NCPI Header

is indicator/topic relevant?: Yes
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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: Se convoco a una reunión al representantes del Sector Gubernamental y de Organizaciones de Sociedad Civil, en donde se realiza una breve reseña del Informe GARP e ICPN, se presenta el formulario explicandose su contenido e importancia, y posteriormente se pidio a cada uno que procediera a completar sus cuestionarios individualmente por sectores; semanas despues se les convoco para la presentación de y validación de la información recolectada.

Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions: Se procedió a exponer los motivos de las diferencias y llegar a un acuerdo común, para lo cual no hubieron diferencias.

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: 2011-2015

   IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.: Abordaje intersectorial y transversal del VIH como componente de la atención integral. Inclusión de población de mayor alto riesgo. Reformas legales para la población LGBTI. Mayor participación de Sociedad Civil. Priorización de indicadores a dar seguimiento.

   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? Ministerio de Salud, Ministerio de Educación, Ministerio de Trabajo, Procuraduría Para La Defensa de los Derechos Humanos, Instituto Salvadoreño del Seguro Social, Policía Nacional Civil, Ministerio de Justicia y Seguridad Pública, Comando de Sanidad Militar

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: Yes

   Health:

   Included in Strategy: Yes
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:**

- **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: No
    - Earmarked Budget: No
  - **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:** Instituto Salvadoreño del Seguro Social (ISSS)
    - Included in Strategy: Yes
    - Earmarked Budget: Yes

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?: Presupuesto General de Salud y financiamiento de Organismo Internacionales de Cooperación.
Discordant couples: No

Elderly persons: No

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: No

People with disabilities: Yes

People who inject drugs: No

Sex workers: Yes

Transgender people: Yes

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations: Yes

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: 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: Yes

People who inject drugs: No

Prison inmates: Yes

Sex workers: Yes

Transgender people: Yes

Women and girls: Yes

Young women/young men: Yes

Other specific key populations/vulnerable subpopulations [write in]: Embarazadas.

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.: Se realizo una amplia consulta en donde se solicito que las diferentes organizaciones de la Sociedad Civil opinaran y propusieran cual seria la mejor forma de afrontar la epidemia de VIH en el país, además estas Organizaciones de Sociedad Civil formaron parte del Comite Coordinador para la elaboracion del Plan Estrategico Nacional Multisectorial.

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: Yes
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): No
Other [write in]:

: 

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: Se esta en el proceso de fortalecer la cadena de suministros para garantizar que se cuenta oportunamente con los insumos para la atención de VIH, tanto en infraestructura como el capacidades de los recursos humanos.

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: Few

e) ART and Tuberculosis: Few

f) ART and general outpatient care: Many

g) ART and chronic Non-Communicable Diseases: Few

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: Abordaje intersectorial y trabajo con los poblaciones de mayor riesgo. Desarrollo de abordaje en salud diferenciado (Clínicas VICITS). Disminución progresiva de casos de VIH. Mejoramiento del Monitoreo y Evaluación. Especialización del Recurso Humano.


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: Ministra de Salud, participa activamente en temas y eventos nacionales e internacionales reafirmando la posición del país en favor de la prevención y trabajo intersectorial en VIH, como ha sido el caso para el apoyo y gestión para la propuesta del Fondo Mundial. Vice-Ministro de Educación se comprometió a mantener la temática de VIH.
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?: Dra. Maria Isabel Rodriguez, Ministra de Salud.

Have a defined membership?: Yes

IF YES, how many members?: 13

Include civil society representatives?: Yes

IF YES, how many?: 4

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: Funcionamiento de CONASIDA y una mejor participación de la Empresa Privada. Revisión de la nueva Ley de VIH. Firma del Convenio con Fondo Mundial bajo la Nueva Modalidad de Financiamiento (NMF). Proceso de actualización de la nueva Guía de Atención. Políticas de VIH en el sector privado.

What challenges remain in this area: Aumentar la participación y la donación de fondos privados nacionales que contribuyan a la prevención del VH. Garantizar la sostenibilidad de la respuesta.

4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?: 1

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: No

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: Se coordino en la elaboración de la Política de Salud Sexual y Reproductiva. Ley LEPINA. Se trabaja participativamente la Ley de VIH.

Name and describe any inconsistencies that remain between any policies/laws and the National AIDS Control policies: No se incluye a las personas con discapacidad.

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: Avance en la presentación del Anteproyecto de Ley de VIH. Institucionalización de la CONASIDA. Creación del Decreto 56. Creación de nuevas unidades de Diversidad Sexual. Reformas a la Ley de Servicio Civil y la Carrera Municipal.

What challenges remain in this area: Aprobación de la nueva Ley de VIH. Incluir al sector de personas discapacitadas.

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: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: No

Prison inmates: Yes

Sex workers: Yes

Transgender people: Yes

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**: El artículo 3 de la Constitución de la República, "Todas las personas son iguales ante la Ley. Para el goce de los derechos civiles no podrán establecerse restricciones que se basen en diferencias de nacionalidad, raza, sexo o religión"

**Briefly explain what mechanisms are in place to ensure these laws are implemented**: Secretaría de Inclusión Social. Unidad Técnica Ejecutiva del Sector Justicia (UTE) trabaja en la difusión de las leyes. Instituto Salvadoreño Para El Desarrollo de la Mujer (ISDEMU) Consejo Nacional de la Niñez y de la Adolescencia (CONNA) Procuraduría para la Defensa de los Derechos Humanos (PDDH)

**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*: 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?: Yes

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

2.1. Is HIV education part of the curriculum in:

*Primary schools*: Yes

*Secondary schools*: Yes

*Teacher training*: Yes
2.2. Does the strategy include

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?: No

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: Lineamientos técnicos para el abordaje de la población LGBT, que contiene abordaje diferencial para las poblaciones de mayor riesgo. Decreto 56: disposición para evitar toda forma de discriminación en la administración publica por razones de identidad sexual.

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, Vulnerability reduction (e.g. income generation)

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, Vulnerability reduction (e.g. income generation)

Customers of sex workers:

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]:

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?: Nuevos programas de educación. Involucramiento de todos los actores. Difusión de campañas de prevención. Avances en prevención en Clínicas VICITS. Definición de políticas para IEC y prevención.

What challenges remain in this area?: Revisión del contenido educativo de los espacios publicitarios. Disponibilidad de información para usuarios con discapacidad. Prevención secundaria en personas con VIH.

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

IF YES, how were these specific needs determined?: Mediante la discusión y abordaje intersectorial. Por medio de estudios de investigacion especifico como la encuesta centroamericana de vigilancia de comportamientos y línea basal de clínicas de atención VICITS. Análisis de estudios a través de la base de estudios y referencias de ASAP.
IF YES, what are these specific needs?: Coordinación con otros actores más alla del Sector Salud.

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: 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: Disagree

HIV prevention in the workplace: Strongly agree

HIV testing and counseling: 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: Agree

Treatment as prevention: 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: Atención para la prevención de la transmisión materno-infantil. Privados de libertad. Población LGBT Eliminación del trato discriminatorio. Terapia antirretroviral, acceso a pruebas y consejería.

Briefly identify how HIV treatment, care and support services are being scaled-up?: Clínicas VICITS. Atención a personas viviendo con VIH en 20 de los 32 hospitales del país.

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: Strongly agree
- Family based care and support: Agree
- HIV care and support in the workplace (including alternative working arrangements): Agree
- HIV testing and counselling for people with TB: Strongly agree
- HIV treatment services in the workplace or treatment referral systems through the workplace: Agree
- Nutritional care: Agree
- Paediatric AIDS treatment: Strongly agree
- Palliative care for children and adults: Agree
- Post-delivery ART provision to women: Strongly agree
- Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault): Strongly agree
- Post-exposure prophylaxis for occupational exposures to HIV: Strongly agree
- Psychosocial support for people living with HIV and their families: Agree
- Sexually transmitted infection management: Strongly agree
- TB infection control in HIV treatment and care facilities: Strongly agree
- TB preventive therapy for people living with HIV: Strongly agree
TB screening for people living with HIV: Strongly agree

Treatment of common HIV-related infections: Strongly agree

Other [write in]:

2. Does the government have a policy or strategy in place to provide social and economic support to people infected/affected by HIV? No

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? Fondo Estratégico de OPS para la adquisición de antirretrovirales y pruebas de laboratorio. A través de PNUD para la adquisición de antirretrovirales y pruebas de laboratorio.

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: Apertura de 2 clínicas más de atención a personas con VIH. Implementación de 3a. línea de tratamiento antirretroviral.

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? No

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? 3

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

What challenges remain in this area: Estrategias de atención y protección social. Falta presupuesto específico para la atención de huérfanos.

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: 2011-2015
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: Yes

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?: Yes

3.1. IF YES, what percentage of the total HIV programme funding is budgeted for M&E activities?: 8

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)?: 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?
### 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:** Sub-Comisión Nacional de Monitoreo y Evaluación, es la Unidad responsable de coordinar el flujo de información entre los diferentes asociadas en la respuesta nacional. La generación del informe nacional sobre el estado de situación del VIH en El Salvador en cumplimiento del Plan Nacional de Monitoreo y Evaluación.

**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:** Se gestiona desde el Ministerio de Salud en la Dirección de Vigilancia Sanitaria.

**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:** No

**IF YES, at what level(s)**

#### 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)**

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

**IF YES, for which population groups:** Hombres que tienen sexo con hombres, mujeres trabajadoras sexuales y población transgénero. Hombres y mujeres viviendo con VIH. Niñez y adolescencia viviendo con VIH.

**Briefly explain how this information is used:** Para la toma de decisiones, como por ejemplo la implementación de las Clínicas VICITS. El desarrollo de la Estrategia Nacional de Adherencia.
(c) Is coverage monitored by geographical area?: Yes

IF YES, at which geographical levels (provincial, district, other)?: Departamentos.

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: Gestión de fondos para la atención del VIH, como la aprobación del proyecto de Fondo Mundial bajo la Nueva Modalidad de Financiamiento (NMF).

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

At national level?: Yes

IF YES, what was the number trained?: 180

At subnational level?: No

IF YES, what was the number trained:

At service delivery level including civil society?: Yes

IF YES, how many?: 20

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

IF YES, describe what types of activities: Talleres de análisis de información y formación en economía de la salud con enfasis en VIH.

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?: 9

Since 2011, what have been key achievements in this area: Información actualizada y generación de informes anuales. Consulta en línea del estado actual de los pacientes al momento de la atención para su seguimiento y evaluación. Fortalecimiento de las capacidades de recursos humanos multidisciplinarios.

What challenges remain in this area:

B.1 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: Por medio de las reuniones de Sociedad Civil con el Programa Nacional de ITS/VIH/Sida y a través de la Red Integral de VIH. Es a través de la Sociedad Civil que el tema del VIH ha logrado liderazgo, así como con la denuncia los antirretrovirales y CD4 se mantiene con abastecimiento. Participación en la CONASIDA, en la elaboración del Plan Estratégico Nacional Multisectorial de la Respuesta al VIH-Sida e ITS 2011-2015.

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: La Sociedad Civil tuvo representación en el Comité Multisectorial para la elaboración y Costeo del PENM.

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?: 4

   b. The national HIV budget?: 3

   c. The national HIV reports?: 4

Comments and examples: La participación de Sociedad Civil se evidencia mediante la Medición del Gasto en Sida-MEGAS, en donde se consigna todo el aporte que se brinda a la respuesta nacional al VIH.

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: Se hacen esfuerzos para la participación de las organizaciones de sociedad civil, sin embargo aún se tiene que motivar para que el esfuerzo sea constante. Participación en la Sub-Comisión de Monitoreo y Evaluación.

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: En el MCP se eligen representantes de poblaciones de hombres que tienen sexo con hombres, población transgenero y trabajadoras sexuales como actores miembros; además de Organizaciones Basadas en la Fe.

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?: 4
Comments and examples: Las organizaciones que brindan soporte técnico son muchas, sin embargo los logros de financiamiento no son iguales, por lo que se debe fortalecer a las organizaciones de sociedad civil para lograr obtener fondos. Mayor avance técnico en el país en comparación con el resto del área centroamericana. Reconocimiento financiero por ejecución presupuestaria por el Fondo Mundial. Los proceso se limitan a los Proyectos de Fondo Mundial de acuerdo a lineamientos del Receptor Principal.

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: 25-50%

People who inject drugs:

Sex workers: 25-50%

Transgender people: 25-50%

Palliative care: <25%

Testing and Counselling: 51–75%

Know your Rights/ Legal services: <25%

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?: 9

Since 2011, what have been key achievements in this area: Participación ampliada a poblaciones clave. Información o comunicación más efectiva. Incremento del trabajo conjunto. Hay representación de la diversidad sexual en el Mecanismo Coordinador de País, ya que antes se asistía únicamente por Sociedad Civil y ahora se tiene un espacio. Mayor empoderamiento de sociedad civil, mayor inclusión en mecanismos de toma de decisiones como MCP. Amplia participación en la formulación de la propuesta para Fondo Mundial.

What challenges remain in this area: Involucrar más al sector de juventudes. Coordinación entre organizaciones de sociedad civil. Sociedad Civil más empoderada para enfrentar situaciones estratégicas de la respuesta nacional. Incremento en la capacidad técnica o especialización de los/las representantes de la Sociedad Civil. Mayor compromiso en los liderazgos o nuevos líderes(formación de nuevos líderes.) Involucrar en los espacios de decisión a organizaciones de personas con discapacidad y organizaciones de pacientes con enfermedades crónicas no transmisibles.

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:** Apertura de espacios como Asamblea Legislativa, Ministerios para presentación y aprobación de propuestas. Subsidios a organizaciones de y para personas con VIH. Reuniones periódicas con Sociedad Civil y el Programa Nacional de ITS/VIH/Sida. Reuniones del MCP. Participación de convocatorias para la ejecución de presupuesto de Fondo Mundial. Contratación de mujeres trans en Ciudad Mujer. Contratación de HSH y mujeres trans en Secretaría de Diversidad Sexual Participación de personas con VIH en la elaboración de la Nueva Ley de VIH.

**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: Yes
- Migrants/mobile populations: Yes
- Orphans and other vulnerable children: Yes
- People with disabilities: Yes
- People who inject drugs: No
- Prison inmates: Yes
- Sex workers: Yes
- Transgender people: Yes
- 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 contents of these laws:** Articulo 3 de la constitución. Codigo de Trabajo.

**Briefly explain what mechanisms are in place to ensure that these laws are implemented:** Ministerio de Trabajo Procuraduría General de la República. Procuraduría para la Defensa de los Derechos Humanos
Briefly comment on the degree to which they are currently implemented: Se hace poco por monitorear el grado de cumplimiento de las Leyes, además de poca difusión de los mecanismos de denuncia.

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.: Guía Clínica de la Profilaxis Post-Exposición. Ley especial para una vida libre de violencia. Política de Salud Sexual y Reproductiva. Política Nacional de Mujeres.

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: En el Plan Estratégico Nacional Multisectorial es un objetivo estratégico Derechos Humanos. Sección de VIH en la Procuraduría Para La Defensa de los Derechos Humanos.
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?: Yes

**IF YES, briefly describe this mechanism:** Sistema Informatico Integrado de Gestión de la Procuraduría Para La Defensa de los Derechos Humanos. Servicios de organizaciones de la sociedad civil: REDCA +; Asociación Atlacatl mediante el registro y toma de denuncias; archivo de denuncias de Asociación Vida Nueva.

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?: Poblaciones de más alto riesgo (HSH, TS y TRANS) y personas viviendo con VIH; para todos los servicios.

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:** Dentro de la Ley y Reglamento para la Prevención y control de la Infección provocada por el virus de inmunodeficiencia humana VIH todas las personas están incluidas. Clínicas VICITS

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: Los lineamientos para atención en salud para población LGBT. Clínicas VICITS

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: Código de Trabajo. Ley de VIH

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: Departamento de VIH de la Procuraduría para la Defensa de los Derechos Humanos. IDHUCA - Instituto de Derechos Humanos de la UCA FESPAD

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)?: Yes

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?: 8
Since 2011, what have been key achievements in this area?: Integración del tema en la Reforma de Salud. Institucionalización del Departamento de VIH de Procuraduría Para la Defensa de los Derechos Humanos. Elaboracion del Anteproyecto de Ley de VIH.

What challenges remain in this area?: La información se centra en la Capital. La justa aplicacion y monitoreo de las leyes para su conocimiento y aplicacion. Homologación de de instrumento de denuncia única. Aglizacion en la resolución de las denuncias, No hay un informe de país en materia de derechos humanos y VIH.

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?: 8

Since 2011, what have been key achievements in this area?: Reforma a Ley del Servicio Civil y Carrera Municipal, para prohibir la discriminación de VIH en los servidores públicos.

What challenges remain in this area?: Crear programas específicos para la protección de los Derechos Humanos.

B. IV Prevention

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

IF YES, how were these specific needs determined?: Por medio del Plan Estratégico Nacional Multisectorial. Consultas con Organizaciones de Sociedad Civil e investigaciones como la Calidad de los Servicios.

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: Disagree

HIV prevention in the workplace: Agree

HIV testing and counseling: 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: Agree

Risk reduction for intimate partners of key populations: Agree
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?: 8

Since 2011, what have been key achievements in this area: Reducción de la prevalencia. Mayor conocimiento de la Sociedad Civil. Ampliación de las poblaciones meta. Incorporación más amplia de las temáticas en curriculas escolares. Se mantienen campañas de prevención.

What challenges remain in this area: Asumir los costos de la prevención por el país sin fondos externos.

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: Mantener la terapia antirretroviral. Garantizar el presupuesto en VIH Atención a mujeres embarazadas.

Briefly identify how HIV treatment, care and support services are being scaled-up: El tratamiento antirretroviral es accesible y gratuito. La atención es gratuita y se está pendiente de otros chequeos como CD4 y Carga Viral.

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

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

HIV testing and counselling for people with TB: Strongly agree

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

Nutritional care: 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): Agree

Post-exposure prophylaxis for occupational exposures to HIV: Agree

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

Sexually transmitted infection management: Strongly agree

TB infection control in HIV treatment and care facilities: Strongly agree

TB preventive therapy for people living with HIV: Agree

TB screening for people living with HIV: Strongly agree

Treatment of common HIV-related infections: 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: Más inclusión. Mayor cobertura. Menos muertes por VIH. Mejora en la atención.

What challenges remain in this area: Mejor seguimiento a la adherencia.

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?: 7

Since 2011, what have been key achievements in this area: Mejor promoción de la prueba de VIH. Más personas con tratamiento. Más personas sensibilizadas. No ha habido desabastecimiento de medicamentos.

What challenges remain in this area: Brechas en acceso y educación. Asegurar el abastecimiento de reactivos para evitar los tiempos en que no se cuenta con pruebas de Carga Viral y CD4, ya que por un tiempo hubo restricciones pero estaba disponible para mujeres embarazadas.