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## NCPI Header

is indicator/topic relevant?: Yes is data available?: Yes Data measurement tool / source: NCPI Other measurement tool / source: From date: 02/03/2014 To date: 03/26/2014 Additional information related to entered data. e.g. reference to primary data source, methodological concerns:: Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source:: Data measurement tool / source: GARPR

Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any: Dr. Del Hamilton

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**Describe the process used for NCPI data gathering and validation**: Distribution of questionnaires to government and civil society stakeholders Desk review of relevant documents Collation of data NCPI validation and finalization workshop with stakeholders

**Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions**: Consensus during the validation workshop Review of the previously submitted NCPI

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

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

Organization	Names/Positions	Respondents to Part A
Ministry of Health, Wellness and the Environment	Dr. Rosmond Adams / NCD Focal Point	A1,A2,A3,A4,A5,A6
Milton Cato Memorial Hospital	Dr. Jose Davy / Clinical care Coordinator	A1,A4,A5
Ministry of Health, Wellness and the Environment	Dr. Katisha Douglas / Programme Officer	A1,A2,A3,A4,A5,A6
Ministry of Health, Wellness and the Environment	Ms. Donna Francis / Surveillance Assistant	A1,A2,A4,A5,A6
Ministry of Health, Wellness and the Environment	Dr. Del Hamilton / Director, Wellness, Disease Prevention & Management	A1,A2,A3,A4,A5,A6
Ministry of Health, Wellness and the Environment	Mr. Samuel Joyles / Programme Officer	A1,A2,A3,A4,A5,A6
Ministry of Health, Wellness and the Environment	Ms. Reanna Solomon / Epidemiologist	A1,A2,A3,A4,A5,A6

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

Organization	Names/Positions	Respondents to Part B
House of Hope Society	Mrs. Rita Jack / Executive Director	B1,B2,B3,B4,B5
Caribbean HIV and AIDS Alliance	Ms. Florence Olatunji	B1,B2,B3,B4,B5
Marion House and Human Rights Association	Ms. Jeanie Ollivierre / Acting Director	B1,B2,B3,B4,B5
Population Services International	Mr. Patrick Prescod / Country Coordinator	B1,B2,B3,B4,B5
Pan American Health Organization	Ms. Anneke Wilson / Country Programme Specialist	B1,B2,B3,B4,B5

## A.I Strategic plan

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

IF YES, what is the period covered: 2010 - 2014

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.: Priority area addressing decentralization and integration of HIV services Inclusion of detailed operational plan Greater emphasis on monitoring and evaluation More inclusive process Costing of the plan

## IF YES, complete questions 1.1 through 1.10; IF NO, go to question 2.

**1.1.** Which government ministries or agencies have overall responsibility for the development and implementation of the national multi-sectoral strategy to respond to HIV?: Ministry of Health, Wellness and the Environment

## **1.2.** Which sectors are included in the multisectoral strategy with a specific HIV budget for their activities?

Education:

Included in Strategy: Yes

Earmarked Budget: No

Health:

Included in Strategy: Yes

Earmarked Budget: Yes

Labour:

Included in Strategy: Yes

Earmarked Budget: Yes

Military/Police:

Included in Strategy: Yes

Earmarked Budget: Yes

Social Welfare:

Included in Strategy: Yes

Earmarked Budget: Yes

Transportation:
Included in Strategy: No
Earmarked Budget: No
Women:
Included in Strategy: Yes
Earmarked Budget: Yes

Young People:

Included in Strategy: Yes

Earmarked Budget: Yes

Other:

Included in Strategy: No

Earmarked Budget: No

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

## **1.3.** Does the multisectoral strategy address the following key populations/other vulnerable populations, settings and cross-cutting issues?

KEY POPULATIONS AND OTHER VULNERABLE POPULATIONS:

Discordant couples: No

Elderly persons: No

Men who have sex with men: Yes

Migrants/mobile populations: No

Orphans and other vulnerable children: Yes

People with disabilities: No

People who inject drugs: No

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations: No

SETTINGS:

Prisons: Yes

Schools: Yes

Workplace: Yes

CROSS-CUTTING ISSUES:

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 identified?:

# **1.4.** What are the identified key populations and vulnerable groups for HIV programmes in the country?

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: No

Orphans and other vulnerable children: Yes

People with disabilities: No

People who inject drugs: No

Prison inmates: Yes

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific key populations/vulnerable subpopulations [write in]:: Mental Health Patient

: Yes

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

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

**1.7.** 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?: Yes
- d) An indication of funding sources to support programme implementation?: Yes

e) A monitoring and evaluation framework?: Yes

**1.8.** 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.**: Technical sub-committee meetings Consultations Focus group discussions

IF NO or MODERATE INVOLVEMENT, briefly explain why this was the case.:

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

**1.10.** Have external development partners aligned and harmonized their HIV-related programmes to the national multisectoral strategy?: Yes, all partners

IF SOME PARTNERS or NO, briefly explain for which areas there is no alignment/harmonization and why:

#### 2.1. Has the country integrated HIV in the following specific development plans?

#### SPECIFIC DEVELOPMENT PLANS:

Common Country Assessment/UN Development Assistance Framework: Yes

National Development Plan: Yes

Poverty Reduction Strategy: Yes

National Social Protection Strategic Plan: N/A

Sector-wide approach: Yes

Other [write in]:

# 2.2. IF YES, are the following specific HIV-related areas included in one or more of the develop-ment plans?

HIV-RELATED AREA INCLUDED IN PLAN(S):

Elimination of punitive laws: N/A

HIV impact alleviation (including palliative care for adults and children): 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: Yes

Reduction of stigma and discrimination: Yes

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

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

Other [write in]:

:

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

3.1. IF YES, on a scale of 0 to 5 (where 0 is "Low" and 5 is "High"), to what extent has the evalua¬tion informed resource allocation decisions?:

4. Does the country have a plan to strengthen health systems?: No

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

### 5. Are health facilities providing HIV services integrated with other health services?

a) HIV Counselling & Testing with Sexual & Reproductive Health: Many

b) HIV Counselling & Testing and Tuberculosis: Few

c) HIV Counselling & Testing and general outpatient care: Few

d) HIV Counselling & Testing and chronic Non-Communicable Diseases:

e) ART and Tuberculosis: Few

f) ART and general outpatient care: None

g) ART and chronic Non-Communicable Diseases: None

#### h) PMTCT with Antenatal Care/Maternal & Child Health: Many

i) Other comments on HIV integration: :

## 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 your country's HIV programmes in 2013?: 9

**Since 2011, what have been key achievements in this area**: The National Health Strategic Plan, 2008 - 2012 was evaluated in 2013. The HIV programme evaluation was good with respect to achievement of indicators. The Ministry is currently developing a comprehensive strategic plan to include HIV response.

What challenges remain in this area::

### A.II Political support and leadership

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

A. Government ministers: Yes

B. Other high officials at sub-national level: Yes

**1.1.** In the last 12 months, have the head of government or other high officials taken action that demonstrated leadership in the response to HIV?: Yes

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership: Launch of workplace policy Faith based organization workshop

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

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

### 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?: Hon Clayton Burgin, Minister of Health, Wellness and the Environment

Have a defined membership?: Yes

IF YES, how many members?: 15

Include civil society representatives?: Yes

IF YES, how many?: 8

Include people living with HIV?: Yes

IF YES, how many?: 2

Include the private sector?: Yes

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 coordinationbetween government, civil societyorganizations, and the private sector for implementing HIV strategies/programmes?: Yes

IF YES, briefly describe the main achievements:: Greater efficiency

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?:

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

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]:

: No

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

6.1. IF YES, were policies and laws amended to be consistent with the National HIV Control policies?: No

IF YES, name and describe how the policies / laws were amended:

Name and describe any inconsistencies that remain between any policies/laws and the National AIDS 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 2013?: 9

Since 2011, what have been key achievements in this area:: Launch of work place policy

What challenges remain in this area::

### A.III Human rights

1.1. Does the country have non-discrimination laws or regulations which specify protections for specific key populations and other vulnerable groups? Select yes if the policy specifies any of the following key populations and vulnerable groups:

People living with HIV: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable subpopulations [write in]:

: No

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

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 vulnerable groups?: No

IF YES, for which key populations and vulnerable groups?:

People living with HIV: No

Elderly persons: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]::

: No

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

IF YES, what key messages are explicitly promoted?:

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: No

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: No

Use condoms consistently: Yes

Other [write in]::

: No

**1.2.** In the last year, did the country implement an activity or programme to promote accurate reporting on HIV by the media?: No

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

a) age-appropriate sexual and reproductive health elements?: Yes

b) gender-sensitive sexual and reproductive health elements?: No

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 communi-cation and other preventive health interventions for key or other vulnerable sub-populations?: Yes

Briefly describe the content of this policy or strategy::

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

#### People who inject drugs:

**Men who have sex with men**: Condom promotion,HIV testing and counseling,Reproductive health, including sexually transmitted infections prevention and treatment,Stigma and discrimination reduction,Targeted information on risk reduction and HIV education

**Sex workers**: Condom promotion, HIV testing and counseling, Reproductive health, including sexually transmitted infections prevention and treatment, Stigma and discrimination reduction, Targeted information on risk reduction and HIV education

#### Customers of sex workers:

**Prison inmates**: HIV testing and counseling, Reproductive health, including sexually transmitted infections prevention and treatment, Stigma and discrimination reduction, Targeted information on risk reduction and HIV education

#### Other populations [write in]::

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 2013?: 8

Since 2011, what have been key achievements in this area::

What challenges remain in this area::

:

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

IF YES, how were these specific needs determined?: Consultations

IF YES, what are these specific needs? : Behaviour Change Communication

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

The majority of people in need have access to ...:

Blood safety: Strongly agree

Condom promotion: Strongly agree

Economic support e.g. cash transfers: N/A

Harm reduction for people who inject drugs: N/A

HIV prevention for out-of-school young people: Agree

HIV prevention in the workplace: Agree

HIV testing and counseling: Strongly agree

IEC on risk reduction: Strongly agree

IEC on stigma and discrimination reduction: Strongly 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: Strongly agree

Risk reduction for sex workers: Strongly agree

Reduction of gender based violence: Agree

School-based HIV education for young people: Strongly agree

#### Treatment as prevention: 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 2013?: 8

### 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:** HIV Testing and Counselling Psycho-social support Adherence Counselling ART Treatment Nutritional Counselling and Support

Briefly identify how HIV treatment, care and support services are being scaled-up?: All elements are being decentralized to five additional sites

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

The majority of people in need have access to ...:

Antiretroviral therapy: Strongly agree

ART for TB patients: Strongly agree

Cotrimoxazole prophylaxis in people living with HIV: Strongly agree

Early infant diagnosis: Strongly agree

Economic support: Agree

Family based care and support: 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

Palliative care for children and adults Palliative care for children and adults: 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: Strongly 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:

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 substitu-tion medications?: Yes

IF YES, for which commodities?: ARVs Condoms CD4 reagents HIV rapid tests

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 2013?: 8

Since 2011, 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 needs of orphans and other vulnerable children?: Yes

6.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: Yes

6.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children ?: No

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 2013?: 6

Since 2011, 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?: Yes

Briefly describe any challenges in development or implementation:

1.1. IF YES, years covered:

**1.2. IF YES, have key partners aligned and harmonized their M&E requirements (including indi-cators) with the national M&E plan?**: Yes, all partners

Briefly describe what the issues are::

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

A data collection strategy: Yes

IF YES, does it address::

Behavioural surveys: No

Evaluation / research studies: Yes

HIV Drug resistance surveillance: No

HIV surveillance: Yes

Routine programme monitoring: Yes

A data analysis strategy: Yes

A data dissemination and use strategy: Yes

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

Guidelines on tools for data collection: Yes

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

3.1. IF YES, what percentage of the total HIV programme funding is budgeted for M&E activities?:

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

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)?: No

If elsewhere, please specify:

### 4.2. How many and what type of professional staff are working in the national M&E Unit?

POSITION [write in position titles]	Fulltime or Part-time?	Since when?
Two Data Entry Clerks	Full-time	
Statistical Assistant	Full-time	
Statistical Officer	Full-time	
Surveillance Officer	Full-time	
Epidemiologist	Full-time	
POSITION [write in position titles]	Fulltime or 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?: Yes

Briefly describe the data-sharing mechanisms:: Data collection forms disseminated by M & E unit Reports

What are the major challenges in this area:: Timely submission of data

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

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

IF YES, briefly describe the national database and who manages it.: Access DevInfo Excel

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?: Yes, all of the above

IF YES, but only some of the above, which aspects does it include?:

#### 6.2. Is there a functional Health Information System?

At national level: Yes

At subnational level: Yes

IF YES, at what level(s)?: Health Care Facilities

**7.1.** Are there reliable estimates of current needs and of future needs of the number of adults and children requiring antiretroviral therapy?: No

7.2. Is HIV programme coverage being monitored?: Yes

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

(b) IF YES, is coverage monitored by population groups?: No

IF YES, for which population groups?:

Briefly explain how this information is used::

(c) Is coverage monitored by geographical area?: Yes

IF YES, at which geographical levels (provincial, district, other)?: Health District

Briefly explain how this information is used::

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

### 9. How are M&E data used?

For programme improvement?: Yes

In developing / revising the national HIV response?: Yes

For resource allocation?: Yes

Other [write in]::

: No

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

#### 10. In the last year, was training in M&E conducted

At national level?: Yes

IF YES, what was the number trained::

At subnational level?: Yes

IF YES, what was the number trained:

At service delivery level including civil society?: Yes

IF YES, how many?:

10.1. Were other M&E capacity-building activities conducted other than training?: No

IF YES, describe what types of activities:

11. 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 2013?: 6

Since 2011, what have been key achievements in this area::

What challenges remain in this area::

### **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 contrib¬uted to strengthening the political commitment of top leaders and national strategy/policy formulations?: 4

Comments and examples: Development of workplace policy Development of National HIV/STI/TB policy

2. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") have civil society repre¬sentatives 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)?: 4

Comments and examples::

3. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") are the services provided by civil society in areas of HIV prevention, treatment, care and support included in:

a. The national HIV strategy?: 5

b. The national HIV budget?: 3

c. The national HIV reports?: 4

Comments and examples:

# 4. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") is civil society included in the monitoring and evaluation (M&E) of the HIV response?

a. Developing the national M&E plan?: 4

b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?: 4

c. Participate in using data for decision-making?: 4

Comments and examples:: M & E Workshops

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

**Comments and examples:**: Workshops with various organizations including faith based organizations, Community based activities

# 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?: 4

#### b. Adequate technical support to implement its HIV activities?: 4

**Comments and examples:**: Depends on the civil society organization Caribbean HIV and AIDS Alliance receives funding from PEPFER (USAID) Population Services International / Caribbean receives funding from the German Government through PANCAP St. Vincent Planned Parenthood Association receives funding from IPPA House of Hope Society receives funding from various sources

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

#### Prevention for key-populations:

People living with HIV: 25-50%

Men who have sex with men: >75%

People who inject drugs:

Sex workers: >75%

Transgender people:

Palliative care : <25%

Testing and Counselling: 25-50%

Know your Rights/ Legal services: 51-75%

**Reduction of Stigma and Discrimination**: 51-75%

Clinical services (ART/OI): <25%

Home-based care: 25-50%

Programmes for OVC: 25-50%

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 2013?: 9

Since 2011, what have been key achievements in this area:: Increased access to VCT services

What challenges remain in this area:: Financial constraints for home based care, Education and prevention programmes

### **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?: Yes

**IF YES, describe some examples of when and how this has happened:**: Technical assistance to support group Consultations during policy development

### **B.III Human rights**

**1.1.** Does the country have non-discrimination laws or regulations which specify protections for specific key populations and other vulnerable subpopulations? Circle yes if the policy specifies any of the following key populations:

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable subpopulations [write in]::

: No

**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

#### 2.1. IF YES, for which sub-populations?

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]::

: No

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?: Yes

Briefly describe the content of the policy, law or regulation and the populations included.: Summary Proceeding Act

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

**IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:** The National HIV/STI/TB policy framework 2014-2025 third thematic area speaks to human rights and social protection.

5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, key populations and other vulnerable populations?: No

IF YES, briefly describe this mechanism::

6. Does the country have a policy or strategy of free services for the following? Indicate if these services are provided free-of-charge to all people, to some people or not at all (circle "yes" or "no" as applicable).

Antiretroviral treatment:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: No

HIV prevention services:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: No

HIV-related care and support interventions:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: No

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?: Yes

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?: Yes

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:

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?: Yes

IF YES, briefly explain the different types of approaches to ensure equal access for different populations:: open door policy to all

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

IF YES, briefly describe the content of the policy or law: National Tripartite Workplace Policy on HIV and AIDS

## **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: Yes

**b.** Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts: No

IF YES on any of the above questions, describe some examples:: SVG Human Rights Association

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)?: No

**b.** Programmes for members of the judiciary and law enforcement46 on HIV and human rights issues that may come up in the context of their work?: No

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

a. Legal aid systems for HIV casework: Yes

**b.** Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV: No

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: Yes

Programmes in the work place: Yes

Other [write in]::

: No

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 2013?: 5

Since 2011, 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 2013?:

Since 2011, 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?: Consultations

IF YES, what are these specific needs? :

#### 1.1 To what extent has HIV prevention been implemented?

The majority of people in need have access to ...:

Blood safety: Strongly agree

Condom promotion: Strongly agree

Harm reduction for people who inject drugs: N/A

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: Strongly agree

 IEC on stigma and discrimination reduction: 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 sex workers: Agree

 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 2013?: 8

Since 2011, what have been key achievements in this area: Increase access to sexual and reproductive health services

What challenges remain in this area:: Procurement of funds Resource persons

### **B.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:** Psychosocial support Nutritional support Home based care ARV Therapy

**Briefly identify how HIV treatment, care and support services are being scaled-up?**: Psychosocial support decentralized for increased access Nutritional support scaled up through recruitment of a dietitian Home based care scaled up by increasing the number of clients and personnel ARV Therapy

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

The majority of people in need have access to ...:

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: 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: Strongly 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 2013?: 8

Since 2011, 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 needs of orphans and other vulnerable children?: Yes

2.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: Yes

2.2. IF YES, does the country have a national action plan specifically for orphans and 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 in the implementation of HIV treatment, care and support programmes in 2013?: 6

Since 2011, what have been key achievements in this area::

What challenges remain in this area:: Financial constraints