# **Survey Response Details**

# **Response Information**

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#### **User Information**

Username: ce\_QA

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#### **Response Details**

# Page 1

1) Country

Qatar (0)

2) Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:

DR. MOHammad ALHAJRI Acting Manager Of Health protection and Communicable Disease Control.

3) Postal address:

Department Of Public Health Supreme Council Of Health Doha, Qatar

4) Telephone:

Please include country code

+974 40 70103

5) E-mail:

malhajri1@sch.gov.qa

6) Date of submission:

Please enter in DD/MM/YYYY format

31/03/2010

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7) Describe the process used for NCPI data gathering and validation:

Desk review of relevant documents and interview of key poeple.

8) Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:

There isn't any disagrement

9)

Highlight concerns, if any, related to the final NCPI data submitted (such as data quality, potential misinterpretation of questions and the like):

N/A

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10)

# NCPI - PART A [to be administered to government officials]

Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent Department Of Public Health	DR. MOHAMMAD ALHAJRI	AI, AII, AIII, AIV, AV

11)

Respondents to Part A Organization Names/Positions [Indicate which parts each respondent was queried on] Respondent Supreme Council of Salah A Kornas, Legal A.I health 2 consultant Respondent Respondent Respondent Respondent 6 Respondent Respondent Respondent Respondent 10 Respondent 11 Respondent 12 Respondent

14

15

16

Respondent

Respondent

Respondent

Respondent

Respondent
18
Respondent
19
Respondent
20
Respondent
21
Respondent
22
Respondent
23
Respondent
23

Respondent

25

12)

# NCPI - PART B [to be administered to civil society organizations, bilateral agencies, and UN organizations]

Organization Names/Positions Respondents to Part B
[Indicate which parts each respondent was queried on]
Respondent 1 N/A N/A B.I, B.II, B.IV

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13)

# Part A, Section I: STRATEGIC PLAN

1. Has the country developed a national multisectoral strategy to respond to HIV?

(Multisectoral strategies should include, but are not limited to, those developed by Ministries such as the ones listed under 1.2)

No (0)

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14) Part A, Section I: STRATEGIC PLAN

# **Question 1 (continued)**

IF NO or NOT APPLICABLE, briefly explain why

Because the National Aids prevention committee was suspended during 2009 before completing the strategy.

# Page 14

15)

Part A, Section I: STRATEGIC PLAN

2. Has the country integrated HIV into its general development plans such as in: (a) National Development Plan; (b) Common Country Assessment / UN Development Assistance Framework; (c) Poverty Reduction Strategy; and (d) sector-wide approach?

Yes (0)

#### Page 15

16)

#### Part A, Section I: STRATEGIC PLAN

2.1 IF YES, in which specific development plan(s) is support for HIV integrated?

a. National Development Plan

Yes

- b. Common Country Assessment / UN Development Assistance Framework
- c. Poverty Reduction Strategy
- d. Sector-wide approach
- e. Other: Please specify

17)

2.2 IF YES, which specific HIV-related areas are included in one or more of the development plans?

#### HIV-related area included in development plan(s) Yes **HIV** prevention Treatment for opportunistic infections Yes Antiretroviral treatment Yes Care and support (including social security or other schemes) Yes HIV impact alleviation Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support Reduction of income inequalities as they relate to HIV prevention/treatment, care and/or support Reduction of stigma and discrimination Yes Women's economic empowerment (e.g. access to credit, access toland, training) Other: Please specify

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18)

#### Part A, Section I: STRATEGIC PLAN

3. Has the country evaluated the impact of HIV on its socioeconomic development for planning purposes?

N/A (0)

19)

4. Does the country have a strategy for addressing HIV issues among its national uniformed services (such as military, police, peacekeepers, prison staff, etc)?

Yes (0)

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20)

Part A, Section I: STRATEGIC PLAN

4.1 *IF YES*, which of the following programmes have been implemented beyond the pilot stage to reach a significant proportion of the uniformed services?

Behavioural change communication

Condom provision

HIV testing and counselling Yes
Sexually transmitted infection services Yes
Antiretroviral treatment Yes
Care and support Yes

Other: Please specify

#### Page 19

21)

5. Does the country have non-discrimination laws or regulations which specify protections for most-at-risk populations or other vulnerable subpopulations?

No (0)

#### Page 21

22)

Part A, Section I: STRATEGIC PLAN

6. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for most-at-risk populations or other vulnerable subpopulations?

No (0)

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23)

Part A, Section I: STRATEGIC PLAN

7. Has the country followed up on commitments towards universal access made during the High-Level AIDS Review in June 2006?

Yes (0)

### Page 24

24)

Part A, Section I: STRATEGIC PLAN

7.1 Have the national strategy and national HIV budget been revised accordingly?

Yes (0)

25)

7.2 Have the estimates of the size of the main target populations been updated?

No (0)

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26)

Part A, Section I: STRATEGIC PLAN

7.3 Are there reliable estimates of current needs and of future needs of the number of adults and children requiring antiretroviral therapy?

No (0)

27)

7.4 Is HIV programme coverage being monitored?

No (0)

#### Page 29

28)

7.5 Has the country developed a plan to strengthen health systems, including infrastructure, human resources and capacities, and logistical systems to deliver drugs?

Yes (0)

#### Page 30

29)

Part A, Section I: STRATEGIC PLAN

Question 7.5 (continued)

Overall, how would you rate strategy planning efforts in the HIV programmes in 2009?

3 (3)

30)

Since 2007, what have been key achievements in this area:

Aids prevention committee was established

31)

What are remaining challenges in this area:

To continue the committe efforts by a suitable way if not reactivated

#### Page 31

32)

Part A, Section II: POLITICAL SUPPORT

1. Do high officials speak publicly and favourably about HIV efforts in major domestic forums at least twice a year?

President/Head of government
Other high officials

Other officials in regions and/or districts Yes

33)

2. Does the country have an officially recognized national multisectoral AIDS coordination body (i.e., a National AIDS Council or equivalent)?

No

No (0)

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34)

Part A, Section II: POLITICAL SUPPORT

**Question 2 (continued)** 

IF NO, briefly explain why not and how AIDS programmes are being managed:

As part of diseases control section in health protection and CDC in DPH in SCH. And clinically in HMC by infectious diseases department

#### Page 34

35)

#### Part A, Section II: POLITICAL SUPPORT

3. Does the country have a mechanism to promote interaction between government, civil society organizations, and the private sector for implementing HIV strategies/programmes?

N/A (0)

#### Page 35

36)

4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?

Please enter the rounded percentage (0-100)

0

37)

5. What kind of support does the National AIDS Commission (or equivalent) provide to civil society organizations for the implementation of HIV-related activities?

Information on priority needs

Technical guidance

Procurement and distribution of drugs or other supplies

Coordination with other implementing partners

Capacity-building

Other: Please specify

38)

6. Has the country reviewed national policies and laws to determine which, if any, are inconsistent with the National AIDS Control policies?

Yes (0)

#### Page 36

39)

Part A, Section II: POLITICAL SUPPORT

6.1 IF YES, were policies and laws amended to be consistent with the National AIDS Control policies?

Yes (0)

#### Page 39

40)

Part A, Section III: PREVENTION

1. Does the country have a policy or strategy that promotes information, education and communication (IEC) on HIV to the *general population*?

N/A (0)



41)

1.2 In the last year, did the country implement an activity or programme to promote accurate reporting on HIV by the media?

No (0)

# Page 41

42)

Part A, Section III: PREVENTION

2. Does the country have a policy or strategy promoting HIV-related reproductive and sexual health education for young people?

No (0)

43)

2.1 Is HIV education part of the curriculum in:

primary schools? No secondary schools? No teacher training? No

44)

2.2 Does the strategy/curriculum provide the same reproductive and sexual health education for young men and young women?

No (0)

45)

2.3 Does the country have an HIV education strategy for out-of-school young people?

No (0)

46)

3. Does the country have a policy or strategy to promote information, education and communication and other preventive health interventions for most-at-risk or other vulnerable sub-populations?

No (0)

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47)

Part A, III. PREVENTION

**Question 3.1 (continued)** 

Overall, how would you rate the policy efforts in support of HIV prevention in 2009?

5 (5)

#### Page 45

48)

#### Part A, III. PREVENTION

4. Has the country identified specific needs for HIV prevention programmes?

Yes (0)

#### Page 46

49)

#### Part A, III. PREVENTION

**Question 4 (continued)** 

IF YES, how were these specific needs determined?

By a visit of expert from WHO in December 2009 for situation analysis regarding STI/HIV .

50)

# 4.1 To what extent has HIV prevention been implemented?

The majority of people in need have access

#### **HIV** prevention component

Blood safety

Agree

Universal precautions in health care settings

Agree

Prevention of mother-to-child transmission of HIV

Agree

IEC\* on risk reduction

IEC\* on stigma and discrimination reduction

Condom promotion

HIV testing and counselling

Harm reduction for injecting drug users

Risk reduction for men who have sex with men

Risk reduction for sex workers

Reproductive health services including sexually transmitted infections

prevention and treatment

School-based HIV education for young people

HIV prevention for out-of-school young people

HIV prevention in the workplace

Other: please specify

|--|

51)

#### Part A, III. PREVENTION

Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2009?

3 (3)

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52)

#### Part A, Section IV: TREATMENT, CARE AND SUPPORT

1. Does the country have a policy or strategy to promote comprehensive HIV treatment, care and support? (Comprehensive care includes, but is not limited to, treatment, HIV testing and counselling, psychosocial care, and home and community-based care).

No (0)

# Page 49

53)

2. Has the country identified the specific needs for HIV treatment, care and support services?

Yes (0)

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54)

#### Part A, Section IV: TREATMENT, CARE AND SUPPORT

Question 2 (continued)

IF YES, how were these determined?

By a visit of expert from WHO in December 2009 for situation analysis regarding STI/HIV.

55)

2.1 To what extent have the following HIV treatment, care and support services been implemented?

The majority of people in need have access

HIV treatment, care and support service

Antiretroviral therapy

Agree

Nutritional care Agree Paediatric AIDS treatment Agree Sexually transmitted infection management Agree Psychosocial support for people living with HIV and their families Home-based care Palliative care and treatment of common HIV-related infections Agree HIV testing and counselling for TB patients Agree TB screening for HIV-infected people Agree TB preventive therapy for HIV-infected people TB infection control in HIV treatment and care facilities Cotrimoxazole prophylaxis in HIV-infected people Agree Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape) Agree HIV treatment services in the workplace or treatment referral systems Aaree through the workplace HIV care and support in the workplace (including alternative working arrangements) Other: please specify

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56)

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# Part A, Section IV: TREATMENT, CARE AND SUPPORT

3. Does the country have a policy for developing/using generic drugs or parallel importing of drugs for HIV?

No (0)

57)

4. Does the country have access to *regional* procurement and supply management mechanisms for critical commodities, such as antiretroviral therapy drugs, condoms, and substitution drugs?

Yes (0)

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58)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

**Question 4 (continued)** 

IF YES, for which commodities?:

antiretroviral therapy drugs

#### Page 53

59)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

Overall, how would you rate the efforts in the implementation of HIV treatment, care

and support programmes in 2009?

7 (7)

# Page 54

60)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

5. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other vulnerable children?

N/A (0)

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61)

Part A, Section V: MONITORING AND EVALUATION

1. Does the country have *one* national Monitoring and Evaluation (M&E) plan?

In progress (0)

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62)

5. Is there a functional national M&E Unit?

In progress (0)

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63)

Part A, Section V: MONITORING AND EVALUATION

6. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?

No (0)

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<sup>64)</sup> Part A, Section V: MONITORING AND EVALUATION

10. Is there a plan for increasing human capacity in M&E at national, subnational and service-delivery levels?:

Yes, at all levels (0)

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# 65) Part A, Section V: MONITORING AND EVALUATION

Question 10.2 (continued)
Overall, how would you rate the M&E efforts of the HIV programme in 2009?

2 (2)