

Survey Response Details

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Response Details

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- 8) **Describe the process used for NCPI data gathering and validation:**
NA
- 9) **Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:**

NA

10)

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

NA

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11)

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 1 HHS	ce_US	A.I, A.II, A.III, A.IV, A.V

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 HHS	ce_US	B.I, B.II, B.III, B.IV

Page 5

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

One of President Obama's top HIV/AIDS policy priorities is the development and implementation of a National HIV/AIDS Strategy (NHAS). To ensure the process to develop the NHAS is inclusive of a broad range of perspectives and stakeholders, the Office of National AIDS Policy (ONAP) in the White House Domestic Policy Council has engaged public involvement via multiple channels. The strategy, which will be completed in Spring 2010, will clearly describe the areas that require the most immediate change and the specific action steps that must be taken by the Federal

Government and other HIV/AIDS stakeholders to meet three goals: Reducing HIV incidence; Increasing access to care and optimizing health outcomes; and Reducing HIV-related health disparities. Additionally, the United States has in place a national plan for HIV prevention developed by the Centers for Disease Control and Prevention (CDC). 1.2 IF YES, does the national strategy/action framework address the following areas, target populations and cross-cutting issues? 1.5 Has your country ensured "full involvement and participation" of civil society in the planning phase? During the planning and development of the National HIV/AIDS Strategy the White House Office of National AIDS Policy created a web platform to solicit public comments, held town hall discussions across the country and permitted all Americans the opportunity to contribute ideas, suggestions and recommendation to the development of a National HIV/AIDS Strategy. 1.6 Has the national strategy/action framework been endorsed by key stakeholders? Not applicable. The National HIV/AIDS Strategy is under development.

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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?

N/A (0)

Page 16

16)

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)

Page 17

17)

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)

Page 18

18)

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

Sexually transmitted infection services

Antiretroviral treatment

Care and support

There are numerous programs for HIV/AIDS prevention, care and support, HIV testing and counseling for Americans regardless of their profession, military, or social status. For example, the Veterans Affairs Department offers routine HIV tests to veterans who receive medical care.

Page 19

19)

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

Yes (0)

Page 20

20)

Part A, Section I: STRATEGIC PLAN

5.1 IF YES, for which subpopulations?

- a. Women
 - b. Young people
 - c. Injecting drug users
 - d. Men who have sex with men
 - e. Sex Workers
 - f. Prison inmates
 - g. Migrants/mobile populations
- Other: Please specify

21)

IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:

The Americans with Disabilities Act (ADA) is a comprehensive disability anti-discrimination law, which includes HIV/AIDS as a disability and entitles protection regardless of symptoms or lack of symptoms (42 U.S.C. 12102, 42 U.S.C. 12112, 42 U.S.C. 12132, 42 U.S.C. 12182, 29 CFR 1630, 28 CFR 35.130, 28 CFR 36.201). In addition, the Rehabilitation Act prohibits discrimination on the basis of disability in programs conducted by Federal agencies, in program receiving Federal financial assistance, in Federal employment, and in the employment practices of Federal contractors (29 U.S.C. 791, 793, 794). The Fair Housing Act prohibits housing discrimination, including on the basis of disability (42 U.S.C. 802, 804, 805). Furthermore, federal civil rights laws and the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule, together protect all citizens fundamental rights of nondiscrimination and personal health information privacy. HIPAA attempts to address some of the barriers to healthcare coverage and related job mobility impediments facing people with HIV as well as other vulnerable populations. The Department of

Labor's Office of Federal Contract Compliance Programs administers and enforces three equal employment opportunity laws that apply to federal contractors and subcontractors: Executive Order (EO) 11246, as amended; Section 503 of the Rehabilitation Act of 1973, as amended; and the Vietnam Era Veterans' Readjustment Assistance Act of 1974 (VEVRAA), as amended (38 U.S.C. 4212). These EEO laws prohibit Federal contractors and subcontractors from discriminating on the basis of race, color, religion, sex, national origin, or status as a qualified individual with a disability or protected veteran. OFCCP also shares responsibility with the U.S. Equal Employment Opportunity Commission in enforcing Title I of the Americans with Disabilities Act.

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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?

Yes (0)

Page 22

23)

Part A, Section I: STRATEGIC PLAN

6.1 IF YES, for which subpopulations?

- a. Women
 - b. Young people
 - c. Injecting drug users
 - d. Men who have sex with men
 - e. Sex Workers
 - f. Prison inmates
 - g. Migrants/mobile populations
- Other: Please specify

24)

IF YES, briefly describe the content of these laws, regulations or policies:

The United States has a Federal system of Government. Programming for most-at-risk populations and other vulnerable subpopulations is dealt with at the federal, state, tribal and local level. In some states and municipalities there may be laws that prevent effective and comprehensive HIV prevention, care and support for some populations. Local policy-setting can both increase or decrease obstacles to successful outreach and are specific to communities. The National HIV/AIDS Strategy mentioned in Part A, Section 1, Question 1(1) will recommend ways to reduce obstacles at all levels.

Page 31

25)

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	Yes
Other high officials	Yes
Other officials in regions and/or districts	Yes

26)

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

Yes (0)

Page 32

27)

2.1 IF YES, when was it created?

Please enter the year in yyyy format

1960

Page 34

28)

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?

Yes (0)

Page 35

29)

Part A, Section II: POLITICAL SUPPORT**Question 3 (continued)**

IF YES, briefly describe the main achievements:

Yes. The Presidential Advisory Council on HIV/AIDS (PACHA) is a multi-sectorial representative body that advises the Federal government on the nation's HIV/AIDS response and provides the public a forum for comment and engagement. The PACHA website appears here: <http://www.pacha.gov>. In addition, AIDS.gov provides comprehensive information on the Federal government's efforts in HIV prevention and care.

30)

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

Yes

Procurement and distribution of drugs or other supplies

Coordination with other implementing partners

Capacity-building

Other: The support encompasses, but is not limited to, financial support, technical assistance, guidance and standards for services.

Yes

31)

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 39

32)

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*?

Yes (0)

Page 40

33) **In addition to the above mentioned, please specify other key messages explicitly promoted:**

The country has developed multiple venues for the dissemination of HIV/AIDS information; communication and education and the mediums are reviewed and revised often. For example, the CDC National Prevention Information Network (NPIN) is the U.S. reference and referral service for information on HIV/AIDS, viral hepatitis, sexually transmitted diseases (STDs), and tuberculosis (TB). NPIN collects, catalogs, processes, and electronically disseminates materials and information on HIV/AIDS, viral hepatitis, STDs, and TB to organizations and people working in those disease fields in international, national, state, and local settings.

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34)

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?

N/A (0)

Page 45

35)

Part A, III. PREVENTION**4. Has the country identified specific needs for HIV prevention programmes?**

Yes (0)

Page 46

36)

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	Agree
IEC* on stigma and discrimination reduction	Agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	Agree
Risk reduction for men who have sex with men	Agree
Risk reduction for sex workers	Agree
Reproductive health services including sexually transmitted infections prevention and treatment	Agree
School-based HIV education for young people	Agree
HIV prevention for out-of-school young people	Agree
HIV prevention in the workplace	Agree
Other: please specify	Agree

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37)

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
Nutritional care
Paediatric AIDS treatment
Sexually transmitted infection management

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

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38)

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?

Yes (0)

39)

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)

Page 52

40)

Part A, Section IV: TREATMENT, CARE AND SUPPORT**Question 4 (continued)****IF YES, for which commodities?:**

The Food and Drug Administration (FDA) in the U.S. Department of Health and Human Services (HHS) has the mandate for the regulatory approval and licensure of generic drugs within the United States. An Abbreviated New Drug Application (ANDA) submitted to FDA's Center for Drug Evaluation and Research, Office of Generic Drugs, contains data which provides for the review and ultimate approval of a generic drug product. Once approved, an applicant may manufacture and market the generic drug product to provide a safe, effective, low cost alternative to the American public. Using bioequivalence as the basis for approving generic copies of drug products was established by the "Drug Price Competition and Patent Term Restoration Act of 1984," also known as the Waxman-Hatch Act. This Act expedites the availability of less costly generic drugs by permitting FDA to approve applications to market generic versions of brand-name drugs without conducting costly and duplicative clinical trials, however the Waxman-Hatch Act only comes into affect after the innovator company's intellectual property rights expire. Additionally, in 1987,

Congress enacted the Prescription Drug Marketing Act (PDMA) which established safeguards to prevent substandard, ineffective, or counterfeit drugs from entering the U.S. Under PDMA, it is illegal for anyone other than the drug's original manufacturer to re-import a prescription drug into the U.S. that was manufactured in the U.S. The Federal government has access to the Pan American Health Organization's (PAHO) Regional Revolving Fund for Strategic Public Health Supplies, a mechanism created to promote access to quality essential public health supplies in the Americas, and additionally, federal, state, and local entities have sufficient commodity procurement mechanisms and networks.

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41)

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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42)

Part A, Section V: MONITORING AND EVALUATION

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

Yes (0)

Page 60

43)

Part A, Section V: MONITORING AND EVALUATION

2. Does the national Monitoring and Evaluation plan include?

a data collection strategy	Yes
a well-defined standardised set of indicators	Yes
guidelines on tools for data collection	Yes
a strategy for assessing data quality (i.e., validity, reliability)	Yes
a data analysis strategy	Yes
a data dissemination and use strategy	Yes

Page 61

44)

3. Is there a budget for implementation of the M&E plan?

Yes (0)

Page 64

45)

4. Are M&E priorities determined through a national M&E system assessment?

No (0)

Page 65

46)

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

Yes (0)

Page 66

47)

5.1 IF YES, is the national M&E Unit based

in the National AIDS Commission (or equivalent)?

in the Ministry of Health?

Yes

There is an M&E division and Monitoring and Evaluation Officers at the CDC . Yes

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48)

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)

Page 71

49)

7. Is there a central national database with HIV- related data?

No (0)

Page 74

50)

8. Does the country publish at least once a year an M&E report on HIV, including HIV surveillance data?

No (0)

Page 77**51) 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?:

No (0)

Page 83**52)****Part B, Section I: HUMAN RIGHTS**

1. Does the country have laws and regulations that protect people living with HIV against discrimination? (including both general non-discrimination provisions and provisions that specifically mention HIV, focus on schooling, housing, employment, health care etc.)

Yes (0)

Page 84**53)****Part B, Section I. HUMAN RIGHTS**

1.1 IF YES, specify if HIV is specifically mentioned and how or if this is a general nondiscrimination provision:

See Part A, Section I, Question 5.

54)

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

Yes (0)

Page 85**55)****Part B, Section I. HUMAN RIGHTS**

2.1 IF YES, for which subpopulations?

- a. Women
 - b. Young people
 - c. Injecting drug users
 - d. Men who have sex with men
 - e. Sex Workers
 - f. prison inmates
 - g. Migrants/mobile populations
- Other: Please specify

56)

IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:

Protections are afforded to all Americans regardless of risk and vulnerability status. See Part A, Section I, Question 5.

Page 8857) **Part B, Section I. HUMAN RIGHTS**

4. Is the promotion and protection of human rights explicitly mentioned in any HIV policy or strategy?

Yes (0)

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58)

Part B, Section I. HUMAN RIGHTS**Question 4 (continued)**

IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:

For examples see Part A, Section I, Question 5.

59)

5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, most-at-risk populations and/or other vulnerable subpopulations?

Yes (0)

Page 90

60)

Part B, Section I. HUMAN RIGHTS**Question 5 (continued)**

IF YES, briefly describe this mechanism:

The Department of Justice, Civil Rights Division, enforces Federal statutes designed to protect the civil rights of all individuals and prohibit discrimination, including on the basis of disability. The primary goal of the Disability Rights Section of that Division is to achieve equal opportunity for people with disabilities, including those with HIV/AIDS, in the United States by implementing the Americans with Disabilities Act (ADA), and achieves that goal through enforcement, certification, regulatory, coordination, and technical assistance activities. The Housing and Civil Enforcement Section of that Division enforces the Fair Housing Act, which prohibits discrimination in housing, including against persons with disabilities. Several other federal agencies play specific roles in enforcing federal civil rights laws. The Equal Employment Opportunity Commission investigates and enforces employment discrimination laws. The Office of Fair Housing and Equal Opportunity in the Department of Housing and Urban Development administers and enforces federal laws related to housing discrimination. The Office of Civil Rights in the Department of Education ensures equal access to education and promotes education excellence through enforcement of discrimination laws in the education context. The Office for Civil Rights (OCR) within the Department of Health and Human Services is another entity for civil rights and health privacy law enforcement, OCR investigates complaints, enforces rights, and promulgates regulations, develops policy and provides technical assistance and public education to ensure understanding of and compliance with non-discrimination and health information privacy laws. Federal civil rights laws and the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule, together protect fundamental rights of nondiscrimination and health information privacy. Further, the Department of Labor's Office of Federal Contract Compliance Programs has specific policies under Section 503 regulations concerning HIV/AIDS and related conditions guidelines for processing and investigating complaints filed by or on behalf of persons with HIV/AIDS and related conditions.

61)

6. Has the Government, through political and financial support, involved people living with HIV, most-at-risk populations and/or other vulnerable subpopulations in governmental HIV-policy design and programme implementation?

Yes (0)

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62)

Part B, Section I. HUMAN RIGHTS**Question 6 (continued)****IF YES, describe some examples:**

The U.S. has over 50 groups who represent vulnerable populations. Each of these organizations is involved in policy design and implementation. There are also U.S. state-level groups (HIV Care and Treatment Consortia and eligible Metropolitan-Area HIV-Planning Councils) and local groups (Community HIV-Prevention Planning Groups) that participate in policy planning and program implementation with the Federal Government. There are Federal requirements for the participation of people living with HIV in these planning bodies. Further, CDC and HRSA invest significant resources in training and technical assistance on parity, inclusion, and representation of people living with HIV in policy making processes. There are eight openly HIV-positive members on the Presidential Advisory Council on HIV/AIDS, as well as HIV-positive staff in ONAP and at the Office of the Global AIDS Coordinator.

63)

7. Does the country have a policy of free services for the following:

- | | |
|-----------------------------------------------|-----|
| a. HIV prevention services | Yes |
| b. Antiretroviral treatment | Yes |
| c. HIV-related care and support interventions | Yes |

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64)

Part B, Section I. HUMAN RIGHTS**Question 7 (continued)**

IF YES, given resource constraints, briefly describe what steps are in place to implement these policies and include information on any restrictions or barriers to access for different populations:

7a. HIV prevention services The majority of HIV prevention services including education, IEC, and condom distribution are publicly funded and are often free or at reduced cost. 7b. antiretroviral therapy AND 7c. HIV-related care and support intervention The AIDS Drug Assistance Program (ADAP) provides medications for the treatment of HIV disease. Program funds may also be used to purchase health insurance for eligible clients and for services that enhance access to, adherence to, and monitoring of drug treatments. The program is funded through Part B of the Ryan White HIV/AIDS Treatment Modernization Act (formerly known as the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act) which provides grants to States and Territories. Other publicly funded services through Medicare and Medicaid are also available.

65)

8. Does the country have a policy to ensure equal access for women and men to HIV prevention, treatment, care and support?

Yes (0)

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66)

Part B, Section I. HUMAN RIGHTS

8.1 In particular, does the country have a policy to ensure access to HIV prevention, treatment, care and support for women outside the context of pregnancy and childbirth?

Yes (0)

67)

9. Does the country have a policy to ensure equal access for most-at-risk populations and/or other vulnerable subpopulations to HIV prevention, treatment, care and support?

Yes (0)

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68)

Part B, Section I. HUMAN RIGHTS**Question 9 (continued)****IF YES, briefly describe the content of this policy:**

All Americans have equal access under the law.

69)

9.1 IF YES, does this policy include different types of approaches to ensure equal access for different most-at-risk populations and/or other vulnerable sub-populations?

Yes (0)

Page 95

70)

10.Does the country have a policy prohibiting HIV screening for general employment purposes (recruitment, assignment/relocation, appointment, promotion, termination)?

Yes (0)

71)

11.Does the country have a policy to ensure that HIV research protocols involving human subjects are reviewed and approved by a national/local ethical review committee?

Yes (0)

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72)

IF YES, describe the approach and effectiveness of this review committee:

The HHS Office for Human Research Protections ensures research protocols involving human subjects are reviewed and approved through the Institutional Review Boards (IRB) process. Risks to research subjects posed by participation in research should be justified by the anticipated benefits to the subjects or society. This requirement is clearly stated in all codes of research ethics, and is central to the federal regulations. One of the major responsibilities of the IRB, therefore, is to assess the risks and benefits of proposed research. In the United States, regulations protecting human subjects first became effective on May 30, 1974. Promulgated by the Department of Health, Education and Welfare (DHEW), those regulations raised to regulatory status NIH's Policies for the Protection of Human Subjects, which were first issued in 1966. The regulations established the IRB as one mechanism through which human subjects would be protected. There is also specific IRB guidance for AIDS studies.

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73)

– Existence of independent national institutions for the promotion and protection of

human rights, including human rights commissions, law reform commissions, watchdogs, and ombudspersons which consider HIV-related issues within their work

Yes (0)

74)

– Focal points within governmental health and other departments to monitor HIV-related human rights abuses and HIV-related discrimination in areas such as housing and employment

Yes (0)

75)

– Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts

Yes (0)

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76)

Part B, Section I. HUMAN RIGHTS

Question 12 (continued)

IF YES on any of the above questions, describe some examples:

- Existence of independent national institutions for the promotions and protection of human rights, including human rights commissions, law reform commissions, watchdogs, and ombudsperson which consider HIV-related issues within their work The U.S. Commission on Civil Rights and its 51 State Advisory Committees perform some of these functions. - Focal points within governmental health and other departments to monitor HIV-related human rights abuses and HIV-related discrimination in areas such as housing and employment The Department of Justice, Civil Rights Division, enforces federal statutes designed to protect the civil rights of all individuals and prohibit discrimination, including on the basis of disability. The primary goal of the Disability Rights Section of that Division is to achieve equal opportunity for people with disabilities, including those with HIV/AIDS, in the United States by implementing the Americans with Disabilities Act (ADA), and achieves that goal through enforcement, certification, regulatory, coordination, and technical assistance activities. The Housing and Civil Enforcement Section of that Division enforces the Fair Housing Act, which prohibits discrimination in housing, including against persons with disabilities. Several other federal agencies play specific roles in enforcing federal civil rights laws. The Equal Employment Opportunity Commission investigates and enforces employment discrimination laws. The Office of Fair Housing and Equal Opportunity in the Department of Housing and Urban Development administers and enforces federal laws related to housing discrimination. The Office of Civil Rights in the Department of Education ensures equal access to education and promotes education excellence through enforcement of discrimination laws in the education context. The Office for Civil Rights in the Department of Health and Human Services protects against

discrimination and health privacy violations in the context of the provision of healthcare. - Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts With respect to complaints where jurisdiction has been established by the Department of Labor's Office of Federal Contract Compliance Programs (OFCCP), OFCCP will accept, process and investigate complaints alleging discrimination based on all HIV-related conditions. In order to establish that a complaint alleging discrimination based on an HIV-related condition is covered by OFCCP's Section 503 regulations, it is necessary to show (1) that the person had a substantially limiting impairment, and (2) that the person's condition did not pose a direct health or safety threat or prevent successful job performance.

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77)

Part B, Section I. HUMAN RIGHTS

13. In the last 2 years, have members of the judiciary (including labour courts/ employment tribunals) been trained/sensitized to HIV and human rights issues that may come up in the context of their work?

No (0)

78)

– Legal aid systems for HIV casework

Yes (0)

79)

– Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV

Yes (0)

80)

– Programmes to educate, raise awareness among people living with HIV concerning their rights

Yes (0)

81)

15. Are there programmes in place to reduce HIV-related stigma and discrimination?

Yes (0)

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82)

Part B, Section I. HUMAN RIGHTS

Question 15 (continued)

IF YES, what types of programmes?

Media

School education

Personalities regularly speaking out

Other: please specify

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83)

Part B, Section II: CIVIL SOCIETY* PARTICIPATION

1. To what extent has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?

5 (5)

Page 104

84)

Part B, Section II. CIVIL SOCIETY PARTICIPATION

2. To what extent have civil society representatives been involved in the planning and budgeting process for the National Strategic Plan on HIV or for the most current activity plan (e.g. attending planning meetings and reviewing drafts)?

3 (3)

Page 106

85)

Comments and examples:

The Presidential Advisory Council on HIV/AIDS (PACHA) will be responsible for monitoring and evaluation of the National HIV/AIDS Strategy.

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86)

Part B, Section II. CIVIL SOCIETY PARTICIPATION

5. To what extent is the civil society sector representation in HIV efforts inclusive of diverse organizations (e.g. networks of people living with HIV, organizations of sex workers, faith-based organizations)?

5 (5)

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87)

a. adequate financial support to implement its HIV activities?

3 (3)

88)

b. adequate technical support to implement its HIV activities?

4 (4)

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89)

1.1 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	Agree
IEC* on stigma and discrimination reduction	Agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	Agree
Risk reduction for men who have sex with men	Agree
Risk reduction for sex workers	Agree
Reproductive health services including sexually transmitted infections prevention and treatment	Agree
School-based HIV education for young people	Agree
HIV prevention for out-of-school young people	
HIV prevention in the workplace	Agree
Other: please specify	Agree

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90)

1.1 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
Nutritional care
Paediatric AIDS treatment

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

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91)

Part B, Section IV: TREATMENT, CARE AND SUPPORT

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

N/A (0)