Survey Response Details



An error occurred. ", hexadecimal value 0x01, is an invalid character. Line 6, position 26.

Response Information

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Response Details

Page 1

1) Country

Suriname (0)

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

Maltie Mohan - Algoe Coordinator NHIS

3) E-mail:

nhis_moh_suriname@yahoo.com

4) Date of submission:

Please enter in DD/MM/YYYY format

17/04/2010

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

Not provided

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

Not provided

7)

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

Not provided

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8)

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

Organization Names/Positions		Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent MOH	Dr Martelize Eersel Director of Health of MOH Suriname	A.V

9)

	Organizatio	on Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 2	MOH HIV Board	Dr Hedwig Goede	AI, AII, AIII
Respondent 3	МОН	Saskia Woodly Prevention	A.III
Respondent 4	МОН	Wendy Emanuelson Prevention	AIII
0	МОН	Firoz Abdoel wahid Focal Point Technical Unit NAP	A.IV
Respondent 6	MOH	Deborah Stijnberg HIV M&E Officer	AI, AII, AIII, AIV, AV
Respondent 7	МОН	Maltie Mohan – Algoe Coordinator NHIS	A.I, A.II, A.III, A.IV, A.V
Respondent 8			
Respondent 9			
Respondent 10			
Respondent 11			
Respondent 12			
Respondent 13			
Respondent 14			
Respondent 15			
Respondent 16			
Respondent 17			
Respondent 18			
Respondent 19			
Respondent 20			
Respondent			

21
Respondent
22
Respondent
23
Respondent
24
Respondent

10)

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

Organization Names/Positions

Respondent UNICEF

Ksenia Glebova HIV Officer

Respondents to Part B [Indicate which parts each respondent was queried on]

B.I, B.II, B.III, B.IV

11)

Organization Names/Positions		Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]	
Respondent UN	IFPA	Ingrid Caffe HIV Officer	B.I, B.II, B.III	
Respondent PA	НО	Rachel Eersel HIV/STI Advisor	B.I, B.II, B.III, B.IV	
Respondent UN	IDP	Miriam Hubbard Governance Programme Officer	B.I, B.II	
Respondent 5				
Respondent 6				
Respondent 7				
Respondent 8				
Respondent 9				
Respondent 10				
Respondent 11				
Respondent 12				
Respondent 13				
Respondent 14				
Respondent 15				

Respondent

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Respondent

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Respondent

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Respondent

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Respondent

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12)

Part A, Section I: STRATEGIC PLAN

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

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

Yes (0)

Page 7

13)

1.1 How long has the country had a multisectoral strategy?

Number of Years

6

14)

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

	Included in strategy	Earmarked budget
Health	Yes	Yes
Education Labour	Yes Yes	Yes Yes
Transportation Military/Police		No Yes

Women Yes Yes Young people Yes Yes

Other*

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15)

Part A, Section I: STRATEGIC PLAN

1.3 Does the multisectoral strategy address the following target populations, settings and crosscutting issues?

Target populations	
a. Women and girls	Yes
b. Young women/young men	
c. Injecting drug users	No
d. Men who have sex with men	Yes
e. Sex workers	Yes
f. Orphans and other vulnerable children	Yes
g. Other specific vulnerable subpopulations*	Yes
Settings	
h. Workplace	Yes
i. Schools	Yes
j. Prisons	Yes
Cross-cutting issues	
k.HIV and poverty	Yes
I. Human rights protection	Yes
m. Involvement of people living with HIV	Yes
n. Addressing stigma and discrimination	Yes
o. Gender empowerment and/or gender equality	Yes

16)

1.4 Were target populations identified through a needs assessment?

No (0)

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17)

Part A, Section I: STRATEGIC PLAN

1.5 What are the identified target populations for HIV programmes in the country?

Women and girls Young women/young men Men who have sex with men Sex workers Orphans and other wilnerable children STI clients Goldminers

18)

1.6 Does the multisectoral strategy include an operational plan?

Yes (0)

19)

1.7 Does the multisectoral strategy or operational plan include:

a. Formal programme goals?

b. Clear targets or milestones?

c. Detailed costs for each programmatic area?

d. An indication of funding sources to support programme? Yes e. A monitoring and evaluation framework?

Yes

20)

1.8 Has the country ensured "full involvement and participation" of civil society* in the development of the multisectoral strategy?

Active involvement (0)

Page 12

21)

Part A, Section I: STRATEGIC PLAN

Question 1.8 (continued)

IF active involvement, briefly explain how this was organised:

2002 SWs 7.2% Street SWs 15.7%

22)

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

Yes, all partners (0)

Page 14

23)

Part A, Section I: STRATEGIC PLAN

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

Yes (0)

Page 15

24)

Part A, Section I: STRATEGIC PLAN

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

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

25)

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

HIV-related area included in development plan(s)	
HIV prevention	Yes
Treatment for opportunistic infections	Yes
Antiretroviral treatment	Yes
Care and support (including social security or other schemes)	Yes
HIV impact alleviation	No
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	No
Reduction of stigma and discrimination	Yes
Women's economic empowerment (e.g. access to credit, access toland, training) Other: Please specify	No

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26)

Part A, Section I: STRATEGIC PLAN

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

No (0)

Page 17

27)

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

Yes (0)

Page 18

28)

Part A, Section I: STRATEGIC PLAN

4.1 IF YES, which of the following programmes have been implemented beyond the pilot

stage to reach a significant proportion of the uniformed services?

Behavioural change communication Yes

Condom provision

HIV testing and counselling Yes

Sexually transmitted infection services

Antiretroviral treatment

Care and support Other: Please specify

Page 19

29)

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

No (0)

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30)

Part A, Section I: STRATEGIC PLAN

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

No (0)

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31)

Part A, Section I: STRATEGIC PLAN

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

Yes (0)

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32)

Part A, Section I: STRATEGIC PLAN

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

Yes (0)

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

Yes (0)

Page 25

34)

Part A, Section I: STRATEGIC PLAN

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

Estimates of current and future needs (0)

35)

7.4 Is HIV programme coverage being monitored?

Yes (0)

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36)

Part A, Section I: STRATEGIC PLAN

Question 7.4 (continued)

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

Yes (0)

37)

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

Yes (0)

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³⁸⁾ Part A, Section I: STRATEGIC PLAN

Question 7.4 (continued)

(c) Is coverage monitored by geographical area?

Yes (0)

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39)

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

Yes (0)

Page 30

40)

Part A, Section I: STRATEGIC PLAN

Question 7.5 (continued)

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

8 (8)

41)

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

- Mid 2007: Joint review of NSP 2004- 2008 - December 2007: action plan 2008 – 2009 - New coordination structure implemented to carry out HIV response - December 2009: Based on recommendations from review the current NSP 2009–2013 was launched - Annual workplan NSP for 2010 developed and start with implementation - Developed an M&E plan based on NSP 2009-2013 - Annual workplan M&E NSP for 2010 developed and start with implementation

42)

What are remaining challenges in this area:

- Commitment and Capacity of implementing agencies

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43)

Part A, Section II: POLITICAL SUPPORT

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

President/Head of government No
Other high officials Yes
Other officials in regions and/or districts No

44)

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

Yes (0)

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45)

2.1 IF YES, when was it created?

Please enter the year in yyyy format 2009

46)

2.2 IF YES, who is the Chair?

Name Dr Marthelize Eersel

Position/title Director of Health of Suriname

47)

2.3 IF YES, does the national multisectoral AIDS coordination body:

have terms of reference?	Yes
have active government leadership and participation?	Yes
have a defined membership?	Yes
include civil society representatives?	Yes
include people living with HIV?	Yes
include the private sector?	Yes
have an action plan?	No
have a functional Secretariat?	Yes
meet at least quarterly?	Yes
review actions on policy decisions regularly?	Yes
actively promote policy decisions?	Yes
provide opportunity for civil society to influence decision-making?	Yes
strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?	No

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48)

Part A, Section II: POLITICAL SUPPORT

Question 2.3 (continued)

If you answer "yes" to the question "does the National multisectoral AIDS coordination body <u>have a defined membership</u>", how many members?

Please enter an integer greater than or equal to 1

11

49)

If you answer "yes" to the question "does the National multisectoral AIDS coordination body <u>include civil society representatives</u>", how many?

Please enter an integer greater than or equal to 1

1

50)

If you answer "yes" to the question "does the National multisectoral AIDS coordination body include people living with HIV", how many?

Please enter an integer greater than or equal to 1

1

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51)

Part A, Section II: POLITICAL SUPPORT

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

Yes (0)

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52)

Part A, Section II: POLITICAL SUPPORT

Question 3 (continued)

IF YES, briefly describe the main achievements:

Installation of the HIV Board was just at the end of 2009. The achievement of this Board will have to be evaluated later this year.

53)

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

Information on priority needs	Yes
Technical guidance	Yes
Procurement and distribution of drugs or other supplies	Yes
Coordination with other implementing partners	Yes
Capacity-building	Yes
Other: Please specify	

54)

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

No (0)

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55)

Part A, Section II: POLITICAL SUPPORT

Question 6.1 (continued)

Overall, how would you rate the political support for the HIV programmes in 2009?

6 (6)

56)

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

- Expansion of Government Budget for HIV Response

57)

What are remaining challenges in this area:

- Increased awareness of politicians regarding socio-economic consequences of HIV(Impact of HIV on the society)

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58)

Part A, Section III: PREVENTION

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

Yes (0)

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59)

Part A, Section III: PREVENTION

1.1 IF YES, what key messages are explicitly promoted?

Check for key message explicitly promoted (multiple options allowed)

- a. Be sexually abstinent (0)
- b. Delay sexual debut (0)
- c. Be faithful (0)
- d. Reduce the number of sexual partners (0)
- e. Use condoms consistently (0)
- f. Engage in safe(r) sex (0)
- k. Greater acceptance and involvement of people living with HIV (0)

- m. Males to get circumcised under medical supervision (0)
- n. Know your HIV status (0)
- o. Prevent mother-to-child transmission of HIV (0)

60)

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

Yes (0)

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61)

Part A, Section III: PREVENTION

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

Yes (0)

62)

2.1 Is HIV education part of the curriculum in:

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

63)

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

Yes (0)

64)

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

Yes (0)

65)

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

Yes (0)

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66)

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

Check which specific populations and elements are included in the policy/strategy

Targeted information on risk reduction and HIV education

Stigma and discrimination reduction

Condom promotion

HIV testing and counselling

Reproductive health, including sexually transmitted infections prevention and treatment

Vulnerability reduction (e.g. income generation)

Drug substitution therapy

Needle & syringe exchange

Men having sex with men, Sex workers, Clients of sex workers, Prison inmates, Other populations

Other populations

Men having sex with men, Sex workers, Clients of sex workers, Other populations

Sex workers, Clients of sex workers, Other populations

Sex workers

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⁶⁷⁾ Part A, III. PREVENTION

Question 3.1 (continued)

You have checked one or more policy/strategy for "Other populations". Please specify what are "other populations".

Goldminers - Condom promotion Youth - Targeted information on risk reduction and HIV education - Stigma and discrimination reduction - Condom promotion - HIV testing and counseling - Reproductive health, including sexually transmitted infections prevention and treatment

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68)

Part A, III. PREVENTION

Question 3.1 (continued)

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

6 (6)

69)

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

- HIV programmes for some ministries (Labor, Education) - Inventory of legislations on stigma and discrimination of HIV - HIV on the workplace implemented in some companies

70)

What are remaining challenges in this area:

- Development of tailor-made intervention programmes for subpopulations - Lack of specific cultural, socio-economic, environmental and behavioral data on subpopulations for targeted interventions - Putting knowledge and skills in to practice

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71)

Part A, III. PREVENTION

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

Yes (0)

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72)

Part A, III. PREVENTION

Question 4 (continued)

IF YES, how were these specific needs determined?

- Through hearings with stakeholders in process of preparing grant proposal GF and concept prevention plan - Through discussions in HIV Board - BSS studies with recommendations - Surveys

73)

4.1 To what extent has HIV prevention been implemented?

The majority of people in need have access **HIV** prevention component Blood safety Agree Universal precautions in health care settings Agree Prevention of mother-to-child transmission of HIV Agree IEC* on risk reduction Agree IEC* on stigma and discrimination reduction Agree Condom promotion Agree Agree HIV testing and counselling Harm reduction for injecting drug users N/A Risk reduction for men who have sex with men Agree Risk reduction for sex workers Agree Reproductive health services including sexually transmitted infections Agree prevention and treatment School-based HIV education for young people Agree HIV prevention for out-of-school young people Agree HIV prevention in the workplace Agree Other: please specify

74)

Part A, III. PREVENTION

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

6 (6)