# **Survey Response Details**

## **Response Information**

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#### **User Information**

Username: ce\_KG

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## **Response Details**

## Page 1

#### 1) Country

Kyrgyzstan (0)

2) Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:

Байызбекова Джайнагуль

3) Postal address:

Кыргызская Республика, г. Бишкек, ул. Логвиненко, 18

4) Telephone:

Please include country code

+996 (312) 300217

5) Fax:

Please include country code

+996 (312) 300216

6) E-mail:

jb@aids.gov.kg

7) Date of submission:

Please enter in DD/MM/YYYY format

04/03/2010

#### Page 3

#### 8) Describe the process used for NCPI data gathering and validation:

1.Кабинетный анализ - были собраны документы по вопросам связанные с политикой в области ВИЧ/СПИДа, лечением, профилактикой и др. 2.Интервью с ключевыми информаторами - было проведено в форме фокус-групп, были собраны две фокус-группы (части А и В, которые состояли из представителей госструктур, НПО и международных

Checkbox® 4.6

организаций)

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

Рассхождения устранялись в ходе открытого обсуждения и голосования.

10)

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

Нет

## Page 4

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 Республиканское 1 объединение "СПИД"	Тороев Н.А.	AI, AII, AIII, AIV, AV

12)

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 2	Министерство здравоохранения	Эшходжаева А.С.	AI, AII, AIII, AIV, AV
Respondent 3	Республиканское объединение "СПИД"	Исмаилова А.Д.	A.I, A.II, A.III, A.IV, A.V
Respondent 4	Государственная система исполнения и наказания при правительстве КР	Катькалова О.А.	A.I, A.II, A.III, A.IV, A.V
Respondent 5	Научно-профилактическая объединение "Профилактическая медицина"	Кучук Т.Э.	A.I, A.II, A.III, A.IV, A.V
Respondent 6	Министерство образования и науки КР	Горкина В.А.	A.I, A.II, A.III, A.IV, A.V
Respondent 7	Министерство здравоохранения	Душенова Д.	A.I, A.II, A.III, A.IV, A.V
Respondent 8			
Respondent 9			
Respondent 10			
Respondent 11			
Respondent 12			
Respondent 13			

Respondent 14 Respondent 15 Respondent 16 Respondent 17 Respondent 18 Respondent 19 Respondent 20 Respondent 21 Respondent 22 Respondent 23 Respondent 24 Respondent

13)

25

# 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	Секритариат	Байызбекова	B.I, B.II, B.III, B.IV
1	СМКК	Д.А.	

14)

	Organization	Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 2	Секритариат СМКК	Эрмеков Б.	B.I, B.II, B.III, B.IV
Respondent 3		Имарова Р.	B.I, B.II, B.III, B.IV
Respondent 4	BO3	Карымбаева С.	B.I, B.II, B.III, B.IV
Respondent 5	Центрально - Азиатский проект по контролю СПИД	Кадыралиева А.	B.I, B.II, B.III, B.IV
Respondent 6	Программа ПРООН по ВИЧ/СПИДу	Болотбаева А.	B.I, B.II, B.III, B.IV
Respondent 7	Программа ПРООН по ВИЧ/СПИДу	Башмакова Л.Н.	B.I, B.II, B.III, B.IV
Respondent	Центр снижения вреда	Есенаманова А.Т.	B.I, B.II, B.III, B.IV

Respondent HПО "Социум" Эстебесова Б.А. В.I, В.II, В.III, В.IV Respondent HПО "Аракет плюс" Нартаева Б.К. B.I, B.II, B.III, B.IV Respondent 11 Respondent 12 Respondent Respondent 14 Respondent 15 Respondent 16 Respondent 17 Respondent 18 Respondent 19 Respondent 20 Respondent Respondent 22 Respondent 23 Respondent 24 Respondent 25

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15)

## 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

16) Part A, Section I: STRATEGIC PLAN

## **Question 1 (continued)**

**Period covered:** 

2008-2009 г.

17)

1.1 How long has the country had a multisectoral strategy?

**Number of Years** 

15

18)

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	Yes
Labour	Yes	Yes
Transportation	Yes	Yes
Military/Police	Yes	Yes
Women	Yes	Yes
Young people	Yes	Yes
Other*	Yes	Yes

# Page 8

19) Part A, Section I: STRATEGIC PLAN

**Question 1.2 (continued)** 

If "Other" sectors are included, please specify:

Религия

## Page 9

20)

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	No
b. Young women/young men	Yes
c. Injecting drug users	Yes
d. Men who have sex with men	Yes
e. Sex workers	Yes
f. Orphans and other vulnerable children	Yes
g. Other specific vulnerable subpopulations*	Yes

Settings	
h. Workplace	Yes
i. Schools	Yes
j. Prisons	Yes
Cross-cutting issues	
k.HIV and poverty	Yes
I. Human rights protection	Yes
m. Involvement of people living with	HIV Yes
n. Addressing stigma and discriminat	tion Yes
o. Gender empowerment and/or gen	der equality Yes

21)

## 1.4 Were target populations identified through a needs assessment?

Yes (0)

## Page 10

22)

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

2005

#### Page 11

23)

#### Part A, Section I: STRATEGIC PLAN

- 1.5 What are the identified target populations for HIV programmes in the country?
  - Молодежь, в том числе военнослужащие краткосрочной службы и уязвимые дети Инъекционные потребители наркотиков и созависимые лица Заключенные и персонал пенитенциарных учреждений Секс-работники и их клиенты Мужчина, имеющие секс с мужчинами Мобильные группы населения и мигранты Лица, живущие с ВИЧ инфекцией, в том числе беременные женщины, и лица, пострадавшие от ВИЧ, в том числе дети рожденные ВИЧ-инфицированными женщинами и сироты

24)

1.6 Does the multisectoral strategy include an operational plan?

Yes (0)

25)

1.7 Does the multisectoral strategy or operational plan include:

a. Formal programme goals?
b. Clear targets or milestones?
c. Detailed costs for each programmatic area?
d. An indication of funding sources to support programme? Yes
e. A monitoring and evaluation framework?

26)

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

27)

Part A, Section I: STRATEGIC PLAN

**Question 1.8 (continued)** 

IF active involvement, briefly explain how this was organised:

Участие в рабочих группах по разработке Государственной программы по ВИЧ/СПИДу, нормативно-законодательной базы по ВИЧ/СПИДу, в организации и проведении «круглых столов» и технических рабочих группах по вопросам профилактики, лечения и другим проблемам в области ВИЧ/СПИДа. В 2007 году в составе Странового многосекторального координационного комитета гражданский сектор был представлен в 44% (с учетом международных организаций), в 2009 — 35%. Без учета международных организаций — 19%. Представители гражданского сектора широко представлены и активно участвуют в работе технических секторов СМКК

28)

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

Yes (0)

29)

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

Yes, all partners (0)

#### Page 14

30)

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

31)

## 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
N/A
d. Sector-wide approach
Yes
e. Другие: [национальный план по гендеру]

32)

# 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 Care and support (including social security or other schemes)	Yes Yes
HIV impact alleviation Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support	Yes Yes
Reduction of income inequalities as they relate to HIV prevention/treatment, care and/or support Reduction of stigma and discrimination	Yes Yes
Women's economic empowerment (e.g. access to credit, access toland, training) Другие: [впишите]	No

## Page 16

33)

## 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

34)

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

35)

## 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 Yes
Condom provision Yes
HIV testing and counselling No
Sexually transmitted infection services Yes
Antiretroviral treatment No
Care and support No
Другие: [впишите]

## Page 19

36)

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

Yes (0)

## Page 20

37)

#### Part A, Section I: STRATEGIC PLAN

5.1 *IF YES*, for which subpopulations?

a. Women	Yes
b. Young people	Yes
c. Injecting drug users	Yes
d. Men who have sex with men	Yes
e. Sex Workers	Yes
f. Prison inmates	Yes
g. Migrants/mobile populations	Yes
Другие: [ЛЖВ]	Yes

38)

IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:

Оказание бесплатной юридической помощи для ЛЖВ и перечисленных выше групп. Обращение в суд и институт омбудсмена. Официальное документирование случаев нарушения прав с последующей жалобой в правозащитные организации на национальном и международном уровне.

39)

Briefly comment on the degree to which these laws are currently implemented:

Прецеденты имеются, но обращаемость низкая в силу слабой осведомленности и самостигматизации.

## Page 21

40)

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

41)

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

42)

Part A, Section I: STRATEGIC PLAN

7.1 Have the national strategy and national HIV budget been revised accordingly?

No (0)

43)

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

Yes (0)

## Page 25

44)

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)

45)

7.4 Is HIV programme coverage being monitored?

Yes (0)

## Page 26

46)

Part A, Section I: STRATEGIC PLAN

**Question 7.4 (continued)** 

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

Yes (0)

47)

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

Yes (0)

## Page 27

48)

Part A, Section I: STRATEGIC PLAN

**Question 7.4 (b) (continued)** 

IF YES, for which population groups?

- 1. Инъекционные потребители наркотиков 2. Мужчины имеющие половой контакт с мужчинами
- 3.Секс-работники 4.Заключенные 5.Беременные женщины 6.Больные инфекцией передающимися половым путем 7.Организованная, неорганизованная молодежь (в 2009)

49)

Briefly explain how this information is used:

Для планирования активности, подачи заявок на финансирование и будет использована для разработки новой Госпрограммы по ВИЧ/СПИДу

## Page 28

<sup>50)</sup> Part A, Section I: STRATEGIC PLAN

**Question 7.4 (continued)** 

(c) Is coverage monitored by geographical area?

Yes (0)

### Page 29

51)

Part A, Section I: STRATEGIC PLAN

Question 7.4 (c) (continued)

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

В 2008 – в 5 регионах республики; В 2009 – в 8 регионах республики; (города, районы)

52)

Briefly explain how this information is used:

Для планирования активности, подачи заявок на финансирование и будет использована для разработки новой Госпрограммы по ВИЧ/СПИДу

53)

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

54)

Part A, Section I: STRATEGIC PLAN

**Question 7.5 (continued)** 

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

7 (7)

55)

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

1.Проведение АРТ 2.Профилактика вертикального пути передачи ВИЧ-инфекции 3.Внедрение программ по снижению вреда (ЗМТ, ПОШ) 4.Охват исследованием по ДЭН всех регионов республики 5.Обеспечение безопасности донорской крови за счет приобретения и установки холодильных установок в республиканском и в Ошском областном центре крови для карантинизации донорской крови. 6.Открытие двух хосписов для СПИД больных.

56)

#### What are remaining challenges in this area:

1.недостаточное финансирование 2.проблемы в координации планирования стратегий и их исполнения.

57)

## 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 No
Other high officials Yes
Other officials in regions and/or districts Yes

58)

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

59)

2.1 IF YES, when was it created?

Please enter the year in yyyy format 1997

60)

2.2 IF YES, who is the Chair?

Name Вице-премьер-министр Кыргызской Республики Position/title Калимбетова Т.Б.

61)

## 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?	No
have an action plan?	Yes
have a functional Secretariat?	Yes
meet at least quarterly?	Yes
review actions on policy decisions regularly?	No
actively promote policy decisions?	No
provide opportunity for civil society to influence decision-making?	No
strengthen donor coordination to avoid parallel funding and duplication of effort in programming an reporting?	d No

## Page 33

62)

## Part A, Section II: POLITICAL SUPPORT

**Question 2.3 (continued)** 

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

Please enter an integer greater than or equal to 1

26

63)

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

Please enter an integer greater than or equal to 1

4

64)

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

Please enter an integer greater than or equal to 1

1

#### Page 34

65)

## 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?

No (0)

#### Page 35

66)

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

Yes

Coordination with other implementing partners

Yes

Capacity-building Yes Другие: [впишите]

67)

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

No (0)

## Page 38

68)

Part A, Section II: POLITICAL SUPPORT

**Question 6.1 (continued)** 

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

4 (4)

69)

What are remaining challenges in this area:

В связи с объединением в 2008 г. СМКК и РЧПК и переводом секретариата под ведомство Минздрава, вопросы ВИЧ потеряли первостепенную значимость и снизилась роль гражданского общества при принятие политических решений.

#### 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)
- 1. Greater involvement of men in reproductive health programmes (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? Yes teacher training? Yes

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 Injectucation world

Stigma and discrimination reduction

Condom promotion

HIV testing and counselling

Reproductive health, including sexually transmitted infections prevention and treatment

Vulnerability reduction (e.g. income generation)

Drug substitution therapy Needle & syringe exchange Injecting drug user, Men having sex with men, Sex workers, Prison inmates

Injecting drug user, Men having sex with men, Sex workers, Prison inmates

Injecting drug user, Men having sex with men, Sex workers, Prison inmates

Injecting drug user, Men having sex with men,

Sex workers, Prison inmates

Injecting drug user, Men having sex with men, Sex workers, Prison inmates

Injecting drug user, Prison inmates Injecting drug user, Prison inmates

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79)

#### 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)

80)

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

Расширились ПОШ и ОЗТ, вырос охват клиентов Внедрение ОЗТ и расширение ПОШ в учреждения пенитенциарной системы Институционализация учебно-образовтельных программ

81)

## What are remaining challenges in this area:

Не стабильность политической среды для внедрения и устойчивого развития профилактических программ из-за недостаточной осведомленности лиц принимающих решение, вследствие частой ротации политических лидеров

## Page 45

82)

#### Part A, III. PREVENTION

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

Yes (0)

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83)

## Part A, III. PREVENTION

## **Question 4 (continued)**

IF YES, how were these specific needs determined?

По результатам исследований (анкетирование, фокус-группы, анализ существующих документов и анализ кейс-стади)

84)

## 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 Agree prevention and treatment

School-based HIV education for young people HIV prevention for out-of-school young people HIV prevention in the workplace

Agree Agree

Agree

Другие: [впишите]

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85)

Part A, III. PREVENTION

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

6 (6)

86)

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

В 2009 году МЗ КР совместно с Немецким банком развития провели в рамках программы «Профилактики ВИЧ/СПИД» начали оснащение лабораторной службы СПИД и службы крови. Были усовершенствованы нормативно-правовые акты (клинические протоколы и стандарты) способствующие реализации программ профилактики ВИЧ. Создан центрально-азиатский учебно-информационный центр снижения вреда. Улучшена методическая база по развитию профилактических учебных программ для школ

87)

What are remaining challenges in this area:

недостаток финансовых средств и кадровых ресурсов существенно тормозят внедрение и развитие профилактических программ.

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88)

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

89)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

1.1 IF YES, does it address barriers for women?

Yes (0)

90)

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

Yes (0)

91)

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

## Page 50

Yes (0)

92)

## Part A, Section IV: TREATMENT, CARE AND SUPPORT

## Question 2 (continued)

## IF YES, how were these determined?

По результатам исследований (анкетирование, фокус-группы, анализ существующих документов и программных данных, а так же анализ кейс-стади) и входе национальных и региональных страновых консультаций, международных и национальных мониторинговых визитов.

93)

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

Другие: [впишите]

## Page 51

94)

## 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)

95)

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?

No (0)

## Page 53

96)

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?

4 (4)

97)

What are remaining challenges in this area:

Нахватает кадрового потенциала.

#### Page 54

98)

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

99)

#### 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

100)

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

No (0)

## Page 65

101)

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

Yes (0)

## Page 66

102)

5.1 IF YES, is the national M&E Unit based

in the National AIDS Commission (or equivalent)? in the Ministry of Health? в другом месте?

# 103) Number of permanent staff:

Please enter an integer greater than or equal to 0 5

# 104) Number of temporary staff:

Please enter an integer greater than or equal to 0 0

Page 67

105)

## Part A, Section V: MONITORING AND EVALUATION

## **Question 5.2 (continued)**

Please describe the details of <u>all</u> the permanent staff:

	Position	Full time/Part time?	Since when? (please enter the year in yyyy format)
Permanent staff 1	заведующий отдела	Full time	2009
	специалист по мониторингу специалист по мониторингу		2009 2009

Permanent staff 4 специалист по мониторингу Full time 2009 специалист по IT-Permanent staff 5 2009 Full time технологиям Permanent staff 6 Permanent staff 7 Permanent staff 8 Permanent staff 9 Permanent staff

Permanent staff

11

Permanent staff

Permanent staff

13

Permanent staff

Permanent staff

15

#### Page 68

106)

## Part A, Section V: MONITORING AND EVALUATION

5.3 IF YES, are there mechanisms in place to ensure that all major implementing partners submit their M&E data/reports to the M&E Unit for inclusion in the national M&E system?

No (0)

## Page 70

107)

## 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?

Yes, meets regularly (0)

108)

6.1 Does it include representation from civil society?

Yes (0)

## Page 71

109)

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

No (0)

## Page 73

110)

7.3 Is there a functional\* Health Information System?

At national level Yes
At subnational level Yes

## Page 74

## 111) 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)?

на областном и районном уровне

112)

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

Yes (0)

113)

- 9. To what extent are M&E data used
- 9.1 in developing / revising the national AIDS strategy?:

3 (3)

114)

## Provide a specific example:

При подготовке заявок на финансирование Глобальным Фондом, при среднесрочной оценке и при составлении новой Госпрограммы

115)

What are the main challenges, if any?

Отсутствие национального положения по Мониторингу и Оценки

#### Page 75

116) Part A, Section V: MONITORING AND EVALUATION

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

2 (2)

117)

## Provide a specific example:

Не все партнеры предоставляют информацию о финансовых затратах, что усложняет расчет финсового планирования

118)

What are the main challenges, if any?

Отсутствие национального положения по Мониторингу и Оценке

## Page 76

119)

## Part A, Section V: MONITORING AND EVALUATION

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

3 (3)

120)

## Provide a specific example:

При подготовке заявок на финансирование Глобальным Фондом, при среднесрочной оценке и при составлении новой Госпрограммы

121)

## What are the main challenges, if any?

Отсутствие национального положения по Мониторингу и Оценке

## Page 77

## 122) 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

## 123) 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)

124)

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

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

## Page 79

# 125) Please enter the number of people trained <u>at subnational level.</u>

Please enter an integer greater than 0

8

Please enter the number of people trained <u>at service delivery level including civil society.</u>

Please enter an integer greater than 0

49

#### Page 80

127)

Part A, Section V: MONITORING AND EVALUATION

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

Yes (0)

## Page 81

# 128) Part A, Section V: MONITORING AND EVALUATION

**Question 10.2 (continued)** 

IF YES, describe what types of activities:

исследование по организованной и неорганизованной молодежи, исследование по дозорному эпиднадзору (ДЭН)

#### Page 82

# 129) 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?

6 (6)

130)

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

ГФСТМ, СААР и Кархап используют единную инсттрументарий программного мониторинга (база данных и УИК)

131)

What are remaining challenges in this area:

Желательно чтоб все доноры использовали данный инструментарий, что позволит оценить реальный охват профпрограммами ключевых групп насеелния

#### Page 83

132)

## 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

133)

#### 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:

статья 13 О запрете на ограничение прав и стигматизацию лиц, живущих с ВИЧ/СПИДом, закона КР о ВИЧ/СПИДе в КР.

134)

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

Yes (0)

## Page 85

135)

Part B, Section I. HUMAN RIGHTS

## 2.1 IF YES, for which subpopulations?

a. Women	Yes
b. Young people	Yes
c. Injecting drug users	Yes
d. Men who have sex with men	Yes
e. Sex Workers	Yes
f. prison inmates	Yes
g. Migrants/mobile populations	Yes
Другие: [впишите]	

136)

# IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:

Оказание бесплатной юридической помощи для ЛЖВ и перечисленные выше групп. Обращение в суд и институт омбудсмена. Официальное документирование случаев нарушения прав с последующей жалоб в правозащитные организации на национальном и международном уровне.

137)

## Briefly describe the content of these laws:

Закон о ВИЧ/СПИДе определяет порядок правого регулирования вопросов предупреждения распространения ВИЧ/СПИДа на территории Кыргызской Республики, обеспечения системы мероприятий по защите прав лиц, живущих с ВИЧ/СПИДом, безопасности граждан Кыргызской Республики и национальной безопасности в соответствии с нормами международного права.

138)

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

Прецеденты имеются, но обращаемость низкая в силу слабой осведомленности и самостигматизацией.

## Page 86

139)

#### 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

## 140) 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

141)

Part B, Section I. HUMAN RIGHTS

**Question 4 (continued)** 

IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:

статьи закона о ВИЧ/СПИДе: Государственная гарантия, права и обязанности ЛЖВ, социальная защита ЛЖВ и ЛПВ, детей живущих с ВИЧ/СПИДом. Компоненты госпрограммы: совершенствование госполитики в области ВИЧ/СПИДа, Обеспечение медицинской помощи ЛЖВ, социальная поддержка ЛЖВ и ЛПВ, юридическая поддержка ЛЖВ

142)

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

143)

Part B, Section I. HUMAN RIGHTS

**Question 5 (continued)** 

IF YES, briefly describe this mechanism:

НПО документирование случаев. Затем правовая клиника – оказание адвакационной помощи и защиты в суде.

144)

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

Yes (0)

## Page 91

145)

Part B, Section I. HUMAN RIGHTS

**Question 6 (continued)** 

IF YES, describe some examples:

В составе СМКК, в рабочие группы, в обсуждение законодательства

146)

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

147)

## 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:

ограничивается минимальным охватом >60% услуги по профилактике ВИЧ, за счет донорских средств

148)

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

Yes (0)

## Page 93

149)

#### Part B, Section I. HUMAN RIGHTS

8.1 In particular, does the country have a policy to ensure access to HIV prevention, treatment, care and support for women outside the context of pregnancy and childbirth?

Yes (0)

150)

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

151)

## Part B, Section I. HUMAN RIGHTS

Question 9 (continued)

IF YES, briefly describe the content of this policy:

оказание услуг для ЛЖВ и всех групп ключевого населения является приоритетом государственной политики в области ВИЧ-инфекции

152)

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

153)

## Part B, Section I. HUMAN RIGHTS

**Question 9.1 (continued)** 

IF YES, briefly explain the different types of approaches to ensure equal access for different populations:

Для ПИН преимущественнообеспечивается потребность в чистом инструментарии и заместительной терапии для СР и МСМ обеспечивается преимущественно в средствах индивидуальной защите и лечение ИППП, Для ЛЖВ в АРВТ, для всех в ИОМ. Другие услуги предоставляются исходя из их потребностей. В стране разработаны минимальный, расширенный и комплексный пакеты для каждой из групп ключевого населения.

154)

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

Yes (0)

155)

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?

No (0)

#### Page 97

156)

- 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)

157)

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

No (0)

158)

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

No (0)

## Page 98

159)

Part B, Section I. HUMAN RIGHTS

**Question 12 (continued)** 

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

Правовые клиники оказывающие помощь ЛЖВ и ключевому населению, помимо консультативной и практической помощи в отстаивание прав, так же занимаются адвокацией и продвижением прав этих групп на уровне государственных структур и на уровне гражданского сектора. Ими, а так же другими СПИД-сервисными организациями, разрабатываются и издаются ИОМ, а так же проводится оценка и мониторинг соблюдения этих прав.

## Page 99

160)

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)

161)

- Legal aid systems for HIV casework

No (0)

162)

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

Yes (0)

163)

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

Yes (0)

## Page 100

164)

Part B, Section I. HUMAN RIGHTS

**Question 15 (continued)** 

IF YES, what types of programmes?

MediaYesSchool educationYesPersonalities regularly speaking outNoВыступление ЛЖВ и видео фильмы Yes

#### **Page 101**

165)

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?

7 (7)

166)

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

Доклад по наркополитике 2009 г. Повысилась активность сообщества ЛЖВ в отстаивание своих прав, так например в правовые клиники в 2009 году обратилось около 1000 человек.

167)

What are remaining challenges in this area:

Нет четко прописанных механизмов и санкций за нарушение прав и дискриминацию ЛЖВ и ключевого населения

#### **Page 102**

168)

#### 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)

169)

What are remaining challenges in this area:

низкая правовая культура, не участие института омбудсмена

## **Page 103**

170)

## 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)

171)

## Comments and examples:

Продвижение программы ОЗТ

#### Page 104

172)

#### 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)

173)

#### Comments and examples:

Принимали участие в разработке планов мероприятий и бюджетов для заявок 8 и 9 раундов ГФСТМ

## **Page 105**

174)

a. the national AIDS strategy?

4 (4)

175)

b. the national AIDS budget?

3 (3)

176)

c. national AIDS reports?

3 (3)

Comments and examples:

Часть мероприятий выполнявшихся НПО была передана государственным структурам. При этом институционализации в полной мере не произошло, так как услуги выполняются за счет донорских средств.

## **Page 106**

178)

a. developing the national M&E plan?

3 (3)

179)

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

3 (3)

180)

c. M&E efforts at local level?

3 (3)

#### **Page 107**

# 181) 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)?

4 (4)

182)

Comments and examples:

Сформирован союз ЛЖВ, Активно работает форум НПО (объеденяющих 120 НПО и сети), работает координационный совет СПИД-сервисных НПО. Происходит открытое выдвижение членов СМКК от НПО

#### **Page 108**

183)

a. adequate financial support to implement its HIV activities?

4 (4)

184)

b. adequate technical support to implement its HIV activities?

4 (4)

185)

## Comments and examples:

Программы выполняемые НПО охватывает более 50% национального бюджета.

## **Page 109**

# 186) 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	51-75%		
- Men who have sex with men	>75%		
- Sex workers	>75%		
Testing and Counselling	<25%		
Reduction of Stigma and Discrimination	n 51-75%		
Clinical services (ART/OI)*	<25%		
Home-based care	>75%		
Programmes for OVC**	>75%		

#### **Page 110**

187)

## 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)

188)

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

Сформирован союз ЛЖВ, Активно работает форум НПО (объеденяющих 120 НПО и сети), работает координационный совет СПИД-сервисных НПО. Происходит открытое выдвижение членов СМКК от НПО

189)

## What are remaining challenges in this area:

вытеснение НПО сферы услуг. Конкуренция и разногласие внутри НПО

## **Page 111**

190)

## Part B, Section III: PREVENTION

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

Yes (0)

## **Page 112**

191)

## 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 Agree Risk reduction for men who have sex with men Agree Risk reduction for sex workers Agree Reproductive health services including sexually transmitted infections Agree prevention and treatment School-based HIV education for young people Agree HIV prevention for out-of-school young people Agree HIV prevention in the workplace Agree Другие: [впишите]

## **Page 113**

192)

## 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?

7 (7)

## **Page 114**

193)

## 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**

194)

# 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	N/A		
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		
Другие программы: [впишите]			

## **Page 116**

195)

## 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)

196)

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

Бесперебойное обеспечение APB препаратами и препаратами для оппортунистических инфекций, своевременный пересмотр клинических протоколов по лечению

197)

What are remaining challenges in this area:

Низкое приверженность к лечению

## **Page 117**

198)

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)