

Survey Response Details

Response Information

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Response Details

Page 1

- 1) **Country**
Palau (0)
- 2) **Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:**
Candace Koshiba
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Page 3

- 7) **Describe the process used for NCPI data gathering and validation:**
First, a meeting was held to introduce the report and all the NCPI data-gathering process and how to compile and complete it. Second, small meetings and desk interviews were held to gather and compile all data. Lastly, a final workshop was held to review the results or the NCPI responses and validate the NCPI.
- 8) **Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:**
We had a final NCPI workshop where the key stakeholders presented, discussed and validate teh

NCPI responses. Important points, information, and data that were discussed and agreed on. On the workshop we never had big disagreement or such thing. We had to make sure to carefully and smoothly explain all things that were discussed on the table so that all people could agree on them before filling and submitting the NCPI.

9)

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

All questions and data quality were neatly explained and well interpreted.

Page 4

10)

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	HIV/AIDS & STI Program	Candace Koshiba/Monitoring & Evaluation Officer	A.V

11)

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 2	Ministry of Justice	Helenda Oimeii/Police Officer II	
Respondent 3	Judiciary Branch	Persilla Rengiiil/Probation Officer	
Respondent 4	Ladies in Entertainment Business	Philom Temengil/Coordinator	
Respondent 5	COmmunicable Disease Unit	Isabelita Rengechel/Nurse Supervisor	
Respondent 6	Palau HIV/AIDS and STI Advisory Group/Palau Red Cross Society	Santy Asanuma/Chairperson	
Respondent 7	Palau National Congress/Traditional Women's Council	Kathy Kesolei/Senator	
Respondent 8	Ministry of Community and Cultural Affairs	Inez Remengesau/Job Corps Coordinator	
Respondent 9	Office of the President	Theodoro Borja/Special Assistant	
Respondent 10	Palau national Congress	Mary Nabeyama/Senate Clerk	
Respondent 11	Youth Group/HIV/AIDS & STI Office	Gustap E. Salii/Community Information Officer	
Respondent 12	Global Fund Project	Omar Faustino/Coordinator	
Respondent 13	Council of Chiefs	Dilmei Olkerii/Executive Director	

Respondent 14	Association of Principals	Wicliff Emul/President
Respondent 15	Ministry of Education	Deborah Nagata/Health Program Specialist
Respondent 16	Association of Governors	Aholiba Albert/Administrative Secretary
Respondent 17	Communicable Disease Unit	Johana Ngiruchelbad, Administrator
Respondent 18		
Respondent 19		
Respondent 20		
Respondent 21		
Respondent 22		
Respondent 23		
Respondent 24		
Respondent 25		

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	Palau Red Cross Society	Miriam Chin/Executive Director	B.I, B.IV

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)

Yes (0)

Page 7

14)

1.1 How long has the country had a multisectoral strategy?

Number of Years

4

15)

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

	Included in strategy	Earmarked budget
Health	Yes	Yes
Education	Yes	No
Labour	Yes	No
Transportation	No	No
Military/Police	Yes	No
Women	Yes	No
Young people	Yes	No
Other*	Yes	No

Page 8

16) **Part A, Section I: STRATEGIC PLAN**

Question 1.2 (continued)

If "Other" sectors are included, please specify:

Business Community

17)

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 there is no activity that can be implemented.

Page 9

18)

Part A, Section I: STRATEGIC PLAN

1.3 Does the multisectoral strategy address the following target populations, settings and crosscutting issues?

Target populations	
a. Women and girls	Yes
b. Young women/young men	Yes
c. Injecting drug users	No
d. Men who have sex with men	Yes
e. Sex workers	Yes
f. Orphans and other vulnerable children	No

g. Other specific vulnerable subpopulations*	No
--	----

Settings

h. Workplace	Yes
i. Schools	Yes
j. Prisons	Yes

Cross-cutting issues

k. HIV and poverty	Yes
l. Human rights protection	Yes
m. Involvement of people living with HIV	Yes
n. Addressing stigma and discrimination	Yes
o. Gender empowerment and/or gender equality	Yes

19)

1.4 Were target populations identified through a needs assessment?

Yes (0)

Page 10

20)

Part A, Section I: STRATEGIC PLAN**Question 1.4 (continued)****IF YES, when was this needs assessment conducted?**

Please enter the year in yyyy format

2008

Page 11

21)

Part A, Section I: STRATEGIC PLAN**1.5 What are the identified target populations for HIV programmes in the country?**

Ladies in the Entertainment Business, Youth Empowerment Project, Out-of-School Youth, Pregnant Women

22)

1.6 Does the multisectoral strategy include an operational plan?

Yes (0)

23)

1.7 Does the multisectoral strategy or operational plan include:

a. Formal programme goals?	Yes
b. Clear targets or milestones?	Yes
c. Detailed costs for each programmatic area?	Yes

- d. An indication of funding sources to support programme? Yes
 e. A monitoring and evaluation framework? Yes

24)

1.8 Has the country ensured “full involvement and participation” of civil society* in the development of the multisectoral strategy?

Active involvement (0)

Page 12

25)

Part A, Section I: STRATEGIC PLAN

Question 1.8 (continued)

IF active involvement, briefly explain how this was organised:

A one-week workshop was conducted to develop the National Strategic Plan

26)

1.9 Has the multisectoral strategy been endorsed by most external development partners (bi-laterals, multi-laterals)?

Yes (0)

27)

1.10 Have external development partners aligned and harmonized their HIV-related programmes to the national multisectoral strategy?

Yes, all partners (0)

Page 14

28)

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?

Yes (0)

Page 15

29)

Part A, Section I: STRATEGIC PLAN

2.1 IF YES, in which specific development plan(s) is support for HIV integrated?

a. National Development Plan

Yes

- b. Common Country Assessment / UN Development Assistance Framework Yes
- c. Poverty Reduction Strategy Yes
- d. Sector-wide approach Yes
- e. Other: Please specify No

30)

2.2 IF YES, which specific HIV-related areas are included in one or more of the development plans?

HIV-related area included in development plan(s)	
HIV prevention	Yes
Treatment for opportunistic infections	Yes
Antiretroviral treatment	Yes
Care and support (including social security or other schemes)	Yes
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
Women's economic empowerment (e.g. access to credit, access to land, training)	Yes
Other: Please specify	No

Page 16

31)

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

32)

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

33)

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	No
Condom provision	Yes
HIV testing and counselling	Yes
Sexually transmitted infection services	Yes
Antiretroviral treatment	Yes
Care and support	Yes
Other: Please specify	No

Page 19

34)

Part A, Section I: STRATEGIC PLAN**Question 4.1 (continued)**

If HIV testing and counselling is provided to uniformed services, briefly describe the approach taken to HIV testing and counselling (e.g, indicate if HIV testing is voluntary or mandatory etc):

Testing is Voluntary

35)

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

36)

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)

Page 23

37)

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?

Yes (0)

Page 24

38)

Part A, Section I: STRATEGIC PLAN**7.1 Have the national strategy and national HIV budget been revised accordingly?**

Yes (0)

39)

7.2 Have the estimates of the size of the main target populations been updated?

Yes (0)

Page 25

40)

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 and future needs (0)

41)

7.4 Is HIV programme coverage being monitored?

Yes (0)

Page 26

42)

Part A, Section I: STRATEGIC PLAN**Question 7.4 (continued)****(a) IF YES, is coverage monitored by sex (male, female)?**

Yes (0)

43)

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

Yes (0)

Page 27

44)

Part A, Section I: STRATEGIC PLAN**Question 7.4 (b) (continued)****IF YES, for which population groups?**

Ladies in the Entertainment Business, Youth Empowerment Project, Out-of-School Youth, and Pregnant Women

45)

Briefly explain how this information is used:

Monitoring population group helps us gather information and relevant data that are important to our program

Page 2846) **Part A, Section I: STRATEGIC PLAN****Question 7.4 (continued)****(c) Is coverage monitored by geographical area?**

Yes (0)

Page 29

47)

Part A, Section I: STRATEGIC PLAN**Question 7.4 (c) (continued)****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.

48)

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.

49)

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

50)

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)

51)

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

National Strategic Plan has been endorsed and being implemented.

52)

What are remaining challenges in this area:

We do not specify target groups on our National Strategic Plan. it is just generalized as Target Groups or Special Population.

Page 31

53)

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	Yes
Other high officials	Yes
Other officials in regions and/or districts	Yes

54)

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

55)

2.1 IF YES, when was it created?

Please enter the year in yyyy format

1987

56)

2.2 IF YES, who is the Chair?

Name	Santy Asanuma
Position/title	Charperson, PHASAG and Palau Red Cross Society

57)

2.3 IF YES, does the national multisectoral AIDS coordination body:

have terms of reference?	Yes
have active government leadership and participation?	Yes
have a defined membership?	Yes
include civil society representatives?	Yes
include people living with HIV?	Yes
include the private sector?	Yes
have an action plan?	Yes
have a functional Secretariat?	Yes
meet at least quarterly?	Yes
review actions on policy decisions regularly?	Yes
actively promote policy decisions?	Yes
provide opportunity for civil society to influence decision-making?	Yes
strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?	Yes

Page 33

58)

Part A, Section II: POLITICAL SUPPORT**Question 2.3 (continued)**

If you answer "yes" to the question "does the National multisectoral AIDS coordination body have a defined membership", how many members?

Please enter an integer greater than or equal to 1

18

59)

If you answer "yes" to the question "does the National multisectoral AIDS coordination body include civil society representatives", how many?

Please enter an integer greater than or equal to 1

1

60)

If you answer "yes" to the question "does the National multisectoral AIDS coordination body include people living with HIV", how many?

Please enter an integer greater than or equal to 1

1

Page 34

61)

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?

Yes (0)

Page 35

62)

Briefly describe the main challenges:

Cultural and Religion Issues.

63)

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

Please enter the rounded percentage (0-100)

14

64)

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

Technical guidance

Procurement and distribution of drugs or other supplies

Coordination with other implementing partners

Capacity-building

Other: Please specify

65)

6. Has the country reviewed national policies and laws to determine which, if any, are inconsistent with the National AIDS Control policies?

Yes (0)

Page 36

66)

Part A, Section II: POLITICAL SUPPORT

6.1 IF YES, were policies and laws amended to be consistent with the National AIDS Control policies?

No (0)

Page 38

67)

Part A, Section II: POLITICAL SUPPORT

Question 6.1 (continued)**Overall, how would you rate the political support for the HIV programmes in 2009?**

5 (5)

68)

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

Member and Staff of the Congress is now member of the Palau HIV/AIDS and STI Advisory Group (PHASAG)

69)

What are remaining challenges in this area:

Drafting and Passage of HIV Law

Page 39

70)

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

71)

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

Check for key message explicitly promoted (multiple options allowed)

- a. Be sexually abstinent (0)
- b. Delay sexual debut (0)
- c. Be faithful (0)
- d. Reduce the number of sexual partners (0)
- e. Use condoms consistently (0)
- f. Engage in safe(r) sex (0)
- g. Avoid commercial sex (0)
- h. Abstain from injecting drugs (0)

- i. Use clean needles and syringes (0)
- j. Fight against violence against women (0)
- k. Greater acceptance and involvement of people living with HIV (0)
- l. Greater involvement of men in reproductive health programmes (0)
- m. Males to get circumcised under medical supervision (0)
- n. Know your HIV status (0)
- o. Prevent mother-to-child transmission of HIV (0)

72)

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

Yes (0)

Page 41

73)

Part A, Section III: PREVENTION

2. Does the country have a policy or strategy promoting HIV-related reproductive and sexual health education for young people?

Yes (0)

74)

2.1 Is HIV education part of the curriculum in:

primary schools?	No
secondary schools?	No
teacher training?	No

75)

2.2 Does the strategy/curriculum provide the same reproductive and sexual health education for young men and young women?

Yes (0)

76)

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

Yes (0)

77)

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

Yes (0)

Page 42

78)

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

Check which specific populations and elements are included in the policy/strategy

Targeted information on risk reduction and HIV education	Injecting drug user, Men having sex with men, Sex workers, Clients of sex workers, Prison inmates
Stigma and discrimination reduction	Injecting drug user, Men having sex with men, Sex workers, Clients of sex workers, Prison inmates
Condom promotion	Injecting drug user, Men having sex with men, Sex workers, Clients of sex workers, Prison inmates
HIV testing and counselling	Injecting drug user, Men having sex with men, Sex workers, Clients of sex workers, Prison inmates
Reproductive health, including sexually transmitted infections prevention and treatment	Injecting drug user, Men having sex with men, Sex workers, Clients of sex workers, Prison inmates
Vulnerability reduction (e.g. income generation)	Sex workers
Drug substitution therapy	
Needle & syringe exchange	

Page 44

79)

Part A, III. PREVENTION

Question 3.1 (continued)

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

7 (7)

80)

What are remaining challenges in this area:

Religious and Cultural Issues

Page 45

81)

Part A, III. PREVENTION

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

Yes (0)

Page 46

82)

Part A, III. PREVENTION

Question 4 (continued)

IF YES, how were these specific needs determined?

Surveys, Second Generation Surveillance Survey, and Youth Risk Behavior Survey

83)

4.1 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	Agree
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	Agree
HIV prevention for out-of-school young people	Agree
HIV prevention in the workplace	Agree
Other: please specify	

Page 47

84)

Part A, III. PREVENTION

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

8 (8)

85)

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

Presentations to wider groups of people and school

86)

What are remaining challenges in this area:

Religious and Cultural Issues

Page 48

87)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

1. Does the country have a policy or strategy to promote comprehensive HIV treatment, care and support? (Comprehensive care includes, but is not limited to, treatment, HIV testing and counselling, psychosocial care, and home and community-based care).

Yes (0)

Page 49

88)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

1.1 IF YES, does it address barriers for women?

Yes (0)

89)

1.2 IF YES, does it address barriers for most-at-risk populations?

Yes (0)

90)

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

Yes (0)

Page 50

91)

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

The majority of people in need

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

Page 51

92)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

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

Yes (0)

93)

4. Does the country have access to *regional* procurement and supply management mechanisms for critical commodities, such as antiretroviral therapy drugs, condoms, and substitution drugs?

Yes (0)

Page 52

94)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

Question 4 (continued)

IF YES, for which commodities?:

Antiretroviral therapy drugs and condoms

Page 53

95)

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)

96)

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

sustaining

Page 54

97)

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?**

No (0)

Page 57

98)

Part A, Section V: MONITORING AND EVALUATION**1. Does the country have *one* national Monitoring and Evaluation (M&E) plan?**

In progress (0)

Page 64

99)

4. Are M&E priorities determined through a national M&E system assessment?

Yes (0)

Page 65

100)

Part A, Section V: MONITORING AND EVALUATION**Question 4 (continued)****IF YES, briefly describe how often a national M&E assessment is conducted and what the assessment involves:**

M&E Plan and Framework is still in progress

101)

5. Is there a functional national M&E Unit?

In progress (0)

Page 69

102)

What are the major challenges?

Infrastructure and Funding for Supplies and Materials supporting M&E

Page 70

103)

Part A, Section V: MONITORING AND EVALUATION**6. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?**

No (0)

Page 71

104)

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

Yes (0)

Page 72

105)

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

Confidential Testing and Referral Database and the Monitoring and Evaluation Officer manages it.

106)

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, but only some of the above (0)

Page 73

107)

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.**

the content of the HIV services (0)

geographical coverage of HIV services (0)

108)

7.3 Is there a functional* Health Information System?

At national level	Yes
At subnational level	No

Page 74

109)

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

Yes (0)

110)

9. To what extent are M&E data used

9.1 in developing / revising the national AIDS strategy?:

5 (5)

111)

Provide a specific example:

The M& E monitor and evaluate all HIV-related activities that helps develop the national AIDS Strategy

Page 75

112) Part A, Section V: MONITORING AND EVALUATION

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

5 (5)

113)

Provide a specific example:

M&E monitor and evaluate all HIV-Related activities and produces report that is useful in allocating resources

Page 76

114)

Part A, Section V: MONITORING AND EVALUATION

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

5 (5)

115)

Provide a specific example:

M&E monitor and evaluate all HIV-related activities and is important in improving all HIV-related activities

Page 77**116) 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?:**

No (0)

Page 78

117)

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

At national level?	Yes
At subnational level?	No
At service delivery level including civil society?	No

Page 79**118) Part A, Section V: MONITORING AND EVALUATION****Question 10.1 (continued)****Please enter the number of people trained at national level.**

Please enter an integer greater than 0

1

Page 80

119)

Part A, Section V: MONITORING AND EVALUATION**10.2 Were other M&E capacity-building activities conducted other than training?**

No (0)

Page 82

120) 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?**

8 (8)

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

an M&E officer was hired for the first time in 2009

122)**What are remaining challenges in this area:**

Infrastructure, Communication Difficulties, and Funding (for training and M&E Skills) are the most challenging issues in the M&E area

Page 83**123)****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**124)****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**125)****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 88

126) Part B, Section I. HUMAN RIGHTS

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

Yes (0)

Page 89

127)

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

128)

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

129)

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

Page 92

130)

8. Does the country have a policy to ensure equal access for women and men to HIV prevention, treatment, care and support?

No (0)

Page 93

131)

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

132)

9.1 IF YES, does this policy include different types of approaches to ensure equal access for different most-at-risk populations and/or other vulnerable sub-populations?

Yes (0)

Page 95

133)

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

No (0)

134)

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)

Page 97

135)

– 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)

136)

– 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

Yes (0)

137)

– Performance indicators or benchmarks for compliance with human rights standards in

the context of HIV efforts

Yes (0)

Page 98

138)

Part B, Section I. HUMAN RIGHTS**Question 12 (continued)****IF YES on any of the above questions, describe some examples:**

n/a

Page 99

139)

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?**

Yes (0)

140)

– Legal aid systems for HIV casework

No (0)

141)

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

No (0)

142)

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

Yes (0)

143)

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

Yes (0)

Page 100

144)

Part B, Section I. HUMAN RIGHTS**Question 15 (continued)****IF YES, what types of programmes?**

Media	Yes
School education	Yes
Personalities regularly speaking out	Yes
Other: please specify	

Page 101

145)

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?**

5 (5)

146)

What are remaining challenges in this area:

Enacting laws and policies to protect most-at-risk population

Page 102

147)

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?**

4 (4)

Page 103

148)

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?**

3 (3)

Page 104

149)

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)?

3 (3)

Page 105

150)

a. the national AIDS strategy?

2 (2)

151)

b. the national AIDS budget?

1 (1)

152)

c. national AIDS reports?

2 (2)

Page 106

153)

a. developing the national M&E plan?

2 (2)

154)

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

2 (2)

155)

c. M&E efforts at local level?

3 (3)

Page 107

156) 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)?

3 (3)

Page 108

157)

a. adequate financial support to implement its HIV activities?

3 (3)

158)

b. adequate technical support to implement its HIV activities?

1 (1)

Page 109

159) **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	25-50%
Prevention for most-at-risk-populations	
- Injecting drug users	25-50%
- Men who have sex with men	25-50%
- Sexworkers	<25%
Testing and Counselling	25-50%
Reduction of Stigma and Discrimination	<25%
Clinical services (ART/OI)*	<25%
Home-based care	<25%
Programmes for OVC**	<25%

Page 110

160)

Part B, Section II. CIVIL SOCIETY PARTICIPATION

Question 7 (continued)

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

3 (3)

Page 111

161)

Part B, Section III: PREVENTION

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

No (0)

Page 112

162)

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	Agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	N/A
Risk reduction for men who have sex with men	N/A
Risk reduction for sex workers	N/A
Reproductive health services including sexually transmitted infections prevention and treatment	Agree
School-based HIV education for young people	Agree
HIV prevention for out-of-school young people	Agree
HIV prevention in the workplace	Agree
Other: please specify	

Page 113

163)

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?

4 (4)

164)

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

HIV Prevention Program expanding to communities

165)

What are remaining challenges in this area:

More Funding

Page 114

166)

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

167)

Part B, Section IV: TREATMENT, CARE AND SUPPORT**Question 1 (continued)****IF YES, how were these specific needs determined?**

n/a

168)

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	N/A
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	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	N/A
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	N/A
HIV treatment services in the workplace or treatment referral systems through the workplace	Agree

HIV care and support in the workplace (including alternative working

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

Page 116

169)

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?

6 (6)

170)

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

Puppet Show Program

171)

What are remaining challenges in this area:

More involvement and funding to non-government and less to government.

Page 117

172)

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?

N/A (0)