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JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

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Custom analysis extract of:

UNGASS - National Composite Policy Index (NCPI) 2007

Asia and Pacific

Singapore

COUNTRY:

Singapore

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:	Name/Position	Dr Jeffery Cutter / Senior Consultant, Communicable Diseases Division
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III / A.IV / A.V
:	Organisation	Ministry of Health
:	Name/Position	Dr Joanne Tay / Acting Deputy Director (HIV Prevention), Communicable Diseases Division
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III / A.IV / A.V
:	Organisation	Ministry of Health

:	Name/Position	Ms Ang Li Wei / Senior Biostatistician (HIV Prevention), Communicable Diseases Division
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III / A.IV / A.V
:	Organisation	Ministry of Health
:	Name/Position	Mr Yuske Kita / Public Health Officer (Policy) Communicable Diseases Division
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III / A.IV / A.V
:	Organisation	Action for AIDS Singapore
:	Name/Position	Mr Lionel Lee / Executive Director
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
Position:		Senior Consultant (Communicable Diseases)
Position:	Full time/Part time	Full time
Position:	Since when?	2006
Position:		Acting Deputy Director (HIV Prevention)
Position:	Full time/Part time	Full time
Position:	Since when?	2006
Position:		Senior Biostatistician (HIV Prevention)
Position:	Full time/Part time	Full time
Position:	Since when?	2006
Position:		Senior Public Health Officer (HIV Prevention)
Position:	Full time/Part time	Full time
Position:	Since when?	2007
Position:		Public Health Officer (Policy)
Position:	Full time/Part time	Full time
Position:	Since when?	2007

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

Yes

IF YES, period covered:

Ongoing

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

1985

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	Yes
Women:	Earmarked budget	No
Young people:	Strategy/Action framework	Yes
Young people:	Earmarked budget	No
Agriculture:	Strategy/Action framework	No
Agriculture:	Earmarked budget	No
Finance:	Strategy/Action framework	No
Finance:	Earmarked budget	No
Human Resources:	Strategy/Action framework	No
Human Resources:	Earmarked budget	No
Justice:	Strategy/Action framework	No
Justice:	Earmarked budget	No
Minerals and Energy:	Strategy/Action framework	No
Minerals and Energy:	Earmarked budget	No
Planning:	Strategy/Action framework	No
Planning:	Earmarked budget	No
Public Works:	Strategy/Action framework	No
Public Works:	Earmarked budget	No
Tourism:	Strategy/Action framework	No
Tourism:	Earmarked budget	No
Trade and Industry:	Strategy/Action framework	No
Trade and Industry:	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:	No
j. Involvement of people living with HIV:	Yes
k. Addressing stigma and discrimination:	Yes
l. Gender empowerment and/or gender equality:	Yes

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

Yes

1.5 What are the target populations in the country?

High risk heterosexual men, women, MSM, female sex workers, and military.

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

Yes

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? :	Yes

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:

The civil societies are involved in the following areas: representation in National HIV/AIDS Policy Committee; prevention and education programme; caring and support for HIV infected persons; and representation in MSM working committee.

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?

N/A

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

N/A

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?

Yes

4.1 IF YES, which of the following programmes have been implemented beyond the pilot stage to reach a significant proportion of one or more uniformed services?

Behavioural change communication:	Yes
Condom provision :	Yes
HIV testing and counselling(*):	Yes
STI services :	No
Treatment:	No
Care and support :	No

**(*If HIV testing and counselling has been implemented for uniformed services beyond the pilot stage, what is the approach taken?
**

Is it voluntary or mandatory (e.g. at enrolment)? Briefly explain:

HIV testing is conducted both on voluntary basis (e.g. upon request) as well as mandatory at enlistment and at specific timepoints in one's military career.

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?

No

5.4 Is HIV and AIDS programme coverage being monitored?

Yes

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

No

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

Yes

IF YES, which population sub-groups?

Sex workers, MSM, and youth.

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

No

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

2007: 7

2005: 5

Comments on progress made in strategy planning efforts since 2005:

Establishment of National HIV/AIDS Policy Committee; multi-sectorial involvement in HIV/AIDS programme; diversified prevention and education programme; more HIV testing and increased awareness of its availability; introduction of rapid HIV test kits; and increased number of anonymous HIV test sites.

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

President/Head of government : No

Other high officials : 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:

2006

2.2 IF YES, who is the Chair?

Name:

Dr Balaji Sadasivan

Title/Function:

Senior Minister of State, Ministry of Foreign Affairs and Ministry of Information, Communication and the Arts

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?:	No
include the private sector?:	Yes
have an action plan?:	Yes
have a functional Secretariat? :	Yes
meet at least quarterly?:	No
review actions on policy decisions regularly?:	Yes
actively promote policy decisions?:	Yes
provide opportunity for civil society to influence decision-making?:	Yes

(* If it does include civil society representatives, what percentage?

6.25%

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:

Half yearly

IF YES, What are the main achievements?

Implemented a multi-sectorial workplace prevention and educational programme.

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

N/A

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:	No
Drugs/supplies procurement and distribution :	No
Coordination with other implementing partners :	Yes
Capacity-building :	No

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

Yes

6.1 IF YES, were policies and legislation amended to be consistent 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:	7
2005:	5

Comments on progress made in political support since 2005:

More coordinated and multi-sectorial planning of HIV/AIDS programme.

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?

Be sexually abstinent:

Be faithful:

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?

No

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?

Yes

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:	Clients of sex workers
Targeted information on risk reduction and HIV education:	Prison inmates
Condom promotion:	MSM
Condom promotion:	Sex workers
Condom promotion:	Clients of sex workers
HIV testing & counselling:	MSM
HIV testing & counselling:	Sex workers
HIV testing & counselling:	Clients of sex workers
HIV testing & counselling:	Prison inmates
Reproductive health, including STI prevention & treatment:	MSM
Reproductive health, including STI prevention & treatment:	Sex workers
Reproductive health, including STI prevention & treatment:	Clients of sex workers

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

2007:	7
2005:	5

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

2007:	7
2005:	5
2007:	6
2005:	5

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?

Yes

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

N/A

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

No

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

No

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:	5

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)?

N/A

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

In Progress

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 :	No

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

In progress

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:

5

Number of temporary staff:

0

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

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

No

IF YES, describe the role of civil society representatives and people living with HIV in the working group

N/A

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

Yes

6.1 IF YES, what type is it?

National HIV Registry, surveillance data

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?

No

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?

4

What are examples of data use?

Proportion of late diagnosed cases, mode of transmission

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

At national level? : No

At sub-national level? : No

Including civil society? : No

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

2007: 7

2005: 5

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.)

No

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

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

Penal code Section 377a makes homosexual sex a crime. This has hindered efforts to reach MSM, especially non-gay identified MSM, young MSM and those in lower socio-economic classes. It also blocks efforts at community mobilization and development, the ability to influence adoption of community-wide norms, and promotion of feelings of self worth and self-respect among MSM. Anti-sodomy law perpetuates stigmatization of HIV infection and persons infected by HIV. All sections of the population are affected by policies that limit the full access to treatment to maintain persons living with HIV to the best of that is possible. Treatment is not subsidised for certain medication, leaving much to welfare groups to plug the service gaps. There is currently no provision for Government-to-Government intervention policies for migrant workers returning home with HIV. They may continue to be vulnerable in their home country with little access to treatment or may even infect the women or other sectors of the community when they are repatriated.

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

No

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

Action for AIDS, through its patient support networks has tried to collate instances of AIDS-related discrimination. This is an informal process. It is felt that many, if not most instances are not reported in view of the fear of stigmatisation and discrimination by PWAs.

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

Ministry of Health has set up a committee to plan and implement prevention programmes targeting MSM in Singapore. Over the last 5 years funding for MSM programmes has increased.

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

HIV prevention services :	No
Anti-retroviral treatment :	No
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?

Yes

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)?

No

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?

No

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: No

- 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?

Yes

IF YES, what types of programmes?

Media :	No
School education :	Yes
Personalities regularly speaking out :	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:	2
2005:	2

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:	2
2005:	2

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

2

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?:	3

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

No

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:

Action for AIDS Singapore (AfA): NGO involved in education, testing, advocacy, care and support activities; Association of Women for Action & Research (AWARE).

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?: | 3 |

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

- | | |
|-------|---|
| 2007: | 5 |
| 2005: | 4 |

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

NGOs' involvement in National AIDS Policy Committee since 2007

IF NO, how are HIV prevention programmes being scaled-up?:

Not applicable in Singapore

IF NO, how are HIV and AIDS treatment, care and support services being scaled-up?:

Not applicable in Singapore

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

- | | |
|-------|---|
| 2007: | 3 |
| 2005: | 3 |

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

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

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)?

N/A

Uniting the world against AIDS