

GARPR Online Reporting Tool

Republic of Moldova - 2018

I Cover Sheet

1) Which institutions/entities were responsible for filling out the indicator forms?

a) NAC or equivalent: Yes

b) NAP: Yes

c) Others: No

If Others, please specify:

2) With inputs from

Ministry of Education: Yes

Ministry of Health: Yes

Ministry of Labour: Yes

Ministry of Foreign Affairs: Don't Know

Other Ministry: No

If Other Ministry, please specify:

Civil society organizations: Yes

People living with HIV: Yes

Private sector: No

United Nations organizations: Yes

Bilateral organizations: Don't Know

International NGOs: Don't Know

Others: No

If Others, please specify:

3) Was the report discussed in a large forum?: Yes

4) Are the survey results stored centrally?: Yes

5) Are data available for public consultation?: Yes

6) Who is the person responsible for submission of the report?

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II Narrative Report

Overview: The Republic of Moldova adhered and committed in June 2016, in New York to the new bold agenda to end the AIDS epidemic by 2030, endorsed during the United Nations General Assembly High-Level Meeting on Ending AIDS. The progressive, new and actionable Political Declaration includes a set of specific, time-bound targets and actions that must be achieved by 2020 if the world is to get on the Fast-Track and end the AIDS epidemic by 2030 within the framework of the Sustainable Development Goals. In addition, the Republic of Moldova is part of the Dublin Declaration and of the WHO Global Strategy on Health sector. The national HIV response is based on a robust, well prioritized, costed National Control and Prophylaxis HIV/AIDS Programme for 2016-2020 (NAP), approved by the Government. The amount of € 15.8 million (about 7.1 mln Euro for HIV programme) granted by GF supports the achievement of NAP targets. NAP is complemented with 2 transition and sustainability plans, for Moldova and for Transnistrian region. Those stayed at the basis of covering for the first time ever, 3 harm reduction projects (about 3000 beneficiaries from KP), as well as 500 1st line patients (30%) from Transnistrian region from domestic resources. Technical assistance provided by UN Joint Team on HIV (Joint team) resulted into mainstreamed human rights and gender of the national response, including synergies with other programmes. The joint Monitoring and Evaluation framework of the National Programme on Prevention and Control of HIV/AIDS and STI in the Republic of Moldova has been implemented starting with 2005. Over the years, this system passed through a series of system strengthening stages, still it is yet premature to state that the system is fully functional and satisfies all the key information needs. Thus, there is still a need to improve the information system, the informational flow and to adapt the existing reporting forms and software used in the country to the recommendations provided by international experts and to the requests of the civil society. However, relevant strategic information was obtained and made accessible, to inform the decision-making process in the national response to HIV. The given report is the result of collaboration among institutions, ministries, and public organizations, non-governmental and international organizations. Representatives of governmental institutions and nongovernmental organizations, which are part of the national HIV response, have been involved in the process of collection, analysis and interpretation of data for the current AIDS Progress Reporting. The values of the indicators were presented and validated in the framework of the Country Coordination Mechanism (CCM) technical working meetings with the participation of the community, national and international counterparts. There are no relevant changes observed in the country's epidemiological context as compared to the previous report. Moldova's HIV epidemic continues to be concentrated among key affected populations (KAP), mostly PWID, with an increasing contribution of SW and MSM. HIV prevalence in general population is 0.20%. Available data suggest the epidemic has transitioned from an early concentrated epidemic in which the highest rates of transmission were among PWID to an advanced concentrated one, in which onward transmission to sexual partners of PWID and other key populations has become a source of new infections. Sexual Reproductive Health and HIV Prevention among key populations are well reflected into the approved National Development Strategy "Moldova 2030". Developed with UNFPA and WHO support, National Programme on SRHR 2018-2022 has a costed action plan with a dedicated budget line for centralized procurement from State Budget of modern contraceptives for vulnerable groups, including youth and PLWH. 5 Standardized Clinical Protocols on Family Planning for Family Doctors and Gynaecologists were developed and approved in 2018 by the MHLSP, addressing youth, people with HIV and disabilities. Minimum Initial Service Package for Reproductive Health Training course (including HIV Prevention component) was developed and integrated - into the State University of Medicine and Pharmacy Curricula, being mandatory for resident doctors in the field of obstetrics & gynecology, as well as practitioners' doctors.

COMMITMENT 1. Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020: Five protocols, on HIV treatment in adolescents, in youth and adolescents, prevention of mother to child transmission, post-prophylaxis, including one on PrEP were aligned to latest WHO

recommendations - Treat All/Test and treat. All were approved by Ministry of Health, Labour and Social Protection (MHLSP) at the beginning of 2018 after being largely discussed with about 60 representatives of academia, health practitioners, NGOs, Joint team. Among the main innovative interventions the following can be listed: Dolutegravir is the main 1st line treatment regimen, 271 patients benefited of it in 2018, about 1000 are estimated for 2019. The testing algorithm, based on rapid tests and extended from consultative to family medicine, allows extended coverage and ensures HIV diagnosis in 1 day, compared to about 3-4 weeks previously. The service is available to all through NGOs, being also based on blood rapid testing. 300 health specialists (family medicine, infectionists, gynecologists, lab specialists, SRH, YFHS) provide qualitative screening, diagnosis and HIV treatment services, after 12 trainings organized in Moldova with WHO and UNAIDS support. 75 health specialists from Transnistria are able to follow the new protocols. 10 specialists are enabled to provide qualitative PrEP after a study visit in Paris and 10 ones - continuum of care services after a visit in Stockholm organized with the support of UNAIDS. 37 YFHC out of 41 (around 90 %) provide HIV rapid testing to adolescents' girls and boys according to new guidelines. Self-testing piloted in Moldova since May 2016 is available to all, in addition to conventional and rapid testing performed by NGOs. Thus, HIV testing policies were streamlined and antiretroviral (ARV) options were updated to the latest WHO consolidated guidelines by the end of 2017. According to national statistics, 12 784 HIV cases (including 3 950 in Transnistria) were cumulatively registered by the end of 2018. For the first time, 905 cases (225 in Transnistria) was registered in Republic of Moldova in 2018, in the precedent 3 years the number of new cases being slightly more than 800 new cases, with no major changes in the gender distribution. During the year 2018, 240 847 HIV tests were done in the Republic of Moldova: 188 040 test in the general population, including 20 168 in the high-risk population and 79 223 tests in the blood transfusion system. The predominant mode of HIV transmission in 2018 remains heterosexual sex that account for 85,7% from the new cases. Reported cases on both banks 9 288, account for a half (59%) from 2017 estimated number of PLHIV for 2018 year- 15 835 persons). About 50% of new diagnosed cases are at AIDS stage. HIV prevalence constitutes around 230.43 per 100 000, Transnistria region registering significantly higher rates - 606.08 per 100 000.

COMMITMENT 2. Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018: Following the piloting of tools to validate the elimination of mother-to-child transmission (EMTCT) of syphilis and/or HIV in Moldova and several WHO missions to the country (2015) and the validation of EMTCT of syphilis in May 2016, the country re-confirmed its validation of EMTCT of syphilis in June 2017 and 2018, with WHO and UNAIDS support, while engaging with the country in acting upon the GVAC recommendations, in particular on External Quality Assurance (EQA) for syphilis and HIV infection, which was successfully answered in 2018. Preparations have been started by the Coordination team of the National AIDS Programme, and national stakeholders to validate EMTCT of HIV infection in 2018-2019. Throughout 2018, 187 infants have been tested for HIV in the first 2 months of life. Out of this number, 182 infants received a negative result for the test, 5 received a positive result. According to the administrative statistics for 2018, out of the number of women addressed for antenatal care in 2018 (40 095), 94% have been tested for HIV at least once. During 2018, 68 new cases of HIV infection were identified among pregnant women and 148 HIV positive women became pregnant and decided to go on with the pregnancy. The coverage of syphilis testing in women attending antenatal care services at any visit is 93.8% according to the national statistics and the congenital syphilis rate (live births and stillbirth) is 0% (6 cases out of 39 115).

COMMITMENT 3. Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners: During 2018, 20 801 (15 431 in 2017) IDUs persons (17 603 in civilian sector and 3 198 in penitentiary sector, 16 545 on the right bank and 4 256 on the left bank) benefited from at least two services from the base package of risk reduction services, one of which was offering syringes. The services were implemented through 10 NGOs and the Department of Penitentiary Institutions covering 40 localities and 18 penitentiary institutions. During 2018, 8 373 (5 620 in 2017) commercial sex workers benefited from at least two basic services out of the packages of risk reduction programme, one of which was condom provision. The services were implemented through 10 NGOs covering 30 localities. During the year 2018, 4 630 BSB (3 623 in 2016) benefited from at least two prevention services, one being the supply of condoms and lubricants. The services were implemented through 6 NGO and covered 17 localities. At the same time, the HIV prevention services were continued in the commercial pharmacies, the release of consumables for HIV prevention (syringes, condoms, alcohol napkins, information materials, etc.) through the individual cards of the beneficiaries of the risk reduction programs, 784 beneficiaries were covered by this way of providing services. At the same time, for the first time in the Republic of Moldova during 2018 activated three mobile clinics that offered a wide range of prevention services for all key populations. For the first time, mobile services also used rapid capillary blood tests to diagnose HIV, viral hepatitis C and syphilis. In order to reduce the risk among the key populations, there were distributed: 1. Syringes - 2 920 391 (2 902 001 in 2017); 2. Condoms - 1 347 886 (1,119,257 in 2017); 3. Condoms with increased durability - 243 533 (71 719 in 2017); 4. Lubricants - 60 756 (60 996 in 2017) envelopes 5 ml. In order

to reach the target regarding the coverage of the opioid substitution treatment (TSO) granted in the Republic of Moldova, activities were carried out to extend the TSO points to 8 territories and 13 penitentiaries with the coverage of 614 (497 in 2017) injecting drug users at the end of 2018 (including 66 beneficiaries in penitentiary sector). Based on the Assessment Report developed on Capacity Building Needs of NGOs working with Key Populations and healthcare providers, and as a result of trainings conducted on SWIT, MSMIT, TRANSIT, IDUIT - 75 participants from the right bank of the river Nistru (41 people being staff of NGOs working with KP, and 34 - staff of public healthcare facilities) have their knowledge and skills improved, being able to provide Comprehensive HIV Prevention for KP in line with international requirements. The interventions were supported by UNFPA. The revision of the existent PWID related normative framework on both banks, adjustments to those were assisted by UNODC. The set included a memorandum of collaboration between LEA and 6 NGOs, a Guiding procedure and an Action Plan regulating police's interaction with PWUDs, PLHIV and NGOs. Over 293 policemen were capacitated during 13 trainings conducted in 8 cities, based on approved Guiding Procedures for Police. Thus, from March to September, 50 PWUD were referred by police to harm reduction on left bank. The Government and civil society were supported in building their capacities to mainstream alternatives to incarceration for PWUD, included in the new draft Drug Strategy 2019 - 2022, containing a road map, an action plan and a budget under drug policy, drug prevention, demand reduction, supply reduction and harm reduction components. 11 stakeholders, including 3 state secretaries of Health, Justice and Interior were capacitated in alternatives to incarceration. Supported by UNODC prison administration and MoJ improved capacities in advancing and scaling up rehabilitation services for PWUD. A study visit for 9 specialists from prisons and NGOs to Latvian prison helped launching a Therapeutic Community in Pruncul 11 residents - prisoners are undergoing a rehabilitation program. Based on the results of the last IBBS Survey carried out in 2016 - 2017, the prevalence of HIV in IDUs according to the results is 13.9% In Chisinau, 17.0% in Balti and 29.1% in Tiraspol. The prevalence rates for Chisinau are higher than the previous results with about 5% while in Balti the prevalence rate is less by 24.8%. The prevalence of HIV in CSW's according to the results is 3.9% for Chisinau and 22.3% in Balti. If for Balti the results are almost the same (21.5% in 2012-2013) in Chisinau the prevalence of HIV declined with about 7%. The prevalence rate of HIV for MSM's in Chisinau is 9.0% (5.4% in 2012-2013) and 4.1% in Balti (8.2% in 2012-2013). The switch in prevalence rates in this two locations might be explained by the migration of MSM population to the capital city.

COMMITMENT 4. Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020: 12 specialists from both banks of Nistru representing NP HIV, M&E section of the MoH, NGOs were capacitated in Gender Mainstreaming M&E of HIV Services for Women WUD, in Minsk, Belarus with UNODC support. An assessment on women LWH economic, human rights, SRH needs was realized by a Women Living With HIV NGO, supported by UN Women, UNAIDS and UNFPA EECA RO. It revealed all the barriers for the women LWH to be empowered and to realize fully their fundamental rights. A report on Costing Domestic Violence and Violence Against Women in Moldova, commissioned by UN Women and in cooperation with WHO, was developed by the NGO, Women's Law Centre. The report recommendations were used in advocating for a new comprehensive strategic document on fighting violence against women and domestic violence in Moldova approved by Government in 2018. A Stigma Index launched in November 2018, reveals that four out of ten PLWH experienced discriminatory treatments in the last 12 months. Four out of ten people say their status was disclosed to the third parties, most often it happened in health system, family or close community. Practically each questioned person self-stigmatizes, experiencing feelings of self-indulgence, shame, and underestimation. Also 6,6% recognized suicidal tendencies. Research stays on the basis of a S&D reduction plan. Several outstanding communication campaigns to fight stigma and discrimination were organised around WAD 2018, AIDS Candlelight, World Drugs Day resulting in the coverage of about 60,000 people (including about 7,000 in the Transnistrian region); 40 cities from the both banks of the river Nistru; 6 Ministries, 14 NGOs and 4 Regional Social Centers; about 20 media channels covered the events. The campaign on new psychoactive substances, organized under auspices of the National Drug Control Commission launched in November 2018, included the first video on "spices" impact. It includes social videos, media events, TV&Radio interviews, workshops with police and multidisciplinary teams in the regions. In October 2018, a joint campaign was launched by the NGO Positive Initiative, DVV International, Pompidou Group and UNODC on scaling up rehabilitation and education services in prisons. Capacities of prisons and NGO staff were built during a round table from October and a seminar for 22 participants in December, where specialists were familiarized with the benefits of re-education and rehabilitation tools. LEA priorities were validated by the CCM HIV Technical Group and the draft report developed under UNDP leadership. The findings will be used to inform the legal environment adjustments programmed for 2019. Human rights perception study, 2018 guided by UNDP&OHCHR informed about the status of human rights, revealing that right to health is mostly unfulfilled and PLWH& LGBT remain the most stigmatized and left behind people.

COMMITMENT 5. Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year: The "Health education" curriculum course from secondary and high school was revised in accordance with international

standards and piloted in 22-targeted schools, reaching more than 3,000 adolescents with comprehensive, age-appropriate education. More than 13,000 young boys and girls, aged 12-18 years have their knowledge improved on healthy lifestyle, including youth SRH, HIV prevention, gender equality and prevention of violence, through peer-to-peer education, being supported by UNFPA. More than 5000 people (parents, teachers, LPAs and FBOs, representatives, adolescents health services providers from community centers, young people) have their awareness increased on youth SRH, HIV and GBV prevention in 22 communities from 5 targeted rayons. 19 children in detention were trained regarding HIV, TB, drug use, tobacco consumption, stigma aspect and personal hygiene as a result of UNODC trainings, as well as capacity building of 29 staff members from juvenile detention centre Makarenko, Transnistria.

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

COMMITMENT 7. Ensure that at least 30% of all service delivery is community-led by 2020: In the Republic of Moldova, prevention programmes in key populations (1st priority of the National AIDS programme 2016-2020), which represent about 30% of the budget is being implemented by the nongovernmental organizations, representing the community of those people. All their activities are regulated by standards and guidelines, approved with the Ministry of Health, Labour and Social Protection. Moreover, at the end of 2017, the first 2 harm reduction projects for key populations, with the total value of MDL (Moldovan Leu - national currency) about 2 mln (or about Eur 100 000) were procured from domestic resources, using the Prophylaxis Fund of the National Health Insurance Company. The implementation period of those 2 projects ended 2018. Under those projects about 2000 PWID, SW and MSM were covered. At the mid of 2018, one more project was contracted run by NGOs was contracted by National Health Insurance company of about EUR 100.000 to cover about 1000 beneficiaries from key populations. This is the first important achievement towards the sustainability of those programmes, after more than five years of advocacy. Those efforts should be further continued and strengthened. The activities related to HIV care and support, are also including community lead interventions to ensure the quality life of PLWH, as well as adherence to ART, which influences the third 90.

COMMITMENT 8. Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers: To ensure proper reporting for the 8.1 indicator (HIV spending) for 2018, data have been collected from various sources in accordance with the recommendations of the guide "Domestic and international AIDS spending by categories and financing sources". Hence, there have been selected organizations from national and local levels that implemented and disbursed funds as per the HIV spending categories indicated in the template on reporting on HIV expenditures. Organizations were asked to provide information on financial allocations spent and destination of disbursement according to the NASA matrix. Thus, for calculation of expenses in the field of HIV/AIDS for 2018, data on annual expenditures with special destination for HIV/AIDS have been taken into consideration from the following institutions within the health system: • Ministry of Health, for state budget allocations and funds for Mandatory Health Insurance, for "Public Health Services" Program, for Prevention of HIV/AIDS and STI, and for implementation of the National Program for Prevention and Control of HIV/AIDS and STI 2016-2020; • National Public Health Agency responsible for HIV/AIDS epidemiological surveillance and prophylaxis activities; • Medical -Sanitary Public Institution Hospital of Dermatology and Communicable Diseases, the highest as hierarchy institution responsible for HIV response, specific responsibilities relate to HIV surveillance, HIV/AIDS diagnosis and laboratory, pre-ART surveillance, ARV treatment management and ARV treatment provision, as well as STI case management; • National Blood Transfusion center responsible for Blood Safety; • National Narcology Dispensary for the activities on Harm Reduction in IDUs, including the methadone substitution program; • National Institute of Research in the field of Mothers' and Children's health, for PMTCT; • Educational institutions, subordinated to the Ministry of Health, for expenditures in training, refresher training and specialization for pedagogical workers. • Medical -Sanitary Public Institutions of the republican, municipal and rayon levels. Information on financial flows was requested from municipal and district councils, line Ministries (Ministry of Justice; Ministry of Defense; Ministry of Education, Culture, and Research) and international organizations implementing their activities in the Republic of Moldova (UNAIDS, World Health Organization, the principal recipients of the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), UNICEF, UNFPA, UNODC, SOROS) and NGO (Positive Initiative, League of People living with HIV, Union for HIV prevention and Harm Reduction, GenderDoc-M). Public Health Institutions reported according to budget lines, specifying the spending category and the source of financing. Bilateral or multilateral international organizations were classified according to the criteria of source of financing, but also as financial agents. The content of the received questionnaires was verified to exclude the double counting of resources. In order to exclude possible overlapping of resources, the expenditures have been cumulated in accordance with the disaggregation by cost categories. Expenditures for the national HIV response in the Republic of Moldova (in national currency) for 2014, 2015, 2016, 2017 and 2018 are presented in the Matrix for 2014, Matrix for 2015, Matrix for 2016, Matrix for 2017 and 2018 respectively. The expenditures for the HIV response in 2018 decreased with about MDL 18,7 mln. (- 18,7%) compared to the volume of expenditures from 2017 and reached the total amount of about MDL 138,1 mln. or USD 8,220,554. From those expenditures, the

public financial resources constituted MDL 70,0 mln. or USD 4,167,839 (50,7%). International resources for this year constituted MDL 68,1 mln or USD 4,052,715 (49,3%). The decrease of resources for the national HIV response in 2018 is due to the decrease of international financial resources of about 28,9%. The decrease was from MDL 95,8 mln in 2018 to MDL 68,1 mln in 2018. In the same time, it is necessary to note public financial resources increased in 2018 compared to 2017, the increase rate is 14,9% or from MDL 61,0 mln to about MDL 70 mln in one year. Classified by spending category of expenditures for the national response to HIV in the framework of the national response to HIV in 2018, 44% went to Treatment, support and Care. For the spending category HIV Prevention financial resources of about 32% have been allocated, Governance and sustainability - 5%, Critical enablers - 3% allocated, TB/HIV co-infection, diagnostic and treatment - 4%, category Prevention of mother to child transmission, programmes for youth and adolescents and social protection, community mobilization - about 2% each. Limitations of the method used to generate this indicator are as follows, some are valid also for prior reporting periods: • Though significant progress has been registered in data collection from the greatest majority of organizations and institutions, involved in various aspects of the national HIV response, including coordination, monitoring and evaluation, there are still entities with budgets committed and spent for HIV/AIDS that do not report their expenditures and are not reflected in the matrix, due to the fact that activities are not targeting general population, or PLHIV, or MARPs as such and are more tangential to the response, hence not fitting comfortably in the pre-set spending categories. • In the case of public institutions funded by the State budget, tracking all indirect costs of the subdivisions, specifically the maintenance and utilities costs associated to activities in the framework of the national HIV response, has not been possible as the maintenance costs per institution form the integral budget and cannot be disaggregated. • Some international institutions are reported the data without the desired desagregations. In conclusion, the data collected for the Indicator “HIV/AIDS Spending” for the Republic of Moldova allow the comparative analyses of trends over time in costs of activities in HIV/AIDS, based on budget categories covered.

COMMITMENT 9. Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights: Republic of Moldova is aligned to UN standards with regard to right to health for all people as suggested by CESCR - 22 Session of the Committee on Economic, Social and Cultural Rights, the Right to the Highest Attainable Standard of Health (Art. 12) ensuring that services are: accessible, non-discriminatory, physically and economically accessible, informative and qualitative, while providing access to the most vulnerable groups such as marginalized, people with HIV, disabilities, different ethnicity, women and children, etc. In the Republic of Moldova, the legislation and the policies in the area of gender equality are quite well developed. The gender equality is a founding principle set by the supreme law, the Constitution, and there is a specific law on gender equality. The Constitution of the Republic of Moldova art. 15, ch. 2 guarantees the right to equal attitude and establishes that men and women are equal in front of law and local public authorities. Several other organic laws stipulates the right to equal attitude and forbids discrimination: Law No. 411 from 28.03.2005 with regard to the health care ; Law No. 263 from 27.10.2005 with regarding the patients' rights and responsibilities, etc.; Law on gender equality between men and women No.5 XVI from 02.09.2006 ; Law on Social Inclusion of Persons with Disabilities No. 60 - 30.03.2012. The amendment of the Law on HIV/AIDS and the Law on Ensuring Equality strengthen non-discrimination guarantees, equal rights of every person and confidentiality safeguards. National mechanisms, as Ombudsman, Antidiscrimination council are already in place since 2014 to protect the rights of people. The Law No. 121 from 25.05.2012 ensures the equality of chances is aiming at preventing and fighting the discrimination, as well as ensuring the equal chances to all in political, economic, social, cultural and other spheres without making any race, color, nationality, ethnical origin, language, religion or beliefs, sex, age, disability, opinion, political belief or any other similar criteria. The Law No. 298 from 21.12.2012 approves the Regulation of the Council on Preventing and Eliminating Discrimination and Ensuring Equality (“Equality Council”) which serves as one of the mechanisms to ensure the law implementation. The HIV Law No. 23 from 16.02.2007 amended and modified in 2012 Art. 25 forbids any kind of discrimination on HIV status. The NAP 2016-2020 is built upon principles of gender mainstreaming and human rights evidence - based approach (programmatic data and researches) and ensures no one is left behind. The NAP addresses the needs of key affected population PWID, CSW, MSM, prisoners, PLWH, vulnerable youth having those as the center of all the interventions, targeting their needs as per program objectives, budget and M&E framework. In the same time, it includes strategic focus on Human Rights, gender sensitive activities for KAPs and community systems strengthening with relevant budget. The NAP M&E framework includes gender-disaggregated data on all those most affected populations, thus ensuring the HR and gender is quantified and measured. Recent Gender assessment of the HIV policies reveals achievements and needs for further improvements. The gender equality is the mandate of several structures at the governmental level. A Governmental Commission on Equal Opportunities for Women and Men is established. The Ministry of Labor, Social Protection and Family has a Department of Equal Opportunities and Family Policies. Since year 1999 all ministries have established gender focal points and there are local commissions on women issues at the level of local public authorities. The National Human Rights Action Plan (NHRAP) was developed by the Government with the support of OHCHR involving NGOs, including HIV ones and it reveals ensuring the access of population to HIV, SRH health services and was approved in 2018. A Study on the equality perception in Republic of Moldova was developed showing the high level of intolerance towards PLWH. Legal Environment Assessment priorities were validated by the CCM

HIV Technical Group and the draft report developed under UNDP leadership at the end of 2018. The findings will be used to inform the legal environment adjustments programmed for 2019.

COMMITMENT 10. Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C: During 2018 - 812 persons were administered Isoniasid for prevention of TB among PLWH.

90-90-90 HIV testing and treatment (indicators 1.1, 1.2, and 1.4)

Instructions: All countries with populations >250 000 are strongly encouraged to take data from the final Spectrum file for Part 2. For countries using their final Spectrum file, Part 1 does not need to be completed. If detailed age/sex disaggregated or sub-national/city-specific data are available, Parts 3 and 4 should be completed.

Please see GAM guidance and FAQs for more details.

Take data from the final Spectrum file: Yes

Part 1. Indicator metadata (please complete only if you are not taking data from the final Spectrum file).

1.1 People living with HIV who know their HIV status

Are data available for the reporting period?:

End date of the reporting period:

1.2 People living with HIV who are on antiretroviral therapy

Are data available for the reporting period?:

End date of the reporting period:

1.4 People living with HIV who have a suppressed viral load

Are data available for the reporting period?:

Start date of the reporting period:

End date of the reporting period:

1.1, 1.2, and 1.4 denominator: Estimates of people living with HIV

Are data available for the reporting period?:

End date of the reporting period:

Part 2. Total and disaggregated by broad age/sex

	All	Children (<15)	Males (15+)	Females (15+)
Denominator (national) : Estimate of people living with HIV				
Lower bound				
Upper bound				

	All	Children (<15)	Males (15+)	Females (15+)	Other sex (adults 15+), originally reported as assigned male at birth	Other sex (adults 15+), originally reported as assigned as female at birth
Indicator 1.1 Numerator (national) : People living with HIV who know their HIV status	9288	138	4938	4212	0	0
Indicator 1.2 Numerator (national) : People on antiretroviral treatment	5865	126	2941	2798	0	0
People newly initiating antiretroviral treatment	1053	13	582	458	0	0
Indicator 1.4 Numerator (national) : People on antiretroviral treatment who have suppressed viral load	4860	105	2447	2308	0	0
Indicator 1.4 Sub-numerator : People who are virally suppressed among those tested	4562	100	2289	2173	0	0
Indicator 1.4 Sub-denominator : People receiving a routine viral load test among those on antiretroviral treatment	5505	120	2751	2634	0	0

Calculated HIV testing and treatment cascade and 90-90-90 percentages

	All	Children (<15)	Males (15+)	Females (15+)
Percentage (%) : People living with HIV who know their HIV status (First 90)				
Percentage (%) : People living with HIV who are on treatment (Target: 81%)				
Percentage (%) : People living with HIV who have a suppressed viral load (Target: 73%)*				
Percentage (%) : People who are on treatment among those who know their HIV status (Second 90)	63	91	60	66
Percentage (%) : People on antiretroviral treatment who have a suppressed viral load (Third 90)*	83	83	83	82
Viral load coverage (%) : People on antiretroviral treatment who have had a viral load test Note: For countries with testing coverage of <50%, do not enter data for Indicator 1.4 unless the data are deemed nationally representative. Countries with testing coverage between 50-90% should review GAM guidance and adjust for partial coverage.	94	95	94	94

Part 3. Disaggregation by detailed age/sex group

Note: Complete each row where age and sex disaggregated data are available. If detailed age and sex data are not collected for a specific indicator or for specific age groups, leave these cells blank. Please see GAM guidance and FAQ for more details.

	Children (< 5)	5-9	10-14	Males (15-19)	Males (20-24)	Males (25-49)	Males (50+)	Females (15-19)	Females (20-24)	Females (25-49)	Females (50+)
Denominator (national) : Estimate of people living with HIV											
Indicator 1.1 Numerator : People living with HIV who know their HIV status	31	48	59	21	106	4031	780	45	219	3406	542
Indicator 1.2 Numerator : People on antiretroviral treatment	25	47	54	15	63	2364	499	32	131	2249	386
People newly initiating antiretroviral treatment	8	3	2	0	31	472	79	13	44	341	60
Indicator 1.4 Numerator (national) : People on antiretroviral treatment who have a suppressed viral load	19	39	48	8	47	1976	417	24	87	1851	344
Indicator 1.4 Sub-numerator : People who are virally suppressed among those tested	19	37	44	8	44	1832	405	22	77	1740	334
Indicator 1.4 Sub-denominator : People receiving a routine viral load test among those on antiretroviral treatment	25	45	50	15	59	2192	485	29	116	2114	375

Part 4a. Subnational areas, all ages [Add as many rows as needed]

Sub-national area	Denominator - Estimate of people living with HIV	Indicator 1.1 Numerator - People living with HIV who know their HIV status	Indicator 1.2 Numerator - People on antiretroviral treatment	Indicator 1.4 Numerator - People on antiretroviral treatment who have a suppressed viral load	Indicator 1.4 sub-numerator - People who are virally suppressed among those tested	Indicator 1.4 sub-denominator - People receiving a routine viral load test among those on antiretroviral treatment
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Alternatively, you may [download this template](#), fill in the columns, and upload using the "Add File" button.

Part 4b. City specific, all ages [Add as many rows as needed]

City	Denominator - Estimate of people living with HIV	Indicator 1.1 Numerator - People living with HIV who know their HIV status	Indicator 1.2 Numerator - People on antiretroviral treatment	Indicator 1.4 Numerator - People on antiretroviral treatment who have a suppressed viral load	Indicator 1.4 sub-numerator - People who are virally suppressed among those tested	Indicator 1.4 sub-denominator - People receiving a routine viral load test among those on antiretroviral treatment
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1.3 Retention on antiretroviral therapy at 12 months

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Antiretroviral Therapy Patient Registers

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Total	Children (<15)	Males (15+)	Females (15+)	Breastfeeding status at start of therapy
Percentage (%) : Percentage of adults and children living with HIV known to be on antiretroviral therapy 12 months after starting	86.8	100	83.8	90.2	0
Numerator : Number of adults and children who are still alive and receiving antiretroviral therapy 12 months after initiating treatment in 2017	763	11	402	350	0
Denominator : Total number of adults and children initiating antiretroviral therapy in 2017, within the reporting period, including those who have died since starting antiretroviral therapy, those who have stopped treatment and those recorded as lost to follow-up at month 12	879	11	480	388	0

Additional information: In addition to 'alive and on ART', please report other outcomes at 12 months after initiating treatment

	Data value
Lost to follow-up	4
Stopped therapy	76
Died	36

1.5 Late HIV diagnosis

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Health service registries

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

People living with HIV with the initial CD4 cell count <200 cells/mm3

	All	Children (<15)	Males (15+)	Females (15+)
Percentage (%) : Percentage of people living with HIV with the initial CD4 cell count <200 cells/mm3 during the reporting period	29	30.8	29	28.9
Numerator : Number of people living with HIV with an initial CD4 cell count <200 cells/mm3 at the time of diagnosis	212	4	120	88
Denominator : Total number of people living with HIV with an initial CD4 cell count during the reporting period	731	13	414	304

People living with HIV with the initial CD4 cell count <350 cells/mm3

	All	Children (<15)	Males (15+)	Females (15+)
Percentage (%) : Percentage of people living with HIV with the initial CD4 cell count <350 cells/mm3 during the reporting period	49.5	38.5	50.5	48.7
Numerator : Number of people living with HIV with an initial CD4 cell count <200 cells/mm3 at the time of diagnosis	362	5	209	148
Denominator : Total number of people living with HIV with an initial CD4 cell count during the reporting period	731	13	414	304

1.6 Antiretroviral medicine stock-outs

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Inventory control reports

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Total	General clinic	Maternal and child site	TB site
Percentage (%) : Percentage of treatment sites that had a stock-out of one or more required antiretroviral medicines during a defined period	0	0	0	0
Numerator : Number of health facilities dispensing antiretroviral medicines that experienced a stock-out of one or more required antiretroviral medicines during a defined period	0	0	0	0
Denominator : Total number of health facilities dispensing antiretroviral medicines during the same period	8	8	0	0

1.7 AIDS mortality

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Mathematical modelling (e.g. Spectrum)

Other measurement tool / source: The mortality database for 2018 is not completed yet by the National Agency of Public Health, in this regard the data regarding mortality will be possible to provide only by July 2019.

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Take data from the final Spectrum file: Yes

All ages

	Total	Males	Females	Gender unknown
Rate : Total number of people who have died from AIDS-related causes per 100 000 population				
Numerator : Number of people dying from AIDS-related causes during the calendar year				
Denominator : Total population regardless of HIV status				

<5 years

	Total	Males	Females	Gender unknown
Rate : Total number of people (aged <5 years) who have died from AIDS-related causes per 100 000 population				
Numerator : Number of people (aged <5 years) dying from AIDS-related causes during the calendar year				
Denominator : Total population (aged <5 years) regardless of HIV status				

5-14 years

	Total	Males	Females	Gender unknown
Rate : Total number of people (aged 5-14 years) who have died from AIDS-related causes per 100 000 population				
Numerator : Number of people (aged 5-14 years) dying from AIDS-related causes during the calendar year				
Denominator : Total population (aged 5-14 years) regardless of HIV status				

15+ years

	Total	Males	Females	Gender unknown
Rate : Total number of people (aged 15+ years) who have died from AIDS-related causes per 100 000 population				
Numerator : Number of people (aged 15+ years) dying from AIDS-related causes during the calendar year				
Denominator : Total population (aged 15+ years) regardless of HIV status				

1.8 HIV testing volume and positivity

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: HTS programme registers, log books and reporting forms

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Please specify any national testing campaigns or shifts in testing strategies that might explain any changes to testing volumes when compared to previous years:

Data on retesting rates among HIV -positive or HIV-negative individuals:

Total and disaggregated by age

	All	Children (<15)	Males (15+)	Females (15+)
Percentage (%) : Percentage of HIV-positive results returned to people in the calendar year	0.4			
Numerator : Number of tests conducted where an HIV-positive result was returned to a person (positivity)	905			
Denominator : Number of tests performed where results were received by a person (testing volume)	240847			

By testing modality: Facility-level testing

	All facility-level testing	Provider-initiated testing in clinics or emergency facilities	ANC clinics (including labour and deliver)	VCT (within a health facility setting)	Other facility-level testing
Percentage (%) : Percentage of HIV-positive results returned to people in the calendar year	0.4	0.9	0.1	0.9	0.3
Numerator : Number of tests conducted where an HIV- positive result was returned to a person (positivity)	777	334	68	66	309
Denominator : Number of tests performed where results were received by a person (testing volume)	220679	39145	52807	7049	121678

By testing modality: Community-level HTS reporting

	All community-level HTS reporting	Mobile testing	VCT centres (not within a health facility setting)	Other community-based testing
Percentage (%) : Percentage of HIV-positive results returned to people in the calendar year	0.6			
Numerator : Number of tests conducted where an HIV- positive result was returned to a person (positivity)	128			
Denominator : Number of tests performed where results were received by a person (testing volume)	20168			

Self-testing

	Data value
Number procured : Total number of self-test kits purchased (not distributed or used) in a year by the national government, including (but not limited to) donors	0
Number distributed : Total number of individual self-test kits that were distributed in a year	0

2.1 Early infant diagnosis

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: EID Testing laboratories and sentinel surveillance

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Data value
Percentage (%) : Percentage of infants born to women living with HIV receiving a virological test for HIV within two months of birth	97.9
Numerator : Number of infants who received an HIV test within two months of birth during the reporting period. Infants tested should only be counted once.	187
Test result - Positive	5
Test result - Negative	182
Test result - Indeterminate	0
Test result - Rejected for testing	0
Test result - Other	0
Denominator : Number of pregnant women living with HIV giving birth in the past 12 months	191

Take denominator from the final Spectrum file: No

2.2 Mother-to-child transmission of HIV

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Spectrum

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Take data from the final Spectrum file: Yes

	Data value
Percentage (%) : Estimated percentage of children newly infected with HIV from mother-to-child transmission among women living with HIV delivering in the past 12 months	
Numerator : Estimated number of children newly infected with HIV from mother-to-child transmission among children born in the previous 12 months to women living with HIV	
Denominator : Estimated number of births to women living with HIV who delivered in the previous 12 months	

2.3 Preventing the mother-to-child transmission of HIV

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Numerator from ANC/PMTCT and ART register

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

The data for the Denominator is taken from the national statistics, because the Spectrum estimation are lower than the information in national statistics.

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Take data from the final Spectrum file: No

	Data value
Percentage (%) : Percentage of pregnant women living with HIV who received antiretroviral medicine to reduce the risk of mother-to-child transmission of HIV	95.8
Numerator : Number of pregnant women living with HIV who delivered during the past 12 months and received antiretroviral medicines to reduce the risk of the mother-to-child transmission of HIV. Global reports summarizing the coverage of antiretroviral medicine for preventing mother-to-child transmission will exclude women who received single-dose nevirapine, since it is considered a suboptimal regimen. However, the country should report the number of women who only received single-dose nevirapine.	183
1. Newly initiated on antiretroviral therapy during the current pregnancy	82
2. Already receiving antiretroviral therapy before the current pregnancy	101
3. Other (please comment: e.g. specify regimen, uncategorized, etc.) In the Comment Box, for the women reported as receiving an "Other" regimen, please describe the ARV regimen(s) and the number of women receiving each regimen category.	0
If disaggregations 1 and 2 are not available, please provide the total number of pregnant women on Lifelong antiretroviral therapy	
Denominator : Estimated number of women living with HIV who delivered within the past 12 months	191

For the women reported as receiving an "Other" regimen, please describe the ARV regimen(s) and the number of women receiving each regimen category.:

Sub-national data

Sub-national region	Percentage (%)	Total number of HIV+ pregnant women who delivered and received ARV drugs	1. Newly initiated on antiretroviral therapy during the current pregnancy	2. Already receiving antiretroviral therapy before the current pregnancy	3. Other (please comment: e.g. specify regimen, uncategorized, etc.)	If disaggregations 1 and 2 are not available, please provide the total number of pregnant women on Lifelong ART	Denominator

Alternatively, you may [download this template](#), fill in the columns, and upload using the "Add File" button.

City-specific data

City	Percentage (%)	Total number of HIV+ pregnant women who delivered and received ARV drugs	1. Newly initiated on antiretroviral therapy during the current pregnancy	2. Already receiving antiretroviral therapy before the current pregnancy	3. Other (please comment: e.g. specify regimen, uncategorized, etc.)	If disaggregations 1 and 2 are not available, please provide the total number of pregnant women on Lifelong ART	Denominator
Chişinău							

2.4 Syphilis among pregnant women

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: National programme data

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Are the data representative of the entire country?: Yes

If no, please describe:

Test type(s) generally used in your country to define positivity in pregnant women:: non-treponemal (RPR, VDRL)

A. Coverage of syphilis testing in women attending antenatal care services

At any visit

	Total
Percentage (%) : Coverage of syphilis testing in women attending antenatal care services at any visit	99.3
Numerator : Number of women attending antenatal care services who were tested for syphilis at any visit	37607
Denominator : Number of women attending antenatal care services	37864

At first prenatal visit (<13 weeks gestation)

	Total
Percentage (%) : Coverage of syphilis testing in women attending antenatal care services at first prenatal visit (<13 weeks gestation)	88.1
Numerator : Number of women attending antenatal care services who were tested for syphilis during the first prenatal visit (<13 weeks gestation)	33352
Denominator : Number of women attending antenatal care services	37864

B. Percentage of pregnant women attending antenatal clinics with a positive (reactive) syphilis serology

	All	15-24	25+
Percentage (%) : Percentage of pregnant women attending antenatal clinics with a positive (reactive) syphilis serology	0.4		
Numerator : Number of women attending antenatal care services who tested positive for syphilis	142		
Denominator : Number of antenatal care attendees who were tested for syphilis	33805		

C. Percentage of antenatal care attendees during a specified period with a positive syphilis serology who were treated adequately

	Total
Percentage (%) : Percentage of antenatal care attendees during a specified period with a positive syphilis serology who were treated adequately	98
Numerator : Number of antenatal care attendees with a positive syphilis test who received at least one dose of benzathine penicillin 2.4 mU intramuscularly	150
Denominator : Number of antenatal care attendees who tested positive for syphilis	153

2.5 Congenital syphilis rate (live births and stillbirth)

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: National case reporting

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Are the data representative of the entire country?: Yes

If no, please describe:

Does your case definition for congenital syphilis include stillbirths?: Yes

Please comment on any major differences between the national case definition and the global surveillance case definition, available on page 15 of:

<http://www.who.int/reproductivehealth/publications/rtis/9789241505895/en/index.html>:

	Total
Percentage (%) : Percentage of reported congenital syphilis cases (live births and stillbirth)	0
Numerator : Number of reported congenital syphilis cases (live births and stillbirths) in the past 12 months	6
Denominator : Number of live births	39115

2.6 HIV testing in pregnant women

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Please specify

Other measurement tool / source: Statistical Form No. 32

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	All pregnant women	Pregnant women who inject drugs (optional)
Percentage (%) : Percentage of pregnant women with known HIV status (based on population-based denominator)	99.4	
Numerator : Number of pregnant women attending antenatal clinics (ANC) and/or had a facility-based delivery and were tested for HIV during pregnancy, or already knew they were HIV positive	37654	
1. known HIV infection at ANC entry	148	
2. tested HIV positive at ANC during current pregnancy	68	
3. tested HIV negative at ANC during current pregnancy	37438	
Total identified HIV-positive women (sum of items 1 and 2)	216	
Population-based denominator : Number of pregnant women who delivered within the past 12 months	37864	
Facility-based denominator : Number of pregnant women who attended an ANC or had a facility-based delivery in the past 12 months	40095	

City-specific data

City	Percentage (using population-based denominator)	Numerator	Population-based denominator
Chişinău			

3.1 HIV incidence

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Other

Other measurement tool / source: Routine statistics

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Take data from the final Spectrum file: Yes

by age

	15-49	50+	15-24	0-14	All
Incidence : Number of people newly infected with HIV in the reporting period per 1000 uninfected population	0.3634	0.1016	0.1774	0.0218	0.225
Numerator : Number of people newly infected during the reporting period	760	131	87	14	905
Denominator : Total number of uninfected population (or person-years exposed)	2091214	1289758	490471	641704	4022676

by sex and by age

	Males (15-49)	Females (15-49)	Males (50+)	Females (50+)	Males (15-24)	Females (15-24)
Incidence : Number of people newly infected with HIV in the reporting period per 1000 uninfected population	0.4247	0.3019	0.1515	0.0647	0.1517	0.2042
Numerator : Number of people newly infected during the reporting period	445	315	83	48	38	49
Denominator : Total number of uninfected population (or person-years exposed)	1047869	1043345	547835	741923	250503	239968

Sub-national data

Sub-national region	Incidence per 1000 (adults 15-49*)	Incidence per 1000 (males 15-49*)	Incidence per 1000 (females 15-49*)	Numerator (adults 15-49*)	Numerator (males 15-49*)	Numerator (females 15-49*)	Denominator (adults 15-49*)	Denominator (males 15-49*)	Denominator (females 15-49*)	*Age range (if 15-49 is not available)
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Alternatively, you may [download this template](#), fill in the columns, and upload using the "Add File" button.

City-specific data

City	Incidence per 1000 (adults 15-49*)	Incidence per 1000 (males 15-49*)	Incidence per 1000 (females 15-49*)	Numerator (adults 15-49*)	Numerator (males 15-49*)	Numerator (females 15-49*)	Denominator (adults 15-49*)	Denominator (males 15-49*)	Denominator (females 15-49*)	*Age range (if 15-49 is not available)
Chişinău										

3.2A Estimates of the size of key populations: Sex workers

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Year of latest estimation:

Size estimate:

Region for which the last estimation was performed (e.g. for the entire country, for one province, for the capital city, etc.):

Definition used for the population and inclusion criteria used in the study/survey, as applicable:

Method to derive the size estimate:

Comments and additional information:

Sub-national data - Sex workers

Area type	Area name	Year of latest estimation	Size estimate	Method to derive the size estimate
Town/City	Chişinău			

3.2B Estimates of the size of key populations: Men who have sex with men

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Year of latest estimation:

Size estimate:

Region for which the last estimation was performed (e.g. for the entire country, for one province, for the capital city, etc.):

Definition used for the population and inclusion criteria used in the study/survey, as applicable:

Method to derive the size estimate:

Comments and additional information:

Sub-national data - Men who have sex with men

Area type	Area name	Year of latest estimation	Size estimate	Method to derive the size estimate
Town/City	Chişinău			

3.2C Estimates of the size of key populations: People who inject drugs

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Year of latest estimation:

Size estimate:

Region for which the last estimation was performed (e.g. for the entire country, for one province, for the capital city, etc.):

Definition used for the population and inclusion criteria used in the study/survey, as applicable:

Method to derive the size estimate:

Comments and additional information:

Sub-national data - People who inject drugs

Area type	Area name	Year of latest estimation	Size estimate	Method to derive the size estimate
Town/City	Chişinău			

3.2D Estimates of the size of key populations: Transgender people

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Year of latest estimation:

Size estimate:

Region for which the last estimation was performed (e.g. for the entire country, for one province, for the capital city, etc.):

Definition used for the population and inclusion criteria used in the study/survey, as applicable:

Method to derive the size estimate:

Comments and additional information:

Sub-national data - Transgender people

Area type	Area name	Year of latest estimation	Size estimate	Method to derive the size estimate
Town/City	Chişinău			

3.2E Estimates of the size of key populations: Prisoners

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Year of latest estimation:

Size estimate:

Region for which the last census was performed (e.g. for the entire country, for one province, for the capital city, etc.):

Definition used for the population and inclusion criteria used in the study/survey, as applicable:

Comments and additional information (include source and other relevant background information):

Sub-national data - Prisoners

Area type	Area name	Year of latest estimation	Size estimate
Town/City	Chişinău		

3.3A HIV prevalence among sex workers

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers living with HIV						
Numerator : Number of sex workers who test positive for HIV						
Denominator : Number of sex workers tested for HIV						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
Chişinău								

3.3B HIV prevalence among men who have sex with men

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men who are living with HIV			
Numerator : Number of men who have sex with men who test positive for HIV			
Denominator : Number of men who have sex with men tested for HIV			

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

3.3C HIV prevalence among people who inject drugs

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs who are living with HIV						
Numerator : Number of people who inject drugs who test positive for HIV						
Denominator : Number of people who inject drugs tested for HIV						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
Chişinău								

3.3D HIV prevalence among transgender people

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Transman	Transwoman	Other	<25	25+
Percentage (%) : Percentage of transgender people who are living with HIV						
Numerator : Number of transgender people who test positive for HIV						
Denominator : Number of transgender people tested for HIV						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Transmen - Numerator	Transmen - Denominator	Transwomen - Numerator	Transwomen - Denominator	Transmen (<25) - Numerator	Transmen (<25) - Denominator	Transwomen (<25) - Numerator	Transwomen (<25) - Denominator
Chişinău								

3.3E HIV prevalence among prisoners

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of prisoners who are living with HIV						
Numerator : Number of prisoners who test positive for HIV						
Denominator : Number of prisoners who tested for HIV						

Sub-national data

Total and disaggregated by age

Area type	Area name	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
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Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
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3.4A HIV testing among sex workers

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers who tested for HIV in the past 12 months, or who know their current HIV status						
A : Number of sex workers who have been tested and whose result is positive						
B : Number of sex workers who have been tested in the last 12 months and whose result is negative						
Numerator (A + B) : Number of sex workers who know their HIV status						
Denominator : Number of sex workers who answered the question "Do you know your HIV status from an HIV test?"						

Sub-national data

Area type	Area name	Number of Survey Respondents	Number who answered "No, I have never been tested"	Number who answered "Yes, I have been tested"	Last tested: <12 months and HIV positive	Last tested: <12 months and HIV negative	Last tested: >12 months and HIV positive	Last tested: >12 months and HIV negative	Result: Positive (date of test unavailable)	Result: Negative (date of test unavailable)	Result: Indeterminate
Town/City	Chişinău										

3.4B HIV testing among men who have sex with men

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men who tested for HIV in the past 12 months or who know they are living with HIV			
A : Number of men who have sex with men who have been tested and whose result is positive			
B : Number of men who have sex with men who have been tested in the last 12 months and whose result is negative			
Numerator (A + B) : Number of men who have sex with men who know their HIV status			
Denominator : Number of men who have sex with men who answered the question "Do you know your HIV status from an HIV test?"			

Sub-national data

Area type	Area name	Number of Survey Respondents	Number who answered "No, I have never been tested"	Number who answered "Yes, I have been tested"	Last tested: <12 months and HIV positive	Last tested: <12 months and HIV negative	Last tested: >12 months and HIV positive	Last tested: >12 months and HIV negative	Result: Positive (date of test unavailable)	Result: Negative (date of test unavailable)	Result: Indeterminate
Town/City	Chişinău										

3.4C HIV testing among people who inject drugs

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs who tested for HIV in the past 12 months or who know they are living with HIV						
A : Number of people who inject drugs who have been tested and whose result is positive						
B : Number of people who inject drugs who have been tested in the last 12 months and whose result is negative						
Numerator (A + B) : Number of people who inject drugs who know their HIV status						
Denominator : Number of people who inject drugs who answered the question "Do you know your HIV status from an HIV test?"						

Sub-national data

Area type	Area name	Number of Survey Respondents	Number who answered "No, I have never been tested"	Number who answered "Yes, I have been tested"	Last tested: <12 months and HIV positive	Last tested: <12 months and HIV negative	Last tested: >12 months and HIV positive	Last tested: >12 months and HIV negative	Result: Positive (date of test unavailable)	Result: Negative (date of test unavailable)	Result: Indeterminate
Town/City	Chişinău										

3.4D HIV testing among transgender people

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Transman	Transwoman	Other	<25	25+
Percentage (%) : Percentage of transgender people who tested for HIV in the past 12 months or who know they are living with HIV						
A : Number of transgender people who have been tested and whose result is positive						
B : Number of transgender people who have been tested in the last 12 months and whose result is negative						
Numerator (A + B) : Number of transgender people who know their HIV status						
Denominator : Number of transgender people who answered the question "Do you know your HIV status from an HIV test?"						

Sub-national data

Area type	Area name	Number of Survey Respondents	Number who answered "No, I have never been tested"	Number who answered "Yes, I have been tested"	Last tested: <12 months and HIV positive	Last tested: <12 months and HIV negative	Last tested: >12 months and HIV positive	Last tested: >12 months and HIV negative	Result: Positive (date of test unavailable)	Result: Negative (date of test unavailable)	Result: Indeterminate

3.5A Antiretroviral therapy coverage among sex workers living with HIV

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers living with HIV receiving antiretroviral therapy in the past 12 months						
Numerator : Number of sex workers living with HIV who report receiving antiretroviral therapy in the past 12 months						
Denominator : Number of sex workers living with HIV						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
Chişinău								

3.5B Antiretroviral therapy coverage among men who have sex with men living with HIV

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men living with HIV receiving antiretroviral therapy in the past 12 months			
Numerator : Number of men who have sex with men living with HIV who report receiving antiretroviral therapy in the past 12 months			
Denominator : Number of men who have sex with men living with HIV			

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

3.5C Antiretroviral therapy coverage among people who inject drugs living with HIV

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs living with HIV receiving antiretroviral therapy in the past 12 months						
Numerator : Number of people who inject drugs living with HIV who report receiving antiretroviral therapy in the past 12 months						
Denominator : Number of people who inject drugs living with HIV						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
Chişinău								

3.5D Antiretroviral therapy coverage among transgender people living with HIV

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Transman	Transwoman	Other	<25	25+
Percentage (%) : Percentage of transgender people living with HIV receiving antiretroviral therapy in the past 12 months						
Numerator : Number of transgender people living with HIV who report receiving antiretroviral therapy in the past 12 months						
Denominator : Number of transgender people living with HIV						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Transman - Numerator	Transman - Denominator	Transwoman - Numerator	Transwoman - Denominator	Transman (<25) - Numerator	Transman (<25) - Denominator	Transwoman (<25) - Numerator	Transwoman (<25) - Denominator
Chişinău								

3.5E Antiretroviral therapy coverage among prisoners living with HIV

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of prisoners living with HIV receiving antiretroviral therapy in the past 12 months						
Numerator : Number of prisoners living with HIV who report receiving antiretroviral therapy in the past 12 months						
Denominator : Number of prisoners living with HIV						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
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Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
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3.6A Condom use among sex workers

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers reporting using a condom with their most recent client						
Numerator : Number of sex workers who reported using a condom with their last client						
Denominator : Number of sex workers who reported having commercial sex in the past 12 months						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
Chişinău								

3.6B Condom use among men who have sex with men

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	<25	25+
Percentage (%) : Percentage of men reporting using a condom the last time they had anal sex with a male partner			
Numerator : Number of men who have sex with men who reported using a condom the last time they had anal sex			
Denominator : Number of men who have sex with men who reported having had anal sex with a male partner in the past six months			

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

3.6C Condom use among people who inject drugs

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs reporting using a condom the last time they had sexual intercourse						
Numerator : Number of people who inject drugs who reported using a condom the last time they had sex						
Denominator : Number of people who inject drugs who report having injected drugs and having had sexual intercourse in the past month						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
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Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
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3.6D Condom use among transgender people

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Transman	Transwoman	Other	<25	25+
Percentage (%) : Percentage of transgender people reporting using a condom during their most recent sexual intercourse or anal sex						
Numerator : Number of transgender people who reported using a condom in their last sexual intercourse or anal sex						
Denominator : Number of transgender people surveyed						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
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Disaggregated by sex

Area name	Transmen - Numerator	Transmen - Denominator	Transwomen - Numerator	Transwomen - Denominator	Transmen (<25) - Numerator	Transmen (<25) - Denominator	Transwomen (<25) - Numerator	Transwomen (<25) - Denominator
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3.7A Coverage of HIV prevention programmes among sex workers

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::
Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

I. Behavioural surveillance or other special surveys

Sample size - Number of Survey Respondents:

Table A. In the past three months, have you been given condoms and lubricant? (for example, through an outreach service, drop-in centre or sexual health clinic)

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers who answered "yes" to the question "In the past three months, have you been given condoms and lubricant? (for example, through an outreach service, drop-in centre or sexual health clinic)"						
Numerator : Number of sex workers who answered "yes"						
Denominator : Number of sex workers responding						

Table B. In the past three months, have you received counselling on condom use and safe sex? (for example, through an outreach service, drop-in centre or sexual health clinic)

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers who answered "yes" to the question "In the past three months, have you received counselling on condom use and safe sex? (for example, through an outreach service, drop-in centre or sexual health clinic)"						
Numerator : Number of sex workers who answered "yes"						
Denominator : Number of sex workers responding						

Table C. Have you been tested for sexually transmitted infections in the past three months?

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers who answered "yes" to the question "Have you been tested for sexually transmitted infections in the past three months?"						
Numerator : Number of sex workers who answered "yes"						
Denominator : Number of sex workers responding						

Table D. Percentage of sex workers who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources						
Numerator : Number of sex workers who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources						
Denominator : Number of sex workers responding						

II. Programme Data

	Data value
Number of sex workers reached with individual and/or small group-level HIV prevention interventions designed for the target population	
Number of condoms distributed to sex workers	

3.7.1 Number of service provision sites dedicated to sex workers

	Data value
Total number of service provision sites	
- Sites operated by the national programme (government)	
- Sites operated by the community (civil society or NGO)	
Number of administrative areas with service provision sites	
Total number of administrative areas in the country	

3.7B Coverage of HIV prevention programmes among men who have sex with men

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

I. Behavioural surveillance or other special surveys

Sample size - Number of Survey Respondents:

Table A. In the past three months, have you been given condoms and lubricant? (for example, through an outreach service, drop-in centre or sexual health clinic)

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men who answered "yes" to the question "In the past three months, have you been given condoms and lubricant? (for example, through an outreach service, drop-in centre or sexual health clinic)"			
Numerator : Number of men who have sex with men who answered "yes"			
Denominator : Number of men who have sex with men responding			

Table B. In the past three months, have you received counselling on condom use and safe sex? (for example, through an outreach service, drop-in centre or sexual health clinic)

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men who answered "yes" to the question "In the past three months, have you received counselling on condom use and safe sex? (for example, through an outreach service, drop-in centre or sexual health clinic)"			
Numerator : Number of men who have sex with men who answered "yes"			
Denominator : Number of men who have sex with men responding			

Table C. Have you been tested for sexually transmitted infections in the past three months?

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men who answered "yes" to the question "Have you been tested for sexually transmitted infections in the past three months?"			
Numerator : Number of men who have sex with men who answered "yes"			
Denominator : Number of men who have sex with men responding			

Table D. Percentage of men who have sex with men who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources			
Numerator : Number of men who have sex with men who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources			
Denominator : Number of men who have sex with men responding			

II. Programme Data

	Data value
Number of men who have sex with men reached with individual and/or small group-level HIV prevention interventions designed for the target population	
Number of condoms + lubricant distributed to men who have sex with men	

3.7.1 Number of service provision sites dedicated to men who have sex with men

	Data value
Total number of service provision sites	
- Sites operated by the national programme (government)	
- Sites operated by the community (civil society or NGO)	
Number of administrative areas with service provision sites	
Total number of administrative areas in the country	

3.7C Coverage of HIV prevention programmes among people who inject drugs

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

I. Behavioural surveillance or other special surveys

Sample size - Number of Survey Respondents:

Table A. In the past three months, have you been given condoms and lubricant? (for example, through an outreach service, drop-in centre or sexual health clinic)

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs who answered "yes" to the question "In the past three months, have you been given condoms and lubricant? (for example, through an outreach service, drop-in centre or sexual health clinic)"						
Numerator : Number of people who inject drugs who answered "yes"						
Denominator : Number of people who inject drugs responding						

Table B. In the past three months, have you received counselling on condom use and safe sex? (for example, through an outreach service, drop-in centre or sexual health clinic)

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs who answered "yes" to the question "In the past three months, have you received counselling on condom use and safe sex? (for example, through an outreach service, drop-in centre or sexual health clinic)"						
Numerator : Number of people who inject drugs who answered "yes"						
Denominator : Number of people who inject drugs responding						

Table C. Have you received new, clean needles or syringes in the past three months?

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs who answered "yes" to the question "Have you received new, clean needles or syringes in the past three months?"						
Numerator : Number of people who inject drugs who answered "yes"						
Denominator : Number of people who inject drugs responding						

Table D. Percentage of people who inject drugs who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources						
Numerator : Number of people who inject drugs who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources						
Denominator : Number of people who inject drugs responding						

II. Programme Data

	Data value
Number of people who inject drugs reached with individual and/or small group-level HIV prevention interventions designed for the target population	
Number of needles or syringes distributed to people who inject drugs	

3.7.1 Number of service provision sites dedicated to people who inject drugs

	All	OST	NSP
Total number of service provision sites			
- Sites operated by the national programme (government)			
- Sites operated by the community (civil society or NGO)			
Number of administrative areas with service provision sites			
Total number of administrative areas in the country			

3.7D Coverage of HIV prevention programmes among transgender people

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

I. Behavioural surveillance or other special surveys

Sample size - Number of Survey Respondents:

Table A. In the past three months, have you been given condoms and lubricant? (for example, through an outreach service, drop-in centre or sexual health clinic)

	All	Transman	Transwoman	Other	<25	25+
Percentage (%) : Percentage of transgender people who answered "yes" to the question "In the past three months, have you been given condoms and lubricant? (for example, through an outreach service, drop-in centre or sexual health clinic)"						
Numerator : Number of transgender people who answered "yes"						
Denominator : Number of transgender people responding						

Table B. In the past three months, have you received counselling on condom use and safe sex? (for example, through an outreach service, drop-in centre or sexual health clinic)

	All	Transman	Transwoman	Other	<25	25+
Percentage (%) : Percentage of transgender people who answered "yes" to the question "In the past three months, have you received counselling on condom use and safe sex? (for example, through an outreach service, drop-in centre or sexual health clinic)"						
Numerator : Number of transgender people who answered "yes"						
Denominator : Number of transgender people responding						

Table C. Have you been tested for sexually transmitted infections in the past three months?

	All	Transman	Transwoman	Other	<25	25+
Percentage (%) : Percentage of transgender people who answered "yes" to the question "Have you been tested for sexually transmitted infections in the past three months?"						
Numerator : Number of transgender people who answered "yes"						
Denominator : Number of transgender people responding						

Table D. Percentage of transgender people who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources

	All	Transman	Transwoman	Other	<25	25+
Percentage (%) : Percentage of transgender people who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources						
Numerator : Number of transgender people who report receiving at least two of the above-mentioned HIV prevention services from an NGO, health-care provider or other sources						
Denominator : Number of transgender people responding						

II. Programme Data

	Data value
Number of transgender people reached with individual and/or small group-level HIV prevention interventions designed for the target population	
Number of condoms + lubricant distributed to transgender people	

3.7.1 Number of service provision sites dedicated to transgender people

	Data value
Total number of service provision sites	
- Sites operated by the national programme (government)	
- Sites operated by the community (civil society or NGO)	
Number of administrative areas with service provision sites	
Total number of administrative areas in the country	

3.8 Safe injecting practices among people who inject drugs

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs reporting the use of sterile injecting equipment the last time they injected						
Numerator : Number of people who inject drugs who report using sterile injecting equipment the last time they injected drugs						
Denominator : Number of people who inject drugs who report injecting drugs in the past month						

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
Chişinău								

3.9 Needles and syringes distributed per person who injects drugs

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: National programme data

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Total
Rate : Number of needles and syringes distributed per person who injects drugs per year by needle and syringe programmes	78.656
Numerator : Number of needles and syringes distributed in the past 12 months by needle and syringe programmes	2902391
Denominator : Number of people who inject drugs in the country	36900

Sub-national data

Area type	Area name	Year of data collection	Number of needles distributed per person per year	Numerator	Denominator
Town/City	Chişinău				

3.10 Coverage of opioid substitution therapy

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: National programme data

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs receiving opioid substitution therapy	3.2					
Numerator : Number of people who inject drugs and are receiving opioid substitution therapy at a specified date	498					
Denominator : Number of opioid-dependent people who inject drugs in the country	15500					

Sub-national data

Total and disaggregated by age

Area type	Area name	Sample size	Percentage (%)	All - Numerator	All - Denominator	<25 - Numerator	<25 - Denominator	25+ - Numerator	25+ - Denominator
Town/City	Chişinău								

Disaggregated by sex

Area name	Males - Numerator	Males - Denominator	Females - Numerator	Females - Denominator	Males (<25) - Numerator	Males (<25) - Denominator	Females (<25) - Numerator	Females (<25) - Denominator
Chişinău								

3.11 Active syphilis among sex workers

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	All	Males	Females	Transgender
Percentage (%) : Percentage of sex workers with active syphilis				
Numerator : Number of sex workers who tested positive for active syphilis				
Denominator : Number of sex workers who were tested for active syphilis				

3.12 Active syphilis among men who have sex with men

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Data value
Percentage (%) : Percentage of men who have sex with men with active syphilis	
Numerator : Number of men who have sex with men testing positive for active syphilis	
Denominator : Number of men who have sex with men tested for active syphilis	

3.13 HIV prevention programmes in prisons

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Routine programme data

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Data value
Number of clean needles distributed to prisoners	207144
Number of prisoners receiving opioid substitution therapy	66
Number of condoms distributed to prisoners	51546
Number of prisoners receiving antiretroviral therapy	105
Number of prisoners tested for HIV	2276

People living with HIV among prisoners

	Data value
Percentage (%) : Percentage of people living with HIV among prisoners	1.72
Numerator : Number of people living with HIV among prisoners	131

Prisoners with hepatitis B only

	Data value
Percentage (%) : Percentage of prisoners with hepatitis B	1.53
Numerator : Number of prisoners with hepatitis B	117

Prisoners co-infected with HIV and hepatitis B virus

	Data value
Percentage (%) : Percentage of prisoners co-infected with HIV and hepatitis B virus	0.21
Numerator : Number of prisoners co-infected with HIV and hepatitis B virus	16

Prisoners with hepatitis C only

	Data value
Percentage (%) : Percentage of prisoners with hepatitis C	3.81
Numerator : Number of prisoners with hepatitis C	291

Prisoners co-infected with HIV and hepatitis C virus

	Data value
Percentage (%) : Percentage of prisoners co-infected with HIV and hepatitis C virus	0.72
Numerator : Number of prisoners co-infected with HIV and hepatitis C virus	55

Prisoners with TB or co-infected with HIV and TB

	Data value
Percentage (%) : Percentage of prisoners with TB or co-infected with HIV and TB	0.14
Numerator : Number of prisoners with TB or co-infected with HIV and TB	11

3.14 Viral hepatitis among key populations

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Hepatitis B and HIV coinfection

	People who inject drugs - Total	People who inject drugs - Males	People who inject drugs - Females	People who inject drugs - Transgender	People who inject drugs - <25	People who inject drugs - 25+	Sex workers	Men who have sex with men	Transgender people
Percentage (%) : Prevalence of hepatitis B coinfection with HIV among key populations									
Numerator : Number of people in a key population who test positive for hepatitis B surface antigen and who also test positive for HIV									
Denominator : Number of respondents tested for both HIV and hepatitis B									

Hepatitis C and HIV coinfection

Testing algorithm for hepatitis C screening:

	People who inject drugs - Total	People who inject drugs - Males	People who inject drugs - Females	People who inject drugs - Transgender	People who inject drugs - <25	People who inject drugs - 25+	Sex workers	Men who have sex with men	Transgender people
Percentage (%) : Prevalence of hepatitis C coinfection with HIV among key populations									
Numerator : Number of people in a key population who test positive for antibody to hepatitis C virus and who also test positive for HIV									
Denominator : Number of respondents tested for both HIV and hepatitis C									

3.15 People who received PrEP

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Antiretroviral Therapy Patient Registers

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Number of people who received PrEP at least once during the reporting period

	Total	Males	Females	Transgender	Gender unknown	Number of people who received PrEP for the first time in their lives during the reporting period
All	1	0	1	0	0	1
<15	0	0	0	0	0	0
15-19	0	0	0	0	0	0
20-24	0	0	0	0	0	0
25-49	1	0	1	0	0	1
50+	0	0	0	0	0	0
If disaggregations by specific age groups are not available, please provide the total number of people who received PrEP aged 15+	0	0	0	0	0	0
Age unknown	0	0	0	0	0	0
Number of people who received PrEP for the first time in their lives during the reporting period	1	0	1	0	0	

Disaggregated by key population

	Men who have sex with men	Sex workers	Transgender people	People who inject drugs	Prisoners
Number of people who received PrEP at least once during the reporting period	0	0	0	0	0

Sub-national data

Sub-national region	Total	Male	Female	Transgender	Gender unknown
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Alternatively, you may [download this template](#), fill in the columns, and upload using the "Add File" button.

City-specific data

City	Number of people who received PrEP at least once during the reporting period
Chişinău	

3.18 Condom use at last high-risk sex

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All (15-49)	Males (15-49)	Males (15-19)	Males (20-24)	Males (25-49)	Females (15-49)	Females (15-19)	Females (20-24)	Females (25-49)
Percentage (%) : Percent of respondents who say they used a condom the last time they had sex with a non-marital, non-cohabiting partner, of those who have had sex with such a partner in the last 12 months									
Numerator : Number of respondents who report using a condom the last time they had sex with a non-marital, non-cohabiting partner									
Denominator : Total number of respondents who report that they had sex with a non-marital, non-cohabiting partner in the last 12 months									

City-specific data

City	All (15-49) - Percentage (%)	All (15-49) - Numerator	All (15-49) - Denominator	Males (15-49) - Percentage (%)	Males (15-49) - Numerator	Males (15-49) - Denominator	Females (15-49) - Percentage (%)	Females (15-49) - Numerator	Females (15-49) - Denominator
Chişinău									

4.1 Discriminatory attitudes towards people living with HIV

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

Answered "No" to question 1 "Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?"

	All (15-49)	Males (15-49)	Males (15-19)	Males (20-24)	Males (25-49)	Females (15-49)	Females (15-19)	Females (20-24)	Females (25-49)
Percentage (%) : Percentage of respondents (aged 15-49 years) who respond "No" to question 1									
Numerator : Number of respondents (aged 15-49 years) who respond "No" to question 1									
Denominator : Number of all respondents aged 15-49 years who have heard of HIV									
Responded "Don't know", "Not Sure", or "It depends" : Number of all respondents aged 15-49 years who responded "don't know", "not sure", or "it depends" to question 1									

Data measurement tool/source for Question 2 (if different from the measurement source indicated above):

If data measurement tool/source for Question 2 is "Other", please specify:

Answered "No" to question 2 "Do you think children living with HIV should be able to attend school with children who are HIV negative?"

	All	Males (15-49)	Males (15-19)	Males (20-24)	Males (25-49)	Females (15-49)	Females (15-19)	Females (20-24)	Females (25-49)
Percentage (%) : Percentage of respondents (aged 15-49 years) who respond "No" to question 2									
Numerator : Number of respondents (aged 15-49 years) who respond "No" to question 2									
Denominator : Number of all respondents aged 15-49 years who have heard of HIV									
Responded "Don't know", "Not Sure", or "It depends" : Number of all respondents aged 15-49 years who responded "don't know", "not sure", or "it depends" to question 2									

Composite indicator: Answered "No" to to question 1, question 2 or both (please only complete this table if data for questions 1 and 2 are from the same source).

	All	Males (15-49)	Males (15-19)	Males (20-24)	Males (25-49)	Females (15-49)	Females (15-19)	Females (20-24)	Females (25-49)
Percentage (%) : Percentage of respondents (aged 15-49 years) who respond "No" to at least one of the two questions									
Numerator : Number of respondents (aged 15-49 years) who respond "No" to at least one of the two questions									
Denominator : Number of all respondents aged 15-49 years who have heard of HIV									

4.2A Avoidance of health care by sex workers because of stigma and discrimination

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

Avoidance of health care

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers who avoided seeking healthcare in the last 12 months						
Numerator : Number of sex workers who reported having avoided seeking healthcare in the last 12 months						
Denominator : Number of respondents						

Avoidance of HIV testing

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers who avoided seeking HIV testing in the last 12 months						
Numerator : Number of sex workers who reported having avoided seeking HIV testing in the last 12 months						
Denominator : Number of sex workers who reported not having tested for HIV in the last 12 months						

Avoidance of HIV medical care

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers living with HIV who avoided receiving HIV medical care in the last 12 months						
Numerator : Number of sex workers living with HIV who reported having avoided receiving HIV medical care in the last 12 months						
Denominator : Number of sex workers who reported living with HIV and never having received or having stopped receiving HIV medical care						
Denominator (2) : Number of sex workers who reported living with HIV						

Avoidance of HIV treatment

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of sex workers living with HIV who avoided seeking HIV treatment in the last 12 months						
Numerator : Number of sex workers living with HIV who reported having avoiding seeking HIV treatment in the last 12 months						
Denominator : Number of sex workers who reported living with HIV and never having taken or having stopped taking HIV treatment						
Denominator (2) : Number of sex workers who reported living with HIV						

City-specific data

City	Year of survey	Sample size	Percentage (%)	Numerator	Denominator	Type of health care avoided	If "Other", please specify
Chişinău							

4.2B Avoidance of health care by men who have sex with men because of stigma and discrimination

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

Avoidance of health care

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men who avoided seeking healthcare in the last 12 months			
Numerator : Number of men who have sex with men who reported having avoided seeking healthcare in the last 12 months			
Denominator : Number of respondents			

Avoidance of HIV testing

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men who avoided seeking HIV testing in the last 12 months.			
Numerator : Number of men who have sex with men who reported having avoided seeking HIV testing in the last 12 months			
Denominator : Number of men who have sex with men who reported not having tested for HIV in the last 12 months			

Avoidance of HIV medical care

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men living with HIV who avoided receiving HIV medical care in the last 12 months			
Numerator : Number of men who have sex with men living with HIV who reported having avoided receiving HIV medical care in the last 12 months			
Denominator : Number of men who have sex with men who reported living with HIV and never having received or having stopped receiving HIV medical care			
Denominator (2) : Number of men who have sex with men who reported living with HIV			

Avoidance of HIV treatment

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	<25	25+
Percentage (%) : Percentage of men who have sex with men living with HIV who avoided seeking HIV treatment in the last 12 months			
Numerator : Number of men who have sex with men living with HIV who reported having avoided seeking HIV treatment in the last 12 months			
Denominator : Number of men who have sex with men who reported living with HIV and never having taken or having stopped taking HIV treatment			
Denominator (2) : Number of men who have sex with men who reported living with HIV			

City-specific data

City	Year of survey	Sample size	Percentage (%)	Numerator	Denominator	Type of health care avoided	If "Other", please specify
Chişinău							

4.2C Avoidance of health care by people who inject drugs because of stigma and discrimination

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

Avoidance of health care

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs who avoided seeking healthcare in the last 12 months						
Numerator : Number of people who inject drugs who reported having avoided seeking healthcare in the last 12 months						
Denominator : Number of respondents						

Avoidance of HIV testing

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs who avoided seeking HIV testing in the last 12 months						
Numerator : Number of people who inject drugs who reported having avoided seeking HIV testing in the last 12 months						
Denominator : Number of people who inject drugs who reported not having tested for HIV in the last 12 months						

Avoidance of HIV medical care

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs living with HIV who avoided receiving HIV medical care in the last 12 months						
Numerator : Number of people who inject drugs living with HIV who reported having avoided HIV medical care in the last 12 months						
Denominator : Number of people who inject drugs who reported living with HIV and never having received or having stopped receiving HIV medical care						
Denominator (2) : Number of people who inject drugs who reported living with HIV						

Avoidance of HIV treatment

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	Males	Females	Transgender	<25	25+
Percentage (%) : Percentage of people who inject drugs living with HIV who avoided seeking HIV treatment in the last 12 months						
Numerator : Number of people who inject drugs living with HIV who reported having avoided seeking HIV treatment in the last 12 months						
Denominator : Number of people who inject drugs who reported living with HIV and never having taken or having stopped taking HIV treatment						
Denominator (2) : Number of people who inject drugs who reported living with HIV						

City-specific data

City	Year of survey	Sample size	Percentage (%)	Numerator	Denominator	Type of health care avoided	If "Other", please specify
Chişinău							

4.2D Avoidance of health care by transgender people because of stigma and discrimination

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

Avoidance of health care

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	<25	25+
Percentage (%) : Percentage of transgender people who avoided seeking healthcare in the last 12 months			
Numerator : Number of transgender people who reported having avoided seeking healthcare in the last 12 months			
Denominator : Number of respondents			

Avoidance of HIV testing

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	<25	25+
Percentage (%) : Percentage of transgender people who avoided seeking HIV testing in the last 12 months			
Numerator : Number of transgender people who reported having avoided seeking HIV testing in the last 12 months			
Denominator : Number of transgender people who reported not having tested for HIV in the last 12 months			

Avoidance of HIV medical care

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	<25	25+
Percentage (%) : Percentage of transgender people living with HIV who avoided receiving HIV medical care in the last 12 months			
Numerator : Number of transgender people living with HIV who reported having avoided receiving HIV medical care in the last 12 months			
Denominator : Number of transgender people who reported living with HIV and never having received or having stopped receiving HIV medical care			

Avoidance of HIV treatment

Reason for avoidance included in the survey question:

Timeframe included in the survey question:

	All	<25	25+
Percentage (%) : Percentage of transgender people living with HIV who avoided seeking HIV treatment in the last 12 months			
Numerator : Number of transgender people living with HIV who reported having avoided seeking HIV treatment in the last 12 months			
Denominator : Number of transgender people who reported living with HIV and never having taken or having stopped taking HIV treatment			

City-specific data

City	Year of survey	Sample size	Percentage (%)	Numerator	Denominator	Type of health care avoided	If "Other", please specify
Chişinău							

4.3 Prevalence of recent intimate partner violence

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

Prevalence of intimate partner violence

	Females (15-49)	Females (15-19)	Females (20-24)	Females (25-49)
Percentage (%) : Proportion of ever-married or partnered women 15-49 years old who experienced physical or sexual violence from a male intimate partner in the past 12 months				
Numerator : Women 15-49 years old who have or have ever had an intimate partner and report experiencing physical or sexual violence from at least one of these partners in the past 12 months				
Denominator : Total number of women 15-49 years old surveyed who currently have or have had an intimate partner				

Prevalence of intimate partner violence disaggregated by HIV status

	HIV+ Females	HIV- Females	Females with unknown HIV status	HIV+ Females (15-19)	HIV- Females (15-19)	Females with unknown HIV status (15-19)	HIV+ Females (20-24)	HIV- Females (20-24)	Females with unknown HIV status (20-24)	HIV+ Females (25-49)	HIV- Females (25-49)	Females with unknown HIV status (25-49)
Percentage (%) : Proportion of ever-married or partnered women 15-49 years old who experienced physical or sexual violence from a male intimate partner in the past 12 months												
Numerator : Women 15-49 years old who have or have ever had an intimate partner and report experiencing physical or sexual violence from at least one of these partners in the past 12 months												
Denominator : Total number of women 15-49 years old surveyed who currently have or have had an intimate partner												

4.4 Experience of HIV-related discrimination in health-care settings

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

Disaggregated by type of health service

	HIV-related healthcare services	Non-HIV-related healthcare services	Composite indicator - Any healthcare services
Percentage (%) : Percentage of people living with HIV who report experience of stigma and discrimination in the past 12 months			
Numerator : Number of people who responded yes to having experienced at least one form of stigma and discrimination in the past 12 months			
Denominator : Number of respondents			

Numerator - disaggregation by form of stigma and discrimination experienced

	HIV-related healthcare services	Non-HIV-related healthcare services	Composite indicator - Any healthcare services
Number of people who responded "Yes" to: 'Denial of care due to HIV status'			
Number of people who responded "Yes" to: 'Advised not to have sex because of HIV status'			
Number of people who responded "Yes" to: 'Talked badly or gossiped about because of HIV status'			
Number of people who responded "Yes" to: 'Verbal abuse because of HIV status'			
Number of people who responded "Yes" to: 'Physical abuse because of HIV status'			
Number of people who responded "Yes" to: 'Avoidance of physical contact because of HIV status'			
Number of people who responded "Yes" to: 'Telling others about HIV status without consent'			

Any healthcare services - disaggregated by gender, age and key population

	Males	Females	Transgender	15-19	20-24	25-49	Key populations (Respondent identifies with at least one key population)
Percentage (%) : Percentage of people living with HIV who report experience of stigma and discrimination in the past 12 months							
Numerator : Number of people who responded yes to having experienced at least one form of stigma and discrimination in the past 12 months							
Denominator : Number of respondents							

Any healthcare services - disaggregated by length of time living with HIV

	0-1 year	1-4 years	5-9 years	10-14 years	15+ years
Percentage (%) : Percentage of people living with HIV who report experience of stigma and discrimination in the past 12 months					
Numerator : Number of people who responded yes to having experienced at least one form of stigma and discrimination in the past 12 months					
Denominator : Number of respondents					

5.1 Young people: Knowledge about HIV prevention

is indicator/topic relevant?: No

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

Correct answer to all five questions

	All (15-24)	All Males (15-24)	Males (15-19)	Males (20-24)	All Females (15-24)	Females (15-19)	Females (20-24)
Percentage (%) : Percentage of respondents aged 15-24 years who gave the correct answer to all five questions							
Numerator : Number of respondents aged 15-24 years who gave the correct answer to all five questions							
Denominator : Number of all respondents aged 15-24							

Correct answer to question 1 "Can the risk of HIV transmission be reduced by having sex with only one uninfected partner who has no other partners?"

	All (15-24)	All Males (15-24)	Males (15-19)	Males (20-24)	All Females (15-24)	Females (15-19)	Females (20-24)
Percentage (%) : Percentage of respondents who gave a correct answer to question 1							
Numerator : Numerator Number of respondents/population who gave correct answer to question 1							
Denominator : Number of all respondents age 15-24							

Correct answer to question 2 "Can a person reduce the risk fo getting HIV by using a condom every time they have sex?"

	All (15-24)	All Males (15-24)	Males (15-19)	Males (20-24)	All Females (15-24)	Females (15-19)	Females (20-24)
Percentage (%) : Percentage of respondents who gave a correct answer to question 2							
Numerator : Number of respondents/population who gave correct answer to question 2							
Denominator : Number of all respondents age 15-24							

Correct answer to question 3 "Can a healthy-looking person have HIV" ?

	All (15-24)	All Males (15-24)	Males (15-19)	Males (20-24)	All Females (15-24)	Females (15-19)	Females (20-24)
Percentage (%) : Percentage of respondents who gave a correct answer to question 3							
Numerator : Number of respondents/population who gave correct answer to question 3							
Denominator : Number of all respondents age 15-24							

Correct answer to question 4 "Can a person get HIV from mosquito bites?" (or country specific question)

	All (15-24)	All Males (15-24)	Males (15-19)	Males (20-24)	All Females (15-24)	Females (15-19)	Females (20-24)
Percentage (%) : Percentage of respondents who gave a correct answer to question 4							
Numerator : Number of respondents/population who gave correct answer to question 4							
Denominator : Number of all respondents age 15-24							

Correct answer to question 5 "Can a person get HIV by sharing food with someone who is infected?" (or country specific question)

	All (15-24)	All Males (15-24)	Males (15-19)	Males (20-24)	All Females (15-24)	Females (15-19)	Females (20-24)
Percentage (%) : Percentage of respondents who gave a correct answer to question 5							
Numerator : Number of respondents/population who gave correct answer to question 5							
Denominator : Number of all respondents age 15-24							

5.2 Demand for family planning satisfied by modern methods

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Sample size - Number of Survey Respondents:

	All (15-49)	15-19	20-24	25-49
Percentage (%) : Percentage of women of reproductive age (15-49 years old) who have their demand for family planning satisfied with modern methods				
Numerator : Number of women 15-49 years old who are using modern contraceptive methods				
Denominator : Total number of women 15-49 years old with a demand for family planning				

10.1 Co-managing TB and HIV treatment

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Tuberculosis Patient Registers

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Total	Males	Females	<15	15+
Numerator : Number of HIV-positive new and relapse TB patients started on TB treatment during the reporting period who were already on antiretroviral therapy or started on antiretroviral therapy during TB treatment within the reporting year	168	116	52	0	168

Note: WHO calculates annual estimates of the number of incident TB cases in people living with HIV. The 2018 denominator estimates, based on data provided by countries on notification and antiretroviral therapy coverage, become available only in the second half of the reporting year and do not need to be provided at the time of reporting. The estimates for 2017 can be found at: <http://www.who.int/tb/country/data/download/en/>

City-specific data

City	Numerator
Chişinău	

10.2 People living with HIV with active TB disease

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Tuberculosis Patient Registers

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Data value
Percentage (%) : Total number of people living with HIV having active TB expressed as a percentage of those who are newly enrolled in HIV care (pre-antiretroviral therapy or antiretroviral therapy) during the reporting period	14.4
Numerator : Total number of people living with HIV newly enrolled in HIV care who have active TB disease during the reporting period	123
Denominator : Total number of people newly enrolled in HIV care during the reporting period (pre-antiretroviral therapy plus antiretroviral therapy) This denominator should be the same as the denominator of indicator 10.3 (if reporting among people newly enrolled in HIV care for indicator 10.3)	856

City-specific data

City	Percentage	Numerator	Denominator
Chişinău			

10.3 People living with HIV who started TB preventive therapy

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Antiretroviral Patient Registers

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Are data on people receiving preventive therapy who are NEWLY enrolled in HIV care available?: No

Newly enrolled in HIV care

	Data value
Percentage (%) : Number of patients started on treatment for latent TB infection, expressed as a percentage of the total number newly enrolled in HIV care during the reporting period	
Numerator : Total number of people living with HIV newly enrolled in HIV care who start treatment for latent TB infection during the reporting period	
Denominator : Total number of people newly enrolled in HIV care: that is, registered for pre-antiretroviral therapy or antiretroviral therapy during the reporting period This denominator should be the same as the denominator of indicator 10.2	

Are new data on people CURRENTLY enrolled in HIV care available?: Yes

Currently enrolled in HIV care

	Data value
Percentage (%) : Number of patients started on treatment for latent TB infection, expressed as a percentage of the total number currently enrolled in HIV care during the reporting period	10.5
Numerator : Total number of people living with HIV currently enrolled in HIV care who start treatment for latent TB infection during the reporting period	812
Denominator : Total number of people currently enrolled in HIV care: that is, registered for pre-antiretroviral therapy or antiretroviral therapy during the reporting period This value should be greater than the denominator for indicator 10.2. on people newly enrolled in care.	7745

City-specific data

City	Percentage (newly enrolled in care)	Numerator (newly enrolled in care)	Denominator (newly enrolled in care)	Percentage (currently enrolled in care)	Numerator (currently enrolled in care)	Denominator (currently enrolled in care)
Chişinău						

10.4 Men with urethral discharge

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Are the data representative of the entire country?:

If no, please describe:

	Total
Percentage (%) : Percentage of men reporting urethral discharge in the past 12 months	
Numerator : Number of men reported with urethral discharge during the reporting period	
Denominator : Number of men aged 15 and older	

10.5 Gonorrhoea among men

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: National case reporting

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Total
Rate : Rate of laboratory-diagnosed gonorrhoea among men in countries with laboratory capacity for diagnosis	0
Numerator : Number of men reported with laboratory-diagnosed gonorrhoea in the past 12 months	713
Denominator : Number of men 15 years and older	1600642

10.6 Hepatitis B testing

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Clinical and/or laboratory records

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Total	Males	Females	<15	15+	People who inject drugs
Percentage (%) : Proportion of people starting antiretroviral therapy who were tested for hepatitis B	74.9	75.7	73.8	76.9	74.8	78.1
Numerator : Number of people started on antiretroviral therapy who were tested for hepatitis B during the reporting period using hepatitis B surface antigen tests	789	446	343	10	779	89
Denominator : Number of people starting antiretroviral therapy during the reporting period	1054	589	465	13	1041	114

10.7 People coinfectd with HIV and HBV receiving combined treatment

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source:: The data will be available in July 2019

	Total	People who inject drugs
Percentage (%) : Proportion of people coinfectd with HIV and HBV receiving combined treatment		
Numerator : Number of people coinfectd with HIV and HBV who receive treatment with antiretroviral medicines effective against both HIV and HBV during the reporting period		
Denominator : Number of people diagnosed with HIV and HBV coinfection in HIV care during a reporting period (12 months)		

10.8 Hepatitis C testing

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Clinical and/or laboratory records

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

	Total	Males	Females	<15	15+	People who inject drugs
Percentage (%) : Proportion of people starting antiretroviral therapy who were tested for hepatitis C virus (HCV)	72.5	73.9	70.8	69.2	72.5	79.8
Numerator : Number of adults and children starting antiretroviral therapy who were tested for hepatitis C during the reporting period using the sequence of antiHCV antibody tests followed by HCV polymerase chain reaction (PCR) for those who are anti-HCV positive.	764	435	329	9	755	91
Denominator : Number of adults and children starting antiretroviral therapy during the reporting period	1054	589	465	13	1041	114

10.9 People coinfecting with HIV and HCV starting HCV treatment

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source:: The data regarding this indicator will be available in July 2019

	Total	People who inject drugs
Percentage (%) : Proportion of people coinfecting with HIV and HCV starting HCV treatment		
Numerator : Number of people diagnosed with HIV and HCV coinfection starting treatment for HCV during a specified time frame (such as 12 months)		
Denominator : Number of people diagnosed with HIV and HCV coinfection enrolled in HIV care during a specified time period (such as 12 months)		

10.10 Cervical cancer screening among women living with HIV

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): No

Data measurement tool / source:

Other measurement tool / source:

From date:

To date:

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Women living with HIV who report to ever have been screened for cervical cancer

	30-49	Residence: Urban	Residence: Rural
Percentage (%) : Proportion of women living with HIV 30-49 years old who report being screened for cervical cancer using any of the following methods: visual inspection with acetic acid or vinegar (VIA), Pap smear or human papillomavirus (HPV) test			
Numerator : Number of women living with HIV 30-49 years old who report ever having had a screening test for cervical cancer using any of these methods: VIA, pap smear and HPV test			
Denominator : All women respondents living with HIV 30–49 years old			

Women who tested positive for HIV among women who were screened for cervical cancer

	30-49	Residence: Urban	Residence: Rural
Percentage (%) : Proportion of women who tested positive for HIV among all women (aged 30–49 years) who were screened for cervical cancer using any of these methods: VIA, Pap smear and HPV test			
Number tested : Number of women who were tested for HIV among all women (30–49 years old) who were screened for cervical cancer			
Numerator : Number of women who tested positive for HIV among all women (30–49 years old) who were screened for cervical cancer			
Denominator : All women (30–49 years old) who were screened for cervical cancer using any of these methods: VIA, Pap smear and HPV test			

III National Commitments and Policy Instrument

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: NCPI

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Download this template: [NCPI Questionnaire \(PDF\)](#)

Describe the process used for NCPI data gathering and validation: NCPI was completed by the National Coordination Unit for HIV/AIDS National Program and shared with the technical group responsible for GAM reporting. The document was discussed at the technical group meeting and all controversial issues were solved and agreed at this meeting on 25 march 2019. NCPI was discussed with representatives of civil society and KAP members.

NCPI - PART A [to be completed by national authorities]

Name	Email	Organization	Role	Stakeholder Type	Comments
Daniela Demiscan	daniela.demiscan@msmps.gov.md	Ministry of Health, Labour and Social Protection	Head of the technical group	Ministry of Health	
Iurie Climasevcschii	iurie.climasevcschii@ms.md	NAP Coordination Unit	NAP Coordinator	Ministry of Health	
Igor Condrat	igor.condrat@ms.md	NAP Coordination Unit	M&E Coordinator	Ministry of Health	
Svetlana Popovici	svetlana.popovici@ms.md	NAP Coordination Unit	ART Coordinator	Ministry of Health	
Svetlana Plamadeala	PlamadealaS@unaids.org	UNAIDS	Country manager	UNAIDS	

NCPI - PART B [to be completed by civil society and other nongovernmental partners]

Name	Email	Organization	Role	Stakeholder Type	Comments
Cojocari Alina	alpoeverga1976@gmail.com	A.O. "Positive Initiative"	Chief of department on activities for PLWH	Civil society	
Liudmila Untura	luntura@yahoo.com	League PLWHA Moldova	Executive director	Civil society	
Ala Iatco	protineret@yahoo.com	A.O. TDV	Director	Civil society	
Vitalii Rabinciuc	puls.centre@gmail.com	Community Centre of Psychological Support for Drug Users "PULS"	Director	Civil society	
Veaceslav Mulear	veaceslav.mulear@gdm.md	Genderdoc-M	"LGBT Health" Program Coordinator	Civil society	
Tatiana Cotelnic-Hareata	tatiana.cotelnic@pas.md	PAS Center	Project Manager		

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

HIV testing

1. Which of the following HIV testing approaches are used in your country (please select all that apply):: Client-initiated testing and counselling, Provider-initiated testing and counselling, Routine antenatal testing, Community-based testing and counselling, Self-testing

If Other, please specify:

2. Has your country adapted the recommendations from the 2015 WHO Consolidated guidelines on HIV testing services in a national process on testing guidelines?: Yes, fully

3. Has your country adopted or included HIV self-testing as a national policy or plan?: Yes

3.1 If yes, is HIV self-testing implemented?: Yes, fully implemented

3.2 If no, is a national policy on HIV self-testing in development?:

3.2a If yes to Question 3.2, please indicate the year in which self-testing is planned to be included::

4. Has your country included assisted HIV partner notification in its national policy?: Yes

4.1 If no, does it have plans to include assisted HIV partner notification in its national policy in the future?:

4.1.a If yes to Question 4.1, please indicate the year in which assisted HIV partner notification is planned to be included?:

5. Does your country have a policy specifying that HIV testing will be provided?: Free to all

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

a) Is mandatory before marriage: No

b) Is mandatory to obtain a work or residence permit: No

c) Is mandatory for certain groups: No

c.i. If yes, please specify these groups:

7. Does your country have national policies and/or strategies on linking HIV testing and counselling and enrolment with care?: Yes

7.1 If yes, what do they include (please select all that apply)?: Peer support and patient navigation approaches

If Others, please specify:

Antiretroviral therapy

8. Has your country adapted the recommendations from the 2018 update to the WHO Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection in a national process?: Yes, completed

If Other, please provide a comment:

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

9. What is the recommended CD4 threshold for initiating antiretroviral therapy in adults and adolescents who are asymptomatic, as per Ministry of Health (MOH) guidelines or directive?: No threshold; treat all regardless of CD4 count

If Other, please specify:

9.1 What is the status of implementing treat all regardless of CD4 count?: Implemented countrywide (>95% of treatment sites)

If Other, please specify:

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

9.2a If yes, please indicate the year in which it is planned for treat all to be implemented::

10. Has your country adopted the WHO 2017 recommendation on rapid initiation of ART?: Yes, rapid initiation within 7 days of HIV diagnosis

If Other, please specify:

11. Does your country offer the possibility to start antiretroviral therapy on the same day as an HIV diagnosis?: Yes

12. Does your country use point-of-care CD4 technology?: No

13. What percentage (estimated) of primary health-care facilities in your country have access to any form of CD4 cell count for testing their patients, whether on-site or nearby by referral? (%):

14. Is nurse-initiated antiretroviral therapy allowed in your country for any of the following populations (please select all that apply)?: None of the above

15. Does your country have a national policy promoting community delivery (such as outside health facilities) of antiretroviral therapy?: No

15.1 If yes, please specify what approaches are used to support community delivery of antiretroviral therapy::

16. Is antiretroviral therapy provided in community settings (such as outside health-facilities) for people who are stable on antiretroviral therapy in your country?: No

16.1 If yes, is it implemented::

If Other, please specify:

17. Does your country have a national policy on prioritization of people with advanced HIV disease?: Yes

18. Does your country have a national policy on the frequency of clinic visits for people who are stable on antiretroviral therapy?: Yes

18.1 If yes, please specify the frequency of clinic visits in the national policy:: Every 3 months

19. Does your country have a national policy on how frequently people who are stable on antiretroviral therapy should pick-up antiretroviral medicine?: Yes

19.1 If yes, please specify the frequency of antiretroviral medicine pick-up included in the national policy: Every 3 months

20. Please provide the country's national criteria for (or definition of) lost to follow-up. For example, lost to follow-up is defined as a patient who has not received antiretroviral medicines within four weeks of their last missed drug collection appointment:: If a person is not coming in the period of 3 months after the planned visit.

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

21.1 If yes, how widely is it implemented?:

If Other, please specify:

22. Which of the following service provision modalities are included in the national policy on antiretroviral therapy for adults, adolescents and children (please select all that apply):: Maternal, newborn and child health service providers provide antiretroviral therapy in maternal, newborn and child health (MNCH) clinics, Patient support

If Other, please specify:

Antiretroviral therapy regimens

Adults and adolescents

23. Are TDF/3TC or (FTC)/EFV the preferred first-line antiretroviral medicine combinations for treatment initiation in national guidelines, among:

a) Adults and adolescents: Yes

If Other, please specify:

b) Pregnant women: Yes

If Other, please specify:

24. Is dolutegravir (DTG) being introduced as the first-line antiretroviral regimen in your country?: Yes, DTG has been introduced in national guidelines and procurement has been initiated

25. Does your country use fixed-dose (FDC) antiretroviral therapy combinations as the preferred first-line therapy (please select all that apply):: Yes, 3 drugs fixed-dose combination taken once a day

If Other, please specify:

26. Is AZT/3TC (or FTC)/ATV/r (or LPV/r) the preferred second-line antiretroviral combination for adults and adolescents with HIV in the national guidelines?: Yes

If Other, please specify:

Children

27. What is the preferred nucleoside reverse transcriptase inhibitor (NRTI) for treatment initiation in children aged less than three with HIV?: Abacavir (ABC)

If Other, please specify:

28. Are LPV/r based-regimens the preferred treatment option for all infants and children <36 months with HIV (irrespective of NNRTI exposure) in the national guidelines?: Yes, for all

29. Is efavirenz (EFV) recommended as the preferred NNRTI for treatment initiation in children aged three 3 years and older?: Other

If Other, please specify: until the age of 6 years - LPV/r is recommended

30. What is the recommended NRTI backbone for treatment initiation in children aged 3-10 years in the national guidelines?: ABC + 3TC (or FTC)

If Other, please specify:

31. What is the recommended NRTI backbone for treatment initiation in adolescents >35kg and at least 10 years of age in the national guidelines?: ABC + 3TC (or FTC)

If Other, please specify:

Viral load

32. Please identify from national treatment guidelines the measured threshold at which viral load suppression in an individual is defined as a success:: <1000 copies/ml

If Other, please specify:

33. Does your country have a current national policy on routine viral load testing for monitoring antiretroviral therapy, and to what extent is it implemented?

a) For adults and adolescents: Yes, fully implemented

b) For children: Yes, fully implemented

33.1 If your country has a national policy on routine viral load testing, what is the frequency of testing for viral suppression recommended in national policy?: Other

If Other, please specify: 2 times per year

34. Where is viral load testing currently available in your country?: Available at specialized centres only

If Other, please specify:

34.1 If viral load testing is available at antiretroviral therapy facilities in your country, please provide an estimate of the percentage of antiretroviral therapy facilities that have it available: (%)

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

36. Are dried blood spot specimens recommended in the national policy for viral load testing?: No

If Other, please specify:

36.1 If yes, what is the level of implementation?:

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

37.1 If yes, is it implemented:: Countrywide

HIV drug resistance and toxicity monitoring

38. Does your country have a national plan to monitor HIV drug resistance?: No

38a. If yes, please specify the years covered by the plan::

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

a) Pre-treatment drug resistance (PDR) surveys: No, and there is no plan to implement the PDR survey this year

a.i. If yes, please specify:

	Data value
Year the last PDR survey started:	

b) Acquired drug resistance surveys among adults: No, and there is no plan to implement the survey this year

b.i. If yes, please specify:

	Data value
Year the last survey started:	

c) Acquired drug resistance surveys among children: No, and there is no plan to implement the survey this year

c.i. If yes, please specify:

	Data value
Year the last survey started	

d) HIV drug resistance among infants (<18 months) using early infant diagnosis: No, and there is no plan to implement the infant survey this year

d.i. If yes, please specify:

	Data value
Year the last infant survey started:	

e) Survey or routine monitoring of clinic performance using early warning indicators for HIV drug resistance: Yes

e.i. If yes, please specify:

	Data value
Year it was last monitored:	2018
Number of clinics monitored:	8

e.ii. The early warning indicators for HIV drug resistance were collected through:: Routine patient monitoring systems

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

40.1 If yes, what approaches are used (please select all that apply):: Routine toxicity monitoring as part of the national M&E system

41. Have toxicity monitoring approaches been introduced to monitor adverse drug reactions to dolutegravir use?: Yes

41.1 If yes, what approaches are used (please select all that apply)?: Routine toxicity monitoring as part of the national M&E system

41.2 If yes to Question 41.1, has training of health-care workers on the management, capture and reporting of adverse drug reactions related to dolutegravir been implemented?: No

Adherence and retention

42. Does your country have national policies and/or strategies on adherence support?: Yes

42.1 If yes, do they include (please select all that apply):: Peer counsellors,Behavioural skills training/medication adherence training,Fixed-dose combinations and once-daily regimens,Case management,Peer navigation

If Other, please specify:

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

43.1 If yes, do they include (please select all that apply):: Community-based interventions,Adherence clubs and peer support

If Other, please specify:

44. Are any of the following adherence support services available in your country (please select all that apply):: Peer counsellors,Behavioural skills training/medication adherence training,Fixed-dose combinations and once-daily regimens,Case management,Peer navigation

If Other, please specify:

45. Are treatment literacy programmes available in your country to people living with HIV, including information on side effects, drug resistance, etc.?: No

TRIPS

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

	Are they incorporated in national legislation on industrial/intellectual property?	If yes, what is the most recent year in which it was used?	If yes, for which commodity have they been used?
Exhaustion of rights (parallel importation) (Article 6)	No		
Patentable subject matter (Article 27)	No		
Research and experimental use exception (Article 30)	No		
Regulatory (bolar) exception (Article 30)	No		
Compulsory licensing (Article 31)	Yes		
Public, non-commercial use (government use) (Article 31)	No		
Scope of pharmaceutical test data protection (Article 39.3)	No		
Competition law (Article 40)	Yes		
Transition periods (Articles 65.2; 65.4; and 66.1)	No		

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

Prevention of mother-to-child transmission of HIV

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

47.1 If yes, please select the period(s) when retesting is done (please select all that apply)::

48. Does your country have a national plan for the elimination of mother-to-child transmission (MTCT) of HIV:: Yes

48.1 If yes, please specify:

	Data value
Target(s) for the mother-to-child transmission rate	<2%
Year	2020

	Data value
Elimination target(s) (such as the number of cases/population)	<4
Year	4040

49. What is the current nationally recommended regimen for preventing the mother-to-child-transmission of HIV, in accordance with Ministry of Health guidelines or directives:: Treat all pregnant women and/or breastfeeding women for life

If Other, please specify regimen:

49.1 If your country is applying a treat all policy for pregnant and breastfeeding women living with HIV, how is it being implemented?: Implemented countrywide (>95% of MCH sites)

If Other, please specify:

50. What is the current nationally recommended first-line antiretroviral therapy regimen for pregnant and breastfeeding women living with HIV:: TDF/3TC(FTC)/EFV

If Other, please specify:

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

a) Please specify the infant prophylaxis regimen: AZT

b) Recommended duration of the regimen: 28 days

52. Does your country have a national recommendation on infant feeding for HIV-exposed infants:: Yes, replacement feeding

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

If Yes, please specify the duration in months:

53. Is food and nutrition support in your country integrated within PMTCT programmes?: Implemented countrywide (>95% of maternal and child health sites)

If Other, please specify:

54. Does your country have a national strategy on interventions at delivery for women living with HIV who have not previously been tested for HIV?: Yes, fully implemented

55. Is vertical transmission of HIV criminalized in your country?: No

Elimination of mother-to-child transmission of syphilis

56. Does your country have a national plan for the elimination of mother-to-child transmission of syphilis:: Yes, integrated with HIV or other elimination initiative(s)

57. Does your country have a national policy for routinely screening pregnant women for syphilis:: Yes

57.1 If yes, what tests are used:: Laboratory-based non-treponemal (such as RPR/VDRL)

Early infant diagnosis

58. At what age do your national guidelines recommend that infants be tested for HIV (please select all that apply)?: At birth,4-6 weeks

59. In addition to PMTCT settings, do any of the following sites in your country carry out HIV testing of children (please select all that apply)?:

If Other, please specify:

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

61. Are HIV-exposed infants tested for HIV antibodies at nine months in your country?: No

62. Is an HIV antibody test at 18 months of age or final diagnosis HIV antibody test at three months after breastfeeding ends being implemented in your country?: No

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

63.1 If yes, is it implemented:: Implemented countrywide (>95% of sites)

If Other, please specify:

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

64. How many health facilities in your country are providing services for preventing mother-to-child transmission (PMTCT) in the country?: 8

64.1 How many of the health facilities providing PMTCT services have community accountability mechanisms* in place?: 8

65. Are there targeted interventions that address any of the following human rights considerations as part of PMTCT programmes (please select all that apply):: Voluntary and informed consent as sole basis for testing and/or treatment for HIV, Voluntary and informed consent as sole basis for abortion, contraception and/or sterilization of women living with HIV, Confidentiality and privacy

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

66.1 If yes:

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

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

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

d) Was analysis by community and civil society provided in a systematic manner?: No

e) Was analysis provided by community and civil society documented and disseminated following the meeting?: No

f) Do women living with HIV in your country participate* in developing national policies, guidelines and strategies relating to PMTCT?: Yes

Child antiretroviral therapy

67. Do the national guidelines recommend treating all infants and children living with HIV irrespective of symptoms?: Treat all, regardless of age

If Other, please specify:

67.1 What is the status of implementing the treat all policy regardless of age in your country?: Implemented countrywide (>95% of treatment sites)

If Other, please specify:

68. When is a child who initiated antiretroviral therapy considered lost to follow-up in your country?: Has not been seen for HIV care or pharmacy pick up in 3 months

69. Does your country have a strategy or plan to ensure that adolescents born with HIV are not lost to follow-up as they transition into adult HIV care?: No

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

71. Are growth monitoring and nutrition programmes for children integrated with HIV testing and treatment in your country?: Not implemented in practice

If Other, please specify:

A.3 Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

Laws

72. Are transgender people criminalized and/or prosecuted in your country?: Neither criminalized nor prosecuted

73. Is cross-dressing criminalized in your country?: No

74. Is sex work criminalized in your country (select all that apply)?: Other punitive and/or administrative regulation of sex work

75. Does your country have laws criminalizing same-sex sexual acts?: No specific legislation

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

76.1 If yes, what is the level of application?:

77. Is drug use or possession for personal use an offence in your country (please select all that apply)?: Drug use or consumption is specified as a non-criminal offence, Possession of drugs for personal use is specified as a non-criminal offence

78. Does your country apply compulsory detention for people who use drugs?: No

79. Apart from criminalization, does your country have other punitive laws affecting lesbian, gay, bisexual, transgender and intersex (LGBTI) people?: Yes, morality laws or religious norms that limit lesbian, gay, bisexual, transgender and intersex freedom of expression and association

If "Yes, others", please specify:

Legal protections for key populations

80. Does your country have any of the following legal protections for transgender people (please select all that apply)?: Other non-discrimination provisions specifying gender diversity

81. Does your country have any of the following legal protections for sex workers (please select all that apply)?: No

82. Does your country have any laws or other provisions specifying protections based on grounds of sexual orientation (please select all that apply): : Other non-discrimination provisions specifying sexual orientation

83. Does your country have any specific antidiscrimination laws* or other provisions that apply to people who use drugs?: No

84. Is there explicit supportive reference to harm reduction in national policies?: Yes

84.1 If yes, do policies address the specific needs of women who inject drugs?: No

HIV prevention for sex workers

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

85.1 If yes, does the national strategy include (please select all that apply):: Community empowerment and capacity building for sex worker organizations, Community-based outreach and services for sex workers and their clients, Distribution of condoms for sex workers and their clients, Actions to address gender based violence, Actions to reduce stigma and discrimination in the health setting

85.2 Are there national standard operating procedures (SOPs) or detailed national implementation guidelines for organizations implementing HIV prevention programmes for sex workers?: Yes, national SOPs apply for all organizations

86. Has your country set national HIV prevention targets for sex workers and their clients for 2020?: Yes

86.1 If yes, what are the national prevention targets for sex workers and their clients for 2020?

a) Annual number of new HIV infections among sex workers and their clients:

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

	Data value
Sex workers	7200
Clients	

HIV prevention for men who have sex with men

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

87.1 If yes, does the national strategy include for gay men and other men who have sex with men (please select all that apply)?: Community empowerment and capacity-building for organizations of men who have sex with men,Community-based outreach and services,Distribution of condoms and condom-compatible lubricants,Sexually transmitted infection (STI) prevention, screening and treatment services,Psychosocial counselling and/or mental health services,Actions to reduce stigma and discrimination

87.2 Are there national standard operating procedures (SOPs) or detailed national implementation guidelines for organizations implementing HIV prevention programmes for gay men and other men who have sex with men?: Yes, national SOPs apply for all organizations

88. Has your country set national prevention targets for gay men and other men who have sex with men for 2020?: Yes

88.1 If yes, what are the national prevention targets for 2020 for gay men and other men who have sex with men?

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

b) Percentage of gay men and other men who have sex with men reached by prevention programmes: 5427

HIV prevention for people who inject drugs

89. Do national policies exclude people who are currently using drugs from receiving antiretroviral therapy?: No

90. Are needle and syringe programmes operational in your country?: Yes

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

92. Are opioid substitution therapy (OST) programmes operational in your country?: Yes

93. Are drug dependence treatment interventions, other than opioid substitution therapy, implemented in the country?: No

93.1 If yes, are they for::

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

95. Do safe injection spaces/rooms exist?: No

95.1 If yes, please specify:

	Data value
Number of spaces/rooms	
Number of enrollees	

HIV prevention services for prisoners

96. Are needle and syringe programmes operational in prisons in your country?: Yes

97. Are opioid substitution therapy (OST) programmes operational in prisons in your country?: Yes

98. Are condoms and lubricants available to prisoners in your country?: Yes

99. Are HIV tests in prisons in your country:

a) Carried out with the informed consent of prisoners?: Yes

b) Systematically offered at entry and/or exit?: Yes

c) Free of charge?: Yes

d) Confidential?: Yes

e) Available at any time during detention?: Yes

f) Accompanied by relevant and accessible information?: Yes

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

h) Equally accessible to all prisoners?: Yes

h.1 If no, which prisoners do not have equal access?:

100. Is antiretroviral therapy accessible to all prisoners living with HIV in your country?: Yes

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

101. Does your country have a national prevention strategy to reduce new HIV infections among adolescent girls, young women and their male partners in communities with high HIV incidence?: Not applicable

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

102. Has your country set national HIV prevention targets for adolescent girls, young women and their male partners in communities with high HIV incidence?: No

102.1 If yes, what are the national prevention targets for adolescent girls and young women and their male partners for 2020?

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

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

	Data value
Young women (aged 15-29 years; please specify percentage):	
Male partners (aged 20-34 years; please specify percentage):	

Participation of key populations in the national response

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

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

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

106. Do transgender people participate* in developing national policies, guidelines and strategies relating to their health in your country?: No

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

Services for people affected by humanitarian emergencies

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

- a) HIV counselling and testing: Not applicable
- b) Preventing mother-to-child transmission: Not applicable
- c) HIV treatment: Not applicable
- d) TB screening and treatment: Not applicable
- e) Preventing and treating sexually transmitted infections: Not applicable
- f) Services for key populations: Not applicable
- g) Services for survivors of sexual and gender-based violence*: Not applicable
- h) Food and nutrition support: Not applicable

Pre-exposure prophylaxis (PrEP)

109. Has the WHO recommendation on oral PrEP been adopted in your country's national guidelines?: Yes, PrEP guidelines have been developed and are being implemented

109.1 If the WHO recommendation on oral PrEP has not yet been adopted in the national guidelines, is there a plan to adopt a PrEP recommendation in the future?:

109.1a If yes, please indicate the year when adoption of the PrEP recommendations is planned::

If Other, please specify:

109.2 If national PrEP guidelines have been developed, please specify for which populations PrEP is provided as per the guidelines:: Gay men and other men who have sex with men, Sex workers, People who inject drugs, Transgender people, Serodiscordant couples

If Other, please specify:

109.3 If national PrEP guidelines have been developed, is a training programme on PrEP provided to health-care personnel?: Yes

109.4 If national PrEP guidelines have not been developed, indicate the applicable reasons (please select all that apply)::

If Other, please specify:

109.5 Is PrEP available through any of the following in your country (please select all that apply):: Public facilities

If Other, please specify:

***Questions 110 - 112 are on Voluntary Medical Male Circumcision (VMMC) and are available on a separate page. These questions are only asked from 16 countries with high HIV prevalence, low levels of male circumcision and generalized heterosexual epidemics: Botswana, Ethiopia, Eswatini, Central African Republic, Kenya, Lesotho, Malawi, Mozambique, Namibia, Rwanda, South Africa, South Sudan, Uganda, United Republic of Tanzania, Zambia and Zimbabwe.**

Condoms

113. Does your country have a strategy or plan related to condoms?: Yes

113.1 If yes, does the national condom strategy or plan explicitly address the needs of and targeted condom programming for the following populations (please select all that apply):: People living with HIV, Sex workers (male and female) , Men who have sex with men , People who inject drugs , Young people (15-24 years old) , People with sexually transmitted infections (STI) , Prisoners

113.2 If yes, does the national condom strategy or plan include (please select all that apply):: Free distribution to key populations, Condom distribution in (secondary) schools

114. Have the national needs for condoms been estimated?: Yes

114.1 If yes, what is the estimated number of condoms needed?: 22529880

114.2 If yes, for what year is the condom needs estimate?: 2017

114.3 If yes, what method was used to estimate the number of condoms needed?: Demand-based (based on past condom usage rates, such as using the GOALS model)

115. Can any individuals be prosecuted or punished for carrying condoms in your country?: No

116. Are there age restrictions for accessing condoms in your country?: No

117. Are there restrictions on distributing condoms in public places in your country?: No

If Yes, please specify:

118. Is there a policy or guidance for provider-initiated condom promotion and distribution in place (i.e., for a health service provider actively offering condom counselling and a condom supply)?: Yes, for all people of reproductive age visiting a health facility, Yes, for all key populations and other people at higher risk of HIV infection, Yes, for all young people who are sexually active, Yes, for all people accessing hormonal or other methods of contraception, Yes, for all serodiscordant couples

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

a) National stock-outs:: No

b) Local stock-outs: No

120. How many condoms and lubricants were distributed (that left the central or regional warehouses for onward distribution) in the previous calendar year by type of provider?

a) Male condoms:

	Data value
Total	
Public	
Private	
NGOs	

b) Female condoms:

	Data value
Total	
Public	
Private	
NGOs	

c) Lubricants:

	Data value
Total	
Public	
Private	
NGOs	

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

Violence

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

122. Does your country have specific legislation on domestic violence*?: Yes

122.1 If yes, does this legislation cover (please select all that apply):: Physical violence, Sexual violence, Psychological violence, Emotional violence, Economic violence, Explicit criminalization of marital

rape,Protection of former spouses,Protection of unmarried intimate partners

123. Have any of the following provisions related to domestic violence* been implemented in your country (please select all that apply)?: Court injunctions for the safety and security of survivors,Protection services for survivors of domestic violence, such as legal services or shelters,Services for the person perpetrating violence

If Other, please specify:

124. Does your country have criminal penalties specifically for domestic violence*?: Yes

124.1 If yes, have there been any successful prosecutions in the past two years?: Yes

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

125. Does your country have any of the following to protect key populations and people living with HIV from violence (please select all that apply)?: General criminal laws prohibiting violence,Programmes to address intimate partner violence*,Interventions to address police abuse,Interventions to address torture and ill-treatment in prisons

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

a) First-line support or what is known as psychological first aid: Yes

b) Emergency contraception for women who seek services: Yes

c) Safe abortion if a woman becomes pregnant as a result of rape in accordance with national law: Yes

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

Stigma and discrimination

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

128. Does your country have interventions targeting health care workers to build their human rights competencies, to address stigma and discrimination and gender-based violence?: Yes, at scale*

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

Parental and spousal consent for accessing services

130. Does your country have laws requiring parental/guardian consent for adolescents to access contraceptives, including condoms?: No

130.1 If yes, is there a process by which adolescents can be deemed mature, allowing them to access contraceptives, including condoms, without parental/guardian consent?:

131. Does your country have laws requiring parental/guardian consent for adolescents to access HIV testing and receive the results?: Yes, for adolescents younger than 18 years

131.1 If yes, is there a process by which adolescents can be deemed mature, allowing them to access HIV testing and receive the results without parental/guardian consent?: No

132. Does your country have laws requiring parental/guardian consent for adolescents to access HIV treatment?: Yes, for adolescents younger than 18 years

132.1 If yes, is there a process by which adolescents can be deemed mature, allowing them to access HIV treatment without parental/guardian consent?: No

133. Does your country have laws requiring spousal consent for married women to access any sexual or reproductive health services?: No

134. Does your country have laws requiring spousal consent for married women to access HIV testing?: No

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

135. Does your country have education policies that guide the delivery of life skills-based HIV and sexuality education*, according to international standards*, in:

a) Primary school: No

a.i. If yes, what percentage of primary schools have fully implemented these policies?:

b) Secondary school: Yes

b.i. If yes, what percentage of secondary schools have fully implemented these policies?: 51-75%

c) Teacher training: Yes

136. Do young people in your country (age 15-24 years old) participate* in developing national policies, guidelines and strategies relating to their health in your country?: No

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

	Does it exist? _____	Do young people participate in this space?
--	----------------------	--

If Other, please specify:

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

137. Does the country have an approved social protection* strategy, policy or framework?: No

137.1 If yes:

a) Does it refer to HIV?:

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

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

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

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

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

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

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

138. Are representatives of the National AIDS Programme or equivalent included in any social protection* coordination mechanism or platform?: There is a social protection coordination mechanism or platform and it includes representatives of the National AIDS Programme or equivalent

139. Are any cash transfer programmes* for young women aged 15-24 years being implemented in the country?: No

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

140. Are there any of the following safeguards in laws, regulations and policies that provide for the operation of civil society organizations (CSOs) or community-based organizations (CBOs) in your country (please select all that apply)?: Registration of HIV CSOs is possible,Registration of CSOs/CBOs working with key populations is possible,HIV services can be provided by CSOs/CBOs,Services to key populations can be provided by CSOs/CBOs,Reporting requirements for CSOs/CBOs delivering HIV services are streamlined

If Other, please specify:

141. Are there laws, policies or regulations that enable access to funding for CSOs/CBOs?: Social contracting or other mechanisms allowing for funding of service delivery by communities from domestic funding

If Other, please specify:

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

violations of human rights

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

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

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

a) For police and other law enforcement personnel: Yes, at scale at the national level

b) For members of the judiciary: Yes, at scale at the national level

c) For elected officials (lawmakers/parliamentarians): Yes, at a small scale

d) For health-care workers: Yes, at scale at the national level

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

a) For police and other law enforcement personnel: Yes, at scale at the national level

b) For members of the judiciary: Yes, at scale at the national level

c) For elected officials (lawmakers/parliamentarians): Yes, at a small scale

d) For health-care workers: Yes, at scale at the national level

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

146. Does your country have laws protecting against discrimination on the basis of HIV status?: Yes, constitutional or legislative protections that protect against HIV under another status (such as health, disability or "other status")

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

If Yes, please describe: Anti discrimination committee and OMBUDSMAN

148. Does your country have any of the following accountability mechanisms in relation to discrimination and violations of human rights in health-care settings?: Complaints procedure, Mechanisms of redress ,Procedures or systems to protect and respect patient privacy or confidentiality

149. Does your country have any the following human rights monitoring and enforcement mechanisms?

a) Existence of independent functional national institutions for the promotion and protection of human rights, including human rights commissions, law reform commissions, watchdogs, and ombudspersons which consider

HIV-related issues within their work: Yes

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

150. Does your country have mechanisms in place for accessing affordable legal services (please select all that apply)?: No

If "Yes, other", please describe:

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

151. To what extent are health facilities delivering HIV services integrated with other health services in your country?

- a) HIV counselling and testing with sexual and reproductive health: Fully integrated in all health facilities**
- b) HIV treatment and care with sexual and reproductive health: Integrated in some health facilities**
- c) HIV counselling and testing integrated in TB services: Fully integrated in all health facilities**
- d) TB screening in HIV services: Fully integrated in all health facilities**
- e) Antiretroviral therapy and TB treatment: Integrated in some health facilities**
- f) HIV and hepatitis C treatment: Delivered separately**
- g) HIV counselling and testing and chronic non-communicable diseases: Fully integrated in all health facilities**
- h) Antiretroviral therapy and chronic non-communicable diseases: Delivered separately**
- i) HIV counselling and testing and general outpatient care: Fully integrated in all health facilities**
- j) Antiretroviral therapy and general outpatient care: Delivered separately**
- k) Violence screening and mitigation integrated in HIV services: Delivered separately**
- l) HIV testing and counselling integrated in cervical cancer screening and treatment services: Integrated in some health facilities**
- m) Cervical cancer screening integrated in HIV services: Delivered separately**
- n) PMTCT with antenatal care/maternal and child health: Delivered separately**
- o) HIV treatment and care with nutrition support: Delivered separately**

p) HIV testing with child health services (including growth monitoring, nutrition and immunization): Fully integrated in all health facilities

q) HIV treatment and care with child health services (including growth monitoring, nutrition and immunization): Delivered separately

r) HIV and harm reduction services: Delivered separately

152. Is cervical cancer screening and treatment for women living with HIV recommended in the following?

a. The national strategy, policy, plan or guidelines for cancer, cervical cancer or the broader response to non-communicable diseases (NCDs): Yes

b. The national strategic plan governing the AIDS response: No

c. National HIV-treatment guidelines: Yes

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

If Other, please specify:

Sexually transmitted infections (STIs)

154. Does your country have national STI treatment guidelines or recommendations?: Yes

154.1 If yes, in what year were they last updated?: 2015

155. Does your country have a national strategy or action plan for the prevention and control of STIs?: Yes

156. Is gonococcal antimicrobial-resistance monitoring conducted in the country?: No

157. Does the national definition for congenital syphilis include stillbirths?: Yes

Strategy

158. Does your country have a national strategy or policy that guides the AIDS response?: Yes, a stand-alone AIDS strategy or policy

If Other, please specify:

158.1 If yes, has the national HIV strategy or policy been reviewed in the past two years?: No

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

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

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

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

Monitoring and evaluation

159. Does your country have a national monitoring and evaluation plan or strategy for HIV?: Yes, a stand-alone HIV monitoring and evaluation strategy or plan

If Other, please specify:

159.1 If yes, has it been updated in the past two years?: No

159.2 If yes, does it integrate gender-sensitive indicators*?: Yes

Health Information Systems

160. Does your country routinely collect data on HIV service delivery data that are included in a health information system?: Multiple unharmonized or parallel information systems exist that various entities manage and operate separately

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

161.1 If “Yes, both” above, roughly what percentage of the following are currently captured within national electronic health information system reporting?

	Data value
Health facilities delivering HIV services	
National HIV treatment cohort (i.e., all patients on antiretroviral therapy)	

161.2 If a health information system exists, are patient-level viral load testing results routinely available within the health information system?:

161.3 Are treatment cascade data included in the health information system at the district level?:

Surveillance

162. Does the country carry out sentinel surveillance in the following special populations?

	Sentinel surveillance conducted	How often is it conducted (in years)?	In what year was the most recent survey conducted?	In what number of sites was surveillance conducted?
Sex workers	Yes	3	2016-2017	2
Men who have sex with men	Yes	3	2016-2017	2
People who inject drugs	Yes	3	2016-2017	4
Transgender people	No			
In prisons and other closed settings	Yes	3	2016-2017	1
Other	No			

If Other, please specify:

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

Patient monitoring systems

164. Has the country updated the patient monitoring system indicators and tools using the 2017 WHO Consolidated guidelines on person-centered HIV patient monitoring and case surveillance guidelines?: No

Unique identification codes for patients

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

a) For treatment services: Yes

b) For testing services: Yes

c) For HIV prevention services designed for any key population group to track combination prevention uptake (i.e., linking outreach to condoms distribution and/or needle and syringe programmes or other relevant services): Yes

c.i. If yes, for which key population(s) (please select all that apply)?: Gay men and other men who have sex with men, Sex workers, Transgender persons, People who inject drugs

If Other, please specify:

d) For laboratory services: Yes

165.1. If “yes” to 165 a or b:

a) Data are linked using a national unique person identifier (NUPI) such as a national identification number, national health care number, passport number or social security number: Yes

b) Data are linked using a national HIV-specific unique identifier: Yes

c) Data are linked using a combination of routinely collected personal identifying information, such as first name, last name and date of birth: Yes

d) Data are linked using a biometric (e.g., fingerprint or eye scan): No

e) Other methods to link patient information (please specify)::

Case reporting

166. Is HIV a nationally notifiable condition by law?: Yes

166.1 If yes to 166, does the country mandate that subsequent sentinel events for diagnosed HIV cases—such as date and result of first CD4 cell count, date of antiretroviral therapy initiation, and dates and results of first and follow-up viral load tests—be reported?: Yes

166.2 If yes to 166 and a health information system exists, is case-based surveillance included in the health information system?: No

Mortality

167. Does the country mandate that all deaths be reported to the civil registration and vital statistics system using a standard death report form that includes cause of death?: Yes

167.1 If “yes” to 167 and a case reporting system exists, can individual-level data on reported deaths be:

a) Linked to the country’s national HIV case reporting system?: Yes

b) Reported directly to the country’s national HIV case reporting system?: No

90-90-90

168. What is the source of data on the number of people who know their HIV status that is available for Indicator 1.1 for 2018?: HIV case surveillance

If Other, please specify:

168.1 If data are from HIV case surveillance, in what year did national case reporting begin?: Before 2008

169. What is the source of the number of people living with HIV who are on antiretroviral therapy for Indicator 1.2 for 2018?: Programme data, primarily reported in aggregate

If Other, please specify:

170. When was the most recent data quality review conducted to determine the accuracy of national-level numbers of people reported to be on treatment?: Never conducted or conducted more than 5 years ago

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

171. What is the source of the number of people living with HIV who are virally suppressed for Indicator 1.4 for 2018?: Data from case surveillance systems

If Other, please specify:

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

1. Does your country have any forms of mandatory (or compulsory) HIV testing that are provided for or carried out?: No

If Yes, please briefly explain when mandatory testing is carried out and the groups that are affected:

2. Where is viral load testing available in your country?: Available at specialized centres only

If Other, please specify:

3. Are any of the following retention support services available in your country (please select all that apply):: Community-based interventions, Adherence clubs and peer support

If Other, please specify:

4. Are any of the following adherence support services available in your country (please select all that apply)::
Peer counsellors,Behavioural skills training/medication adherence training,Fixed-dose combinations and
once-daily regimens,Case management,Peer navigation

If Other, please specify:

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

5. How many health facilities in the country are providing services for preventing mother-to-child transmission (PMTCT) of HIV?: 8

6. How many of the health facilities providing PMTCT services have community accountability mechanisms* in place?: 8

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

7.1 If yes:

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

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

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

d) Was analysis by community and civil society provided in a systematic manner?: No

e) Was analysis provided by community and civil society documented and disseminated following the meeting?: No

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

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

If Other grave or systematic human rights abuses*, please describe:

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

B.3 Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

Law enforcement

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

11. Have transgender people in your country been arrested or prosecuted for manifestations of their gender identity in the past three years?: No

12. Have sex workers in your country been arrested or prosecuted in relation to selling sex in the past three years?: No

13. Have people in your country been arrested or prosecuted for consensual same-sex sexual acts in the past three years?: No

14. Have people in your country been arrested or prosecuted for using drugs in the past three years?: No

Legal protections for key populations

15. Does your country have any of the following legal protection for transgender people (please select all that apply)?: Prohibitions of discrimination in employment based on gender diversity,Other non-discrimination provisions specifying gender diversity

**16. Does your country have any of the following legal protections for sex workers (please select all that apply)?:
No**

17. Does your country have any laws or other provisions specifying protections based on grounds of sexual orientation (please select all that apply)?: Prohibition of discrimination in employment based on sexual orientation,Other non-discrimination provisions specifying sexual orientation

18. Does your country have any specific antidiscrimination laws* or other protective provisions that apply to people who use drugs?: Yes

HIV prevention services for people who inject drugs

19. Are needle and syringe programmes operational in your country?: Yes

**20. Is naloxone (used to reverse opioid overdoses) available through community distribution in your country?:
Yes**

21. Are opioid substitution therapy (OST) programmes operational in your country?: Yes

HIV prevention services in prisons

22. Are needle and syringe programmes operational in prisons in your country?: Yes

23. Are opioid substitution therapy (OST) programmes operational in prisons in your country?: Yes

24. Are condoms and lubricants available to prisoners in your country?: Yes

25. Is antiretroviral therapy available to all prisoners living with HIV in your country?: Yes

26. Are HIV tests in prisons in your country:

- a) Carried out with the informed consent of prisoners?: Yes
- b) Systematically offered at entry and/or exit?: Yes
- c) Free of charge?: Yes
- d) Confidential?: Yes
- e) Available at any time during detention?: Yes
- f) Accompanied by relevant and accessible information?: Yes
- g) Accompanied by confidential pre- and post-test counselling?: Yes
- h) Equally accessible to all prisoners?: Yes

If no, which prisoners do not have equal access: please specify:

Participation

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

28. Do sex workers participate* in developing national policies, guidelines and strategies relating to their health in your country?: No

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

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

31. Do former and/or current prisoners participate* in developing national policies, guidelines and strategies relating to their health in your country?: No

Pre-exposure prophylaxis (PrEP)

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

33. Do any of the following barriers limit access to PrEP in your country (please select all that apply):: PrEP is only provided in specialized HIV treatment locations

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

34. Have any of the following provisions related to domestic violence* been implemented in your country (please select all that apply)?: Court injunctions to ensure the safety and security of survivors, Protection services for survivors of domestic violence, such as legal services or shelters, Services for the person perpetrating violence

If Other, please specify:

35. Does your country have any of the following to protect key populations and people living with HIV from violence (please select all that apply)?: General criminal laws prohibiting violence, Interventions to address police abuse, Interventions to address torture and ill-treatment in prisons

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

a) First-line support or what is known as psychological first aid: Yes

b) Emergency contraception for women who seek services within five days: Yes

c) Safe abortion if a woman becomes pregnant as a result of rape in accordance with national law: Yes

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

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

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

38. Do young people (15-24 years old) participate* in developing national policies, guidelines and strategies relating to their health in your country?: No

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

	Does it exist? _____	Do young people participate in this space?
Technical teams for the development, review and update of national AIDS strategies and plans		
Technical teams for the development or review of programmes that relate to young people's access to HIV testing, treatment, care and support services		
National AIDS Coordinating Authority or equivalent, with a broad-based multi-sector mandate		
Global Fund Country Coordinating Mechanism		
Civil society coordination spaces of populations most affected by HIV		
Community advisory body for hospitals, clinics and/or research projects		
Other		

If Other, please specify:

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

39. Do any of the following barriers limit access to social protection* programmes in your country (please select all that apply)?: Complicated procedures, Fear of stigma and discrimination

If Other, please specify:

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

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

40. Does your country have restrictions to the registration and operation of civil society and community-based organizations that affect HIV service delivery (please select all that apply)?: No

If Other, please specify:

41. Does your country have other regulatory barriers to community-led service delivery (please select all that apply)?: No

If Overly restrictive criteria for eligibility for community-based service delivery, please describe:

If Other, please describe:

42. Does your country have laws, policies or regulations that hinder access to funding for work by civil society organizations and community-based organizations for HIV-related work (please select all that apply)?: No

if Other, please describe:

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

violations of human rights

NOTE: Data will only be loaded for questions that have been included in the previous NCPI questionnaire. You are encouraged to check that responses are still valid and that any new questions are also completed.

Rights literacy

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

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

If Others, please describe: Fear of stigma, limits broad participation at the events

Accountability mechanisms

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

if Yes, please describe: Ombudsman, Anti-Discrimination Council, Institute for Human Rights (IDOM)

46. Does your country have any of the following accountability mechanisms in relation to discrimination and violations of human rights in health-care settings?: Complaints procedure,Mechanisms of redress and accountability,Procedures or systems to protect and respect patient privacy or confidentiality

if Other, please describe:

47. Does your country have any of the following barriers to accessing accountability mechanisms present (please select all that apply)?: Affordability constraints for people from marginalized and affected groups,Awareness or knowledge of how to use such mechanisms is limited

48. Does your country have mechanisms in place for accessing affordable legal services (please select all that apply)?: Yes, pro bono legal services provided by private law firms or individual lawyers,Yes, legal services provided by (university-based) legal clinics,Yes, community paralegals,Yes, other

If Yes, other, please describe: Support from paralegal specialists from NGO's

49. Does your country monitor access to justice among key populations or people living with or affected by HIV?: Yes

if Yes, please describe: PromoLex

50. Do key populations or people living with or affected by HIV face particular barriers in accessing justice in your country?: No

if Yes, please describe and provide details on the scale (i.e., nationally)::

IV WHO/AIDS Medicines and Diagnostics Survey on the use of ARV medicines and laboratory technologies and implementation of WHO Related Guidelines

is indicator/topic relevant?: Yes

Are new data available? (Please do not repeat data that was reported in a prior year): Yes

Data measurement tool / source: Survey on the use of ARV

Other measurement tool / source:

From date: 01/01/2018

To date: 31/12/2018

Additional information related to entered data. e.g. reference to primary data source, methodological concerns::

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source::

Name of person who filled in the questionnaire: Igor Condrat

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1B Treatment in HIV-infected adults and adolescents (10+ years old) including pregnant women

Question 1. Report the total number of HIV-infected adults and adolescents ≥ 10 years old by treatment line at the end of 2018

	Total number of HIV-infected adults and adolescents ≥ 10 years old by treatment line at end of 2018
First Line	4976
Second Line	775
Third Line	42
TOTAL	5684

Question 2. Report the number of patients per 1st line ART regimens used in HIV-infected adults and adolescents ≥ 10 years old at end of 2018 including HIV-infected pregnant women who are on ART.

N.B. Please start by ART regimens with higher numbers by end 2018

List of 1st line ART regimens used in HIV-infected adults and adolescents ≥ 10 years old regimen at the end of 2018	Number of HIV-infected adults and adolescents ≥ 10 years old receiving this ART regimen at the end of 2018
TDF+FTC+EFV	3047
TDF+3TC+EFV	1400
TDF+3TC+DTG	271
ABC+3TC+EFV	109
TDF+3TC+NVP	58
AZT+3TC+EFV	50
AZT+3TC+NVP	34
ABC+3TC+LPV/r	4
ABC+3TC+ATV/r	3

TOTAL

	Data value
TOTAL	4976

Question 3. Report the number of patients per second line ART regimens used in HIV-infected adults and adolescents ≥10 years old at the end of 2018

N.B. Please start by ART regimens with higher numbers by end 2018

List of 2nd line ART regimens used in HIV-infected adults and adolescents ≥10 years old regimen at the end of 2018	Number of HIV-infected adults and adolescents ≥10 years old receiving this ART regimen at the end of 2018
AZT+3TC+LPV/r	268
TDF+FTC+LPV/r	221
ABC+3TC+LPV/r	115
TDF+3TC+LPV/r	111
AZT+3TC+ATV/r	17
TDF+FTC+ATV/r	16
AZT+3TC+TDF+LPV/r	14
TDF+3TC+ATV/r	7
ABC+3TC+ATV/r	6

TOTAL

	Data value
TOTAL	775

Question 4 Report the number of patients per third line ART regimens used in HIV-infected adults and adolescents ≥10 years old at end of 2018

N.B. Please start by ART regimens with higher numbers by end 2018

List of 3rd line ART regimens used in HIV-infected adults and adolescents ≥10 years old at the end of 2018	Number of HIV-infected adults and adolescents ≥10 years old receiving this ART regimen at the end of 2018
ABC+3TC+DRV/r	18
TDF+FTC+DRV/r	14
AZT+3TC+DRV/r	9
AZT+3TC+TDF+DRV/r	1

TOTAL

	Data value
TOTAL	42

2 Treatment in HIV-infected children (<10 years old)

Question 5. Number of HIV-infected children <10 years old by treatment line at the end of 2018

	Total number of HIV-infected children <10 years old by treatment line at the end of 2018
First Line	66
Second Line	6
Third Line	0
TOTAL	72

Question 6. Report the number of children per 1st line ART regimens used in HIV-infected infants and children <10 years old at the end of 2018

N.B. Please start by ART regimens with higher numbers by end 2018

List of 1st line regimens used in HIV-infected children at the end of 2018	# children < 3 years old receiving this regimen (A)	# children ≥3 to <10 years old receiving this regimen (B)	Total # children <10 years old receiving this regimen (A) + (B)
ABC+3TC+LPV/r	7	27	34
AZT+3TC+LPV/r	0	25	25
ABC+3TC+EFV	0	2	2
AZT+3TC+EFV	0	4	4
TDF+3TC+EFV	0	1	1

TOTAL

	No. of children < 3 years old receiving this regimen (A)	No. of children ≥3 to <10 years old receiving this regimen (B)	Total # children <10 years old receiving this regimen (A) + (B)
TOTAL	7	59	66

Question 7: Report the number of children per second line ART regimen used in HIV-infected children <10 years old at the end of 2018

N.B. Please start by ART regimens with higher numbers by end 2018

List of 2nd line ART regimen used in HIV-infected children <10 years old at the end of 2018	Number of HIV-infected children <10 years old receiving this regimen at the end of 2018
ABC+3TC+LPV/r	5
ABC+3TC+EFV	1

TOTAL

	Data value
TOTAL	6

Question 8: Report the number of children per third line ART regimen used in HIV-infected children <10 years old at the end of 2018

N.B. Please start by ART regimens with higher numbers by end 2018

List of 3rd line ART regimen used in HIV-infected children <10 years old at the end of 2018	Number of HIV-infected children <10 years old receiving this regimen at the end of 2018
---	---

TOTAL

	Data value
TOTAL	0

3 Prevention of mother-to-child transmission

Question 9: Number and % of pregnant women who started antiretrovirals to reduce the risk of mother to child transmission and various PMTCT options during 2018 {GAM 2.3}

**Question 10 : What is the recommended PMTCT option for HIV-infected pregnant women in your country::
Option B+ (or Treat All)**

If "Other PMTCT option used in your country", please specify:

Question 11. Report the number of pregnant women per ARV regimens used in your country for PMTCT Option A in 2018

N.B. Please start by ARV regimens with higher numbers by end 2018

Option A ART regimens used for HIV-infected pregnant women in 2018	Number of HIV-infected pregnant women who started this regimen in 2018
--	--

TOTAL

	Data value
TOTAL	

Question 12. Report the number of pregnant women per ARV regimens used in your country for PMTCT Option B in 2018

N.B. Please start by ARV regimens with higher numbers by end 2018

Option B ART regimens used for HIV-infected pregnant women in 2018	Number of HIV-infected pregnant women who started this regimen in 2018
--	--

TOTAL

	Data value
TOTAL	

Question 13. Report the number of pregnant women per ARV regimens used in your country for PMTCT Option B+ (Treat All) in 2018

N.B. Please start by ART regimens with higher numbers by end 2018

Option B+ ART regimens used for HIV-infected pregnant women in 2018	Number of HIV-infected pregnant women who started this regimen in 2018
TDF+FTC+EFV	116
TDF+3TC+EFV	48
TDF+DTC+LPV/r	10
AZT+3TC+LPV/r	3
ABC+3TC+EFV	2
TDF+3TC+NVP	1
AZT+3TC+NVP	1
ABC+3TC+DRV/r	1
TDF+FTC+DRV/r	1

TOTAL

	Data value
TOTAL	183

Question 14. Report the number of neonates per ARV used in your country for HIV prophylaxis in neonates born from HIV-infected pregnant women in 2018

ARVs used for HIV prophylaxis of neonates born from HIV-infected mothers in 2018	Number of neonates started this regimen in 2018
AZT	151
AZT+NVP	32
AZT+3TC+NVP	4

TOTAL

	Data value
TOTAL	187

4 Laboratory services

HIV tests

	Data value
Question 15. Total number of HIV tests (RDTs & ELISA) done between Jan- Dec 2018 : (Number of people tested for HIV: see GAM 1.1)	240847

CD4 Tests

	Data value
Question 16. Total number of CD4 tests done between Jan- Dec 2018	9011
Question 17. Total number of HIV-infected people who had at least one CD4 test between Jan- Dec 2018	5967
Question 18. Total number of patients on ART who had at least one CD4 test between Jan- Dec 2018	4776
Question 19. Total number of HIV-infected pregnant women who had at least one CD4 test between Jan- Dec 2018	175

Viral load

	Data value
Question 20. Total number of VL tests done between Jan- Dec 2018	11526
Question 21. Total number of all HIV-infected people who had at least one VL test between Jan- Dec 2018	6060
Question 22. Total number of patients on ART who had at least one VL test between Jan- Dec 2018	5505
Question 23. Total number of HIV-infected pregnant women who had at least one VL test between Jan- Dec 2018	175

Early Infant Diagnosis (EID)

	Data value
Question 24. Total number of EID tests done between Jan- Dec 2018	535
Question 25. Total number of infants (<12 months old) born to HIV-infected mother who had at least one EID test between Jan- Dec 2018	187

Question 26. Report the total number of labs or sites by type of tests in your country

Type of laboratory tests

	Total number of labs or sites where samples are collected (sites with testing and sites without testing) by type of test	Total number of labs or sites where the actual testing is done by type of test	Total number of labs or sites where the actual testing is done that participate in an external quality assessment (EQA) scheme by type of test	Total number of labs or sites that need quality improvement activities based on most recent EQA exercise by type of test	List main activities required for quality improvement by type of test
HIV serology antibody testing including rapid test & ELISA	392	322	1	0	
Early Infant Diagnosis (EID)	52	6	1	0	
CD4 testing	6	6	1	0	
Viral load testing	6	6	1	0	
HIVDR genotype testing	0	0	0	0	
GeneXpert (TB test)	60	58	0	0	EQA for TB

Question 27. Availability of laboratory HIV technologies: Report the number of machines/assays by technology available in your country.

CD4 Technologies

	Total number of laboratory machines	Number of sites where the lab machine is installed	Total No. of lab machines not in use	Number of machines not in use: No reagents	Number of machines not in use: Not installed	Number of machines not in use: Need repair	Number of machines not in use: No staff trained	Number of machines not in use: Decommissioned	Number of machines not in use: Specify other reason here and No. of machines	Number of equipment with a maintenance service contract	Number of equipment serviced in 2018
Alere Pima Analyzer											
Apogee Auto40 Flow Cytometer											
BD FACSCalibur											
BD FACSCount	5	5	0	0	0	0	0	0	0	1	0
BD FACSPresto™ Near Patient CD4 Counter											
Coulter Epics											
Millipore-Guaya											
Partec CyFlow											
Partec miniPOC											
PointCare NOW											

Other CD4 Technologies

Type of machine	Total number of laboratory machines	Number of sites where the lab machine is installed	Total No. of lab machines not in use	Number of machines not in use: No reagents	Number of machines not in use: Not installed	Number of machines not in use: Need repair	Number of machines not in use: No staff trained	Number of machines not in use: Decommissioned	Number of machines not in use: Specify other reason here and No. of machines	Number of equipment with a maintenance service contract	Number of equipment serviced in 2018
AQUIOS	1	1	1	1	0	0	0	0	0	0	0

Viral Load Technologies

	Total number of laboratory machines	Number of sites where the lab machine is installed	Total No. of lab machines not in use	Number of machines not in use: No reagents	Number of machines not in use: Not installed	Number of machines not in use: Need repair	Number of machines not in use: No staff trained	Number of machines not in use: Decommissioned	Number of machines not in use: Specify other reason here and No. of machines	Number of equipment with a maintenance service contract	Number of equipment serviced in 2018
Abbott RealTime HIV-1 assay (A) /manual/m2000rt											
Abbott RealTime HIV-1 assay (A) /m24/m2000rt											
Abbott RealTime HIV-1 assay (A) /m2000sp/m2000rt											
Abbott RealTime HIV-1 Qualitative assay (B) /manual/m2000rt											
Abbott RealTime HIV-1 Qualitative assay (B) /m2000sp/m2000rt											
COBAS [®] AMPLICOR HIV-1 MONITOR Test (A) / Amplicor (Roche)											
Roche Amplicor HIV-1 DNA test (B) / Amplicor											
COBAS [®] AmpliPrep/COBAS [®] TaqMan [®] HIV-1 (A) / COBAS TaqMan 48 (Roche)											
COBAS [®] AmpliPrep/COBAS [®] TaqMan [®] HIV-1 (A) / COBAS TaqMan 96 (Roche)											
COBAS [®] AmpliPrep/COBAS [®] TaqMan [®] HIV-1 Qualitative (B) / COBAS TaqMan 48 (Roche)											
COBAS [®] AmpliPrep/COBAS [®] TaqMan [®] HIV-1 Qualitative (B) / COBAS TaqMan 96 (Roche)											

	GENERIC HIV CHARGE VIRALE (A) / one NorDiag Arrow instrument										
	GENERIC HIV CHARGE VIRALE (A) / two NorDiag Arrow instruments										
NucliSENSEeasyQ0	HIV-1 (A) / NucliSens miniMAG / EasyQ® (bioMerieux)										
NucliSENSEeasyQ0	HIV-1 (A) / NucliSens easyMAG / EasyQ® (bioMerieux)										
	VERSANT® HIV-1 RNA 1.0 Assay (kPCR) (A) / VERSANT® kPCR Molecular System (Siemens)										

(A) - Assay intended to be used for measuring levels of HIV-1 RNA (viral load)

(B) - Assay intended for qualitative detection of HIV-1 RNA and DNA in adult and pediatric (including younger than 18 months of age: EID) patients.

Other Virological testing technologies

Type of machine	Total number of laboratory machines	Number of sites where the lab machine is installed	Total No. of lab machines not in use	Number of machines not in use: No reagents	Number of machines not in use: Not installed	Number of machines not in use: Need repair	Number of machines not in use: No staff trained	Number of machines not in use: Decommissioned	Number of machines not in use: Specify other reason here and No. of machines	Number of equipment with a maintenance service contract	Number of equipment serviced in 2018
GeneXpert	7	6	0	0	0	0	0	0	0	7	7

5 Country targets

Question 28. In the table below, report the national targets for ART, PMTCT and lab tests in the next 5 years

Country target

	At the end of 2019	At the end of 2020	At the end of 2021	At the end of 2022	At the end of 2023	At the end of 2024
1. Number of adults and children to be on ART	6615	7365	8115	8865	9615	10365
Subset 1.1 : Number of adults and adolescents (≥10 years) to be on ART	6540	7290	8040	8790	9540	10290
Subset 1.2 : Number of children <10 years to be on ART	75	75	75	75	75	75
Sub-subset 1.2.1 : Number of children <5 years to be on ART	25	25	25	25	25	25
Sub-subset 1.2.2 : Number of children ≥ 5 to <10 years to be on ART	50	50	50	50	50	50
2. Total Number of pregnant women who started ART for PMTCT	220	225	230	235	240	245
Subset 2.1 : Number of pregnant women on Option B+	220	225	230	235	240	245
Subset 2.2 : Number of pregnant women on Option B						
Subset 2.3 : Number of pregnant women on Option A						
3. Total number of people who will be tested for HIV infection	220000	220000	220000	220000	220000	220000
4. Total number of people who will have CD4 tested	7938	8838	9738	10638	11538	12438
5. Total number of people who will have VL tests	7938	8838	9738	10638	11538	12438
6. Total number of children (born from HIV infected women) who will have EID tests	225	230	235	240	245	250
7. Total number of HIV serology tests	250000	250000	250000	250000	250000	250000
8. Total number of CD4 tests	8400	9000	10000	11000	12000	13000
9. Total number of VL tests	16200	17000	19000	21000	23000	25000
10. Total number of EID tests	550	600	650	700	750	800

Question 29. In the table below, report the national 3 year forecasts by ARV regimen

ADULTS

1st Line ARV regimens

Regimen	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
TDF+3TC+DTG	1047	2047	3047
TDF+FTC(3TC)+EFV	4447	4078	3707

SUBTOTAL

	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
SUBTOTAL - 1st Line ARV regimens	5494	6125	6754

2nd Line ARV regimens

Regimen	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
AZT+3TC+ATV/r	100	300	500
ABC+3TC+LPV/r	881	793	706

SUBTOTAL

	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
SUBTOTAL - 2nd Line ARV regimens	981	1093	1206

3rd Line ARV regimens

Regimen	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
ABC+3TC+DRV/r	65	72	80

SUBTOTAL

	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
SUBTOTAL - 3rd Line ARV regimens	65	72	80

Question 30. If PMTCT regimens are not included in the above, please list regimens and number of people for 2019-2021

PMTCT ARV regimens	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
TDF+FTC(3TC)+EFV	200	200	200
TDF+3TC+DTG	20	25	30

SUBTOTAL

	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
SUBTOTAL - PMTCT ARV regimens	220	225	230

Question 31. In the table below, please report the national 3 year forecasts by ARV regimen for children

PEDIATRIC ART

1st Line ARV regimens

Regimen	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
ABC+3TC+LPV/r	50	50	50
ABC+3TC+DTG	20	20	20

SUBTOTAL

	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
SUBTOTAL - 1st Line ARV regimens	70	70	70

2nd Line ARV regimens

Regimen	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
AZT+3TC+RAL	5	5	5

SUBTOTAL

	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
SUBTOTAL - 2nd Line ARV regimens	5	5	5

3rd Line ARV regimens

Regimen	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
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SUBTOTAL

	Number of people on ARV regimens - 2019	Number of people on ARV regimens - 2020	Number of people on ARV regimens - 2021
SUBTOTAL - 3rd Line ARV regimens	0	0	0

Question 32. In the table below, please report the national 3 year forecasts of HIV tests, CD4 tests, viral load tests and early infant diagnostic tests

Number of tests procured in 2018 and quantities planned for the next 3 years

	Tests planned for 2018	Tests planned for 2019	Tests planned for 2020	Tests planned for 2021
HIV diagnosis test (RDTs, Self-test)	250000	285000	250000	250000
CD4 tests	6150	8400	9000	10000
Viral Load (VL) tests	16000	16400	17000	19000
Early Infant Diagnosis (EID) tests	450	550	600	650

Question 33. In the table below, please report the quantities of national ARV formulations procured in 2017 and 2018

Regimen/ formulation (Strength)

	Unit of measure	Total number bought - 2017	Total number bought - 2018
Abacavir [ABC] (20 mg/ml)	ml	28800	
Abacavir [ABC] (300 mg)			
Abacavir + Lamivudine [ABC+3TC] (60 mg + 30 mg)	pills	75540	105060
Abacavir + Lamivudine + Zidovudine [ABC+3TC+ZDV] (300 mg + 150 mg + 300 mg)			
Atazanavir + Ritonavir [ATV+RTV] (300 mg + 100 mg)	pills		22223
Darunavir [DRV] (300 mg)			
Dolutegravir [DTG] (50 mg)			
Efavirenz [EFV] (600 mg)	pills	42510	27120
Efavirenz [EFV] (200 mg)	pills	52380	92070
Emtricitabine [FTC] (10 mg/ml)			
Lamivudine [3TC] (150 mg)			
Lamivudine [3TC] (10 mg/ml)	ml	80400	1440
Lopinavir + Ritonavir [LPV+RTV] (200 mg + 50 mg)	pills	1282440	907800
Lopinavir + Ritonavir [LPV+RTV] (80 mg + 20 mg/ml)	ml	97500	31860
Nevirapine [NVP] (200 mg)	pills	75540	109260
Nevirapine [NVP] (10 mg/ml)	ml	51600	6960
Stavudine + Lamivudine [d4T+3TC] (30 mg + 150 mg)			
Stavudine + Lamivudine + Nevirapine [d4T+3TC+NVP] (30 mg + 150 mg + 200 mg)			
Tenofovir [TDF] (300 mg)	pills	16590	
Tenofovir + Emtricitabine [TDF+FTC] (300 mg + 200 mg)	pills	98310	109254
Tenofovir + Emtricitabine + Efavirenz [TDF+FTC+EFV] (300 mg + 200 mg + 600 mg)	pills	1208640	943590
Tenofovir + Lamivudine [TDF+3TC] (300 mg + 300 mg)	pills	119430	81420
Tenofovir + Lamivudine + Nevirapine [TDF+3TC]+NVP (300 mg + 300 mg + 200 mg)			
Tenofovir + Lamivudine + Efavirenz [TDF+3TC+EFV] (300 mg + 300 mg + 600 mg)	pills	618090	369840
Zidovudine [ZDV] (300 mg)			
Zidovudine [ZDV] (10 mg/ml)	ml	84000	75084
Zidovudine + Lamivudine [ZDV+3TC] (300 mg + 150 mg)	pills	354960	188252
Zidovudine + Lamivudine + Efavirenz [ZVD+3TC]+EFV (300 mg + 150 mg + 200 mg)			
Zidovudine + Lamivudine + Nevirapine [ZVD+3TC+NVP] (300 mg + 150 mg + 200 mg)	pills	87840	
Zidovudine + Lamivudine + Nevirapine [ZVD+3TC+NVP] (60 mg + 30 mg + 50 mg)			

Others, please add

Regimen/ formulation	Strength	Unit of measure	Total number bought - 2017	Total number bought - 2018
Zidovudine + Lamivudine [ZDV+3TC]	60mg + 30mg	pills	243000	54780
Lopinavir + Ritonavir [LPV+RTV]	100 mg + 25 mg	pills	87960	34020
Efavirenz [EFV]	50 mg	pills	9000	
Abacavir + Lamivudine [ABC+3TC]	600 mg + 300 mg	pills	109320	53101
Atazanavir [ATV]	300 mg	pills	8400	
Darunavir [DRV]	600 mg	pills	27420	23085
Ritonavir [RTV]	100 mg	pills	35970	15906
Tenofovir + Lamivudine + Dolutegravir [TDF+3TC+DTG]	300 mg + 300 mg + 50 mg	pills		97500