



Custom analysis extract of:

UNGASS - National Composite Policy Index (NCPI) 2007

Latin America

Peru

COUNTRY:

Peru

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:	Organisation	MINSA
:	Name/Position	Alberto Huacoto. Equipo técnico ESN-ITS/VIH
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I
:	Organisation	Fuerzas Policiales
:	Name/Position	Andrés Paredes. Coordinador ITS/VIH
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.IV
:	Organisation	MINSA
:	Name/Position	Cristina Magan. Equipo técnico ESN-ITS/VIH

:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III
:	Organisation	MINEDU
:	Name/Position	Darsy Calderón. OTUPI
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III
:	Organisation	MINSA
:	Name/Position	Fresia Cárdenas. Directora Dirección de Calidad
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.IV
:	Organisation	Congreso de la República
:	Name/Position	Guido Lombardi. Congresista de la República
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III
:	Organisation	MINSA
:	Name/Position	Gustavo Rossel. Equipo técnico ESN-ITS/VIH
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.V
:	Organisation	ESSALUD
:	Name/Position	Luis Vega Centeno. Subgerente de protección de salud
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III / A.IV
:	Organisation	Gobierno Regional. Arequipa
:	Name/Position	Miguel Alayza . Gerente regional de salud
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III / A.IV
:	Organisation	MINSA
:	Name/Position	Mónica Pun. Coordinadora componente VIH. DGE
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.V
:	Organisation	Gobierno Regional. Lambayeque
:	Name/Position	Nery Saldarriaga. Vicepresidenta de Gobierno Regional
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II

:	Organisation	Dirección Regional de Salud. Loreto
:	Name/Position	Pilar Jarama. Coordinadora de ESR-ITS/VIH
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III / A.IV
:	Organisation	Dirección Regional de Salud. Lambayeque
:	Name/Position	Rocío Pejerrey. Coordinadora de ESR-ITS/VIH
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III / A.IV
:	Organisation	MINSA
:	Name/Position	Víctor Chávez. Equipo técnico ESN-ITS/VIH
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.IV
:	Organisation	Red SIDA Perú
:	Name/Position	Alicia Quintana
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II
:	Organisation	ONG-TS Miluskas
:	Name/Position	Angela Villón
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.II
:	Organisation	UPCH
:	Name/Position	Carlos Cáceres
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	CONAMUSA
:	Name/Position	Estelia Lizama
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	OPS
:	Name/Position	Fernando Gonzales
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	Red Peruana de Mujeres Viviendo con el VIH
:	Name/Position	Gloria Ipanaque

:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.II
:	Organisation	CIAT
:	Name/Position	Guiselly Flores
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	IPS.USAID
:	Name/Position	Henry Palacios
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	ONG. Vía libre
:	Name/Position	Jhon Gutierrez
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I
:	Organisation	UNMSM
:	Name/Position	Jorge Alarcón
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.II
:	Organisation	MHOL
:	Name/Position	Jorge Bracamonte
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.III
:	Organisation	ONG Inmensa
:	Name/Position	Jorge Sánchez
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	ADS
:	Name/Position	Mario Rios
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I
:	Organisation	UNICEF
:	Name/Position	Mario Tavera
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.III / B.IV
:	Organisation	IPS.USAID
:	Name/Position	Percy Minaya

:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
Position:		Responsable de información
Position:	Full time/Part time	Full time
Position:	Since when?	2005
Position:	Full time/Part time	Full time
Position:	Full time/Part time	Full time
Position:	Full time/Part time	Full time
Position:	Full time/Part time	Full time

1. Has the country developed a national multisectoral strategy/action framework to combat AIDS?

Yes

IF YES, period covered:

2007 - 2011

1.1 How long has the country had a multisectoral strategy/action framework?

1995

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

Health:	Strategy/Action framework	Yes
Health:	Earmarked budget	Yes
Education:	Strategy/Action framework	Yes
Education:	Earmarked budget	No
Labour:	Strategy/Action framework	Yes
Labour:	Earmarked budget	No
Transportation:	Strategy/Action framework	No
Transportation:	Earmarked budget	No
Military/Police:	Strategy/Action framework	Yes
Military/Police:	Earmarked budget	No
Women:	Strategy/Action framework	No
Women:	Earmarked budget	No
Young people:	Strategy/Action framework	No
Young people:	Earmarked budget	No

1.3 Does the multisectoral strategy/action framework address the following target populations, settings and cross-cutting issues?

a. Women and girls:	Yes
b. Young women/young men:	Yes
c. Specific vulnerable sub-populations:	Yes
d. Orphans and other vulnerable children:	No
e. Workplace:	Yes
f. Schools:	Yes
g. Prisons:	Yes
h. HIV, AIDS and poverty:	No
i. Human rights protection:	Yes
j. Involvement of people living with HIV:	Yes
k. Addressing stigma and discrimination:	Yes
l. Gender empowerment and/or gender equality:	No

1.4 Were target populations identified through a process of a needs assessment or needs analysis?

Yes

IF YES, when was this needs assessment /analysis conducted? Year:

2006

1.5 What are the target populations in the country?

HSH, TS, PPL, mujeres gestantes, jóvenes

1.6 Does the multisectoral strategy/action framework include an operational plan?

No

1.7 Does the multisectoral strategy/action framework or operational plan include:

a. Formal programme goals? :	Yes
b. Clear targets and/or milestones? :	Yes
c. Detailed budget of costs per programmatic area? :	Yes
d. Indications of funding sources?:	Yes
e. Monitoring and Evaluation framework? :	No

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

Active involvement

IF active involvement, briefly explain how this was done:

Se consiguió durante la elaboración del PEM 2007-2011, mediante reuniones consultivas propiciadas por CONAMUSA

1.9 Has the multisectoral strategy/action framework been endorsed by most external Development Partners (bi-laterals; multi-laterals)?

Yes

1.10 Have external Development Partners (bi-laterals; multi-laterals) aligned and harmonized their HIV and AIDS programmes to the national multisectoral strategy/action framework?

Yes, all partners

2. Has the country integrated HIV and AIDS into its general development plans such as:

- a) National Development Plans,
- b) Common Country Assessments/United Nations Development Assistance Framework,
- c) Poverty Reduction Strategy Papers,
- d) Sector Wide Approach?

Yes

2.1 IF YES, in which development plans is policy support for HIV and AIDS integrated?

e) Other::

2.2 IF YES, which policy areas below are included in these development plans?

HIV Prevention:	Development Plans	e)
Treatment for opportunistic infections:	Development Plans	e)
Antiretroviral therapy:	Development Plans	e)
Care and support (including social security or other schemes):	Development Plans	e)
Reduction of stigma and discrimination:	Development Plans	e)

3. Has the country evaluated the impact of HIV and AIDS on its socio-economic development for planning purposes?

No

4. Does the country have a strategy/action framework for addressing HIV and AIDS issues among its national uniformed services such as military, police, peacekeepers, prison staff, etc?

No

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

Yes

5.1 Has the National Strategic Plan/operational plan and national AIDS budget been revised accordingly?

Yes

5.2 Have the estimates of the size of the main target population sub-groups been updated?

Yes

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

Estimates only

5.4 Is HIV and AIDS programme coverage being monitored?

Yes

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

Yes

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

Yes

IF YES, which population sub-groups?

HSH, TS y mujeres gestantes

(c) IF YES, is coverage monitored by geographical area?

Yes

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

Regional

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

Yes

Overall, how would you rate strategy planning efforts in the HIV and AIDS programmes in 2007 and in 2005?

2007:	5
2005:	2

Comments on progress made in strategy planning efforts since 2005:

El mayor logro se ha basado en la elaboración y aprobación del Plan Estratégico Multisectorial 2007-2011

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

President/Head of government :	Yes
Other high officials :	Yes
Other officials in regions and/or districts :	Yes

2. Does the country have an officially recognized national multisectoral AIDS management/coordination body? (National AIDS Council or equivalent)?

Yes

2.1 IF YES, when was it created? Year:

2002

2.2 IF YES, who is the Chair?

Name: Hernan Garrido Lecca
Title/Function: Ministro de Salud

2.3 IF YES, does it:

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

3. Does the country have a national AIDS body or other mechanism that promotes interaction between government, people living with HIV, civil society and the private sector for implementing HIV and AIDS strategies/ programmes?

Yes

3.1 IF YES, does it include?

Terms of reference : Yes
Defined membership : Yes
Action plan : Yes
Functional Secretariat : Yes
Regular meetings (*): Yes

(*If it does include regular meetings, what is the frequency of the meetings:

Mensual

IF YES, What are the main achievements?

La CONAMUSA viene a ser el centro de coordinaciones multisectoriales en políticas referidas a la lucha contra el VIH y la TB. Sus mayores logros fueron la presentación y aprobación de tres proyectos financiados por el Fondo Mundial y la aprobación del PEM

IF YES, What are the main challenges for the work of this body?

Están referidos al orden financiero debido a la falta de presupuesto para realizar sus acciones

5. What kind of support does the NAC (or equivalent) provide to implementing partners of the national programme, particularly to civil society organizations?

Information on priority needs and services :	Yes
Technical guidance/materials:	Yes
Drugs/supplies procurement and distribution :	No
Coordination with other implementing partners :	Yes
Capacity-building :	Yes

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

No

Overall, how would you rate the political support for the HIV and AIDS programmes in 2007 and in 2005?

2007:	4
2005:	2

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

Yes

1.1 IF YES, what key messages are explicitly promoted?

Delay sexual debut:
Reduce the number of sexual partners:
Use condoms consistently:
Engage in safe(r) sex:
Greater acceptance and involvement of people living with HIV:

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

Yes

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

Yes

2.1 Is HIV education part of the curriculum in

primary schools? :	No
secondary schools? :	Yes
teacher training? :	Yes

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

Yes

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

No

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

Yes

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

Targeted information on risk reduction and HIV education:	MSM
Targeted information on risk reduction and HIV education:	Sex workers
Targeted information on risk reduction and HIV education:	Prison inmates
Stigma & discrimination reduction:	Other sub-populations (*)
Condom promotion:	MSM
Condom promotion:	Sex workers
Condom promotion:	Prison inmates
HIV testing & counselling:	MSM
HIV testing & counselling:	Sex workers
Reproductive health, including STI prevention & treatment:	MSM
Reproductive health, including STI prevention & treatment:	Sex workers
Reproductive health, including STI prevention & treatment:	Prison inmates

(*If Other sub-populations, indicate which sub-populations

PVVS

Overall, how would you rate policy efforts in support of HIV prevention in 2007 and in 2005?

2007: 5

2005: 3

Comments on progress made in policy efforts in support of HIV prevention since 2005:

El Decreto Supremo firmado por el Sr. Presidente de la Republica y refrendado por 6 Ministros aprobando el Plan Estratégico Multisectorial muestra la sensibilidad de las autoridades sobre la epidemia al VIH sin embargo falta un mayor compromiso político en otros sectores y en las regiones

4. Has the country identified the districts (or equivalent geographical/ decentralized level) in need of HIV prevention programmes?

Yes

IF YES, to what extent have the following HIV prevention programmes been implemented in identified districts* in need?

Blood safety:	The activity is available in	most districts* in need
Universal precautions in health care settings:	The activity is available in	most districts* in need
Prevention of mother-to-child transmission of HIV:	The activity is available in	all districts* in need
IEC on risk reduction:	The activity is available in	most districts* in need
IEC on stigma and discrimination reduction:	The activity is available in	some districts* in need
Condom promotion:	The activity is available in	most districts* in need
HIV testing & counselling:	The activity is available in	some districts* in need
Harm reduction for injecting drug users:	The activity is available in	N/A
Risk reduction for men who have sex with men:	The activity is available in	most districts* in need
Risk reduction for sex workers:	The activity is available in	most districts* in need
Programmes for other vulnerable subpopulations:	The activity is available in	some districts* in need
Reproductive health services including STI prevention & treatment:	The activity is available in	most districts* in need
School-based AIDS education for young people:	The activity is available in	most districts* in need
Programmes for out-of-school young people:	The activity is available in	some districts* in need
HIV prevention in the workplace:	The activity is available in	some districts* in need

Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2007 and in 2005?

2007:	5
2005:	3
2007:	4
2005:	3

Comments on progress made in the implementation of HIV prevention programmes since 2005:

Las acciones de prevención aun estan en construcción y deben ampliar la cobertura en los proximos meses enfocados en la población de mas exposición y adolescentes

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

Yes

1.1 IF YES, does it give sufficient attention to barriers for women, children and most-at-risk populations?

No

2. Has the country identified the districts (or equivalent geographical/decentralized level) in need of HIV and AIDS treatment, care and support services?

Yes

IF YES, to what extent have the following HIV and AIDS treatment, care and support services been implemented in the identified districts* in need?

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

TB screening for HIV-infected people:	The service is available in	most districts* in need
TB preventive therapy for HIV-infected people:	The service is available in	most districts* in need
TB infection control in HIV treatment and care facilities:	The service is available in	most districts* in need
Cotrimoxazole prophylaxis in HIV-infected people:	The service is available in	most districts* in need
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape):	The service is available in	some districts* in need
HIV treatment services in the workplace or treatment referral systems through the workplace:	The service is available in	N/A
HIV care and support in the workplace (including alternative working arrangements):	The service is available in	N/A

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

Yes

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

Yes

4.1 IF YES, for which commodities?:

Medicamentos de soporte segun listado de RM 482-2007 y medicamentos antirretrovirales contemplados en el tarifario SIS

5. Does the country have a policy or strategy to address the additional HIV- or AIDS-related needs of orphans and other vulnerable children (OVC)?

No

Overall, how would you rate the efforts to meet the needs of orphans and other vulnerable children?

2007:	3
2005:	1

Comments on progress made in efforts to meet the needs of OVC since 2005:

Se ha iniciado algunos proyectos para mejorar el acceso de los niños abandonados entre los que se incluyen huérfanos y vulnerables sin embargo esto requiere un mayor esfuerzo multisectorial principalmente con el Ministerio de Desarrollo Humano (MINEDU) e instituciones de la sociedad civil y religiosa que abordan la problemática

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

Yes

IF YES, Years covered:

2002-2007

1.1. IF YES, was the M&E plan endorsed by key partners in M&E?

Yes

1.2. IF YES, was the M&E plan developed in consultation with civil society, including people living with HIV?

No

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

Yes, most partners

2. Does the Monitoring and Evaluation plan include?

a data collection and analysis strategy : Yes

behavioural surveillance : Yes

HIV surveillance : Yes

a well-defined standardized set of indicators : Yes

guidelines on tools for data collection : Yes

a strategy for assessing quality and accuracy of data : Yes

a data dissemination and use strategy : Yes

3. Is there a budget for the M&E plan?

Yes

3.1 IF YES, has funding been secured?

Yes

4. Is there a functional M&E Unit or Department?

Yes

4.1 IF YES, is the M&E Unit/Department based

in the NAC (or equivalent)? : No

in the Ministry of Health? : Yes

**4.2 IF YES, how many and what type of permanent and temporary professional staff are working in the M&E Unit/Department?

**

Number of permanent staff:

1

4.3 IF YES, are there mechanisms in place to ensure that all major implementing partners submit their M&E data/reports to the M&E Unit/Department for review and consideration in the country's national reports?

Yes

IF YES, does this mechanism work? What are the major challenges?

Si funciona el mecanismo. Limitaciones para el análisis de datos, el proceso no contempla un espacio de análisis conjunto entre los actores

4.4 IF YES, to what degree do UN, bi-laterals, and other institutions share their M&E results?

3

5. Is there an M&E Committee or Working Group that meets regularly to coordinate M&E activities?

Yes, but meets irregularly

IF YES, Date last meeting:

05-11-2007

5.1 Does it include representation from civil society, including people living with HIV?

No

6. Does the M&E Unit/Department manage a central national database?

Yes

6.1 IF YES, what type is it?

Los datos recibidos periódicamente de los establecimientos de salud se agrupan a nivel de distrito y se envían al nivel nacional. Los datos se analizan y usan a distintos niveles

6.2 IF YES, does it include information about the content, target populations and geographical coverage of programmatic activities, as well as their implementing organizations?

Yes

6.3 Is there a functional Health Information System (HIS)?

National level : Yes

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

Yes

7. To what extent are M&E data used in planning and implementation?

3

What are examples of data use?

Numero de casos de SIDA y VIH notificados.
Razón Hombre /Mujer
Vía de transmisión: Sexual. Parenteral o Vertical
Prevalencia de VIH en gestantes, HSH, PPL. Etc.

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

At national level? : No

Overall, how would you rate the M&E efforts of the AIDS programme in 2007 and in 2005?

2007: 6
2005: 3

Comments on progress made in M&E since 2005:

Se han realizado esfuerzos para mejorar el sistema de informacion, este se encuentra en una etapa de implementación y en los hospitales y centros de referencia, asimismo se está trabajando un sistema de información de gestión de pacientes

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

Yes

1.1 IF YES, specify:

- Constitución: "Artículo 7º. Todos tienen derecho a la protección de su salud, la del medio familiar y de la comunidad así como el deber de contribuir a su promoción y defensa. La persona incapacitada para velar por sí misma a causa de una deficiencia física o mental tiene derecho al respeto de su dignidad y a un régimen legal de protección, atención, readaptación y seguridad."
- Ley 27270, Ley que penaliza la discriminación. Año 2000
- Ley # 27115: Ley que Establece la Acción Penal Pública en los Delitos contra la Libertad Sexual.
- Ley # 27942: Ley de Prevención y Sanción del Hostigamiento Sexual
- Ley # 28237. Reconoce, en su artículo 37, protección legal contra la discriminación por orientación sexual mediante el Recurso de Amparo
- D.S. 004-97/SA, Reglamento de la ley 26626 :
- Artículo 14º.- No podrá condicionarse ningún tipo de atención médica o quirúrgica a la realización previa de exámenes diagnósticos de VIH.
- Artículo 15º.- La prueba de diagnóstico de VIH no debe ser requerida como condición para iniciar o mantener una relación laboral, educativa o social.
- Ley 28867.- modifica el Art. Penal Artículo 323º.- El que, por sí o mediante terceros, discrimina a una o más personas o grupo de personas, o incita o promueve en forma pública actos discriminatorios, por motivo racial, religioso, sexual, de factor genético, filiación, edad, discapacidad, idioma, identidad étnica y cultural, indumentaria, opinión política o de cualquier índole, o condición económica, con el objeto de anular o menoscabar el reconocimiento, goce o ejercicio de los derechos de la persona, será reprimido con pena privativa de libertad no menor de dos años, ni mayor de tres o con prestación de servicios a la comunidad de sesenta a ciento veinte jornadas. Si el agente es funcionario o servidor público la pena será no menor de dos, ni mayor de cuatro años e inhabilitación conforme al inciso 2) del artículo 36º. La misma pena privativa de libertad se impondrá si la discriminación se ha materializado mediante actos de violencia física o mental."

2. Does the country have non-discrimination laws or regulations which specify protections for vulnerable sub-populations?

No

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

Yes

3.1 IF YES, for which sub-populations?

Women :	No
Young people :	Yes
IDU:	No
MSM:	No
Sex Workers:	No
Prison inmates :	No
Migrants/mobile populations :	No

IF YES, briefly describe the content of these laws, regulations or policies and how they pose barriers:

En jóvenes (claramente por la autonomía restringida, todavía no se ha logrado modificar la norma para que los menores de edad tengan facilidad para atenderse sin un familiar.

- En HSH, si bien no hay normas que impidan el acceso, hay restricciones para incorporar a esta población en instrumentos jurídicos para proteger pro-activamente, restricciones para la promoción de la salud de la población cuyos derechos humanos debe promoverse , ni siquiera hay pasos concretos, la idea es promover la calidad de vida y el desarrollo humano
- En mujeres no existe una política para las no gestantes.

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

Yes

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

Yes

IF YES, briefly describe this mechanism

La Defensoría del Pueblo tiene un registro de esta naturaleza, levanta y recibe denuncias y quejas. Pero ellos solo hacen la recomendación al sector que corresponda

6. Has the Government, through political and financial support, involved most-at-risk populations in governmental HIV-policy design and programme implementation?

Yes

IF YES, describe some examples

Ha sido facilitado en la ejecución de los proyectos financiados por el Fondo Mundial

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

HIV prevention services :	Yes
Anti-retroviral treatment :	Yes
HIV-related care and support interventions :	No

8. Does the country have a policy to ensure equal access for women and men, to prevention, treatment, care and support? In particular, to ensure access for women outside the context of pregnancy and childbirth?

Yes

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

No

9.1 Are there differences in approaches for different most-at-risk populations?

No

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

Yes

11. Does the country have a policy to ensure that AIDS research protocols involving human subjects are reviewed and approved by a national/local ethical review committee?

Yes

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

Yes

IF YES, describe the effectiveness of this review committee

No se puede medir la eficacia por el gran número de investigaciones que se están realizando alrededor del tema de VIH

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

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

- Focal points within governmental health and other departments to monitor HIV-related human rights abuses and HIV-related discrimination in areas such as housing and employment: No

- Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts: No

- Performance indicators or benchmarks for reduction of HIV-related stigma and discrimination: No

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

No

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

Legal aid systems for HIV and AIDS casework: No

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

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

15. Are there programmes designed to change societal attitudes of stigmatization associated with HIV and AIDS to understanding and acceptance?

No

Overall, how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV and AIDS in 2007 and in 2005?

2007: 5

2005: 3

Comments on progress made in promoting and protecting human rights in relation to HIV and AIDS since 2005:

El estado garantiza el pleno ejercicio de los derechos de todas las personas, promueve y protege los derechos humanos sin distinción. La oficina de Defensoría y Transparencia del MINSA vigila que los actos de estigma y discriminación sean manejados adecuadamente para tomar las medidas correctivas.

Se viene trabajando directivas y normas para mejorar el cumplimiento de las políticas referidas a la protección de los derechos humanos y civiles en relación con el VIH Sida. Así como mejorar el acceso a los servicios.

Overall, how would you rate the effort to enforce the existing policies, laws and regulations in relation to human rights and HIV and AIDS in 2007 and in 2005?

2007: 4

2005: 2

Comments on progress made in enforcing existing policies, laws and regulations in relation to human rights and HIV and AIDS since 2005:

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

3

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

3

3. To what extent are the services provided by civil society in areas of HIV prevention, treatment, care and support included

- a. in both the National Strategic plans and national reports?: 3
- b. in the national budget?: 2

4. Has the country included civil society in a National Review of the National Strategic Plan?

Yes

IF YES, when was the Review conducted? Year:

2006

5. To what extent is the civil society sector representation in HIV-related efforts inclusive of its diversity?

3

List the types of organizations representing civil society in HIV and AIDS efforts:

Organizaciones no gubernamentales, Organizaciones de personas viviendo con VIH, Organizaciones de personas vulnerables, Universidades, Iglesias

6. To what extent is civil society able to access

- a. adequate financial support to implement its HIV activities?: 3
- b. adequate technical support to implement its HIV activities?: 2

Overall, how would you rate the efforts to increase civil society participation in 2007 and in 2005?

- 2007: 5
- 2005: 3

Comments on progress made in increasing civil society participation since 2005:

Con la elaboración del PEM se logró mayor participación de la sociedad civil. La sociedad civil ha venido trabajando intensamente en la respuesta nacional teniendo su representación en la CONAMUSA (Comité Multisectorial en Salud). Sin embargo se debe mejorar la articulación de esfuerzos y compromisos así como monitorizar y evaluar los logros que se vienen obteniendo.

1. Has the country identified the districts (or equivalent geographical/decentralized level) in need of HIV prevention programmes?

Yes

IF YES, to what extent have the following HIV prevention programmes been implemented in identified districts in need?

Blood safety:	The service is available in	some districts* in need
Universal precautions in health care settings:	The service is available in	most districts* in need
Prevention of mother-to-child transmission of HIV:	The service is available in	most districts* in need
IEC on risk reduction:	The service is available in	some districts* in need
IEC on stigma and discrimination reduction:	The service is available in	some districts* in need
Condom promotion:	The service is available in	N/A
HIV testing & counselling:	The service is available in	most districts* in need
Harm reduction for injecting drug users:	The service is available in	N/A
Risk reduction for men who have sex with men:	The service is available in	most districts* in need
Risk reduction for sex workers:	The service is available in	most districts* in need
Programmes for other vulnerable sub-populations:	The service is available in	some districts* in need
Reproductive health services including STI prevention & treatment:	The service is available in	some districts* in need
School-based AIDS education for young people:	The service is available in	some districts* in need
Programmes for out-of-school young people:	The service is available in	N/A
HIV prevention in the workplace:	The service is available in	N/A

1. Has the country identified the districts (or equivalent geographical/decentralized level) in need of HIV and AIDS treatment, care and support services?

Yes

Overall, how would you rate the efforts in the implementation of HIV treatment, care and support services in 2007 and in 2005?

2007:	6
2005:	4

Comments on progress made in the implementation of HIV treatment, care and support services since 2005:

Se han realizado los esfuerzos que han permitido enrolar en la actualidad a mas de 9000 pacientes en TARGA en el Ministerio de salud y mas de 11000 contando la Seguridad Social y Fuerzas Armadas. Asimismo el Estado apoya las iniciativas gubernamentales y de la sociedad civil que permiten mejorar el acceso a los servicios de tratamiento, atención y apoyo relacionado con el VIH Sida.

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

Prevention for youth :	<25%
Prevention for MSM :	25-50%
Prevention for sex workers :	<25%
Counselling and Testing :	<25%
Clinical services (OI/ART)* :	<25%
Home-based care :	25-50%
Programmes for OVC** :	51-75%

3. Does the country have a policy or strategy to address the additional HIV and AIDS-related needs of orphans and other vulnerable children (OVC)?

No

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