Uzbekistan Report NCPI

NCPI Header

is indicator/topic relevant?: Yes
is data available?: Yes
Data measurement tool / source: NCPI
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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

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Describe the process used for NCPI data gathering and validation: С целью ознакомления ключевых партнеров с процессом сбора информации и подготовки отчета проведена ознакомительная встреча в Республиканском центре по борьбе со СПИДом. Всем партнерам даны соответствующие инструкции, согласно которым они должны заполнить вопросник НОПИ и финансовую матрицу. Сбор и обобщение данных производились до 26.03.14. 27.03.14 проведена встреча по обсуждению результатов проведенной работы и валидации данных. Отчет представлен в Минздрав и Внешнекономический департамент для рассмотрения и рекомендации к представления в Региональный офис ЮНЭЙДС и введения данных в он-лайн платформу. Сдача отчета состоялась 27.03.14.

Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions: С целью технического обеспечения подготовки отчета и урегулирования возможных разногласий в Центре по борьбе со СПИДом создана рабочая группа по подготовке отчета. В процессе сбора данных и подготовки отчета разногласий со стороны партнеров не было.

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]
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: 2013-2017 гг.

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.: В настоящей Стратегической программе имеется 6 стратегических направлений с определением целей, соответствующих целям, поставленным в Политической декларации 2011 года. наряду с направлениями, касающимися профилактики ВИЧ-инфекции среди уязвимых групп населения, основной популяции и обеспечения всеобщего доступа к лечению и диагностике, в программу в качестве стратегии внесено обеспечение профилактики заражения ВИЧ-инфекцией в медицинских учреждениях. В каждом стратегическом направлении имеются новые подходы и мероприятия по усовершенствованию существующей системы противодействия эпидемии и расширению масштабов охвата.

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?: Министерство здравоохранения РУз; - Республиканский и региональные центры по борьбе со СПИДом; - Министерство внутренних дел; - Министерство народного образования РУз; - Министерство высшего и средне специального образования; - Министерство труда и социальной защиты населения; - Министерство обороны; - Министерство финансов; - Министерство юстиции;

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: No

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: No

Young People:

Included in Strategy: Yes
Earmarked Budget: No

Other: Благотворительный фонд "Махалля" и ННО: "Ишонч ва хаёт", "Интилиш", "Истикболли авлод"

Included in Strategy: Yes
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?: В направлениях, касающихся образования и трудовых ресурсов, мероприятия проводятся в рамках основной деятельности в качестве обязательных функций данного ведомства. В направлениях, касающихся женщин и молодежи, выполняемые Комитетом женщин или общественного движения «Камолот», мероприятия финансируются из международных источников. Направления с отдельным бюджетом также имеют компоненты, выполняемые в рамках основной деятельности в качестве обязательных функций данного ведомства и донорские средства из международных источников.
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: Yes

Elderly persons: No

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: Yes

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: No

HIV and poverty: No

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: Yes

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: Yes

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]:

: No

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?: N/A

d) An indication of funding sources to support programme implementation?: N/A

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.: В разработку стратегии вовлечены представители Благотворительного Фонда «Махалля», Комитета женщин и общественного движения молодежи «Камолот». В республике разработан «комплексный план мероприятий по оказанию квалифицированной медицинской
помощи населению, укрепления репродуктивного здоровья, улучшению материально-технической базы и повышению кадрового потенциала учреждений здравоохранения", согласованный с Минздравом, МВД, МВССО, МНО, министерства труда и социальной защиты населения, Благотворительным Фондом «Махалля», Комитета женщин и общественного движения молодежи «Камолот». основными координаторами реализации плана являются местные органы власти и местные подразделения Комитета женщин.

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: N/A

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 development 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: N/A

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

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): N/A
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?: 4

4. Does the country have 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 and children: В республике принят ряд Постановлений, в которые интегрированы мероприятия по укреплению системы здравоохранения, в том числе укреплению системы противодействия распространению ВИЧ: Постановление Президента Республики Узбекистан №ПП-1023 от 26.12.2008г. «О дополнительных мерах по повышению эффективности противодействия распространению ВИЧ-инфекции в Республике Узбекистан» такие как, Постановление Президента Республики Узбекистан №ПП-1652 от 28.11.2011г. «О мерах по дальнейшему углублению реформирования системы здравоохранения»; Постановление Кабинета Министров №1 от 05.01.2009 г. «О мерах по совершенствованию организационной структуры и деятельности центров по борьбе со СПИДом»; Постановление кабинета Министров Республики Узбекистан «О дополнительных мерах по реализации целей развития тысячелетия ООН в Узбекистане» № 21 от 26 января 2011 года. Согласно принятых решений, в течение 2013 года из Государственного бюджета закуплено тест-систем из расчета на 156000 анализов. Проведен капитальный ремонт в 9 лабораторий переливания крови. Согласно решения Межведомственного Экспертного Совета за счет государственного бюджета запланирована закупка препаратов АРВТ на сумму 1,8 млн. долларов США. В системе МВД увеличилось количество региональных ведомственных лабораторий, соответственно увеличилось число кадров, оборудования, финансируемых средств.

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: Many

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

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

e) ART and Tuberculosis: Many

f) ART and general outpatient care: Many

g) ART and chronic Non-Communicable Diseases: Many

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?: 8

Since 2011, what have been key achievements in this area: В рамках стратегической программы на 2013-2017 год в 2013 году утвержден новий Закон РУз «О противодействии заболеванию, вызываемому Вирусом иммунодефицита человека (ВИЧ-инфекции)», в настоящее время производится пересмотр и нормативно-правовых документов, касающихся социально-психологической защиты ЛЖВ на предмет соответствия их с законом и международными требованиями. Усовершенствуются стратегии в направлении профилактики заражения ВИЧ-инфекцией уязвимых групп населения, молодежи и детей. Разработана стратегия противодействия распространения ВИЧ-инфекции среди
мигрантов и членов их семей. Принят ряд решений по расширению охвата лечебно-диагностическими, консультативными услугами ЛЖВ, вопросы репродуктивного здоровья и планирования семьи ВИЧ-инфицированных беременных предусмотрены в стратегических задачах.

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: Глава и члены правительства при участии в национальных и международных мероприятиях регулярно уделяют внимание проблему противодействия ВИЧ-инфекции на форумах и симпозиумах, н-р: в 2013 году в симпозиуме, посвященном детскому здравоохранению министр здравоохранения и премьер министр в своих выступлениях уделили внимание проблемам, связанным с ВИЧ-инфекцией. На уровне Министерства здравоохранения на общереспубликанских коллегиях и Санэпидсоветах, проводимых ежеквартально в повестку дня включается вопрос о проблемах в области ВИЧ.

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?: Премьер министр: Мирзияев Ш.М.

Have a defined membership?: Yes

IF YES, how many members?: 25

Include civil society representatives?: Yes

IF YES, how many?: 5

Include people living with HIV?: No

IF YES, how many?:

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 coordination between government, civil society organizations, and the private sector for implementing HIV strategies/programmes?: Yes

IF YES, briefly describe the main achievements:

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: No

Technical guidance: Yes

Other [write in]:

: No

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

IF YES, name and describe how the policies / laws were amended: В рамках стратегической программы на 2013-2017 год в 2013 году утвержден новый Закон РУз «О противодействии заболеванию, вызываемому Вирусом иммунодефицита человека (ВИЧ-инфекции)», в настоящее время производится пересмотр и нормативно-правовых документов, касающихся социально-психологической защиты ЛЖВ на предмет соответствия их с законом и международными требованиями.

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?: 8

Since 2011, what have been key achievements in this area: 1. Обновление закона о профилактике ВИЧ-инфекции; 2. Выделение средств на АРВТ из государственного бюджета 3. Укрепление материально-технической базы учреждений, оказывающих услуги для ЛЖВС 4. Усиление участия неправителевного сектора в разработке и координации мероприятий по противодействию эпидемии ВИЧ.

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: Yes
- Men who have sex with men: No
- Migrants/mobile populations: Yes
- Orphans and other vulnerable children: Yes
- People with disabilities: Yes
- People who inject drugs: Yes
- Prison inmates: Yes
- Sex workers: Yes
- Transgender people: No
- Women and girls: Yes
- Young women/young men: Yes
- 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:

- Все антидискриминационные аспекты предусмотрены Конституцией Республики, в республике отменена смертная казнь за уголовные преступления (2008)

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

- Законы реализуются правоохранительными органами, органами судебного исполнения, местной власти «хакимияты», СМИ

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: No

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: Yes

Use condoms consistently: No

Other [write in]: *значительная часть населения республики согласно вероисповеданию ислама производит обрезание крайней плоти мальчиков в раннем возрасте. Представители других религий имеют возможность пользоваться этими услугами по своему усмотрению.

: Yes

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

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

2.1. Is HIV education part of the curriculum in:

Primary schools?: No

Secondary schools?: 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?: 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: Стратегия: Профилактика ВИЧ-инфекции среди групп повышенного риска Мероприятие: В соответствии с национальными традициями и нормами разработать и распространить дополнительные ИОМ на узбекском и русском языках по вопросам ВИЧ-инфекции в соответствии с потребностями целевой группы. Стратегия: Профилактика ВИЧ и ИППП среди общего населения. Приоритетные мероприятия: • Разработать и внедрить программу, предусматривающую участие преподавателей, родителей, «равных» тренеров, общественных консультантов и медработников в мероприятиях, касающихся репродуктивного здоровья и профилактики ВИЧ/СПИДа • Привлекать представителей целевых групп (студенты, мигранты, родители, учителя, и т.д.) к реализации программ по повышению уровня знаний и приверженности безопасным видам поведения • Привлекать СМИ к реализации программ по повышению уровня знаний по ЗОЖ • Включить вопросы ВИЧ в программы подготовки и переподготовки специалистов СМИ с целью более активного вовлечения СМИ в вопросы информирования населения по вопросам ВИЧ.

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

People who inject drugs: Condom promotion, HIV testing and counseling, Needle & syringe exchange, Reproductive health, including sexually transmitted infections prevention and treatment, Stigma and discrimination reduction, Targeted information...
on risk reduction and HIV education

**Men who have sex with men**: Condom promotion, HIV testing and counseling, 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**: 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

**Prison inmates**: 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, Vulnerability reduction (e.g. income generation)

**Other populations [write in]**: мигранты, беременные, лица, вступающие в брак

- 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

### 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?: 7

**Since 2011, what have been key achievements in this area?**: Снижение распространенности среди ПИН и ЛПИУВ; максимальный охват профилактическими программами беременных, лиц, вступающих в брак, медицинских работников.

**What challenges remain in this area?**:

**4. Has the country identified specific needs for HIV prevention programmes?** No

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

**IF YES, what are these specific needs?**:

**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**: Disagree

**Economic support e.g. cash transfers**: Disagree

**Harm reduction for people who inject drugs**: Strongly agree

**HIV prevention for out-of-school young people**: Disagree

**HIV prevention in the workplace**: Strongly agree

**HIV testing and counseling**: Strongly agree
IEC on risk reduction: 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: Disagree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Agree

Reduction of gender based violence: Disagree

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: 1. Анализ количества СД4, с целью определения показаний к лечению 2. Проведение АРВТ 3. Медико-социальное, психологическое консультирование и сопровождение с участием МДК 4. Наблюдение за проведением АРВТ в учреждениях первичного звена 5. Проведение ПЦР, с целью наблюдения за эффективностью АРВТ 6. Лечение и профилактика оппортунистических заболеваний

Briefly identify how HIV treatment, care and support services are being scaled-up?: 1. Подготовка кадров по оказанию услуг по лечению, уходу и поддержке; 2. Выделение штатов для психологов; 3. Организация мультидисциплинарных команд, оказывающих услуги по медико-социальному, психологическому консультирование и сопровождению с активным участием ННО; 4. Выделение дополнительных средств из государственного бюджета на закупку АРВТ; 5. Интегрирование услуг по лечению, уходу и поддержке в первичное звено здравоохранения.

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**: Agree

**Early infant diagnosis**: Strongly agree

**Economic support**: Agree

**Family based care and support**: Disagree

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

**HIV testing and counselling for people with TB**: Strongly agree

**HIV treatment services in the workplace or treatment referral systems through the workplace**: Strongly agree

**Nutritional care**: Agree

**Paediatric AIDS treatment**: Strongly agree

**Palliative care for children and adults**: Disagree

**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**: Agree

**TB screening for people living with HIV**: Agree

**Treatment of common HIV-related infections**: Agree

**Other [write in]**:

---

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

Please clarify which social and economic support is provided:

3. Does the country have a policy or strategy for developing/using generic medications or parallel importing of medications for HIV?: Yes
4. Does the country have access to regional procurement and supply management mechanisms for critical commodities, such as antiretroviral therapy medications, condoms, and substitution medications?: Yes

IF YES, for which commodities?: препараты для лечения оппортунистических заболеваний и АРВТ

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?: 7

Since 2011, what have been key achievements in this area?: Выделение финансовых средств из бюджета на закупку АРВТ на сумму 1,8 млн. долл. США; Внедрение адаптированных протоколов ВОЗ по лечению и профилактике 2012 года; Создание МДК по уходу и социально-психологической поддержке в каждой СПИД сервисной организации;

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?: Yes

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:


1.2. IF YES, have key partners aligned and harmonized their M&E requirements (including indicators) 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: Yes

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: No

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?: No

In the National HIV Commission (or equivalent?)?: Yes

Elsewhere?: No

If elsewhere, please specify:

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

<table>
<thead>
<tr>
<th>POSITION [write in position titles]</th>
<th>Fulltime or Part-time?</th>
<th>Since when?</th>
</tr>
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<tbody>
<tr>
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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:

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?: Yes

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

IF YES, briefly describe the national database and who manages it.: В стране имеется отдел планирования, анализа, реализации и координации при МЭС, которая проводит сбор, обобщение и анализ данных в области противодействия эпидемии ВИЧ.

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)?: республиканском и областном уровне

7.1. 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

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?: Yes

IF YES, for which population groups?: ПИН; МСМ; ЛПИУВ; мигранты; беременные; общее население

Briefly explain how this information is used: Информация используется в оценке текущих мероприятий и ситуации, прогнозировании и планировании предстоящих задач.

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

IF YES, at which geographical levels (provincial, district, other)?: Вилояты, города, районы

Briefly explain how this information is used: Анализ, оценка, координация и планирование текущих и будущих программ

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?: 60
At subnational level?: Yes

IF YES, what was the number trained: 440

At service delivery level including civil society?: Yes

IF YES, how many?: 260

10.1. Were other M&E capacity-building activities conducted other than training?: Yes

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?: 7

Since 2011, what have been key achievements in this area?: Внедрение программы MИС, подготовка дополнительных кадров, разработано и утверждено руководство по МиО Стратегической программы.

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 contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?: 4

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)?: 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?: 3

   b. The national HIV budget?: 3

   c. The national HIV reports?: 3

Comments and examples: СПИД-сервисные ННО функционируют на средства Глобального фонда

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?: 2

   b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?: 3

   c. Participate in using data for decision-making?: 2
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)?: 3

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?: 3

b. Adequate technical support to implement its HIV activities?: 3

Comments and examples: грант Глобального фонда, рассчитанный по показателям 2008 г.

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: >75%

Men who have sex with men: 25-50%

People who inject drugs: >75%

Sex workers: >75%

Transgender people: <25%

Palliative care: <25%

Testing and Counselling: >75%

Know your Rights/ Legal services: 51–75%

Reduction of Stigma and Discrimination: 51–75%

Clinical services (ART/OI): <25%

Home-based care: <25%

Programmes for OVC: <25%

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?: 7

Since 2011, what have been key achievements in this area?:
What challenges remain in this area: Участие ННО в грантовых программах, особенно ГФ ежегодно пересматриваются и утверждаются на республиканском уровне Кабинета Министров. Этот процесс замедляет реализацию календарного плана работ. В стране не поддержано меценатство со стороны крупного бизнеса. Нет нац доноров для социальных программ в области ВИЧ/СПИД.

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: ННО и ЛЖВ – члены МЭС и члены рабочих групп при разработки Стратегической программы и нац проектов.

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: Yes

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: Yes

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 contents of these laws: конституция Республики Узбекистан.
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?: Yes

2.1. IF YES, for which sub-populations?

**KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:**

- **People living with HIV:** No
- **Men who have sex with men:** Yes
- **Migrants/mobile populations:** No
- **Orphans and other vulnerable children:** No
- **People with disabilities:** No
- **People who inject drugs:** Yes
- **Prison inmates:** Yes
- **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: Существует Ст уголовного кодекса за мужеложество;

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

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?: No

IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:
5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, key populations and other vulnerable populations?: No

IF YES, briefly describe this mechanism: В Конституции Узбекистана и в законе о ВИЧ указаны защита от дискриминации.

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?: Приоритет отдается детям, живущим с ВИЧ в отношении АРВТ и Уход и поддержка в связи с ВИЧ

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: Стратегическая программа по противодействию ВИЧ 2013-2017

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:
Программы Снижения Вреда для ПИПН; Дружественные кабинеты для ЛПИУВ

9. Does the country have a policy or law prohibiting HIV screening for general employment purposes (recruitment, assignment/relocation, appointment, promotion, termination)?: No

IF YES, briefly describe the content of the policy or law:

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: Yes

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)?: No

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?: Yes

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: Yes

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?: 3

Since 2011, what have been key achievements in this area:
What challenges remain in this area: ЛЖВ в большинстве своем скрывают свой ВИЧ+ статус среди родственников, в махалле (сообществе) от соседей и на рабочем месте. При приеме на работу на большинство профессий указанных в специальном списке профессий требуют прохождения теста на ВИЧ.

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?: 5

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?: Оценка ДЭН. При составлении Стратегической Программы

IF YES, what are these specific needs?: Удержание эпидемии на концентрированном уровне. Профилактика ВИЧ среди уязвимых групп населения: ПИН, МСМ, ЛПУВ и трудовых мигрантов

1.1 To what extent has HIV prevention been implemented?

The majority of people in need have access to:

Blood safety: Agree

Condom promotion: Disagree

Harm reduction for people who inject drugs: Strongly agree

HIV prevention for out-of-school young people:

HIV prevention in the workplace: Strongly agree

HIV testing and counseling: Strongly agree

IEC on risk reduction: Agree

IEC on stigma and discrimination reduction: Disagree

Prevention of mother-to-child transmission of HIV: Agree

Prevention for people living with HIV: Agree

Reproductive health services including sexually transmitted infections prevention and treatment: Agree

Risk reduction for intimate partners of key populations: Disagree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Agree
School-based HIV education for young people: Agree

Universal precautions in health care settings: Agree

Other [write in]:

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?: 6

Since 2011, what have been key achievements in this area: Стратегическая программа 2013-2017 гг.

What challenges remain in this area: Крупный бизнес не вовлечен в финансирование профилактических программ и программ лечения. ЛЖВ не вовлечены в систему мониторинга проектов и программ.

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: В 2013 принят Нац протокол по лечению для взрослых, подростков, детей. Установлены показатели для начала АРВТ, в том числе СД: 350 кл/мл. Есть стандарты назначения АРВТ и лечения. Началась работа по протоколам ВИЧ/ТБ.

Briefly identify how HIV treatment, care and support services are being scaled-up: В 2012 г около 6000 ЛЖВ на АРВТ, в 2013 г – 8000 ЛЖВ на АРВТ. Отсутствуют устойчивые программы психо-социальной помощи и поддержки ЛЖВ, кроме гранта от Глобального фонда. В стране не приняты стандарты психо-социальной помощи для ЛЖВ.

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: Agree
ART for TB patients: Agree
Cotrimoxazole prophylaxis in people living with HIV: Agree
Early infant diagnosis: Agree
HIV care and support in the workplace (including alternative working arrangements): Agree
HIV testing and counselling for people with TB: Agree
HIV treatment services in the workplace or treatment referral systems through the workplace: Agree
Nutritional care: Disagree
Paediatric AIDS treatment: Agree
Post-delivery ART provision to women: Agree
Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault): N/A

Post-exposure prophylaxis for occupational exposures to HIV: Agree

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

Sexually transmitted infection management: Agree

TB infection control in HIV treatment and care facilities: Agree

TB preventive therapy for people living with HIV: Agree

TB screening for people living with HIV: Agree

Treatment of common HIV-related infections: N/A

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?: 6

Since 2011, what have been key achievements in this area: Грант глобального фонда предусмотрел суб-грантов для программ психо-социальная помощь и поддержка ЛЖВ.

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?: No

2.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: No

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: На АРВТ взяли 8000 ЛЖВ; практически все дети – имеют доступ к АРВТ. хорошо работают программы ППМР; для ВИЧ+ детей есть пособия до 18 лет.

What challenges remain in this area: Обеспечение Заменителей грудного молока для ВИЧ+ женщин. Отсутствуют методы искусственного оплодотворения для дискордантных пар.