# **Cyprus Report NCPI**

## **NCPI** Header

COUNTRY
COUNTRY
Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:  National Aids Committee is under progress
Postal address:
l <del>-</del>
Telephone:
<del>-</del>
Fax:
<del>-</del>
E-mail:
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Describe the process used for NCPI data gathering and validation:

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

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

-NCPI - PARTA [to be administered to government officials] Organization Names/Positions A.I A.II A.VI A.III A.IV A.V No Nο No

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 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:

2011-2015

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

-Prevention of sexual transmission of HIV and STDs -Reduction of harm related to drug use -Prevention of perinatal transmission -Prevention of transmission through blood and blood products, tissue and organ transplants, and skin piercing procedures -Provision of health care based on the latest international standards in counselling, clinical management, labaratory testing -Reduction of personal and social impact of HIV-infection -Human right's protection

-1.1 Which government ministries or agencies

Name of government ministries or agencies [write in]:

MINISTRY OF HEALTH

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	No
No	No
Yes	No
Yes	No

### 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?:

- NATIONAL AIDS FUND / MINISTRY OF HEALTH

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

#### Men who have sex with men:

Yو

#### Migrants/mobile populations:

Yes

### Orphans and other vulnerable children:

Yes

## People with disabilities:

Yes

## People who inject drugs:

Yes

#### Sex workers:

No

## Transgendered people:

INO

## Women and girls:

Yes

#### Young women/young men:

Yes

## Other specific vulnerable subpopulations:

No

## **Prisons:**

Yes

## Schools:

Yes

## Workplace:

No

## Addressing stigma and discrimination:

Yes

### Gender empowerment and/or gender equality:

Yes

### HIV and poverty:

Yes

### **Human rights protection:**

Yes

## Involvement of people living with HIV:

Yes

### 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]?:

-YOUTH -IDUs - PRISONERS -SOLDIERS -YOUTH

## 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?:

Yes

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?:

N/A

-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:

SPECIFIC EVENTS AND ACTIVITIES IMPLEMENTED WITH THE COOPERATION OF NGOs A NUMBER OF STRUCTURED EDUCATIONAL PROGRAMMES SUCH AS PEER EDUCATION SOPPORTED BY NAP

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

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?:

No

- 3. Has the country evaluated the impact of HIV on its socioeconomic development for planning purposes?: Yes
- 3.1. IF YES, on a scale of 0 to 5 (where 0 is "Low" and 5 is "High"), to what extent has the evaluation informed resource allocation decisions?:

3

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

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

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

Yes

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

**Estimates of Current Needs Only** 

5.3. Is HIV programme coverage being monitored?:

Yes

-5.3

(a) IF YES, is coverage monitored by sex (male, female)?:

Yes

(b) IF YES, is coverage monitored by population groups?:

Yes

IF YES, for which population groups?:

- Youth -IDU's - Prisoners - Soldiers

Briefly explain how this information is used:

Through reporting to National Aids Programme

(c) Is coverage monitored by geographical area:

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:

- -TO PROVIDE TESTING COUNSELLING AND MEDICATION TO ALL HIV POSITIVE.
- 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?:

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

- A PEER EDUCATION PROGRAMME PROVIDED TO ALL SECONDARY SCHOOLS.

What challenges remain in this area:

- TO PROVIDE THE ABOVE PROGRAMME TO YOUTH CENTERS IN COOPERATION WITH NGOS

## 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

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:

-During the World Aids Day

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?:

Have active government leadership and participation?:

Yes

Have an official chair person?:

Yes

IF YES, what is his/her name and position title?:

PRESIDENT/GENERAL MANAGER, MINISTRY OF HEALTH

Have a defined membership?:

IF YES, how many members?:

Include civil society representatives?:

IF YES, how many?:

Include people living with HIV?:

Yes IF YES, how many?:

Include the private sector?:

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?:

N/A

What challenges remain in this area:

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

10%

-5.

Capacity-building:

Yes Coordination with other implementing partners:
Yes Information on priority needs:
Yes Procurement and distribution of medications or other supplies:
Yes Technical guidance:
Yes
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?:
Since 2009, what have been key achievements in this area:
What challenges remain in this area: - More political support
A - III. HUMAN RIGHTS
_1.1
People living with HIV: Yes
Men who have sex with men:
Migrants/mobile populations:
Yes Orphans and other vulnerable children:
Yes People with disabilities: Yes
People who inject drugs:
Yes Prison inmates:
Yes Sex workers:
No Transgendered people:
No 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?:
No IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws:
- Briefly explain what mechanisms are in place to ensure 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?:

□IF YES, for which subpopulations?

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

Briefly comment on how they pose barriers:

# 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

FIF YES, what key messages are explicitly promoted?

Abstain from injecting drugs:

Avoid commercial sex:

Yes

Avoid inter-generational sex:

Yes

Be faithful:

Yes

Be sexually abstinent:

**Delay sexual debut:** 

Yes

Engage in safe(r) sex:

Fight against violence against women:

Greater acceptance and involvement of people living with HIV:

Greater involvement of men in reproductive health programmes:

Yes

Know your HIV status:

Males to get circumcised under medical supervision:

Prevent mother-to-child transmission of HIV:

Promote greater equality between men and women:

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?:

Yes

Secondary schools?:

Yes

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?:

Yes

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:

-Peer Education Programme in all Public Schools

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

l						
	U	MSM	Sex workers	Customers of Sex Workers	Prison inmates	Other populations
Y	és	No	No	Yes	Yes	-
Y	és	No	No	No	No	-
Y	és	Yes	Yes	Yes	Yes	-
Y	és	No	No	No	Yes	-
Y	és	No	No	Yes	Yes	-
Y	és	No	No	No	Yes	-
Y	és	No	No	Yes	Yes	-
Y	és	No	No	Yes	Yes	-

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?:

7

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

By extended the Programme of Peer Education in all Public Schools

What challenges remain in this area:

- -General prevention campaigne targeting young people -Target tertiary education students of both Cypriot and foreign nationality
- 4. Has the country identified specifc needs for HIV prevention programmes?:

Yes

IF YES, how were these specific needs determined?:

Reinforcement of programme performance and infrastructure

4.1. To what extent has HIV prevention been implemented?

**Blood safety:** 

Strongly Agree

**Condom promotion:** 

Agree

Harm reduction for people who inject drugs:

Agree

HIV prevention for out-of-school young people:

Strongly Agree

HIV prevention in the workplace:

N/A

HIV testing and counseling:

Strongly Agree

IEC on risk reduction:

Strongly Agree

IEC on stigma and discrimination reduction:

Agree

Prevention of mother-to-child transmission of HIV:

Stronaly Agree

Prevention for people living with HIV:

Strongly 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:

N/A

Risk reduction for sex workers:

N/A

School-based HIV education for young people:

Strongly Agree

Universal precautions in health care settings:

Strongly 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?:

Yes

If YES, Briefly identify the elements and what has been prioritized:

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

- They have no been changes in the last three years.

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

Antiretroviral therapy:

Strongly Agree

**ART for TB patients:** 

Strongly Agree

Cotrimoxazole prophylaxis in people living with HIV:

Strongly Agree

Early infant diagnosis:

Strongly Agree

HIV care and support in the workplace (including alternative working arrangements):

N/A

HIV testing and counselling for people with TB:

Strongly Agree

HIV treatment services in the workplace or treatment referral systems through the workplace:

N/A

**Nutritional care:** 

Strongly Agree

**Paediatric AIDS treatment:** 

Strongly Agree

Post-delivery ART provision to women:

Strongly Agree

Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault):

Strongly Agree

Post-exposure prophylaxis for occupational exposures to HIV:

Strongly Agree

Psychosocial support for people living with HIV and their families: Agree

Sexually transmitted infection management:

Strongly Agree

TB infection control in HIV treatment and care facilities:

Strongly Agree

TB preventive therapy for people living with HIV:

Strongly Agree

TB screening for people living with HIV:

Strongly Agree

Treatment of common HIV-related infections:

Strongly 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:

- -Social support includes counselling services -Financial aid from AIDS FUND, and monthly allowances by Ministry of Labour and Social Insurance
- 3. Does the country have a policy or strategy for developing/using generic medications or parallel importing of medications for HIV?:

No

- 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?:

~

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

-They have no been changes in the last three years.

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?:

N/A

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:

-

## A - VI. MONITORING AND EVALUATION

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

In Progress

Briefly describe any challenges in development or implementation:

We have only National Monitoring Plan evaluation plan in progress

Briefly describe what the issues are:

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

Adata collection strategy:

Yes

Behavioural surveys:

Yes

Evaluation / research studies:

Yes

**HIV Drug resistance surveillance:** 

Yes

**HIV** surveillance:

Yes

Routine programme monitoring:

Yes

A data analysis strategy:

A data dissemination and use strategy:

Awell-defined standardised set of indicators that includes sex and age disaggregation (where appropriate):

Guidelines on tools for data collection:

Yes

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

In Progress

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

Briefly describe any obstacles:

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

In the Ministry of Health?:

Yes

In the National HIV Commission (or equivalent)?:

Elsewhere [write in]?:

Permanent Staff [Add as many as needed]

Fulltime	Part time	Since when?
-	х	2009
-	-	-
X	-	2007
	Fulltime  -  X	V

Temporary Staff [Add as many as needed]

POSITION [write in position titles in spaces below] Fulltime Part time Since when?  0	iomporary oran product as many as necessary			
0	POSITION [write in position titles in spaces below]	Fulltime	Part time	Since when?
	0	-	-	-

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?:

No

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:

IF YES, at what level(s)?:

MEDICAL AND PUPLIC HEALTH SERVICES

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

Yes

-8. How are M&E data used?

For programme improvement?:

Yes 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?: Nο At subnational level?: At service delivery level including civil society?: No 9.1. Were other M&E capacity-building activities conducted` other than training?: 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?: Since 2009, what have been key achievements in this area: NONE What challenges remain in this area: **EVALUATION PLAN** 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)?: 0 Comments and examples: -3.a. The national HIV strategy?: b. The national HIV budget?: c. The national HIV reports?: Comments and examples: 4. 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

2
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?:
Adams to the charical assume and the important to LIDV and initial 2.
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:
51-75%
Men who have sex with men:
<25%
People who inject drugs: 25-50%
Sex workers:
Transgendered people:
Testing and Counselling:
<25%
Reduction of Stigma and Discrimination:
51-75%   Clinical services (ART/OI)*:
Home-based care:

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:

<25%

What challenges remain in this area:

Programmes for OVC\*\*:

workers, and faith-based organizations)?:

# **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**

**Prison inmates:** 

<del>-</del>1.1.-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:

Sex workers:
<u>No</u>
Transgendered people:
No <b>Women and girls:</b>
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?:
No 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?:  No
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?:

No

Yes

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?:

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

One of the specific objectives (strategic plan) is human rights' protection

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
Yes	-	-
Yes	-	-
Yes	-	-
Yes	•	-

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?: Yes

IF YES, Briefly describe the content of this policy/strategy and the populations included:

One of the specific objectives(strategic plan) -Provision of health care based on the latest international standards in counselling, clinical management, labaratory testing

8.1

8.1. IF YES, does this policy/strategy include different types of approaches to ensure equal access for different key populations and/or other vulnerable sub-populations?:

No

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

No

- -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 HIVrelated issues within their work:

Yes

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:

- −11. In the last 2 years, have there been the following training and/or capacity-building activities
- 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?:

Yes

-IF YES, what types of programmes?

Programmes for health care workers:

Yes

Programmes for the media:

No

Programmes in the work place:
No
Other [write in]:

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?:

2

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

NONE

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?:

0

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

•

What challenges remain in this area:

-

# **B-IV. PREVENTION**

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

Yes

IF YES, how were these specific needs determined?:

-Target tertiary education students of both Cypriot and foreign nationality who according to existing epidemiological information are an age where they run highest risk of becoming infected with HIV. - MSM group -Migrants

─1.1 To what extent has HIV prevention been implemented?

**Blood safety:** 

Strongly Agree

**Condom promotion:** 

Agree

Harm reduction for people who inject drugs:

Strongly Agree

HIV prevention for out-of-school young people:

Strongly Agree

HIV prevention in the workplace:

Agree

HIV testing and counseling:

Strongly Agree

IEC on risk reduction:

Stronaly Agree

IEC on stigma and discrimination reduction:

Stronaly Agree

Prevention of mother-to-child transmission of HIV:

Strongly Agree

Prevention for people living with HIV:

Strongly Agree

Reproductive health services including sexually transmitted infections prevention and treatment:

Strongly Agree

Risk reduction for intimate partners of key populations:

Agree

Risk reduction for men who have sex with men:

N/A

Risk reduction for sex workers:

N/A

School-based HIV education for young people:

Strongly Agree

Universal precautions in health care settings:

Strongly Agree

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?:

7

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

What challenges remain in this area:

**MSM-MIGRANTS** 

# **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?:

No

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:**

Strongly Agree

### **ART for TB patients:**

Strongly Agree

Cotrimoxazole prophylaxis in people living with HIV:

Strongly Agree

### Early infant diagnosis:

Strongly Agree

HIV care and support in the workplace (including alternative working arrangements):

N/A

HIV testing and counselling for people with TB:

Strongly Agree

HIV treatment services in the workplace or treatment referral systems through the workplace:

N/A

#### **Nutritional care:**

Strongly Agree

#### **Paediatric AIDS treatment:**

Strongly Agree

## Post-delivery ART provision to women:

Strongly Agree

Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault):

Strongly Agree

Post-exposure prophylaxis for occupational exposures to HIV:

Strongly Agree

Psychosocial support for people living with HIV and their families:

Agree

Sexually transmitted infection management:

Strongly Agree

TB infection control in HIV treatment and care facilities:

Strongly Agree

TB preventive therapy for people living with HIV:

Strongly Agree

TB screening for people living with HIV:

Strongly Agree

Treatment of common HIV-related infections:

Strongly Agree

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?:

No

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?":

'16'

Since 2009, what h	nave been kev	/ achievements	in this a	rea:
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What challenges remain in this area:

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