on the conference, and shared their enthusiasm for the practical lessons learned and valuable insights gained.

Family Health International organized seminars and regular meetings of the National AIDS Committee to provide updates on recent advances on HIV/AIDS. In collaboration with UNAIDS, Family Health International addressed the importance of having a strategy for facing HIV/AIDS in Jordan.

Behavior Change Communication

With USAID funds, Family Health International conducted a training workshop designed to introduce participants to the concept of behavior change communication. Workshop participants included representatives from the Ministry of Health, the Health Education Department, various nongovernmental organizations, and representatives from the private sector and the Jordanian mass media.

Care and Support

Earlier in the year, a day clinic and a hotline were established to provide antiretrovirals and condoms, in a nonjudgmental environment, to HIV-positive persons. Medical monitoring and treatment accompanied these services. During this reporting period, Family Health International, with funds from USAID, procured specialized laboratory equipment to monitor the immune functions of HIV-infected individuals.

Involving People Living with HIV/AIDS

Most people with AIDS in Jordan do not tell others of their condition, and those who do are sometimes persecuted. It will not be possible to make progress in combating the epidemic unless AIDS becomes visible, stigma is challenged, and people living with HIV are encouraged to play their part in a community-wide AIDS response. This requires resolve and courageous leadership at various levels, particularly by government and religious leaders.

Multisectoral Programs

Different sectors, such as nongovernmental organizations, private sector, government, and volunteers, are involved in all skill-building activities. USAID is providing technical assistance and training to the Jordanian Association for Family Planning. The program aims to increase efficiency in health financing and management, and provide specialized technical support. Specific activities include a program on HIV/AIDS management and impact; support for demographic and health surveys; infectious disease surveillance; efforts to introduce new family planning methods and improve the quality of services offered by public and private providers; and support for the National Population Council and other organizations on communication strategies, policy development, and other issues.

Prevention

USAID is working with the UNAIDS initiative to assist the National AIDS Program to expand its prevention strategy for susceptible groups by increasing awareness of the risks attached to sexual activity and by teaching people how they can protect themselves against such risks. The strategy includes a situational analysis to determine awareness levels and behavior patterns among the young population. Technical assistance is being given to the National AIDS Program to address surveillance issues; facilitate a subcommittee to oversee the study of sexually transmitted infections; and establish a strategy and policy to control the spread of such infections.

Research

Through Family Health International, USAID is working to design and implement a prevalence study of sexually transmitted infections among the general population to determine the prevalence of such infections and risky sexual behaviors related to transmission of HIV and other sexual infections. Qualitative research (focus groups) is being conducted to gain knowledge of risky sexual behaviors among youth and the results are being disseminated to National AIDS Committee members.

Youth and HIV/AIDS

Family Health International, with funds from USAID, conducted peer counselor training for more than 20 volunteers. These volunteers were composed of mainly youth from organizations such as the United Nations Children's Fund, the Red Crescent Society, the Ministry of Health, and the Family Guidance and Awareness Center. The four-day training was

designed to teach the concept of peer education, provide practical skills for communicating with peers, and provide hard-to-reach groups with HIV/AIDS messages. Each trainee established targets of young people to educate, and IMPACT developed systems to monitor the numbers reached through time.

To further target youth, IMPACT produced approximately 5,000 information, education, and communication materials (notebooks and folders) to promote the HIV/AIDS Hotline and Counseling Center. These materials were distributed to students entering the University of Jordan. Currently, 1,500 youth have participated in the peer-education training.

Providing young Jordanians with the right information on prevention and promoting healthy lifestyles in a language they understand is essential for success in any AIDS response. Research has shown that regardless of the stage of the epidemic, investing in young people must always be a priority. In every country where HIV transmission has been reduced, it has been among young people that the most spectacular reductions have occurred.

Today, approximately 40 percent of Jordan's 5.2 million people are under the age of 15. The 2000 Jordan Youth Survey showed that most young Jordanians had a basic understanding of family planning and sexually transmitted infections.

According to health experts, several social factors make young people in Jordan particularly vulnerable to contracting HIV/AIDS. In a conservative culture in which open discussion of sexual behavior is considered taboo, youth lack access to reliable information and guidance about such matters, both in and out of school. Economic hardships in Jordan have also taken their toll on youth. More and more young Jordanians are delaying their age of marriage, which leads to more sexual contacts outside of marriage. High unemployment has left young people spending their spare time in cafes and amusement centers or working as unskilled laborers, which in turn, exposes them to potential pressure for risky sexual behavior.

Voluntary Counseling and Testing

Through Family Health International, USAID renovated and equipped a voluntary counseling and testing unit in August 2001 and provided technical assistance to the hotline and counseling center through refresher training for staff counselors and the provision of a counseling manual in Arabic. Information, education, and communication materials have been developed to raise local awareness of the Counseling Center and its services.

IMPORTANT LINKS AND CONTACTS

USAID Mission in Jordan
P.O. Box 354
Amman 11118 Jordan
Tel: 962-6-592-0101
Fax: 962-6-592-0143
USAID/Jordan Web site: <http://www.usembassy-amman.org.jo/USAID>

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For more information, see www.usaid.gov/pop/aids or www.synergyaids.com.

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