

TUVALU

**“Plus 5” Review of the 2002 Special Session
on Children and World Fit for Children Plan
of Action**

Country Report

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1. Introduction

Tuvalu faces numerous development challenges which the Government has attempted to address through strategic planning in partnership with international donors. While some sectors have achieved very good progress over the years, a number of health issues remain high priority due to the scale of impact on society. The rise in cases of diabetes amongst children and the increasing negative effects of HIV and AIDS on families are two examples. The effects of globalization, climate change, insufficient funding, insufficient capacity across the sectors, and geographic isolation all contribute to issues relevant to WFFC and MGD goals and indicators.

The MDG Report 2006 highlighted the change that had occurred in Tuvalu during the past decade. There have been positive transformations: increased participation in education, increased gender equality in education, increase in general literacy rates, and lower maternal mortality. Nevertheless, many desired changes have not occurred and there are some negative trends: continued gender differentials in political and other governance areas, increase in communicable and non-communicable diseases (NCDs), growth in the numbers infected and affected by HIV and AIDS, and youth unemployment in formal sector.

The Government of Tuvalu remains committed to the MDG and WFFC goals, illustrated by the increasing number of initiatives that address social and economic concerns.

2. Major national actions taken for children towards the WFFC targets since 2002.

- The National Summit on Sustainable Development in 2004 formulated the National Strategy for Sustainable Development 2005-2015 (“Te Kakeega II”). Te Kakeega II sets 8 strategic areas: 1. Good governance; 2. Macroeconomic Growth and Stability; 3. Social Development including Health, Welfare, Youth, Gender, Housing and Poverty Alleviation; 4. Outer Island and Falekaupule Development; 5. Employment and Private Sector Development; 6. Human Resource Development; 7. Natural Resources; and 8. Infrastructure and Support Services.
- The Department of Community Affairs in the Ministry of Home Affairs and Rural Development (MHARD) focuses on monitoring and developing a social policy to address poverty and hardship rooted in unemployment, low wages, insufficient land, and substance abuse. The Department also lobbies and coordinates the activities of other departments within the MHARD - Youth, Women, Rural Development and Culture - and other stakeholders in social development - Ministries of Health and

Education and the NGO sector. The Department prepared a corporate policy in 2001, targeting the most vulnerable groups in society. This policy is yet to be endorsed by Cabinet.

- Development of National Youth Policy 2005-2010 through assistance from UNICEF and SPC.
- National Strategic Plan on youth was drafted by Tuvalu Association of Non Governmental Organizations (TANGO) and Tuvalu National Youth Council (TNYC).
- Dissemination of Information on services available to young people through the Department of Youth, TANGO, Red Cross and the Tuvalu Family Health Association (TuFHA).
- Preparing the initial CRC report. Tuvalu ratified the Convention on the Right of the child (CRC) on 22nd November 1995. The National Advisory Committee on Children (NACC) has been working on the preparation of the initial report by conducting a legislative review and obtaining technical assistance from UNICEF. The report was drafted in 2005 and will be submitted to CRC committee this year.
- Summer schools for Pre-School Teachers to get ECCE Certificates in order for them to provide culturally appropriate programmes for 3-5 years old children.
- Community Support Awareness workshops on each island as well as weekly radio programmes on Health and Education issues.

3. Resource trends for children

Sector Budget	2002	%	2006	%
Health	\$1,378,842.00	n.a.	\$2,349,821.00	n.a.
- Preventing communicable diseases (including HIV and AIDS)	\$398,647	28%	\$59,605.00	25%
- Baby clinic & Reproductive health (including well mother clinic)	n.a		n.a	
Education	\$5,400,250	44 %	\$5,882,331	
- Primary	\$1,055,254	19.5%	\$1,032,598	17.6%
- Secondary	\$1,470,249	27.2%	\$1,156,046	19.6%
- Tertiary	n.a		n.a	
Total Government Budget	n.a.	100	n.a.	100

(Source: Tuvalu government budget) Note: 'n.a.' means 'not available'.

Public expenditure on education as percentage of total government expenditure was 16.8% in 1999-2000 (not inclusive of external borrowings and grants) and increased to 33% in 2001, 44% in 2002, and decreased to 23% in 2005. (SITAN, 2005)

Between 1996 and 2001 health expenditure absorbed between 5.5 and 8.5 per cent of total public expenditure. It peaked in 2000 and was substantially lower in 2001. Expenditure for 2002 and 2003 was distorted by the high capital costs associated with the opening of the new wing of the Princess Margaret Hospital. (SITAN, 2005)

There has been a gradual and substantial increase in the proportion of expenditure allocated to staff costs, from 29% of the total budget in 1996 to 53% in 2001. The increase in staff costs reflects a shift in emphasis from preventive to curative services. In 2001, 89% of health expenditure was on curative medicine, and only 5 per cent on preventive (ADB, 2002: 139-140). By 2006, there had been a decrease in the Health budget for curative medicine from 89% in 2001 to 69%, however there is a slight increase for preventive medicine from 5% to 18%.

4. Development and use of monitoring instruments to track WFFC/MDG targets

- The Household Income and Expenditure Survey (HIES) 2004/2005: Ministry of Finance, Economic Planning and Industries. A comprehensive statistical survey of the country and most economic categories.
- Preparation and publication of the MDG Report 2006: The MDG report was prepared by a taskforce that carried out consultations with government departments and members of civil organizations since 2004.

5. Enhancing partnerships, alliances for children and participation

Tuvalu has been working closely with the international community. In 2006, government initiated the discussion of a project-oriented Kakeega II Matrix with the donor community in an effort to identify areas for future donor action and support.

In the area of health, the Government of Japan will be providing support for the renovation and upgrading of outer island medical facilities. The Vaitupu Medical Facility will be the first of these medical facilities to be renovated and upgraded. A total amount of US\$100,000 has been approved to be used for this in 2007.

UNFPA, SPC and WHO have been working with government to strengthen reproductive health services at the Princess Margaret Hospital and outer island clinics

WHO and UNICEF as well as UNFPA/SPC have been providing health education and awareness programmes on healthy lifestyles and better nutrition, as well as the integrated management of childhood illness (IMCI).

UNICEF/JICA/WHO have been assisting government maintain the high routine immunization coverage through the Expanded Programme on Immunization (EPI).

Programmes on health education and awareness on HIV and AIDS, and NCDs are provided with assistance from various partners. Some of these programmes and projects include the drafting of the nutrition policy and action plan supported by SPC; the

provision of technical assistance to the Ministry of Health for NCD programmes by WHO; financial and technical support through the AusAID Pacific Regional HIV Project to TANGO and the EU Youth Programme support to TUFHA to mention a few.

The European Union (EU) is providing some assistance for pre-schools, channeled through the Tuvalu Association of Non-Government Organizations (TANGO). This assistance is mostly in the form of playground construction and provision of playground equipment. UNESCO has supported capacity-building workshops for teachers and community pre-school organizers.

In the area of youth development: youth capacity development in communication and healthy lifestyles are supported by SPC, UNICEF and UNFPA; increased employment opportunities has been provided through access to credit schemes and entrepreneurship workshops delivered by the Department of Youth and the South Pacific Regional Commonwealth Youth Programme (CYP); there has been an increased role of NGOs in youth related issues through UNDP's Social Development Policy Programmes and the work of TUFHA's drama group; and the Pacific Island Forum Secretariat's has given assistance to the Department of Rural Development for the strengthening of young people's role in Falekaupule/local government.

6. Achievement of WFFC Plan of Action set against related MDG targets

A. Promoting Healthy Lives:

The Health Department is working in partnership with the Education Department to conduct workshops for parents and mothers of pre school children (3+ to 5+ years old) to raise awareness on Nutrition, Child Care and Development of the child as well as their roles and responsibilities for their children at home, school, church, and community.

The Health Department, the Education Department and TUFHA have a joint partnership programme on adolescent health development for youths aged 10 to 24 years. This programme is financially supported by the Government of Tuvalu, WHO, UNICEF as well UNFPA.

UNICEF's Life skills programme, which is targeting 90% of the youth in Tuvalu, is currently coordinated and facilitated by the Health Department in collaboration with the Tuvalu Red Cross and TUFHA.

The Health Department also advocates and immunizes new born babies up to 6 year-old children. The clinic check time is based on the baby's age and condition. The Health Department also provides a weekly radio programme on health issues.

B. Promoting quality education

Tuvalu has committed to achieving Education for All and to the Millennium Development Goals relating to education. The Education Act of 1978 states that every child should receive a minimum of 10 years education from the ages of 6-15.

There is at least one pre-school on each atoll, with two on Nanumea and Vaitupu and nine on Funafuti, but as pre-schooling is not part of core education, all are privately owned or managed by community volunteers. The government pays the salaries of up to three teachers per registered pre-school and also provides some assistance with resources. Small fees - typically 20 cents per session - are charged to help cover costs. Although children are not eligible to attend pre-school until they are at least three years old, some pre-schools accept younger children for day care, for which higher fees are charged. A total of 647 children attended pre-school in 2005. Considering that there were 1069 children aged 0-4 years counted in 2005, 60% of this age group attended preschool, which could be most children aged 3-5 years.

Although Early Childhood Care and Education (ECCE) is addressed in the Tuvalu Education Strategic Plan 2006-2010, there is still insufficient government support to allow for the upgrading of infrastructure and equipment in each of the ECCE centres as well for the overall training of ECCE teachers. Out of the fifty five early childhood teachers employed by local communities, twenty nine of them are qualified as ECCE teachers. The ECCE Policy developed with assistance from NZAid has been approved by the Development Coordination Committee (DCC) and will be endorsed by Cabinet in 2007.

In the area of primary education, in 2004 and 2006 enrolments at primary level on each atoll were roughly proportional to population. The slightly higher numbers of male than female enrolments can be explained by larger cohorts of males than females at primary school age and is unlikely to be due to gender discrimination. No fees are charged at Government primary schools, but there are nonetheless substantial costs for parents, including uniforms, books, meals, transport and special contributions.

The standards and levels of literacy in primary schools vary from school to school. The contributing factors attributed to this are insufficient teacher training, scarcity of resources and low motivation among both students and teachers. Ninety-three per cent of all primary and secondary school teachers are trained in the regional centers in Fiji, Samoa and Tonga.

A National Education Assessment Policy is needed to improve the standard of assessment for students. The current Tuvalu Education-Strategic Plan calls for a review of the Education Act of 1978. The MDG Report notes the development of the Tuvalu Standardized Test of Achievement (TUSTA) targeting Class 4 and Class 6 to monitor student progress and attainment in primary school.

The development of a National Curriculum Framework (NCF) for ECCE, Primary, Secondary and post-Secondary is progressing well with the first round of stakeholder consultations completed in April 2007. The NCF will serve as a policy document that

will guide curricula to equip Tuvalu children/students with skills that will prepare them to meet the challenges posed by the changes taking place in Tuvalu as well as beyond.

In addition, the Department of Education also broadcasts a 15-minute weekly radio programme to disseminate and share educational information for public awareness as well as to conduct lessons for ECCE and primary school children.

C. Protecting Against Abuse, Exploitation and Violence

The National Advisory Committee on Children (NACC) with members from all sectors and ministries in the Government and non-government organizations was established in 2002 and is the body that ensures proper treatment and care for children in the country.

Children's rights are protected under Tuvalu Constitution as well as land tenure and adoption laws. The Penal Code s14(1), states that children under the age 10 cannot be held criminally responsible. Under s14(2) children between the age of 10 and 14 are not criminally responsible unless it can be proven that the person has capacity to know that he or she ought not to do the act or make the omission. The Courts have to provide alternative care for children who are victims or abuse, neglect or other forms of maltreatment or torture. The Penal Code gives the Court the power to make Care, Protection and Control Orders under section 39 (refer 4.1(i) and additional orders under s144 (refer 7.3.2).

D. Combating HIV and AIDS:

Tuvalu National AIDS Committee (TuNAC) is currently reviewing the draft National HIV and AIDS Strategic Plan for the next 5 years. The HIV and AIDS Policy was endorsed in 2005.

The Global Fund will be providing financial assistance to support two new positions to assist TuNAC in implementing the HIV and AIDS Policy: (i) TuNAC Programme Officer and (ii) Assistant TuNAC Programme Officer.

A Support Group for People Living with HIV/AIDS represented by people from government and non-government organizations is run voluntary and actively engaged in providing support for People Living with HIV/AIDS as well as in HIV prevention.

A Second Generation Surveillance survey was conducted in 2005-2006 among seafarers, pregnant women and young people. Results and findings for these surveys have been processed and forwarded to WHO and SPC. A follow up survey is planned to be conducted in 2008.

With assistance from WHO's Health Promotion Schools Project as well as from UNICEF and UNFPA, HIV and AIDS will be incorporated into the Primary School Curriculum for Classes 6-8 pupils (Ages 11-13) in the Health Science Subject. A HIV and AIDS Resource Manual for Teachers as well as IEC materials for children and adults have been

developed both in English and in Tuvaluan as part of the WHO's Health Promotion Schools Project.

7. Lessons learned

Enhancing the welfare of children is not a “one person job” but is everyone's business. One of the many challenges that Tuvalu faces is weak coordination on addressing children's issues across ministries and departments. Currently, the CRC focal point is at the Ministry of Education and Sports. The Ministry of Health deals with mostly health issues and the Department of Women and the Youth Department within the Ministry of Home Affairs and Rural Development focuses on issues affecting youth and women. The Department of Community Affairs/Social Services within the Ministry of Home Affairs and Rural Development deals with issue of poverty and hardship as well as children in contact with law. The Ministry of Finance and Economic Planning drives the process of national strategy for sustainable development and controls the budget.

There is a need to further strengthen the role of the National Advisory Committee on Children (NACC) as the inter-agency coordination body to ensure that all rights of children are considered and issues related to children are properly addressed in every ministry's corporate plan/strategy and its implementation. Establishing a cross-sectoral ‘child policy’ and action plans for children may be a good way to guide and monitor that process.

At the same time, it is crucial for the donor community to continue to support children and women development programmes, to enhance the partnership across different sections of government, and to align their activities. In this respect, the roundtable discussion of Kakeega II Matrix was a useful exercise initiated by government. Initiatives of this kind will maximize the resources at hand – skills, knowledge, time, funds. Further alignments within the national strategy and the development of a child policy would enable more targeted interventions for children and women.

Annex 1: WFFC Indicators

Achievement of WFFC Plan of Action and related MDG targets.

Target 1: Promoting Healthy Lives

Goal: Reduce child mortality: Reduction in the infant and under five mortality rate by at least one third in pursuit of the goal of reducing it by two thirds by 2015			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Infant mortality rate	21.6 (2003)	31 (2005)	Tuvalu MDG Report 2006, Childinfo database
Under 5 mortality rate (death per 1,000 live births)	32 (2003)	38 (2005)	
Proportion of newborns with low birth weight (%)	5 (2000)	n.a.	Country Health Information Profile, 2002 Revision, Ministry of Health and WHO/Western Pacific Region
Proportion of one year old children immunized against measles (%)	99 % (2002)	62 % (2005) 96.2% (2006)	Immunization summary: The 2007 Edition, UNICEF/WHO

Goal: Reduce maternal mortality: Reduction in the maternal mortality ratio by at least 1/3 in pursuit of reducing it by ¾ by 2015			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Maternal mortality ratio (per 100,000 live births)	156 births: 1 death (2000)	239 births: 1 death (2003)	Tuvalu MDG Report 2006
Proportion of births attended by skilled health personnel (%)	100 (2002)	n.a.	Regional MDG Report 2004

Goal: Reduce child malnutrition : Reduction of child malnutrition among children under 5 by at least 1/3, with special attention to children under 2 years, and reduction in the rate of low birth weight, weight for at least 1/3 of current rate.			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Prevalence of underweight – moderate and severe (%)	5% (1997)	5% (2004)	Tuvalu MDG Report 2006
Prevalence of Anaemia among children under 18 years old (%)	26.3 % (6-12 yr olds) (2002)	n.a.	Hughes et al. Study in 2 schools 2002

Goal: Enlarge the access to hygienic sanitation facilities and affordable and safe drinking water: Reduction in the proportion of households without access to hygienic sanitation facilities and affordable and safe drinking water by at least 1/3			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data

Proportion of households with sustainable access to an improved water source	93 % ¹ (2002)	100 % (2004)	Tuvalu MDG Report 2006; WHO/UNICEF Joint Monitoring Programme on Water Supply and Sanitation
Proportion of households with sustainable access to an improved sanitation:	87% (2002)	90 % (2004)	Tuvalu MDG Report 2006; WHO/UNICEF Joint Monitoring Programme on Water Supply and Sanitation

Target 2: Providing quality education

Goal: Expand early childhood care & education for children Expand and improve comprehensive early childhood care and education, for girls and boys, especially for the most vulnerable and disadvantaged children			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Number of personnel with proper training or certificate providing ECD/ECE	n.a.	29 qualified out of 55 early childhood teachers employed by local community	Situation of Children, Women and Youth in Tuvalu, 2006
Proportion of children aged 36-59 months who are attending some forms of organized early childhood education programme/preschool (%)	n.a.	647 children attended pre-school (2005) (1069 children aged 0-4 years) - <i>High</i>	Situation of Children, Women and Youth in Tuvalu, 2006
Preschool Gross Enrollment ratio (%)	n.a.	Total 99.3 % Male 98.4 % Female 100 % (2004)	Administrative data: UIS Global Education Database 2006

Goal: Offer access to good quality primary education. Reduce the number of primary schools age children who are out of school by 50% and increase net primary school enrollment or participation in alternative, good quality primary education programmes to at least 90% by 2010.			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Primary school net enrollment ratio (%)	99.9% (2002)	n.a.	Tuvalu MDG Report 2006
Primary school gross enrollment ratio (%)	n.a.	Total 98.5 % Male 95.1 % Female 102.2	Administrative data: UIS Global Education Database

¹ MDG Report notes: "Tuvalu is on track to achieve the target for access to water, although whether this supply is sustainable or improved is questionable." P.31.

		(2004)	2006
Survival rate to grade 5 (survey data)	69.9 % (2001)	99 % (2002)	UNESCO/UIS database Survival rate to grade 5; Tuvalu MDG Report 2006
Secondary school <i>gross</i> enrollment ratio (%)	Male 87 % Female 81 % (2001)	n.a.	Administrative data: UIS Global Education Database 2006
Secondary school attendance Ratio (%)	14 15 2005	n.a.	Child info database, 2006
Years of education that is compulsory to attend (years)	6-13		Situation of Children, Women and Youth in Tuvalu, 2006
Years of education that is free from charge	Year 1 to Year 8 [Ages 6 to 13] (There are substantial costs for parents, including uniforms, books, meals, transport and special contributions)		Situation of Children, Women and Youth in Tuvalu, 2006; The Elimination of All forms of Discrimination and Violence against the Girl Child 2006

Goal: Eliminate illiteracy amongst adults Achieve a 50% improvement in levels of adult literacy by 2015, especially for women			
Indicator	Baseline 2002 (or most recent available)	Most recent data available	Source of data
Adult literacy	99 % (2002)	n.a.	Tuvalu MDG Report 2006

Target Three: Protecting children against abuses, exploitation, and violence

Goal 1: Protect against abuse, exploitation, and violence	
CRC ratification	Ratified CRC in 1995 and initial report is in draft as of 2006.
NACC	The National Advisory Committee on Children (NACC), with members from all sectors and ministries directly involved with children in the Government, is now the overall body that ensures proper treatment and care for children in the country.
Birth Registration	Children's rights are protected under Tuvalu Constitution as well as land tenure and adoption laws.
Measure to protect children from abuse, exploitation & violence	The Penal Code s14(1), states that children under the age of 10 cannot be held criminally responsible. Under s14(2) children between the age of 10 and 14 are not criminally responsible unless it can be proven that the person has capacity to know that he or she ought not to do the act or make the omission. The Courts have the power to provide alternative care for children who are victims or abuse, neglect or other forms of maltreatment or torture. The Penal Code gives the Court the power to make Care, Protection and Control Orders under section 39 (refer 4.1(i)) and additional orders under s144 (refer 7.3.2).
Goal 2: Protect children from the impact of armed conflict	
OP status	Has not signed the Optional Protocol on CRC on the involvement of children in Armed Conflict.

Legislative environment to protect the children in armed conflict	<p>The Constitution makes provision for Disciplined Forces of Tuvalu (s31) and periods of public emergency when Tuvalu is at war (s35).</p> <p>As Tuvalu is a party to the Refugee Convention, it is presumed that any refugee children admitted to Tuvalu would receive the same protection under the law.</p>
Goal 3: Fight against sexual exploitation	
OP status CADAW ratification Measure taken to protect children from sexual abuse	<p>Has not signed the Stockholm Declaration and Agenda for Action, or ratified the international agreements in existence to combat child abduction, including the Hague Convention on the Civil Aspects of International Child Abduction 1980.</p> <p>Ratified CEDAW in 1999.</p> <p>Domestic law prohibits procurement of persons within and across borders for purpose of prostitution, although there is no specific mention of trafficking.</p> <p>The Penal Code makes provision in Part XXVI for offences against liberty. Any person, who kidnaps or abducts any person (including children) within Tuvalu or conveys the person "beyond the limits of Tuvalu" (s. 241(a)) is guilty of an offence which carries an imprisonment sentence of 7 years (s. 242).</p> <p>Prostitution and sex tourism are illegal.</p> <p>The age of sexual consent under the Penal Code is 15 years (s134 and s135).</p> <p>The Penal Code sets out a list of activities that are considered to be criminal with the clear intention to provide legal protection to children who are physically or sexually abused and neglected.</p>
Goal 4: Eliminate child labour	
ILO convention ratification status	<p>As children between the age of 6 and 15 years are required to remain at school, the Employment Act prohibits most children under the age of 15 years from working.</p> <p>The Constitution also guarantees the right to freedom from slavery or servitude and from being required to perform forced labour (s18).</p>
Goal 5: Improve the plight of millions of children who live under especially difficult circumstances	
Adopted children	<p>Under the Adoption of Children Act an order for the adoption of a child who has attained the age of 10 shall not be made unless the child has consented to the adoption (s 18(a)). The Court can, however, rule against the child's refusal to consent to the adoption, if there are special reasons and it is considered to be for the best interest and welfare of the child (s18(b)).</p>

Target 4: Combating HIV and AIDS

Goal: Time-bound national target & fight against gender based discrimination in relation to HIV/AIDS			
By 2003 establish time-bound national targets to achieve the internationally agreed global prevention goal to reduce by 2010 HIV prevalence among young men and women aged 15-24 by 25%			
Indicator	Baseline 2002 (or most recent data available)	Most recent data available	Source of Data
Status of HIV and AIDS policies	n.a.	National Policy on HIV/AIDS was endorsed in 2005; preliminary findings among three hundred (300) youth surveyed estimated that 83.3% of youth in Tuvalu have been reached by prevention activities.	UNGASS Composite Policy Index Survey (CPI) 2005; UNGASS reports; UNAIDS

Cumulative HIV cases (including AIDS)	9	9 (2004)	AIDS Section, Public Health Programme, Secretariat of Pacific Community. 2005
Cumulative HIV incidence-crude rate per 100,000 (90% CI)	n.a.	96.8 (23.6 to 208.3) (2004)	AIDS Section, Public Health Programme, Secretariat of Pacific Community, 2005

Goal: Reduce HIV vertical transmission By 2005, reduce the proportion of infants infected with HIV by 20% and by 50% by 2010, by: ensuring that 80% of pregnant women accessing antenatal care have information, counseling and other HIV prevention services available to them; Increasing the availability of and by providing access for HIV infected women and babies to effective treatment to reduce mother-to-child transmission of HIV, as well as through effective interventions for HIV infected women, including VCCT; Access to treatment, especially ART and, where appropriate, breast milk substitutes and the provision of a continuum of care

Indicator	Baseline 2002 (or most recent data available)	Most recent data available	Target for 2015 Source of Data
Mother to child transmission cases	1	There has been 1 documented mother to child HIV transmission cases in Tuvalu.	UNGASS Composite Policy Index Survey (CPI) 2005: UNGASS reports; UNAIDS; UNIFEM; MoH; UNICEF Situation Review.
Status of PMTCT policy	n.a.	No PMTCT targets have been set.	UNGASS Composite Policy Index Survey (CPI) 2005: UNGASS reports; UNAIDS; UNIFEM; MoH; UNICEF Situation Review.
Access to treatment, especially ART and, where appropriate, breast milk substitutes and the provision of a continuum of care	n.a.	Treatment available to those identified and compliant. No person on treatment. No milk substitute policy.	UNGASS Composite Policy Index Survey (CPI) 2005: UNGASS reports; UNAIDS; UNIFEM; MoH; UNICEF Situation Review.