NATIONAL COMPOSITE POLICY INDEX QUESTIONNAIRE

(Attachment 2)
Strategic plan

1. Has your country developed multisectoral strategies to combat HIV/AIDS? (Multisectoral strategies should include, but not be limited to, the health, education, labour, and agriculture sectors)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:

The Strategic Planning Process for a National Response to HIV/AIDS started in the Republic of Armenia (RA) in 2000, when Situational Analysis on HIV/AIDS, Rapid Assessment of the situation on spread of injecting drug use and HIV infection, Sentinel Epidemiological Surveillance among groups of people at high-risk of HIV infection: injecting drug users, female sex workers, groups at high-risk of HIV infection in Penitentiary Institutions (homosexuals, injecting drug users, individuals with STIs and individuals with clinical symptoms) and Response Analysis were conducted. Based on the HIV/AIDS Situational Analysis and Response Analysis the National Strategic Plan for a National Response to HIV/AIDS epidemic in the Republic of Armenia was developed and approved by the College of the Ministry of Health of the Republic of Armenia on 06.12.2000 (Minutes N 12/4) and by the RA Minister of Health (Decree N 14 of 12.01.2001). The National Strategic Plan served as a basis for the development (in collaboration with interested governmental agencies) of the National Programme on HIV/AIDS approved by the Government on 1 April 2002 and ratified by the President of the Republic of Armenia.

The Programme aims to reduce the spread of HIV infection in the Republic of Armenia.

The Programme has the following goals:
2. HIV/AIDS prevention among injecting drug users.
3. Forming safer sexual behaviour.
5. Ensuring donated blood safety.
6. HIV/AIDS and STI prevention among minors and youth.
7. Caring for people living with HIV/AIDS.

The objective of the developing national policy on response to HIV/AIDS epidemic is forming multisectoral response to HIV/AIDS at the state level. It has the following strategies:
1. Developing national policy on response to HIV/AIDS epidemic
2. Improvement of the existing legislation on HIV/AIDS prevention
3. Development of specialized services for HIV/AIDS prevention
2. Has your country integrated HIV/AIDS into its general development plans (such as its National Development Plans, United Nations Development Assistance Framework, Poverty Reduction Strategy Papers and Common Country Assessments)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
HIV/AIDS-related issues have been included in the final draft Poverty Reduction Strategy Papers 2003 (PRSP), Millennium Development Goals, National Assessment Report 2002 (RIO+10) and Common Country Assessment 2000.

3. Does your country have a functional national multisectoral HIV/AIDS management/coordination body? (Such a body must have terms of reference or equivalent, defined membership, action plans and staffing support, and should have met at least once in the last 12 months.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
On 1 April 2002 the Government of the Republic of Armenia by its decision established the National Interministerial Council on HIV/AIDS Prevention (NIC) and approved its structure, which was ratified by the Head of the State, President Mr. Robert Kocharyan. The NIC, chaired by the Minister of Health, carries out the coordination and monitoring of the implementation of the National Programme on HIV/AIDS Prevention. NIC has regulations, defined membership and action plan. The Council includes representatives of 15 Ministries and Departments, Yerevan municipality, at the level of Deputy Ministers, Heads of the Governmental Departments, Deputy Mayor of Yerevan: Minister of Health of RA (Chairman of Council), Head State Sanitary Doctor of RA (Deputy Chairman of Council), Deputy Minister of National Security of RA, Deputy Minister of Justice of RA, Deputy Minister of Trade and Economic development of RA, Deputy Minister of Foreign Affairs of RA, Deputy Minister of Education and Science of RA, Deputy Minister of Culture, Youth Affairs and Sports of RA, Deputy Minister of Internal Affairs of RA, Deputy Minister of Defence of RA, Deputy Minister of Social Welfare of RA, Deputy Minister of Territorial Management and substructures coordination of RA, Deputy Minister of Finance and Economy of RA, Deputy Mayor of the Municipality of Yerevan city, Deputy Chairman of Customs State Committee Department of the Government of RA, Deputy Head of Migration and Refugees Department by the Government of RA, Deputy Head of Standardization, Metrology and Certification Department by the Government of RA, Director of the National Center for AIDS Prevention (the Secretary of the Council), The State Sanitary Doctor is nominated as Deputy Chair, and the Director of the National Center for AIDS Prevention as Secretary of the Inter-ministerial Council. The National Interministerial Council on HIV/AIDS Prevention develops the framework of issues and the annual work plan of the National Interministerial Council on HIV/AIDS Prevention is also prepared.
The first meeting of the NIC was held on 26 of April, the second meeting – on 22 November 2002. The first meeting made a number of important decisions, such as:

1. To recommend the Ministries of Justice, Trade and Economic development, Education and Science, Culture, Youth Affairs and Sports, Internal Affairs, Defence as well as Migration and Refugees Department to develop and approve by 01.06.2002 the ministerial HIV/AIDS prevention plans for 2002 on the implementation of the National Programme on HIV/AIDS prevention, which should also include activities to be carried out for the World AIDS Day, 1 December.

2. To recommend the Ministry of Territorial Administration in cooperation with substructures, to organize development and approval of territorial programmes on HIV/AIDS prevention for 2002-2006 by Marzpetaran (Regional Administrations).

3. To approve project proposal to submit to the Global Fund to fight AIDS, Tuberculosis and Malaria, to determine current priority strategies on HIV/AIDS prevention, to allocate the Global Fund’s finances and to exercise maintaining control.
   3.2. To approve the staff of Country Coordination Mechanism members of Interministerial Council on HIV/AIDS prevention as well as NGO, UN HIV/AIDS Theme Group representative and private sector representatives.
   3.3. To submit the staff of the Country Coordination Mechanism to the National Interministerial Council of the Republic of Armenia for approval.

4. To make proposal to the Coordination Board of Poverty Reduction Strategic Programme to include into this programme HIV/AIDS related issues.

The Technical Advisory Group of the NIC was established and it functions regularly. Technical support is provided regularly for the establishment and strengthening the partnership between all stakeholders, public and private sectors through consulting, workshops and dissemination of information materials.

4. Does your country have a functional national HIV/AIDS body that promotes interaction among government, the private sector and civil society? (Such a body must have terms of reference or equivalent, defined membership, action plans and staffing support, and should have met at least once in the last 12 months.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>ᵉ</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:

The Country Coordination Commission on HIV/AIDS Prevention (CCM) in the Republic of Armenia was established on 26 April 2002 by the decision of the session of the National Interministerial Council on HIV/AIDS Prevention.
to approve project proposal to submit to the Global Fund to fight AIDS, Tuberculosis and Malaria, to determine current priority strategies on HIV/AIDS prevention, to allocate and monitor the Global Fund’s finances.

1. The main goals of the Country Coordination Commission on HIV/AIDS Prevention in the Republic of Armenia are the following:
   1.1. coordination of HIV/AIDS-related activities implemented by governmental, nongovernmental and international organizations, as well as private sector and civil society;
   1.2. identification of priorities in scientific research on HIV/AIDS, as well as prevention, diagnosis and treatment of HIV/AIDS;
   1.3. developing the HIV/AIDS preventive activities, forming multisectoral response to HIV/AIDS:
      1.3.1. ensuring more wide participation of NGOs, PLWHA and people affected by the epidemic, community representatives, international organizations and private sector in HIV/AIDS prevention activities;
      1.3.2. considering information submitted by the Ministries, Governmental Departments and Regional Administrations on their response to HIV/AIDS epidemic;
   1.4. carrying out monitoring and evaluation:
      1.4.1. monitoring and evaluation of the implementing and coordination financing of the “National Programme on HIV/AIDS prevention in Armenia” programme activities supported by the Global Fund to fight AIDS, Tuberculosis and Malaria;
      1.4.2. development of mechanisms for monitoring and reporting on the progress in reaching the number of goals declared by the Special UN General Assembly Session;
      1.4.3. making internal assessment of efficiency of the Armenian GFATM proposal, developing proposals for achieving more effective results.

2. In accordance with the tasks entrusted to it, the Country Coordination Commission on HIV/AIDS Prevention in the Republic of Armenia:

2.1. CCM functions as a “consensus group” that coordinates proposal submission from its partners, CCM should facilitate the proposal development process, including the translation of national strategies into concrete implementation plans with clear responsibilities, timing of activities, budgets and expected outcomes; approve and endorse the final version of a single coordinated project proposal of Armenia and follow up on the implementation of proposed activities;

2.2. CCM is a body that functions as a forum to promote true partnership development and multi-sectoral programmatic approaches, CCM’s activities are aimed to discuss plans, share information and communicate on Global Fund issues;

2.3. CCM jointly with UN HIV/AIDS Theme Group establishes forum for current monitoring of the work and more effective implementing of activities on priority field of HIV/AIDS prevention;

2.4. CCM is an overall guiding body responsible for the use of Global
2.5. CCM is responsible for ensuring that mechanisms are in place to provide the information required for monitoring and evaluation or putting those mechanisms in place if they do not already exist. CCM should ensure that all relevant actors are involved in the process; and that all views are taken into account, CCM is responsible for dissemination of the information relating to the Global Fund. CCM is responsive and supportive of NGOs and other civil society actors wishing to be included in the Country Coordinated Programme;

2.6. CCM members include representation of the highest possible level from various sectors such as government, NGOs, private sector, people living with HIV/AIDS, religious and faith groups, academic, educational sector, UN, unilateral and bilateral agencies and their wide involvement;

2.7. all members of CCM are treated as full partners in the CCM, with full rights of participation, expression and involvement in decision making in line with their areas of expertise;

2.8. all members of CCM participate actively in all aspects of the CCM’s work in line with their resources and areas of expertise.

To organise current activities between CCM meetings, coordinate preparatory work for the CCM meetings, exercise current control for the realization of the CCM decisions Secretariat of the Country Coordination Commission on HIV/AIDS Prevention in the Republic of Armenia is being established. The Secretariat is headed by Secretary. CCM Secretariat submits reports on its current activities to CCM Chair.

CCM Secretariat forms working groups for solving the issues arising during the implementation of priority activities on HIV/AIDS prevention. First of all - groups for monitoring and evaluation. The staff of the groups is approved by the CCM or the CCM Chair between CCM meetings.

5. Does your country have a functional HIV/AIDS body that assists in the coordination of civil society organizations? (Such a body must have terms of reference or equivalent, defined membership, action plans and staffing support, and should have met at least once in the last 12 months.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
The Country Coordination Commission on HIV/AIDS Prevention (CCM) in the Republic of Armenia assists in the coordination of civil society organizations. CCM has regulations, defined membership and action plan. Among CCM members are representatives of the Ministry of Health and other Ministries, local and international NGOs, UN agencies and PLWHA.
6. Has your country evaluated the impact of HIV/AIDS on its socioeconomic status for planning purposes?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>

Comments:

7. Does your country have a strategy that addresses HIV/AIDS issues among its national uniformed services, including armed forces and civil defence forces?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:

Collaboration between the Ministry of Health and the Ministry of Internal Affairs resulted in adopting on 24 October 2002 memorandum signed by the Deputy Ministers where the partners took certain commitments. That will allow starting to introduce Harm Reduction, Risk Reduction and information/education programs among injecting drug users.

This memorandum regulates the expansion of collaboration between the Ministry of Health of the Republic of Armenia and the Ministry of Internal Affairs of the Republic of Armenia in the field of HIV/AIDS prevention, as well as the relationships clarification and HIV/AIDS prevention activities improvement among Injecting Drug Users by enacting the National Programme on HIV/AIDS Prevention which was approved by the Decree N 316 of 1 April 2002 of the Government of the Republic of Armenia and was ratified by the President of the Republic of Armenia on 1 April 2002.

In accordance with the National Programme (point 1.2) it is envisaged to strengthen the control over illicit drug production, transportation, storage and sale, as well as to develop and introduce short-term programmes on raising awareness and on needle exchange among vulnerable groups.

The prevention activities aim to reduce the spread of HIV/AIDS among IDUs and, consequently, among general population.

HIV/AIDS prevention is carried out through implementation of comprehensive prevention activities based on harm reduction strategy in case of illegal drug use.

The sides approved the importance of “supply reduction” and “harm reduction” strategies in the field of health protection and strengthening of the general population of the Republic of Armenia.

The sides approving this memorandum implement the following:

**Ministry of Health of the Republic of Armenia**

Jointly with the local and international non-governmental organizations, the Ministry of Health of the Republic of Armenia develops detailed programmes on prevention activities to be implemented among IDUs.

Ministry of Health of the Republic of Armenia assists in the establishment of confidential sites for drug users.

Ministry of Health of the Republic of Armenia provides methodological support to in-staff training of the Ministry of Internal Affairs...
Ministry of Health of the Republic of Armenia provides support to the training of the personnel and volunteers implementing prevention activities. Ministry of Health of the Republic of Armenia provides support to the needle exchange.

Ministry of Health of the Republic of Armenia assists in provision of quality condoms.

Ministry of Health of the Republic of Armenia publishes and disseminates information/education materials for IDUs.


Ministry of Health of the Republic of Armenia provides control over the safe collecting, transportation and storage of exchanged needles.

Ministry of Health of the Republic of Armenia implements the biological epidemiological surveillance for HIV.

Ministry of Health of the Republic of Armenia takes part in the implementation of behavioural surveillance aimed at evaluation of effectiveness of implemented activities.

Ministry of Health of the Republic of Armenia evaluates the results of prevention activities, as well as submits reports and proposals on the improvement of prevention activities among IDUs.

Ministry of Internal Affairs of the Republic of Armenia does not hinder the activities implemented by outreach workers among IDUs, as well as HIV/AIDS prevention activities, including information/education activities, needle exchange and condom distribution.

Ministry of Internal Affairs of the Republic of Armenia transfers the burden of implemented activities from drug users to those people dealing with illicit drug production, transportation, storage and sale.

Collaboration between the Ministry of Health and Ministry of Defence of the Republic of Armenia resulted in adopting on 24 October 2002 memorandum on mutual understanding and support signed by the Deputy Ministers where the partners took certain commitments. That will allow to carry out HIV/AIDS prevention activities among the military.

This memorandum regulates the expansion of collaboration between the Ministry of Health of the Republic of Armenia and the Ministry of Defence of the Republic of Armenia in the field of HIV/AIDS prevention, as well as the relationships clarification and HIV/AIDS prevention activities improvement among the military by enacting the National Programme on HIV/AIDS Prevention.

The prevention activities aim to reduce the spread of HIV/AIDS among the military and, consequently, among general population. HIV/AIDS prevention is carried out through the implementation of comprehensive information and prevention activities based on peer education system.

The sides approved the role and importance of prevention activities among the youth in the military in the field of health protection and strengthening of the general population of the Republic of Armenia.
The sides approving this memorandum implement the following:

**Ministry of Health of the Republic of Armenia**

- Ministry of Health of the Republic of Armenia provides methodological support to the training of the personnel and volunteers implementing prevention activities on peer education.
- Ministry of Health of the Republic of Armenia provides methodological support to the development of information/education materials for the military.
- Ministry of Health of the Republic of Armenia provides consulting on the issues of introduction of HIV voluntary counselling and testing system.
- Ministry of Health of the Republic of Armenia assists in the implementation of biological and behavioural epidemiological surveillance for HIV.
- Ministry of Health of the Republic of Armenia takes part in the evaluation of the results of HIV/AIDS prevention activities among the military, as well as in the submission of reports and proposals on the improvement of prevention activities.

**Ministry of Defence of the Republic of Armenia**

- Ministry of Defence of the Republic of Armenia introduces the peer education system and provides training to the personnel and volunteers implementing prevention activities by this method.
- Ministry of Defence of the Republic of Armenia creates the system of HIV voluntary counselling and testing.
- Jointly with the Ministry of Health of the Republic of Armenia, the Ministry of Defence of the Republic of Armenia carries out biological and behavioural epidemiological surveillance for HIV.
- Ministry of Defence of the Republic of Armenia evaluates the results of HIV/AIDS prevention activities among the military, as well as submits reports and proposals on the improvement of prevention activities.

Collaboration between the Ministry of Health and the Ministry of Justice resulted in adopting resolution by penitentiary institutions staff participating in the National Seminar on HIV/AIDS for Penitentiary Institutions Staff on 06 September 2003, where they expressed their readiness to implement HIV/AIDS preventive programmes in Penitentiary Institutions of the Republic of Armenia, to introduce HIV/AIDS preventive programmes for convicts and prison staff in collaboration with the National Center for AIDS Prevention, Ministry of Health of the Republic of Armenia, to train relevant consultants from prisons staff, to introduce system of HIV testing combined with VCT and anonymous pre- and post-test counselling into medical departments of Penitentiary Institutions of the Republic of Armenia.
to study the best practice of Harm reduction strategies in Penitentiary Institutions in CIS and other countries. That will allow introducing HIV/AIDS preventive programmes in Penitentiary Institutions.

The Seminar participants find it necessary:
2. To suggest that the Criminal-Executive Department, Ministry of Justice of the Republic of Armenia confirm the instruction on reduction of HIV infection risk among the Department staff and inspectors of defensive company during conducting searches and in states of emergency.
3. In collaboration with the National Center for AIDS Prevention, Ministry of Health of the Republic of Armenia to introduce HIV/AIDS preventive programmes for convicts and prison staff. Toward this end to train relevant consultants from prisons staff.
4. On the assumption of the best practices, to make amendments to the law on AIDS in the part relating to mandatory HIV testing of individuals in Penitentiary Institutions.
5. To introduce system of HIV testing combined with VCT and anonymous pre- and post-test counselling into medical departments of Penitentiary Institutions of the Republic of Armenia.
7. To create libraries provided with literature on HIV/AIDS in Criminal-Executive Department, Ministry of Justice of the Republic of Armenia and Penitentiary Institutions, and Penitentiary Institutions.
8. To appoint heads of Medical Services of Penitentiary Institutions to be major organizers of activities of HIV/AIDS prevention in their agencies.
## Prevention

1. Does your country have a general policy or strategy to promote information, education and communication (IEC) on HIV/AIDS?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:

The National Programme on HIV/AIDS Prevention includes a number of strategies and activities on promotion information, education and communication on HIV/AIDS:

**Implementation of education programmes on HIV/AIDS, STI and drug use prevention in educational establishments** (to develop and introduce education programmes on HIV/AIDS, STI and drug use prevention focused on schoolchildren and students).

**Raising awareness on safer sexual behaviour among general population** (to design information/education programmes on HIV/AIDS and STI prevention directed at different population groups; to raise the level of knowledge on HIV/AIDS prevention among health care workers; to carry out awareness-raising campaigns directed at vulnerable population groups; to publish information/education materials).

**Raising HIV/AIDS awareness among minors and youth** (to design and introduce education programmes on HIV/AIDS, STI and drug use prevention into educational establishments; to work out and publish relevant methodological and didactic materials for educational establishments; to train education specialists in the field of teaching methodology; to design and implement information/education programmes for the military and individuals in penitentiary institutions; to develop and implement programmes aimed to solve problems of young people outside the formal education system and those who do not work; to design mass media target information/education programmes focused on youth).

The Proposal “Support to the National Programme on HIV/AIDS Prevention”, approved by the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) includes the following activities to reduce HIV/AIDS spread among general population:

- Conducting awareness-raising informational campaigns for general population.
- Conducting Mass Media activities.
- Training of journalists.
- Establishing VCT sites in big cities.
- Setting up Information Centre with national hotline.
- Training VCT and hotline specialists.
- Providing Church prevention activities.
- Developing and issuing information/education materials.
- Developing and changing of current legislation.
2. Does your country have a policy or strategy promoting reproductive and sexual health education for young people?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:

The Law of the Republic of Armenia on Reproductive Health and Reproductive Rights of Human Beings regulates matters concerning the reproductive health of human beings, the safeguarding of reproductive rights, the terms and procedures of technology application in the area of reproductive health, as well as other associated relations, in line with the Constitution, laws, and international agreements of the Republic of Armenia. Besides, the National Programme on HIV/AIDS Prevention includes HIV/AIDS preventive activities among minors and youth, such as designing and introducing education programmes on HIV/AIDS, STI and drug use prevention into educational establishments; developing and publishing relevant methodological and didactic materials for educational establishments; training education specialists in the field of teaching methodology; designing and implementing information/education programmes for the military and individuals in penitentiary institutions; developing and implementing programmes aimed to solve problems of young people outside the formal education system and those who do not work; designing mass media target information/education programmes focused on youth.

3. Does your country have a policy or strategy that promotes IEC and other health interventions for groups with high or increasing rates of HIV infection? (Such groups include, but are not limited to, IDUs, MSM, sex workers, youth, mobile populations and prison inmates.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:

The National Programme on HIV/AIDS Prevention includes a number of activities promoting IEC and other health interventions for high-risk groups (IDUs, FSWs, MSM, migrants, the military, prison inmates) and general population.

- Raising awareness on safer sexual behaviour among general population to reduce HIV/AIDS and STI spread through sexual contacts:
  - to design information/education programmes on HIV/AIDS and STI prevention directed at different population groups;
  - to raise the level of knowledge on HIV/AIDS prevention among health care workers;
  - to carry out awareness-raising campaigns directed at vulnerable population groups; to publish information/education materials.
- Providing accessibility of STI diagnosis and treatment:
  - to expand network of cabinets for anonymous STI treatment for all
population groups;
- to introduce updated technologies of diagnosis and treatment;
- to provide medical care accessibility and confidentiality for vulnerable population groups.

Reduction of HIV/AIDS and STI prevalence rate among FSWs:
- to design and carry out special activities on HIV/AIDS and STI prevention that include peer education;
- to develop a system of sentinel epidemiological HIV surveillance in the target group of FSWs.

Harm reduction of non-medical drug use:
- to raise awareness of vulnerable population groups, to promote safer behaviour, using peer education; to form self-help groups;
- to design and introduce pilot needle exchange projects;
- to introduce and develop the system of sentinel epidemiological HIV surveillance in the target group of injecting drug users.

Primary and advanced prevention of drug use:
- to raise awareness on drug use prevention issues among general population through the mass media;
- to develop and introduce drug use prevention issues into the education programmes; to provide peer education;
- to build a rehabilitation system for drug users.

The Armenian GFATM project includes the following activities to reduce HIV/AIDS spread among high-risk groups:

**To reduce spread of HIV/AIDS among youth:**
- Providing peer education to young people.
- Training of specialists-trainers and peer educators for work in peer education system.
- Realization of HIV/AIDS education programmes in secondary schools and higher educational establishments.
- Training of teachers and lecturers to implement education programmes in schools and higher educational establishments.
- Developing and publishing didactic and methodological materials for teachers/lecturers of schools and higher educational establishments.
- Establishing VCT sites.
- Training VCT specialists.
- Conducting awareness-raising informational campaigns and mass media activities.
- Developing and issuing information/education materials for young people of different age groups.

**To reduce spread of HIV/AIDS among IDUs:**
- Implementing Harm reduction programmes including outreach work, peer education.
- Training of members of project personnel and outreach workers for work in Harm reduction programmes.
- Training VCT specialists.
- Training for the police and policy-makers.
• Developing and publishing information/educational materials for IDUs.
• Establishing VCT sites for IDUs.
• Forming self-help groups.

To reduce spread of HIV/AIDS among FSWs:
• Implementing preventive programmes including Harm reduction strategy, outreach work and peer education activities.
• Training of members of project personnel and outreach workers for work in Harm reduction programmes.
• Training VCT specialists.
• Training for the police and policy-makers.
• Developing and publishing information/education materials for FSWs.
• Establishing VCT sites for FSWs.
• Forming self-help groups.

To reduce spread of HIV/AIDS among MSM:
• Realisation of prevention project.
• Training of VCT specialists.
• Developing and publishing information/education materials for MSM.
• Establishing VCT sites for MSM.

To reduce spread of HIV/AIDS among prisoners:
• Implementing Harm reduction programmes.
• Implementing peer education programmes in all prisons of the country.
• Training of specialists for Harm reduction programmes.
• Training VCT specialists.
• Training of project personnel and peer educators for work in peer education system.
• Developing and publishing information/education materials for prisoners and prison staff.
• Establishing VCT sites for prisoners and prison staff.

4. Does your country have a policy or strategy that promotes IEC and other health interventions for cross-border migrants?

<table>
<thead>
<tr>
<th>Yes ✓</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
</table>

Comments:

One of the objectives of the National Programme on HIV/AIDS Prevention is to reduce spread of HIV/AIDS among migrants and refugees. It is aimed at raising their potential in response to HIV/AIDS epidemic, improving their knowledge on safer behaviour and ensuring sustainable changes in their knowledge and attitude, providing condoms accessibility, development of
voluntary counselling and testing system, forming more openness and reduction of stigmatisation of and discrimination against migrants and refugees.

The Armenian GFATM project includes the following activities to reduce HIV/AIDS spread among migrants and refugees:

**To reduce spread of HIV/AIDS among migrants and refugees:**
- Implementing peer education programmes among refugees.
- Training of peer educators for work in peer education system.
- Developing and publishing information/education materials for migrants and refugees.
- Provision of VCT for migrants and refugees.

5. Does your country have a policy or strategy to expand access, including among vulnerable groups, to essential preventative commodities? (These commodities include, but are not limited to, condoms, sterile needles and HIV tests.)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If yes, please list

**Groups:**
- Injecting drug users
- Female sex workers
- MSM
- Migrants
- Military
- Prisoners
- Pregnant women

**Commodities:**
- sterile injecting equipment, condoms, disinfectants, HIV tests
- sterile injecting equipment, condoms, HIV tests
- condoms, HIV tests
- condoms, HIV tests
- condoms, HIV tests
- condoms, sterile injecting equipment, HIV tests
- HIV tests

**Comments:**
The National Programme on HIV/AIDS Prevention and Armenian GFATM project includes a strategy on promotion and accessibility of condoms (to implement programmes on condoms distribution among migrants, the military, and prisoners; to promote availability of condoms through regular commercial sales, as well as in places of entertainment; to provide control over the condoms quality in accordance with the international standards; to advertise barrier means of protection through the mass media; to print and distribute promotion literature).
Besides, it is stipulated to ensure access to sterile injecting equipment and disinfectants for IDUs, FSWs and prisoners.

6. Does your country have a policy or strategy to reduce mother-to-child HIV transmission?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
One of the goals of the National Programme on HIV/AIDS Prevention is prevention of HIV transmission from HIV-infected mother to her child, consisting of the following strategies and activities:

**Ensuring access of pregnant women to HIV testing:**
- to conduct HIV testing among pregnant women by the method of universal testing;
- to provide pregnant women with HIV testing as well as with pre- and post-counselling; to provide relevant training for health care workers;
- to raise HIV/AIDS awareness among women of childbearing age.

**Providing preventive treatment for HIV-infected pregnant women and infants born to them:**
- to develop and issue guidelines on pregnancy and delivery course for HIV-infected pregnant women;
- to develop and issue guidelines on feeding of infants born to HIV-infected mothers;
- to develop and introduce standards of preventive treatment of HIV-infected pregnant women and infants born to them; to provide relevant training for health care workers;
- to provide HIV-infected pregnant women and infants born to them with preventive antiviral treatment; to purchase necessary medicines;
- to provide infants born to HIV-infected mothers with milk mixtures for artificial feeding.

Armenian GFATM project includes the following activities for prevention of mother-to-child HIV/AIDS transmission:
- Creating system of VCT for pregnant women.
- Training VCT specialists.
- Integrating issues of HIV/AIDS in reproductive health (information/education materials for women).
- Establishing capacity for providing comprehensive care to HIV-infected children.
- Expanding mother-to-child HIV transmission Prevention Programme.
Human rights

1. Does your country have laws and regulations that protect against discrimination of people living with HIV/AIDS (such as general non-discrimination provisions and those that focus on schooling, housing, employment, etc.)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
The Law "On prevention the disease caused by Human Immunodeficiency Virus" provides for the rights and obligations of HIV-infected individuals and their family members (Chapter IV, Article 14. Rights and obligations of HIV-infected individuals):

- HIV-infected individuals have the following rights:
  - to receive the results of laboratory testing in written form;
  - on non-discriminative attitude;
  - to demand keeping medical secrecy, except for the cases stipulated by the current legislation of the Republic of Armenia;
  - to continue working except for the cases stipulated by the government of the Republic of Armenia;
  - to be provided with counseling including familiarizing with the measures preventing HIV spread.

HIV-infected individuals cannot be objects of scientific experiments and studies without their written consent.

2. Does your country have laws and regulations that protect against discrimination of groups of people identified as being especially vulnerable to HIV/AIDS discrimination (i.e., groups such as IDUs, MSM, sex workers, youth, mobile populations, and prison inmates)?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If yes, please list groups: IDU

Comments:
Criminal Code of the Republic of Armenia provides for criminal liability for organization of shooting galleries, illegal preparation, acquisition, storage, usage, transportation, supply or trafficking of drugs as well as for persuading somebody to use drugs. Criminal liability is also foreseen for illegal cultivation of opium poppy and hemp. Imprisoned drug users can be made to undergo mandatory treatment in accordance to court decision. **There is no criminal responsibility for those drug addicts who apply for treatment voluntarily.**
3. Does your country have a policy to ensure equal access, for men and women, to prevention and care, with emphasis on vulnerable populations?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>√</td>
<td></td>
</tr>
</tbody>
</table>

Comments:
According to the Constitution of the Republic of Armenia (Chapter 2, Article 34), every individual has the right for health protection.

4. Does your country have a policy to ensure that HIV/AIDS research protocols involving human subjects are reviewed and approved by an ethics committee?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>√</td>
<td></td>
</tr>
</tbody>
</table>

Comments:
# Care and support

1. Does your country have a policy or strategy to promote comprehensive HIV/AIDS care and support, with emphasis on vulnerable groups? (Comprehensive care includes, but is not limited to, VCT, psychosocial care, access to medicines, and home and community-based care.)

<table>
<thead>
<tr>
<th>Yes √</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes, please list</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Groups:</td>
<td>Commodities:</td>
<td></td>
</tr>
<tr>
<td>Injecting drug users</td>
<td>VCT, psychosocial care, access to medicines</td>
<td></td>
</tr>
<tr>
<td>Female sex workers</td>
<td>VCT, psychosocial care, access to medicines</td>
<td></td>
</tr>
<tr>
<td>MSM</td>
<td>VCT, psychosocial care, access to medicines</td>
<td></td>
</tr>
<tr>
<td>Prisoners</td>
<td>VCT, psychosocial care, access to medicines</td>
<td></td>
</tr>
<tr>
<td>Pregnant women</td>
<td>VCT, psychosocial care, access to medicines</td>
<td></td>
</tr>
</tbody>
</table>

Comments:
The National Programme on HIV/AIDS Prevention and Armenian GFATM project provide for the above-mentioned comprehensive care.

2. Does your country have a policy or strategy to ensure or improve access to HIV/AIDS-related medicines, with emphasis on vulnerable groups? (HIV/AIDS-related medicines include antiretrovirals and drugs for the prevention and treatment of opportunistic infections and palliative care.)

<table>
<thead>
<tr>
<th>Yes √</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>If yes, please list</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Groups:</td>
<td>Commodities:</td>
<td></td>
</tr>
<tr>
<td>Injecting drug users of</td>
<td>antiretrovirals and drugs for the prevention and treatment of opportunistic infections</td>
<td></td>
</tr>
<tr>
<td>Female sex workers</td>
<td>antiretrovirals and drugs for the prevention and treatment of opportunistic infections</td>
<td></td>
</tr>
<tr>
<td>MSM</td>
<td>antiretrovirals and drugs for the prevention and treatment of opportunistic infections</td>
<td></td>
</tr>
<tr>
<td>Migrants</td>
<td>antiretrovirals and drugs for the prevention and treatment of opportunistic infections</td>
<td></td>
</tr>
<tr>
<td>Prisoners</td>
<td>antiretrovirals and drugs for the prevention and treatment of opportunistic infections</td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>-----------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Pregnant women who HIV infected</td>
<td>antiretrovirals and drugs for the prevention and treatment of opportunistic infections</td>
<td></td>
</tr>
</tbody>
</table>

3. Does your country have a policy or strategy to address the additional needs of orphans and other vulnerable children?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>√</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:

LAW ON THE RIGHTS OF THE CHILD OF THE REPUBLIC OF ARMENIA

This law determines rights of a child, obligations of appropriate governmental bodies and citizens, as well as programmatic bases of governmental policy pursued in the field of child’s rights and regulates respective relationships.

LAW ABOUT THE SOCIAL DEFENCE OF CHILDREN DEPRIVED OF PARENTAL CARE OF THE REPUBLIC OF ARMENIA

This law applies to children deprived of parental care, as well as to entities under 23 who belong to the number of children deprived of parental care.

Children without parental care, entities who belong to the number of children without parental care

A child aged under 18 is considered to be deprived of parental care in case if his parents (or one of the parents) are dead, denied of parental rights, declared disable, evade upbringing or protecting the child’s rights and interests, as well as declared by law as dead or missing. Entities aged 18 - 23 belong to the number of children deprived of parental care if their parents (or one of the parents) died before their reaching 18 years old, are denied of parental rights, declared disable, evade upbringing or protecting the child’s rights and interests, as well as declared by law as dead or missing.