

## Survey Response Details

### Response Information

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### Response Details

#### Page 1

**1) Country**

Gabon (0)

**2) Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:**

Dr Guy Patrick OBIANG NDONG Directeur Général Adjoint de la Prévention du Sida

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+241748717

**6) E-mail:**

guypat17@yahoo.fr

**7) Date of submission:**

Please enter in DD/MM/YYYY format

31/03/2010

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**8) Describe the process used for NCPI data gathering and validation:**

1) Inventaire des parties prenantes clés de la lutte contre le VIH/sida; 2) Assurance de la représentation de toutes les catégories d'acteurs; 3) Impression des questionnaires; 4) Recrutement et formation des enquêteurs; 5) Test des deux catégories de questionnaires; 6) Collecte et contrôle simultané de la vraisemblance des réponses. Les retours vers les enquêtés

sont systématiquement organisés en cas d'incohérence; 7) Compilation des données qualitative et calcul des moyennes pour les données numériques; 8) Présentation des résultats de la compilation lors de l'atelier de consensus et arrêt de la version finale des données de l'indice. N.B.: Certains acteurs se sont regroupés pour remplir collégalement certaines questions qui pouvaient être sources de divergence.

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

Les quelques désaccords apparus lors de la présentation des résultats de l'indice, des discussions pour applanir les divergences ont été engagées. Sans accord consensuel, le vote a été le moyen utilisé pour départager les positions qui s'opposaient.

10)

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

L'appréciation de la qualité des performances en matière de suivi et évaluation est relativement différente pour les responsables publics et les acteurs de la société civile, des organismes bilatéraux et du SNU. Après audition des deux catégories d'acteurs, les différences de compréhension ont été bien perçues et utilisées dans l'analyse.

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11)

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

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 1	D.G. Prévention du Sida	OBIANG/DGA	A.I, A.II, A.III, A.IV

12)

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 2	Comité VIH/sida-Budget	OUNGOUANDE/Responsable du Comité	A.I, A.II, A.III
Respondent 3	Programme Nat. de lutte contre les IST	Dr BIBA/Directrice	A.I, A.II, A.III, A.IV, A.V
Respondent 4	Service Infectiologie CHL	Dr MISTOUL/Chef de Service	A.I, A.III, A.IV, A.V
Respondent 5	Service IEC PLIST	M. MBOUMA/Chef de Service	A.I, A.II, A.III, A.IV, A.V
Respondent 6	Service PTME PLIST	Mme AVOME/Chef de Service	A.I, A.III, A.IV, A.V
Respondent 7	Comité VIH/sida-Défense	Général BA OUMAR/Responsable du Comité	A.I, A.III, A.IV, A.V
Respondent 8	Comité VIH/sida-Enseignement Supérieur	Pr MINSO/Responsable Comité	A.I, A.II, A.III, A.IV
Respondent	Comité VIH/sida-Education	M. NIZAMBA/Coordinateur du	

Respondent 9	Comite VIH/Sida-Education Nationale	M. NZAMBA/Coordinateur du Comité	A.I, A.II, A.III, A.IV
Respondent 10			
Respondent 11			
Respondent 12			
Respondent 13			
Respondent 14			
Respondent 15			
Respondent 16			
Respondent 17			
Respondent 18			
Respondent 19			
Respondent 20			
Respondent 21			
Respondent 22			
Respondent 23			
Respondent 24			
Respondent 25			

13)

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

Organization Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 1 UNHCR NDJOYA Nadine	B.I, B.II, B.IV

14)

Organization	Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 2 UNFPA	Dr KEBA	B.I, B.II, B.III, B.IV
Respondent 3 FAO	NGANDJI Michel	B.I, B.II, B.III, B.IV
Respondent 4 ONUSIDA	Dr NZE EYOO	B.I, B.II, B.III, B.IV

Respondent 5	PNUD	Dr MBONE	B. I, B. II, B. III, B. IV
Respondent 6	UNICEF		B. I, B. II, B. III
Respondent 7	Pont de la vie	Mme EDOU/Présidente	B. I, B. II, B. III, B. IV
Respondent 8	RENAPS/AJ	M. MOMBO/Coordonnateur	B. I, B. II, B. III
Respondent 9	ACERAC GABON	Père KAZADI/Coordonnateur	B. I, B. II, B. III, B. IV
Respondent 10	ONG CONSCIENCE	Mme MATOUKAM/Présidente	B. I, B. II, B. III, B. IV
Respondent 11	ONG Lumière	Mme BEKALE/Présidente	B. I, B. II, B. III, B. IV
Respondent 12	ONG AFCG	Mme OBONE/Présidente	B. I, B. II, B. III, B. IV
Respondent 13	GEOSS REGOSA	Président	B. I, B. II, B. III, B. IV
Respondent 14	GRACELAND	Président	B. I, B. II, B. III, B. IV
Respondent 15	ONG ADDFE	Mme ENIE/Présidente	B. I, B. II, B. III, B. IV
Respondent 16	MGBEF	M. NGOMA/Directeur Exécutif	B. I, B. II, B. III, B. IV
Respondent 17	Société SEEG	Dr ZIMA	B. I, B. II, B. III, B. IV
Respondent 18			
Respondent 19			
Respondent 20			
Respondent 21			
Respondent 22			
Respondent 23			
Respondent 24			
Respondent 25			

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15)

### Part A, Section I: STRATEGIC PLAN

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

**(Multisectoral strategies should include, but are not limited to, those developed by Ministries such as the ones listed under 1.2)**

Yes (0)

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**16) Part A, Section I: STRATEGIC PLAN**

**Question 1 (continued)**

**Period covered:**

2001-2012

17)

**1.1 How long has the country had a multisectoral strategy?**

**Number of Years**

9

18)

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

	Included in strategy	Earmarked budget
Health	Yes	Yes
Education	Yes	Yes
Labour	Yes	Yes
Transportation	Yes	No
Military/Police	Yes	Yes
Women	Yes	Yes
Young people	Yes	Yes
Other*		

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19)

**Part A, Section I: STRATEGIC PLAN**

**1.3 Does the multisectoral strategy address the following target populations, settings and crosscutting issues?**

<b>Target populations</b>	
a. Women and girls	Yes
b. Young women/young men	Yes
c. Injecting drug users	No
d. Men who have sex with men	No
e. Sex workers	Yes
f. Orphans and other vulnerable children	Yes
g. Other specific vulnerable subpopulations*	Yes
<b>Settings</b>	
h. Workplace	Yes

i. Schools	Yes
j. Prisons	Yes
<b>Cross-cutting issues</b>	
k. HIV and poverty	Yes
l. Human rights protection	Yes
m. Involvement of people living with HIV	Yes
n. Addressing stigma and discrimination	Yes
o. Gender empowerment and/or gender equality	Yes

20)

**1.4 Were target populations identified through a needs assessment?**

Yes (0)

**Page 10**

21)

**Part A, Section I: STRATEGIC PLAN****Question 1.4 (continued)****IF YES, when was this needs assessment conducted?**

Please enter the year in yyyy format

2007

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22)

**Part A, Section I: STRATEGIC PLAN****1.5 What are the identified target populations for HIV programmes in the country?**

Professionnelles du sexe et leurs clients, Jeunes de 15-24 ans, les populations mobiles et transfrontalières, les forces de défense et de sécurité, les hommes et les femmes ayant les IST, les femmes en âge de procréer, les populations carcérales, les pygmés, les PVVIH, les Orphelins et enfants rendus vulnérables.

23)

**1.6 Does the multisectoral strategy include an operational plan?**

Yes (0)

24)

**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?	Yes

e. A monitoring and evaluation framework?  Yes

25)

**1.8 Has the country ensured “full involvement and participation” of civil society\* in the development of the multisectoral strategy?**

Active involvement (0)

**Page 12**

26)

**Part A, Section I: STRATEGIC PLAN**

**Question 1.8 (continued)**

**IF active involvement, briefly explain how this was organised:**

Les acteurs de la société civile ont été associés à tous les processus de planification stratégique et opérationnelle.

27)

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

Yes (0)

28)

**1.10 Have external development partners aligned and harmonized their HIV-related programmes to the national multisectoral strategy?**

Yes, all partners (0)

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29)

**Part A, Section I: STRATEGIC PLAN**

**2. Has the country integrated HIV into its general development plans such as in: (a) National Development Plan; (b) Common Country Assessment / UN Development Assistance Framework; (c) Poverty Reduction Strategy; and (d) sector-wide approach?**

Yes (0)

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30)

**Part A, Section I: STRATEGIC PLAN**

**2.1 IF YES, in which specific development plan(s) is support for HIV integrated?**

a. National Development Plan

Yes

b. Common Country Assessment / UN Development Assistance Framework	Yes
c. Poverty Reduction Strategy	Yes
d. Sector-wide approach	Yes
e. Autres: insérer	

31)

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

HIV-related area included in development plan(s)	
HIV prevention	Yes
Treatment for opportunistic infections	Yes
Antiretroviral treatment	Yes
Care and support (including social security or other schemes)	Yes
HIV impact alleviation	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	Yes
Reduction of stigma and discrimination	Yes
Women's economic empowerment (e.g. access to credit, access to land, training)	No
Autres: insérer	

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32)

**Part A, Section I: STRATEGIC PLAN**

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

Yes (0)

**Page 17**

33)

**Part A, Section I: STRATEGIC PLAN**

**3.1 IF YES, to what extent has it informed resource allocation decisions?**

4 (4)

34)

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

Yes (0)

**Page 18**

35)



**Part A, Section I: STRATEGIC PLAN**

**4.1 IF YES, which of the following programmes have been implemented beyond the pilot stage to reach a significant proportion of the uniformed services?**

Behavioural change communication	Yes
Condom provision	Yes
HIV testing and counselling	Yes
Sexually transmitted infection services	Yes
Antiretroviral treatment	Yes
Care and support	Yes
Autres: insérer	

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36)

**Part A, Section I: STRATEGIC PLAN****Question 4.1 (continued)**

**If HIV testing and counselling is provided to uniformed services, briefly describe the approach taken to HIV testing and counselling (e.g, indicate if HIV testing is voluntary or mandatory etc):**

Des campagnes de sensibilisation et de dépistage volontaire sont organisées chez les hommes en uniforme par le Comité sectoriel de lutte contre le sida du Ministère de la Défense Nationale. Il existe un centre de dépistage volontaire et anonyme au sein du principal camp militaire.

37)

**5. Does the country have non-discrimination laws or regulations which specify protections for most-at-risk populations or other vulnerable subpopulations?**

No (0)

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38)

**Part A, Section I: STRATEGIC PLAN**

**6. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for most-at-risk populations or other vulnerable subpopulations?**

No (0)

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39)

**Part A, Section I: STRATEGIC PLAN**

**7. Has the country followed up on commitments towards universal access made during the High-Level AIDS Review in June 2006?**

Yes (0)

**Page 24**

40)

**Part A, Section I: STRATEGIC PLAN**

**7.1 Have the national strategy and national HIV budget been revised accordingly?**

Yes (0)

41)

**7.2 Have the estimates of the size of the main target populations been updated?**

Yes (0)

**Page 25**

42)

**Part A, Section I: STRATEGIC PLAN**

**7.3 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 (0)

43)

**7.4 Is HIV programme coverage being monitored?**

Yes (0)

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44)

**Part A, Section I: STRATEGIC PLAN**

**Question 7.4 (continued)**

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

Yes (0)

45)

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

Yes (0)

**Page 27**

46)

**Part A, Section I: STRATEGIC PLAN****Question 7.4 (b) (continued)****IF YES, for which population groups?**

PVVIH, Femmes enceintes infectées par le VIH, les enfants, les hommes en uniforme et population générale.

47)

**Briefly explain how this information is used:**

Les données permettent de faire un plaidoyer auprès du Gouvernement et des Partenaires au développement pour accentuer les efforts de lutte contre le sida et de réorienter la riposte nationale.

**Page 28**48) **Part A, Section I: STRATEGIC PLAN****Question 7.4 (continued)****(c) Is coverage monitored by geographical area?**

Yes (0)

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49)

**Part A, Section I: STRATEGIC PLAN****Question 7.4 (c) (continued)****IF YES, at which geographical levels (provincial, district, other)?**

Province

50)

**Briefly explain how this information is used:**

L'information recueillie au niveau provincial est remontée au niveau central pour recadrer les interventions.

51)

**7.5 Has the country developed a plan to strengthen health systems, including infrastructure, human resources and capacities, and logistical systems to deliver drugs?**

Yes (0)

**Page 30**

52)

**Part A, Section I: STRATEGIC PLAN****Question 7.5 (continued)**

**Overall, how would you rate strategy planning efforts in the HIV programmes in 2009?**

6 (6)

53)

**Since 2007, what have been key achievements in this area:**

Revue du Plan Stratégique 2001-2006; Elaboration du Plan Stratégique National 2008-2012; Elaboration du Plan Opérationnel 2009-2010; Elaboration de la Stratégie Nationale du Marketing social du préservatif; Elaboration de la Stratégie Nationale de Communication.

54)

**What are remaining challenges in this area:**

Elaboration du Plan et du guide national de Suivi-Evaluation; Elaboration d'un Plan National de Communication sur le VIH/sida.

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55)

**Part A, Section II: POLITICAL SUPPORT**

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

President/Head of government	Yes
Other high officials	Yes
Other officials in regions and/or districts	Yes

56)

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

Yes (0)

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57)

**2.1 IF YES, when was it created?**

Please enter the year in yyyy format

2007

58)

**2.2 IF YES, who is the Chair?**

Name	BONGO ONDIMBA
Position/title	Président de la République

59)

**2.3 IF YES, does the national multisectoral AIDS coordination body:**

have terms of reference?	No
have active government leadership and participation?	Yes
have a defined membership?	Yes
include civil society representatives?	Yes
include people living with HIV?	Yes
include the private sector?	Yes
have an action plan?	No
have a functional Secretariat?	No
meet at least quarterly?	No
review actions on policy decisions regularly?	No
actively promote policy decisions ?	No
provide opportunity for civil society to influence decision-making?	No
strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?	No

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60)

**Part A, Section II: POLITICAL SUPPORT**

**Question 2.3 (continued)**

**If you answer "yes" to the question "does the National multisectoral AIDS coordination body have a defined membership", how many members?**

Please enter an integer greater than or equal to 1  
30

61)

**If you answer "yes" to the question "does the National multisectoral AIDS coordination body include civil society representatives", how many?**

Please enter an integer greater than or equal to 1  
3

62)

**If you answer "yes" to the question "does the National multisectoral AIDS coordination body include people living with HIV", how many?**

Please enter an integer greater than or equal to 1  
2

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63)

**Part A, Section II: POLITICAL SUPPORT**

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

Yes (0)

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64)

**Part A, Section II: POLITICAL SUPPORT****Question 3 (continued)****IF YES, briefly describe the main achievements:**

Elaboration des différents documents normatifs et stratégiques suivi de la mise en oeuvre des interventions du PSN 2008-2012 Coordination des enquêtes statistiques; Mobilisation des ressources; Appui à la société civile; Soumission des rapports internationaux (UNGASS, Accès universel,...).

65)

**Briefly describe the main challenges:**

CNLS non fonctionnel; Absence d'un forum des Partenaires; Faiblesse du système de suivi-évaluation.

66)

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

Please enter the rounded percentage (0-100)

2

67)

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

Information on priority needs	Yes
Technical guidance	Yes
Procurement and distribution of drugs or other supplies	Yes
Coordination with other implementing partners	Yes
Capacity-building	Yes
Autres: Financement des activités	Yes

68)

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

No (0)

**Page 38**

69)

**Part A, Section II: POLITICAL SUPPORT**

**Question 6.1 (continued)**

**Overall, how would you rate the political support for the HIV programmes in 2009?**

5 (5)

70)

**Since 2007, what have been key achievements in this area:**

Décentralisation de la prise en charge des PVVIH; Création du CNLS.

71)

**What are remaining challenges in this area:**

Fonctionnalité du CNLS

**Page 39**

72)

**Part A, Section III: PREVENTION**

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

Yes (0)

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73)

**Part A, Section III: PREVENTION**

**1.1 IF YES, what key messages are explicitly promoted?**

Check for key message explicitly promoted (multiple options allowed)

a. Be sexually abstinent (0)

b. Delay sexual debut (0)

c. Be faithful (0)

- d. Reduce the number of sexual partners (0)
- e. Use condoms consistently (0)
- f. Engage in safe(r) sex (0)
- i. Use clean needles and syringes (0)
- j. Fight against violence against women (0)
- k. Greater acceptance and involvement of people living with HIV (0)
- l. Greater involvement of men in reproductive health programmes (0)
- n. Know your HIV status (0)
- o. Prevent mother-to-child transmission of HIV (0)

74)

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

Yes (0)

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75)

**Part A, Section III: PREVENTION**

**2. Does the country have a policy or strategy promoting HIV-related reproductive and sexual health education for young people?**

Yes (0)

76)

**2.1 Is HIV education part of the curriculum in:**

primary schools? Yes

secondary schools? Yes

teacher training? Yes

77)

**2.2 Does the strategy/curriculum provide the same reproductive and sexual health education for young men and young women?**

Yes (0)

78)

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



Yes (0)

79)

**3. Does the country have a policy or strategy to promote information, education and communication and other preventive health interventions for most-at-risk or other vulnerable sub-populations?**

Yes (0)

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80)

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

Check which specific populations and elements are included in the policy/strategy

Targeted information on risk reduction and HIV education	Men having sex with men, Sex workers, Clients of sex workers, Prison inmates, Other populations
Stigma and discrimination reduction	
Condom promotion	Men having sex with men, Sex workers, Clients of sex workers, Other populations
HIV testing and counselling	Men having sex with men, Sex workers, Clients of sex workers, Prison inmates, Other populations
Reproductive health, including sexually transmitted infections prevention and treatment	Sex workers, Clients of sex workers, Prison inmates, Other populations
Vulnerability reduction (e.g. income generation)	
Drug substitution therapy	
Needle & syringe exchange	

**Page 43**81) **Part A, III. PREVENTION**

**Question 3.1 (continued)**

**You have checked one or more policy/strategy for "Other populations". Please specify what are "other populations".**

Hommes en uniforme, les Pygmées, les réfugiés, les transporteurs, les populations transfrontalières,....

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82)

**Part A, III. PREVENTION**

**Question 3.1 (continued)**

**Overall, how would you rate the policy efforts in support of HIV prevention in 2009?**

**5 (5)**

83)

**Since 2007, what have been key achievements in this area:**

Campagnes de sensibilisation de masse, Campagnes de sensibilisation ciblées; Promotion du dépistage; Promotion de l'utilisation du préservatif; Elaboration des documents normatifs et stratégiques.

84)

**What are remaining challenges in this area:**

Accessibilité et disponibilité du préservatif

**Page 45**

85)

**Part A, III. PREVENTION**

**4. Has the country identified specific needs for HIV prevention programmes?**

Yes (0)

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86)

**Part A, III. PREVENTION**

**Question 4 (continued)**

**IF YES, how were these specific needs determined?**

A partir des enquêtes et la revue du PSN 2001-2006

87)

**4.1 To what extent has HIV prevention been implemented?**

<b>The majority of people in need have access</b>	
<b>HIV prevention component</b>	
Blood safety	Agree
Universal precautions in health care settings	Agree
Prevention of mother-to-child transmission of HIV	Agree
IEC* on risk reduction	Agree
IEC* on stigma and discrimination reduction	Agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	Don't agree

Risk reduction for men who have sex with men	N/A
Risk reduction for sex workers	Agree
Reproductive health services including sexually transmitted infections prevention and treatment	Agree
School-based HIV education for young people	Agree
HIV prevention for out-of-school young people	Agree
HIV prevention in the workplace	Agree
Autres: insérer	

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88)

**Part A, III. PREVENTION**

**Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2009?**

5 (5)

89)

**Since 2007, what have been key achievements in this area:**

Précaution universelle en milieu hospitalier Promotion de la PTME Prévention chez les professionnelles du sexe, les jeunes, les hommes en uniforme Introduction de l'enseignement relatif au VIH en milieu scolaire Promotion du dépistage.

90)

**What are remaining challenges in this area:**

Mobilisation des ressources pour la mise en oeuvre du PSN 2008-2012

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91)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**1. Does the country have a policy or strategy to promote comprehensive HIV treatment, care and support? (Comprehensive care includes, but is not limited to, treatment, HIV testing and counselling, psychosocial care, and home and community-based care).**

Yes (0)

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92)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**1.1 IF YES, does it address barriers for women?**

Yes (0)

93)

**1.2 IF YES, does it address barriers for most-at-risk populations?**

Yes (0)

94)

**2. Has the country identified the specific needs for HIV treatment, care and support services?**

Yes (0)

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95)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**Question 2 (continued)**

**IF YES, how were these determined?**

Bilans annuels des performances des programmes; Supervision; Amélioration du système de collecte des données.

96)

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

<b>The majority of people in need have access</b>	
<b>HIV treatment, care and support service</b>	
Antiretroviral therapy	Agree
Nutritional care	Agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	Agree
Psychosocial support for people living with HIV and their families	Agree
Home-based care	Agree
Palliative care and treatment of common HIV-related infections	Agree
HIV testing and counselling for TB patients	Agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	Don't agree
TB infection control in HIV treatment and care facilities	Agree
Cotrimoxazole prophylaxis in HIV-infected people	Agree
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Agree
HIV care and support in the workplace (including alternative working arrangements)	Agree
Autres programmes: insérer	

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97)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**3. Does the country have a policy for developing/using generic drugs or parallel importing of drugs for HIV?**

Yes (0)

98)

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

Yes (0)

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99)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**Question 4 (continued)**

**IF YES, for which commodities?:**

ARV et médicaments pour infections opportunistes.

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100)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**Overall, how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2009?**

6 (6)

101)

**Since 2007, what have been key achievements in this area:**

Extension des structures de prise en charge dans les provinces; Augmentation de la couverture en PTME;

102)

**What are remaining challenges in this area:**

Amélioration du système d'approvisionnement en ARV et IO; Réalisation du diagnostic précoce; Renforcement de la prise en charge communautaire; Amélioration de la prise en charge pédiatrique; Promouvoir le conseil dépistage initié par le prestataire.

**Page 54**

103)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT****5. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other vulnerable children?**

Yes (0)

**Page 55**

104)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT****5.1 IF YES, is there an operational definition for orphans and vulnerable children in the country?**

Yes (0)

105)

**5.2 IF YES, does the country have a national action plan specifically for orphans and vulnerable children?**

No (0)

**Page 56**

106)

**Overall, how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2009?**

4 (4)

107)

**Since 2007, what have been key achievements in this area:**

Identification des OEV comme populations vulnérables dans le PSN; Appuis scolaire et nutritionnel; Evaluation de l'appui; Mise en place d'une base de données OEV.

108)

**What are remaining challenges in this area:**

Renforcement de l'appui; Affinement du recensement.

**Page 57**

109)

**Part A, Section V: MONITORING AND EVALUATION****1. Does the country have *one* national Monitoring and Evaluation (M&E) plan?**

In progress (0)

**Page 64**

110)

**4. Are M&E priorities determined through a national M&E system assessment?**

Yes (0)

**Page 65**

111)

**Part A, Section V: MONITORING AND EVALUATION****Question 4 (continued)**

**IF YES, briefly describe how often a national M&E assessment is conducted and what the assessment involves:**

Elle est déterminée dans le PSN et le Plan opérationnel et suit la périodicité d'élaboration des rapports UNGASS et Accès universel.

112)

**5. Is there a functional national M&E Unit?**

In progress (0)

**Page 69**

113)

**What are the major challenges?**

Formalisation de l'unité opérationnelle Budgétisation et mobilisation des ressources pour la mise en oeuvre des activités de suivi-évaluation.

**Page 70**

114)

**Part A, Section V: MONITORING AND EVALUATION**

**6. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?**

Yes, but meets irregularly (0)

115)

**6.1 Does it include representation from civil society?**

Yes (0)

**Page 71**

**116) Part A, Section V: MONITORING AND EVALUATION****Question 6.1 (continued)**

**IF YES, briefly describe who the representatives from civil society are and what their role is:**

Les ONG et associations de lutte contre le VIH/sida; Le réseau de PVVIH; Rôle: participation à: élaboration, validation et mise en oeuvre

117)

**7. Is there a central national database with HIV- related data?**

Yes (0)

**Page 72**

118)

**Part A, Section V: MONITORING AND EVALUATION****7.1 IF YES , briefly describe the national database and who manages it:**

Base de données centrale comportant des données programmatiques et d'enquêtes (CAP et séroprévalence), les indicateurs nationaux, logiciels CRIS 3, Spectrum, EPP gérée par le PLIST

119)

**7.2 IF YES, does it include information about the content, target populations and geographical coverage of HIV services, as well as their implementing organizations?**

Yes, but only some of the above (0)

**Page 73****120) Part A, Section V: MONITORING AND EVALUATION**

**For Question 7.2, you have checked "Yes, but only some of the above", please specify what the central database has included.**

the content of the HIV services (0)  
target populations (0)  
geographical coverage of HIV services (0)

121)

**7.3 Is there a functional\* Health Information System?**

At national level Yes  
At subnational level Yes

**Page 74**



**122) Part A, Section V: MONITORING AND EVALUATION**

**For Question 7.2, you have checked "Yes, but only some of the above", please specify what the central database has included.**

**For Question 7.3, you have indicated "Yes" to "subnational level", please specify at what level(s)?**

Gestionnaires de données des Directions régionales de santé, des bases épidémiologiques et des hopitaux régionaux.

123)

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

No (0)

124)

**9. To what extent are M&E data used**

**9.1 in developing / revising the national AIDS strategy?:**

5 (5)

125)

**Provide a specific example:**

Elaboration du PSN

**Page 75****126) Part A, Section V: MONITORING AND EVALUATION**

**9.2 To what extent are M&E data used for resource allocation?**

4 (4)

127)

**Provide a specific example:**

Soumission au Fonds mondial

**Page 76**

128)

**Part A, Section V: MONITORING AND EVALUATION**

**9.3 To what extent are M&E data used for programme improvement?:**

3 (3)

129)

**Provide a specific example:**

Décentralisation de la prise en charge

**Page 77**130) **Part A, Section V: MONITORING AND EVALUATION****10. Is there a plan for increasing human capacity in M&E at national, subnational and service-delivery levels?:**

Yes, but only addressing some levels (0)

**Page 78**131) **Part A, Section V: MONITORING AND EVALUATION****For Question 10, you have checked "Yes, but only addressing some levels", please specify**

at national level (0)

at service delivery level (0)

132)

**10.1 In the last year, was training in M&E conducted**

At national level?	Yes
At subnational level?	No
At service delivery level including civil society?	Yes

**Page 79**133) **Part A, Section V: MONITORING AND EVALUATION****Question 10.1 (continued)****Please enter the number of people trained at national level.**

Please enter an integer greater than 0

80

134) **Please enter the number of people trained at service delivery level including civil society.**

Please enter an integer greater than 0

20

**Page 80**

135)

**Part A, Section V: MONITORING AND EVALUATION****10.2 Were other M&E capacity-building activities conducted other than training?**

Yes (0)

**Page 81****136) Part A, Section V: MONITORING AND EVALUATION****Question 10.2 (continued)****IF YES, describe what types of activities:**

Renforcement des capacités des gestionnaires de données à la PTME; Renforcement des capacités à la gestion de la base de données centrale des indicateurs santé, y compris le VIH.

**Page 82****137) Part A, Section V: MONITORING AND EVALUATION****Question 10.2 (continued)****Overall, how would you rate the M&E efforts of the HIV programme in 2009?**

4 (4)

**138)****Since 2007, what have been key achievements in this area:**

Standardisation des outils de collecte de données; Actualisation périodiques des données épidémiologiques.

**139)****What are remaining challenges in this area:**

Mobilisation des ressources; Diffusion des outils de collecte; Formation à l'utilisation des outils.

**Page 83****140)****Part B, Section I: HUMAN RIGHTS**

**1. Does the country have laws and regulations that protect people living with HIV against discrimination? (including both general non-discrimination provisions and provisions that specifically mention HIV, focus on schooling, housing, employment, health care etc.)**

No (0)

**Page 84**

141)

**2. Does the country have non-discrimination laws or regulations which specify protections for most-at-risk populations and other vulnerable subpopulations?**

No (0)

**Page 86**

142)

**Part B, Section I. HUMAN RIGHTS**

**3. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for most-at-risk populations and other vulnerable subpopulations?**

No (0)

**Page 88**143) **Part B, Section I. HUMAN RIGHTS**

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

Yes (0)

**Page 89**

144)

**Part B, Section I. HUMAN RIGHTS****Question 4 (continued)**

**IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:**

Le respect des droits et des devoirs des PVVIH; La promotion de l'éthique et des devoirs et des droits humains basés sur le VIH

145)

**5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, most-at-risk populations and/or other vulnerable subpopulations?**

No (0)

**Page 90**

146)

**6. Has the Government, through political and financial support, involved people living with HIV, most-at-risk populations and/or other vulnerable subpopulations in governmental HIV-policy design and programme implementation?**

Yes (0)

**Page 91**

147)

**Part B, Section I. HUMAN RIGHTS****Question 6 (continued)**

**IF YES, describe some examples:**

Participation à l'élaboration du PSN

148)

**7. Does the country have a policy of free services for the following:**

- |   |     |
|---|-----|
| a. HIV prevention services                    | Yes |
| b. Antiretroviral treatment                   | Yes |
| c. HIV-related care and support interventions | Yes |

**Page 92**

149)

**Part B, Section I. HUMAN RIGHTS****Question 7 (continued)**

**IF YES, given resource constraints, briefly describe what steps are in place to implement these policies and include information on any restrictions or barriers to access for different populations:**

Arrêté n°0051/MSP fixant la gratuité du dépistage et des ARV pour les enfants, les femmes enceintes, les élèves, les étudiants, les retraités, les indigents.

150)

**8. Does the country have a policy to ensure equal access for women and men to HIV prevention, treatment, care and support?**

Yes (0)

**Page 93**

151)

**Part B, Section I. HUMAN RIGHTS**

**8.1 In particular, does the country have a policy to ensure access to HIV prevention, treatment, care and support for women outside the context of pregnancy and childbirth?**

Yes (0)

152)

**9. Does the country have a policy to ensure equal access for most-at-risk populations and/or other vulnerable subpopulations to HIV prevention, treatment, care and support?**

Yes (0)

**Page 94**

153)

**Part B, Section I. HUMAN RIGHTS**

**Question 9 (continued)**

**IF YES, briefly describe the content of this policy:**

l'Arrêté OO51/MSP fixe la tarification des prestations de services sans discrimination.

154)

**9.1 IF YES, does this policy include different types of approaches to ensure equal access for different most-at-risk populations and/or other vulnerable sub-populations?**

Yes (0)

**Page 95**

155)

**Part B, Section I. HUMAN RIGHTS**

**Question 9.1 (continued)**

**IF YES, briefly explain the different types of approaches to ensure equal access for different populations:**

Approche multisectorielle ciblée.

156)

**10. Does the country have a policy prohibiting HIV screening for general employment purposes (recruitment, assignment/relocation, appointment, promotion, termination)?**

No (0)

157)

**11. Does the country have a policy to ensure that HIV research protocols involving human subjects are reviewed and approved by a national/local ethical review**

**committee?**

Yes (0)

**Page 96**

158)

**Part B, Section I. HUMAN RIGHTS**

**11.1 IF YES, does the ethical review committee include representatives of civil society including people living with HIV?**

Yes (0)

159)

**IF YES, describe the approach and effectiveness of this review committee:**

Le comité d'éthique examine et valide les protocoles de recherche

**Page 97**

160)

**– 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 (0)

161)

**– Focal points within governmental health and other departments to monitor HIV-related human rights abuses and HIV-related discrimination in areas such as housing and employment**

Yes (0)

162)

**– Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts**

No (0)

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163)

**Part B, Section I. HUMAN RIGHTS**

**13. In the last 2 years, have members of the judiciary (including labour courts/ employment tribunals) been trained/sensitized to HIV and human rights issues that may**

**come up in the context of their work?**

Yes (0)

164)

**– Legal aid systems for HIV casework**

No (0)

165)

**– Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV**

No (0)

166)

**– Programmes to educate, raise awareness among people living with HIV concerning their rights**

Yes (0)

167)

**15. Are there programmes in place to reduce HIV-related stigma and discrimination?**

Yes (0)

**Page 100**

168)

**Part B, Section I. HUMAN RIGHTS**

**Question 15 (continued)**

**IF YES, what types of programmes?**

Media	Yes
School education	Yes
Personalities regularly speaking out	Yes
Autres: insérer	

**Page 101**

169)

**Part B, Section I. HUMAN RIGHTS**

**Question 15 (continued)**

**Overall, how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2009?**

5 (5)



170)

**Since 2007, what have been key achievements in this area:**

Existence d'un Ministère en charge des droits de l'homme; Direction générale de la protection de la veuve et des orphelins.

171)

**What are remaining challenges in this area:**

Création et adoption des textes législatifs relatifs à la protection des personnes vivant avec le VIH

**Page 102**

172)

**Part B, Section I. HUMAN RIGHTS**

**Question 15 (continued)**

**Overall, how would you rate the efforts to enforce the existing policies, laws and regulations in 2009?**

5 (5)

173)

**Since 2007, what have been key achievements in this area:**

Création d'un observatoire des droits de l'homme;

174)

**What are remaining challenges in this area:**

Vulgariser les activités de l'observatoire des droits de l'homme

**Page 103**

175)

**Part B, Section II: CIVIL SOCIETY\* PARTICIPATION**

**1. To what extent has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?**

4 (4)

176)

**Comments and examples:**

plaidoyer et engagement communautaire

**Page 104**

177)

**Part B, Section II. CIVIL SOCIETY PARTICIPATION**

**2. To what extent 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 (4)

178)

**Comments and examples:**

Limites des representants de la société civile: faible expertise technique

**Page 105**

179)

**a. the national AIDS strategy?**

4 (4)

180)

**b. the national AIDS budget?**

2 (2)

181)

**c. national AIDS reports?**

3 (3)

182)

**Comments and examples:**

Nécessité de renforcer les capacités de la société civile dans le domaine de la planification, la mise en oeuvre et le suivi évaluation. Nécessité de renforcer l'appui financier aux activités de la société civile

**Page 106**

183)

**a. developing the national M&E plan?**

3 (3)

184)

**b. participating in the national M&E committee / working group responsible for coordination of M&E activities?**

3 (3)

185)

**c. M&E efforts at local level?**

2 (2)

186)

**Comments and examples:**

Les représentants de la société civile ont servi de facilitateur lors de la réalisation des enquêtes CAP et séroprévalence.

**Page 107****187) Part B, Section II. CIVIL SOCIETY PARTICIPATION****5. To what extent is the civil society sector representation in HIV efforts inclusive of diverse organizations (e.g. networks of people living with HIV, organizations of sex workers, faith-based organizations)?**

4 (4)

188)

**Comments and examples:**

Il existe des associations des PVVIH, des professionnels de sexe, organisations confessionnelles ainsi que des comités de lutte contre le sida au sein des entreprises.

**Page 108**

189)

**a. adequate financial support to implement its HIV activities?**

2 (2)

190)

**b. adequate technical support to implement its HIV activities?**

2 (2)

191)

**Comments and examples:**

Efforts à accroître

**Page 109****192) Part B, Section II. CIVIL SOCIETY PARTICIPATION****7. What percentage of the following HIV programmes/services is estimated to be provided by civil society?**

Prevention for youth	25-50%
<b>Prevention for most-at-risk-populations</b>	
- Injecting drug users	<25%
- Men who have sex with men	<25%
- Sex workers	51-75%
Testing and Counselling	25-50%
Reduction of Stigma and Discrimination	51-75%
Clinical services (ART/OI)*	<25%
Home-based care	25-50%
Programmes for OVC**	25-50%

**Page 110**

193)

**Part B, Section II. CIVIL SOCIETY PARTICIPATION****Question 7 (continued)****Overall, how would you rate the efforts to increase civil society participation in 2009?**

6 (6)

194)

**Since 2007, what have been key achievements in this area:**

Implication dans la mise en oeuvre du PSN

195)

**What are remaining challenges in this area:**

mobilisation des ressources renforcement des capacités autonomisation

**Page 111**

196)

**Part B, Section III: PREVENTION****1. Has the country identified the specific needs for HIV prevention programmes?**

Yes (0)

**Page 112**

197)

**Part B, Section III: PREVENTION****Question 1 (continued)****IF YES, how were these specific needs determined?**

Revue du PSN 2001-2006 Enquêtes CAP et de séroprévalence Focus group

198)

**1.1 To what extent has HIV prevention been implemented?**

The majority of people in need  
have access

**HIV prevention component**

Blood safety	Agree
Universal precautions in health care settings	Agree
Prevention of mother-to-child transmission of HIV	Agree
IEC* on risk reduction	Agree
IEC* on stigma and discrimination reduction	Agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	Don't agree
Risk reduction for men who have sex with men	N/A
Risk reduction for sex workers	Agree
Reproductive health services including sexually transmitted infections prevention and treatment	Agree
School-based HIV education for young people	Agree
HIV prevention for out-of-school young people	Agree
HIV prevention in the workplace	Agree
Autres: insérer	

**Page 113**

199)

**Part B, Section III: PREVENTION****Question 1.1 (continued)**

**Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2009?**

6 (6)

200)

**Since 2007, what have been key achievements in this area:**

Activités de sensibilisation ciblée

201)

**What are remaining challenges in this area:**

Mobilisation de ressources renforcement des capacités Intensification des campagnes de masse

**Page 114**

202)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

**1. Has the country identified the specific needs for HIV treatment, care and support services?**

Yes (0)

**Page 115**

203)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

**Question 1 (continued)**

**IF YES, how were these specific needs determined?**

Bilan semestriel de la prise en charge des PVVIH et de la PTME Données de programme

204)

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

The majority of people in need  
have access

**HIV treatment, care and support service**

Antiretroviral therapy	Agree
Nutritional care	Agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	Agree
Psychosocial support for people living with HIV and their families	Agree
Home-based care	Agree
Palliative care and treatment of common HIV-related infections	Agree
HIV testing and counselling for TB patients	Agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	Don't agree
TB infection control in HIV treatment and care facilities	Agree
Cotrimoxazole prophylaxis in HIV-infected people	Agree
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Agree
HIV care and support in the workplace (including alternative working arrangements)	Agree
Autres: insérer	

**Page 116**

205)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

**Question 1.1 (continued)**

**Overall, how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2009?**

5 (5)

206)

**Since 2007, what have been key achievements in this area:**

continium des soins Groupes de paroles repas communautaires

207)

**What are remaining challenges in this area:**

mobilisation des ressources renforcement des capacités

**Page 117**

208)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

**2. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other vulnerable children?**

Yes (0)

**Page 118**

209)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

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

Yes (0)

210)

**2.2 IF YES, does the country have a national action plan specifically for orphans and vulnerable children?**

No (0)

211)

**2.3 IF YES, does the country have an estimate of orphans and vulnerable children being reached by existing interventions?**

Yes (0)

**Page 119**

212)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT****Question 2.3 (continued)****IF YES, what percentage of orphans and vulnerable children is being reached?**

Please enter the percentage (0-100)

20

213)

**Overall, how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2009?**

4 (4)

214)

**Since 2007, what have been key achievements in this area:**

Identification des OEV Appui aux OEV (scolaire et nutritionnel)

215)

**What are remaining challenges in this area:**

Renforcer l'appui aux OEV poursuivre le recensement des OEV