

Bolivia (Plurinational State of) Report NCPI

NCPI Header

is indicator/topic relevant?: Yes

is data available?: Yes

Data measurement tool / source: NCPI

Other measurement tool / source:

From date: 01/01/2013

To date: 12/31/2013

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Data measurement tool / source: GARPR

Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any: Jorge Luis Medrano Llano/ Consultor de M&E del Programa Nacional ITS/VIH/SIDA

Postal address:

Telephone: 591 (2) 2115022

Fax: 591 (2) 2315376

E-mail: jlmedrano@gmail.com

Describe the process used for NCPI data gathering and validation: Encuestas realizadas a instituciones clave. Taller de validación mediante mesas de trabajo organizadas en dos grupos: Cooperación para el Desarrollo y Sociedad Civil. Llenado de una encuesta modelo que resume los hallazgos de cada actor, mediante la estructuración de una base de datos de la información obtenida.

Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions: Los desacuerdos se resolvieron mediante procesos de discusión en cada grupo poblacional, aunque se ha tratado de sintetizar las opiniones en base a consensos, en los pocos casos de discrepancia.

Highlight concerns, if any, related to the final NCPI data submitted (such as data quality, potential misinterpretation of questions and the like): Las percepciones no han sufrido grandes variaciones respecto a las mediciones anteriores aunque se ha encontrado un cambio importante en la participación de la sociedad civil

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

Organization	Names/Positions	Respondents to Part A
Programa Nacional ITS/VIH/SIDA	Carola Valencia/Coordinadora Nacional	A1,A2,A3,A4,A5,A6
Programas Departamentales ITS/VIH/SIDA	Juan Vega Ticona, Alberto Cordero, Luz Mirna Rivera, Beatriz Cazas, Carlos Romer. Jefes de Programas Departamentales	A1,A2,A3,A4,A5,A6
Unidad de Planificación del Ministerio de Salud	Richard Garcia Fuentes/Técnico de Planificación	A1,A2,A3,A4,A5,A6
CONASIDA, Educación	Rodolfo Vargas, Técnico delegado al CONASIDA	A1,A2,A3,A4,A5,A6
Hospital Los Andes	Rita Revollo, Médico del Hospital	A1,A2,A3,A4,A5,A6

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

Organization	Names/Positions	Respondents to Part B
REDBOL	Violeta Ross, Presidenta	B1,B2,B3,B4,B5
Mecanismo de Coordinación de País	Ronald Céspedes, Presidente	B1,B2,B3,B4,B5
Family Care International	Alexia Escobar, Directora	B1,B2,B3,B4,B5
Fundación Mano Diversa	Frank Arteaga, Representante	B1,B2,B3,B4,B5
Sistema de Naciones Unidas (OPS/OMS, UNICEF, UNFPA y PMA)	Profesionales y oficiales delgados	B1,B2,B3,B4,B5
Fundación Hivos, RP del Fondo Mundial	Claudia Cardozo, Directora	B1,B2,B3,B4,B5
CIES	Maria Eugenia Rojas, delegada	B1,B2,B3,B4,B5
PROSALUD	Representante Nacional	B1,B2,B3,B4,B5
Comité de Acceso Universal GBT-HSH	Jaime Cabezas, representante	B1,B2,B3,B4,B5
Organización de Trabajadoras Nocturnas	Lily Cortez, representante	B1,B2,B3,B4,B5

A.I Strategic plan

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

IF YES, what is the period covered: 2013-2018

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.: 1.- Ahora es multisectorial y multiactorial 2.- Mayor énfasis en acciones de prevención con enfoque de género e interculturalidad.

IF YES, complete questions 1.1 through 1.10; IF NO, go to question 2.

1.1. Which government ministries or agencies have overall responsibility for the development and implementation of the national multi-sectoral strategy to respond to HIV?: 1.- Ministerio de Salud. 2.- Ministerio de Educación. 3.- Ministerio de Justicia. 4.- Gobernaciones 5.- Gobiernos Municipales.

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

Education:

Included in Strategy: Yes

Earmarked Budget: Yes

Health:

Included in Strategy: Yes

Earmarked Budget: Yes

Labour:

Included in Strategy: Yes

Earmarked Budget: Yes

Military/Police:

Included in Strategy: Yes

Earmarked Budget: Yes

Social Welfare:

Included in Strategy: No

Earmarked Budget: No

Transportation:

Included in Strategy: Yes

Earmarked Budget: Yes

Women:

Included in Strategy: No

Earmarked Budget: Yes

Young People:

Included in Strategy: Yes

Earmarked Budget: Yes

Other:

Included in Strategy: No

Earmarked Budget: No

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?:

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

KEY POPULATIONS AND OTHER VULNERABLE POPULATIONS:

Discordant couples: Yes

Elderly persons: No

Men who have sex with men: Yes

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Sex workers: Yes

Transgender people: Yes

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations: Yes

SETTINGS:

Prisons: Yes

Schools: Yes

Workplace: No

CROSS-CUTTING ISSUES:

Addressing stigma and discrimination: Yes

Gender empowerment and/or gender equality: Yes

HIV and poverty: Yes

Human rights protection: Yes

Involvement of people living with HIV: Yes

IF NO, explain how key populations were identified?:

1.4. What are the identified key populations and vulnerable groups for HIV programmes in the country?

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: Yes

Prison inmates: No

Sex workers: Yes

Transgender people: Yes

Women and girls: Yes

Young women/young men: Yes

Other specific key populations/vulnerable subpopulations [write in]:

: Yes

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

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

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 implementation?: Yes

e) A monitoring and evaluation framework?: Yes

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

IF ACTIVE INVOLVEMENT, briefly explain how this was organised.: POBLACION: Atraves de comites nacionales y departamentales, organizaciones de poblaciones vulnerables, organizacion de poblacion genral (jvenes e indigenas)

IF NO or MODERATE INVOLVEMENT, briefly explain why this was the case.:

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

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

IF SOME PARTNERS or NO, briefly explain for which areas there is no alignment/harmonization and why:

2.1. Has the country integrated HIV in the following specific development plans?

SPECIFIC DEVELOPMENT PLANS:

Common Country Assessment/UN Development Assistance Framework: Yes

National Development Plan: Yes

Poverty Reduction Strategy: Yes

National Social Protection Strategic Plan: Yes

Sector-wide approach: Yes

Other [write in]:

:

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

HIV-RELATED AREA INCLUDED IN PLAN(S):

Elimination of punitive laws: Yes

HIV impact alleviation (including palliative care for adults and children): Yes

Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support: Yes

Reduction of income inequalities as they relate to HIV prevention/ treatment, care and /or support: Yes

Reduction of stigma and discrimination: Yes

Treatment, care, and support (including social protection or other schemes): Yes

Women's economic empowerment (e.g. access to credit, access to land, training): No

Other [write in]:

:

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

3.1. IF YES, on a scale of 0 to 5 (where 0 is "Low" and 5 is "High"), to what extent has the evaluation informed resource allocation decisions?:

4. Does the country have a plan to strengthen health systems?: Yes

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

5. Are health facilities providing HIV services integrated with other health services?

a) HIV Counselling & Testing with Sexual & Reproductive Health: Many

b) HIV Counselling & Testing and Tuberculosis: Many

c) HIV Counselling & Testing and general outpatient care: Few

d) HIV Counselling & Testing and chronic Non-Communicable Diseases: None

e) ART and Tuberculosis: Many

f) ART and general outpatient care: Many

g) ART and chronic Non-Communicable Diseases: None

h) PMTCT with Antenatal Care/Maternal & Child Health: Many

i) Other comments on HIV integration: :

6. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate strategy planning efforts in your country’s HIV programmes in 2013?: 10

Since 2011, what have been key achievements in this area: Incremento de cobertura de pruebas rapidas de VIH en embarazadas Mejora el acceso universal a TAR. Acciones de prevencion en poblacion vulnerable.

What challenges remain in this area:: Poblacion vulnerables acudea los CDVRS. Adherencia de TAR deficiente. Prevecnion de ITS en poblacion general y poblacion vulnerable.

A.II Political support and leadership

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

A. Government ministers: Yes

B. Other high officials at sub-national level: Yes

1.1. In the last 12 months, have the head of government or other high officials taken action that demonstrated leadership in the response to HIV?: Yes

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership: Viciministerio de salud y gobernaciones departamentales

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

IF NO, briefly explain why not and how HIV programmes are being managed::

2.1. IF YES, does the national multisectoral HIV coordination body:

Have terms of reference?: Yes

Have active government leadership and participation?: Yes

Have an official chair person?: Yes

IF YES, what is his/her name and position title?: Presidente del CONASIDA: Dr. Juan Carlos Calvimontes

Have a defined membership?: Yes

IF YES, how many members?: Salud, Educacion, Justicia, Colegio Medico y asociacion de municipios

Include civil society representatives?: Yes

IF YES, how many?: PVVS,TSC, GLBT

Include people living with HIV?: Yes

IF YES, how many?: REDBOL

Include the private sector?: No

Strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?: Yes

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

IF YES, briefly describe the main achievements:: Armonizar la respuesta intersectorial y sociedad civil

What challenges remain in this area:: Falta en asumir la responsabilidad plena a nivel departamental

4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?: 5

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

Capacity-building: Yes

Coordination with other implementing partners: Yes

Information on priority needs: No

Procurement and distribution of medications or other supplies: No

Technical guidance: Yes

Other [write in]:

: Yes

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

6.1. IF YES, were policies and laws amended to be consistent with the National HIV Control policies?: Yes

IF YES, name and describe how the policies / laws were amended: 1.- Armonización con la ley de Marco de autonomías departamentales.

Name and describe any inconsistencies that remain between any policies/laws and the National AIDS Control policies:: Mas que incoherencia se trata de ajustar la ley 3729 en el marco de las competencias de las autonomías departamentales

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the political support for the HIV programme in 2013?: 6

Since 2011, what have been key achievements in this area:: Mayor participacion de la sociedad civil en diferentes niveles de gestion Aliniamiento de la cooperacion externa a las politicas nacioles en salud emanadas por el Minsterio de salud como un ente rector nacional.

What challenges remain in this area:: Sostenibilidad y multisectorialidad local

A.III Human rights

1.1. Does the country have non-discrimination laws or regulations which specify protections for specific key populations and other vulnerable groups? Select yes if the policy specifies any of the following key populations and vulnerable groups:

People living with HIV: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: Yes

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations [write in]:

: Yes

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:
Yes

IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws:: Proteccion de las personas centra en toda forma de discriminacion

Briefly explain what mechanisms are in place to ensure these laws are implemented:: Dificacion de competencias, sectoriales segun niveles de gestion.

Briefly comment on the degree to which they are currently implemented:: La ley tiene sus mecanismos de reglamentaion que facilitan su aplicacion.

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and vulnerable groups?: No

IF YES, for which key populations and vulnerable groups?:

People living with HIV: No

Elderly persons: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]::

: No

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

Briefly comment on how they pose barriers::

A.IV Prevention

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

IF YES, what key messages are explicitly promoted?:

Delay sexual debut: No

Engage in safe(r) sex: Yes

Fight against violence against women: Yes

Greater acceptance and involvement of people living with HIV: Yes

Greater involvement of men in reproductive health programmes: No

Know your HIV status: Yes

Males to get circumcised under medical supervision: No

Prevent mother-to-child transmission of HIV: Yes

Promote greater equality between men and women: Yes

Reduce the number of sexual partners: No

Use clean needles and syringes: No

Use condoms consistently: Yes

Other [write in]::

: No

1.2. In the last year, did the country implement an activity or programme to promote accurate reporting on HIV by the media?: No

2. Does the country have a policy or strategy to promote life-skills based HIV education for young people?: No

2.1. Is HIV education part of the curriculum in:

Primary schools?: No

Secondary schools?: Yes

Teacher training?: Yes

2.2. Does the strategy include

a) age-appropriate sexual and reproductive health elements?: No

b) gender-sensitive sexual and reproductive health elements?: No

2.3. Does the country have an HIV education strategy for out-of-school young people?: No

3. Does the country have a policy or strategy to promote information, education and communication and other preventive health interventions for key or other vulnerable sub-populations?: No

Briefly describe the content of this policy or strategy::

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

People who inject drugs:

Men who have sex with men:

Sex workers:

Customers of sex workers:

Prison inmates:

Other populations [write in]:

:

3.2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate policy efforts in support of HIV prevention in 2013?: 7

Since 2011, what have been key achievements in this area:: Mayor cobertura de pruebas de VIH en mujeres embarazadas. Estrategias focalizadas en poblacion clave.

What challenges remain in this area:: Alcanze de poblacion masculina. Alcanze de poblacion joven.

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

IF YES, how were these specific needs determined?: Mesas de trabajo locales.

IF YES, what are these specific needs? : Alcanze de poblacion mas joven.

4.1. To what extent has HIV prevention been implemented?

The majority of people in need have access to...:

Blood safety: Strongly agree

Condom promotion: Agree

Economic support e.g. cash transfers: Agree

Harm reduction for people who inject drugs: N/A

HIV prevention for out-of-school young people: Disagree

HIV prevention in the workplace: Agree

HIV testing and counseling: Strongly agree

IEC on risk reduction: Agree

IEC on stigma and discrimination reduction: Agree

Prevention of mother-to-child transmission of HIV: Strongly agree

Prevention for people living with HIV: Strongly agree

Reproductive health services including sexually transmitted infections prevention and treatment: Agree

Risk reduction for intimate partners of key populations: Disagree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Agree

Reduction of gender based violence: Agree

School-based HIV education for young people: Agree

Treatment as prevention: Strongly agree

Universal precautions in health care settings: Agree

Other [write in]:

:

5. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in implementation of HIV prevention programmes in 2013?: 8

A.V Treatment, care and support

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

If YES, Briefly identify the elements and what has been prioritized:: Acceso universal a ARV. Desconcentracion de atencion a las redes de salud.

Briefly identify how HIV treatment, care and support services are being scaled-up?: Mediante un proceso de desconcentracion en las redes de servicios de salud.

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

The majority of people in need have access to...:

Antiretroviral therapy: Strongly agree

ART for TB patients: Agree

Cotrimoxazole prophylaxis in people living with HIV: Agree

Early infant diagnosis: Agree

Economic support: Disagree

Family based care and support:

HIV care and support in the workplace (including alternative working arrangements):

HIV testing and counselling for people with TB: Disagree

HIV treatment services in the workplace or treatment referral systems through the workplace: Agree

Nutritional care: Agree

Paediatric AIDS treatment: Agree

Palliative care for children and adults Palliative care for children and adults: Agree

Post-delivery ART provision to women: Strongly agree

Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault): Strongly agree

Post-exposure prophylaxis for occupational exposures to HIV: Strongly agree

Psychosocial support for people living with HIV and their families: Strongly agree

Sexually transmitted infection management: Strongly agree

TB infection control in HIV treatment and care facilities: Agree

TB preventive therapy for people living with HIV: Agree

TB screening for people living with HIV: Agree

Treatment of common HIV-related infections: Agree

Other [write in]::

:

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

Please clarify which social and economic support is provided: El acceso a los ARV es totalmente gratuitamente.

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

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

IF YES, for which commodities?: ARV.

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care, and support programmes in 2013?: 9

Since 2011, what have been key achievements in this area?: Ampliacion de la cobertura. Inicio temprano.

What challenges remain in this area?: Adherencia terapeutica.

6. Does the country have a policy or strategy to address the needs of orphans and other vulnerable children?: No

6.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: No

6.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children?: No

7. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2013?: 1

Since 2011, what have been key achievements in this area::

What challenges remain in this area:: Carencia de un politica especifica a nivel lical

A.VI Monitoring and evaluation

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

Briefly describe any challenges in development or implementation:: De momento esto es solo en los CDVIRS.

1.1. IF YES, years covered: PEM 2013-2018

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

Briefly describe what the issues are::

2. Does the national Monitoring and Evaluation plan include?

A data collection strategy: Yes

IF YES, does it address::

Behavioural surveys: Yes

Evaluation / research studies: Yes

HIV Drug resistance surveillance: Yes

HIV surveillance: Yes

Routine programme monitoring: Yes

A data analysis strategy: Yes

A data dissemination and use strategy: Yes

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

Guidelines on tools for data collection: No

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

3.1. IF YES, what percentage of the total HIV programme funding is budgeted for M&E activities?: 8

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

Briefly describe any obstacles::

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

In the Ministry of Health?: Yes

In the National HIV Commission (or equivalent)?: Yes

Elsewhere?: No

If elsewhere, please specify:

4.2. How many and what type of professional staff are working in the national M&E Unit?

POSITION [write in position titles]	Fulltime or Part-time?	Since when?
	Full-time	

POSITION [write in position titles]	Fulltime or Part-time?	Since when?
2011		

4.3. Are there mechanisms in place to ensure that all key partners submit their M&E data/reports to the M&E Unit for inclusion in the national M&E system?: Yes

Briefly describe the data-sharing mechanisms:: CAI Nacional.

What are the major challenges in this area:: No se dispone toda la informacion desagregado segun directrices determinados de los asociados.

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

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

IF YES, briefly describe the national database and who manages it.: Base de datos de notificacion. Base de datos de seguimiento a pacientes en TARV Consolidacion de indicadores.

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

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

6.2. Is there a functional Health Information System?

At national level: Yes

At subnational level: Yes

IF YES, at what level(s)?: Departamental

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

7.2. Is HIV programme coverage being monitored?: Yes

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

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

IF YES, for which population groups?: Departamental.

Briefly explain how this information is used::

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

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

Briefly explain how this information is used::

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

9. How are M&E data used?

For programme improvement?: Yes

In developing / revising the national HIV response?: Yes

For resource allocation?: Yes

Other [write in]::

: No

Briefly provide specific examples of how M&E data are used, and the main challenges, if any:: Embarazadas, niños y población clave

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

At national level?: Yes

IF YES, what was the number trained:: a nivel nacional

At subnational level?: Yes

IF YES, what was the number trained:

At service delivery level including civil society?: Yes

IF YES, how many?:

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

IF YES, describe what types of activities: Vigilancia epidemiológica

11. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the HIV-related monitoring and evaluation (M&E) in 2013?: 8

Since 2011, what have been key achievements in this area:: Sistema unico de informacion. Sistemas de redes de salud.

What challenges remain in this area:: Incorporar mayor informacion sobre que no acceden a los ARV. Ampliacion de las coberturas por todas las redes de servicios de salud

B.I Civil Society involvement

1. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?: 3

Comments and examples:: SOCIEDAD CIVIL: No todos, algunas autoridades no hay participacion de la sociedad civil en pleno, sectores, todavia quedan sin participacion COOPERACION EXTERNA: Abogacia en diferentes niveles del sistema en salud y gobiernos municipales y departamentales

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

Comments and examples:: SOCIEDAD CIVIL: No conocemos documentos finales, a pesar que se socializa, ademas en presupuestos no se participa COOPERACION EXTERNA: Participacion en la elaboracion del PEM 2013-2018

3. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) are the services provided by civil society in areas of HIV prevention, treatment, care and support included in:

a. The national HIV strategy?: 3

b. The national HIV budget?: 3

c. The national HIV reports?: 3

Comments and examples:: SOCIEDAD CIVIL: Estrategias PEP y unidad movil, son financiados por fondos externos, y no por el Programa Nacional de ITS/VIH/SIDA. Investigaciones de la sociedad civil no son incluidas en la sociedad civil. COOPERACION EXTERNA: La sociedad civil participa en proceso de la elaboracion de estrategias nacionales a la epidemia.

4. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is civil society included in the monitoring and evaluation (M&E) of the HIV response?

a. Developing the national M&E plan?: 2

b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?: 2

c. Participate in using data for decision-making?: 2

Comments and examples:: SOCIEDAD CIVIL: No se participa en el CA(comite de analisis de informacion)I como sociedad civil.

5. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is civil society representation in HIV efforts inclusive of diverse organizations (e.g. organisations and networks of people living with HIV, of sex workers, community based organisations , and faith-based organizations)?: 2

Comments and examples:: SOCIEDAD CIVIL: Para la sociedad civil es dificil por temas de presupuesto , incluir a los sectores de la poblacion en la respuesta.

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

a. Adequate financial support to implement its HIV activities?: 3

b. Adequate technical support to implement its HIV activities?: 3

Comments and examples:: SOCIEDAD CIVIL: si se exige para temas particulare, se puede conseguir financiamiento.
COOPERACION EXTERNA: Estas acciones son apoyadas por el FM y el Programa Nacional ITS/VIH/SIDA

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

Prevention for key-populations:

People living with HIV: <25%

Men who have sex with men: <25%

People who inject drugs: <25%

Sex workers: 25-50%

Transgender people: <25%

Palliative care : <25%

Testing and Counselling: <25%

Know your Rights/ Legal services: 51-75%

Reduction of Stigma and Discrimination: 25-50%

Clinical services (ART/OI): <25%

Home-based care: <25%

Programmes for OVC: <25%

8. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts to increase civil society participation in 2013?: 4

Since 2011, what have been key achievements in this area:: SOCIEDAD CIVIL: No se valoara contribucion de la sociedad civil, Actividades con pueblos indigenas. COOPERACION EXTERNA: Conformacion y financiamiento de los comites de acceso universal. Particicipacion en los CONASIDA, CODESIDA y comites de TB-VIH.

What challenges remain in this area:: SOCIEDAD CIVIL: La sociedad civil aliada politicamente, no apoyan las respuestas al VIH. COOPERACION EXTERNA: Mejorar el trabajo conjunto con la sociedad civil y estado en sus diferetnes ministerios e instancias de gestion.

B.II Political support and leadership

1. Has the Government, through political and financial support, involved people living with HIV, key populations and/or other vulnerable sub-populations in governmental HIV-policy design and programme implementation?:

Yes

IF YES, describe some examples of when and how this has happened:: SOCIEDAD CIVIL:Elaboracion del PEM,modificacion de la ley 3729 COOPERACION EXTERNA: Conformacion del CONASIDA,CODESIDA,PEM,TB-VIH. No se ha incluido a jovenes,niños,mujeres,campesinos y otros.

B.III Human rights

1.1. Does the country have non-discrimination laws or regulations which specify protections for specific key populations and other vulnerable subpopulations? Circle yes if the policy specifies any of the following key populations:

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: No

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: No

Prison inmates: Yes

Sex workers: Yes

Transgender people: Yes

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations [write in]:: Indigenas

: Yes

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:
Yes

IF YES to Question 1.1 or 1.2, briefly describe the contents of these laws:: SOCIEDAD CIVIL: LEY 045 COOPERACION EXTERNA: Ley contra el racismo y toda forma de discriminacion.

Briefly explain what mechanisms are in place to ensure that these laws are implemented:: SOCIEDAD CIVIL: Observatorio de DDHH -VIH Comité nacional contra el racismo

Briefly comment on the degree to which they are currently implemented:: SOCIEDAD CIVIL:El comité nacional no funciona regularmente COOPERACION EXTERNA: Funcional parcialmente

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

2.1. IF YES, for which sub-populations?

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: Yes

Transgender people: Yes

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable populations [write in]:

: Yes

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

Briefly comment on how they pose barriers:: SOCIEDAD CIVIL: Se requiere mayoría de edad para el diagnóstico de VIH y TAR
Personas en situación de la calle no reciben TAR

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

Briefly describe the content of the policy, law or regulation and the populations included.:

4. Is the promotion and protection of human rights explicitly mentioned in any HIV policy or strategy?: No

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

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

IF YES, briefly describe this mechanism::

6. Does the country have a policy or strategy of free services for the following? Indicate if these services are provided free-of-charge to all people, to some people or not at all (circle "yes" or "no" as applicable).

Antiretroviral treatment:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: Yes

Provided, but only at a cost: No

HIV prevention services:

Provided free-of-charge to all people in the country: No

Provided free-of-charge to some people in the country: Yes

Provided, but only at a cost: No

HIV-related care and support interventions:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: Yes

Provided, but only at a cost: Yes

If applicable, which populations have been identified as priority, and for which services?: SOCIEDAD CIVIL: Mujeres embarazadas, Trabajadoras sexuales y HSH

7. Does the country have a policy or strategy to ensure equal access for women and men to HIV prevention, treatment, care and support?: No

7.1. In particular, does the country have a policy or strategy to ensure access to HIV prevention, treatment, care and support for women outside the context of pregnancy and childbirth?: No

8. Does the country have a policy or strategy to ensure equal access for key populations and/or other vulnerable sub-populations to HIV prevention, treatment, care and support?: Yes

IF YES, Briefly describe the content of this policy/strategy and the populations included:: SOCIEDAD CIVIL: Poblacion vulnerable HSH, GLBT y TS

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

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

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

IF YES, briefly describe the content of the policy or law:: SOCIEDAD CIVIL: LEY 3729

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

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

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

IF YES on any of the above questions, describe some examples:: SOCIEDAD CIVIL: Observatorio de DDH-VIH Defensoria del pueblo y ley 3729

11. In the last 2 years, have there been the following training and/or capacity-building activities:

a. Programmes to educate, raise awareness among people living with HIV and key populations concerning their rights (in the context of HIV)?: Yes

b. Programmes for members of the judiciary and law enforcement⁴⁶ on HIV and human rights issues that may come up in the context of their work?: No

12. Are the following legal support services available in the country?

a. Legal aid systems for HIV casework: No

b. Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV: No

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

IF YES, what types of programmes?:

Programmes for health care workers: Yes

Programmes for the media: Yes

Programmes in the work place: No

Other [write in]: SOCIEDAD CIVIL: Campañas del día MUndial del VIH/SIDA.

: No

14. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2013?: 5

Since 2011, what have been key achievements in this area:: SOCIEDAD CIVIL: Observatorio de DDHH-VIH ley 045 COOPERACION EXTERNA: Modificación de la ley 3729 y reglamentación. Incorporación del enfoque de DDHH en el PEM y el plan de desarrollo sectorial.

What challenges remain in this area:: SOCIEDAD CIVIL: Aplicabilidad, exigibilidad, contexto de estima prevalece y desconocimiento de leyes y derechos COOPERACION EXTERNA: Aprobación y modificación de la ley 3729.

15. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the effort to implement human rights related policies, laws and regulations in 2013?: 5

Since 2011, what have been key achievements in this area:: Ley 3729

What challenges remain in this area::

B.IV Prevention

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

IF YES, how were these specific needs determined?: COOPERACION EXTERNA: Con la evolucion del PEM, participacion de la sociedad civil.

IF YES, what are these specific needs? : COOPERACION EXTERNA: Mejorar a servicios de prevencion y diferenciacion de publicos por grupo poblaional.

1.1 To what extent has HIV prevention been implemented?

The majority of people in need have access to...:

Blood safety: Agree

Condom promotion: Agree

Harm reduction for people who inject drugs: N/A

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

HIV prevention in the workplace: Disagree

HIV testing and counseling: Agree

IEC on risk reduction: Agree

IEC on stigma and discrimination reduction: Agree

Prevention of mother-to-child transmission of HIV:

Prevention for people living with HIV: Agree

Reproductive health services including sexually transmitted infections prevention and treatment: Agree

Risk reduction for intimate partners of key populations: Disagree

Risk reduction for men who have sex with men: Disagree

Risk reduction for sex workers: Disagree

School-based HIV education for young people: Agree

Universal precautions in health care settings: Agree

Other [write in]: SOCIEDAD CIVIL:Prevencion de TB en PVVS, prevencion de otras ITS en PVVS,planificacion Familiar

:

2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in the implementation of HIV prevention programmes in 2013?: 4

Since 2011, what have been key achievements in this area:: SOCIEDAD CIVIL:Prueba del VIH en embarazadas, algunos municipios estan comprando la prueba del VIH. COOPERACION EXTENA: Incrementar el acceso de pruebas de VIH en mujeres embarazadas.

What challenges remain in this area:: SOCIEDAD CIVIL:No se realiza pre y post consejeria de prueba de VIH Las estrategias de prevencion no estan adaptadas segun la identifiacion de etnias,edad, sexo, geenro y otros COOPERACION EXTERNA: Prevencion en poblacion de adolescentes y jovenes.

B.V Treatment, care and support

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

IF YES, Briefly identify the elements and what has been prioritized:: SOCIEDAD CIVIL:Guias actualizadas de ARV conforme a las guias de la OMSantes de su emision.

Briefly identify how HIV treatment, care and support services are being scaled-up?: SOCIEDAD CIVIL:Una experiencia de descentralizacion de servicios en Santa Cruz. COOPERACION EXTERNA: Desarrollo de una cuenta de acciones para la descentralizacion para los gastos y atencion del control y vigilancia del VIH

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

The majority of people in need have access to...:

Antiretroviral therapy: Strongly agree

ART for TB patients:

Cotrimoxazole prophylaxis in people living with HIV: Agree

Early infant diagnosis: Disagree

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

HIV testing and counselling for people with TB: Agree

HIV treatment services in the workplace or treatment referral systems through the workplace: Strongly disagree

Nutritional care: Disagree

Paediatric AIDS treatment: Agree

Post-delivery ART provision to women: Agree

Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault): Disagree

Post-exposure prophylaxis for occupational exposures to HIV: Agree

Psychosocial support for people living with HIV and their families: Agree

Sexually transmitted infection management: Agree

TB infection control in HIV treatment and care facilities: Agree

TB preventive therapy for people living with HIV: Agree

TB screening for people living with HIV: Agree

Treatment of common HIV-related infections: Agree

Other [write in]: SOCIEDAD CIVIL: Tratamiento de ITS

:

1.2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2013?: 6

Since 2011, what have been key achievements in this area:: SOCIEDAD CIVIL: Deteccion de VIH en mujeres embarazadas, Prevencion de la transmision vertical.

What challenges remain in this area::

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

2.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: No

2.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children?: No

3. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2013?: 6

Since 2011, what have been key achievements in this area:: SOCIEDAD CIVIL: Acceso a pruebas rapidas a mujeres embarazadas y poblaciones vulnerables

What challenges remain in this area:: SOCIEDAD CIVIL: Acceso a pruebas rapidas para la poblacion en general, desarrollo de capacidades del personal de salud en las redes de salud. Descentralizacion podria ser la opcion a la centralizacion de recursos humanos.