

Côte d'Ivoire Report NCPI

NCPI Header

is indicator/topic relevant?: Yes

is data available?: Yes

Data measurement tool / source: NCPI

Other measurement tool / source:

From date: 01/01/2013

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

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

Data measurement tool / source: GARPR

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Describe the process used for NCPI data gathering and validation: Une réunion de lancement de l'élaboration du rapport GARP 2014 a été organisée. Au cours de cette réunion, le processus a été expliquée à tous les participants. Le volet concernant le NCPI partie gouvernementale a été confié à un des participants. ce dernier a pris des rendez-vous avec les personnes ressources en vue de renseigner cette partie. Quant à la partie concernant la société civile, une réunion regroupant les représentants des organisations de la société civile a été organisée. Au cours de cette réunion de deux jours, les participants ont renseigné la partie les concernant. Ces deux parties (A et B) ont été soumis à la réunion de validation des données GARP pour observations et ont été validées.

Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:

Highlight concerns, if any, related to the final NCPI data submitted (such as data quality, potential misinterpretation of questions and the like):

NCPI - PART A [to be administered to government officials]

Organization	Names/Positions	Respondents to Part A
Ministère de la santé et de la lutte contre le sida	Dr. DIABATE Conombo Josephine, Directeur Générale de la lutte contre le sida	A1,A2,A3,A4,A5,A6
Ministère de la santé et de la lutte contre le sida	M. KLA Wollo Christian, Directeur de la mobilisation des ressources	A1,A2,A3,A4,A5,A6

NCPI - PART B [to be administered to civil society organizations, bilateral agencies, and UN organizations]

Organization	Names/Positions	Respondents to Part B
		B1,B2,B3,B4,B5

A.I Strategic plan

1. Has the country developed a national multisectoral strategy to respond to HIV?: Yes

IF YES, what is the period covered: 2012 - 2015

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.: - Réduction de l'impact socio économique est un axe prioritaire dans la nouvelle stratégie - Accent mis sur les populations clés dans la nouvelle stratégie

IF YES, complete questions 1.1 through 1.10; IF NO, go to question 2.

1.1. Which government ministries or agencies have overall responsibility for the development and implementation of the national multi-sectoral strategy to respond to HIV?: Ministère de la Santé et de la Lutte contre le Sida (MSLS)

1.2. Which sectors are included in the multisectoral strategy with a specific HIV budget for their activities?

Education:

Included in Strategy: Yes

Earmarked Budget: Yes

Health:

Included in Strategy: Yes

Earmarked Budget: Yes

Labour:

Included in Strategy: No

Earmarked Budget: No

Military/Police:

Included in Strategy: Yes

Earmarked Budget: Yes

Social Welfare:

Included in Strategy: Yes

Earmarked Budget: Yes

Transportation:

Included in Strategy: Yes

Earmarked Budget: Yes

Women:

Included in Strategy: Yes

Earmarked Budget: Yes

Young People:

Included in Strategy: Yes

Earmarked Budget: Yes

Other: Economie et Finance , Agriculture

Included in Strategy: Yes

Earmarked Budget: Yes

IF NO earmarked budget for some or all of the above sectors, explain what funding is used to ensure implementation of their HIV-specific activities?: N/A

1.3. Does the multisectoral strategy address the following key populations/other vulnerable populations, settings and cross-cutting issues?

KEY POPULATIONS AND OTHER VULNERABLE POPULATIONS:

Discordant couples: Yes

Elderly persons: No

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: Yes

People with disabilities: No

People who inject drugs: Yes

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations: Yes

SETTINGS:

Prisons: Yes

Schools: Yes

Workplace: Yes

CROSS-CUTTING ISSUES:

Addressing stigma and discrimination: Yes

Gender empowerment and/or gender equality: Yes

HIV and poverty: Yes

Human rights protection: No

Involvement of people living with HIV: Yes

IF NO, explain how key populations were identified?: N/A

1.4. What are the identified key populations and vulnerable groups for HIV programmes in the country?

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: Yes

People with disabilities: No

People who inject drugs: Yes

Prison inmates: Yes

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific key populations/vulnerable subpopulations [write in]: hommes en uniforme, élèves

: Yes

1.5 Does the country have a strategy for addressing HIV issues among its national uniformed services (such as military, police, peacekeepers, prison staff, etc)?: Yes

1.6. Does the multisectoral strategy include an operational plan?: Yes

1.7. Does the multisectoral strategy or operational plan include:

a) Formal programme goals?: Yes

b) Clear targets or milestones?: Yes

c) Detailed costs for each programmatic area?: Yes

d) An indication of funding sources to support programme implementation?: Yes

e) A monitoring and evaluation framework?: Yes

1.8. Has the country ensured “full involvement and participation” of civil society in the development of the multisectoral strategy?: Active involvement

IF ACTIVE INVOLVEMENT, briefly explain how this was organised.: La société civile occupe une part importante dans le paysage de la lutte contre le sida en Côte d'Ivoire. On distingue les ONG nationales qui constituent l'essentiel des acteurs de la société civile. Ce sont les faitières et réseaux nationaux : RIP+ ; COSCI ; REPMASCI ; RIJES ; RIOF. A côté des ONG nationales on a aussi les ONG Internationales qui jouent le rôle de partenaires techniques des structures publiques nationales, mais aussi dans une certaine mesure de partenaires financiers surtout pour les ONG (CARE ; Croix Rouge ; EGPAF ; FHI 360 ; GENEVA Global ; IRC ; ICAP....)

IF NO or MODERATE INVOLVEMENT, briefly explain why this was the case.:

1.9. Has the multisectoral strategy been endorsed by most external development partners (bi-laterals, multi-laterals)?: Yes

1.10. Have external development partners aligned and harmonized their HIV-related programmes to the national multisectoral strategy?: Yes, all partners

IF SOME PARTNERS or NO, briefly explain for which areas there is no alignment/harmonization and why: N/A

2.1. Has the country integrated HIV in the following specific development plans?

SPECIFIC DEVELOPMENT PLANS:

Common Country Assessment/UN Development Assistance Framework: Yes

National Development Plan: Yes

Poverty Reduction Strategy: Yes

National Social Protection Strategic Plan: Yes

Sector-wide approach: Yes

Other [write in]:

: N/A

2.2. IF YES, are the following specific HIV-related areas included in one or more of the development plans?

HIV-RELATED AREA INCLUDED IN PLAN(S):

Elimination of punitive laws: N/A

HIV impact alleviation (including palliative care for adults and children): Yes

Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support: Yes

Reduction of income inequalities as they relate to HIV prevention/ treatment, care and /or support:

Reduction of stigma and discrimination: Yes

Treatment, care, and support (including social protection or other schemes): Yes

Women's economic empowerment (e.g. access to credit, access to land, training): Yes

Other [write in]:

: N/A

3. Has the country evaluated the impact of HIV on its socioeconomic development for planning purposes?: Yes

3.1. IF YES, on a scale of 0 to 5 (where 0 is "Low" and 5 is "High"), to what extent has the evaluation informed resource allocation decisions?: 3

4. Does the country have a plan to strengthen health systems?: Yes

Please include information as to how this has impacted HIV-related infrastructure, human resources and capacities, and logistical systems to deliver medications and children: N/A

5. Are health facilities providing HIV services integrated with other health services?

a) HIV Counselling & Testing with Sexual & Reproductive Health: Many

b) HIV Counselling & Testing and Tuberculosis: Many

c) HIV Counselling & Testing and general outpatient care: Few

d) HIV Counselling & Testing and chronic Non-Communicable Diseases: None

e) ART and Tuberculosis: Many

f) ART and general outpatient care: Few

g) ART and chronic Non-Communicable Diseases: None

h) PMTCT with Antenatal Care/Maternal & Child Health: Many

i) Other comments on HIV integration: : N/A

6. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate strategy planning efforts in your country's HIV programmes in 2013?: 7

Since 2011, what have been key achievements in this area: - Élaboration du Plan National de Développement Sanitaire (PNDS) 2012-2015 - Élaboration du Plan Stratégique National (PSN) 2012-2015

What challenges remain in this area::

A.II Political support and leadership

1. Do the following high officials speak publicly and favourably about HIV efforts in major domestic forums at least twice a year?

A. Government ministers: No

B. Other high officials at sub-national level: No

1.1. In the last 12 months, have the head of government or other high officials taken action that demonstrated leadership in the response to HIV?: Yes

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership: Conseil National Lutte contre le Sida (CNLS) Journée Mondiale de la Lutte contre le Sida (JMLS)

2. Does the country have an officially recognized national multisectoral HIV coordination body (i.e., a National HIV Council or equivalent)?: Yes

IF NO, briefly explain why not and how HIV programmes are being managed:: N/A

2.1. IF YES, does the national multisectoral HIV coordination body:

Have terms of reference?: Yes

Have active government leadership and participation?: Yes

Have an official chair person?: Yes

IF YES, what is his/her name and position title?:

Have a defined membership?: Yes

IF YES, how many members?:

Include civil society representatives?: Yes

IF YES, how many?:

Include people living with HIV?: Yes

IF YES, how many?:

Include the private sector?: Yes

Strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?: Yes

3. Does the country have a mechanism to promote coordination between government, civil society organizations, and the private sector for implementing HIV strategies/programmes?: Yes

IF YES, briefly describe the main achievements:: - INITIATIVE PARTENARIAT PUBLIQUE PRIVE (IPP) - Existence d'un plan d'action pour le secteur privé (CGECI) prenant en compte les axes stratégiques du PSN 2012-2015

What challenges remain in this area::

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

5. What kind of support does the National HIV Commission (or equivalent) provide to civil society organizations for the implementation of HIV-related activities?

Capacity-building: Yes

Coordination with other implementing partners: Yes

Information on priority needs: Yes

Procurement and distribution of medications or other supplies: Yes

Technical guidance: Yes

Other [write in]:

: No

6. Has the country reviewed national policies and laws to determine which, if any, are inconsistent with the National HIV Control policies?: Yes

6.1. IF YES, were policies and laws amended to be consistent with the National HIV Control policies?: No

IF YES, name and describe how the policies / laws were amended: N/A

Name and describe any inconsistencies that remain between any policies/laws and the National AIDS Control policies:: N/A

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the political support for the HIV programme in 2013?: 7

Since 2011, what have been key achievements in this area:: - Existence d'un projet de loi sur le VIH

What challenges remain in this area:: Lourdeur dans l'adoption du projet de loi

A.III Human rights

1.1. Does the country have non-discrimination laws or regulations which specify protections for specific key populations and other vulnerable groups? Select yes if the policy specifies any of the following key populations and vulnerable groups:

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable subpopulations [write in]:

: No

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:
No

IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws::

Briefly explain what mechanisms are in place to ensure these laws are implemented::

Briefly comment on the degree to which they are currently implemented::

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and vulnerable groups?: No

IF YES, for which key populations and vulnerable groups?:

People living with HIV: No

Elderly persons: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]::

: No

Briefly describe the content of these laws, regulations or policies::

Briefly comment on how they pose barriers::

A.IV Prevention

1. Does the country have a policy or strategy that promotes information, education and communication (IEC) on HIV to the general population?: Yes

IF YES, what key messages are explicitly promoted?:

Delay sexual debut: Yes

Engage in safe(r) sex: Yes

Fight against violence against women: Yes

Greater acceptance and involvement of people living with HIV: Yes

Greater involvement of men in reproductive health programmes: Yes

Know your HIV status: Yes

Males to get circumcised under medical supervision: No

Prevent mother-to-child transmission of HIV: Yes

Promote greater equality between men and women: Yes

Reduce the number of sexual partners: Yes

Use clean needles and syringes: Yes

Use condoms consistently: Yes

Other [write in]::

: No

1.2. In the last year, did the country implement an activity or programme to promote accurate reporting on HIV by the media?: Yes

2. Does the country have a policy or strategy to promote life-skills based HIV education for young people?: Yes

2.1. Is HIV education part of the curriculum in:

Primary schools?: Yes

Secondary schools?: Yes

Teacher training?: Yes

2.2. Does the strategy include

a) age-appropriate sexual and reproductive health elements?: Yes

b) gender-sensitive sexual and reproductive health elements?: Yes

2.3. Does the country have an HIV education strategy for out-of-school young people?: Yes

3. Does the country have a policy or strategy to promote information, education and communication and other preventive health interventions for key or other vulnerable sub-populations?: Yes

Briefly describe the content of this policy or strategy: - Existence d'un programme de lutte contre le sida qui cible les populations clés

3.1. IF YES, which populations and what elements of HIV prevention does the policy/strategy address?

People who inject drugs: Targeted information on risk reduction and HIV education

Men who have sex with men: Condom promotion, HIV testing and counseling, Stigma and discrimination reduction, Targeted information on risk reduction and HIV education

Sex workers: Condom promotion, HIV testing and counseling, Reproductive health, including sexually transmitted infections prevention and treatment, Stigma and discrimination reduction, Targeted information on risk reduction and HIV education, Vulnerability reduction (e.g. income generation)

Customers of sex workers: Condom promotion, HIV testing and counseling, Reproductive health, including sexually transmitted infections prevention and treatment, Targeted information on risk reduction and HIV education

Prison inmates: Condom promotion, HIV testing and counseling, Reproductive health, including sexually transmitted infections prevention and treatment, Targeted information on risk reduction and HIV education

Other populations [write in]: personnes en uniforme

: Condom promotion, HIV testing and counseling, Reproductive health, including sexually transmitted infections prevention and treatment, Stigma and discrimination reduction, Targeted information on risk reduction and HIV education

3.2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate policy efforts in support of HIV prevention in 2013?: 7

Since 2011, what have been key achievements in this area?: - Élaboration du plan eTME 2012

What challenges remain in this area?: - Faible utilisation des services de santé - Connaissance limitée en matière de VIH

4. Has the country identified specific needs for HIV prevention programmes?: No

IF YES, how were these specific needs determined?:

IF YES, what are these specific needs? :

4.1. To what extent has HIV prevention been implemented?

The majority of people in need have access to...:

Blood safety: Agree

Condom promotion: Strongly agree

Economic support e.g. cash transfers: N/A

Harm reduction for people who inject drugs: N/A

HIV prevention for out-of-school young people: Disagree

HIV prevention in the workplace: Agree

HIV testing and counseling: Strongly agree

IEC on risk reduction: Strongly agree

IEC on stigma and discrimination reduction: Strongly agree

Prevention of mother-to-child transmission of HIV: Strongly agree

Prevention for people living with HIV: Agree

Reproductive health services including sexually transmitted infections prevention and treatment: Agree

Risk reduction for intimate partners of key populations: Disagree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Strongly agree

Reduction of gender based violence: Agree

School-based HIV education for young people: Strongly agree

Treatment as prevention: Strongly agree

Universal precautions in health care settings: Agree

Other [write in]:

: N/A

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in implementation of HIV prevention programmes in 2013?: 7

A.V Treatment, care and support

1. Has the country identified the essential elements of a comprehensive package of HIV treatment, care and support services?: Yes

If YES, Briefly identify the elements and what has been prioritized:: - TAR chez les adultes et adolescents - TAR pédiatrique - TTT contre les infections opportunistes chez les PVVIH - Appui nutritionnel - Prévention de la transmission du VIH chez les PVVIH - Appui psychologique, spirituel et social chez les PIAVIH

Briefly identify how HIV treatment, care and support services are being scaled-up?: - Augmentation des sites de prise en charge médicale du VIH

1.1. To what extent have the following HIV treatment, care and support services been implemented?

The majority of people in need have access to...:

Antiretroviral therapy: Strongly agree

ART for TB patients: Strongly agree

Cotrimoxazole prophylaxis in people living with HIV: Agree

Early infant diagnosis: Disagree

Economic support: N/A

Family based care and support: Agree

HIV care and support in the workplace (including alternative working arrangements): Agree

HIV testing and counselling for people with TB: Agree

HIV treatment services in the workplace or treatment referral systems through the workplace: Disagree

Nutritional care: Agree

Paediatric AIDS treatment: Strongly agree

Palliative care for children and adults Palliative care for children and adults: Agree

Post-delivery ART provision to women: Agree

Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault): Disagree

Post-exposure prophylaxis for occupational exposures to HIV: Agree

Psychosocial support for people living with HIV and their families: Agree

Sexually transmitted infection management: Strongly agree

TB infection control in HIV treatment and care facilities: Agree

TB preventive therapy for people living with HIV: N/A

TB screening for people living with HIV: Agree

Treatment of common HIV-related infections: Strongly agree

Other [write in]: Dépistage du VIH chez les personnes atteintes de tuberculose

: Agree

2. Does the government have a policy or strategy in place to provide social and economic support to people infected/affected by HIV?: Yes

Please clarify which social and economic support is provided: Soutien économique et social pour les PIAVIH

3. Does the country have a policy or strategy for developing/using generic medications or parallel importing of medications for HIV?: Yes

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

IF YES, for which commodities?: ARV Médicaments pour IO Préservatifs

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care, and support programmes in 2013?: 8

Since 2011, what have been key achievements in this area?: - Formation et mise à niveau des prestataires de soins sur les directives nationales en matière de prise en charge médicale des PVVIH - Renforcement de l'intégration des services de prise en charge dans les centres de santé

What challenges remain in this area?: - Insuffisance de laboratoires pour la réalisation du bilan initial - Taux élevé de perdus de vue des PVVIH

6. Does the country have a policy or strategy to address the needs of orphans and other vulnerable children?: Yes

6.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: Yes

6.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children?: Yes

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2013?: 7

Since 2011, what have been key achievements in this area?: Soutien scolaire, sanitaire, nutritionnel et juridique pour les OEV

What challenges remain in this area?: - Difficulté liée à l'identification des OEV

A.VI Monitoring and evaluation

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

Briefly describe any challenges in development or implementation?: - Insuffisance de financements pour la mise en œuvre des activités de SE - Insuffisance de rapportage

1.1. IF YES, years covered: 2011 - 2015

1.2. IF YES, have key partners aligned and harmonized their M&E requirements (including indicators) with the national M&E plan?: Yes, all partners

Briefly describe what the issues are?: - Insuffisance de ressources humaines qualifiées(statisticiens ; informaticiens ; gestionnaire de données) pour animer les postes de SE à tous les niveaux du SE - Insuffisance de financements pour la mise en œuvre des activités de SE - Faible qualité des données - Faible niveau de suivi des activité VIH/sida

2. Does the national Monitoring and Evaluation plan include?

A data collection strategy: Yes

IF YES, does it address?:

Behavioural surveys: Yes

Evaluation / research studies: Yes

HIV Drug resistance surveillance: Yes

HIV surveillance: Yes

Routine programme monitoring: Yes

A data analysis strategy: Yes

A data dissemination and use strategy: Yes

A well-defined standardised set of indicators that includes sex and age disaggregation (where appropriate): Yes

Guidelines on tools for data collection: Yes

3. Is there a budget for implementation of the M&E plan?: No

3.1. IF YES, what percentage of the total HIV programme funding is budgeted for M&E activities?:

4. Is there a functional national M&E Unit?: Yes

Briefly describe any obstacles:: - Inadéquation des descriptions de poste avec les douze composantes d'un système de SE fonctionnel - Faible niveau de collaboration entre les différents ministères ayant attribution des activités VIH/sida - Non respect des délais de transmission systématique des données

4.1. Where is the national M&E Unit based?

In the Ministry of Health?: Yes

In the National HIV Commission (or equivalent)?: No

Elsewhere?: No

If elsewhere, please specify:

4.2. How many and what type of professional staff are working in the national M&E Unit?

POSITION [write in position titles]	Fulltime or Part-time?	Since when?
Un Directeur	Temps plein	2003
Deux sous directeurs	Temps plein	2003
Dix agents	Temps plein	2003

POSITION [write in position titles]	Fulltime or Part-time?	Since when?
Trois agents contractuels	Temps plein	2003

4.3. Are there mechanisms in place to ensure that all key partners submit their M&E data/reports to the M&E Unit for inclusion in the national M&E system?: Yes

Briefly describe the data-sharing mechanisms:: - Il existe un circuit de l'information qui part du niveau périphérique (niveau de mise en oeuvre des activités) jusqu'au niveau central en passant par le niveau intermédiaire. - Organisation d'ateliers de validation et d'harmonisation de données - Élaboration et diffusion de différents rapports d'activités

What are the major challenges in this area:: - insuffisance de ressources humaines qualifiées (Statisticiens, Informaticiens, Gestionnaires de données) pour animer les postes de suivi évaluation à tous les niveaux du suivi évaluation - Insuffisance de financements - Non respect des délais de transmission systématique des données - Insuffisance des moyens matériels de travail (ordinateurs, connexion internet, matériel roulant pour les supervisions et la collecte des données, etc.).

5. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?: Yes

6. Is there a central national database with HIV- related data?: Yes

IF YES, briefly describe the national database and who manages it.: Le MRS (Monitoring Reporting System) Les données sont collectées au Niveau des organisations à base communautaires et transmises au Niveau régional où elles sont saisies dans le logiciel MRS puis transmises à la DPSES où elles sont gérées dans la base centrale MRS. Le responsable de sa gestion est le directeur de la DPSES

6.1. IF YES, does it include information about the content, key populations and geographical coverage of HIV services, as well as their implementing organizations?: Yes, all of the above

IF YES, but only some of the above, which aspects does it include?:

6.2. Is there a functional Health Information System?

At national level: Yes

At subnational level: No

IF YES, at what level(s)?: niveau national

7.1. Are there reliable estimates of current needs and of future needs of the number of adults and children requiring antiretroviral therapy?: Estimates of Current and Future Needs

7.2. Is HIV programme coverage being monitored?: Yes

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

(b) IF YES, is coverage monitored by population groups?: Yes

IF YES, for which population groups?: - Jeunes et femmes - Professionnel (les) du sexe - Hommes ayant des rapports sexuels avec les hommes - Population carcérale - Hommes en uniforme - Utilisateurs de drogue injectable

Briefly explain how this information is used:: Production de documentation (rapports VIH, site web, bulletin d'information, réseautage) renforçant la visibilité des interventions menées dans le domaine de la lutte contre le sida.

(c) Is coverage monitored by geographical area?: Yes

IF YES, at which geographical levels (provincial, district, other)?: - Niveau régional /province - Niveau départemental/district

Briefly explain how this information is used:: - Production de rapports d'activités VIH régionaux - Élaboration de plans opérationnels régionaux - Élaboration de plans d'action départementaux

8. Does the country publish an M&E report on HIV, including HIV surveillance data at least once a year?: Yes

9. How are M&E data used?

For programme improvement?: Yes

In developing / revising the national HIV response?: Yes

For resource allocation?: Yes

Other [write in]:

: No

Briefly provide specific examples of how M&E data are used, and the main challenges, if any:: - Amélioration de la qualité des données - Élaboration du dictionnaire des indicateurs

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

At national level?: Yes

IF YES, what was the number trained::

At subnational level?: Yes

IF YES, what was the number trained:

At service delivery level including civil society?: Yes

IF YES, how many?:

10.1. Were other M&E capacity-building activities conducted other than training?: Yes

IF YES, describe what types of activities: - Évaluation de la qualité des données avec l'outil RDQA

11. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the HIV-related monitoring and evaluation (M&E) in 2013?: 8

Since 2011, what have been key achievements in this area?: - Conduite de l'enquête EDS-MICS 2011-2012 - Élaboration du Plan National de l'information stratégique 2011-2015 - Révision des indicateurs VIH 2012 avec l'élaboration du dictionnaire national des indicateurs

What challenges remain in this area?: - Faible implication des décideurs dans le soutien des activités de plaidoyer pour la mobilisation des ressources financières pour la mise en oeuvre des activités S&E - Faible utilisation des produits générés par les acteurs du S&E pour la planification et la prise de décision.

B.I Civil Society involvement

1. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?: 3

Comments and examples:: L'implication de la société civile à certains niveaux, comme la participation à l'élaboration des documents de politiques et stratégies nationales, le plaidoyer pour la mobilisation des ressources, le renforcement des capacités, le suivi et évaluation des organisations est appréciable. Cette implication aurait été plus conséquente si : • La société civile disposait d'un peu plus de ressources matérielles, logistiques, techniques et financière • Pour la mise en oeuvre des politiques définies l'implication de la société civile était effective.

2. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") have civil society representatives been involved in the planning and budgeting process for the National Strategic Plan on HIV or for the most current activity plan (e.g. attending planning meetings and reviewing drafts)?: 4

Comments and examples:: Participation de la société civile aux différentes étapes du processus de planification et de budgétisation du plan stratégique national

3. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") are the services provided by civil society in areas of HIV prevention, treatment, care and support included in:

a. The national HIV strategy?: 5

b. The national HIV budget?: 2

c. The national HIV reports?: 4

Comments and examples:: Participation significative à tous les niveaux, budget national à améliorer

4. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") is civil society included in the monitoring and evaluation (M&E) of the HIV response?

a. Developing the national M&E plan?: 4

b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?: 4

c. Participate in using data for decision-making?: 1

Comments and examples: Participation à tous les niveaux du plan national de suivi et évaluation sauf pour l'utilisation des données pour la prise de décision

5. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") is civil society representation in HIV efforts inclusive of diverse organizations (e.g. organisations and networks of people living with HIV, of sex workers, community based organisations , and faith-based organizations)?: 5

Comments and examples: Toutes les cibles sont représentées

6. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") is civil society able to access:

a. Adequate financial support to implement its HIV activities?: 4

b. Adequate technical support to implement its HIV activities?: 4

Comments and examples: Accès direct au guichet du financement et à l'appui technique

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

Prevention for key-populations:

People living with HIV: 51-75%

Men who have sex with men: <25%

People who inject drugs: <25%

Sex workers: 25-50%

Transgender people: <25%

Palliative care : 51-75%

Testing and Counselling: >75%

Know your Rights/ Legal services: <25%

Reduction of Stigma and Discrimination: 51-75%

Clinical services (ART/OI): <25%

Home-based care: 25-50%

Programmes for OVC: 51-75%

8. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to increase civil society participation in 2013?: 6

Since 2011, what have been key achievements in this area:: Appuis techniques et institutionnels aux organisations de la société civile, appui du fonds national de lutte contre le sida, appui direct des partenaires aux organisations de la société civile

What challenges remain in this area:: • Améliorer le mécanisme de financement et de mobilisation de ressource en interne • Développer des mécanismes de rétention des ressources humaines qualifiées au sein des organisations de la société civile • Développer un système de mise à disposition des fonctionnaires aux réseaux

B.II Political support and leadership

1. Has the Government, through political and financial support, involved people living with HIV, key populations and/or other vulnerable sub-populations in governmental HIV-policy design and programme implementation?:

Yes

IF YES, describe some examples of when and how this has happened:: • Existence de programme pour les populations vivant avec le vih/sida et les populations hautement vulnérables. • Financement du Fonds National de lutte contre le sida • Caution de l'Etat pour le financement des ONG par les partenaires

B.III Human rights

1.1. Does the country have non-discrimination laws or regulations which specify protections for specific key populations and other vulnerable subpopulations? Circle yes if the policy specifies any of the following key populations:

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: Yes

Prison inmates: Yes

Sex workers: Yes

Transgender people: Yes

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations [write in]::

: No

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:

Yes

IF YES to Question 1.1 or 1.2, briefly describe the contents of these laws:: Ces lois font la promotion du droit à la santé, à la sécurité, à l'intégrité physique, du droit d'association, de la libre circulation de personne, le droit à un logement décent

Briefly explain what mechanisms are in place to ensure that these laws are implemented:: Institution d'une commission nationale des droits de l'homme (enquête et poursuite des auteurs de violations de droits de l'homme ; Existence des Plates formes au sein des centres sociaux (OEV, VBG) ; existence d'une commission de lutte contre les violences faites aux femmes, mécanisme d'assistance judiciaires pour les personnes les plus vulnérables, la côte d'ivoire a ratifiée les conventions internationales (torture, migrants...) la possibilité pour tous les justiciables de saisir les tribunaux

Briefly comment on the degree to which they are currently implemented:: Ces lois sont d'application moyenne. Plusieurs facteurs expliquent cet état de fait notamment la méconnaissance des lois par les détenteurs des droits, insuffisance de vulgarisation des lois, pesanteurs sociaux culturels, les défaillances du système judiciaire, difficile accès des tribunaux

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?: No

2.1. IF YES, for which sub-populations?

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]:

: No

Briefly describe the content of these laws, regulations or policies::

Briefly comment on how they pose barriers::

3. Does the country have a policy, law or regulation to reduce violence against women, including for example, victims of sexual assault or women living with HIV?: No

Briefly describe the content of the policy, law or regulation and the populations included.:

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

IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:: DAP axe 3 réduction de l'impact socio économique / PSN révisé 2012 - 2015 Sous effet 3.1 : 80 % de personnes infectées et ou affectées par le VIH sont protégées contre la stigmatisation et la discrimination basée sur leur statut

5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, key populations and other vulnerable populations?: No

IF YES, briefly describe this mechanism::

6. Does the country have a policy or strategy of free services for the following? Indicate if these services are provided free-of-charge to all people, to some people or not at all (circle "yes" or "no" as applicable).

Antiretroviral treatment:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: No

HIV prevention services:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: No

HIV-related care and support interventions:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: No

If applicable, which populations have been identified as priority, and for which services?:

7. Does the country have a policy or strategy to ensure equal access for women and men to HIV prevention, treatment, care and support?: Yes

7.1. In particular, does the country have a policy or strategy to ensure access to HIV prevention, treatment, care and support for women outside the context of pregnancy and childbirth?: Yes

8. Does the country have a policy or strategy to ensure equal access for key populations and/or other vulnerable sub-populations to HIV prevention, treatment, care and support?: Yes

IF YES, Briefly describe the content of this policy/strategy and the populations included:: Le document de politique nationale de prise en charge médicale des PVVIH (Guide national de PEC médicale des MSM Manuel de référence de CCC chez les PS et les MSM Ces documents décrivent les stratégies et messages de communication appropriée pour ces cibles, décrivent les services offerts, le protocole de soin pour les infections opportunistes contractées

8.1. IF YES, does this policy/strategy include different types of approaches to ensure equal access for different key populations and/or other vulnerable sub-populations?: Yes

IF YES, briefly explain the different types of approaches to ensure equal access for different populations::
Renforcement des capacités de prestataires, gratuité des prestations, existence de centres accrédités, respect de l'éthique et de la déontologie médicale

9. Does the country have a policy or law prohibiting HIV screening for general employment purposes (recruitment, assignment/relocation, appointment, promotion, termination)?: Yes

IF YES, briefly describe the content of the policy or law:: Le code du travail en son article 43.1 pose la règle de la non discrimination dans l'accès au travail et impose à l'employeur une obligation d'assurer u service de santé au travail au profit de tout travailleur

10. Does the country have the following human rights monitoring and enforcement mechanisms?

a. Existence of independent national institutions for the promotion and protection of human rights, including human rights commissions, law reform commissions, watchdogs, and ombudspersons which consider HIV-related issues within their work: Yes

b. Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts: Yes

IF YES on any of the above questions, describe some examples:: DAP axe 3 réduction de l'impact socio économique / PSN révisé 2012 - 2015 Sous effet 3.1 : 80 % de personnes infectées et ou affectées par le VIH sont protégées contre la stigmatisation et la discrimination basée sur leur statut

11. In the last 2 years, have there been the following training and/or capacity-building activities:

a. Programmes to educate, raise awareness among people living with HIV and key populations concerning their rights (in the context of HIV)?: Yes

b. Programmes for members of the judiciary and law enforcement⁴⁶ on HIV and human rights issues that may come up in the context of their work?: Yes

12. Are the following legal support services available in the country?

a. Legal aid systems for HIV casework: No

b. Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV: No

13. Are there programmes in place to reduce HIV-related stigma and discrimination?: Yes

IF YES, what types of programmes?:

Programmes for health care workers: Yes

Programmes for the media: Yes

Programmes in the work place: Yes

Other [write in]: Comités de lutte contre le sida au niveau des religieux, les hommes en arme, les routiers etc

: Yes

14. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2013?: 5

Since 2011, what have been key achievements in this area: Mise en conformité de la Commission Nationale des Droits de l’Homme avec les principes de Paris ; Réhabilitation des commissariats, des prisons et des tribunaux ; révision du code la famille ...

What challenges remain in this area: Rendre fonctionnel le comité d’éthique (siège, budget, suivi) Développer des curricula de formation e direction des conseillers communautaire pour le prise e charge des handicapés, sourds et muet Rendre opérationnel les services de l’assistance judiciaire dans tous les tribunaux de première instance du pays Apporter des subventions aux ONG qui font de l’assistance juridique

15. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the effort to implement human rights related policies, laws and regulations in 2013?: 5

Since 2011, what have been key achievements in this area: Création de ligne verte pour dénoncer les abus d’autorités et les violences

What challenges remain in this area: Vulgarisation des lois, règlement et mécanisme de protection ; Formation des détenteurs de droits et des Institutions aux défis nouveaux de la protection des droits de l’homme

B.IV Prevention

1. Has the country identified the specific needs for HIV prevention programmes?: Yes

IF YES, how were these specific needs determined?: A travers des analyses situationnelles

IF YES, what are these specific needs? : Formation Prise e charge Prévention

1.1 To what extent has HIV prevention been implemented?

The majority of people in need have access to...:

Blood safety: Agree

Condom promotion: Agree

Harm reduction for people who inject drugs: Strongly disagree

HIV prevention for out-of-school young people: Disagree

HIV prevention in the workplace: Agree

HIV testing and counseling: Agree

IEC on risk reduction: Agree

IEC on stigma and discrimination reduction: Agree

Prevention of mother-to-child transmission of HIV: Agree

Prevention for people living with HIV: Agree

Reproductive health services including sexually transmitted infections prevention and treatment: Agree

Risk reduction for intimate partners of key populations: Agree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Agree

School-based HIV education for young people: Agree

Universal precautions in health care settings: Agree

Other [write in]:

:

2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV prevention programmes in 2013?: 7

Since 2011, what have been key achievements in this area?: Programmes spécifiques implémentées chez les populations clés et les populations vulnérables, élaboration et mise à disposition des documents de politiques et de normes, La Côte d'Ivoire a été éligible au Round 9 Fonds Mondial et au PEPFAR

What challenges remain in this area?: Accroître le financement des réseaux Appui direct aux réseaux pour une couverture à l'échelle nationale Doter la plate forme des réseaux de lutte contre le VIH et les autres pandémies d'un plan commun de mobilisation de ressources Communiquer davantage sur les actions menées

B.V Treatment, care and support

1. Has the country identified the essential elements of a comprehensive package of HIV treatment, care and support services?: Yes

IF YES, Briefly identify the elements and what has been prioritized?: Accès universel au traitement et aux soins et soutien, Comme priorité, le renforcement des prestataires de soins pour la prescription des ARV, Développement des soins à domicile et des soins communautaires ; développement des ressources humaines en soins et soutien ; mobilisation sociale ; Développement de la recherche et de la qualité des soins

Briefly identify how HIV treatment, care and support services are being scaled-up?: Décentralisation et multisectorialité de la lutte contre le sida (plans régionaux de soins et soutien

1.1. To what extent have the following HIV treatment, care and support services been implemented?

The majority of people in need have access to...:

Antiretroviral therapy: Strongly agree

ART for TB patients: Agree

Cotrimoxazole prophylaxis in people living with HIV: Agree

Early infant diagnosis: Disagree

HIV care and support in the workplace (including alternative working arrangements): Disagree

HIV testing and counselling for people with TB: Agree

HIV treatment services in the workplace or treatment referral systems through the workplace: Disagree

Nutritional care: Agree

Paediatric AIDS treatment: Agree

Post-delivery ART provision to women: Agree

Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault): Agree

Post-exposure prophylaxis for occupational exposures to HIV: Agree

Psychosocial support for people living with HIV and their families: Strongly agree

Sexually transmitted infection management: Agree

TB infection control in HIV treatment and care facilities: Agree

TB preventive therapy for people living with HIV: Agree

TB screening for people living with HIV: Agree

Treatment of common HIV-related infections: Agree

Other [write in]:

:

1.2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2013?: 7

Since 2011, what have been key achievements in this area: Formation des Médecin sur la prescription des ARV par le PNPEC Formation de conseillers communautaire par le PNPEC sur la qualité des interventions Instauration de l'utilisation du CSI par le PNOEV Formation des acteurs communautaires en matière de VBG (RIP+)

What challenges remain in this area: Pérenniser les activités pour le soutenir les survivants de VBG Faire le suivi des Equipes qualité

2. Does the country have a policy or strategy to address the needs of orphans and other vulnerable children?:

Yes

2.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: Yes

2.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children?: No

3. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2013?: 7

Since 2011, what have been key achievements in this area:: Les activités VIH ont été prises en compte dans le cahier de charge des prestataires de soins Utilisation de l'outil CSI par les communautaires pour l'offre de service aux OEV Mise e œuvre de la politique de développement de la petite enfance

What challenges remain in this area:: Développer les services intégrés de PEC Redynamiser l'approche District Communiquer davantage sur les programmes de PEC