



OFFICE OF THE PRIME MINISTER
The National AIDS Coordinating Committee Secretariat

**The National
Commitments and
Policy Instrument
(NCPI) 2021**



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The NACC Secretariat would like to express its deepest gratitude to the stakeholders supporting the National Commitments and Policy Instrument (NCPI) 2021. Your continued efforts, support and assistance throughout the process has been greatly appreciated. To all the participating Ministries, your hard work and dedication has made the completion of this document possible.

To the Civil Society Organizations, your commitment and perspective gave much needed context to the tool and will continue to aid in further discussions and developments within the National HIV and AIDS response.

It is truly gratifying to see the combined efforts of both sectors. Thank you all again for your unwavering contributions.

List of Acronyms

3TC	Lamivudine
ABC	Abacavir
AIDS	Acquired Immune Deficiency Syndrome
AZT	Zidovudine
CSO	Civil Society Organizations
DTG	Dolutegravir
EFV	Efavirenz
FTC	Emtricitabine
GROOTSTT	Grass Roots Organizations Operating Together in Sisterhood in Trinidad and Tobago
HIV	Human Immunodeficiency Virus
LPV/r	Lopinavir with a ritonavir boost
MSM	Men who have sex with Men
NNRTI	Non-nucleoside reverse transcriptase inhibitor
NRTI	Nucleoside reverse transcriptase inhibitor
PAMTT	Patient Advocate Mission Trinidad and Tobago
PrEP	Pre-exposure prophylaxis
RPR	Rapid Plasma Reagin
TDF	Tenofovir disoproxil fumarate
TPHA	Treponema pallidum hemagglutination assay
TPPA	Treponema pallidum particle agglutination assay
VDRL	Venereal Disease Research Laboratory
WHO	World Health Organization

Contributing Stakeholders

PART A

The Ministry of Health

- ✓ *Ensure that 30 million people living with HIV have access to treatment through meeting the 90–90–90 targets by 2020.*
- ✓ *Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018.*
- ✓ *Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high prevalence countries and key populations-gay men, men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners*
- ✓ *Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020*
- ✓ *Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number*
- ✓ *Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights*
- ✓ *Commit to taking AIDS out of isolation through people-centered systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C.*

The Ministry of the Attorney General & Legal Affairs

- ✓ *Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high prevalence countries and key populations-gay men, men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners*
- ✓ *Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020*
- ✓ *Ensure that at least 30% of all service delivery is community-led by 2020.*
- ✓ *Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights*

The Ministry of National Security

- ✓ *Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high prevalence countries and key populations-gay men, men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners*
- ✓ *Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights*

Office of the Prime Minister - Division of Gender & Child Affairs

- ✓ *Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020*

- ✓ *Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number*

The Ministry of Social Development and Family Services

- ✓ *Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020.*
- ✓ *Ensure that at least 30% of all service delivery is community-led by 2020.*

The Ministry of Education

- ✓ *Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number*

The Ministry of Youth Development and National Services

- ✓ *Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number*

The Ministry of Sport & Community Development

- ✓ *Ensure that at least 30% of all service delivery is community-led by 2020.*

PART B

All CSOs participating in the completion of the NCPI tool, supported all commitment areas of Part B.

- **FIRECIRCLE**
- **GROOTSTT**
- **MISISTAHS**
- **PAMTT**
- **RED CROSS**
- **TRINIDAD AND TOBAGO TRANSGENDER COALITION**
- **4LESS INITIATIVE**

National Commitments and Policy Instrument: Part A

* The guidelines for the NCPI define the terms marked with an asterisk (*).

1. Ensure that 30 million people living with HIV have access to treatment through meeting the 90–90–90 targets by 2020.

- Commit to the 90–90–90 targets.
- Address regulations, policies and practices that prevent access to safe, efficacious and affordable generic medicines, diagnostics and related health technologies, including by ensuring the full use of the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) flexibilities, and strengthen regional and local capacity to develop, manufacture and deliver quality-assured affordable health products.

HIV testing

1. Which of the following HIV testing approaches are used in your country (please select all that apply):

- Client-initiated testing and counselling
- Provider-initiated testing and counselling
- Routine antenatal testing
- Dual HIV/syphilis tests in antenatal care
- Community-based testing and counselling
- Home-based (door-to-door) testing
- Lay provider testing
- Self-testing
- Provider-assisted referral (assisted partner notification/index testing)
- Social network-based HIV testing
- Other (please specify): _____

2. Has your country adapted the recommendations from the 2019 WHO Consolidated guidelines on HIV testing services in a national process on testing guidelines?

- Yes, fully
- Yes, partially
- No
- Don't know

3. Has your country included HIV self-testing as a national policy (either within the national HIV testing policy/plan or a stand-alone HIV self-testing policy)?

- Yes
- No

3.1 If yes, is HIV self-testing routinely implemented in your country?

- Yes, routinely implemented at national scale
- Yes, routinely implemented at subnational scale or in select districts
- No, only pilot projects
- No, not implemented anywhere

3.2 If no to question 3, is a national policy or plan on HIV self-testing in development?

- Yes, and self-testing is being piloted to inform policy
- Yes but self-testing is not being piloted
- No

3.2a If yes to Question 3.2, please indicate the year in which a national self-testing policy or plan is expected to be completed:

- No planned year
 - 2021
 - 2022
 - 2023
 - 2024
-

4. Has your country included provider-assisted referral (assisted partner notification/index testing) in its national policy?

Yes
 No

4.1 If no, is a national policy or plan on HIV self-testing in development?

Yes
 No

4.1a If yes to 4.1, please indicate the year in which a national policy on provider-assisted referral (assisted partner notification/index testing) is planned to be completed:

No planned year
 2021 **Already in place**
 2022
 2023
 2024

5. Has your country included social network-based HIV testing service approaches in its national policy?

Yes
 No

5.1 If no, does it have plans to include social network-based HIV testing service approaches in its national policy in the future?

Yes
 No

5.2 If yes to Question 5.1, please indicate the year in which a national policy on social network-based HIV testing service approaches is planned to be completed:

No planned year
 2021
 2022
 2023
 2024

6. Has your country adopted or included dual HIV/syphilis rapid diagnostic tests for key populations as a national policy or plan?

Yes
 No

6.1 If no, does your country have plans to include dual HIV/syphilis rapid diagnostic tests for key populations in its national policy in the future?

Yes
 No

6.1a If yes to Question 6.1, please indicate the year in which a national policy on dual HIV/syphilis rapid diagnostic tests for key populations is planned to be completed:

No planned year
 2021
 2022
 2023
 2024

7. Does your country have a policy specifying that HIV testing will be provided (please tick all that apply)?

Free to all
 Free to some
 At a cost
 No policy on HIV testing cost

8. Is there a law, regulation or policy specifying that HIV testing:

8.a Is mandatory before marriage?

- Yes
 No

8.b Is mandatory to obtain a work or residence permit?

- Yes
 No

8.c Is mandatory for certain groups?

- Yes
 No

8.c.i. If yes, please specify these groups: Officers in the Ministry of National Security

9. Does your country have national policies and/or strategies on linking HIV testing and counselling and enrolment with care following an HIV-positive diagnosis?

- Yes
 No

9.1 If yes, what do they include (please select all that apply)?

- Streamlined interventions (enhanced linkage, disclosure and tracing)
 Peer support and patient navigation approaches
 Psychosocial interventions, including peer support and social networks for adolescents living with HIV
 Quality improvement approaches
 Home/community-based antiretroviral therapy initiation
 Use of CD4 testing as screening tool for linking to an advanced HIV disease care package
 Co-located facility-based HIV testing and antiretroviral therapy services
 TB-HIV collaborative activities other than co-location
 Compensation or incentives
 Phone call or SMS/text message
 Digital follow-up via social media or other online platform
 Others (please specify): _____
-

10. Does your country have national policies and/or strategies on linking HIV testing and prevention following an HIV-negative diagnosis?

- Yes, for all populations
 Yes, but only for key populations and high-risk groups
 No

10.1 If yes, what do they include (please select all that apply)?

- Streamlined interventions (enhanced linkage or disclosure)
 Peer support and patient navigation approaches
 Quality improvement approaches
 Co-located facility-based HIV testing and PrEP services
 Co-located facility-based HIV testing and VMMC services
 Compensation or incentives
 Phone call or SMS/text message
 Digital follow-up via social media or other online platform
 Others (please specify): Post test counselling Linkage to care protocol developed in 2019
-

Antiretroviral therapy

11. Has your country adapted the recommendations from the 2019 update to the WHO Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection [see Annex 1, bibliography] in a national process?

- Yes, completed
 Ongoing
 No
 Other (please specify): _____

Please upload a copy of any available updated national guideline documents.

12. What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per Ministry of Health (MOH) guidelines or directive?

- No threshold; treat all regardless of CD4 count
 ≤ 500 cells/mm³
 ≤ 350 cells/mm³
 Other (please specify): _____

12.1 If implementing treat all regardless of CD4 count, what is the status of implementation?:

- Implemented in few (<50%) treatment sites
 Implemented in many (50–95%) treatment sites
 Implemented countrywide (>95% of treatment sites)
 Not implemented in practice
 Other (please specify): _____

12.2 If your country has not yet adopted a treat all policy in accordance with the 2016 WHO Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection, is there a plan to move towards adopting and implementing a treat all policy in the future?

- Yes
 No

12.2a If yes, please indicate the year in which it is planned for treat all to be implemented:

- No planned year
 2021
 2022
 2023
 2024
-

13. Has your country adopted the WHO 2017 Recommendation on rapid initiation of ART?

- Yes, rapid initiation within 7 days of HIV diagnosis
 No
 Other (please specify): _____
-

14. Does your country have a policy to offer starting antiretroviral therapy on the same day as an HIV diagnosis?

- Yes
 No

14.1 If your country has a policy on rapid initiation and/or same day start, what is the status of implementation?

- Implemented in few (<50%) treatment sites
 Implemented in many (50–95%) treatment sites
 Implemented countrywide (>95% of treatment sites)
 Not implemented in practice
 Other (please specify): Concerns around Client Readiness and Psychosocial Barriers. Not System Related
-

15. Is CD4 testing for immunological staging available?

- Yes
 No
-

15.1 Is yes, where is it available (select all that apply)?

- Point-of-care
 Facility laboratory
 Centralized laboratory
 Other (please specify): One Treatment and Care site, expansion to begin in 2021

15.2 If yes, in what percentage of sites (estimated) do clients have access to CD4 testing and return of results?

- In few (<50%) sites
 In many (50–95%) sites
 Countrywide (>95% of sites)
 Not implemented in practice
 Other (please specify): _____

15.3 If yes, what is the median time for the patient to receive the CD4 result?

- Please specify: _____
 Don't know
 Not available

16. Is nurse-initiated antiretroviral therapy allowed in your country for any of the following populations (please select all that apply)?

- Adults except pregnant women
 Pregnant women
 Adolescents (10–19 years old)
 Children younger than 10 years old
 None of the above

17. Does your country have a national policy promoting community delivery (such as outside health facilities) of antiretroviral therapy?

- Yes Plan develop to support ARV Dispensation at Community Health Centre's (apart of HIV Treatment and Care Sites)
 No

17.1 If yes, is delivery in a community setting implemented:

- Nationally
 Regionally
 At pilot sites
 Other (please specify): _____

17.2 If yes, to which populations is antiretroviral therapy provided in community settings (such as outside health facilities) in your country?

- For all people on antiretroviral therapy, including pregnant and breastfeeding women and children
 For all people on antiretroviral therapy, excluding pregnant and breastfeeding women and children
 For all people on antiretroviral therapy, including pregnant and breastfeeding women, but excluding children
 For all people on antiretroviral therapy, including children, but excluding pregnant and breastfeeding women
 For all people who are stable on antiretroviral therapy, according to the national guidelines
 Other please specify: _____

17.3 If yes, which differentiated care services is your country using for the pick-up of antiretroviral medicine (select all that apply)?

- Pharmacy pick-up at the same site as the health facility
 Other pharmacy (e.g., stand-alone)
 Adherence group at the same site as the health facility
 Community pick-up points (individual) Currently implemented by Treatment and Care sites on a needs basis
 Community-based adherence groups

18. Does your country have a national policy on the prioritization of antiretroviral therapy initiation for people with advanced HIV disease (CD4 <200 cells/mm³) if same day initiation for all is not the national policy?

- Yes
 No
 Not applicable: same day initiation for all is the national policy
-

-
19. Does your country have a national policy on the frequency of clinic visits for adults who are doing well on antiretroviral therapy?
- Yes
 No

19.1 If yes, please specify the frequency of clinic visits in the national policy:

- Once a month
 Every 3 months
 Every 6 months
 Every 12 months

19.2 If yes, what is the status of implementation?

- Implemented in few (<50%) treatment sites
 Implemented in many (50–95%) treatment sites
 Implemented countrywide (>95% of treatment sites)
 Not implemented in practice
 Other (please specify): _____

20. Does your country have a national policy on how frequently adults who are doing well on antiretroviral therapy should pick-up antiretroviral medicine?

- Yes
 No

20.1 If yes, please specify the frequency of antiretroviral medicine pick-up included in the national policy:

- Once a month
 Every 2 months
 Every 3 months
 Every 6 months
 Every 12 months
 Other (please specify): _____

20.2 If yes, what is the status of implementation?

- Implemented in few (<50%) treatment sites
 Implemented in many (50–95%) treatment sites
 Implemented countrywide (>95% of treatment sites)
 Not implemented in practice
 Other (please specify): _____

21. Please provide the country's national criteria for (or definition of) people stable on antiretroviral therapy. For example, people stable on antiretroviral therapy for 6 months, no current illnesses, good understanding of lifelong adherence and evidence of treatment success (at least one viral load measurements below 1000 copies/mL):

_____ Adherent, at least one Viral Load measurement below 1000 copies/ml

22. Please provide the country's national criteria for (or definition of) "lost to follow-up". For example, you might define lost to follow-up as a patient who has not received antiretroviral medicines within four weeks of their last missed drug collection appointment:

_____ Missed pick up/drug collection in 28 days

23. Has your country adopted the WHO 2017 recommendation to offer a package of interventions to all patients presenting with advanced HIV disease (defined by WHO as CD4<200)?

- Yes, fully adopted
 Yes, partially adopted
 No

23.1 If yes, how widely is it implemented?

- Implemented in few (<50%) treatment sites
 Implemented in many (50–95%) treatment sites
 Implemented countrywide (>95% of treatment sites)
 Not implemented in practice
 Other (please specify): _____
-

24. Which of the following advanced HIV disease interventions for tuberculosis (TB), severe bacterial infections and cryptococcal meningitis are included in the national policy on antiretroviral therapy for adults, adolescents and children (please select all that apply):

- Baseline CD4 test for individuals presenting or returning to care with advanced HIV disease
- Screening and diagnosis (if yes, select all that apply):
- Sputum Xpert MTB/RIF as first test for TB diagnosis in symptomatic patients
- Urine LF-LAM for TB diagnosis in patients with symptoms and signs of TB ≤ 100 cells/mm³
- Cryptococcal antigen (CrAg) screening
- Prophylaxis and pre-emptive treatment for confirmed diagnosis (if yes, select all that apply):
- Co-trimoxazole prophylaxis
- TB preventive treatment
- Fluconazole pre-emptive therapy
- Rapid antiretroviral therapy initiation
- Adapted adherence support

25. Which of the following service provision modalities are included in the national policy on antiretroviral therapy for adults, adolescents and children (please select all that apply):

- Tuberculosis (TB) service providers provide antiretroviral therapy in TB clinics for the duration of TB treatment
- Antiretroviral therapy providers provide TB treatment in antiretroviral therapy settings for the duration of TB treatment
- Maternal, newborn and child health service providers provide antiretroviral therapy in maternal, newborn and child health (MNCH) clinics
- Antiretroviral therapy providers deliver antiretroviral therapy for pregnant women
- Antiretroviral therapy providers deliver antiretroviral therapy for newborns, infants and children
- Nutrition assessment, counselling and support provided to malnourished people living with HIV
- Antiretroviral therapy delivered in settings providing opioid substitution therapy
- Primary health-care providers deliver antiretroviral therapy in primary health care for adults and adolescents
- Primary health-care providers deliver antiretroviral therapy in primary health care settings for children
- Psychosocial support strategies for patient-centered care (e.g., support groups, enhanced adherence counselling, support for disclosure or referral for psychological/socioeconomic services) linked to facilities
- Patient-centered support (e.g., counselling, enhanced adherence counselling, support for disclosure or referral for psychological/socioeconomic services) separated from facilities
- Key population-friendly services
- Adolescent-friendly health services
- Antiretroviral therapy delivered in the community as part of a differentiated care model
- Antiretroviral therapy providers carry out cardiovascular disease screening and management
- Antiretroviral therapy providers carry out mental health screening and treatment
- Other (please specify): _____

26. Do patients pay any routine user fees or charges for services when visiting a public sector health facility?

- Yes
- No

26.1 If yes, is there a specific formal fee or an informal/variable fee for the following?

26.1.a HIV testing

- Formal
- Informal

26.1.b Dispensing of PrEP

- Formal
- Informal

26.1.c Primary care appointment

- Formal
- Informal

26.1.d Patient cards

- Formal
 - Informal
-

26.1.e Diagnostic services (including viral load test)

- Formal
 Informal

26.1.f Dispensing of HIV treatment

- Formal
 Informal
-

Antiretroviral therapy regimens

Adults and adolescents

27. Based on the recommendations in the 2019 WHO treatment guidelines, is TDF + 3TC (or FTC) + DTG the preferred first-line antiretroviral combination for treatment initiation in national guidelines for the following:

27.a Adults and adolescents

- Yes
 No, TDF + 3TC (or FTC) + DTG is included as alternative first-line regimen
 No

27.a.i. If no, what is (are) the preferred option(s):

- TDF + 3TC (or FTC) + EFV 600 mg
 TDF + 3TC + EFV 400 mg
 ABC + 3TC + DTG
 TAF + 3TC (or FTC) + DTG
 Other regimens (specify): _____

27.a.ii If no, is there a plan to adopt TDF + 3TC (or FTC) + DTG as the preferred first-line antiretroviral combination for treatment initiation in 2021?

- Yes
 No

27.b Women of childbearing age

- Yes
 No

27.b.i If no, what is (are) the preferred option(s):

- TDF + 3TC (or FTC) + EFV 600 mg
 TDF + 3TC + EFV 400 mg
 TAF + 3TC (or FTC) + DTG
 Other regimens (specify): _____

27.b.ii If no, is there a plan to adopt TDF + 3TC (or FTC) + DTG as the preferred first-line antiretroviral medicine combination for treatment initiation in 2021?

- Yes
 No

27.c. Pregnant and/or breastfeeding women

- Yes
 No

27.c.i If no, what is (are) the preferred option(s):

- TDF + 3TC (or FTC) + EFV 600 mg
 TDF + 3TC + EFV 400 mg
 TAF + 3TC (or FTC) + DTG
 Other regimens (specify): _____

27.c.ii If no, is there a plan to adopt TDF + 3TC (or FTC) + DTG as the preferred first-line antiretroviral medicine combination for treatment initiation in 2021?

- Yes
 No
-

-
28. Is DTG being introduced for first-line antiretroviral therapy in your country?
- Yes, DTG procurement has been initiated and transition has started
 - Yes, DTG procurement has been initiated but transition has not yet started
 - No, DTG is not being procured
 - Other (please specify): _____
-

29. Does your country use fixed-dose (FDC) antiretroviral therapy combinations as the preferred first-line therapy (please select all that apply):
- Yes, 3 drugs fixed-dose combination taken once a day
 - Yes, 2-drug, fixed-dose combination + 1 other drug taken once a day
 - No
 - Other (please specify): _____
-

30. Is a DTG-based regimen included as an option for second-line antiretroviral combination for adults and adolescents with HIV in the national guidelines?
- Yes
 - No
 - Other (please specify): _____
-

Children

31. Are LPV/r based-regimens the preferred treatment option for all infants and children weighing less than 20 kg with HIV in the national guidelines?
- Yes, for all
 - No, but recommended for non-nucleoside reverse transcriptase inhibitor-exposed (NNRTI) infants only
 - Not recommended
-

32. Is DTG recommended as the preferred option for treatment initiation in children ?
- Yes, for all children older than 4 weeks
 - Yes, for children weighing more than 20 kg
 - No
 - Other (please specify): _____
-

33. What is the recommended NRTI backbone for treatment initiation in children in the national guidelines?
- TDF + 3TC (or FTC)
 - AZT + 3TC (or FTC)
 - ABC + 3TC (or FTC)
 - Other (please specify): ABC or (AZT) + 3TC + LPV/r
-

34. Is DTG recommended as the preferred second-line option for children ?
- Yes, for all children older than 4 weeks
 - Yes, for children weighing more than 20 kg
 - No
 - Other (please specify): _____
-

35. Is LPV/r (or ATVr) recommended as the preferred second-line option for children failing DTG-based regimens?
- Yes
 - No
 - Other (please specify): _____
-

36. Is RAL recommended as the preferred second-line option for children failing protease inhibiting-based regimens and weighing less than 20 kg?
- Yes
 - No
 - Other (please specify): _____
-

Viral load

37. Please identify from national treatment guidelines the measured threshold at which viral load suppression in an individual is defined as suppressed:

- <1000 copies/ml
 - <400 copies/ml
 - <200 copies/ml
 - <50 copies/ml
 - Other (please specify): _____
-

38. Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy?

38.a For adults and adolescents

- Yes
- No

38.a.i If yes, what is the status of implementation:

- Implemented in few (<50%) treatment sites
- Implemented in many (50–95%) treatment sites
- Implemented countrywide (>95% of treatment sites)
- Not implemented in practice
- Other (please specify): _____

38.a.ii If no, is targeted viral load testing available?

- Yes
- No

38.b For children

- Yes
- No

38.b.i If yes, what is the status of implementation:

- Implemented in few (<50%) treatment sites
- Implemented in many (50–95%) treatment sites
- Implemented countrywide (>95% of treatment sites)
- Not implemented in practice
- Other (please specify): _____

38.b.ii If no, is targeted viral load testing available?

- Yes
 - No
-

39. Is point-of-care viral load testing available at any health facility in your country?

- Yes
 - No
-

40. Are dried blood spot specimens recommended in the national policy for viral load testing?

- Yes
- No
- Other (please specify): _____

40.1 If yes, what is the level of implementation?

- Fully
 - Partially
 - Not implemented
-

41. Does the country have a policy to prioritize viral load testing in select populations and/or situations (e.g., pregnant women, infants and adolescents)?

- Yes
 No

41.1 If yes, for which populations is viral load testing prioritized (please select all that apply):

- Pregnant and breastfeeding women
 Patients with advanced HIV disease
 Patients suspected of failing treatment
 Infants and children (0–<10 years)
 Adolescents (10–19 years)
 Other (please specify): Defaulters and Viral Load Test > 2 years

HIV drug resistance and toxicity monitoring²⁰

42. Does your country have a national plan to monitor HIV drug resistance?

- Yes
 No

42.1 If yes, please specify the years covered by the plan: Developed in 2018, revised every 3 years

43. In the past three years, has your country carried out HIV drug resistance (HIVDR) surveillance according to any of the following WHO protocols?

43.a Pre-treatment drug resistance (PDR) surveys²¹

- Yes
 No, but there is a plan to implement the PDR survey this year
 No, and there is no plan to implement the PDR survey this year

43.a.i If yes, please specify:

Year the last PDR survey started: _____

43.b Acquired drug resistance surveys among adults²²

- Yes
 No, but there is a plan to implement the survey this year
 No, and there is no plan to implement the survey this year

43.b.i If yes, please specify: Year the last survey started: _____

43.c Acquired drug resistance surveys among children

- Yes
 No, but there is a plan to implement the survey this year
 No, and there is no plan to implement the survey this year

43.c.i If yes, please specify:

Year the last survey started: _____

²⁰ Data from HIV drug resistance surveys should be routinely uploaded to the WHO HIVDR database. Ministry of Health/ART programme designated users can request access by contacting hiv-aids@who.int. For details, please see: <http://www.who.int/hiv/topics/drugresistance/hiv-drug-resistance-database/en>.

²¹ For details, please see: Surveillance of HIV drug resistance in adults initiating antiretroviral therapy. Geneva: WHO; 2014 (http://www.who.int/hiv/pub/drugresistance/pretreatment_drugresistance/en/, accessed 24 October 2018).

²² For details, please see: Survey of HIV drug resistance in adults receiving ART. Geneva: WHO; 2014 (http://www.who.int/hiv/pub/drugresistance/acquired_drugresistance/en/, accessed 24 October 2018).

43.d HIV drug resistance among infants (<18 months) using early infant diagnosis²³

- Yes
 No, but there is a plan to implement the infant survey this year
 No, and there is no plan to implement the infant survey this year

43.d.i If yes, please specify:

Year the last infant survey started: _____

43.e Survey or routine monitoring of clinic performance using early warning indicators for HIV drug resistance

- Yes
 No

43.e.i If yes, please specify:

- Year it was last monitored: 2020
 Number of clinics monitored: All 6 Treatment and Care Sites

43.e.ii The early warning indicators for HIV drug resistance were collected through:

- EWI survey in a sample of clinics
 Routine patient monitoring systems

44. Does your country have a national policy for HIV drug resistance testing for individual patients who fail second-line antiretroviral therapy?

- Yes
 No

45. Excluding passive pharmacovigilance approaches, does your country make an ongoing systematic effort to monitor the toxicity of antiretroviral medicines in the country?

- Yes
 No

45.1 If yes, what approaches are used (please select all that apply):

- Routine toxicity monitoring as part of the national M&E system
 Active toxicity monitoring/surveillance within cohorts in adults
 Active toxicity monitoring/surveillance within cohorts in adolescents and children
 Pregnancy registry and surveillance of birth defects

46. Have toxicity monitoring approaches been introduced to monitor adverse drug reactions to DTG use?

- Yes
 No

46.1 If yes, what approaches are used (please select all that apply)?

- Routine toxicity monitoring as part of the national M&E system
 Active toxicity monitoring/surveillance within cohorts in adults
 Active toxicity monitoring/surveillance within cohorts in adolescents and children
 Pregnancy registry and surveillance of birth defects

46.2 If yes, has training of health-care workers on the management, capture and reporting of adverse drug reactions related to DTG been implemented?

- Yes
 No

Adherence and retention

47. Does your country have national policies and/or strategies on adherence support (community and facility-based)?

- Yes
 No
-

²³ For details please see: HIV drug resistance. In: World Health Organization: Health Topics [website]. Geneva; WHO; c2018 (<http://www.who.int/hiv/topics/drugresistance/en/>, accessed 24 October 2018).

47.1 If yes, do they include (please select all that apply):

- Peer counsellors
- Text messages
- Use of reminder devices
- Patient reintegration follow-up calls/home visits
- Enhanced adherence counselling
- Referral to psychological/socioeconomic support
- Cognitive-behavioural therapy
- Behavioural skills training/medication adherence training
- Fixed-dose combinations and once-daily regimens
- Case management
- Peer navigation
- Other (please specify): _____

48. Are any of the following adherence support services being implemented in your country (please select all that apply):

- Peer counsellors
- Text messages
- Use of reminder devices
- Patient reintegration follow-up calls/home visits
- Enhanced adherence counselling
- Referral to psychological/socioeconomic support
- Cognitive-behavioural therapy
- Behavioural skills training/medication adherence training
- Fixed-dose combinations and once-daily regimens
- Case management
- Peer navigation
- Other (please specify): _____

49. Does your country have national policies and/or strategies on retention in antiretroviral therapy:

- Yes
- No

49.1 If yes, do they include (please select all that apply):

- Community-based interventions (e.g., patient advocates, treatment, and peer support interventions providing adherence and psychosocial support in the community)
- Adherence clubs and peer support (e.g., peer support, distribution of antiretroviral medicines and assessment by nonclinical or lay providers)
- Other (please specify): _____

50. Are any of the following retention support services being implemented in your country (please select all that apply):

- Community-based interventions
- Adherence clubs and peer support
- Other (please specify): _____

51. Are treatment literacy programmes available in your country to people living with HIV, including information on side effects, drug resistance, etc.?

- Yes
- No

TRIPS

52. What public health-related Trade-related Aspects of Intellectual Property Rights (TRIPS) flexibilities* are incorporated in your country's national legislation on industrial and/or intellectual property, and which have been used to enhance access to HIV-related products and/or other health products?

	Are they incorporated in national legislation on industrial/intellectual property?	If yes, what is the most recent year in which it was used?	If yes, for which commodity have they been used?
Exhaustion of rights (parallel importation) (Article 6)	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Patentable subject matter (Article 27)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Research and experimental use exception (Article 30)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Regulatory (Bolar) exception (Article 30)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Compulsory licensing (Article 31)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Public, non-commercial use (government use) (Article 31)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Scope of pharmaceutical test data protection (Article 39.3)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Competition law (Article 40)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Transition periods (Articles 65.2, 65.4 and 66.1)	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018.

Prevention of mother-to-child transmission of HIV

53. Does your country have a policy on retesting HIV-negative women during pregnancy, delivery and/or the post-partum/breastfeeding period?
- Yes
 No

- 53.1 If yes, please select the period(s) when retesting is done (please select all that apply):
- During pregnancy

If yes, which month of pregnancy: _____

- At delivery
 Post-partum/breastfeeding

If yes, how long after delivery (in months): _____

54. Does your country have a national plan for the elimination of mother-to-child transmission (MTCT) of HIV?
- Yes
 No

54.1 If yes, please specify:

- Target(s) for the mother-to-child transmission rate (%): < 2%
- Year: 2021
- Elimination target(s) (such as the number of cases/100 000 population): no more than 2 infants out of 100 live births by HIV+ mothers are HIV+
- Year: 2021
-

55. What is the current nationally recommended regimen for preventing the mother-to-child-transmission of HIV, in accordance with Ministry of Health guidelines or directives:²⁴

- Treat all pregnant women and/or breastfeeding women for life
 Antiretroviral therapy during pregnancy and/or breastfeeding only
 Other (please specify regimen): _____

55.1 If your country is applying a treat all policy for pregnant and breastfeeding women living with HIV, how is it being implemented?

- Implemented in a small number (<50%) of maternal and child health (MCH) sites
 Implemented in a large number (>50–95%) of MCH sites
 Implemented countrywide (>95% of MCH sites)
 Not implemented in practice
 Other (please specify): _____
-

56. What is the current nationally recommended first-line antiretroviral therapy regimen for pregnant and breastfeeding women living with HIV?

- TDF/3TC(FTC)/EFV 400mg
 TDF/3TC/DTG
 Other (please specify): _____
-

57. What is the current nationally recommended regimen for HIV-exposed infants for preventing the mother-to-child transmission of HIV?

- Please specify the infant prophylaxis regimen: _____
 Recommended duration of the regimen: AZT twice daily by weight for 6 weeks, co-trimoxazole after 6 weeks and maintained until cessation of risk of transmission and exculsion of HIV infection

57.a Are different regimens recommended for high-risk infants?

- Yes
 No

57.a.i If yes, please specify the regimens: _____

²⁴ In countries where breastfeeding is not recommended for women living with HIV, please click this response only if it applies to pregnant women.

58. Does your country have a national recommendation on infant and young child feeding for HIV-exposed infants?

- Yes, breastfeeding
 Yes, replacement feeding
 Yes, both are recommended, left to individual choice or different settings
 No

58.1 If breastfeeding is recommended for HIV-positive women and HIV-exposed infants, is the recommended duration specified?

- Yes (please specify the duration in months): _____
 No
-

59. Is food and nutrition support in your country integrated within prevention of mother-to-child transmission programmes?

- Implemented in few (<50%) of maternal and child health sites
 Implemented in many (>50–95%) of maternal and child health sites
 Implemented countrywide (>95%) of maternal and child health sites
 Not implemented in practice
 Other (please specify): _____
-

60. Does your country have a national strategy on interventions at delivery for women living with HIV who have not previously been tested for HIV?

- Yes, fully implemented
 Yes, partially implemented
 Yes, but not implemented
 No
-

61. Is vertical transmission of HIV criminalized in your country?

- Yes
 No
-

Elimination of mother-to-child transmission of syphilis

62. Does your country have a national plan for the elimination of mother-to-child transmission of syphilis?

- Yes, integrated with HIV or other elimination initiative(s)
 Yes, stand-alone (not integrated with HIV or other elimination initiatives)
 No national plan
-

63. Does your country have a national policy for routinely screening pregnant women for syphilis?

- Yes
 No

63.1 If yes, what tests are used:

- Laboratory-based non-treponemal (such as RPR/VDRL)
 Laboratory-based treponemal (such as TPPA or TPHA)
 Rapid syphilis treponemal tests (such as those from Bioline, Determine or Chembio)
 Dual HIV/syphilis rapid tests

63.2 If yes, does your country have a national policy for the use of dual HIV/syphilis rapid diagnostic tests?

- Yes, the test is already in use
 Yes, but the test is not yet in use
 No, but introduction of the test is planned (specify year: _____)
 No, and there is no plan for the introduction of the test

63.2a If yes to 63.2, at what time point are dual HIV/syphilis rapid diagnostic tests used _____?

Early infant diagnosis

64. At what age do your national guidelines recommend that HIV-exposed children be tested for HIV with nucleic acid testing (please select all that apply)?

- At birth
- 4–6 weeks
- 2 months
- 6 months
- 9 months
- 12 months
- 18 months
- 24 months
- No policy

65. At what age do your national guidelines recommend that HIV-exposed children be tested with an antibody test (please select all that apply)?

- 9 months
- 12 months
- 18 months
- 24 months
- No policy

66. In addition to prevention of mother-to-child transmission settings, do any of the following sites in your country carry out HIV testing of children (please select all that apply)?

- Paediatric inpatient wards
- Nutrition centres
- Immunization clinics
- Outpatient clinics
- TB clinics
- Other (please specify): _____

67. Does the country have a policy to provide nucleic acid testing for HIV-exposed infants (early infant diagnosis or nucleic acid test [NAT]) at birth?

- Yes
- No

68. Are HIV-exposed infants routinely tested for HIV at 9 months in your country?

- Yes
- No

69. Are HIV-exposed children routinely tested for HIV at 18 months of age or after 3 months from cessation of breastfeeding, whichever is later?

- Yes
- No

70. Does your country have a policy or recommendation for point-of-care early infant diagnosis testing?

- Yes
- No

70.1 If yes, is it implemented:

- Implemented in few (<50%) sites
- Implemented in many (>50–95%) sites
- Implemented countrywide (>95% of sites)
- Not implemented in practice
- Other (please specify): _____

Community engagement in the prevention of mother-to-child transmission of HIV

71. How many health facilities in your country are providing services for preventing mother-to-child transmission in the country? 108

71.a How many of the health facilities providing prevention of mother-to-child transmission services have community accountability mechanisms* in place? 108

-
72. Are there targeted interventions that address any of the following human rights considerations as part of prevention of mother-to-child transmission programmes (please select all that apply):
- Voluntary and informed consent as sole basis for testing and/or treatment for HIV
 - Voluntary and informed consent as sole basis for abortion, contraception and/or sterilization of women living with HIV
 - Confidentiality and privacy
 - Prevention of grave or systematic human rights abuses* as part of prevention of mother-to-child transmission programmes
 - Due diligence to address any human rights abuses as part of prevention of mother-to-child transmission programmes
-

73. Has a meeting been held at the national level to review prevention of mother-to-child transmission progress in the past 12 months?
- Yes
 - No

73.1. If yes:

73.1.a Were community and civil society represented at the national review meeting?

- Yes
- No

73.1.b Were women living with HIV represented at the national review meeting?

- Yes
- No

73.1.c Was the opportunity provided for community and civil society to provide comments?

- Yes
- No

73.1.d Was analysis by community and civil society provided in a systematic manner?

- Yes
- No

73.1.e Was analysis provided by community and civil society documented and disseminated following the meeting?

- Yes
- No

73.1.f Do women living with HIV in your country participate* in developing national policies, guidelines and strategies relating to prevention of mother-to-child transmission?

- Yes
 - No
-

Child antiretroviral therapy

74. Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms?

- Treat all, regardless of age
- Yes, treat all, aged <10 years
- Yes, treat all, aged <5 years
- Yes, treat all, aged <2 years
- Yes, treat all, aged <1 years
- Other (please specify): _____

74.1 What is the status of implementing the treat all policy regardless of age in your country?

- Implemented in a few (<50%) treatment sites
 - Implemented in many (>50–95%) treatment sites
 - Implemented countrywide (>95% of treatment sites)
 - Not implemented in practice
 - Other (please specify): _____
-

75. Does your country have a national policy on the frequency of clinic visits for children who are doing well on antiretroviral therapy?

- Yes
- No

75.1 If yes, please specify the frequency of clinic visits in the national policy:

- Once a month
 - Every 3 months
 - Every 6 months
 - Every 12 months
 - Other (please specify): _____
-

75.2 If yes, what is the status of implementation?

- Implemented in few (<50%) treatment sites
- Implemented in many (50–95%) treatment sites
- Implemented countrywide (>95% of treatment sites)
- Not implemented in practice
- Other (please specify): _____

76. Does your country have a national policy on how frequently children who are doing well on antiretroviral therapy should pick up antiretroviral medicine?

- Yes
- No Varies by clinician recommendations and support available to child

76.1 If yes, please specify the frequency of antiretroviral medicine pick-up included in the national policy:

- Once a month
- Every 2 months
- Every 3 months
- Every 6 months
- Every 12 months
- Other (please specify): _____

76.2 If yes, what is the status of implementation?

- Implemented in few (<50%) treatment sites
- Implemented in many (50–95%) treatment sites
- Implemented countrywide (>95% of treatment sites)
- Not implemented in practice
- Other (please specify): _____

77. When is a child who initiated antiretroviral therapy considered lost to follow-up in your country?

- Has not been seen for HIV care or pharmacy pick-up in 1 month
- Has not been seen for HIV care or pharmacy pick-up in 2 months
- Has not been seen for HIV care or pharmacy pick-up in 3 months
- Has not been seen for HIV care or pharmacy pick-up in 6 months

78. Does your country have a strategy or plan to ensure that adolescents born with HIV are not lost to follow-up as they transition into adult HIV care?

- Yes
- No

79. Are cohorts of children receiving antiretroviral therapy monitored (i.e., ensuring that these children are alive and receiving antiretroviral therapy) in national registers at 6-month and 12-month intervals?

- Yes
- No

80. Are growth monitoring and nutrition programmes for children integrated with HIV testing and treatment in your country?

- Implemented in few (<50%) treatment sites
 - Implemented in many (>50–95%) treatment sites
 - Implemented countrywide (>95% of treatment sites)
 - Not implemented in practice
 - Other (please specify): _____
-

3. Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners.

- Ensure that 90% of people at risk of HIV infection have access to comprehensive HIV prevention services, including sex workers and their clients, men who have sex with men, transgender people, people who inject drugs and prisoners.
- Reach 3 million people with pre-exposure prophylaxis by 2020.
- Reach 25 million men with voluntary medical male circumcision in high-incidence countries by 2020.
- Make 20 billion condoms available annually by 2020 in low- and middle-income countries.

Laws

81. Are transgender people criminalized and/or prosecuted in your country?

- Both criminalized and prosecuted
- Criminalized
- Prosecuted
- Neither criminalized nor prosecuted

81.1 Has there been a change in the law in the last two years?

- Yes
- No

81.1.a If yes, please attach a copy of the text of the law or a URL link to it.

81.2 If transgender people are criminalized, has there been a moratorium on these laws in the last two years?

- Yes
- No
- N/A

82. Is sex work criminalized in your country (select all that apply, including if criminalization is at the subnational level)?

- Selling sexual services is criminalized
- Buying sexual services is criminalized
- Ancillary activities associated with selling sexual services are criminalized
- Ancillary activities associated with buying sexual services are criminalized
- Profiting from organizing and/or managing sexual services is criminalized
- Other punitive and/or administrative regulation of sex work
- Sex work is not subject to punitive regulations and is not criminalized
- Issue is determined/differs at subnational level

82.1 Has there been a change in the law in the last two years?

- Yes
- No

82.1.a If yes, please attach a copy of the text of the law or a URL link to it.

82.2 If there are laws criminalizing any aspect of sex work, has there been a moratorium in the last two years?

- Yes
- No
- N/A

83. Does your country have laws criminalizing same-sex sexual acts?

- Yes, death penalty
 - Yes, imprisonment (14 years–life)
 - Yes, imprisonment (up to 14 years)
 - Yes, penalty not specified
 - No specific legislation
 - Laws penalizing same-sex sexual acts have been decriminalized or have never existed
-

83.1 Has there been a change in the law in the last two years?
 Yes
 No

83.1.a If yes, please attach a copy of the text of the law or a URL link to it.

83.2 If there are laws criminalizing same-sex sexual acts, has there been a moratorium in the last two years?
 Yes
 No
 N/A

84. Does your country retain the death penalty in law for people convicted of drug-related offences, regardless of whether it is implemented?
 Yes
 No

84.1 If yes, what is the level of application?
 High application (sentencing of people convicted of drug offences to death and/or carrying out executions are routine and mainstreamed part of the criminal justice system)
 Low application (executions for drug offences may have been carried out in recent years, but in practice such penalties are relatively rare)
 Symbolic application (the death penalty for drug offences is included in legislation but executions are not carried out)
 Insufficient data to classify the country as having a high, low or symbolic application

85. Is drug use or possession for personal use an offence in your country (please select all that apply)?
 Drug use or consumption is specified as a criminal offence
 Drug use or consumption is specified as a non-criminal offence
 Possession of drugs for personal use is specified as a criminal offence
 Possession of drugs for personal use is specified as a non-criminal offence
 No

85.1 Has there been a change in the law in the last two years?
 Yes
 No

85.1.a If yes, please attach a copy of the text of the law or a URL link to it.

85.2 If there are laws criminalizing drug use or possession for personal use, has there been a moratorium in the last two years?
 Yes
 No
 N/A

86. Does the law allow possession of a certain limited amount of drugs for personal use?
 Yes
 No

87. Does your country apply compulsory detention or compulsory rehabilitation in a closed facility for people who use drugs?
 Yes
 No

88. Apart from criminalization, does your country have other punitive laws affecting lesbian, gay, bisexual, transgender and intersex (LGBTI) people?
 Yes, promotion ("propaganda") laws
 Yes, morality laws or religious norms that limit lesbian, gay, bisexual, transgender and intersex freedom of expression and association
 Yes, others (please specify): _____
 No

Legal protections for key populations

89. Have any constitutional prohibitions of discrimination been interpreted to include gender identity by the following:

89.a Courts

- Yes
 No
 N/A

89.b Government policy

- Yes
 No
 N/A
-

90. Does your country have legal gender recognition laws or policies that enable the legal change of gender?

- Yes
 No

90.1 If yes, are genders other than male and female legally recognized?

- Yes
 No

90.2 If yes to question 90, are any of the following required in order to change gender (check all that apply)?

- Self-declaration (no medical evidence required)
 Gender reassignment surgery
 Sterilization
 Certificate of psychological assessment
 Other (specify):

90.3 If yes to question 90, is it legally possible to change one's gender marker on the following (please select all that apply)?

- Passport or other national ID
 Own birth certificate
 Marriage/divorce certificate

90.3.a If yes to any of the above, is a Gender Recognition Certificate or some other state-recognized certificate or letter from a medical professional required for these changes?

- Yes
 No
-

91. Is it legally possible to change one's name to that of another gender on any of the following (please select all that apply)?

- Passport or other national ID
 Own birth certificate
 Marriage/divorce certificate
 No

91.1 If yes to any of the above, is a Gender Recognition Certificate or some other state-recognized certificate or letter from a medical professional required for these changes?

- Yes
 No
-

92. Have any constitutional prohibitions of discrimination been interpreted to include sex work by the following:

92.a Courts

- Yes
 No

92.b Government policy

- Yes
 No

92.c Are there other non-discrimination provisions specifying sex work?

- Yes
 No
-

93. Have any constitutional prohibitions of discrimination been interpreted to include sexual orientation by the following:

93.a Courts

Yes

No

93.b Government policy

Yes

No

94. Does your country have any other laws or other provisions specifying protections based on the grounds of sexual orientation (please select all that apply)?

Hate crimes based on sexual orientation considered an aggravating circumstance or a specific crime

Incitement to hatred based on sexual orientation prohibited

Other non-discrimination provisions specifying sexual orientation

No

95. Does your country have any specific antidiscrimination laws* that apply to people who use drugs?

Yes

No

96. Is there explicit supportive reference to harm reduction in national policies?

Yes

No

96.1 If yes, do policies address the specific needs of women who inject drugs?

Yes

No

HIV prevention for sex workers

97. Does your country have a national prevention strategy to reduce new infections among sex workers and provide services to sex workers and their clients?

Yes

No

97.1 If yes, does the national strategy include (please select all that apply):

Community empowerment and capacity-building for sex worker organizations

Community-based outreach and services for sex workers and their clients

Distribution of condoms for sex workers and their clients

Clinical services for sex workers and their clients

Legal support services for sex workers

Actions to address gender-based violence

Actions to reduce stigma and discrimination in the health setting

98. Are there national standard operating procedures (SOPs) or detailed national implementation guidelines for organizations implementing HIV prevention programmes for sex workers?

Yes, national SOPs apply for all organizations

No, SOPs only for organizations under specific programme(s)

No, all organizations use their own procedures

N/A

99. Has your country set national HIV prevention targets for sex workers and their clients for 2022?

Yes

No

99.1 If yes, what are the national prevention targets for sex workers and their clients for 2022?

99.1.a Annual number of new HIV infections among sex workers and their clients: _____

99.1.b Percentage of sex workers and their clients reached by HIV prevention services:

99.1.b.i Sex workers: _____

99.1.b.ii Clients: _____

HIV prevention for men who have sex with men

100. Does your country have a national prevention strategy to reduce new infections among and provide services to gay men and other men who have sex with men?

- Yes
 No

100.1 If yes, does the national strategy include for gay men and other men who have sex with men (please select all that apply)?

- Community empowerment and capacity-building for organizations of men who have sex with men
 Community-based outreach and services
 Distribution of condoms and condom-compatible lubricants
 Sexually transmitted infection (STI) prevention, screening and treatment services
 Clinical services
 Psychosocial counselling and/or mental health services
 Legal support services
 Actions to address homophobic violence
 Actions to reduce stigma and discrimination
-

101. Are there national standard operating procedures (SOPs) or detailed national implementation guidelines for organizations implementing HIV prevention programmes for gay men and other men who have sex with men?

- Yes, national SOPs apply for all organizations
 No, SOPs only for organizations under specific programme(s)
 No, all organizations use their own procedures
 N/A
-

102. Has your country set national prevention targets for gay men and other men who have sex with men for 2022?

- Yes
 No

102.1 If yes, what are the national prevention targets for 2022 for gay men and other men who have sex with men?

102.1.a Annual number of new HIV infections among gay men and other men who have sex with men: _____

102.1.b Percentage of gay men and other men who have sex with men reached by prevention programmes: _____

HIV prevention for people who inject drugs

103. Do national policies exclude people who are currently using drugs from receiving antiretroviral therapy?

- Yes
 No
-

104. Are needle and syringe programmes operational in your country?

- Yes
 No, not at all
 No, but needles and syringes can be purchased legally in pharmacies without a prescription
-

105. Can possession of a needle or syringe without a prescription be used as evidence of drug use or cause for arrest in your country?

- Yes
 No
-

106. Are opioid substitution therapy (OST) programmes operational in your country?

- Yes
 No

107. Are drug dependence treatment interventions other than opioid substitution therapy implemented in the country?

- Yes
 No

107.1 If yes, are they for:

- Opioid dependence
 Non-opioid dependence

108. Is naloxone (used to reverse opioid overdoses) available through community distribution in your country?

- Yes
 No

109. Do safe injection spaces/rooms exist?

- Yes
 No

109.1 If yes, please specify:

109.1.a Number of spaces/rooms: _____

109.1.b Number of enrollees: _____

HIV prevention services for prisoners

110. Are needle and syringe programmes operational in prisons in your country?

- Yes
 No

111. Are opioid substitution therapy (OST) programmes operational in prisons in your country?

- Yes
 No

112. Are condoms and lubricants available to prisoners in your country?

- Yes
 No

113. Are HIV tests in prisons in your country:

113.a Carried out with the informed consent of prisoners?

- Yes
 No

113.b Systematically offered at entry and/or exit?

- Yes
 No

113.c Free of charge?

- Yes
 No

113.d Confidential?

- Yes
 No
-

113.e Available at any time during detention?

- Yes
 No

113.f Accompanied by relevant and accessible information?

- Yes
 No

113.g Accompanied by confidential pre- and post-test counselling?

- Yes
 No

113.h Equally accessible to all prisoners?

- Yes
 No

113.h.i If no to Q 113.h, which prisoners do not have equal access? _____

114. Is antiretroviral therapy accessible to all prisoners living with HIV in your country?

- Yes
 No
-

115. Is hepatitis C treatment (using direct-acting antivirals) available in prisons in your country?

- Yes
 No
-

HIV prevention among adolescent girls, young women and their male partners in communities with high HIV incidence

116. Does your country have a national prevention strategy to reduce new HIV infections among adolescent girls, young women and their male partners in communities with high HIV incidence?

- Yes
 No
 Not applicable

116.1 If yes, does the national strategy include (please select all that apply)?

- Community-based outreach
 Community-based promotion and distribution of condoms specifically for these populations
 Youth-friendly health services
 School-based HIV prevention campaigns (in addition to or as part of sexuality education)
 New media interventions
 Social support/economic empowerment
-

117. Has your country set national HIV prevention targets for adolescent girls, young women and their male partners in communities with high HIV incidence?

- Yes
 No

117.1 If yes, what are the national prevention targets for adolescent girls and young women and their male partners for 2022?

117.1.a Annual number of new HIV infections among adolescent girls and young women aged 15–29 years (please specify number):

117.1.b Percentage of adolescent girls, young women and their male partners in high-incidence communities reached by HIV prevention services:

117.1.bi Young women (aged 15–29 years; please specify percentage): _____

117.1.bii Male partners (aged 20–34 years; please specify percentage): _____

Participation of key populations in the national response

118. Do men who have sex with men participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

119. Do sex workers participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

120. Do people who inject drugs participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

121. Do transgender people participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

122. Do former and/or current prisoners participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

Services for people affected by humanitarian emergencies

123. Are the following services accessible to people affected by humanitarian emergencies in your country? (This includes all people affected by emergencies, including but not limited to non-displaced people, refugees and asylum seekers, internally displaced people and migrants.)

123.a HIV counselling and testing

- Yes
 No
 Not applicable

123.b Preventing mother-to-child transmission

- Yes
 No
 Not applicable

123.c HIV treatment

- Yes
 No
 Not applicable

123.d TB screening and treatment

- Yes
 No
 Not applicable
-

123.e Preventing and treating sexually transmitted infections

- Yes
 No
 Not applicable

123.f Services for key populations

- Yes
 No
 Not applicable

123.g Services for survivors of sexual and gender-based violence*

- Yes
 No
 Not applicable

123.h Food and nutrition support

- Yes
 No
 Not applicable

Pre-exposure prophylaxis (PrEP)

124. Has the WHO recommendation on oral PrEP been adopted in your country's national guidelines?

- Yes, PrEP guidelines have been developed
 No, guidelines have not been developed

124.1.a If no, please indicate the year when adoption of the PrEP recommendations is planned:

- No planned year
 2021
 2022
 2023
 2024
 Other (please specify): _____

124.1.b If no to question 124, please, indicate the applicable reasons (select all that apply):

- There is no identified population group with sufficiently high incidence in accordance with the WHO guidelines
 It is not a funding priority
 The medicines are not available in the country
 The technical capacity to consider PrEP is limited
 Other (please specify): _____

124.2 If yes to Q 124 (national PrEP guidelines have been developed), please specify for which populations PrEP is provided as per the guidelines (select all that apply):

- Gay men and other men who have sex with men
 Sex workers
 People who inject drugs
 Transgender people
 Serodiscordant couples
 Young women (aged 18–24 years)
 Adolescent girls (aged <17 years)
 Prisoners
 People with risk factors other than identification with the above populations
 People who request PrEP
 Other (please specify): _____
-

- 124.3** If the national PrEP guidelines have been developed, have they been updated to include the option of event-driven PrEP* for men who have sex with men?
- Yes
- No, but it is planned to include event-driven PrEP in national guidelines in the future
- No, and there are currently no plans to include event-driven PrEP in national guidelines
- 124.4** If national PrEP guidelines have been developed, who has the authority to prescribe PrEP in your country (please select all that apply)?
- Doctors
- Clinical officers
- Nursing cadre (e.g. midwives, nurse practitioners and registered nurses)
- Pharmacists
- Other (please specify): _____
- 124.5** Is PrEP medicine available through any of the following in your country (please select all that apply):
- Research (including pilot studies and demonstration projects)
- Public facilities Community-based distribution (including mobile services)
- Pharmacies (stand-alone)
- Private providers
- The Internet
- Educational institutions
- Other (please specify): _____

Voluntary medical male circumcision (VMMC)

Please note these questions are only asked from 16 countries with high HIV prevalence, low levels of male circumcision and generalized heterosexual epidemics: Botswana, Central African Republic, Eswatini, Ethiopia, Kenya, Lesotho, Malawi, Mozambique, Namibia, Rwanda, South Africa, South Sudan, Uganda, United Republic of Tanzania, Zambia and Zimbabwe.

- 125.** Does your country have a national strategy for voluntary medical male circumcision?
- Yes
- No
- 125.1** If yes, does it refer to a specific age group?
- Yes, refers to a specific age group (please specify): _____
- No age group specified
- 125.1.a** If the national VMMC strategy refers to a specific age group, has a target been set for the number of men in this age group to be reached?
- Yes
- No
- 125.1.a.i.** If yes, please specify:
- The target number or proportion of men in that age group: _____
- The target year: _____
- 125.2** If yes to Q125, does the strategy include any of the following (please select all that apply):
- Guidance on obtaining informed consent from clients
- Guidance on filing client records, including informed consent forms, to ensure client confidentiality
- Guidance on avoiding coercion
- None of the above
- 126.** What medical male circumcision methods are recommended/approved by the national programme (please select all that apply)?
- Conventional surgical methods (dorsal slit, forceps guided, sleeve resection)
- WHO prequalified device method approved for use
- 127.** Is voluntary medical male circumcision in your country offered:
- Free of charge
- Free for some
- Full cost to the user
- At a cost shared between user and programme

Condoms

128. Does your country have a strategy or plan related to condoms?

- Yes
 No

128.1 If yes, does the national condom strategy or plan explicitly address the needs of and targeted condom programming for the following populations (please select all that apply):

- People living with HIV
 Sex workers (male and female)
 Men who have sex with men
 People who inject drugs
 Young people (15–24 years old)
 People with sexually transmitted infections (STI)
 Prisoners
 The general public

128.2 If yes, does the national condom strategy or plan include (please select all that apply):

- Free distribution to key populations
 Subsidized condom marketing
 Private sector sales
 Condom promotion through mass media
 Condom promotion in (secondary) schools
 Condom distribution in (secondary) schools
 Condom promotion through outreach to communities with high HIV incidence

129. Have the national needs for condoms been estimated?

- Yes
 No

129.1 If yes, what is the estimated number of condoms needed? Not yet submitted

129.2 If yes, for what year is the condom needs estimate? _____

129.3 If yes, what method was used to estimate the number of condoms needed (please select all that apply)?

- General population (condoms per sexually active man/year)
 Historical (same as last year + population growth)
 Budget-driven (based on what can be bought)
 Demand-based (based on past condom usage rates, such as using the GOALS model)
 Capacity-based (how many can be supplied and distributed with current capacity)
 Part of family planning commodity needs estimates
 "Total universe of need" approach
 UNFPA/UNAIDS Condom Needs and Resource Requirement Estimation Tool
 Other (please specify): _____

130. Can any individuals be prosecuted or punished for carrying condoms in your country?

- Yes
 No

131. Are there age restrictions for accessing condoms in your country?

- Yes
 No

132. Are there restrictions on distributing condoms in public places in your country?

- Yes (please specify): _____
 No
-

133. Is there a policy or guidance for provider-initiated condom promotion and distribution in place (i.e., for a health service provider actively offering condom counselling and a condom supply)?

- Yes, for all people of reproductive age visiting a health facility
- Yes, for all key populations and other people at higher risk of HIV infection
- Yes, for all young people who are sexually active
- Yes, for all people accessing HIV testing services
- Yes, for all people accessing hormonal or other methods of contraception
- Yes, for all serodiscordant couples
- No guidance in place

134. Have there been condom stock-outs* in the past 12 months?

134.a National stock-outs

- Yes
- No

134.b Local stock-outs

- Yes
 - No
-

4. Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020.

- Ensure universal access to quality and affordable sexual and reproductive health-care services, including HIV services, for women.
- Eliminate HIV-related stigma and discrimination in health-care settings by 2020.
- Review and reform laws that reinforce stigma and discrimination, including on age of consent, HIV non-disclosure, exposure and transmission, travel restrictions and mandatory testing.

Violence

135. Does your country have a national plan or strategy to address gender-based violence* and violence against women that includes HIV?

- Yes
 No

135.1 If yes, is there a national mechanism with a mandate to monitor and review implementation?

- Yes
 No

135.2 If yes, please identify the national mechanism that has a mandate to monitor and review implementation (select all that apply):

- Parliamentary
 Inter-ministerial
 Includes participation of women's groups
 Includes participation of violence against women groups

136. Does your country have specific legislation on domestic violence* ?

- Yes
 No

136.1 If yes, what does this legislation cover (please select all that apply)?

- Physical violence
 Sexual violence
 Psychological violence
 Emotional violence
 Economic violence
 Explicit criminalization of marital rape
 Protection of former spouses
 Protection of unmarried intimate partners

136.2 If legislation on domestic violence exists, is it: (select those that apply)

- Specific to violence against women and girls
 Inclusive of all forms of familiar and intimate partner violence

136.3 If legislation includes explicit criminalization of marital rape, are laws based on lack of consent, without requiring proof of physical force or penetration?

- Yes
 No
 N/A

137. Does customary or religious law exist alongside legislated law in your country at the national or subnational level?

- Yes
 No

137.1 If yes, are there exceptions to customary or religious laws that guarantee that in cases of violence against women, there is access to formal justice systems or that customary laws must be interpreted in line with human rights and legal gender protections?

- Yes
 No
-

138. Do government entities provide budgetary commitments for the implementation of legislation and national plans addressing violence against women through any of the following?

138.a Legally-mandated annual appropriations

Yes

No

138.b Annual sectoral allocations (e.g., health, education or justice)

Yes

No

138.c Allocating funding and/or incentives to women's or other nongovernmental organizations for relevant activities

Yes

No

139. Does legislation include any of the following provisions related to violence against women in your country (please select all that apply)?

Court injunctions for the safety and security of survivors

Special prosecution units in law enforcement

Free legal services or assistance

Access to shelters or other safe housing

Financial support to survivors

Specialized police staff or unit to deal with violence against women

Services for the person perpetrating violence

Other (please specify): _____

140. Does your country have criminal penalties specifically for domestic violence*?

Yes

No

140.1 If yes, have there been any successful prosecutions in the past two years?

Yes

No

140.2 If no, is the fact that the violence occurred in a domestic situation cause for specific criminal penalties or consideration by the court if general criminal laws are applied?

Yes

No

141. Are there national protocols for the following?

141.a Health professionals dealing with cases of violence against women

Yes

No

141.b Law enforcement personnel dealing with cases of violence against women

Yes

No

141.c Education personnel dealing with cases of sexual abuse against children and other forms of gender-based violence against girls in school environments

Yes

No

142. Does your country have any of the following to protect key populations and people living with HIV from violence (please select all that apply)?

General criminal laws prohibiting violence

Specific legal provisions prohibiting violence against people based on their HIV status or belonging to a key population

Programmes to address intimate partner violence*

Programmes to address workplace violence

Interventions to address police abuse

Interventions to address torture and ill-treatment in prisons

143. Does your country have service delivery points that provide the following appropriate medical and psychological care and support for women and men who have been raped and experienced incest, in accordance with the recommendations of the 2013 WHO guidelines *Responding to intimate partner violence and sexual violence against women*?

143.a First-line support or what is known as psychological first aid

Yes

No

143.b Emergency contraception for women who seek services

Yes

No

143.c Safe abortion if a woman becomes pregnant as a result of rape in accordance with national law

Yes

No

143.d Post-exposure prophylaxis for sexually transmitted infections and HIV (within 72 hours of sexual assault) as needed

Yes

No

Stigma and discrimination²⁵

144. Does your country have laws and/or policies in place requiring health-care settings (specifically or as part of broader laws/policies for service providers) to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socioeconomic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?

Yes, policies exist but are not consistently implemented

Yes, policies exist and are consistently implemented

No, policies do not exist

145. Does your country have interventions targeting health-care workers to build their human rights competencies, to address stigma and discrimination and gender-based violence?

Yes, at scale*

Yes, as one-off activities

Yes, on a small scale

No

146. Does your country have laws criminalizing the transmission of, non-disclosure of, or exposure to HIV transmission?

Yes

No, but prosecutions exist based on general criminal laws

No

146.1 If yes, has there been a change in the law in the last two years?

Yes

No

If yes, please attach a copy of the text of the law or a URL link to it.

Parental/guardian and spousal consent for accessing services

147. Does your country have laws requiring parental/guardian consent for adolescents to access hormonal or long-lasting contraceptives?

Yes, for adolescents younger than 18 years

Yes, for adolescents younger than 16 years

Yes, for adolescents younger than 14 years

Yes, for adolescents 12 years or younger

No law requiring parental/guardian consent

²⁵ Data on the existence of laws or policies restricting the entry, stay and/or residence of people living with HIV are being collected separately by UNAIDS.

147.1 If yes, are there exceptions for adolescents below the age of legal consent to be able to access hormonal or long-lasting contraceptives without parental/guardian consent?

Yes, demonstrated maturity

Yes, other (please specify): _____

No

148. Does your country have laws requiring parental/guardian consent for adolescents to access HIV testing and receive the results?

Yes, for adolescents younger than 18 years

Yes, for adolescents younger than 16 years

Yes, for adolescents younger than 14 years

Yes, for adolescents 12 years or younger

Yes, age not specified

No law requiring parental/guardian consent

148.1 If yes to any of the above, are there exceptions for adolescents below the age of legal consent to be able to access HIV testing and receive the results without parental/guardian consent?

Yes, demonstrated maturity

Yes, other (please specify): _____

No

149. Does your country have laws requiring parental/guardian consent for adolescents to access HIV self-testing and receive the results?

Yes, for adolescents younger than 18 years

Yes, for adolescents younger than 16 years

Yes, for adolescents younger than 14 years

Yes, for adolescents 12 years or younger

Yes, age not specified

No law requiring parental/guardian consent

149.1 If yes to any of the above, are there exceptions for adolescents below the age of legal consent to be able to access HIV self-testing and receive the results without parental/guardian consent?

Yes, demonstrated maturity

Yes, other (please specify): _____

No

150. Does your country have laws requiring parental/guardian consent for adolescents to access HIV treatment?

Yes, for adolescents younger than 18 years

Yes, for adolescents younger than 16 years

Yes, for adolescents younger than 14 years

Yes, for adolescents 12 years or younger

No law requiring parental/guardian consent

150.1 If yes to any of the above, are there exceptions for adolescents below the age of legal consent to be able to access HIV treatment without parental/guardian consent?

Yes, demonstrated maturity

Yes, other (please specify): _____

No

151. Are there any requirements for parental/guardian consent for adolescents (under age 18) to access the following services:

151.a Opioid substitution therapy

Yes

No

151.a.i If yes, please specify the age: 17 and under

151.b Needle and syringe programmes

Yes

No

151.b.i If yes, please specify the age: 17 and under

151.c Naloxone

Yes

No

151.c.i If yes, please specify the age: 17 and under

151.d PrEP

Yes

No

151.d.i If yes, please specify the age: 17 and under

152. Does your country have laws requiring spousal consent for married women to access any sexual or reproductive health services?

Yes

No

153. Does your country have laws requiring spousal consent for married women to access HIV testing?

Yes

No

5. Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year.

154.	Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education* , according to international standards* , in:	
a)	Primary school	
<input checked="" type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
b)	Secondary school	
<input checked="" type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
c)	Teacher training	
<input checked="" type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
155.	Are representatives of the Ministry of Education included in the national HIV coordinating mechanism or equivalent?	
<input type="checkbox"/>	There is no national HIV coordinating mechanism or equivalent	
<input type="checkbox"/>	There is a national HIV coordinating mechanism or equivalent, but it does not include any representatives of the Ministry of Education	
<input checked="" type="checkbox"/>	There is a national HIV coordinating mechanism or equivalent, and it includes representatives of the Ministry of Education	
156.	Has your country set a national target on comprehensive knowledge of HIV among adolescents and young people?	
<input checked="" type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
156.1	If yes, is there a national mechanism in place to monitor and review progress towards the target?	
<input type="checkbox"/>	Yes	
<input checked="" type="checkbox"/>	No	
157.	Do young people in your country (age 15–24 years old) participate* in developing national policies, guidelines and strategies relating to their health in your country?	
<input checked="" type="checkbox"/>	Yes	
<input type="checkbox"/>	No	
157.1	If yes, do young people participate* in any of the following decision-making spaces in the national HIV response, where these exist?	
Decision-making space	Does it exist?	Do young people participate in this space?
Technical teams for the development, review and update of national AIDS strategies and plans	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Technical teams for the development or review of programmes that relate to young people's access to HIV testing, treatment, care and support services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
National AIDS Coordinating Authority or equivalent, with a broad-based multi-sector mandate	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Global Fund Country Coordinating Mechanism	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A
Community advisory body for hospitals, clinics and/or research projects	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A
Other (please specify): _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

6. Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020.

158. Does the country have an approved social protection* strategy, policy or framework?

- Yes, and it is being implemented
 Yes, but it is not being implemented
 No

158.1 If yes:

a) Does it refer to HIV?

- Yes
 No

b) Does it recognize people living with HIV as key beneficiaries?

- Yes
 No

c) Does it recognize any key populations (sex workers, gay men and other men who have sex with men, people who inject drugs, transgender people or prisoners) as key beneficiaries?

- Yes
 No

c.i. If yes, which key populations are recognized as key beneficiaries (select all that apply):

- Sex workers
 Gay men and other men who have sex with men
 Transgender persons
 People who inject drugs
 Prisoners

d) Does it recognize adolescent girls and young women as key beneficiaries?

- Yes
 No

e) Does it recognize children affected by HIV as key beneficiaries?

- Yes
 No

f) Does it recognize families affected by HIV as key beneficiaries?

- Yes
 No

g) Does it address the issue of unpaid care work in the context of HIV?

- Yes
 No

159. Are representatives of the National AIDS Programme or equivalent included in any social protection* coordination mechanism or platform?

- There is no social protection coordination mechanism or platform
 There is a social protection coordination mechanism or platform, but it does not include any representatives of the National AIDS Programme or equivalent
 There is a social protection coordination mechanism or platform and it includes representatives of the National AIDS Programme or equivalent

160. Are any cash transfer programmes* for young women aged 15–24 years being implemented in the country?

- Yes
 No
-

7. Ensure that at least 30% of all service delivery is community-led by 2020.

161. Are there any laws, regulations or policies that provide for the operation of civil society organizations (CSOs) or community-based organizations (CBOs) in your country (please select all that apply)?

- Registration of HIV CSOs is possible
- Registration of CSOs/CBOs working with key populations is possible
- HIV services can be provided by CSOs/CBOs
- Services to key populations can be provided by CSOs/CBOs
- Reporting requirements for CSOs/CBOs delivering HIV services are streamlined
- There are no laws, regulations or policies that provide for the operation of CSOs/CBOs in the country
- Other (please specify): _____

162. Are there laws, policies or regulations that enable access to funding for CSOs/CBOs?

- Social contracting or other mechanisms allowing for funding of service delivery by communities from domestic funding
- From international donors
- Both from domestic funding and international donors
- Require a certain percentage of government funding for CSOs/CBOs
- There are no laws, policies or regulations enabling access to funding for CSOs/CBOs
- Other (please specify): _____

8. Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers.

9. Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights.

163. In the past two years, have there been training and/or capacity-building programmes for people living with HIV and key populations to educate them and raise their awareness concerning their rights (in the context of HIV) in your country?

- Yes, at scale at the national level
- Yes, at scale at the sub-national level (in at least one province/region/district)
- Yes, one-off activities
- Yes, at a small scale
- No

164. Does your country have training programmes for the following groups on human rights and non-discrimination legal frameworks as applicable to HIV?

a) For police and other law enforcement personnel

- Yes, at scale at the national level
- Yes, at scale at the sub-national level (in at least one province/region/district)
- Yes, one-off activities
- Yes, small scale
- No

b) For members of the judiciary

- Yes, at scale at the national level
- Yes, at scale at the sub-national level (in at least one province/region/district)
- Yes, one-off activities
- Yes, small scale
- No

-
- c) **For elected officials (lawmakers/parliamentarians)**
- Yes, at scale at the national level
 - Yes, at scale at the sub-national level (in at least one province/region/district)
 - Yes, one-off activities
 - Yes, small scale
 - No

- d) **For health-care workers**
- Yes, at scale at the national level
 - Yes, at scale at the sub-national level (in at least one province/region/district)
 - Yes, one-off activities
 - Yes, small scale
 - No
-

165. In the past year, has the government provided training for the following groups on human rights and non-discrimination relating to key populations in at least 25% of provinces/regions/districts (please select all that apply)?

- a) **For police and other law enforcement personnel**
- Sex workers
 - Gay men and other men who have sex with men
 - Transgender people
 - People who inject drugs
 - Prisoners

- b) **For members of the judiciary**
- Sex workers
 - Gay men and other men who have sex with men
 - Transgender people
 - People who inject drugs
 - Prisoners

- c) **For elected officials (lawmakers/parliamentarians)**
- Sex workers
 - Gay men and other men who have sex with men
 - Transgender people
 - People who inject drugs
 - Prisoners

- d) **For health-care workers**
- Sex workers
 - Gay men and other men who have sex with men
 - Transgender people
 - People who inject drugs
 - Prisoners
-

166. Does your country have training programmes on the prevention of violence against women and gender-based violence for the following groups?

- a) **For police and other law enforcement personnel**
- Yes, at scale at the national level
 - Yes, at scale at the sub-national level (in at least one province/region/district)
 - Yes, one-off activities
 - Yes, small scale
 - No

- b) **For members of the judiciary**
- Yes, at scale at the national level
 - Yes, at scale at the sub-national level (in at least one province/region/district)
 - Yes, one-off activities
 - Yes, small scale
 - No

- c) **For elected officials (lawmakers/parliamentarians)**
- Yes, at scale at the national level
 - Yes, at scale at the sub-national level (in at least one province/region/district)
 - Yes, one-off activities
 - Yes, small scale
 - No

- d) **For health-care workers**
- Yes, at scale at the national level
 - Yes, at scale at the sub-national level (in at least one province/region/district)
 - Yes, one-off activities
 - Yes, small scale
 - No

167. **Are there any of the following barriers to providing these trainings and/or capacity-building activities (please select all that apply)?**

- Lack of political will
- Lack of funding
- Lack of capacity for delivery of trainings
- Barriers that hinder the target audience in accessing such trainings or capacity-building
- Other (please specify): _____

168. **Does your country have laws protecting against discrimination on the basis of HIV status?**

- Yes, constitutional or legislative protections that specify HIV status as a protected attribute
- Yes, constitutional or legislative protections that protect against discrimination on the basis of HIV status under another status (such as health, disability or "other status")
- No

168.1 **If yes, do constitutional or legislative protections apply to any of the following (please select all that apply)?**

- Employment
- Education
- Health care
- Provision of other goods and services
- Other (please specify): _____

169. **Are mechanisms established by the government in place to record and address individual complaints cases of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population), such as (but not limited to) a national human rights institution, ombudsperson, tribunal or commission?**

- Yes, please describe: Staff of Q.I units implement
- No

170. **Does your country have any of the following accountability mechanisms in relation to discrimination and violations of human rights in health-care settings?**

- Complaints procedure
- Mechanisms of redress
- Procedures or systems to protect and respect patient privacy or confidentiality

171. **Does your country have any of the following human rights monitoring and enforcement mechanisms?**

a) **Existence of independent functional 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
- No

b) **Oversight for implementation of concluding observations and recommendations from treaty monitoring bodies and UPR**

- Yes
- No

172. **Does your country have mechanisms in place for accessing affordable legal services (please select all that apply)?**

- Yes, legal aid systems applicable to HIV casework
- Yes, pro bono legal services provided by private law firms
- Yes, legal services provided by (university-based) legal clinics
- Yes, community paralegals
- Yes, other (please describe): _____
- No

10. Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C.

TB/HIV

173. Are the following recommended for people living with HIV in national strategies, policies, plans or guidelines related to TB and/or HIV (please select all age groups that apply)?

a) TB screening

- Yes, for adults and adolescents (≥15 years)
 Yes, for children (<15 years)
 No

b) TB preventive treatment

- Yes, for adults and adolescents (≥15 years)
 Yes, for children (<15 years)
 No

174. Has your country adopted the 2019 WHO policy update on the use of lateral flow urine lipoarabinomannan assay (LF-LAM) for the diagnosis and screening of active tuberculosis in people living with HIV? (please select all age groups that apply)

- Yes, for adults and adolescents (≥15 years)
 Yes, for children (<15 years)
 No

175. Which of the following regimens are recommended for TB preventive treatment in national guidelines (please select all that apply)?

a. Adults and adolescents living with HIV

- 6 months of daily isoniazid monotherapy (6H)
 9 months of daily isoniazid monotherapy (9H)
 36 months of daily isoniazid monotherapy (36H)
 4 months of daily rifampicin (4R)
 3 months of weekly rifapentine plus isoniazid (3HP)
 3 months of daily rifampicin plus isoniazid (3RH)
 1 month of daily rifapentine plus isoniazid (1HP)
 Other: (please specify)

a.i If more than one regimen is recommended, which is the preferred regimen?

- 6 months of daily isoniazid monotherapy (6H)
 9 months of daily isoniazid monotherapy (9H)
 36 months of daily isoniazid monotherapy (36H)
 4 months of daily rifampicin (4R)
 3 months of weekly rifapentine plus isoniazid (3HP)
 3 months of daily rifampicin plus isoniazid (3RH)
 1 month of daily rifapentine plus isoniazid (1HP)
 Other: (please specify)

b. Children living with HIV

- 6 months of daily isoniazid monotherapy (6H)
 9 months of daily isoniazid monotherapy (9H)
 4 months of daily rifampicin (4R)
 3 months of weekly rifapentine plus isoniazid (3HP)
 3 months of daily rifampicin plus isoniazid (3RH)
 Other: (please specify) _____

b.i If more than one regimen is recommended, which is the preferred regimen?

- 6 months of daily isoniazid monotherapy (6H)
 9 months of daily isoniazid monotherapy (9H)
 4 months of daily rifampicin (4R)
 3 months of weekly rifapentine plus isoniazid (3HP)
 3 months of daily rifampicin plus isoniazid (3RH)
 Other: (please specify) _____
-

176. Are the following required in national guidelines prior to initiating TB preventive treatment?

a. Tuberculin skin test or interferon-gamma release assay (IGRA) test

- Yes, for all
 No
 Only if available

b. X-ray

- Yes, for all
 No
 Only if available

177. In the last reporting period, has there been a stock-out of any of the following?

a. Isoniazid

- Yes, at the national level
 Yes, at the local level
 No

b. Vitamin B6

- Yes, at the national level
 Yes, at the local level
 No

c. Other nationally recommended TB preventive treatment drugs

- Yes, at the national level
 Yes, at the local level
 No

ci. If yes, please specify which drugs: _____

178. What is the status of integration of the following HIV/TB services?

a. WHO-recommended rapid molecular diagnostics (e.g., Xpert MTB/RIF) are collocated

- In few (<50%) health facilities providing HIV testing and care
 In many (50–95%) health facilities providing HIV testing and care
 Countrywide (>95% of health facilities providing HIV testing and care)
 Not integrated in practice
 Other (please specify): _____

b. People living with HIV who have TB received antiretroviral medicines at the same place as they receive their TB treatment

- In few (<50%) health facilities
 In many (50–95%) health facilities
 Countrywide (>95% of health facilities)
 Not integrated in practice
 Other (please specify): _____

c. Antiretroviral therapy is initiated by the same health-care worker providing TB treatment for people living with HIV who have TB

- In few (<50%) health facilities
 In many (50–95%) health facilities
 Countrywide (>95% of health facilities)
 Not integrated in practice
 Other (please specify): _____

d. Antiretroviral therapy and TB treatment for people living with HIV who have TB are monitored by one health-care worker

- In few (<50%) health facilities
 In many (50–95%) health facilities
 Countrywide (>95%) of health facilities
 Not integrated in practice
 Other (please specify): _____
-

Cervical cancer

179. Is cervical cancer screening and treatment for women living with HIV recommended in the following?
- a. The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs)
- Yes
- No
- b. The national strategic plan governing the AIDS response
- Yes
- No
- c. National HIV-treatment guidelines
- Yes
- No
-

Coinfection policies

180. What coinfection policies are in place in the country for adults, adolescents and children (please select all that apply)?
- Isoniazid preventive therapy (IPT) or latent TB infection (LTBI) prophylaxis for people living with HIV
- Intensified TB case finding among people living with HIV
- TB infection control in HIV health-care settings
- Co-trimoxazole prophylaxis
- Hepatitis B screening and management in antiretroviral therapy clinics
- Hepatitis C screening and management in antiretroviral therapy clinics
- Hepatitis B vaccination provided at antiretroviral therapy clinics
- Hepatitis C treatment (direct-acting antiviral agents) provided in antiretroviral therapy clinics
- Other (please specify): _____
-

Sexually transmitted infections (STIs)

181. Does your country have national treatment guidelines or recommendations for sexually transmitted infections (STIs)?
- Yes
- No

181.1 If yes, in what year were they last updated? 2019

182. Does your country have a national strategy or action plan for the prevention and control of STIs?
- Yes
- No
-

183. Is gonococcal antimicrobial-resistance monitoring conducted in the country?
- Yes, annually
- Yes, less than annually
- No
-

184. Does the national definition for congenital syphilis include stillbirths?
- Yes
- No
-

Strategy

185. Does your country have a national strategy or policy that guides the AIDS response?
- Yes, a stand-alone AIDS strategy or policy
- Yes, a health strategy or policy that integrates the AIDS response
- No
- Other (please specify): _____

- 185.1 If yes, has the national HIV strategy or policy been reviewed in the past two years?
- Yes
- No
-

185.2 If yes to 185, does the national strategy or policy guiding the AIDS response explicitly address the following key populations or vulnerable groups (please select all that apply)?

- Adolescent key populations
- Gay men and other men who have sex with men
- People in prisons and other closed settings
- People who inject drugs
- Sex workers (male and female)
- Transgender people
- Non-displaced people affected by emergencies
- Refugees
- Internally displaced people
- Migrants and asylum-seekers

185.3 If yes to 185, does the national strategy or policy guiding the AIDS response (please select all that apply):

- Specifically include explicit plans or activities that address the needs of key populations
- Specifically include explicit plans or activities that address the needs of young women and girls
- Draw on the most recent evidence about the national HIV epidemic and the status of the response
- Integrate inputs from a multisectoral process, including various government sectors as well as non-governmental partners

185.4 If yes to 185, does the national strategy or policy guiding the AIDS response include gender-transformative* interventions, including interventions to address the intersections of gender-based violence and HIV?

- Yes
- No

185.4a. If yes to 185.4, does the national strategy or policy guiding the AIDS response include a dedicated budget for implementing gender-transformative interventions*?

- Yes
- No

Migrant populations²⁶

186. Do national laws/policies enable migrants to access HIV services (testing, antiretroviral medicine and care) under the same conditions as citizens?

186.a Asylum seekers

- Yes
- No

186.a.i If yes, has the policy been implemented?

- Yes
- No

186.b Documented migrants

- Yes
- No

186.b.i If yes, has the policy been implemented?

- Yes
- No

186.c Undocumented migrants

- Yes
- No

186.c.i If yes, has the policy been implemented?

- Yes
- No

²⁶ Migrants are defined as non-citizens who are in a country other than their country of origin for a stay of longer than six months

Monitoring and evaluation

- 187. Does your country have a national monitoring and evaluation plan or strategy for HIV?**
 Yes, a stand-alone HIV monitoring and evaluation strategy or plan
 Yes, HIV monitoring and evaluation is integrated in a broader health monitoring and evaluation strategy or plan
 No
 Other (please specify): _____

- 187.1 If yes, has it been updated in the past two years?**
 Yes
 No

- 187.2 If yes to 187, does it integrate gender-sensitive indicators*?**
 Yes
 No

Information system

- 188. Does your country have a functioning health information system that is electronic, paper-based or both?**
 Yes, electronic
 Yes, paper-based
 Yes, both
 No functioning health information system

- 188.1 If a health information system exists, are patient-level viral load testing results routinely available within the health information system?**
 Yes, fully
 Yes, partially
 No

- 188.2 If a health information system exists, are treatment cascade data included in the health information system at the district level?**
 Yes, fully
 Yes, partially
 No

Surveillance

- 189. Does the country carry out sentinel surveillance in the following special populations?**

Population	Sentinel surveillance conducted	How often is it conducted (in years)?	In what year was the most recent survey conducted?	In what number of sites was surveillance conducted?
Sex workers	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Men who have sex with men	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
People who inject drugs	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Transgender people	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
In prisons and other closed settings	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

Other (please specify): _____

190. Is the country using data from antenatal clinic attendees on the number of women who tested positive for HIV and the number of women already known to be HIV-positive to monitor trends in HIV prevalence?

- Yes
 No

Patient monitoring systems

191. Has the country updated the patient monitoring system indicators and tools using the 2017 WHO Consolidated guidelines on person-centered HIV patient monitoring and case surveillance?

- Yes, fully
 Yes, partially
 No
 Don't know

What percentage of health facilities have electronic systems for patient-level longitudinal data capture (e.g., electronic medical records)? _____

Unique identification codes for patients

192. Does the country have a method to identify and remove duplicate health information for patients within and between clinics (such as linking records using unique identifiers and/or personal identifiable information (including biometrics) for the following services?

	Method to identify and remove duplicate health information	If yes, please specify how data are linked
Treatment services	<input checked="" type="checkbox"/> Yes, nationally harmonized <input type="checkbox"/> Yes, but varies across regions <input type="checkbox"/> Yes, but varies across programmes <input type="checkbox"/> No <input type="checkbox"/> Don't know	<input type="checkbox"/> National unique personal identifier <input checked="" type="checkbox"/> HIV-specific unique identifier <input type="checkbox"/> Combination of routinely collected personal identifying information <input type="checkbox"/> Biometric <input type="checkbox"/> Other (please specify) _____
Testing services	<input checked="" type="checkbox"/> Yes, nationally harmonized <input type="checkbox"/> Yes, but varies across regions <input type="checkbox"/> Yes, but varies across programmes <input type="checkbox"/> No <input type="checkbox"/> Don't know	<input type="checkbox"/> National unique personal identifier <input checked="" type="checkbox"/> HIV-specific unique identifier <input type="checkbox"/> Combination of routinely collected personal identifying information <input type="checkbox"/> Biometric <input type="checkbox"/> Other (please specify) _____
Laboratory services	<input type="checkbox"/> Yes, nationally harmonized <input type="checkbox"/> Yes, but varies across regions <input type="checkbox"/> Yes, but varies across programmes <input checked="" type="checkbox"/> No <input type="checkbox"/> Don't know	<input type="checkbox"/> National unique personal identifier <input type="checkbox"/> HIV-specific unique identifier <input type="checkbox"/> Combination of routinely collected personal identifying information <input type="checkbox"/> Biometric <input type="checkbox"/> Other (please specify) _____

HIV prevention services designed for any key population group to track combination prevention uptake

Gay men and other men who have sex with men	<input type="checkbox"/> Yes, nationally harmonized <input type="checkbox"/> Yes, but varies across regions <input type="checkbox"/> Yes, but varies across programmes <input checked="" type="checkbox"/> No <input type="checkbox"/> Don't know	<input type="checkbox"/> National unique personal identifier <input type="checkbox"/> HIV-specific unique identifier <input type="checkbox"/> Combination of routinely collected personal identifying information <input type="checkbox"/> Biometric <input type="checkbox"/> Other (please specify) _____
Sex workers	<input type="checkbox"/> Yes, nationally harmonized <input type="checkbox"/> Yes, but varies across regions <input type="checkbox"/> Yes, but varies across programmes <input checked="" type="checkbox"/> No <input type="checkbox"/> Don't know	<input type="checkbox"/> National unique personal identifier <input type="checkbox"/> HIV-specific unique identifier <input type="checkbox"/> Combination of routinely collected personal identifying information <input type="checkbox"/> Biometric <input type="checkbox"/> Other (please specify) _____

Transgender people

- Yes, nationally harmonized
- Yes, but varies across regions
- Yes, but varies across programmes
- No
- Don't know

- National unique personal identifier
- HIV-specific unique identifier
- Combination of routinely collected personal identifying information
- Biometric
- Other (please specify) _____

People who inject drugs

- Yes, nationally harmonized
- Yes, but varies across regions
- Yes, but varies across programmes
- No
- Don't know

- National unique personal identifier
- HIV-specific unique identifier
- Combination of routinely collected personal identifying information
- Biometric
- Other (please specify) _____

Other (please specify): _____

Case surveillance

193. Is HIV a nationally notifiable condition by law?

- Yes
- No

194. Does the country have an HIV case surveillance* system?

- Yes
- No

194.1 If yes, are the following sentinel events reported:

a) Diagnosis

- Yes
- No

b) Result of first CD4 cell count at diagnosis

- Yes
- No

c) Antiretroviral therapy initiation

- Yes
- No

d) Results of first and follow-up viral load test

- Yes
- No

e) Deaths

- Yes
- No

90-90-90

195. What is the source of data on the number of people who know their HIV status that is available for Indicator 1.1 for 2020?

- HIV case surveillance
 - Modelling
 - No data available
 - Other (please specify): _____
-

196. What is the source of the number of people living with HIV who are on antiretroviral therapy for Indicator 1.2 for 2020?

- Programme data, primarily reported in aggregate
- Programme data, primarily reported using identifiers
- National estimates based on population survey results
- National estimates based on nationally representative cohort monitoring
- No data available
- Other (please specify): _____

197. When was the most recent data quality review conducted to determine the accuracy of national-level numbers of people reported to be on treatment?

- Currently being conducted (results expected next year)
- Completed in the last year and results available
- Completed 2 to 5 years ago
- Never conducted or conducted more than 5 years ago

197.1 If a data quality review has been conducted in the last year, have the results been used to adjust the numbers of people on treatment reported in Indicator 1.2?

- Yes
- No

198. What is the source of the number of people living with HIV who are virally suppressed for Indicator 1.4 for 2020?

- Aggregate routine programme data from laboratory systems
 - Data from case surveillance systems
 - Survey
 - No data available
 - Other (please specify): _____
-

National Commitments and Policy Instrument: Part B

* The guidelines for the NCPI define the terms marked with an asterisk (*).

1. Ensure that 30 million people living with HIV have access to treatment through meeting the 90–90–90 targets by 2020.

- Commit to the 90–90–90 targets.
- Address regulations, policies and practices that prevent access to safe, efficacious and affordable generic medicines, diagnostics and related health technologies, including by ensuring the full use of the Agreement on Trade-related Aspects of Intellectual Property Rights (TRIPS) flexibilities, and strengthen regional and local capacity to develop, manufacture and deliver quality-assured affordable health products.

1. Does your country have any forms of mandatory (or compulsory) HIV testing that are provided for or carried out?

No

Yes (please briefly explain when mandatory testing is carried out and the groups that are affected): _____

2. Where is viral load testing available in your country?

Available at specialized centres only

Available at antiretroviral therapy facilities, either on-site or by referral

Other (please specify): _____

3. Are any of the following retention support services available in your country (please select all that apply):

Community-based interventions (e.g., patient advocates, treatment, and peer support interventions providing adherence and psychosocial support in the community)

Adherence clubs and peer support (e.g., peer support, distribution of antiretroviral medicines and assessment by nonclinical or lay providers)

Other (please specify): _____

4. Are any of the following adherence support services available in your country (please select all that apply):

Peer counsellors

Text messages

Use of reminder devices

Patient reintegration follow-up telephone calls/home visits

Enhanced adherence counselling

Referral to psychological/socioeconomic support

Cognitive behavioural therapy

Behavioural skills training/medication adherence training

Fixed-dose combinations and once-daily regimens

Case management

Peer navigation

Other (please specify): _____

5. Are migrants²⁷ able to access HIV services (testing, antiretroviral medicines and care)?

Yes

No

²⁷ Migrants are defined as non-citizens who are in a country other than their country of origin for a stay of longer than six months.

2. Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018.

6. How many health facilities in the country are providing services for preventing mother-to-child transmission (PMTCT) of HIV? _____

7. How many of the health facilities providing PMTCT services have community accountability mechanisms* in place? _____

8. Has a meeting been held at the national level to review PMTCT progress in the past 12 months?

Yes

No

8.1 If yes:

a) Were community and civil society represented at the national review meeting?

Yes

No

b) Were women living with HIV represented at the national review meeting?

Yes

No

c) Was the opportunity provided for community and civil society to provide comments?

Yes

No

d) Was analysis by community and civil society provided in a systematic manner?

Yes

No

e) Was analysis provided by community and civil society documented and disseminated following the meeting?

Yes

No

9. Do women living with HIV in your country participate* in developing national policies, guidelines and strategies relating to PMTCT?

Yes

No

10. In the context of PMTCT programmes in your country, are there reports or is there documentation of any of the following (please select all that apply):

Mandatory or coerced testing and/or treatment for HIV

Lack of informed, voluntary and prior obtained consent

Forced and coerced abortion, contraception and/or sterilization

Lack of confidentiality and privacy

Other grave or systematic human rights abuses* (please describe): _____

10.1 If there are reports of any of these situations in your country, is the government carrying out due diligence in responding to them?

Yes

No

Don't know

3. Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners.

- Ensure that 90% of people at risk of HIV infection have access to comprehensive HIV prevention services, including sex workers and their clients, men who have sex with men, transgender people, people who inject drugs and prisoners.
- Reach 3 million people with pre-exposure prophylaxis by 2020.
- Reach 25 million men with voluntary medical male circumcision in high-incidence countries by 2020.
- Make 20 billion condoms available annually by 2020 in low- and middle-income countries.

Law enforcement

11. Can possession of a needle/syringe without a prescription be used as evidence of drug use or cause for arrest in your country?
 Yes
 No

12. Have transgender people in your country been arrested or prosecuted for manifestations of their gender identity in the past three years?
 Yes
 No
 Don't know

13. Have sex workers in your country been arrested or prosecuted in relation to selling sex in the past three years?
 Yes
 No
 Don't know

14. Have people in your country been arrested or prosecuted for consensual same-sex sexual acts in the past three years?
 Yes
 No
 Don't know

15. Have people in your country been arrested or prosecuted for using drugs in the past three years?
 Yes
 No
 Don't know

Legal protections for key populations

16. Have any constitutional prohibitions of discrimination been interpreted to include gender identity by any of the following?
a) Courts
 Yes
 No

b) Government policy
 Yes
 No

16.1 If yes to any of the above, have these constitutional prohibitions of discrimination been successfully used to protect or advocate for transgender people's rights in the last two years in any of the following (select all that apply)?
 Courts
 Advocacy with government for law or policy reform
 Other (please specify): _____

17. Does your country have legal gender recognition laws or policies that enable the legal change of gender?

Yes
 No

17.1 If yes, are genders other than male and female legally recognized?

Yes
 No

17.2 If yes to question 17, are any of the following required in order to change gender (check all that apply)?

Self-declaration (no medical evidence required)
 Gender reassignment surgery
 Sterilization
 Certificate of psychological assessment
 Other (specify): _____

17.3 If a change of gender marker is legally recognized, do any of the following barriers limit its application?

Unclear or vague regulations or application processes
 High cost
 Gender reassignment surgery a requirement for change
 Other (please specify): _____

18 Is it legally possible to change one's name to that of another gender on any of the following (please select all that apply)?

Passport or other national ID
 Own birth certificate
 Marriage/divorce certificate
 No

18.1 If yes to any above, is a Gender Recognition Certificate or some other state-mandated certificate required for these changes?

Yes
 No

19. Have any constitutional prohibitions of discrimination been interpreted to include sex work by any of the following?

a) Courts

Yes
 No

b) Government policy

Yes
 No

c) Are there other non-discrimination provisions specifying sex work?

Yes
 No

19.1 If yes to any, have these constitutional prohibitions of discrimination been successfully used to protect or advocate for sex workers' rights in the last two years in any of the following (select all that apply)?

Courts
 Advocacy with government for law or policy reform
 Other (please specify): _____

20. Have any constitutional prohibitions of discrimination been interpreted to include sexual orientation by any of the following?

a) Courts

Yes
 No

b) Government policy

Yes
 No

-
- c) **Does your country have any other laws or other provisions specifying protections based on grounds of sexual orientation (please select all that apply)?**
- Yes, hate crimes based on sexual orientation considered an aggravating circumstance
 - Yes, incitement to hatred based on sexual orientation prohibited
 - Yes, other non-discrimination provisions specifying sexual orientation
 - No
- 20.1 **If yes to any of the above (20 a, b, c), have these constitutional prohibitions of discrimination been successfully used to protect or advocate for the rights of people on the basis of their sexual orientation in the last two years in any of the following?**
- Courts
 - Advocacy with government for law or policy reform
 - Other (please specify): _____
-

21. **Does your country have any specific antidiscrimination laws* or other protective provisions that apply to people who use drugs?**
- Yes
 - No
- 21.1 **If yes, have these protective provisions been successfully used to protect or advocate for the rights of people who use drugs in the last two years in any of the following?**
- Courts
 - Advocacy with government for law or policy reform
 - Other (please specify): _____
-

22. **Are there any of the following barriers in your country to making use of constitutional or other legislative protections:**
- Unclear or lengthy administrative processes
 - High cost
 - Difficulties in accessing the judicial system
 - Lack of legal support
 - Other (please specify): _____
-

HIV prevention services for people who inject drugs

23. **Are needle and syringe programmes operational in your country?**
- Yes
 - No, not at all
 - No, but needles and syringes can be legally purchased in pharmacies without a prescription
-

24. **Is naloxone (used to reverse opioid overdoses) available through community distribution in your country?**
- Yes
 - No
-

25. **Are opioid substitution therapy (OST) programmes operational in your country?**
- Yes
 - No
-

HIV prevention services in prisons

26. **Are needle and syringe programmes operational in prisons in your country?**
- Yes
 - No
-

27. **Are opioid substitution therapy (OST) programmes operational in prisons in your country?**
- Yes
 - No
-

28. **Are condoms and lubricants available to prisoners in your country?**
- Yes
 - No
-

29. Is antiretroviral therapy available to all prisoners living with HIV in your country?

- Yes
 No
-

30. Are HIV tests in prisons in your country:

a) Carried out with the informed consent of prisoners?

- Yes
 No

b) Systematically offered at entry and/or exit?

- Yes
 No

c) Free of charge?

- Yes
 No

d) Confidential?

- Yes
 No

e) Available at any time during detention?

- Yes
 No

f) Accompanied by relevant and accessible information?

- Yes
 No

g) Accompanied by confidential pre- and post-test counselling?

- Yes
 No

h) Equally accessible to all prisoners?

- Yes
 No

30.h.i

- If no, which prisoners do not have equal access (please specify): short-term and high-risk prisoners because they are confined
-

31. Is hepatitis C treatment (using direct-acting antivirals) available in prisons in your country?

- Yes
 No
-

Participation

32. Do men who have sex with men participate* in developing national policies, guidelines and/or strategies relating to their health in your country?

- Yes
 No
-

33. Do sex workers participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No
-

34. Do people who inject drugs participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

35. Do transgender people participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

36. Do former and/or current prisoners participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

Pre-exposure prophylaxis (PrEP)

37. Is pre-exposure prophylaxis (PrEP) medicine available through any of the following in your country (please select all that apply)?

- Research (including pilot studies and demonstration projects)
 Public facilities
 Community-based distribution (including mobile services)
 Pharmacies (stand-alone)
 Private providers
 The Internet
 Educational institutions
 Other (please specify): _____

38. Do any of the following barriers limit access to PrEP in your country (please select all that apply):

- Possession of PrEP used as evidence of sex work or other criminalized sexual activity
 PrEP is associated with stigmatized sexual behaviour
 PrEP is only provided in centralized locations
 PrEP is only provided in specialized HIV treatment locations
 High out-of-pocket cost of PrEP services
-

4. Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020.

- Ensure universal access to quality and affordable sexual and reproductive health-care services, including HIV services, for women.
- Eliminate HIV-related stigma and discrimination in health-care settings by 2020.
- Review and reform laws that reinforce stigma and discrimination, including on age of consent, HIV non-disclosure, exposure and transmission, travel restrictions and mandatory testing.

39. Does legislation include any of the following provisions related to violence against women in your country (please select all that apply)?

- Court injunctions to ensure the safety and security of survivors
- Special prosecutions unit in law enforcement
- Free legal services or assistance
- Financial support to survivors
- Specialized police staff or unit to deal with violence against women
- Services for the person perpetrating violence
- Other (please specify): _____

40. Does your country have any of the following to protect key populations and people living with HIV from violence (please select all that apply)?

- General criminal laws prohibiting violence
- Specific legal provisions prohibiting violence against people based on their HIV status or belonging to a key population
- Programmes to address intimate partner violence*
- Programmes to address workplace violence
- Interventions to address police abuse
- Interventions to address torture and ill-treatment in prisons

41. Does your country have service delivery points that provide the following appropriate medical and psychological care and support for women and men who have been raped and experienced incest in accordance with the recommendations of the 2013 WHO guidelines *Responding to intimate partner violence and sexual violence against women*:

- a) First-line support, or what is known as psychological first aid
 - Yes
 - No
- b) Emergency contraception for women who seek services
 - Yes
 - No
- c) Safe abortion if a woman becomes pregnant as a result of rape in accordance with national law
 - Yes
 - No
- d) Post-exposure prophylaxis for sexually transmitted infections and HIV (within 72 hours of sexual assault) as needed
 - Yes
 - No

42. Does your country have the following services in place for women who have experienced violence (please select all that apply)?

- Legal assistance, or a public prosecutor/public solicitor's office that can handle domestic violence cases
- Shelters or alternative accommodation available
- 24-hour phone hotline to seek advice and support
- Women's advocacy and counselling centre providing support and crisis interventions

43. Does your country have laws and/or policies in place requiring health-care settings (specifically or as part of broader laws/policies for service providers) to provide timely and quality health care regardless of gender, nationality, age, disability, ethnic origin, sexual orientation, religion, language, socioeconomic status, HIV or other health status, or because of selling sex, using drugs, living in prison or any other grounds?

- Yes, policies exist but are not consistently implemented
 - Yes, policies exist and are consistently implemented
 - No, policies do not exist
-

5. Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year.

44. Do young people (15–24 years old) participate* in developing national policies, guidelines and strategies relating to their health in your country?

- Yes
 No

44.1 If yes, do young people participate* in any of the following decision-making spaces in the national HIV response, where they exist?

Decision-making space	Does it exist?	Do young people participate in this space?
Technical teams for the development, review and update of national AIDS strategies and plans	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Technical teams for the development or review of programmes that relate to young people's access to HIV testing, treatment, care and support services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
National AIDS Coordinating Authority or equivalent, with a broad-based multi-sector mandate	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Global Fund Country Coordinating Mechanism	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Civil society coordination spaces of populations most affected by HIV	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Community advisory body for hospitals, clinics and/or research projects	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Other (please specify): _____		

6. Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020.

45. Do any of the following barriers limit access to social protection* programmes in your country (please select all that apply)?

- Social protection programmes do not include people living with HIV, key populations and/or people affected by HIV
 Lack of information available on the programmes
 Complicated procedures
 Fear of stigma and discrimination
 Lack of documentation that confers eligibility, such as national identity cards
 Laws or policies that present obstacles to access
 High out-of-pocket expenses
 People living with HIV, key populations and/or people affected by HIV are covered by another programme
 Other (please specify): _____

7. Ensure that at least 30% of all service delivery is community-led by 2020.

46. Does your country have restrictions to the registration and operation of civil society and community-based organizations that affect HIV service delivery (please select all that apply)?

- Restrictions on registration
 - Territorial restrictions to operations, such as zoning
 - Restrictions on providing services to key populations
 - Cumbersome reporting and other restrictions on operations
 - Other (please specify): _____
 - No
-

47. Does your country have other regulatory barriers to community-led service delivery (please select all that apply)?

- Restrictions requiring that HIV services only be provided in health-care facilities
 - Restrictions on providing services to key populations
 - Overly restrictive criteria for eligibility for community-based service delivery (please describe): _____
 - Other (please describe): _____
 - No
-

48. Does your country have laws, policies or regulations that hinder access to funding for work by civil society organizations and community-based organizations for HIV-related work (please select all that apply)?

- Lack of social contracting or other mechanisms allowing for funding of community-led service delivery to be funded from domestic funding
 - "Foreign agents" or other restrictions to accessing funding from international donors
 - Other (please describe): _____
 - No
-

8. Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers.

9. Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights.

Rights literacy

49. In the past two years have there been training and/or capacity-building programmes for people living with HIV and key populations to educate them and raise awareness about their rights (in the context of HIV) in your country?

- Yes, at scale at the national level
- Yes, at scale at the sub-national level (in at least one province/region/district)
- Yes, one-off activities
- Yes, at a small scale
- No

50. Are there any of the following barriers to providing training and/or capacity-building for people living with HIV and key populations to educate them and raise their awareness about their rights (please select all that apply)?

- Lack of political will
- Lack of funding
- Lack of capacity for delivery of trainings
- Barriers that hinder the target audience in accessing such trainings or capacity-building
- Others (please describe): _____

Accountability mechanisms

51. Are mechanisms established by the government in place to address cases individual complaints of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population), such as (but not limited to) a national human rights institution, ombudsperson, tribunal or commission?

- Yes (please describe): _____
- No

52. Are there mechanisms established by the community and/or nongovernmental organizations to record and address individual complaints of HIV-related discrimination (based on perceived HIV status and/or belonging to any key population)? Examples of such mechanisms include traditional cultural structures or nongovernmental organizations trained to address claims through mediation.

- Yes (please describe): _____
- No

53. Does your country have any of the following accountability mechanisms in relation to discrimination and violations of human rights in health-care settings?

- Complaints procedure
- Mechanisms of redress and accountability
- Procedures or systems to protect and respect patient privacy or confidentiality
- Other (please describe): _____

54. Does your country have any of the following barriers to accessing accountability mechanisms present (please select all that apply)?

- Mechanisms do not function
 - Mechanisms are not sensitive to HIV
 - Affordability constraints for people from marginalized and affected groups
 - Awareness or knowledge of how to use such mechanisms is limited
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55. **Does your country have mechanisms in place for accessing affordable legal services (please select all that apply)?**
- Yes, legal aid systems applicable to HIV casework
 - Yes, pro bono legal services provided by private law firms or individual lawyers
 - Yes, legal services provided by (university-based) legal clinics
 - Yes, community paralegals
 - Yes, other (please describe): _____
 - No

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56. **Does your country monitor access to justice among key populations or people living with or affected by HIV?**
- Yes (please describe): _____
 - No

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57. **Do key populations or people living with or affected by HIV face particular barriers in accessing justice in your country?**
- No
 - Yes—please describe and provide details on the scale (i.e., nationally): **Legal barriers prevent people from coming forward**
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