

PASCA: Impulsando la Lucha contra el VIH/SIDA

Quarterly Program Report PASCA October-December 2002

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For the period: October-December 2002

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**QUARTERLY REPORT
PASCA
October-December 2002**

PASCA Summary

In 2001, USAID G-CAP extended PASCA through August 2003, modifying the results framework and indicators for the project under an extension. This report is organized around the new results framework.

During this reporting period, advocacy actions by the Strategic Alliances resulted in the following successes:

- Removal of literal “d” from article 16 of the National AIDS Law in El Salvador by Congress. Article 16 permitted employers to demand an HIV test of all potential employees as a hiring requirement.
- Some members of the strategic alliance in Guatemala participated in a working group that provided follow-up to the presidential allocation of funds for the purchase of antiretroviral medicines. The first purchase in the amount of Q500,000 (US\$63,533) was made during this reporting period. Other members met and established a new advocacy plan to improve access to HIV/AIDS treatment through the elimination of the value added tax currently levied on generic antiretrovirals donated or purchased internationally.
- The Foundation in Honduras that will function as the country coordinating mechanism promoted by the Global Fund allotted a board seat to the strategic alliances.

Dissemination of the Multi-Site Study results to both decision-makers and the audiences participating in the study has begun. Final report writing is underway in the five countries of the study.

Other relevant PASCA activities for this reporting period were:

- Five of the seven NGOs from the original Acción SIDA sites completed their HIV/AIDS interventions and conducted final project studies.
- The PASCA technical advisory group met and elected their coordinating committee and defined strategic objectives to provide effective support to PASCA and promote AIDS-related sustainable activities.
- REDCA+ members and local affiliates conducted national leadership development workshops in the region to increase their membership.
- Site visits to individual countries were conducted by REDCA+ board members for the purpose of monitoring the implemented activities.

Strategic Objective One:
Enhance Central American Capacity to respond to the HIV Crisis.

Intermediate Result One:

Appropriate HIV/AIDS Policies and Strategic Plans implemented.

Indicators

Sub-indexes of the *political support* and the *legal and regulatory framework* dimensions in the API.

Given that these two dimensions from the AIDS Program Effort Index (API) tend to reflect the work PASCA does in the region, they will now be reported separately as indicators for IR1. Targets for end-of-project (EOP), August 30, 2003, were set as follows: Political Support, 5 points; and Legal and Regulatory Framework, 3 points. In-depth results were previously reported.

1. AIDS Program Effort Index (API).

Progress to date of the Strategic Objective was assessed by means of the API in 2000, when a regional score of fifty-three (53) was established. The revised target for a new EOP (August 30, 2003) was set at fifty-five (55).

Next Steps

PASCA will conduct a new round of the API during the first quarter of Fiscal Year 2003. Preparatory activities (questionnaire modifications, consultant hiring and elaboration of lists of people to be interviewed) will take place between February and mid-March. The survey will be conducted during late March and early April. Analysis and report writing will take place during April and May, with an anticipated final report produced by June.

2. Number of positive HIV/AIDS policy changes.

A second indicator for the Strategic Objective is the Policy and Regulatory Matrix. It tallies the net number of positive HIV/AIDS policy changes enacted in each country and at a regional level. In 2001, we closed with a cumulative of sixty-eight (68) changes. The revised target for 2002 was set at a cumulative of seventy-two (72) changes. As of December 31, 2002, 80 changes have been recorded (Annex II).

Recorded changes for each country are as follows:

Guatemala

- No changes were reported. Although an annual work plan was completed for 2003 activities, it remains to be made official.

Nicaragua

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- No changes were reported.

Panama

- No changes were reported.

El Salvador

- During this quarter, El Salvador's Supreme Court voted for the removal of sub-paragraph "d" from Article 16 of the AIDS Law, which mandated that individuals seeking a job must have a mandatory HIV test performed. This decision is a step forward towards reducing stigma and discrimination among PLWHA in El Salvador. Congress ratification followed the Court's decision soon thereafter. It remains to be seen how firms and those directly affected will react to this decision. In addition, this ruling enables advocacy groups with arguments to engage in active lobbying for the improvement of human rights of PLWHA.

Honduras

- Also during this quarter, a new National AIDS Strategic Plan was made official in Honduras. The fact that it was presented by the Minister of Health on AIDS World Day reiterates health sector commitment to AIDS response in Honduras. Commitment at a higher level was shown that same day when President Maduro and his wife marched with activists through the capital streets that same day. Honduras was a pioneer in Central America in reference to the development of AIDS –specific strategic plans. When this new plan was developed, lessons learned about the advantages of an integrated response to AIDS were streamlined into it. Given the increasing amount of financial resources made available to Honduras, the fact of having put together a National Plan can only benefit the policy environment for an improved response.

Next Steps

PASCA will provide technical support to the following processes:

Guatemala

- Collaborate on the revision of guidelines for reproductive health care under the HIV/AIDS component.
- Encourage formulation of a local strategic plan for the south-east region.

Honduras

- M&E of current National AIDS Strategic Plan (NASP) and formulation of a new one.

Panama

- Support conclusion of a revised NASP.

There are a few ongoing activities that do not depend directly on PASCA's actions, but that would positively contribute to the policy environment:

Honduras

- Formulation of the Regulatory Framework for the AIDS Law.
- CONASIDA's AIDS Law is waiting for discussion at the National Congress.

El Salvador

- AIDS Law regulations framework has been finished and awaits MOH concurrence.

LLR 1.1 Effective strategic alliances advocating for appropriate HIV/AIDS policies and strategic plans in both the regional and national arenas.

Indicators

1.1.1 Active strategic alliances established; number of organizations and networks reaching target score on advocacy questionnaire.

The twelve strategic alliances in the region continued the design and implementation of advocacy actions to promote positive changes in the HIV/AIDS political environment. Specific activities and outcomes of the individual strategic alliances are presented below by country. It is important to recognize the relation between well coordinated and strong alliances and the effective change to policy, as these are the bodies that can influence change. As such, many of the key activities presented by country are more process related than outcome, yet will assist overall in the achievement of appropriate HIV/AIDS policies. Highlighted major outcome achievements resulting in more appropriate HIV/AIDS policies include the following: The Legislative Strategic Alliance in El Salvador contributed to a major policy change that will benefit the national labor force by preventing discrimination based on HIV/AIDS status among perspective employees. This Strategic Alliance demonstrated their ability to continue influencing the political process by closing the legal loophole left open by the original law. At the same time, the Access to Treatment Alliance in Guatemala managed to convince the President to allocate funds for the purchase of anti-retroviral medicines. These results show the strength of segments of civil society that have been organized by PASCA to promote appropriate legislation and influence political leadership in the region.

In Honduras one representative of the Strategic Alliances was appointed to the Board of Directors of the Global Fund Foundation. While this action is related more to process than to outcome, it is a critical step in shaping outcome as it provides an opportunity for the PASCA funded strategic alliances to influence the distribution of resources for HIV/AIDS activities.

El Salvador

- Removal of literal “d” from article 16 of the National AIDS Law by Congress. Article 16 permitted employers to demand an HIV test of all potential employees as a hiring requirement.
- After having already achieved a reduction of approximately 50% in the cost of antiretroviral treatment, the strategic alliance is working to further reduce the price for anti-retroviral medicines purchased by the MOH and the Social Security Institute.
- The plan for integrating HIV/AIDS into the national reproductive health policy was completed by the strategic alliance during this reporting period. Future alliance activities will continue with reproductive health advocacy issues on their own without the assistance of PASCA.
- UNICEF, UNAIDS and PASMO provided financial support to facilitate strategic alliance meetings and to hire a consultant to help draft the AIDS bylaw project.

Guatemala

- Some members of the Strategic Alliance participated in a working group that provided follow-up to the presidential allocation of funds for the purchase of antiretroviral medicines. The first purchase in the amount of Q500,000 (US\$63,533) was made during this reporting period. Other members met and established a new advocacy plan to improve access to HIV/AIDS treatment through the elimination of the value added tax currently levied on generic antiretrovirals donated or purchased internationally.
- A new work plan for the HIV/AIDS Prevention for Men Strategic Alliance was presented to leaders from other sectors to receive their feedback. The strategic alliance is currently considering the feedback and how to incorporate it into the new plan.

Honduras

- The Access to Treatment Strategic Alliance actively participated in the purchase of antiretroviral medicines and provided follow-up in order to refer potential HIV/AIDS treatment recipients to the appropriate health services.
- Some members of the Legislation Strategic Alliance participated in the elaboration of an AIDS bylaw project to be presented to the Ministry of Health for approval.
- The Foundation, promoted by the Global Fund to function as the country coordinating mechanism, allotted a board seat to the Strategic Alliances. Edgardo Cáceres, the Strategic Alliance's Coordinator was elected as the provisional representative to the Foundation Board during an assembly meeting. The permanent representative will be appointed by a second vote at the end of February 2003.

Nicaragua

- The HIV Prevention Based on Behavior Change Strategic Alliance held a work-breakfast for some members of CONISIDA to present arguments in favor of an HIV/AIDS prevention-model based on behavior change. As a result of this meeting CONISIDA members committed themselves to organize a meeting with the ministers they represent in order to define clear policies concerning the need for HIV/AIDS prevention to focus on proven behavior change methods. In addition, a collaborative approach to the 1st of December AIDS commemoration was planned for which the UNDP has since contributed US\$2,000.
- The members of the Legislation Strategic Alliance decided to join forces with the Behavior Change Strategic Alliance to strengthen advocacy efforts with CONISIDA.

Panama

- The Access to Care and Support Strategic Alliance met with mass media representatives to brief them on their advocacy plan to ensure coverage of Strategic Alliance activities.

Next Steps

- Continue technical and financial assistance to strategic alliances. In addition, it is important to highlight that strategic alliances often engage donors in their process as a means by which to attain their support. While this has been an effective approach, PASCA will need to continue financial and technical support of the broader process.
- Develop a fund raising plan for the strategic alliances that also calls for greater integration of donor agencies into the processes.
- Continue implementation of advocacy plans.

ISSUE	GUATEMALA		
	ACCESS TO TREATMENT	AIDS LEGISLATION	HIV/AIDS PREVENTION FOR MEN
OBJECTIVE	Opportunistic infections drugs and antiretrovirals are accessible.	Article 27-2000 of AIDS law is implemented.	HIV/AIDS prevention interventions are implemented by government entities.
SPECIFIC OBJECTIVES	<ul style="list-style-type: none"> Budget for purchase of antiretrovirals and opportunistic infections drugs is allocated by the MOH. Generic antiretrovirals providers are included in the MOH purchase system. 	<ul style="list-style-type: none"> The AIDS law is broadly disseminated by the mass media. Other sectors actively advocate for HIV/AIDS legislation. 	
SPECIFIC OBJECTIVE SELECTED	The same as above.	The AIDS law is broadly disseminated by the mass media.	
ALLIANCE MEMBERS	MSF, Gente Positiva, Gente Nueva, APAES, Fundación Marco Antonio, Sanidad Militar, National AIDS Program, Archbishop Office, IGSS, Centro ITS zona 3, Centro Epidemiología.	ASI, Fundación Iturbide, Gente Positiva	CDHG, Archbishop Office, OASIS, ASI, Fundación Iturbide, COEPSIDA, Sanidad Militar, National Mental Health Program, Hogar San José, Gente Nueva, Counselors Network.
ACTIVITIES	Some members of the Strategic Alliance participated in a working group that provided follow-up to the presidential allocation of funds for the purchase of antiretroviral medicines. Other members met and established a new advocacy plan to improve access to HIV/AIDS treatment through the elimination of the Value Added Tax currently levied on generic anti-retroviral medicines donated or purchased internationally.	Inactive with this advocacy work plan. However, some of its members continued advocating for the previous objective that related to the approval of the regulatory framework of the AIDS Law, approved after two years of advocacy work.	A new work plan for the HIV/AIDS Prevention for Men Strategic Alliance was presented to leaders from other sectors to receive their feedback. The Strategic Alliance is currently considering the feedback and how they can incorporate it into the new plan.
PROCESS RESULTS	<ul style="list-style-type: none"> The first purchase in the amount of Q500,000 (US\$63,533) was made during this reporting period. New advocacy plan developed. 	AIDS bylaws approved.	

ISSUE	EL SALVADOR		
	ACCESS TO TREATMENT	AIDS LEGISLATION	HIV/AIDS INTEGRATION INTO REPRODUCTIVE HEALTH
OBJECTIVE	There is sustained access to antiretrovirals.	Article 16 of AIDS law is revoked.	Advocate for the creation of a reproductive health law that includes HIV/AIDS.
SPECIFIC OBJECTIVE SELECTED	Prices of antiretrovirals through the UNAIDS accelerated process are reduced.	Article 16 of AIDS law is revoked.	Advocate with the MOH for the creation of a reproductive health law that includes HIV/AIDS.
ALLIANCE MEMBERS	Hospital Maternidad, Hospital Zacamil, Flor de Piedra, Sanidad Militar, Atlacatl, ISSS, Equipo de Lucha Contra el SIDA, Programa Nacional, Fundasida, MSF, Hospital Rosales	CEMUJER, MSF, Entre Amigos, FUNDASIDA, Atlacatl, ASPS, Flor de Piedra, CREA, Sanidad Militar.	AMS, ASPS, UNFPA, ADS, Plan Internacional, Save the Children, Maestría Salud Pública UCA, Entre Amigos, Visión Mundial, ORMUSA, Universidad Andrés Bello, Gerencia de la Mujer.
ACTIVITIES	After achieving a reduction of approximately 50% in the cost of antiretroviral treatment, the Strategic Alliance is working to further reduce the price for antiretrovirals purchased by the MOH and the Social Security Institute.	<ul style="list-style-type: none"> • Removal of literal “d” from article 16 of the National AIDS Law by Congress. Article 16 permitted employers to demand an HIV test of all potential employees as a hiring requirement. • Approval of AIDS bylaws was selected as the new strategic alliance objective. 	The plan for integrating HIV/AIDS into the national reproductive health policy was completed by the Strategic Alliance during this reporting period. Future Alliance activities will continue with reproductive health advocacy issues on their own without the assistance of PASCA.
PROCESS RESULTS		Removal of literal “d” from article 16 of the National AIDS Law by Congress.	HIV/AIDS integrated into the national reproductive health policy.

ISSUE	HONDURAS		
	ACCESS TO TREATMENT	AIDS LEGISLATION	HIV/AIDS INTEGRATION INTO REPRODUCTIVE HEALTH
OBJECTIVE	A system for timely antiretrovirals purchase and dissemination is established.	AIDS law by-laws (including CONASIDA) are approved.	Advocate for implementation of HIV curriculum in formal education
SPECIFIC OBJECTIVES	<ul style="list-style-type: none"> Decision-makers are aware of the need to provide treatment to PLWHAs. PLWHAs are empowered to advocate for access to treatment. There is an increase in the number of PLWHAs who receive treatment. 	<ul style="list-style-type: none"> Minister of Health recognizes the need to quickly sign-off on by-laws. 	Advocate for HIV prevention curriculum implementation with policy makers.
ALLIANCE MEMBERS	Cruz Roja, Pastoral Social Cáritas, ASONAPVISIDA, Programa Nacional, Cruz Morada de H. Colectivo Violeta, UNHH, PASMO, MSF, PVVS independientes, PRISMA, IHSS, Casa Alianza, FFS, Kukulkán.	CHF, Maestría en Salud Pública, Alianza ONAH, Colectivo Violeta,	Pastoral Buen Samaritano, CESAMO Villa Adela, Instituto Inmaculada Concepción, Cruz Roja, Pastoral Social Cáritas, Sanidad Militar, IMADFA, Programa Nacional, Ministerio de Educación, Acciones Desarrollo Poblacional, CEDECE.
ACTIVITIES	The Access to Treatment Strategic Alliance actively participated in the purchase of anti-retroviral medicines and provided follow-up in order to refer potential HIV/AIDS treatment recipients to the appropriate health services.	Some members of the Legislation Strategic Alliance participated in the elaboration of an AIDS bylaw project to be presented to the Ministry of Health for approval.	Coordinating meetings were conducted to finalize advocacy activities to be implemented.
PROCESS RESULTS			

ISSUE	NICARAGUA	
	HIV PREVENTION BASED ON BEHAVIOR CHANGE	AIDS LEGISLATION
OBJECTIVE	CONISIDA's policies promoting HIV prevention through behavior change are developed.	General public is aware and knowledgeable on AIDS laws and AIDS law is fully implemented.
SPECIFIC OBJECTIVES	<ul style="list-style-type: none"> • A database with information and research on behavior change is established and located at the Ministry of Health. • CONISIDA has developed plans for implementation and evaluation of program and activities focused on behavior change. 	<ul style="list-style-type: none"> • Article 19 of the AIDS law, which ensures care and support for PLWHAs is implemented. • AIDS law is disseminated among various sectors of society.
SPECIFIC OBJECTIVE SELECTED	CONISIDA has developed plans for implementation and evaluation of program and activities focused on behavior change.	<ul style="list-style-type: none"> • Article 19 of the AIDS law, which ensures care and support for PLWHAs is implemented.
ALLIANCE MEMBERS	Secretaría de la Juventud, Ministerio de Educación, Cultura y Deportes, Universidad John Hopkins, CEPS, SI MUJER, Fundación Puntos de Encuentro, PROSIM- GTZA, Comisión Nacional de Lucha Contra el SIDA desde la Sociedad Civil, Cruz Roja, XOCHIQUETZAL, Centro Mujer y Familia, PASMO, PSI, NICASALUD.	CEPRESI, Xochiquetzal, CISAS, ASONVIHSIDA, Centro Mujer y Familia, Procuraduría de los Derechos Humanos, PASMO.
ACTIVITIES	The HIV prevention based on behavior change strategic alliance held a work breakfast for some members of CONISIDA in order to present arguments in favor of a HIV/AIDS prevention model based on behavior change.	The members of the legislation strategic alliance decided to join forces with the behavior change strategic alliance to strengthen advocacy efforts with CONISIDA.
PROCESS RESULTS	<ul style="list-style-type: none"> • A CONISIDA commitment to organize a meeting with the ministers they represent in order to define clear policies concerning HIV/AIDS prevention focusing on behavior change. • A collaborative approach to the 1st. of December AIDS commemoration was planned for which the UNDP has since contributed US\$2,000. 	

ISSUE	PANAMA	
	ACCESS TO CARE AND SUPPORT	HIV/AIDS INTEGRATION INTO REPRODUCTIVE HEALTH
OBJECTIVE	Access to care and support through the Ministry of Health and Social Security is increased.	The HIV/AIDS and reproductive health component in the Education Law is implemented.
SPECIFIC OBJECTIVES	<ul style="list-style-type: none"> • Number of service units for PLWHAs is increased. • Care and support norms and protocols based on standards of care are updated. • Stable funding for services is provided. 	<ul style="list-style-type: none"> • HIV information and education in schools is provided. • HIV research among vulnerable groups to obtain data for future strategies is completed.
SPECIFIC OBJECTIVE SELECTED	<ul style="list-style-type: none"> • Number of service units for PLWHAs increased. 	
ALLIANCE MEMBERS	ANADESAC, National Police, AHMNP, Programa Nacional, IIDEHSA, Social Security, PROBIDSIDA, Red Cross.	APLAFA, National Police, UNPYME, EMESSA, AHMNP, CMGTP, Nueva Identidad, Gilberto Toro, MINJUMNFA, Red Cross, SERECSIDA, CODIM, ANADESAC.
ACTIVITIES	The Access to Care and Support Strategic Alliance met with mass media representatives to brief them on their advocacy plan in order to receive coverage of Strategic Alliance activities.	During the reporting period, planning meetings were conducted. A need for more focus on the advocacy actions to be undertaken was concluded.

1.1.2 Active regional networks for HIV-positive persons functioning in Central America.

The national leadership workshops being implemented by REDCA+ members and local affiliates in all countries as part of the TOT leadership development program were concluded during this reporting period. The following results were obtained: a) increase of REDCA+ membership (more than 60 new members); b) incorporation of additional leaders to the advocacy actions REDCA+ national chapters are currently carrying out; c) continuing the skills development in designing, managing, implementing, and assessing training activities.

Site visits to individual countries were conducted by REDCA+ board members for the purpose of monitoring the implemented activities.

The national workshops on support group facilitation for HIV-positive people, scheduled for this reporting period, were postponed until next quarter to allow time to train REDCA+ management staff in budget management at the regional level.

Next Steps

- Implementation of national workshops on support group facilitation by REDCA+.
- Provide TA as needed.
- Monitoring and evaluation of implemented activities.

1.1.3 Number of evaluations of strategic plans by country.

Regional Strategic Planning

El Salvador, Nicaragua, Belize and Panama submitted proposals to the Global Fund on AIDS, Tuberculosis and Malaria (GFATM). Guatemala re-submitted its proposal. PASCA collaborated with UNAIDS at different levels of country support.

PASCA continued supporting the AIDS strategic planning processes in the region, which included the development of annual workplans that focus on implementation and results.

In 2003, program planning will require renewed guidance to all countries; particularly related to adequate strategies or interventions in response to multisite study results in specific populations.

Guatemala

Civil society and the Ministry of Health met to design a workplan for 2003. It has been circulated for comments and is pending official dissemination.

Panama

Revision of the strategic plan by the new staff at Panama's NACP continues. Technical support will be provided on an as needed basis.

Honduras

During this quarter several sectors working actively on the national response to the HIV/AIDS epidemic finalized the design of the new national strategic plan. It was made official by the Minister of Health in a special ceremony on AIDS World Day.

Legislators

There were no activities with legislators this quarter.

Next Steps

- Provide support to responses from the technical review panel, by January 2003, to country proposals submitted to the Global Fund on AIDS, TB and Malaria. When and if approved, an assessment of the effects of funding will be necessary, given the magnitude of the requested amounts by each country.
- From time to time, monitor PARLACEN's interest in pursuing the already initiated task of an AIDS Model Law.

1.1.4 Analysis of specific program components of the API Indicator.

The sub-indexes of the Political Support and the Legal and Regulatory Framework dimensions of the API measure PASCA's regional programs' objectives and results more effectively. End of project targets (August 31, 2003) for these two dimensions were set as follows: Political Support, five points; and Legal and Regulatory Framework, three points.

Next Steps

- To continue monitoring political changes within the areas of political support and legal regulatory framework.

LLR 1.2 Regional and national advocacy agendas effectively implemented.

Indicators

1.2.1. Number of advocacy plans initiated reflecting the priorities identified in the national agenda.

AIDS advocacy national agendas were reviewed during this period in Honduras, Nicaragua, Panama, and Guatemala, as result, advocacy plans were also updated, especially in the themes of access to HIV/AIDS medical treatment and legal regulations.

Direct technical assistance was provided to the strategic alliances in each country as requested.

Next Steps

- Provide TA for all strategic alliances on specific needed issues.
- Prepare briefs and fact sheets on themes of regional importance.
- Finish the design and implementation of advocacy plans.
- Present advocacy model at the World AIDS Conference.

Indicator

1.2.2. Several implemented advocacy plans have achieved their stated objectives.

During this period two advocacy action plans were implemented and achieved the stated objectives:

- El Salvador achieved price reduction with pharmaceutical companies.
- Honduras purchased antiretrovirals for 128 PLWHAs.

Next steps

- Provide follow-up and continued support for implementation of current advocacy plans implementation.
- Continue providing TA to the Strategic Alliances.

LLR1.3 Participatory program planning teams implementing action plans at the community level (Acción SIDA).

Indicators

1.3.1. Number of Acción SIDA community planning teams successfully completing the eight- step cycle.

As mentioned in the last quarterly report, the four original Acción SIDA sites (Tornabé and Puerto Cortés in Honduras, Puerto Barrios in Guatemala, and La Libertad in El Salvador) have successfully completed the eight-step cycle. The community planning teams in Tornabé and Puerto Barrios have allocated funds to three local NGOs and finished the implementation of their planned HIV/AIDS interventions. The community planning teams in La Libertad and Puerto Cortés have allocated funds to five NGOs and are in the process of completing their activities. The NGOs responsible for the implementation process, OCPRODEMUC (Puerto Cortés) and SERAPHIM (La Libertad), have been granted a two-month extension by PASCA to conclude their activities by the end of February 2003. The two-month extension was approved in order to allow the implementing NGOs time to reorganize their management and technical mechanisms.

The original four Acción SIDA sites are currently conducting AIDS prevention activities with in-school and out-of-school-youth, female street vendors (transactional sex), taxi drivers, marginal communities and people living with HIV/AIDS (PLWHAs). These populations were selected as a result of analysis of the local epidemiological information and perceived needs available at the time. However, after reviewing the results of the HIV/AIDS Multi-site Study recently conducted in the region, it was concluded that the original four Acción SIDA sites should shift their focus for their HIV/AIDS prevention interventions in terms of targeted audiences. Due to the epidemic's concentration in men who have sex with men (MSM) and commercial sex workers (CSW), PASCA has decided to only fund prevention activities in these two populations, in addition to self-help support groups for PLWHAs.

All of the original Acción SIDA sites conducted an initial base-line study of their targeted populations at the beginning of the project. Five of the seven local NGOs that conducted a base-line study have completed their HIV/AIDS prevention activities during this reporting period and have conducted a final study in order to gather data that will serve to evaluate the effectiveness of the project. The organizations that received a two-month extension will also conduct final studies at the end of their project.

With respect to the additional six Acción SIDA sites, all but Morazán in El Salvador have presented their HIV/AIDS community analysis. Morazán's community planning team will present its results in February 2003.

Results of the HIV/AIDS Multi-Site Study on MSM and CSW were disseminated to community planning team members in order to update information on the groups most affected by AIDS in the region. Having updated HIV/AIDS prevalence and sexual behavior information enabled teams to select target audiences for prevention activities according to the reality of the epidemic. As the study was not carried out in all of the communities with which Acción SIDA works, the results of the closest surveyed site to each community were used as a reference. The following populations were selected by the planning teams that have submitted their community analysis:

- Chorrillo, Panamá- MSM, CSW, PLWHA;
- Bluefields, Nicaragua- MSM, CSW, PLWHA;
- Génova, Guatemala- female head of household street vendors (transactional sex);
- Dangriga, Belize- female street vendors (transactional sex);
- Rivas, Nicaragua- CSW.

Four proposal-writing workshops based on the behavior change model, "cadena de cambios", were conducted during this reporting period in Bluefields, Nicaragua, El Chorrillo, Panama, Génova, Guatemala, and Dangriga, Belize. These workshops were held so that local NGOs could prepare their own project proposals. To date, three proposals have been received from El Chorrillo in Panama and one from Génova in Guatemala, which are in the process of revision by the technical committee. In Bluefields, Nicaragua there were no responses to the call for proposals at the local level; a new call for proposals was made nation-wide. In Dangriga, Belize, no proposals have been presented.

Next Steps

- Complete the implementation of HIV/AIDS interventions at the two remaining original sites.
- Present project results to community planning teams and PASCA's staff in the original sites at the end of the upcoming reporting period.
- Design work plans for the Acción SIDA committees for 2003.
- In April of 2003, Synergy will conduct an external evaluation of the Acción SIDA model – while the outcome of this evaluation will be critical in deciding the future direction of the model, there remains a current need to address priority high-risk populations (i.e. CSW, MSM) with the planning committees. This will be addressed through the hiring of a temporary employee with expertise in the context of prevention among MSM, and a consultant with expertise in the context of prevention with CSW during the next project quarter.
- The temporary employee and consultant will work with the planning committees and PASCA staff to develop technical assistance plans to address vulnerability reduction in the broader context of the Acción SIDA communities. These plans will help to guide the overall process as they focus intervention on high-priority populations, but also receive guidance to address the broader contextual factors that impact effective prevention.
- Present HIV/AIDS Community Analysis results in Morazán, El Salvador.
- Continue the call for local NGO proposals for HIV prevention interventions in the new sites.
- Initiate HIV/AIDS prevention interventions in the new sites.
- Provide follow-up on overall activities through PASCA's staff and members of the Acción SIDA committees.

The tables below show relevant aspects of the Acción SIDA committees' work by site:

GUATEMALA

PLACE	PUERTO BARRIOS	GENOVA	
CYCLE PHASE	Cycle completed. Interventions being implemented (phase 8).	Elaboration, presentation and revision of proposals (phase 7).	
COMMITTEE MEMBERS	<ol style="list-style-type: none"> 1. Ministry of Education 2. Empresa Portuaria 3. Nelda Arzú, Teacher 4. Social Security 5. Mass Media 6. National Hospital 7. Garífuna Project 8. JEDI 9. ASOMUGAGUA 10. Human Rights Office (new member) 11. Red Cross (new member) 	<ol style="list-style-type: none"> 1. Asoc. Padres de Familia Escuela Cristóbal Colón 2. Barrio Italia 3. Colegio Guadalupe 4. Dirección Escuela Cristóbal Colón 5. Centro de Salud 6. Iglesia Católica 7. Comité Pastoral de Salud Iglesia Evangélica 8. Ministerio de Educación 9. Comité Pro-mejoras de Génova 10. Policía Nacional 11. Organismo Judicial 12. Proyecto Vida 13. Comadronas 	
SELECTED AUDIENCES FOR INTERVENTION	In-school adolescents, out-of-school adolescents in marginal neighborhoods. New audiences: MSM and CSW.	Female head of household street vendors (transactional sex).	
NGO AGREEMENTS	JEDI - \$10,000 finished ASOMUGAGUA - \$ 8,000	N/A	
PROCESS RESULTS	<ul style="list-style-type: none"> • New action plan developed. • New committee members incorporated. • Final intervention studies completed by JEDI and ASOMUGAGUA. 	<ul style="list-style-type: none"> • Elaboration and presentation of proposals by local NGOs. • Participation of two NGOs in the proposal writing workshop: Proyecto Vida and Cruz Blanca. 	
CHALLENGES	<ul style="list-style-type: none"> • Receive project implementation proposals with the newly identified populations. • Define if the Acción SIDA committee should continue independently or under the multi-sectoral department commission. • Community is very traditional/conservative. 	<ul style="list-style-type: none"> • Involve municipal authorities in the Acción SIDA process. 	

EL SALVADOR

PLACE	PUERTO LA LIBERTAD	MORAZAN	
CYCLE PHASE	Cycle completed. Intervention being implemented (Phase 8).	Situational analysis (HIV/AIDS Community Diagnostic) (Phase 5).	
COMMITTEE MEMBERS	<ol style="list-style-type: none"> 1. Barrio El Calvario 2. Playa El Mahahual 3. Playa San Diego 4. Fundación SERAPHIM 5. INALL 6. Playa El Cocal 7. Unidad de Salud . 8. PASMO 9. Cantón Melaza 10. Cruz Roja Salvadoreña 11. Equipo Contra el SIDA 12. Unidad de Salud Chiliupan 13. ISSS 14. Fundeguadalupe 15. Fuerza Naval 16. ADESCO 17. Comadronas 18. Policía Nacional Civil 19. Gerencia Adolescencia del MINSA 20. FUNDASIDA 	<ol style="list-style-type: none"> 1. DDHH 2. Comité de Adolescentes de Delicias de Concepción 3. SIBASI 4. Hospital Nac. San Francisco Gotera 5. Parroquia de Gotera 6. ISSS de San Fco. Gotera 7. Dirección Deptal de Educación de Morazán 8. AMS 9. Proyecto Mujer, Población y Medio Ambiente 10. Centro de Educación Extra Escolar, San Fco. Gotera 11. Personas Viviendo con VIH 12. Médicos por el Derecho a la Salud 13. Alcaldía Municipal de Gotera 14. Stereo Morazán 15. Policia Nacional Civil 16. CENTA, Ministerio de Agricultura y Ganadería 17. Destacamento Militar No.4 	
SELECTED AUDIENCES FOR INTERVENTION	<ul style="list-style-type: none"> • In-school adolescents. • Female food street vendors. • Bus and taxi drivers in the port city. • New audiences: MSM, CSW, PLWHA 	N/A	
NGO AGREEMENTS	FUNDASIDA - \$ 4,000 finished FUNDEGUADALUPE \$10,000 finished SERAPHIN \$18,000 extended to March 2003.	N/A	
PROCESS RESULTS	<ul style="list-style-type: none"> • Final interventions studies were conducted by FUNDASIDA and FUENDEGUADALUPE. • FUNDEGUADALUPE has completed its intervention with in-school adolescents. 	N/A	
CHALLENGES	<ul style="list-style-type: none"> • Work towards committee independence. • Project implementation with the newly identified populations. 	Present community HIV/AIDS analysis in early 2003.	

HONDURAS		
PLACE	PUERTO CORTES	TORNABE
CYCLE PHASE	Cycle completed. Intervention being implemented (Phase 8).	Cycle completed. Intervention being implemented (Phase 8).
COMMITTEE MEMBERS	<ol style="list-style-type: none"> 1. Bomberos Voluntarios 2. Centro de Salud 3. Patronato Barrio Medina 4. Iglesia Católica 5. Instituto Franklin Delano Roosevelt 6. Patronato Barrio Buenos Aires 7. Bajamar 8. Patronato Barrio Pueblo Nuevo 9. Medios de Comunicación 10. Patronato Barrio El Porvenir 11. Hospital Nacional 12. Grupo Génesis 13. Municipalidad 14. Colegio de Médicos de Honduras 15. Abogados individuales 16. OCPRODEMUC 17. Patronato Barrio San Ramón 18. Acción Menonita 19. COMVIDA 20. Iglesia Adventista 21. Taxistas 22. Patronato El Centro 23. Comité de Derechos Humanos 24. Cruz Roja 	<ol style="list-style-type: none"> 1. Clubs de Danza 2. Comité de Salud 3. Grupo de la Tercera Edad 4. Promotoras de ENMUNEH 5. Comadronas 6. Curanderos 7. Barrio El Centro 8. Patronato New Cork 9. Grupo de Autapoyo 10. Amas de Casa 11. Iglesia Evangélica 12. Médicos Sin Fronteras 13. Representante Comunidad San Juan 14. Centro de Salud 15. Maestra 16. Artesanos 17. Estudiantes
SELECTED AUDIENCES FOR INTERVENTION	<ul style="list-style-type: none"> • In-school adolescents 13 –18 years of age. • Out-of-school adolescents in select neighborhoods. • PLWHAs. • New audiences: MSM, CSW. 	<ul style="list-style-type: none"> • In-school adolescents and their parents. • PLWHAs. • Continuation of work with same audiences.
NGO AGREEMENTS	OC-PRODEMU - \$10,000 extended to March 2003. GRUPO GENESIS - \$4,000 finished.	ENMUNEH - \$10,000 finished. Renewal of agreement with ENMUNEH for 2003.
PROCESS RESULTS	<ul style="list-style-type: none"> • Hosted encounter of self-support groups. • Grupo Genesis (PLWHAs) requested legal representation. • Five counseling centers for out-of-school youth were created with local private sector support. 	<ul style="list-style-type: none"> • All Garifuna community members involved in Acción SIDA process. • Final community intervention study completed by ENMUNEH
CHALLENGES	<ul style="list-style-type: none"> • M&E: To document the community planning process. • Receive project implementation proposals with the newly identified populations. 	<ul style="list-style-type: none"> • Share lessons learned with other Garifuna communities. • Identify factors that are influencing the high number AIDS related deaths in the community.

NICARAGUA

PLACE	RIVAS	BLUEFIELDS
CYCLE PHASE	Acción SIDA committee training and work plan elaboration (Phase 4).	Selection of priority audiences (Phase 6).
COMMITTEE MEMBERS	<ol style="list-style-type: none"> 1. Ministerio de Educación 2. Representante de la Juventud 3. Andrea Nestora Martinez, Partera y Brigadista comunitaria 4. Poder Judicial 5. MINSAL local 6. Policia Nacional 7. CEPS 8. ICAS 9. CEPRESI 10. NICASALUD 11. Amas de Casa 	<ol style="list-style-type: none"> 1. Iglesia de Cristo 2. Universidad 3. SILAIS – MINSAL 4. AMNLAE/FPIA 5. Campaña Costeña de Lucha Contra el SIDA 6. Alcaldía 7. Iglesia Jerusalem 8. Centro de Salud 9. Amas de Casa 10. Cruz Roja 11. Acción Médica Cristiana 12. Médicos sin Fronteras 13. Universidad Interamericana de Bluefields 14. Ministerio de la Familia 15. CEDEHCA 16. Dueñas de bar 17. Abogados
SELECTED AUDIENCES FOR INTERVENTION	<ul style="list-style-type: none"> • In-school adolescents 15 –19 years of age. • MSM. • Truck drivers. • Commercial Sex Workers (CSW) 	<ul style="list-style-type: none"> • MSM • CSW • Housewives (transactional sex).
NGO AGREEMENTS	NICASALUD (CEPS, CEPRESI and ICAS) \$5,800 finalization of Project implementation.	N/A
PROCESS RESULTS	<ul style="list-style-type: none"> • Observation visit of Committee members to Chinandega’s local coordinating committee. • Support from USAID’s Bilateral Mission has been key in the implementation of the Acción SIDA process in Nicaragua. • Strengthening of the Acción SIDA committee and definition of its work plan for the next calendar year. 	<ul style="list-style-type: none"> • HIV/AIDS Community Analysis was presented. • Original call for proposals made at the local level without results, despite training 6 local NGO in proposal writing.
CHALLENGES	Integrate community-planning activities into ongoing HIV/AIDS prevention interventions by NGOS.	<ul style="list-style-type: none"> • Request for proposals at the national level. • Strengthening cooperation in order to implement activities in Bluefields between national and local NGOs.

PANAMA	
PLACE	EL CHORRILLO
CYCLE PHASE	Situational analysis (HIV/AIDS Community Diagnostic) and consolidate the committee (Phase 5).
COMMITTEE MEMBERS	<ol style="list-style-type: none"> 1. Comité Torrijista del Chorrillo 2. Comité Femenino 3. Multifamiliar # 3 4. Dirigente de Barraza 5. Edificio 24 de diciembre 6. Comité de Salud de El Chorrillo 7. Centro de Salud de El Chorrillo 8. Comerciantes 9. Ejército de Paz 10. Ministerio de Restauración Cuadrangular 11. Ministerio de Restauración de la Cueva del Amor 12. Comunidad Carismatica Hosana 13. Ministerio de Oración Cristiana 14. Santuario Nueva Vida 15. Centro Amador Guerrero 16. Escuela Bonifacio Pereira 17. Cruz Roja 18. APLAFA 19. PROBIDSIDA 20. Cuerpo de Bomberos
SELECTED AUDIENCES FOR INTERVENTION	<ul style="list-style-type: none"> • MSM • CSW • Parents of primary school children.
NGO AGREEMENTS	N/A
PROCESS RESULTS	<ul style="list-style-type: none"> • HIV /AIDS Community Analysis was presented. • Training of 7 NGOs (PROBIDSIDA, Cruz Roja Panameña, ANADESAC, EMESSAR, APLAFA, IIDESIA, AHMNP) in proposal writing. • Call for project intervention proposals.
CHALLENGES	<ul style="list-style-type: none"> • Representation and Inclusion: Involve local authorities and other NGOs.

BELIZE	
PLACE	DANGRIGA
CYCLE PHASE	Acción SIDA committee training and work plan elaboration (phase 4).
COMMITTEE MEMBERS	<ol style="list-style-type: none"> 1. National AIDS Commission 2. Southern Regional Hospital 3. Red Cross 4. Teachers 5. Belize Family Life Association 6. Police Department 7. Ecumenical College 8. Delille Academy 9. Health Living Youth Group 10. Peace Corps 11. Dangriga's HIV/AIDS Society 12. HECOPAB-SRH 13. Ministry of Human Development 14. Baptist Church
SELECTED AUDIENCES FOR INTERVENTION	Selection in process.
NGO AGREEMENTS	N/A
PROCESS RESULTS	<ul style="list-style-type: none"> • HIV/AIDS Community Analysis was presented. • Call for HIV/AIDS prevention interventions proposals.
CHALLENGES	<ul style="list-style-type: none"> • Representation and Inclusion: Motivate community members to participate. • Find local consultant for parts of the process. • Obtain legal representation for Dangriga's AIDS Society in order to be able to implement local interventions and allocate funds.

LLR1.4. Regional Multi-Site Study provides timely information about populations at risk to decision makers.

Indicators

1.4.1 Number of countries where the multisite study has been completed and results disseminated to decision-makers.

Main activities related to the multisite study this quarter include:

- Follow-up to closing the study in all five core countries:
 - In Honduras, Guatemala and El Salvador
 - Drafting of the country reports was started.
 - In Nicaragua
 - HIV testing was completed.
 - Data sets were cleaned and made suitable for data analysis.
 - Drafting of the country reports was commissioned.
 - In Panama
 - Data sets were completed.
 - Drafting of the country reports was commissioned.
- Specimens' shipment and testing for HIV QC, plus Gonorrhea and Chlamydia PCR:
 - Specimens' shipments to Atlanta (HIV QC) and Panama (PCR for *Gonococcus* [GC] and Chlamydia [CT]) --from Guatemala, El Salvador and Nicaragua were sent.
 - Specimens for PCR testing were shipped to Panama from El Salvador and Nicaragua.
 - PCR testing of Central American countries in Panama already is in process.
 - We are standing by for the results of HIV detuned assay from the CDC in Atlanta.
- Data Analysis
 - Data sets for all countries were cleaned and an analysis was done in order to begin writing country reports.
- Implementation in remaining countries
 - PASCA has begun the purchase of supplies for implementation of the study in Belize.
 - We are standing by for an official commitment by the MOH of Costa Rica.
- Reports
 - Technical country reports are in preparation for all countries. There will be a report for each population per country. Layouts for these have been prepared to standardize the process.
 - Presentations will be scheduled for first quarter of CY03.
- Use of data
 - Multicenter results continue to be quoted extensively in the Central American countries and internationally, i.e. the World Bank will use the results for the new resource allocation exercises in Panama and Guatemala.
 - PAHO has requested a summary to be presented at the Foro 2003 (the Latin American AIDS Conference) next April.

- Targeted PowerPoint presentations using EMC results were prepared for Accion SIDA committees.
- Targeted PowerPoint presentations using EMC results were prepared for strategic alliances.

NEXT STEPS

- Review the final drafts of MSM reports from Honduras, Guatemala, El Salvador, Panama, and Nicaragua.
- Provide technical feedback for the preparation of the technical reports
- Review the final drafts of FSW reports of Honduras, Guatemala, El Salvador, Panama and Nicaragua.
- Order supplies for Belize and Costa Rica and proceed with training of local counterparts.

Indicator

1.4.2 Number of MOUs signed with partners.

Memorandum of Understandings (MOUs) were signed with the following NGOs that participated as partners of the Ministry of Health in each country where the Multi-Site Study was conducted:

- El Salvador-Entre Amigos and Flor de Piedra.
- Guatemala-ASI and OASIS.
- Honduras-ADECO, FFS, PRODIM, PRISMA, Colectivo Violeta, and Fraternidad Sampedrana de Lucha Contra el SIDA.
- Nicaragua-TESSIS, CEPRESI, and Xochiquetzal.
- Panamá-Hombres y Mujeres Nuevos de Panamá and EMESA.

Intermediate Result Two:

Improved Prevention, Support Systems and Other Services Implemented.

Indicators

2.1.1 Client satisfaction with quality of products disseminated through the system.

A client satisfaction assessment was conducted at the beginning of the year and results were included in the last quarterly report.

2.1.2 Number of persons using the system.

A survey was conducted last reporting period and the results were included in the corresponding quarterly report.

Pro-active Information System (PIS)

This quarter there was continued dissemination of information to NGOs and other instances working on HIV prevention and care in the Central American region. Main topics included access to medications, ARVs, and the status of vaccine trials.

There was continued support to the Strategic Alliances of the region:

- For Guatemala's Alliance for Prevention in Men, support was provided for an assessment of the institutions that work with or have a majority of male personnel. This will help them prioritize actions in these populations.
- El Salvador's Alliance for Sexual and Reproductive Health received TA to help them define their advocacy targets.

Special PowerPoint presentations were prepared for the Acción SIDA Committees located in port cities, with the results from the multicenter study for Guatemala, El Salvador, and Honduras.

New materials were integrated to PASCA's web page. This will be continued in an ongoing basis.

New Projection Exercises and Economic Impact Studies

The PIS provided support for the preparation of the epidemiological projections of HIV for Panama and El Salvador. The preliminary report of the Guatemalan estimates (from 1980 to 2010) continued to be disseminated to specific audiences. These projections will be the basis for the upcoming economic impact studies. PASCA will conduct an economic-impact study for Guatemala, El Salvador, and Panama.

Next actions

- Conclude the redesign of PASCA's Web page.
- Support the dissemination of the Multisite Study's results.
- Continue the dissemination of the HIV epidemiological projections for Panama, El Salvador, and Guatemala.
- Support the adaptation Multisite Study results for specific materials for Accion SIDA, Strategic Alliances, and PLWHAs.
- Continue with the dissemination of information for all the identified audiences.
- Develop materials requested by the Strategic Alliances.

LLR 2.2 Increased utilization of skilled local consultants.

Indicators

2.2.1. Number of days consulting services provided by the consultant network.

Technical assistance provided by PASCA local consultants during this quarter was for 321 days with a cumulative total of **4,781** days during the life of the project. See details below.

Number of Technical Assistance Days October-December 2002

Country	# days	Technical Area	# of Recipients	Consultant
Guatemala	36	Proposal Development, Advocacy, Project Design, Community Planning, Conflict Resolution.	1 strategic alliance, 2 public organizations, 1 community, 1 advisory committee.	Carlos Serrano Fernando Cano, Alberto Araica, Romeo Lucas.
El Salvador	43	Advocacy, human rights.	1 community, 1 strategic alliance, 2 public and private organization, PLWHAs	Jaime Argueta, Alexia Alvarado.
Honduras	94	Advocacy, Research.	2 strategic alliances, PLWHAs.	Jeremías Soto, Rosa González
Nicaragua	63	Research, Advocacy, Community Planning.	2 strategic alliances, 1 community, PLWHAs.	María Isabel Moreno, Alberto Araica, Fernando Cano
Panamá	75	Community Planning, Proposal Development	1 community.	Manuel Burgos, Belkis de Moreno, Fernando Cano.
Regional	10	Community Planning		Fernando Arévalo
Total	321			

The update of the consultant database was completed. It is now in the process of being included in a CD, in a user-friendly format, which will be disseminated and located in PASCA's web site.

Next Steps

- Implement technical support activities to begin addressing the identified topics with PASCA's directory of professionals.
- Select participants and sites to conduct visits in the region for members of PASCA's directory of professionals.

- Update data for professionals database.

Indicator

2.2.2. Client satisfaction with the quality of the consultant services provided by consultants on the roster.

At the beginning of the year, a client satisfaction assessment of the quality of the consultants' services was conducted with twenty-five (25) representatives who had received technical assistance from the professionals' in three countries of the region (Guatemala, Panamá, and El Salvador). The majority of respondents graded the technical assistance they received as very satisfactory. Yet, often respondents indicated that the time assigned to the TA was insufficient and needed more time from the consultants.

Next Steps

- Incorporate suggestions and recommendations resulting from the satisfaction assessment.

LLR 2.3. The framework for a sustainable mechanism completed and implementation in progress.

Indicators

2.3.1 Market Survey completed.

The final report of the market survey was completed by Economía, Sociedad y Ambiente (ESA) in May, 2002. ESA's study results were complemented by a strategic analysis which was taken into consideration in the proposal design for PASCA's extension. However, later USAID/G-CAP informed PASCA about their decision to continue supporting HIV/AIDS regional initiatives. Likewise, the HIV/AIDS Global Fund sponsored by the United Nations, began providing financial assistance to complement currently available resources in the countries, including Central America. Based on these circumstances, PASCA made a strategic decision to continue pursuing the development of a sustainable mechanism that will eventually replace PASCA's products and services.

2.3.2 Validate the plan with partners.

The newly formed technical advisory group met for the second time in October 2002 with the following objectives: 1) Define the profile and organizational framework of the transitional advisory committee; 2) Elect the coordination team for the transitional technical advisory group; 3) Define the organizational framework for electing a permanent advisory committee; 4) Define the committee's strategic objectives and operational plan.

During the work sessions of the technical advisory group meeting, the following strategic objectives were decided upon:

- Serve as a technical advisory group in Central America which supports PASCA's plans, where activities are elected democratically and with a transparent processes.

- Promote a favorable climate for developing sustainable activities with the participation of a multiple sectors of society in Central America.
- Incite a multi-sectoral response to HIV/AIDS through the formation of a joint political agenda proposal for Central America.

2.3.3 Implement at least one major component of the framework.

The technical advisory group will meet again in February 2003 to provide feedback to PASCA on its new extension proposal and plan the implementation phase of the sustainable mechanism.

OTHER ACTIVITIES

El Salvador Bilateral Project

Seraphim, an NGO, continued the implementation of a HIV/AIDS prevention intervention with young female street vendors in Puerto La Libertad. Its agreement has been extended to March 2003.

The remaining budget is \$5,750 with continued project implementation.

Guatemala Bilateral Project –

CONCASIDA II/ RED DEL SUR-OCCIDENTE

With approximately US\$5,100 remaining from CONCASIDA II, an agreement was made with Proyecto Vida in Coatepeque, Guatemala to create and strengthen the network of organizations working in HIV/AIDS prevention in Guatemala's southwestern region. The project will help to coordinate the response in the southwest region of the country, as well as support the forthcoming Accion SIDA work in the new site of Génova, Quezaltenango.

During this reporting period, the network members continued the work laid out in their strategic plan and began implementing their operational plan. They conducted an HIV/AIDS awareness campaign in the southwest region of Guatemala to commemorate AIDS Day.

CASA DE LA MUJER

No expenditures were made during this reporting period for Casa de la Mujer. All activities this reporting period were related to the planning of the project.

Honduras Bilateral Project-

ACCION SIDA

No expenditures were made during this reporting period for new Acción SIDA sites in Honduras. Activities during this reporting period were related to both the planning of the project and to the identification of potential sites.

ANNEXES

Annex I
TRAINING ACTIVITIES INFORMATION

Month	Dates	Activity Name	Type of activity	Number of Participants		Results related	Cost
				Men	Women		
Sept.	3-6	Cómo facilitar Grupos de Autoapoyo	Regional	16	12	LLR1.1.2	U\$14,423.56
Sept/Oct	Sept. 30 Oct. 2	Ejercicio de Proyecciones de VIH y SIDA en Panamá	National	5	10	LLR1.4	U\$ 1,047.00

Annex II-PASCA POLICY COMPONENT - HIV/AIDS POLICY CHANGE MONITORING MATRIX – December 2002

COUNTRY	Legislation	Implementing Rules and Regulations	Executive Orders	Ministerial Decrees	Directives and Guidelines	Professional Practice Standards	National Action Plans	TOTAL
<i>Guatemala</i>								
1997	2	0	0	0	1	0	0	3
1998	1	1	0	1	0	0	0	3
1999	1	0	0	0	0	0	1	2
2000	1	0	0	0	3	0	1	5
2001	1	0	0	2	0	0	0	3
2002	0	1	2	0	0	1	1	5
<i>Honduras</i>								
1997	1	1	0	1	2	0	0	5
1998	0	1	0	0	0	0	0	1
1999	1	0	0	0	0	0	1	2
2000	0	1	0	0	0	1	0	2
2001	1	0	0	4	1	0	0	6
2002	0	0	1	1	0	0	1	3
<i>El Salvador</i>								
1997	0	0	0	0	0	0	1	1
1998	0	0	0	0	0	0	1	1
1999	0	0	0	0	0	0	1	1
2000	0	0	1	1	3	0	1	6
2001	1	1	0	0	1	0	1	4
2002	2	0	0	0	0	0	0	2
<i>Nicaragua</i>								
1997	0	0	0	0	0	0	0	0
1998	0	0	0	0	0	0	0	0
1999	1	0	0	0	0	0	1	2
2000	0	0	0	0	0	0	1	1
2001	0	0	0	0	0	0	0	0
2002	1	0	0	0	0	0	0	1
<i>Panamá</i>								
1997	0	0	0	0	0	0	0	0
1998	0	1	0	0	1	0	0	2
1999	1	1	0	2	1	1	1	7
2000	1	0	2	0	0	0	1	4
2001	0	0	0	3	0	0	2	5
2002	0	0	0	0	0	0	0	0
<i>REGION</i>								
1999	0	0	0	0	1	0	0	1
2000	0	0	0	0	2	0	0	2
2001	0	0	0	0	0	0	0	0
2002	0	0	0	0	0	0	0	0
<i>TOTALS</i>								
1997	3	1	0	1	3	0	1	9
1998	1	3	0	1	1	0	1	7
1999	4	1	0	2	2	1	5	15
2000	2	1	3	1	8	1	4	20
2001	3	1	0	9	2	0	3	18
2002	3	1	3	1	0	1	2	11
<i>Cumulative</i>	13	7	3	14	16	3	16	80

Positive policy changes are defined as policy actions that favor the overall environment for HIV/AIDS prevention programs and/or as the removal of adverse actions, i.e. barriers. This matrix registers the number of policy changes during the reporting period. The attached narrative describes the nature and significance of the policy movement for each country.

COMMENTS ON THE MONITORING OF POLICY CHANGES IN CENTRAL AMERICA

GUATEMALA

The Policy Inventory conducted in Guatemala during Year 1 of the project identified 15 policy actions. Most of the policy actions fall within the category of constitutional provisions and legislation. The most important include:

- Ministerial Decree 1190-87, which creates the National AIDS Control Program. This instrument contributed to define a government response against AIDS
- The creation in February 1995 of the “Coordinadora de Sectores de Lucha Contra el SIDA”, a loose consortium of public and private agencies and institutions, as well as donors, with the purpose of coordination programs and activities against the epidemic.
- Modifications in the Health Code and norms and procedures for surveillance and control of HIV/AIDS/STDs, established in 1990.
- Legislative Decree 27-95, which includes the Blood Bank and Transfusion Medicine Law.
- A 1996-99 Midterm Action Plan sponsored by PAHO.

During 1997 the following policy actions were completed:

- Enactment of the new version of the Health Code (October, 1997). This law is relevant to HIV/AIDS activities because it proposes a substantial change in the health care delivery system, which will facilitate access and use by people living with HIV/AIDS, as well as improvement of epidemiological surveillance.
- Enactment of the revised Transfusion Medicine and Blood Bank Services Law (September, 1997). This law is relevant to HIV/AIDS prevention because it regulates safe blood services.
- The Government of Guatemala, through its Ministry of Health and Social Welfare established regulations to provide prophylactic treatment with AZT to prevent vertical transmission of HIV.

The Guatemalan Congress considered the discussion of a National AIDS law, which was not approved this year.

- “Ley de Violencia contra la Mujer” (Law for the prevention of women violence) was passed by the Guatemalan Congress in 1998. Civil Military Police and Judges have been informed of its scope.
- The Ministry of Health published an updated version of its guidelines and regulations for health care delivery. This included but was not limited to the following Programs: STD/AIDS, Tuberculosis, Mother-Child, Reproductive Health.

- “Plan Nacional de Atención Integral a los y las Adolescentes” (National Plan for the Integral Care of Adolescents) was approved and made public by the Minister of Health late in 1998. It includes topics on reproductive health and prevention of sexually transmitted diseases.

In early 1998 the national HIV/AIDS umbrella law was re-introduced for discussion in Congress, but failed to be approved. A new attempt to discuss the law was made at the end of CY98, but no consideration was given to it during the 98/99 congressional term.

In 1999, a revision of the policy actions enacted in Guatemala showed the following results:

- “Ley de Promoción y Dignificación de la Mujer” (Law for the Promotion and Dignity of Women) was passed by the Guatemalan Congress in March 1999.
- The National Strategic Plan for STD and AIDS Prevention was made official on November 2nd, 1999. PASCA provided technical and financial support for its formulation.
- In addition, a revision of the STD guidelines is in process in order to include the Syndromic Management approach. This effort is being led by the MTC Department at the Ministry of Health.

In 2000, a revision of the policy actions enacted in Guatemala showed the following results:

- The Guatemalan Congress approved the AIDS Law in March of this year. President Portillo sanctioned it in June.
- National Plan for Reproductive Health was approved by the MOH in August.
- Guidelines for Family Planning, STIs and HIV, and bio-safety were published by the MOH in September.
- Executive Order SP-G-22-2000 through which the National AIDS Control Program in the Ministry of Health is directed to work on the formulation of the regulatory framework for the AIDS Law.
- The National Multi-sectoral Commission of organizations working on STI/HIVAIDS prevention was sworn. This was registered under Ministerial Decree SP-M-1349-2000.
- Ministerial Decree SP-M-1307-2000 declaring May the month for women’s health. Ministry of Health and others are encouraged to implement actions aimed at promoting womens’ health, including AIDS prevention.

2001, a revision of the policy actions enacted in Guatemala showed the following results:’

- Ministry of Economy released the regulations for condom marketing and distribution.
- The Population and Social Development Law was passed in October.
- IEC campaign on reproductive health was officially launched in November.

2002, a revision of the policy actions enacted in Guatemala showed the following results:

- National Policy on Population and Development was approved by Executive Order. Contents of this policy favorably influence HIV and reproductive health programs, hence improving the national response.
- A revised AIDS Strategic Plan was made official on August 28.

- Protocols for management of PLWHA with ARVs were presented officially.
- President Portillo passed an executive order approving emergency funds (Q 500,000) to purchase ARVs for PLWHA attending public health services.
- The cabinet signed the regulatory framework of the AIDS Law.

HONDURAS

During 1996, the Inter-American Development Bank, through its AIDS Prevention Support Program, completed a comprehensive assessment of the HIV/AIDS legal and regulatory framework in Honduras as part of its technical assistance program for the Ministry of Health. PASCA summarized key findings from that assessment and used them as the baseline legal and regulatory framework report.

A summary of changes in 1997 follows:

- An agreement between the Minister of Education and the Minister of Health was signed in order to strengthen their efforts towards the prevention of STD/HIV/AIDS and Cholera.
- Congress approved Blood Bank Law. It will allow the Red Cross/Honduras to regulate the collection and distribution of blood in the country, guaranteeing its safety.
- Regulations for the Blood Bank Law were drafted and approved by the Ministry of Health at the end of 1997.
- A policy was developed by the Honduran MOH to introduce the Syndromic Management of Sexually Transmitted Diseases. A set of guidelines and manuals was designed accordingly.
- Guidelines for the management of pediatric AIDS were developed and put into effect by the Ministry of Health

In 1998, a revision of the policy actions enacted in Honduras showed the following results:

- Guidelines for the management AIDS in Adults were developed and put into effect by the Ministry of Health

In 1998 there was a lot of effort put into the National AIDS Policies and the National Strategic Plan for STD and AIDS Prevention, however, conclusion of these actions was postponed due changes in country priorities in light of Hurricane Mitch

In 1999, a revision of the policy actions enacted in Honduras showed the following results:

- The Honduran Ministry of Health sanctioned its National Policy on AIDS.
- The Honduran Ministry of Health also sanctioned its National Strategic Plan for STD and AIDS Prevention. PASCA provided technical and financial support for its formulation.
- The Honduran Congress passed the National HIV/AIDS Law in November 1999. PASCA technically supported its formulation and facilitated the active participation interested parties. PASCA provided a channel for PLWA to voice their concerns and include their point of view in the approved Law.

In 2000, a revision of the policy actions enacted in Honduras showed the following results:

- Regulatory framework for the Blood Bank Law was approved in March.
- ARV project for HIV+ pregnant women is started by MOH.

In 2001, a revision of the policy actions enacted in Honduras showed the following results:

- Antiretroviral drugs were integrated to the essential drugs list of the Ministry of Health in June.
- Honduras National Congress passes a decree that approves L 3,000,000 Lempiras for the purchase of ARVs. November.
- Ministry of the Interior swore CONASIDA into office. November
- National Policy for Women was passed by the Instituto Nacional de la Mujer.
- National proposal of access to ARVs / by MOH
- Trust fund to support UNAIDS theme group activities was approved.

In 2002, a revision of the policy actions enacted in Honduras showed the following results:

- President Maduro established Foro Nacional de VIH/SIDA.
- The Ministry of Health approved the purchase of ARVs for PLWHA attending public health services.
- The Ministry of Health made official the new National AIDS Strategic Plan. This four-year plan was developed by many sectors working on the response to the HIV/AIDS epidemic in Honduras.

Actions in progress:

- Formulation of the Regulatory Framework for the AIDS Law.
- CONASIDA's organic Law is waiting for discussion at the National Congress.

EL SALVADOR

Through the Policy Inventory completed in El Salvador during Year 1 of the project PASCA identified 32 instruments relevant to the implementations of HIV/AIDS activities. Most of the instruments fell within the category of legislation, including constitutional provisions, major laws (e.g. Health Code, Civil Code, Penal Code.), and legislative decrees. Other categories were less frequent.

Some of the most important policy actions related to HIV/AIDS in El Salvador, already in place at the time when the inventory was prepared, include:

- Executive Decree No. 53 of May 25, 1993, which establishes the National AIDS Council (CONASIDA); its structure and functions; guidelines for dissemination of information, education, testing and counseling, epidemiological surveillance, and availability of preventive materials. Several observers have suggested the need to revise

and update this instrument in light of new information and the social implications of the epidemic.

- Articles 62-71 of the Health Code, which prescribe on the distribution and control of condoms, testing, surveillance, etc.
- During 1997 a National HIV/AIDS Strategic Plan was drafted.
- During 1998 PASCA supported the re-formulation and operationalization of the National Strategic Plan. It was made official by the Minister of Health in April, 1999.

In 2000, a revision of the policy actions enacted in El Salvador showed the following results:

- After an evaluation of the National AIDS Strategic Plan a new multisectoral M&E Plan was formulated.
- Guidelines for Counseling of the HIV/AIDS patient were developed. Governmental and non-governmental professionals were trained. Guidelines were printed and made public in September.
- Guidelines for HIV health care were formulated in a combined effort by MOH, Social Security, FUNDASIDA (an NGO) with TA from PASCA and UNAIDS. They were published in early November.
- Guidelines for the management of STIs were formulated and then published in early November.
- MOH agreed to provide HIV ARVs to 200 patients.
- El Salvador's Social Security agreed to provide HIV ARV to 200 patients. Patients are currently receiving therapy.

In 2001, a revision of the policy actions enacted in El Salvador showed the following results:

- Guidelines for HIV and STI health care were made official in April.
- AIDS Law was passed. Presidential ratification is pending.
- A new 4-year National Strategic Plan was formulated. August.
- MOH signs agreement with MSF for distribution of ARVs to HIV+ pregnant women

In 2002, a revision of the policy actions enacted in El Salvador showed the following results:

- The Supreme Court ruled in favor of thirty (30) injunctions presented by civil society groups to remove paragraph d) from Article 16 of the AIDS Law, which mandated that individuals seeking a job must have a mandatory HIV test performed.
- The National Assembly removed paragraph d) from Article 16 of the AIDS Law, which mandated that individuals seeking a job must have a mandatory HIV test performed

Actions in progress:

- AIDS Law regulations framework has been finished and awaits MOH concurrence.

NICARAGUA

The policy inventory conducted in Nicaragua identified several policy actions, including several National Action Plans supported by donors.

At the end of 1996 there was a major policy development with the enactment of the AIDS and Human Rights Law (December 6, 1996). This umbrella law set the stage for the advocacy of human rights, prevention, services for HIV seropositive individuals, and the structural basis for its application. At this time the law awaits enactment of its implementing regulations to be fully in force.

Since 1997, PASCA provided continuous support to the formulation of the implementing regulations of the AIDS and Human Rights Law enacted in late 1996. Due to internal political changes within the Health Commission late in 1998 and within the Ministry of Health, the process was delayed.

In 1999, a revision of the policy actions enacted in Nicaragua showed the following results:

- The National Assembly's Health Commission, after a comprehensive and multisectoral consultation process, presented a motion to the National Assembly in full to approve the Regulatory Framework for the AIDS Law. It was approved in November.
- The Ministry of Health presented the National Strategic Plan for STD and AIDS Prevention on December 1st. This was a multisectoral effort with governmental leadership and ample participation of NGOs working in AIDS prevention. PASCA provided technical and financial support for its formulation.

In 2000, a revision of the policy actions enacted in Nicaragua showed the following results:

- A revision of the National Strategic Plan for STD and AIDS Prevention resulted in the inclusion of two additional work areas: mobile populations and human rights.

In 2002, a revision of the policy actions enacted in Nicaragua showed the following results:

- The Nicaraguan Congress approved the General Health Code.

Actions in progress:

- The bylaws of the General Health code are being discussed prior to approval.

PANAMA

The Policy Inventory conducted in Panama during year 1 of the project identified 13 Policy actions, most of which fell also within the scope of constitutional provisions and legislation. The most important ones are:

- Ministerial Decree No. 28 of November, 1987, which dictates several measures for AIDS/STD prevention in Anton, Panama
- Law No. 26 of December, 1992, which establishes rules for prevention and control of HIV/AIDS in Panama: this law includes measures dealing with high risk behaviors,

testing, work exposures, special group (premarital, pregnant women), immigration, prevention of discrimination.

- Ministry of Health Directives, which norm mandatory reporting and contact tracing.
- Penal Code (arts. 252-254), which penalize “voluntary transmission” and failure to report cases.
- Safe blood and transplant legislation (several provisions)
- Executive Decree No. 53 of October, 1987, requiring mandatory testing of “high risk groups” (e.g. commercial sex workers, IV drug users, prisoners labeling).
- Executive Decree No. 2-A of January, 1994, which mandates all entertainment establishments to have condoms available.

In 1998, a revision of the policy actions enacted in Panama showed the following results:

- ZDV therapy for the prevention of vertical transmission of HIV was adopted at Santo Tomas General Hospital and the Panamanian Social Security System.
- “Normas Integrales de Salud para la Poblaciòn y el Ambiente” (Guidelines for Population Health and the Environment) were established by the Minister of Health. They list specific recommendations for IEC in STD/AIDS for age specific groups

In 1999, a revision of the policy actions enacted in Panama showed the following results:

- Creation of the “National Commission on Reproductive Health” through Executive Decree No. 2, February 9th, 1999.
- On March 24, 1999 the Ministry of Health made official its Strategic Plan for Reproductive Health. The Strategic Plan for STD and AIDS Prevention was included as a Strategic Objective.
- “Normas Tècnicas y Administrativas para la Atenciòn de Enfermedades de Transmisiòn Sexual” (Technical and Administrative Guidelines for STD Management) were published in May, 1999.
- Resolution No. 17537-JD on May 14th, 1999 from the Social Security Board, made an official request to President Balladares to declare the HIV/AIDS epidemic a “State Issue”.
- Panama’s Social Security agrees to provide HAART to all beneficiaries infected with HIV/AIDS.
- The Panamanian National Business Board (Consejo Nacional de la Empresa Privada – CONEP) created the National AIDS Business Council in October, following PASCA’s motivation. This is an unprecedented initiative from the private sector in the Central American region, that will help encourage the creation of other AIDS Business Councils in other countries.
- The Panamanian National Assembly approved the National AIDS Law on December 22, 1999. PASCA was directly involved in facilitating the process and securing the involvement of both the Ministry of Health and organized civil society.

In 2000, a revision of the policy actions enacted in Panama showed the following results:

- President Moscozo sanctions the AIDS Law in January 2000 and declares AIDS a national issue.

- Panama's Social Security budgets US\$ 5 million to provide HAART in 2001 to all beneficiaries infected with HIV/AIDS.
- Panama's MOH budgets US\$ 2.1 million to provide HAART in 2001 to HIV/AIDS patients.
- Panama's UNAIDS Theme Group drafted their Integrated (Response) Plan.

In 2001, a revision of the policy actions enacted in Panama showed the following results:

- The Ministry of Health approved the regulation framework for the AIDS Law.
- Ministerial Decree created the National Program of ITS/HIV/AIDS.
- The Ministry of Health created the National Council of AIDS
- A strategic plan for HIV/AIDS was completed, based on the Reproductive Health Plan.
- UNAIDS Theme Group formulated a targeted IEC plan to be implemented in 2002.

Actions in progress:

- A strategic plan for HIV/AIDS is being finalized, based on the Reproductive Health Plan.

REGION

In the third quarter of CY99 and at PASCA's encouragement, the Central American Federation of Workers pledged to include AIDS prevention for its members as one of their mandates in all seven Central American countries affiliates. A statement was signed by all members and released for public disclosure.

In October 2000, Central American Ministers of Health met in Panama City and declared AIDS prevention from mother to child and in adolescents as a priority in their agendas. This ministerial meeting served as the health sector preamble to the Iberoamerican Presidential Summit, also held in Panama in November, which dealt on Children and Adolescents.

In November 2000, the Iberoamerican Presidential Summit held in Panama City under the Actions for Equity and Social Justice Section of its Declaration, proposed to: "... implement urgent actions related to research, prevention, treatment and control of HIV/AIDS, given its distressing increase...and to promote international cooperation in this matter". The Summit also proposed to "...integrate sexual education programs to existing education systems, both formal and non-formal...and the prevention of sexually transmitted infections, teen pregnancy and premature parenthood."