



Narrative report of HIV Preventive programmes in the Slovak Republic as of 31-st December 2011

1. Introduction

HIV/AIDS pandemic is a human, social and economic disaster, with far-reaching implications for individuals, companies and countries around the world. Government Programme of the Slovak Republic (hereinafter "Government"). The Government considers health, equality in health care provision and access to health care as a fundamental right of every citizen to full and meaningful life. The Government will enforce the increasing importance of public health to preserve the health of citizens. National Programme of Prevention HIV/AIDS (the "NPP HIV/AIDS") in accordance with Government's policy statement builds on previous activities in the fight against HIV/AIDS in the Slovak Republic and the recommendations of the World Health Organization and UNAIDS (Joint United Nations Programme on HIV/AIDS). The basic objective of NPP HIV/AIDS remains limited spread of HIV in the Slovak Republic and mitigate the impacts of HIV and AIDS in the parts of society who are most affected. All activities must be consistent with the objectives of UNAIDS, based on the principle of human rights, scientific knowledge, to respect the national coordination and meaningful involvement of civil society, NGOs and companies in the fight against HIV/AIDS.

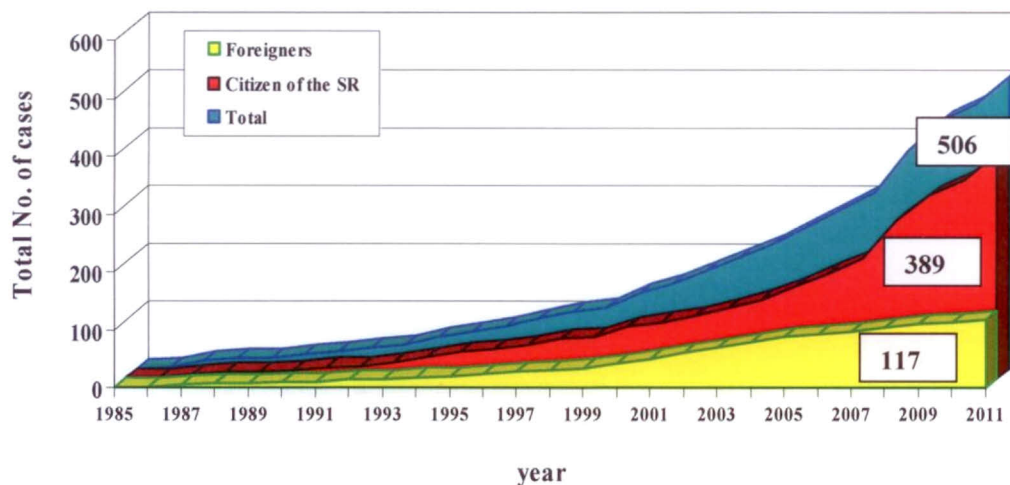
2. HIV/AIDS in the Slovak Republic

Tracking HIV/AIDS in the Slovak Republic had already started in 1985. The results are summarized and evaluated monthly and quarterly. Particularly of vulnerable groups, monitor and more possible exposure to the virus. Analyzed the results of screening of blood donors, tissues, organs, and pregnant women. Investigation of anti - HIV antibodies in the Slovak Republic is available to everyone. If the investigated person take on an anonymous examination, the doctor assigned to code and inspected anonymously. Over the past eight years has been an annual increase in the number of confirmed HIV cases. Proper set antiretroviral therapy delays the onset of clinical signs of AIDS. Viral load affects the body, thereby reducing the infectivity source of infection. In countries that can afford such a treatment applied on a larger scale to show statistically significant changes in the decline of AIDS cases. Although the treatment of HIV/AIDS has improved significantly, the current treatment options remain limited. Therapy does not eliminate the virus from the body. Treatment is difficult to work with medical patients. Drugs and therapeutic procedures may vary and it is difficult from a financial point of view. Many treatments have side effects and there is resistance to antiretroviral drugs. In Slovakia the treatment of people living with HIV/AIDS to ensure the three workplaces: in Bratislava, Banská Bystrica and Košice. Proper

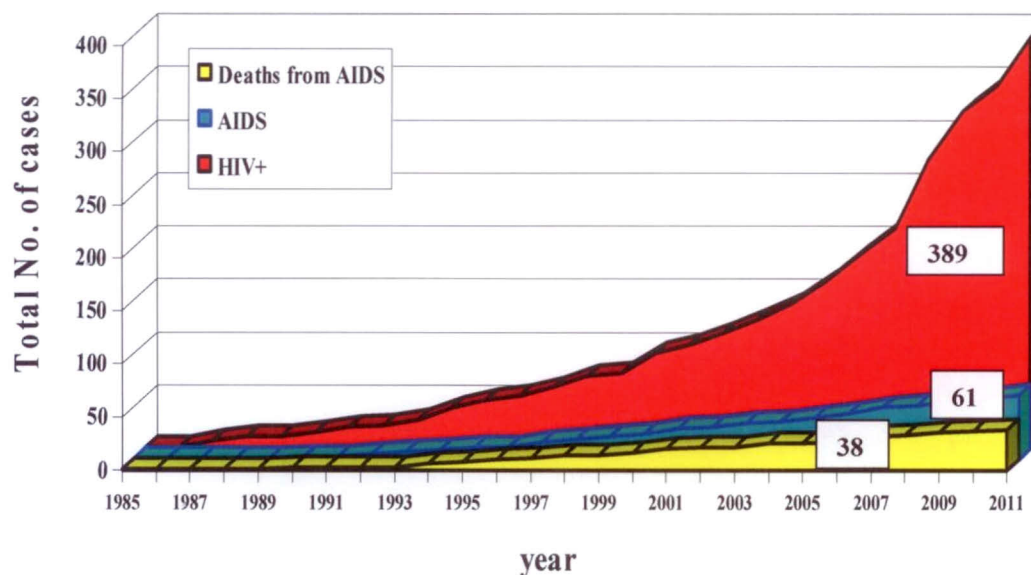
treatment setting is very important not only for people living with HIV/AIDS, but also in preventing and slowing the spread of this disease. The Slovak Republic is not among the countries with relatively low number of people with HIV/AIDS infection and HIV/AIDS here is not yet alarming proportions. It is the continuation of effective prevention of the disease. Young people represent a critical article in changing the dynamics of HIV/AIDS pandemic in the world as a significant proportion of newly diagnosed HIV cases. Given the new generation of teenage still be repeatedly carried out activities related to training and educating young people to be well informed about what is HIV/AIDS and how to protect yourself and your loved ones. HIV has a well defined transmission routes and because prevention is currently the most important part of combating the spread of HIV.

From 1985 till the 31-st of December 2011 HIV infection was diagnosed in 506 persons, out of which 389 were citizens of the Slovak Republic and 117 were foreigners. Out of 389 citizens of the Slovak Republic were 333 men and 56 women. In 61 HIV positive persons developed clinical symptoms of AIDS. Most HIV infections in the Slovak Republic was recorded in a group of men having sex with men. The highest number of people with HIV was in larger cities.

Graph 1: Cumulative number of HIV positive cases in incitizens and foreigners in the Slovak Republic, 1985 - 2011



Graph 2: Cumulative number of HIV positive cases, AIDS cases and deaths from AIDS Slovak Republic, 1985 - 2011



3. Overview of existing activities in the prevention of the spread of HIV / AIDS

When the first reports appeared on HIV/AIDS and also the first clinical case of AIDS in the Slovak Republic, Ministry of Health of the Slovak Republic (hereinafter "the Ministry of Health"), initiated in accordance with the recommendations of the World Health Organization measures to implement comprehensive monitoring of HIV/AIDS Slovak Republic. In January 1984, established the National Reference Laboratory for HIV/AIDS. In parallel with the creation of the office was established in the Ministry of Health Advisory Board of the Chief hygienist of the Slovak Republic, whose main task was to devise and adopt measures aimed at slowing the spread of HIV/AIDS in the Slovak Republic. On the 15-th of October 1994 Ministry of Health established a National Reference Centre (hereinafter "NRC") for the prevention of HIV/AIDS.

In 1988, the program of HIV/AIDS in the Czechoslovak Socialist Republic in 1994, was adopted comprehensive program to prevent infection with HIV/AIDS in the Slovak Republic Government Resolution no. 390/1996 of the 4-th of June 1996 took on its agenda the issue of HIV/AIDS. In July 1996, established the National Commission for HIV/AIDS prevention as a concept and the managing authority of a comprehensive HIV/AIDS in the Slovak Republic.

4. The organization, management and control of NPP HIV / AIDS

NPP Coordinator HIV/AIDS in the Slovak Republic, Chief Hygienist of the Slovak Republic Hygienist who is also chairman of the National Commission on Prevention of HIV/AIDS. Manager of the NPP HIV/AIDS is the Vice Chairman of the Commission. The Commission manages its activities and status rules. Public Health Authority of the Slovak Republic (hereinafter "PHA SR") tasks and coordinate activities of individual departments and other organizations represented in the National Commission for the Prevention of HIV/AIDS, resulting from the NPP HIV/AIDS. Its tasks provide members of the National Commission for the Prevention of HIV/AIDS responsible for designated departments. Comprehensive care for people with HIV and people living with AIDS is provided under generally applicable legislation at the level of currently available knowledge. The comprehensive care is to measure viral load and, where appropriate, detection of resistance to current antiretroviral drugs. NPP HIV/AIDS is aimed at the whole population of the Slovak Republic with an emphasis on vulnerable groups, namely:

- Group akviration a higher risk of HIV infection than men having sex with men, those providing paid sexual services for injection drug users, people with sexually transmitted diseases, vulnerable groups in terms of ethnic, social, or cultural characteristics,
- persons in situations of risk, for example. Persons traveling to areas with high incidence of HIV/AIDS, persons in correctional facilities, persons in the risk of higher professional or health reasons, people working in health care, recipients of blood, sex workers, massage and tattoo parlors and the like.

National Commission for the Prevention of HIV/AIDS annually prepare and evaluate activities in accordance with the tasks of NPP HIV/AIDS in the Slovak Republic.

5. The main strategic goals, objectives and ways to meet them

The strategic objectives set by the 26th General Assembly of the United Nations leading up to the year 2015 to achieve a turnover in the spread of the AIDS pandemic in the world. This

ambitious objective to be achieved through national programs. Prevention of HIV/AIDS in the Slovak Republic is focused on:

5.1 Reduce the risk and spread of HIV infection

5.1.1 Prevention of sexual transmission of HIV

- a) support for activities leading to partner loyalty
- b) promotion of safer sex activities
- c) ensuring the availability and use of condoms
- d) providing health care for people with sexually transmitted diseases
- e) ensure that prevention activities among people in akviration higher risk of HIV infection among young people and people in risk situations
- f) support and security programs for sexual and reproductive health

5.1.2 Prevention of HIV transmission by blood

- g) ensuring the supply of safe blood, health facilities and appropriate use of blood products and blood derivatives
- h) to ensure aseptic conditions for invasive interventions for which there is a violation of anatomical barriers, including cosmetic performance, tattoos and piercings
- i) Promotion of measures to secure the application of drugs to persons who have injected drugs administered
- j) to promote the sale of syringes in pharmacies by the drug administered by injection
- k) provision of HIV antibody testing among people who inject drugs have applied

5.1.3 Prevention of vertical transmission of HIV

- a) providing information to women on the prevention of perinatal HIV infection be transmitted
- b) offering the possibility of pregnant women testing anti-HIV
- c) support programs for reproductive and sexual health of people living with HIV

5.2 Reduce undesirable consequences, personal and social impact of HIV infection on individuals and society

5.2.1 Ensure adequate health and social care

- a) provide the necessary comprehensive health care, including treatment of people living with HIV and AIDS
- b) providing affordable comprehensive health care for people with sexually transmitted infections

5.2.2 Promote actions and activities to reduce social and economic impact of HIV/AIDS on society

- a) raising the population to avoid discriminatory attitudes of society respectively the limit
- b) ensuring legislative regulations that are consistent with the charter of human rights and freedoms

6. Preventive activities

In the application of preventive measures is the need for cooperation between ministries and NGOs in prevention programs, sharing information about activities, preparing and commenting on the educational and promotional materials and participation in working groups to the project. This cooperation should be uniformity in administering and presenting information to the public with a guarantee of mutual respect for different groups. Preventive activities in the Slovak Republic coordinates the National Commission for HIV/AIDS prevention.

In 2011 there were organized many preventive activities aimed at variety of risk groups. The regional public health authorities (RPHA) in the Slovak Republic carried out the campaigns all over the country.

The activities aimed at young population were performed by 14 RPHA under the name „To tackle AIDS through game“. There were more than 100 educational programmes with 4 145 participating students. The project „Red ribbon“ was organized by a secondary school in Zilina with 350 participating schools. These educational campaigns were realized in order to increase the awareness of young people about HIV, the risks, behavioural and ethical aspects.

The counselling to inform the general population about HIV/AIDS, diagnostic, treatment and prevention were offered by all RPHA together with Slovak Red Cross, non-governmental organizations and clubs of medics.

The other institutions and civil societies were also active in HIV preventive programmes. The civil society Odysseus continued in the programme „Prevent yourself/Sex and Drugs“ which is the project aimed at IDUs and sex workers in streets. In 2011 the social workers provided their counselling service to 1 016 IDUs. There were 101 consultations on individual risk assessment, 20 consultations on HIV infection and 166 consultations on safer use of sterile syringes and needles. Within the projects condoms and other aids, educational materials like the magazine INTOXI and 168 900 sterile syringes and needles were distributed.

In military field every military member who was to be sent out of the country was offered HIV testing. More than 2 553 HIV testing were done. The military members also got the lectures on HIV prevention.

All prisoners had the access to condoms in shops belonging to prisons. Prisoners were educated about the HIV risk when entering the prison. Pregnant women in prisons suspicious of HIV were sent for screening testing.

The Ministry of Interior Affairs focused its activities on educational programmes for policemen especially those working in the risk environment.

National Reference Laboratory carried out more than 630 screening tests for anti-HIV antibodies and 947 confirmation tests. The screening tests were done also by RPHA (about 430 tests).

7. Conclusion

The number of HIV positive persons in the Slovak Republic has been on the increase. Sexual intercourse prevails in new diagnosed HIV positives as the mode of transmission. In 2011 we focused on the risk reduction and reduction of HIV spreading. Similarly to other years we continued in educational programmes aimed at HIV/AIDS prevention, HIV testing, counselling, monitoring, treatment and care of HIV/AIDS persons.