Palau Report NCPI

NCPI Header

COUNTRY

Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:
Candace Koshiba
Postal address:
P O Box 6027 Koror, Palau 96940
Telephone:
(680) 488-0930/8517
Fax:
(680)488-4800
E-mail:
ckoshiba@gmail.com

Describe the process used for NCPI data gathering and validation:
First, a meeting was held to introduce the report, all the NCPI data-gathering process and how to compile and complete it. Second, the NCPI Surveys were distributed to all the key stakeholders for review and gather data. Lastly, a final workshop/meeting was held to review results or the NCPI responses and validate the NCPI.

Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:
Final NCPI meeting/workshop was held where key stakeholders presented, discussed, and validate the NCPI responses. Important points, information, and data were discussed and agreed on. On the workshop we never had big disagreements or such thing. We had to make sure to carefully and neatly explain/interpret all things that were discussed so that all people could discuss and agree on them before filling and submitting the NCPI.It also all because good teamwork and coordination.

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]

<table>
<thead>
<tr>
<th>Organization</th>
<th>Names/Positions</th>
<th>A.I</th>
<th>A.II</th>
<th>A.III</th>
<th>A.IV</th>
<th>A.V</th>
<th>A.VI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Judicial Branch</td>
<td>Persilla Rengiil / Probation Officer</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Mechesil Belau</td>
<td>Kathy Kesolei/ Senator, Representative of</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Mechesil Belau</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Olbiil er a Kelulau</td>
<td>Marie Nabeyama/ Senate Clerk</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Palau Bar Association</td>
<td>J. Uduch Sengebau Senior/ Lawyer</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Council of Chiefs</td>
<td>Dilmei Olkeriil /Executive Director</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Office of the President</td>
<td>Theodore Borja/Special Assistant</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Ministry of Community and</td>
<td>Inez remengesau/ Job Corps Coordinator</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Cultural Affairs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Governor’s Association</td>
<td>Aholiba Albert/ Administrative Secretary</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Ministry of Education</td>
<td>Deborah Nagata/Health Program Specialist</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Organization</th>
<th>Names/Positions</th>
<th>B.I</th>
<th>B.II</th>
<th>B.III</th>
<th>B.IV</th>
<th>B.V</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red Cross Society</td>
<td>Sancy Asanuma/ Chairperson of Board of Directors</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

A - I. STRATEGIC PLAN

1. Has the country developed a national multisectoral strategy to respond to HIV?
(Multisectoral strategies should include, but are not limited to, those developed by Ministries such as the ones listed under 1.2):

Yes

IF YES, what was the period covered:

2009-2013

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one.

The 2000-2005 NSP aimed to address specific vulnerabilities in the Palau context: an over-reliance on external funding; high rates of other STIs; increasing travel and migration, especially to areas with existing high rates of HIV; the presence of the full range of risk behaviors; stigma and discrimination, often associated with denial and misinformation – including a refusal to take HIV seriously and difficulties in discussing HIV issues. The Strategic Plan for 2009-2013 aims to broadly outline the key focus areas and strategies to be implemented by the HIV and STI Program and their partners across the health and other sectors in Palau. It provides the broad overview of the key issues, setting the scene and rationale for the choice of strategy and key actions to move from the current to the desired situation. Specific actions, resources and roles and responsibilities are to be identified in the Implementation Plan on an annual basis.

1.1 Which government ministries or agencies

Name of government ministries or agencies [write in]:

Ministry of Health

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

<table>
<thead>
<tr>
<th>SECTORS</th>
<th>Included in Strategy</th>
<th>Earmarked Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Other [write in]:

Business Community

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:

Ministry of Health is the Leading Agency that funds all HIV-specific activities so if there is no funding, there is no activity that can be implemented.

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

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:

No

Sex workers:

Yes

Transgendered people:

No

Women and girls:

Yes

Young women/young men:

Yes

Other specific vulnerable subpopulations:

No

Prisons:

Yes
Schools: Yes
Workplace: Yes
Addressing stigma and discrimination: Yes
Gender empowerment and/or gender equality: Yes
HIV and poverty: Yes
Human rights protection: Yes
Involvement of people living with HIV: Yes

IF NO, explain how key populations were identified?:

1.4. What are the identified key populations and vulnerable groups for HIV programmes in the country [write in]?:
- Heterosexual population – with multiple sex partners – and also bisexual
- Men who have sex with men – although there is not enough known about this group because the subject is taboo.
- Youth
- Alcohol and drug users
- Non-resident workers: seafarers and sex-workers.

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

1.6. Does the multisectoral strategy or operational plan include:
   a) Formal programme goals?: Yes
   b) Clear targets or milestones?: Yes
   c) Detailed costs for each programmatic area?: Yes
d) An indication of funding sources to support programme implementation?:
   Yes
e) A monitoring and evaluation framework?: Yes

1.7. Has the country ensured “full involvement and participation” of civil society in the development of the multisectoral strategy?:
Active involvement

IF ACTIVE INVOLVEMENT, briefly explain how this was organised:
The Palau National HIV and other STIs Strategic Plan 2009-2013 was developed in collaboration with representatives from Palau’s government, business, faith-based and community sectors at a workshop held in Koror between 30 October and 2 November 2007. Key stakeholders from a variety of sectors were informed about the HIV situation and response and engaged in developing the new plan. These included representatives from the Senate; PHASAG; Government of Palau Ministries/Departments of Youth, Health and Justice; the Chamber of Commerce and Palau Visitors Authority, the media; and other civil society and faith-based organizations. This group is considered the PNSP Working Group.

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

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

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

2.1. IF YES, is support for HIV integrated in the following specific development plans?
Common Country Assessment/UN Development Assistance Framework:
Yes
National Development Plan:
Yes
Poverty Reduction Strategy:
2.2. IF YES, are the following specific HIV-related areas included in one or more of the development plans?

- **HIV impact alleviation:**
  - 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 security or other schemes):**
  - Yes
- **Women’s economic empowerment (e.g. access to credit, access to land, training):**
  - Yes
- **Other [write in below]:**
  - -

3. Has the country evaluated the impact of HIV on its socioeconomic development for planning purposes?:
No

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

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

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

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

### Estimates of Current and Future Needs

5.3. 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?:
*‘Ladies in the Entertainment Business, Youth Empowerment Project, Out-of-school Youth, and Pregnant Women*

**Briefly explain how this information is used:**
Monitoring population group helps us gather information and relevant data that are important to our program

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

IF YES, at which geographical levels (provincial, district, other)?:
It is not considered as a province or a district but treated as one whole area or in other words, the whole Republic.

**Briefly explain how this information is used:**
Palau is not geographically described with province or districts but with states and us considered to be one whole area due to its small land size and population so it is easy to monitor the whole area.

5.4. Has the country developed a plan to strengthen health systems?:
Yes

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

**Developing and Implementation of Standard Operation Procedures (SOPs) for HIV Program**

6. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate strategy planning efforts in the HIV programmes in 2011?:
10

Since 2009, what have been key achievements in this area:
National Strategic Plan has been endorsed and being implemented

**What challenges remain in this area:**
We do not specify target groups on our National Strategic Plan. It is just generalized as Target Groups or Special Population
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 (For example, promised more resources to rectify identified weaknesses in the HIV response, spoke of HIV as a human rights issue in a major domestic/international forum, and such activities as visiting an HIV clinic, etc.): Yes

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership:

On World AIDS Day Activity on December 1, 2011, our Minister of Health Dr. Stevenson Kuarteri, and some Senators and Delegates spoke about HIV/AIDS in the Congress where there were a lot of participants and listeners on that Day. It was a successful Activity and it was the second time we have conducted such activity in the Palau National Congress.

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

2.1. If yes, does the national multisectoral HIV coordination body

   Have terms of reference?: Yes
   Have active government leadership and participation?: Yes
   Have an official chair person?: Yes
   If yes, what is his/her name and position title?: Santy Asanuma, Chairperson of Palau HIV/AIDS & STI Advisory Group and Palau Red Cross Society
   Have a defined membership?: Yes
   If yes, how many members?: 18
   Include civil society representatives?: Yes
   If yes, how many?: 1
   Include people living with HIV?: Yes
   If yes, how many?: 1
   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 interaction between government, civil society organizations, and the private sector for implementing HIV strategies/programmes?: Yes

If yes, briefly describe the main achievements:
The PHASAG which is composed of Government Officials, Civil Society and others are actively involved in the Program's Activities. Relationship between government and civil society has improved through increased collaboration and involvement in various boards and other organizations.

What challenges remain in this area: Cultural and Religion Issues 1

4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?: 10%

5. Capacity-building:
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?:
No
7. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the political support for the HIV programme in 2011?:
10
Since 2009, what have been key achievements in this area:
Members and Staff of Congress is now part member of the Palau HIV/AIDS and STI Advisory Group (PHASAG)
What challenges remain in this area:
Drafting and Passage of HIV Law

A - III. HUMAN RIGHTS

1.1 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:
Yes
Prison inmates:
Yes
Sex workers:
Yes
Transgendered people:
Yes
Women and girls:
Yes
Young women/young men:
Yes
Other specific vulnerable subpopulations [write in]:
-

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:
Yes
IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws:
Palau Constitution Section 5. Every person shall be equal under the law and shall be entitled to equal protection. The government shall take no action to discriminate against any person on the basis of sex, race, place of origin, language, religion or belief, social status or clan affiliation except for the preferential treatment of citizens, for the protection of minors, elderly, indigent, physically or mentally handicapped, and other similar groups, and in matters concerning intestate succession and domestic relations. No person shall be treated unfairly in legislative or executive investigations.

Briefly explain what mechanisms are in place to ensure these laws are implemented:
Ratified Convention: A Convention was held to Ratify the Laws.

Briefly comment on the degree to which they are currently implemented:
All laws are being enacted according to the dates (chronologically) they were being ratified.
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?.

<table>
<thead>
<tr>
<th>Subpopulation</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>People living with HIV</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men who have sex with men</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Migrants/mobile populations</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Orphans and other vulnerable children</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>People with disabilities</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>People who inject drugs</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Prison inmates</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Sex workers</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Transgendered people</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Women and girls</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Young women/young men</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Other specific vulnerable subpopulations</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Briefly describe the content of these laws, regulations or policies:
There is Law against same sex marriage and that it is not allowed in Palau. and Sex Workers or Prostitution is Illegal in Palau.

Briefly comment on how they pose barriers:
These population will not admit their behavior, because it is illegal (and also because of religion and traditional values) that these people admit to these behaviors.

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?:

<table>
<thead>
<tr>
<th>Key Message</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstain from injecting drugs</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Avoid commercial sex</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Avoid inter-generational sex</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Be faithful</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Be sexually abstinent</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Delay sexual debut</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Engage in safe(r) sex</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Fight against violence against women</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Greater acceptance and involvement of people living with HIV</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Greater involvement of men in reproductive health programmes</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Know your HIV status</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Males to get circumcised under medical supervision</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>
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: Yes
Other [write in below]: -

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

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

2.1. Is HIV education part of the curriculum in:
- Primary schools?: Yes
- Secondary schools?: Yes
- Teacher training?: Yes

2.2. Does the strategy include age-appropriate, gender-sensitive sexual and reproductive health elements?: Yes

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

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

Briefly describe the content of this policy or strategy:
HIV Program National Strategic Plan states: 5.1 Focus Area: Prevention Objective: To reduce the number of new infections of HIV and STI by promoting safer sexual behaviors and addressing vulnerabilities
Strategy 1: Provide BCC and education programs on HIV and STI transmission, at risk behaviors and safe sex practices to all people in Palau including vulnerable groups, leaders and the general population
Key Action Areas: □ BCC awareness and education on HIV and STIs, including the full range of protective responses from abstinence, monogamy and condoms education to all groups, and particularly youth
□ Use the Community action theatre and media sources to disseminate HIV & STI education and BCC □ Develop a community program utilizing prevention officers and education officers to reach youth and other vulnerable groups in the community [these include seafarers, tourists, sex-workers – both foreign ‘guest’ workers and locals, overseas students and government workers and other social groups] Strategy 3: Improve CTR services and increase access to all groups in the community.

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

<table>
<thead>
<tr>
<th>IDU</th>
<th>MSM</th>
<th>Sex workers</th>
<th>Customers of Sex Workers</th>
<th>Prison inmates</th>
<th>Other populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>-</td>
</tr>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>-</td>
</tr>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>-</td>
</tr>
<tr>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>-</td>
</tr>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>-</td>
</tr>
<tr>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>-</td>
</tr>
<tr>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>-</td>
</tr>
</tbody>
</table>

3.2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate policy efforts in support of HIV prevention in 2011?: 10

Since 2009, what have been key achievements in this area:
Condom Distribution/Promotion have increased in the Ladies in the Entertainment Business
What challenges remain in this area:
Religion and Cultural Issues

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

IF YES, how were these specific needs determined?:
Through Surveys, Second Generation Surveillance Survey, and Youth at Risk Survey

4.1. To what extent has HIV prevention been implemented?

<table>
<thead>
<tr>
<th>Blood safety:</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Condom promotion:</td>
<td>Agree</td>
</tr>
<tr>
<td>Harm reduction for people who inject drugs:</td>
<td>Agree</td>
</tr>
<tr>
<td>HIV prevention for out-of-school young people:</td>
<td>Agree</td>
</tr>
<tr>
<td>HIV prevention in the workplace:</td>
<td>Agree</td>
</tr>
<tr>
<td>HIV testing and counseling:</td>
<td>Agree</td>
</tr>
<tr>
<td>IEC on risk reduction:</td>
<td>Agree</td>
</tr>
<tr>
<td>IEC on stigma and discrimination reduction:</td>
<td>Agree</td>
</tr>
<tr>
<td>Prevention of mother-to-child transmission of HIV:</td>
<td>Agree</td>
</tr>
<tr>
<td>Prevention for people living with HIV:</td>
<td>Agree</td>
</tr>
<tr>
<td>Reproductive health services including sexually transmitted infections prevention and treatment:</td>
<td>Agree</td>
</tr>
<tr>
<td>Risk reduction for intimate partners of key populations:</td>
<td>Agree</td>
</tr>
<tr>
<td>Risk reduction for men who have sex with men:</td>
<td>Agree</td>
</tr>
<tr>
<td>Risk reduction for sex workers:</td>
<td>Agree</td>
</tr>
<tr>
<td>School-based HIV education for young people:</td>
<td>Agree</td>
</tr>
<tr>
<td>Universal precautions in health care settings:</td>
<td>Agree</td>
</tr>
<tr>
<td>Other[write in]:</td>
<td>-</td>
</tr>
</tbody>
</table>

5. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in implementation of HIV prevention programmes in 2011?:

10

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:
Antiretroviral Therapy and Counseling Services

Briefly identify how HIV treatment, care and support services are being scaled-up?:
monthly visits/check-ups with Doctor

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

<table>
<thead>
<tr>
<th>Antiretroviral therapy:</th>
<th>Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>ART for TB patients:</td>
<td>Agree</td>
</tr>
<tr>
<td>Cotrimoxazole prophylaxis in people living with HIV:</td>
<td>Agree</td>
</tr>
<tr>
<td>Early infant diagnosis:</td>
<td>Agree</td>
</tr>
<tr>
<td>HIV care and support in the workplace (including alternative working arrangements):</td>
<td></td>
</tr>
</tbody>
</table>
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:
Agree
Paediatric AIDS treatment:
Agree
Post-delivery ART provision to women:
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:
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:
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:
Palau National Strategic Plan 2009-2013: 5.2 Focus Area: Treatment care and support Objective: Improve and maintain a continuum of care that is comprehensive, high quality, accessible and affordable Strategy 1: Improve clinical care and services delivered through all government and private clinics to positive people and those affected by HIV across Palau Strategy 2: Provide appropriate medical home and social support for individuals and their families Strategy 3: Provide sex partner services
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?:
Global Fund for ART and UNFPA for Condoms and Commodities, and US Federal Grants for ART, Condoms and Commodities
5. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in the implementation of HIV treatment, care, and support programmes in 2011?:
10
Since 2009, what have been key achievements in this area:
Sustaining and New HIV Testing algorithm in place since January 2011 where screening and confirmatory tests are done locally.
What challenges remain in this area:
Support from the Community for the People Living With HIV
6. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other 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 2011?:
2
Since 2009, what have been key achievements in this area:
Formal Data not available for orphans/vulnerable children.
What challenges remain in this area:
A - VI. MONITORING AND EVALUATION

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

Briefly describe any challenges in development or implementation:
M&E Framework still on draft and needs to be approved

Briefly describe what the issues are:
Infrastructure and Funding for Supplies and Materials supporting M&E

2. Does the national Monitoring and Evaluation plan include?

<table>
<thead>
<tr>
<th>A data collection strategy:</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioural surveys:</td>
<td>Yes</td>
</tr>
<tr>
<td>Evaluation / research studies:</td>
<td>Yes</td>
</tr>
<tr>
<td>HIV Drug resistance surveillance:</td>
<td>Yes</td>
</tr>
<tr>
<td>HIV surveillance:</td>
<td>Yes</td>
</tr>
<tr>
<td>Routine programme monitoring:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

A data analysis strategy:
Yes

A data dissemination and use strategy:
Yes

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

Guidelines on tools for data collection:
Yes

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

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

Briefly describe any obstacles:
M&E Framework still on draft and needs to be approved

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

   In the Ministry of Health?:
   Yes

   In the National HIV Commission (or equivalent)?:
   No

   Elsewhere [write in]?:
   -

   Permanent Staff [Add as many as needed]

<table>
<thead>
<tr>
<th>POSITION [write in position titles in spaces below]</th>
<th>Fulltime</th>
<th>Part time</th>
<th>Since when?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitoring &amp; Evaluation Officer</td>
<td>1</td>
<td>-</td>
<td>2008</td>
</tr>
</tbody>
</table>

   Temporary Staff [Add as many as needed]

<table>
<thead>
<tr>
<th>POSITION [write in position titles in spaces below]</th>
<th>Fulltime</th>
<th>Part time</th>
<th>Since when?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant Monitoring &amp; Evaluation Officer</td>
<td>-</td>
<td>1</td>
<td>-</td>
</tr>
</tbody>
</table>

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:
Draft M&E Framework and M&E Plan specifies M&E Report & Data sharing system

What are the major challenges in this area:
M&E Support/Trainings

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?:
   "11"
IF YES, briefly describe the national database and who manages it:
Counseling Testing and Referral (CTR) Database. Monitoring & Evaluation Officer manages it.

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, but only some of the above

IF YES, but only some of the above, which aspects does it include?:
Content of HIV Services and Geographical coverage of HIV services

6.2. Is there a functional Health Information System?

<table>
<thead>
<tr>
<th>Level</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>National level:</td>
<td>Yes</td>
</tr>
<tr>
<td>Subnational level:</td>
<td>No</td>
</tr>
</tbody>
</table>

If YES, at what level(s):
National Level

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

8. How are M&E data used?

<table>
<thead>
<tr>
<th>Aspect</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program improvement?</td>
<td>Yes</td>
</tr>
<tr>
<td>In developing / revising the national HIV response?</td>
<td>Yes</td>
</tr>
<tr>
<td>For resource allocation?</td>
<td>Yes</td>
</tr>
<tr>
<td>Other [write in]:</td>
<td>-</td>
</tr>
</tbody>
</table>

Briefly provide specific examples of how M&E data are used, and the main challenges, if any:
The M&E Officer monitors and evaluates all HIV-related activities that helps develops the National AIDS Strategy.

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

<table>
<thead>
<tr>
<th>Level</th>
<th>Status</th>
<th>Number Trained</th>
</tr>
</thead>
<tbody>
<tr>
<td>National level:</td>
<td>Yes</td>
<td>2</td>
</tr>
<tr>
<td>Subnational level:</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Service delivery level including civil society:</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

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

IF YES, describe what types of activities:
National HIV Conference that was attended by the M&E Officer.

10. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the HIV-related monitoring and evaluation (M&E) in 2011?:
10

Since 2009, what have been key achievements in this area: Assistant M&E Officer was hired in 2011 to assist the M&E Officer.

What challenges remain in this area:
Need to reach more people regarding report dissemination.

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?:
5

Comments and examples:
The Palau National HIV and other STIs Strategic Plan 2009-2013 was developed in collaboration with representatives from Palau’s government, business, faith-based and community sectors. The goal of the Palau National HIV & other STIs Strategic Plan 2009-2013 is to reduce HIV and other STI transmission and minimize the impact of infections on individuals, families and community. The Plan reflects a vision of a future where the people access and use affordable and available services in prevention, care and support; people take action to protect themselves, while embracing people living with and affected by HIV; and there is strong leadership that mobilizes resources, aligns efforts, and promotes multi-sectoral partnerships where the people engage in those efforts.
HIV Positive people are involved. The Strategy is to be implemented in ways which demonstrate, respect and promote the Palauan culture, faith and moral values.

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)?

5

Comments and examples:
The Palau HIV, AIDS and STI Advisory Group [PHASAG] is multi-disciplinary group that serves as a policy making body for national HIV/AIDS/STI programs. It plays an important role in the implementation of HIV and STI related activities, carries an advocacy role, and fulfils a supportive role to the Ministry of health in efforts to prevent and surveillance of HIV/AIDS and STI in Palau.

3.

a. The national HIV strategy?:
5
b. The national HIV budget?:
2
c. The national HIV reports?:
5

Comments and examples:
Civil Society has provided HIV Prevention and Treatments services by engaging with the community by doing outreach activities such as Blood Donor Drive, Condom Promotion, Screening & Testing, and Awareness activities such as Radio Spots.

4.

a. Developing the national M&E plan?:
3
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?:
3

Comments and examples:
even though M&E Plan is still on a draft, the Program still manages to do M&E Activities and share data with relevant stakeholders, including civil society.

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

Comments and examples:
there is no such Organizations or Networks for People living with HIV in Palau, but there is a representative of the People Living with HIV in the PHASAG Group or the National AIDS Committee, which is the group that is actively involved in activities and finance planning of the HIV Program.

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:
the HIV Program Staffs do provide technical support to civil society to implement its HIV activities such as Blood Donor Drive and Condom Promotion.

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

People living with HIV:
<25%
Men who have sex with men:
<25%
People who inject drugs:
<25%
Sex workers:
<25%
Transgendered people:
<25%
Testing and Counselling:
Reduction of Stigma and Discrimination: 25-50%  
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 2011?: 5  
Since 2009, what have been key achievements in this area: there is a 99% work done in Prevention, Screening and Testing from the civil society that has also helped the HIV Program in reaching out to the community and Screen/Test other population.  
What challenges remain in this area: Encourage and seek creative ways to engage other NGOs such as the Faith Based Organization, to be part of the National Effort to prevent HIV and STIs.

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?: No

B - III. HUMAN RIGHTS  
1.1. People living with HIV:  
\[ \text{Yes} \]  
Men who have sex with men:  
\[ \text{Yes} \]  
Migrants/mobile populations:  
\[ \text{Yes} \]  
Orphans and other vulnerable children:  
\[ \text{Yes} \]  
People with disabilities:  
\[ \text{Yes} \]  
People who inject drugs:  
\[ \text{Yes} \]  
Prison inmates:  
\[ \text{Yes} \]  
Sex workers:  
\[ \text{Yes} \]  
Transgendered people:  
\[ \text{Yes} \]  
Women and girls:  
\[ \text{Yes} \]  
Young women/young men:  
\[ \text{Yes} \]  
Other specific vulnerable subpopulations [write in]:  
-  
1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:  
\[ \text{Yes} \]  
If YES to Question 1.1 or 1.2, briefly describe the contents of these laws:  
Palau Constitution Section 5: Section 5. Every person shall be equal under the law and shall be entitled to equal protection. The government shall take no action to discriminate against any person on the basis of sex, race, place of origin, language, religion or belief, social status or clan affiliation except for the preferential treatment of citizens, for the protection of minors, elderly, indigent, physically or mentally handicapped, and other similar groups, and in matters concerning intestate succession and domestic relations. No person shall be treated unfairly in legislative or executive investigations.  
Briefly explain what mechanisms are in place to ensure that these laws are implemented:  
Palau Constitutional Laws are in place and are strictly enforced  
Briefly comment on the degree to which they are currently implemented:
100% of time.

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?

   People living with HIV:
   -

   Men who have sex with men:
   -

   Migrants/mobile populations:
   -

   Orphans and other vulnerable children:
   -

   People with disabilities:
   -

   People who inject drugs:
   -

   Prison inmates:
   -

   Sex workers:
   -

   Transgendered people:
   -

   Women and girls:
   -

   Young women/young men:
   -

   Other specific vulnerable subpopulations [write in]:
   -

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

Briefly comment on how they pose barriers:
-

3. Does the country have a policy, law or regulation to reduce violence against women, including for example, victims of sexual assault or women living with HIV?:
   No

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

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

6. Does the country have a policy or strategy of free services for the following?

<table>
<thead>
<tr>
<th>Provided free-of-charge to all people in the country</th>
<th>Provided free-of-charge to some people in the country</th>
<th>Provided, but only at a cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Yes</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Yes</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

If applicable, which populations have been identified as priority, and for which services?:
Everyone has equal access. No Group has priority over another.

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:
5.2 Focus Area: Treatment care and support

Objective: Improve and maintain a continuum of care that is comprehensive, high quality, accessible and affordable

Strategy 1: Improve clinical care and services delivered through all government and private clinics to positive people and those affected by HIV across Palau.

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:

Palau National Strategic Plan: 5.2 Focus Area: Treatment care and support

Objective: Improve and maintain a continuum of care that is comprehensive, high quality, accessible and affordable

Key Action Area: Outreach services are developed and accessed by vulnerable populations.

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

No

10. Does the country have the following human rights monitoring and enforcement mechanisms?

- a. Existence of independent national institutions for the promotion and protection of human rights, including human rights commissions, law reform commissions, watchdogs, and ombudspersons which consider HIV-related issues within their work:

No

- b. Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts:

No

IF YES on any of the above questions, describe some examples:

-

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:

No

- b. Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV:

No

13. Are there programmes in place to reduce HIV-related stigma and discrimination?:

Yes

IF YES, what types of programmes?

- Programmes for health care workers:

Yes

- Programmes for the media:

Yes

- Programmes in the work place:

Yes

Other [write in]:

-

14. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2011?:

8

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

Stigma and Discrimination workshops has been done in the community to help inform the community about anti-stigma regulations.

What challenges remain in this area:

To specifically include Human Rights Policy in the National Strategic Plan.

15. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the effort to implement human rights related policies, laws and regulations in 2011?:

"16"
Since 2009, what have been key achievements in this area:
Regional Rights Team gave us Technical Assistance in drafting Human Right Law in regards to HIV/AIDS & STI.

What challenges remain in this area:
Funding and Support to Legislate the Human Right Law in regards to HIV/AIDS & STI.

B - IV. PREVENTION

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

IF YES, how were these specific needs determined?:
The purpose of Palau National HIV/AIDS Strategic Plan is to improve the capacity to diagnose, treat and care for positive people in Palau; reduce stigma and discrimination through embracing positive people and those affected by HIV; and promote individual responsibility and capacity to protect themselves through education and behavior change for those in the broader population as well as targeting specific vulnerable groups and at risk behaviors. On the Strategic Plan: Prevention Objective 1: To reduce the number of new infections of HIV and STI by promoting safer sexual behaviors and addressing vulnerabilities Strategy 2: Promote condom use and distribution to all vulnerable groups, particularly youth and mobile groups in the community [these include seafarers, tourists, sex-workers – both foreign ‘guest’ workers and locals, overseas students and government workers and other social groups] Strategy 3: Improve Counseling, Testing, and Referral services and increase access to all groups in the community. Strategy 4: Ensure safe blood Strategy 5: Establish and strengthen coordination network across programs and agencies involved in prevention Strategy 6: Improve access to services and management of STIs

1.1 To what extent has HIV prevention been implemented?

<table>
<thead>
<tr>
<th>Blood safety:</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Condom promotion:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Harm reduction for people who inject drugs:</td>
<td>N/A</td>
</tr>
<tr>
<td>HIV prevention for out-of-school young people:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>HIV prevention in the workplace:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>HIV testing and counseling:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>IEC on risk reduction:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>IEC on stigma and discrimination reduction:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Prevention of mother-to-child transmission of HIV:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Prevention for people living with HIV:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Reproductive health services including sexually transmitted infections prevention and treatment:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Risk reduction for intimate partners of key populations:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Risk reduction for men who have sex with men:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Risk reduction for sex workers:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>School-based HIV education for young people:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Universal precautions in health care settings:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Other [write in]:</td>
<td>-</td>
</tr>
</tbody>
</table>

2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in the implementation of HIV prevention programmes in 2011?:
9

Since 2009, what have been key achievements in this area:
Efforts and increased Collaboration between HIV Prevention Program and key stakeholders has improved over the years through Prevention Outreaches and Activities such as Condom Distribution and Screening and Testing

What challenges remain in this area:
Even though data shows that there is a high increase in Condom Use, Chlamydia Rate is high and increasing amongst the
B - V. TREATMENT, CARE AND SUPPORT

1. Has the country identified the essential elements of a comprehensive package of HIV and AIDS treatment, care and support services?:

Yes

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

Palau National Strategic Plan: 5.2 Focus Area: Treatment care and support Objective: Improve and maintain a continuum of care that is comprehensive, high quality, accessible and affordable Strategy 1: Improve clinical care and services delivered through all government and private clinics to positive people and those affected by HIV across Palau Strategy 2: Provide appropriate medical home and social support for individuals and their families Strategy 3: Provide sex partner services

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

Ensure medications are available at all times and affordable: Procurement improved Funding available Inventory is accurate Drugs are routinely ordered Ensure Medical providers provide high quality care: Appropriate training of health professionals in the Belau National Hospital and the 4 super-dispensaries Clinic, infection control, and other pertinent supplies must be available The full continuum of care for positive people is accessible and available: Homes visits and outreach programs are in place to support positive people Infrastructure supports confidentiality of HIV and other STI diagnoses, treatment and care Outreach services are developed and accessed by vulnerable populations Laboratory provides consistent and reliable testing/results: Capacity development for laboratory staff Adequate and reliable availability of supplies/materials/reagents Improved communication procedures between the Belau National Hospital Lab and other private and government clinics Policies and protocols in place and followed Referral for comprehensive care: Nutrition, oral health, and social support Integration of HIV/STI services into other health care services programs Engage and involve people living with HIV/positive people in the development and implementation of programs

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

<table>
<thead>
<tr>
<th>Service</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antiretroviral therapy</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>ART for TB patients</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Cotrimoxazole prophylaxis in people living with HIV</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Early infant diagnosis</td>
<td>N/A</td>
</tr>
<tr>
<td>HIV care and support in the workplace (including alternative working arrangements):</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>HIV testing and counselling for people with TB</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>HIV treatment services in the workplace or treatment referral systems through the workplace:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Nutritional care</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Paediatric AIDS treatment</td>
<td>N/A</td>
</tr>
<tr>
<td>Post-delivery ART provision to women</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault):</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Post-exposure prophylaxis for occupational exposures to HIV</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Psychosocial support for people living with HIV and their families</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Sexually transmitted infection management</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>TB infection control in HIV treatment and care facilities</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>TB preventive therapy for people living with HIV</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>TB screening for people living with HIV</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Treatment of common HIV-related infections</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Other [write in]:</td>
<td></td>
</tr>
</tbody>
</table>

1.2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2011?:

'18
Since 2009, what have been key achievements in this area:
TB Treatment, Care, and Support Program is now integrated with HIV Treatment, Care and Support Programs since 2010.

What challenges remain in this area:
N/A

2. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other vulnerable children?
No

3. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2011?
4

Since 2009, what have been key achievements in this area:
Not applicable as there are no orphans or other vulnerable children at are related to HIV problems in 2011.

What challenges remain in this area:
-