

Survey Response Details

Response Information

Started: 4/8/2010 4:17:40 AM
Completed: 4/19/2010 6:59:20 AM
Last Edited: 4/21/2010 6:18:08 AM
Total Time: 11.02:41:40.3130000

User Information

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Response Details

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- 1) **Country**
Israel (0)
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19/04/2010

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- 8) **Describe the process used for NCPI data gathering and validation:**
The details provided are based on guidelines written by the Department of TB and AIDS at the MoH.
- 9) **Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:**

This was not a problem

10)

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

Some of the questions were irrelevant.

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11)

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

Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 1 Department of TB and AIDS, MoH	Advisor for the Head of Public Health Services on TB and AIDS	A.I, A.II, A.III, A.IV, A.V

12)

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

Organization	Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 1 NA	NA	B.I

Page 5

13)

Part A, Section I: STRATEGIC PLAN

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

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

No (0)

Page 6

14) Part A, Section I: STRATEGIC PLAN

Question 1 (continued)

IF NO or NOT APPLICABLE, briefly explain why

The national program for the treatment of HIV/AIDS was developed by the ministry of health and is implemented in cooperation with HMOs, AIDS treatment centers in hospitals, NGOs and other ministries.

Page 14

15)

Part A, Section I: STRATEGIC PLAN

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

N/A (0)

Page 16

16)

Part A, Section I: STRATEGIC PLAN

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

No (0)

Page 17

17)

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

Yes (0)

Page 18

18)

Part A, Section I: STRATEGIC PLAN

4.1 IF YES, which of the following programmes have been implemented beyond the pilot stage to reach a significant proportion of the uniformed services?

Behavioural change communication	
Condom provision	
HIV testing and counselling	
Sexually transmitted infection services	
Antiretroviral treatment	
Care and support	Yes
recruited as volunteers	Yes

Page 19

19)

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

No (0)

Page 21

20)

Part A, Section I: STRATEGIC PLAN

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

No (0)

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21)

Part A, Section I: STRATEGIC PLAN

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

No (0)

Page 25

22)

Part A, Section I: STRATEGIC PLAN

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

Estimates of current needs only (0)

Page 29

23)

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

Yes (0)

Page 30

24)

Part A, Section I: STRATEGIC PLAN

Question 7.5 (continued)

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

8 (8)

Page 31

25)

Part A, Section II: POLITICAL SUPPORT

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

President/Head of government

Other high officials Yes

Other officials in regions and/or districts Yes

26)

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

Yes (0)

Page 32

27)

2.1 IF YES, when was it created?

Please enter the year in yyyy format

1960

28)

2.2 IF YES, who is the Chair?

Name Department of TB and AIDS

Position/title

Page 34

29)

Part A, Section II: POLITICAL SUPPORT

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

N/A (0)

Page 35

30)

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

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

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31)

Part A, Section II: POLITICAL SUPPORT**Question 6.1 (continued)**

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

7 (7)

32)

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

cooperation between the Department of TB and AIDS and various NGO's in projects addressing: MSM, IVDU etc.

33)

What are remaining challenges in this area:

reaching out to more ppl at risk

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34)

Part A, Section III: PREVENTION

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

Yes (0)

Page 40

35)

Part A, Section III: PREVENTION**1.1 IF YES, what key messages are explicitly promoted?**

Check for key message explicitly promoted (multiple options allowed)

e. Use condoms consistently (0)

f. Engage in safe(r) sex (0)

Page 44

36)

Part A, III. PREVENTION**Question 3.1 (continued)**

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

8 (8)

37)

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

The Department of TB and AIDS runs awareness campaigns for the general population and for MSM. The Department of Health Promotion targets the Ethiopian immigrant population with health promotion campaigns, activities etc.

38)

What are remaining challenges in this area:

Reduce transmission (new cases) within MSM and Ethiopian immigrant populations.

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39)

Part A, III. PREVENTION

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

Yes (0)

Page 46

40)

Part A, III. PREVENTION**Question 4 (continued)**

IF YES, how were these specific needs determined?

HIV cases are concentrated mostly in risk groups and so the prevention efforts are targeted there.

41)

4.1 To what extent has HIV prevention been implemented?

The majority of people in need have access

HIV prevention component

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

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42)

Part A, III. PREVENTION

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

8 (8)

Page 49

43)

2. Has the country identified the specific needs for HIV treatment, care and support services?

Yes (0)

Page 50

44)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

Question 2 (continued)

IF YES, how were these determined?

Once someone is diagnosed as HIV positive they are referred to the nearby AIDS center (in a hospital) for testing, follow-up and social support (there is a social worker in each center).

45)

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

	The majority of people in need have access
HIV treatment, care and support service	
Antiretroviral therapy	Agree
Nutritional care	Agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	N/A
Psychosocial support for people living with HIV and their families	Agree
Home-based care	N/A
Palliative care and treatment of common HIV-related infections	Agree
HIV testing and counselling for TB patients	Agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	N/A
TB infection control in HIV treatment and care facilities	N/A
Cotrimoxazole prophylaxis in HIV-infected people	N/A
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	N/A
HIV care and support in the workplace (including alternative working arrangements)	N/A
Other: please specify	N/A

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46)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

Overall, how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2009?

10 (10)

Page 54

47)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

5. Does the country have a policy or strategy to address the additional HIV-related

needs of orphans and other vulnerable children?

N/A (0)

Page 71

48)

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

Yes (0)

Page 72

49)

Part A, Section V: MONITORING AND EVALUATION**7.1 IF YES , briefly describe the national database and who manages it:**

The is a nation database for all HIV/AIDS cases. The database is updated regularly (active case finding). It is managed by Mrs. Zehovit Weixelboim of the Department of TB and AIDS.

50)

7.2 IF YES, does it include information about the content, target populations and geographical coverage of HIV services, as well as their implementing organizations?

Yes, all of the above (0)

Page 73

51)

7.3 Is there a functional* Health Information System?

At national level Yes
At subnational level Yes

Page 74**52) Part A, Section V: MONITORING AND EVALUATION**

For Question 7.2, you have checked "Yes, but only some of the above", please specify what the central database has included.

For Question 7.3, you have indicated "Yes" to "subnational level", please specify at what level(s)?

DHO

53)

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

Yes (0)

54)

9. To what extent are M&E data used

9.1 in developing / revising the national AIDS strategy?:

5 (5)

55)

Provide a specific example:

The epidemiological data is used to direct prevention efforts in the most at risk populations.

56)

What are the main challenges, if any?

Migrant workers- no denominator, random testing.

Page 75

57) **Part A, Section V: MONITORING AND EVALUATION**

9.2 To what extent are M&E data used for resource allocation?

5 (5)

58)

What are the main challenges, if any?

Not enough funds

Page 76

59)

Part A, Section V: MONITORING AND EVALUATION

9.3 To what extent are M&E data used for programme improvement?:

4 (4)

60)

Provide a specific example:

SEP

Page 77**61) Part A, Section V: MONITORING AND EVALUATION**

10. Is there a plan for increasing human capacity in M&E at national, subnational and service-delivery levels?:

Yes, but only addressing some levels (0)

Page 78**62) Part A, Section V: MONITORING AND EVALUATION**

For Question 10, you have checked "Yes, but only addressing some levels", please specify

at national level (0)

at subnational level (0)

63)

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

At national level?

At subnational level?

Yes

At service delivery level including civil society?

Page 79**64) Please enter the number of people trained at subnational level.**

Please enter an integer greater than 0

99999

Page 80**65)**

Part A, Section V: MONITORING AND EVALUATION

10.2 Were other M&E capacity-building activities conducted other than training?

Yes (0)

Page 81**66) Part A, Section V: MONITORING AND EVALUATION**

Question 10.2 (continued)

IF YES, describe what types of activities:

conferences on HIV/AIDS- for professionals

Page 82**67) Part A, Section V: MONITORING AND EVALUATION****Question 10.2 (continued)**

Overall, how would you rate the M&E efforts of the HIV programme in 2009?

7 (7)

68)

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

migrants workers, IVF for HIV patients, regulations health care workers with HIV

69)

What are remaining challenges in this area:

Migrant workers- improve monitoring. More ppl in risk groups to be tested and more regularly.

Page 83**70)****Part B, Section I: HUMAN RIGHTS**

1. Does the country have laws and regulations that protect people living with HIV against discrimination? (including both general non-discrimination provisions and provisions that specifically mention HIV, focus on schooling, housing, employment, health care etc.)

Yes (0)

Page 84**71)****Part B, Section I. HUMAN RIGHTS**

1.1 IF YES, specify if HIV is specifically mentioned and how or if this is a general nondiscrimination provision:

school children and health workers

72)

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

No (0)

Page 86

73)

Part B, Section I. HUMAN RIGHTS

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

No (0)

Page 8874) **Part B, Section I. HUMAN RIGHTS**

4. Is the promotion and protection of human rights explicitly mentioned in any HIV policy or strategy?

No (0)

Page 89

75)

5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, most-at-risk populations and/or other vulnerable subpopulations?

Yes (0)

Page 90

76)

Part B, Section I. HUMAN RIGHTS

Question 5 (continued)

IF YES, briefly describe this mechanism:

NGO- AIDS Task Force, complaints to TB and AIDS department

77)

6. Has the Government, through political and financial support, involved people living with HIV, most-at-risk populations and/or other vulnerable subpopulations in governmental HIV-policy design and programme implementation?

No (0)

Page 91

78)

7. Does the country have a policy of free services for the following:

- | | |
|---|-----|
| a. HIV prevention services | Yes |
| b. Antiretroviral treatment | Yes |
| c. HIV-related care and support interventions | Yes |

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79)

Part B, Section I. HUMAN RIGHTS

Question 7 (continued)

IF YES, given resource constraints, briefly describe what steps are in place to implement these policies and include information on any restrictions or barriers to access for different populations:

only with non-citizens of Israel

Page 93

80)

9. Does the country have a policy to ensure equal access for most-at-risk populations and/or other vulnerable subpopulations to HIV prevention, treatment, care and support?

Yes (0)

Page 94

81)

Part B, Section I. HUMAN RIGHTS

Question 9 (continued)

IF YES, briefly describe the content of this policy:

Private dentists might be reluctant to treat HIV patients.

Page 95

82)

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

Yes (0)

83)

11. Does the country have a policy to ensure that HIV research protocols involving

human subjects are reviewed and approved by a national/local ethical review committee?

Yes (0)

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84)

Part B, Section I. HUMAN RIGHTS

11.1 IF YES, does the ethical review committee include representatives of civil society including people living with HIV?

No (0)

85)

IF YES, describe the approach and effectiveness of this review committee:

only civil society

Page 97

86)

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

Yes (0)

87)

– Focal points within governmental health and other departments to monitor HIV-related human rights abuses and HIV-related discrimination in areas such as housing and employment

No (0)

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88)

Part B, Section I. HUMAN RIGHTS

Question 12 (continued)

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

case by case

Page 99

89)

Part B, Section I. HUMAN RIGHTS

13. In the last 2 years, have members of the judiciary (including labour courts/ employment tribunals) been trained/sensitized to HIV and human rights issues that may come up in the context of their work?

No (0)

90)

– Legal aid systems for HIV casework

Yes (0)

91)

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

No (0)

92)

– Programmes to educate, raise awareness among people living with HIV concerning their rights

Yes (0)

93)

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

Yes (0)

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94)

Part B, Section I. HUMAN RIGHTS

**Question 15 (continued)
IF YES, what types of programmes?**

Media	
School education	Yes
Personalities regularly speaking out	No
Other: please specify	

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95)

Part B, Section I. HUMAN RIGHTS

Question 15 (continued)

Overall, how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2009?

8 (8)

96)

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

ethics committee only

97)

What are remaining challenges in this area:

promoting rights

Page 102

98)

Part B, Section I. HUMAN RIGHTS

Question 15 (continued)

Overall, how would you rate the efforts to enforce the existing policies, laws and regulations in 2009?

6 (6)

Page 103

99)

Part B, Section II: CIVIL SOCIETY* PARTICIPATION

1. To what extent has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?

4 (4)

100)

Comments and examples:

AIDS Task Force, Physicians for Human Rights

Page 104

101)

Part B, Section II. CIVIL SOCIETY PARTICIPATION

2. To what extent have civil society representatives been involved in the planning and budgeting process for the National Strategic Plan on HIV or for the most current activity plan (e.g. attending planning meetings and reviewing drafts)?

4 (4)

102)

Comments and examples:

advisory committe on HIV/AIDS

Page 105

103)

a. the national AIDS strategy?

4 (4)

Page 106

104)

a. developing the national M&E plan?

0

105)

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

0

106)

c. M&E efforts at local level?

0

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107) Part B, Section II. CIVIL SOCIETY PARTICIPATION

5. To what extent is the civil society sector representation in HIV efforts inclusive of diverse organizations (e.g. networks of people living with HIV, organizations of sex workers, faith-based organizations)?

2 (2)

Page 108

108)

Comments and examples:

N/A

Page 109**109) Part B, Section II. CIVIL SOCIETY PARTICIPATION**

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

Prevention for youth	<25%
Prevention for most-at-risk-populations	
- Injecting drug users	25-50%
- Men who have sex with men	25-50%
- Sex workers	<25%
Testing and Counselling	<25%
Reduction of Stigma and Discrimination	>75%
Clinical services (ART/OI)*	<25%
Home-based care	
Programmes for OVC**	<25%

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110)

Part B, Section II. CIVIL SOCIETY PARTICIPATION**Question 7 (continued)**

Overall, how would you rate the efforts to increase civil society participation in 2009?

7 (7)

111)

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

joint projects

Page 111

112)

Part B, Section III: PREVENTION

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

Yes (0)

Page 112

113)

Part B, Section III: PREVENTION**Question 1 (continued)**

IF YES, how were these specific needs determined?

according to data, information on specific

114)

1.1 To what extent has HIV prevention been implemented?

The majority of people in need have access	
HIV prevention component	
Blood safety	Agree
Universal precautions in health care settings	Agree
Prevention of mother-to-child transmission of HIV	Agree
IEC* on risk reduction	Agree
IEC* on stigma and discrimination reduction	N/A
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	Agree
Risk reduction for men who have sex with men	Agree
Risk reduction for sex workers	Agree
Reproductive health services including sexually transmitted infections prevention and treatment	Agree
School-based HIV education for young people	Don't agree
HIV prevention for out-of-school young people	Agree
HIV prevention in the workplace	N/A
Other: please specify	

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115)

Part B, Section III: PREVENTION

Question 1.1 (continued)

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

8 (8)

116)

What are remaining challenges in this area:

To reach out more ppl at risk

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117)

Part B, Section IV: TREATMENT, CARE AND SUPPORT

1. Has the country identified the specific needs for HIV treatment, care and support

services?

Yes (0)

Page 115

118)

Part B, Section IV: TREATMENT, CARE AND SUPPORT

Question 1 (continued)

IF YES, how were these specific needs determined?

periodic reports, population studies

119)

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

The majority of people in need
have access

HIV treatment, care and support service

Antiretroviral therapy	Agree
Nutritional care	Agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	Agree
Psychosocial support for people living with HIV and their families	Agree
Home-based care	Don't agree
Palliative care and treatment of common HIV-related infections	Agree
HIV testing and counselling for TB patients	Agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	Agree
TB infection control in HIV treatment and care facilities	Agree
Cotrimoxazole prophylaxis in HIV-infected people	Agree
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Don't agree
HIV care and support in the workplace (including alternative working arrangements)	Don't agree
Other: please specify	

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120)

Part B, Section IV: TREATMENT, CARE AND SUPPORT

Question 1.1 (continued)

Overall, how would you rate the efforts in the implementation of HIV treatment, care

and support programmes in 2009?

8 (8)

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121)

Part B, Section IV: TREATMENT, CARE AND SUPPORT

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

No (0)