1.0 - COMBATING HIV/AIDS

GOALS

- Develop and implement national policies and strategies to build and strengthen governmental, family and community capacities to provide a supportive environment for orphans and girls and boys infected and affected by HIV/AIDS, including providing appropriate counselling and psycho-social support, ensuring their enrollment in school and access to shelter, good nutrition, health and social services on an equal basis with other children, protecting orphans and vulnerable children from all forms of abuse, violence, explication, discrimination, trafficking and loss of inheritance.
- Reduce the proportion of infants infected with HIV by 20% and by 50% by 2010
- Establish time-bound national targets to achieve the internationally agreed global prevention goal of reducing by 25% by 2005, HIV prevalence among young men and women
- Ensure in full partnership with youth, parents, families, educators and health care providers that at least 95% of young men and women aged 15-24 have access to information and education, including peer education and youth specific HIV education, and services necessary to develop the life skills required to reduce their vulnerability to HIV infection
- Implement measures to increase capacities of women and adolescent girls to protect themselves from the risk of HIV infection, principally through the provision of health care and health services, including sexual and reproductive health, and through prevention education that promotes gender equality within a culturally and gender-sensitive framework.
- Develop and/or strengthen strategies, policies and programmes that recognize the importance of family in reducing vulnerability, inter alia, in educating and guiding children and taking account of cultural, religious and ethical factors.
- Postpone the onset of sexual activity no more than 20% of adolescents must report having had sex before the age of 15 years.

STRATEGIC OBJECTIVE	STRATEGIES	RESPONSIBLE AGENCIES	DIVISION	MEASURABLE INDICATOR	STATUS / ACHIEVEMENTS	MEANS OF VERIFICATION
a) Increase efforts to make the prevention and management of HIV/AIDS a health priority	Specific culturally appropriate strategies to be developed on issues facing the HIV+ orphans/children	NACC, MOH/RHA, MOE, THA, MSYA, NGOs		By 2008, a National Policy developed, focusing on HIV positive children and orphans		Policy document
	2 Ensure implementation of protocol for testing which includes pre-test and post- test counseling					VCT protocol document
						VCT protocol document
						VCT protocol document
	Provide testing facilities that enable persons 15-18 years to be tested for HIV/AIDS by waiving parental consent as required	NACC, MOH/RHA, MOE, THA, NGOs		By 2008, facilities reflected in protocol established		Protocol document
	4) Undertake mass training of all stakeholders on sexual and reproductive health and gender issues	MOE, NACC, MOH/RHA, THA, NGOs		By 2008, training undertaken for 60% of stakeholders on sexual and reproductive health and gender issues		Training reports

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prevention and management of HIV/AIDS a health priority	5) Develop strategies to target youth using non-conventional education methods	NACC, MOH/RHA, MOE, THA, Rapport,		By end of 2006, non-conventional education methods included in National Youth response to HIV/AIDS		National Youth Response document
	dentify and deal with the major crosscutting policy and legal issues relevant to children	Naa				Policy document
	7) Revisit issues related to disclosure, patient's rights and confidentiality	MOH/RHA, MOE, THA, NACC, NGOs		By 2008, a National Policy developed, focusing on HIV positive children and orphans		Policy document
	8) Ensure appropriate communication links and networking to facilitate the process of coordination among agencies	NACC, MOH/RHA, MOE, MSD, THA, NGOs		By 2007, communication system in place to facilitate the process of coordination among agencies		NACC reports
	9) Increase availability/access of testing to pregnant women to prevent mother-child transmission					MOH/RHAs report
attitude of adolescents in	1) Expand public awareness campaign focusing on children and adolescents to include issues of sexual and gender expressions related to the spread of HIV/AIDS	NACC, MOH/RHAS, MSD, MSYA, MOE, THA, NGOs		By 2007, an expanded public awareness campaign implemented focusing on children and adolescents		Administrative reords
				By 2010, 80% of young people (15- 24) who can both correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission		Population based survey
	2) Market available services in a child- friendly manner to reach specfic publics, e.g. 15-19 age group, particularly girls	MOH/RHA, MOE, THA, NACC, NGOs		By 2010, 95% of young people by age and sex reached by targeted Behaviour Change community outreach messages		Population based survey

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improving the knowledge and attitude of adolescents in sexual and reproductive health issues	3) Provide/improve access to children friendly sexual and reproductive health services which should include HIV/AIDS education, counseling and testing	NACC, MOH/RHAs, MSD, MSYA, MOE, THA, NGOs		By 2007, 20% increase in the number of children friendly sexual and reproductive health services provided		NACC reports
	4) Create and maintain a mechanism for peer counsellors to be used in HIV/AIDS education in schools and in communities Reinforce collaboration between agencies to use existing counsellors throughout communities	MSD, THA,		By 2007, mechanism created for peer counselors to be used in HIV/AIDS education in schools and communities		Procedure manual/document
	5) Utilise persons living with HIV/AIDS in conjunction with a good education program and support systems as part of the education process	MOH/RHA, MOE, THA		By 2007, 25% increase in use of PLWHA in education programmes		Programme reports
	6) Improve and sustain HIV/AIDS knowledge and awareness for teachers	MOE, THA, NACC		By 2008, a 50% increase in the number of workshops and seminars on HIV/AIDS for teachers		Registers from workshops and training reports
c) Collect comprehensive and continuous data on children infected and affected by HIV/AIDS	Create public awareness on HIV/AIDS to encourage voluntary testing	MOH/RHA, MOE, THA, NACC, NGOs		From mid 2006, public awareness campaign on HIV/AIDS to encourage voluntary testing		Administrative records
				By 2007, a 50% increase in the number of persons age 15-24 testing for HIV/AIDS		Records
	Expand funding and support for existing data collection systems					National HIV accounts report
	3) Support and fund research initiatives on HIV/AIDS					National HIV accounts report
	4) Conduct seroprevalence studies among children and youth					Research report
	5) Conduct research on the living conditions of children infected or affected by HIV/AIDS					Research report
	6) Conduct research on the impacts of stigma and discrimination of children living with HIV/AIDS					Research report

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c) Collect comprehensive and continuous data on children infected and affected by HIV/AIDS	7) Utilise the data for HIV/AIDS programme planning and management					Programme report
d) Provide ongoing education, medical facilities, housing, financial support and counselling and make treatment available, accessible and affordable throughout Trinidad and Tobago	Upgrade existing and increase the number of facilities and make them "youth-friendly"	NACC, MOH/RHAs, MOE, THA		By 2008, at least seven (7) youth friendly facilities established in Trinidad and Tobago		NACC report
	2) Provide training for health care and non-health personel who are willling to care for HIV/AIDS children					NACC report
	3) Change policy with respect to social welfare benefits to provide for HIV/AIDS persons					Policy document
	4) Undertake needs assessment of different communities to determine available, accessible, affordable resources in terms of voluntary counseling and testing programmes and treatment, care and support initiatives					Needs assessment report
	5) Support existing homes; establish new and transitional ones and mainstream treatment and care of existing residential institutions caring for children affected/infected by HIV/AIDS					Financial records of agencies
	6) Strengthen existing programmes for PLWHA to focus on the social and psychological impact of HIV/AIDS on the lives of the infected and their families					Reports from programmes targeting PLWHA

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d) Provide ongoing education, medical facilities, housing, financial support and counselling and make treatment available, accessible and affordable throughout Trinidad and Tobago	7) Develop appropriate support programmes for children living with HIV/AIDS					Policy document
	8) Establish special fund for patients/families based on validity and need for assistance. This is to be determined by a Board/medical doctor					Budgetary report
	9) Develop transition programmes for children who are about to leave institutions.					NACC reports
e) Reduce stigmatization, and protect the inheritance of children infected and affected by HIV/AIDS	Develop and enforce policies preventing discrimination against children infected and affected by HIV/AIDS					Legislation document
						Population based survey
	Draft legislation to ensure that orphans retain the right to any inheritance					Legislation document
	3) Organize interactive HIV/AIDS workshops targeting teachers, principals, parents, religious leaders and children	MOE,THA, NACC, MSD		By 2008, 40% increase in interactive HIV/AIDS workshops organized targeting teachers, principals, parents, religious leaders and children in all educational districts		Workshop reports

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	4) Create a directory of assistance and make legal services readily available to children					Directory of Social Services
	5) Create a system whereby HIV/AIDS patients are given 'coded names' in orde to maintain annonymity					Register