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Kosovo Report NCPI

NCPI Header

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Describe the process used for NCPI data gathering and validation:

Due to time constrain the Ministry of Health HIV/AIDS Officer gathered data form working documents and existing reports. Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:

N/A

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

NCPI was completed in very short time.

	be administered to governmer		ciais				
Organization	Names/Positions	A.I	A.II	A.III	A.IV	A.V	A.VI
Ministry of Health	Laura Shehu HIV/Aids Officer	Yes	Yes	Yes	Yes	Yes	Yes

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

Organization	Names/Positions	B.I	B.II	B.III	B.IV	B.V
-	-	No	No	No	No	No

A - 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):

Yes

IF YES, what was the period covered:

2009-2013

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.:

Current national strategy as compared to 2004 -2008, was developed in more participatory process. It serves as clear cut guidance for implementation of activities for in and outside of the health sector stakeholders.

1.1 Which government ministries or agencies

Name of government ministries or agencies [write in]:

Ministry of Health, Ministry of Education Science and Technolgy, Ministry of Justice, Ministry of Interior, Ministry of Culture Youth Sports and Non-residential Issues and Ministry of Finance.

-1.2. Which sectors are included in the multisectoral strategy with a specifc HIV budget for their activities?

SECTORS

Included in Strategy Earmarked Budget

Yes	No
Yes	Yes
Yes Yes	-
Yes	-
Yes	-
-	-
_	_

Other [write in]:

IF NO earmarked budget for some or all of the above sectors, explain what funding is used to ensure implementation of their HIV-specifc activities?: Global Fund Funding

-1.3. Does the multisectoral strategy address the following key populations, settings and cross-cutting issues?

Men who have sex with men:
Yes
Migrants/mobile populations:
Yes
Orphans and other vulnerable children:
Yes
People with disabilities:
Yes
People who inject drugs:
Yes
Sex workers:
Yes
Transgendered people:
Yes
Women and girls:
Yes
Young women/young men:
Yes Other and site and a submanulation of
Other specific vulnerable subpopulations:
- Prisons:
Yes
Schools:
Yes
Workplace:
Yes
Addressing stigma and discrimination:
Yes
Gender empowerment and/or gender equality:
Yes
HIV and poverty:
-
Human rights protection:
Yes
Involvement of people living with HIV:
No

IF NO, explain how key populations were identifed?:

1.4. What are the identified key populations and vulnerable groups for HIV programmes in the country [write in]?: Injecting drug users, female sex workers, clients of sex workers,men who have sex with men, prison inmates, people living with HIV, young people, mobile populations.

1.5. Does the multisectoral strategy include an operational plan?: Yes

1.6. Does the multisectoral strategy or operational plan include

a) Formal programme goals?:

b) Clear targets or milestones?: Yes c) Detailed costs for each programmatic area?: No d) An indication of funding sources to support programme implementation?: Yes e) A monitoring and evaluation framework?: Yes

-1.7-

1.7. Has the country ensured "full involvement and participation" of civil society in the development of the multisectoral strategy?:

Active involvement

IF ACTIVE INVOLVEMENT, briefly explain how this was organised:

The civil society was an important part of the development of the Kosovo HIV/AIDS Strategy Plan 2009 - 2013, they also are very important implmenters of the Kosovo HIV/AIDS Strategic Plan 2009 - 2013, especially when it comes to working with most at risk groups.

1.8. Has the multisectoral strategy been endorsed by most external development partners (bi-laterals, multilaterals)?:

Yes ⊏1.9

1.9. Have external development partners aligned and harmonized their HIV-related programmes to the national multisectoral strategy?:

Yes, all partners

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

-2.1. IF YES, is support for HIV integrated in the following specifc development plans?-

Common Country Assessment/UN Development Assistance Framework:

Yes National Development Plan: Yes Poverty Reduction Strategy: N/A Sector-wide approach: N/A Other [write in]:

2.2. IF YES, are the following specifc HIV-related areas included in one or more of the development plans?

HIV impact alleviation:

Yes Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support: Yes

Reduction of income inequalities as they relate to HIV prevention/treatment, care and/or support:

Reduction of stigma and discrimination:

Yes Treatment, care, and support (including social security or other schemes):

Yes Women's economic empowerment (e.g. access to credit, access to land, training):

No Other[write in below]:

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

No

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

5. Has the country followed up on commitments made in the 2011 Political Declaration on HIV/AIDS?: Yes

5.1. Have the national strategy and national HIV budget been revised accordingly?:

No

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

No

5.3. Is HIV programme coverage being monitored?:

No

5.4. Has the country developed a plan to strengthen health systems?:

Yes

Please include information as to how this has impacted HIV-related infrastructure, human resources and capacities, and logistical systems to deliver medications:

Yes, it provided clear guidance in producing relevant legislative and normative documents.

6. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate strategy planning efforts in the HIV programmes in 2011?:

7

Since 2009, what have been key achievements in this area:

Uninterrupted supply and provision of the ARVs and Voluntary Testing Services within in Prishtina University Hospital. Raising awarness on HIV/AIDS among the general population.

What challenges remain in this area:

Strengthening the monitoring and evaluation program capacities.

A - II. POLITICAL SUPPORT AND LEADERSHIP

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

A. Government ministers:

Yes

B. Other high offcials at sub-national level:

Yes

-1.1-

(For example, promised more resources to rectify identified weaknesses in the HIV response, spoke of HIV as a human rights issue in a major domestic/international forum, and such activities as visiting an HIV clinic, etc.): Yes

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership:

the Ministry of Health has shown leadership in marking the World AIDS Day in 2010 and 2011. permanet Secretary in 2010 and the Minister of Health have hold public speech to sensitise the population and rise awarness on the HIV/AIDS. Moreover the MOH has coordinated activities to mark the Wolrd AIDs day in Kosovo. the MOH has taken leadership to finalize the PMCTC protocols as well to finalize the Administrative Instruction on activity structure and functions of health services HIV-AIDS.

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

Yes 2.1. IF YES, does the national multisectoral HIV coordination body Have terms of reference?: Yes Have active government leadership and participation?: Yes Have an official chair person?: Yes IF YES, what is his/her name and position title?: Deputy chair person of Kosovo AIDS Committee Laura Shehu - HIV/AIDS Officer Ministry of Health Have a defined membership?: Yes IF YES, how many members?: 20 Include civil society representatives?: Yes IF YES, how many?: 3

Include people living with HIV?: Yes
IF YES, how many?:
1
Include the private sector?:
No
Strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?:
Yes

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

What challenges remain in this area:

The National AIDS Committee has been established in December 1, 2011 and is its initial phase. Strengthening monitoring and evaluation capacities within the Ministry of Health remain challenge.

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

_5
Capacity-building:
No
Coordination with other implementing partners:
Yes
Information on priority needs:
Yes
Procurement and distribution of medications or other supplies:
-
Technical guidance:
-
Other [write in below]:
-

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

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

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the political support for the HIV programme in 2011?:

8

Since 2009, what have been key achievements in this area:

Administrative Instruction (Health)No.02/2011 "The activity, structure and functions of health services for HIV/AIDS" persuant to article 16 of the Constitution of the Republic of Kosovo, Law N002/L-78 on Public Health and Law No.02/L-109 on prevention and Fighting against Infectious disease. Established the National AIDS Committee; Supported ARV and relevant testing required continuosly.

What challenges remain in this area:

Strengthening monitoring and evaluation capacities within the Ministry of Health remains challange.

A - III. HUMAN RIGHTS

People living with HIV: Yes Men who have sex with men: Yes Migrants/mobile populations: Yes Orphans and other vulnerable children: Yes People with disabilities: Yes People who inject drugs: Yes Prison inmates:

Yes
Sex workers:
Yes
Transgendered people:
Yes
Women and girls:
Yes
Young women/young men:
Yes
Other specific vulnerable subpopulations [write in]:
-

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:

IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws:

Law against discrimination No.2004/3 article 2

Briefly explain what mechanisms are in place to ensure these laws are implemented:

Each Minsitry in the Government has appointed Human Rights Officers as well as Gender Officers that also report to Office of Good Governance at the Prime Minsiter's Office.

Briefly comment on the degree to which they are currently implemented:

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?:

IF YES, for which subpopulations? People living with HIV: Yes Men who have sex with men: Yes Migrants/mobile populations: Yes Orphans and other vulnerable children: Yes People with disabilities: Yes People who inject drugs : Yes **Prison inmates:** Yes Sex workers: Yes Transgendered people: Yes Women and girls: Yes Young women/young men: Yes Other specific vulnerable subpopulations [write in below]:

Briefly describe the content of these laws, regulations or policies: They all aim promotion of the human rights and reducing stigma. Briefly comment on how they pose barriers:

N/A

Yes

A - IV. PREVENTION

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

Yes IF YES, what key messages are explicitly promoted? Abstain from injecting drugs: Yes Avoid commercial sex:

Yes

Avoid inter-generational sex:
Yes
Be faithful:
Yes
Be sexually abstinent:
Yes
Delay sexual debut:
Yes
Engage in safe(r) sex:
Yes
Fight against violence against women:
Yes
Greater acceptance and involvement of people living with HIV:
Yes
Greater involvement of men in reproductive health programmes:
Yes
Know your HIV status:
Yes
Males to get circumcised under medical supervision:
Yes
Prevent mother-to-child transmission of HIV:
Yes
Promote greater equality between men and women:
Yes
Reduce the number of sexual partners:
Yes
Use clean needles and syringes:
Yes
Use condoms consistently:
Yes
Other [write in below]:
-

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

2. Does the country have a policy or strategy to promote life-skills based HIV education for young people?:

Yes 2.1. Is HIV education part of the curriculum in Primary schools?: No Secondary schools?: -Teacher training?: Yes

2.2. Does the strategy include age-appropriate, gender-sensitive sexual and reproductive health elements?: Yes

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

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

Briefly describe the content of this policy or strategy:

Kosovo Strategic Plan on HIV/AIDS 2009-2013 Preventive health interventions are discribe under point 1.3 developing and disseminate IEC intervention taillored to the specific information and behaviour -change needs of IDUs FSWs MSM and prison inmates; 1.4 provide accessable and client oriented VCT services for IDUs FSWs MSM and prison inmates; 1.5 provide peer education and outreach services ti IDUs,FSWs, MSM and prison inmates (prison staf)Training of peer peer education for HIV/IST and/or provision of basic outreach services -including condoms and/or clean syringes among IDUs,FSWsand MSM, design and implementation of programmes to reduce stigma and discrimination in the health care sector and police force

□ 3.1. IF YES, which populations and what elements of HIV prevention does the policy/strategy address?

IDU	MSM	Sex workers	Customers of Sex Workers	Prison inmates	Other populations
Yes	Yes	Yes	Yes	Yes	-

Yes	Yes	Yes	Yes	Yes	-
Yes	Yes	Yes	Yes	Yes	-
Yes	No	No	No	No	-
Yes	Yes	Yes	No	Yes	-
Yes	Yes	Yes	Yes	Yes	-
Yes	Yes	Yes	Yes	Yes	-
No	No	No	No	No	-

3.2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate policy efforts in support of HIV prevention in 2011?:

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

4. Has the country identified specifc needs for HIV prevention programmes?: Yes

IF YES, how were these specific needs determined?:

Based on Kosovo Strategic Plan 2009 - 2013

-4.1. To what extent has HIV prevention been implemented?-

Blood safety: Agree Condom promotion: Agree Harm reduction for people who inject drugs: Agree HIV prevention for out-of-school young people: N/A HIV prevention in the workplace: N/A HIV testing and counseling: Aaree IEC on risk reduction: Agree IEC on stigma and discrimination reduction: Agree Prevention of mother-to-child transmission of HIV: N/A Prevention for people living with HIV: Agree Reproductive health services including sexually transmitted infections prevention and treatment: Agree Risk reduction for intimate partners of key populations: Aaree Risk reduction for men who have sex with men: Agree **Risk reduction for sex workers:** Agree School-based HIV education for young people: Agree Universal precautions in health care settings: Agree Other[write in]:

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in implementation of HIV prevention programmes in 2011?:

A - V. TREATMENT, CARE AND SUPPORT

1. Has the country identified the essential elements of a comprehensive package of HIV treatment, care and

support services?:

Briefly identify how HIV treatment, care and support services are being scaled-up?:

Currently there are 14 persons under the ARV treatment Infectious Disease Clinic Prishtina University Hospital the reference public institution HIV treatment.

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

Antiretroviral therapy: Strongly Agree **ART for TB patients:** N/A Cotrimoxazole prophylaxis in people living with HIV: N/A Early infant diagnosis: HIV care and support in the workplace (including alternative working arrangements): Aaree HIV testing and counselling for people with TB: Aaree HIV treatment services in the workplace or treatment referral systems through the workplace: Disagree Nutritional care: Disagree Paediatric AIDS treatment: Neutral Post-delivery ART provision to women: N/A Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault): N/A Post-exposure prophylaxis for occupational exposures to HIV: N/A Psychosocial support for people living with HIV and their families: Agree Sexually transmitted infection management: Disagree TB infection control in HIV treatment and care facilities: N/A TB preventive therapy for people living with HIV: N/A TB screening for people living with HIV: N/A Treatment of common HIV-related infections: Agree Other [write in]:

2. Does the government have a policy or strategy in place to provide social and economic support to people infected/affected by HIV?:

Yes

Please clarify which social and economic support is provided:

The administrative instruction on activity, structure and function of health services for HIV/AIDS 20/2011 sets the bases article 28.

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

Yes

4. Does the country have access to regional procurement and supply management mechanisms for critical commodities, such as antiretroviral therapy medications, condoms, and substitution medications?: No

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care, and support programmes in 2011?:

8

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

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

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2011?:

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

Limitted Ministry of Health Budget in case the requirements for ARV increase.

A - VI. MONITORING AND EVALUATION

1. Does the country have one national Monitoring and Evaluation (M&E) plan for HIV?: No

Briefly describe any challenges in development or implementation:

Since 2011 the Ministry of Health its focus in strengthening monitoring and evaluation capacities. There is no obligatory reporting mechanism to the Ministry of Health, the Ministry of Health rather relies on voluntary reporting of the stakeholders involved in the HIV/AIDS related issues.

Briefly describe what the issues are:

The lack of monitoring and evaluation capacities in the Ministry of Health. Current HIV/AIDS officer overleaded with the work and therefore, M&E capacities are not available.

□ 2. Does the national Monitoring and Evaluation plan include?

A data collection strategy:
Yes
Behavioural surveys:
Yes
Evaluation / research studies:
Yes
HIV Drug resistance surveillance:
No
HIV surveillance:
No
Routine programme monitoring:
Yes
A data analysis strategy:
No
A data dissemination and use strategy:
No
A well-defined standardised set of indicators that includes sex and age disaggregation (where appropriate):
No
Guidelines on tools for data collection:
No

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

No

4. Is there a functional national M&E Unit?:

No

Briefly describe any obstacles:

There is no M&E Officer as there is no budget for that.

-4.1. Where is the national M&E Unit based?

In the Ministry of Health?:

In the National HIV Commission (or equivalent)?:

Elsewhere [write in]?:

There is no M&E Unit. Currently this function is done by the HIV/AIDS officer at the Ministry of Health.

Permanent Staff [Add as many as needed]

POSITION [write in position titles in spaces below] Fu	ulltime Part time Since when?
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Temporary Staff [Add as many as needed]

POSITION [write in position titles in spaces below] Fulltime Part time Since when?

4.3. Are there mechanisms in place to ensure that all key partners submit their M&E data/reports to the M&E Unit for inclusion in the national M&E system?:

Briefly describe the data-sharing mechanisms:

What are the major challenges in this area:

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

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

6.1. IF YES, does it include information about the content, key populations and geographical coverage of HIV services, as well as their implementing organizations?:

-6.2. Is there a functional Health Information System?

At national level: Yes At subnational level: Yes IF YES, at what level(s)?: National HIS System is currently under development with funding from Luxembourg Development which will incorporate all disease as defined by the International Classsification of Disease

7. Does the country publish an M&E report on HIV , including HIV surveillance data at least once a year?: No

-8. How are M&E data used?—

For programme improvement?:

In developing / revising the national HIV response?:

For resource allocation?:

Other [write in]:

Briefly provide specific examples of how M&E data are used, and the main challenges, if any:

9. In the last year, was training in M&E conducted
At national level?:
No
At subnational level?:
No
At service delivery level including civil society?:

9.1. Were other M&E capacity-building activities conducted` other than training?:

Yes

IF YES, describe what types of activities:

Study visit Bern, for reduction of harm on methadon.

10. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the HIV-related monitoring and evaluation (M&E) in 2011?:

2

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

Support the HIV/AIDS officer in Ministry of Health in establishment of M&E.

B - I. CIVIL SOCIETY INVOLVEMENT

1. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?:

Comments and examples:

2. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") 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)?:

Comments and examples:

-3.-

4.-

2

a. The national HIV strategy?:

b. The national HIV budget?:

c. The national HIV reports?:

Comments and examples:

a. Developing the national M&E plan?:

b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?

c. Participate in using data for decision-making?:

Comments and examples:

5. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") is the civil society sector representation in HIV efforts inclusive of diverse organizations (e.g. organisations and networks of people living with HIV, of sex workers, and faith-based organizations)?:

Comments and examples:

-6. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") is civil society able to access-

a. Adequate financial support to implement its HIV activities?:

b. Adequate technical support to implement its HIV activities?:

Comments and examples:

7. What percentage of the following HIV programmes/services is estimated to be provided by civil society?-

People living with HIV:

Men who have sex with men:

People who inject drugs:

Sex workers:

Transgendered people:

Testing and Counselling:

Reduction of Stigma and Discrimination:

Clinical services (ART/OI)*:

Home-based care:

Programmes for OVC**:

8. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to increase civil society participation in 2011?:

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

B - II. POLITICAL SUPPORT AND LEADERSHIP

1. Has the Government, through political and financial support, involved people living with HIV, key populations and/or other vulnerable sub-populations in governmental HIV-policy design and programme implementation?:

B - III. HUMAN RIGHTS

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People living with HIV:
- Men who have sex with men:
- Migrants/mobile populations:
Orphans and other vulnerable children:
People with disabilities:
- People who inject drugs:
- Prison inmates:
- Sex workers:
- Transgendered people:
- Women and girls:
- Young women/young men:
- Other specific vulnerable subpopulations [write in]: -
1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:

If YES to Question 1.1 or 1.2, briefly describe the contents of these laws:

Briefly explain what mechanisms are in place to ensure that these laws are implemented:

Briefly comment on the degree to which they are currently implemented:

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?:

2.1. IF YES, for which sub-populations? People living with HIV: -Men who have sex with men: -Migrants/mobile populations: -Orphans and other vulnerable children: -People with disabilities: People who inject drugs: -Prison inmates: -Sex workers: -Transgendered people: -Women and girls: -Young women/young men: --Other specific vulnerable subpopulations [write in]: -

Briefly describe the content of these laws, regulations or policies:

Briefly comment on how they pose barriers:

3. Does the country have a policy, law or regulation to reduce violence against women, including for example, victims of sexual assault or women living with HIV?:

Briefly describe the content of the policy, law or regulation and the populations included:

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

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

□6. Does the country have a policy or strategy of free services for the following?

Provided free-of-charge to all people in the country	Provided free-of-charge to some people in the country	Provided, but only at a cost
-	-	-
-	-	-
-	-	-

If applicable, which populations have been identified as priority, and for which services?:

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

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

8. Does the country have a policy or strategy to ensure equal access for key populations and/or other vulnerable sub-populations to HIV prevention, treatment, care and support?:

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

10. Does the country have the following human rights monitoring and enforcement mechanisms?

a. 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:

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

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

a. Programmes to educate, raise awareness among people living with HIV and key populations concerning their rights (in the context of HIV)?:

b. Programmes for members of the judiciary and law enforcement on HIV and human rights issues that may come up in the context of their work?:

=12. Are the following legal support services available in the country?

a. Legal aid systems for HIV casework:

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

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

14. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2011?:

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

15. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the effort to implement human rights related policies, laws and regulations in 2011?:

Since 2009, what have been key achievements in this area:

School-based HIV education for young people:

What challenges remain in this area:

B - IV. PREVENTION

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

 1.1 To what extent has HIV prevention been implemented?

 Blood safety:

 Condom promotion:

 '

 Harm reduction for people who inject drugs:

 '

 HIV prevention for out-of-school young people:

 '

 HIV prevention in the workplace:

 '

 HIV testing and counseling:

 '

 IEC on risk reduction:

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 IEC on stigma and discrimination reduction:

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 Prevention of mother-to-child transmission of HIV:

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Universal precautions in health care settings:

Other [write in]:

2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV prevention programmes in 2011?:

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

B-V. TREATMENT, CARE AND SUPPORT

1. Has the country identified the essential elements of a comprehensive package of HIV and AIDS treatment, care and support services?:

Briefly identify how HIV treatment, care and support services are being scaled-up?:

-1.1. To what extent have the following HIV treatment, care and support services been implemented?
Antiretroviral therapy:
ART for TB patients:
Cotrimoxazole prophylaxis in people living with HIV:
Early infant diagnosis:
HIV care and support in the workplace (including alternative working arrangements):
- HIV testing and counselling for people with TB:
- HIV treatment services in the workplace or treatment referral systems through the workplace:
- Nutritional care:
Paediatric AIDS treatment:
Post-delivery ART provision to women:
Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault):
Post-exposure prophylaxis for occupational exposures to HIV:
- Psychosocial support for people living with HIV and their families:
- Sexually transmitted infection management:
- TB infection control in HIV treatment and care facilities:
- TB preventive therapy for people living with HIV:
- TB screening for people living with HIV:
- Treatment of common HIV-related infections:
- Other [write in]:
-

1.2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2011?:

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

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

3. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2011?":

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

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