Saint Vincent and the Grenadines Report NCPI

NCPI Header

NAME OF THE NATIONAL AIDS COMMITTEE OFFICER IN CHARGE OF NCPI SUBMISSION AND WHO CAN BE CONTACTED FOR QUESTIONS, IF ANY:
- Postal address:
- Telephone:
- Fax:
- E-mail:

Describe the process used for NCPI data gathering and validation:

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

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>Ministry of Health</td>
<td>Jennifer George</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Ministry of Health</td>
<td>Lemmew Samuel</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
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<tr>
<td>Ministry of Health</td>
<td>Del Hamilton</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
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<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Ministry of Health</td>
<td>Margarita Tash</td>
<td>No</td>
<td>No</td>
<td>No</td>
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</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>Population Services International Caribbean</td>
<td>Patrick Prescod</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Human Rights Association</td>
<td>Nicole Sylvester</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Caribbean HIV and AIDS Alliance</td>
<td>Kevin Farara</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>House of Hope</td>
<td>Anita Nanton</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Marion House</td>
<td>Lois Dublin</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Christian Council</td>
<td>Godfrey Samuel</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</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:
   2010 - 2014
   IF YES, briefly describe key developments/modifications between the current national strategy and the prior one.
   IF NO or NOT APPLICABLE, briefly explain why.
1.1 Which government ministries or agencies
Name of government ministries or agencies [write in]:
Ministry of Health, Wellness and the Environment

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

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

Other [write in]:
Tourism

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:
The World Bank project that provided funding for line ministries closed April 2011

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: No
- Orphans and other vulnerable children: Yes
- 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: Yes
- 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
1.4. What are the identified key populations and vulnerable groups for HIV programmes in the country [write in]?:
Youth 10 - 24 years Uniformed Officers Mini bus and Taxi drivers Prisoners MSM Sex Workers Mental Health Patients

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:
   Technical sub-committee meetings Consultations Focus group discussions

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:
   Yes
   Sector-wide approach:
   -
   Other [write in]:
   -

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?

- 

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?:

No

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 Needs Only

5.3. Is HIV programme coverage being monitored?:

Yes

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

Yes

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

Yes

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:

Construction of Polyclinics where HIV services can be offered in an integrated manner Implementation of an electronic Health Information System to improve patient care

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?:

9

Since 2009, what have been key achievements in this area:
National Strategic Plan aligned with the regional Strategic Framework Detailed operational plan

What challenges remain in this area:

A - II. POLITICAL SUPPORT AND LEADERSHIP

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

A. Government ministers:

Yes

B. Other high officials at sub-national level:

Yes

1.1. (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:

World AIDS Day national address by the Minister of Health Minister attended and addressed the launch of PLHIV support group - CARESVG

2. Does the country have an officially recognized national multisectoral HIV coordination body (i.e., a National HIV
2.1. IF YES, does the national multisectoral HIV coordination body have terms of reference?: Yes
Have active government leadership and participation?: Yes
Have an official chair person?: Yes
IF YES, what is his/her name and position title?: Hon. Cecil Mc Kie, Minister of Health, Wellness and the Environment
Have a defined membership?: Yes
IF YES, how many members?: 15
Include civil society representatives?: Yes
IF YES, how many?: 8
Include people living with HIV?: Yes
IF YES, how many?: 2
Include the private sector?: Yes
Strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?: Yes

3. Does the country have a mechanism to promote interaction between government, civil society organizations, and the private sector for implementing HIV strategies/programmes?: Yes
IF YES, briefly describe the main achievements:
Greater collaboration and coordination, efficiency and effectiveness
What challenges remain in this area:
-

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

5.
Capacity-building:
Yes
Coordination with other implementing partners:
Yes
Information on priority needs:
Yes
Procurement and distribution of medications or other supplies:
Yes
Technical guidance:
Yes
Other [write in below]: -

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?: 9
Since 2009, what have been key achievements in this area:
-
What challenges remain in this area:
-
A - III. HUMAN RIGHTS

1.1 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]:

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:
- IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws:
- Briefly explain what mechanisms are in place to ensure these laws are implemented:
- Briefly comment on the degree to which they are currently implemented:

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?:
- IF YES, for which subpopulations?
  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 below]:
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>Message</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstain from injecting drugs</td>
<td></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>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>
<tr>
<td>Prevent mother-to-child transmission of HIV</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Promote greater equality between men and women</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Reduce the number of sexual partners</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Use clean needles and syringes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Use condoms consistently</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Other [write in below]:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Yes</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary schools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary schools</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Teacher training</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

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?:
Yes

Briefly describe the content of this policy or strategy:

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

<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>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
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</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?:

- 

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

- What challenges remain in this area:

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

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

4.1. To what extent has HIV prevention been implemented?

- 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:
  Agree
- HIV prevention in the workplace:
  Agree
- HIV testing and counseling:
  Strongly Agree
- IEC on risk reduction:
  Strongly Agree
- IEC on stigma and discrimination reduction:
  Strongly Agree
- Prevention of mother-to-child transmission of HIV:
  Strongly Agree
- Prevention for people living with HIV:
  Agree
- Reproductive health services including sexually transmitted infections prevention and treatment:
  Strongly Agree
- Risk reduction for intimate partners of key populations:
  Strongly Agree
- Risk reduction for men who have sex with men:
  Strongly Agree
- Risk reduction for sex workers:
  Strongly Agree
- School-based HIV education for young people:
  Strongly Agree
- Universal precautions in health care settings:
  Strongly Agree
- Other/write in:
  ’8’
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?

A - V. TREATMENT, CARE AND SUPPORT

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

   Yes

   If YES, Briefly identify the elements and what has been prioritized:
   HIV Testing and Counselling Psycho-social support Adherence Counselling ART Treatment Nutritional Counselling and Support

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

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

<table>
<thead>
<tr>
<th>Service</th>
<th>Level of Agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antiretroviral therapy:</td>
<td>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>Strongly Agree</td>
</tr>
<tr>
<td>HIV care and support in the workplace (including alternative working arrangements):</td>
<td>N/A</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>N/A</td>
</tr>
<tr>
<td>Nutritional care:</td>
<td>Agree</td>
</tr>
<tr>
<td>Paediatric AIDS treatment:</td>
<td>Strongly Agree</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>

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

   Yes

   Please clarify which social and economic support is provided:

3. Does the country have a policy or strategy for developing/using generic medications or parallel importing of medications for HIV?:

   N/A

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?:

ARVs Condoms CD4 reagents HIV rapid tests

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

- 

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

- 

What challenges remain in this area:

- 

6. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other vulnerable children?:

Yes

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

Yes

IF YES, does the country have a national action plan specifically for orphans and vulnerable children?:

No

IF YES, does the country have an estimate of orphans and vulnerable children being reached by existing interventions?:

Yes

IF YES, what percentage of orphans and vulnerable children is being reached?:

- 

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?:

- 

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

- 

What challenges remain in this area:

- 

A - VI. MONITORING AND EVALUATION

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

Yes

Briefly describe any challenges in development or implementation:

- 

1.1 IF YES, years covered:

2006 - 2009

1.2 IF YES, have key partners aligned and harmonized their M&E requirements (including indicators) with the national M&E plan?:

Yes, some partners

Briefly describe what the issues are:

Lost of some partners

2. Does the national Monitoring and Evaluation plan include?

<table>
<thead>
<tr>
<th>Component</th>
<th>Included</th>
</tr>
</thead>
<tbody>
<tr>
<td>A data collection strategy</td>
<td>Yes</td>
</tr>
<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>
<tr>
<td>A data analysis strategy</td>
<td>Yes</td>
</tr>
<tr>
<td>A data dissemination and use strategy</td>
<td>Yes</td>
</tr>
<tr>
<td>A well-defined standardised set of indicators that includes sex and age disaggregation (where appropriate)</td>
<td>Yes</td>
</tr>
<tr>
<td>Guidelines on tools for data collection</td>
<td>Yes</td>
</tr>
</tbody>
</table>
3. Is there a budget for implementation of the M&E plan?:

No

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)?:
  -
  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>Epidemiologist</td>
<td>yes</td>
<td>-</td>
<td>2008</td>
</tr>
<tr>
<td>Data Entry Clerk</td>
<td>yes</td>
<td>-</td>
<td>2005</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></td>
<td></td>
<td></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:
Reports

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

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

Yes

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

Yes

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

6.1. IF YES, does it include information about the content, key populations and geographical coverage of HIV services, as well as their implementing organizations?:

Yes, but only some of the above

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

- 6.2. Is there a functional Health Information System?

At national level:
Yes
At subnational level:
Yes
IF YES, at what level(s)?:

- 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?

For programme improvement?:
Yes
In developing / revising the national HIV response?:
Yes
For resource allocation?:
No
Other [write in]:

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

M and E reports for national and international use

9. In the last year, was training in M&E conducted?
   - At national level?
     Yes
   IF YES, what was the number trained:
   -
   - At subnational level?
     Yes
   IF YES, what was the number trained:
   -
   - At service delivery level including civil society?
     Yes
   IF YES, how many?

9.1. Were other M&E capacity-building activities conducted other than training?:
   Yes
   IF YES, describe what types of activities:
   Preceptorship in St. Kitts

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?:
   -

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

   What challenges remain in this area:
   -

B - I. CIVIL SOCIETY INVOLVEMENT

1. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?:
   4
   Comments and examples:
   -

2. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) have civil society representatives been involved in the planning and budgeting process for the National Strategic Plan on HIV or for the most current activity plan (e.g. attending planning meetings and reviewing drafts)?:
   3
   Comments and examples:
   -

3. a. The national HIV strategy?:
   5
   b. The national HIV budget?:
   3
   c. The national HIV reports?:
   3
   Comments and examples:
   -

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:
   -

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)?

4

Comments and examples:
PLHIV support group Faith based organization Non Governmental Organization Private Sector

6. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is civil society able to access

a. Adequate financial support to implement its HIV activities?:

4

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

4

Comments and examples:
Depends on the civil society organization Caribbean HIV and AIDS Alliance receive funding from PEPFER (USAID) Population Services International Caribbean St. Vincent Planned Parenthood Association

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

<table>
<thead>
<tr>
<th>People living with HIV:</th>
<th>25-50%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men who have sex with men:</td>
<td>&gt;75%</td>
</tr>
<tr>
<td>People who inject drugs:</td>
<td>-</td>
</tr>
<tr>
<td>Sex workers:</td>
<td>&gt;75%</td>
</tr>
<tr>
<td>Transgendered people:</td>
<td>-</td>
</tr>
<tr>
<td>Testing and Counselling:</td>
<td>25-50%</td>
</tr>
<tr>
<td>Reduction of Stigma and Discrimination:</td>
<td>51-75%</td>
</tr>
<tr>
<td>Clinical services (ART/OI)*:</td>
<td>-</td>
</tr>
<tr>
<td>Home-based care:</td>
<td>25-50%</td>
</tr>
<tr>
<td>Programmes for OVC**:</td>
<td>&lt;25%</td>
</tr>
</tbody>
</table>

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?:

8

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

-

What challenges remain in this area:

-

**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:

Training Financial and material assistance Free access to medical facilities and drugs

**B - III. HUMAN RIGHTS**

1.1.

<table>
<thead>
<tr>
<th>People living with HIV:</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men who have sex with men:</td>
<td>No</td>
</tr>
<tr>
<td>Migrants/mobile populations:</td>
<td>No</td>
</tr>
<tr>
<td>Orphans and other vulnerable children:</td>
<td>No</td>
</tr>
<tr>
<td>People with disabilities:</td>
<td>No</td>
</tr>
</tbody>
</table>
People who inject drugs:  
No
Prison inmates:  
No
Sex workers:  
No
Transgendered people:  
No
Women and girls:  
No
Young women/young men:  
No
Other specific vulnerable subpopulations [write in]:  
Legislation do not deal with the wider non-discrimination laws or regulations

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:  
No
If YES to Question 1.1 or 1.2, briefly describe the contents of these laws:

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

-  
Briefly comment on the degree to which they are currently implemented:

-  
2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?:  
No
2.1. IF YES, for which sub-populations?

- 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?:  
Yes
IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:
To a limited extent that there is a policy that there should be no stigma and discrimination against persons living with or affected by HIV/AIDS
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?:
Yes
IF YES, briefly describe this mechanism:
To a limited extent through care givers and the HIV Unit but this does not lend itself to accurate data collection

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?:
- 

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:
All persons are entitled to receive food baskets which are available through the HIV Unit but the quality and content require enhancement

8.1.

8.1. IF YES, does this policy/strategy include different types of approaches to ensure equal access for different key populations and/or other vulnerable sub-populations?:
Yes
IF YES, briefly explain the different types of approaches to ensure equal access for different populations:
Open door policy for all

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:
      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]: -

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?:

1

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

What challenges remain in this area:
Implementation and development of relevant laws and policy. Training for key personnel and stakeholders - health care workers, lawyers, judiciary, media

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?:

3

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

What challenges remain in this area:
-

B - IV. PREVENTION

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

IF YES, how were these specific needs determined?:
stakeholder meetings

1.1 To what extent has HIV prevention been implemented?

- Blood safety:
  Strongly Agree

- Condom promotion:
  Strongly Agree

- Harm reduction for people who inject drugs:
  N/A

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

- HIV prevention in the workplace:
  Agree

- HIV testing and counseling:
  Strongly Agree

- IEC on risk reduction:
  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:
Strongly Agree
Other [write in]:

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

7
Since 2009, what have been key achievements in this area:

- What challenges remain in this area:

- 

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

   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>Strongly Agree</td>
</tr>
<tr>
<td>HIV care and support in the workplace (including alternative working arrangements)</td>
<td>Disagree</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>Disagree</td>
</tr>
<tr>
<td>Nutritional care</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Paediatric AIDS treatment</td>
<td>Strongly Agree</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>Disagree</td>
</tr>
<tr>
<td>Post-exposure prophylaxis for occupational exposures to HIV</td>
<td>Agree</td>
</tr>
<tr>
<td>Psychosocial support for people living with HIV and their families</td>
<td>Agree</td>
</tr>
<tr>
<td>Sexually transmitted infection management</td>
<td>Agree</td>
</tr>
<tr>
<td>TB infection control in HIV treatment and care facilities</td>
<td>Agree</td>
</tr>
<tr>
<td>TB preventive therapy for people living with HIV</td>
<td>Agree</td>
</tr>
<tr>
<td>TB screening for people living with HIV</td>
<td>Agree</td>
</tr>
<tr>
<td>Treatment of common HIV-related infections</td>
<td>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?:

8
Since 2009, what have been key achievements in this area: 
- 
What challenges remain in this area: 
- 
2. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other vulnerable children?:  
Yes  
2.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: 
-  
2.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children?: 
- 
2.3. IF YES, does the country have an estimate of orphans and vulnerable children being reached by existing interventions?: 
-  
2.4. IF YES, what percentage of orphans and vulnerable children is being reached?: 
- 
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?: 
- 
Since 2009, what have been key achievements in this area: 
- 
What challenges remain in this area: 
- 

Source URL: http://aidsreportingtool.unaids.org/200/saint-vincent-and-grenadines-report-ncpi