

Survey Response Details

Response Information

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Response Details

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1) Country

Guinea-Bissau (0)

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

Joao José Silva Monteiro Secrétaire Exécutif

3) Postal address:

Secretariado Nacional de Luta contra SIDA (SNLS) Hospital 3 de Agosto - Bairro Ajuda Bissau
Guinée-Bissau

4) Telephone:

Please include country code
00 245 660 88 73

5) E-mail:

huco@sida.guine-bissau.org

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

Des groupes de personnes ressources ont été identifiées pour chacune des parties du questionnaire et interviewées. Tout le questionnaire a été validé les 12 et 16 mars par l'équipe UNGASS.

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

En cas de désaccord, c'est le consensus de l'équipe nationale UNGASS qui a prévalu

8)

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

La définition de ce qu'est un plan stratégique ou une stratégie n'est pas la même pour tous, ce qui pose des problèmes pour répondre aux questions de cette nature. Certaines lois existent et ont été votées par le parlement, mais les décret d'application n'ont pas encore été publiés.

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9)

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	SNLS Joao José Monteiro/ Secrétaire Exécutif	A.I, A.II

10)

Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 2	SNLS Tome Ca / Directeur Planning et M&E	A.I, A.II, A.V
Respondent 3	SNLS Swil Kabitshwa / Directeur Soins Cliniques	A. I, A. II
Respondent 4	OMS Inacio Alvarenga / Point focal VIH - DPC	A.I, A.II
Respondent 5	Ministère de la Santé Agostinho N'dumba / Directeur Cellule Sectorielle VIH	A. I, A. II, A. IV
Respondent 6	SNLS Serifo Embalo / Unité suivi évaluation	A.V
Respondent 7	SNLS Paulo Ranba / Unité suivi évaluation	A.V
Respondent 8	SNLS Adulai Jalo / Unité suivi évaluation	A.V
Respondent 9	SNLS Livramento Barros / partenariats	A. III
Respondent 10	Ministère de l'Education Mamadu Danfa / Point focal VIH	A.III, A.IV
Respondent 11	Ministère de l'Education Mateus Jala	A. III, A. IV
Respondent 12	Ministère de l'Intérieur Jacqueline Barreto / point focal VIH	A.III, A.IV
Respondent 13	Ministère de la Défense Issufo Cissé	A. III, A. IV
Respondent 14	Ministère de la Défense Cadi Seidi / point focal VIH	A.III, A.IV
Respondent 15		A. III, A. IV
Respondent 16		
Respondent 17		
Respondent		

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- Respondent
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11)

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	UNICEF Ndeye Ngone Toure / chef de programme VIH/SIDA	B.I, B.II, B.III, B.IV

12)

	Organization Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 2	OMS Inacio Alvarenga / Point focal VIH DPC	B.I, B.II, B.III, B.IV
Respondent 3	ENDA Tiers Monde Antonio Lopes	B.I, B. II, B. III, B. IV
Respondent 4	Nova Vida Pedro Mandinca / président	B.I, B.II, B.III, B.IV
Respondent 5	MDM Portugal Luisa Trindade	B. I, B. II, B. III, B. IV
Respondent 6	Actionaid Rui Ribeiro / Directeur pays, président du CCM	B.I, B.II, B.III, B.IV
Respondent 7		
Respondent 8		
Respondent 9		
Respondent 10		
Respondent 11		
Respondent 12		
Respondent		

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Respondent
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Respondent
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Respondent
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Respondent
25

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13)

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)**Page 7**14) **Part A, Section I: STRATEGIC PLAN****Question 1 (continued)****Period covered:**

2007-2011

15)

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

3

16)

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	No
Labour	Yes	No
Transportation	Yes	No
Military/Police	Yes	Yes
Women	Yes	No
Young people	Yes	No
Other*	Yes	No

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

Question 1.2 (continued)

If "Other" sectors are included, please specify:

Agriculture, Tourisme

18)

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?

Quand il n'y a pas de budget alloué, les activités sont financées par les Nations Unies, ou le Fonds Mondial.

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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?

Target populations	
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
Settings	

h. Workplace	Yes
i. Schools	Yes
j. Prisons	Yes
Cross-cutting issues	
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?

No (0)

Page 10

21)

IF NO, explain how were target populations identified?

Un travail qualitatif d'analyse des besoins a été organisé dans les districts avec la participation des autorités en 2003 (focus groupe). En 2008, une analyse de la situation et des besoins des orphelins et enfants vulnérables a été réalisée. En 2009, une étude sur la vulnérabilité des adolescents et des jeunes en matière de santé de la reproduction/VIH SIDA a été menée.

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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?**

LEs professionnelles du sexe, les jeunes, les conducteurs, les personnels en uniforme.

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?	No
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:**

La société civile a surtout contribué aux sessions de validation, mais a été conviée et présente à toutes les phases du processus d'élaboration du plan stratégique. Il a participé à l'élaboration des stratégies

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)

Page 14

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)

Page 15

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	N/A
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?

No (0)

Page 17

33)

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

34)

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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35)

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):

Le dépistage n'est pas obligatoire. Le service est proposé par le personnel de santé militaire, et dans un service spécial pour le ministère de l'intérieur.

36)

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

Yes (0)

Page 20

37)

Part A, Section I: STRATEGIC PLAN**5.1 IF YES, for which subpopulations?**

a. Women	Yes
b. Young people	Yes
c. Injecting drug users	No
d. Men who have sex with men	No
e. Sex Workers	No
f. Prison inmates	No
g. Migrants/mobile populations	No
Autres: insérer	

38)

IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:

La loi sur le VIH a été validé par l'assemblée nationale mais les décrets d'application n'ont pas encore été publiés. Une révision est envisagée cette année, avec éventuellement un débat public. Des juges et des inspecteurs de police judiciaire ont cependant reçu une formation dans ce sens.

39)

Briefly comment on the degree to which these laws are currently implemented:

LEs conditions pour un processus d'application de la loi sont mises en place: existence d'associations de malades séropositifs, acteurs de la société civile vigilants sur la question des droits et de la discrimination.

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40)

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)

Page 23

41)

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

42)

Part A, Section I: STRATEGIC PLAN

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

Yes (0)

43)

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

Yes (0)

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44)

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)

45)

7.4 Is HIV programme coverage being monitored?

Yes (0)

Page 26

46)

Part A, Section I: STRATEGIC PLAN

Question 7.4 (continued)

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

Yes (0)

47)

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

Yes (0)

Page 27

48)

Part A, Section I: STRATEGIC PLAN

Question 7.4 (b) (continued)

IF YES, for which population groups?

Travailleuses du sexe, personnels en uniforme, camionneurs et transporteurs, enfants.

49)

Briefly explain how this information is used:

Information utilisée pour: le plaidoyer, la prise de conscience, l'aide à la décision, l'amélioration des prestations de services

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

Question 7.4 (continued)

(c) Is coverage monitored by geographical area?

Yes (0)

Page 29

51)

Part A, Section I: STRATEGIC PLAN

Question 7.4 (c) (continued)**IF YES, at which geographical levels (provincial, district, other)?**

Aux niveaux de prestations de services, district, et national

52)

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

53)

Part A, Section I: STRATEGIC PLAN**Question 7.5 (continued)****Overall, how would you rate strategy planning efforts in the HIV programmes in 2009?**

8 (8)

54)

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

Mobilisations de ressources, restructuration du secrétariat national, plan de procurement pour le fonds mondial 7ième série, mise en place du comité de quantification, plan national de M&E, plan commun des agences des Nations Unies.

55)

What are remaining challenges in this area:

Ne pas limiter la mobilisation des ressources à celles du Fonds Mondial, améliorer la fiabilité de la quantification, mieux intégrer les activités de santé reproductive, VIH/SIDA? tuberculose et les soins aux femmes enceintes.

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56)

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

57)

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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58)

2.1 IF YES, when was it created?

Please enter the year in yyyy format

2003

59)

2.2 IF YES, who is the Chair?

Name	Carlos Gomes Junior
Position/title	Premier Ministre

60)

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

have terms of reference?	Yes
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?	Yes
have a functional Secretariat?	Yes
meet at least quarterly?	No
review actions on policy decisions regularly?	Yes
actively promote policy decisions?	Yes
provide opportunity for civil society to influence decision-making?	Yes
strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?	Yes

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61)

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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62)

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

Il s'agit principalement de forum comme le CCM, le CNLS, et le forum technique des partenaires qui appuie les demandes de subventions. L'obtention de la subvention du Fonds Mondial de 44 millions de US\$ est un exemple.

63)

Briefly describe the main challenges:

Irrégularité dans la tenue des rencontres, sensibilisation au VIH/SIDA dans le secteur privé, déficit d'engagement public

64)

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)

37

65)

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: insérer	

66)

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

No (0)

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67)

Part A, Section II: POLITICAL SUPPORT**Question 6.1 (continued)****Overall, how would you rate the political support for the HIV programmes in 2009?**

8 (8)

68)

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

Réalisation de la mesures des dépenses SIDA (NASA) Plan conjoint du système des Nations Unies

Page 39

69)

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*?**

No (0)

Page 40

70)

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

No (0)

Page 41

71)

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?**

No (0)

72)

2.1 Is HIV education part of the curriculum in:

primary schools? Yes

secondary schools? Yes

teacher training? Yes

73)

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

Yes (0)

74)

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

No (0)

75)

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?

No (0)

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76)

Part A, Section III: PREVENTION

Question 3 (continued)

IF NO, briefly explain:

Il existe cependant des activités dirigées vers les groupes à risque comme: - les professionnelles du sexe - les conducteurs - les militaires - les prisonniers (distribution de condoms, conseil, dépistage, traitement des IST) Mais pas de document orientant globalement la stratégie

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77)

Part A, III. PREVENTION

Question 3.1 (continued)

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

6 (6)

78)

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

- des études comportementales, socio-culturelles ont permis de mieux connaître la perception du VIH chez des sous-groupes de population - bien que des émissions radio abordent la question du VIH, l'implication des médias est encore insuffisante - activités diverses de sensibilisation et d'information assez générale sur le VIH menées par différentes ONG (exemple: par l'association des vendeurs des marchés de Bissau), mais aussi par certains ministères (défense , intérieur) pour leur personnel, comme des campagnes de dépistages dans les casernes.

79)

What are remaining challenges in this area:

- une analyse insuffisante du rôle que peuvent jouer les médias dans la communication sur la VIH - qualité insuffisante et non maîtrisée des messages de prévention donnés par les organisations de la société civiles.

Page 45

80)

Part A, III. PREVENTION**4. Has the country identified specific needs for HIV prevention programmes?**

Yes (0)

Page 46

81)

Part A, III. PREVENTION**Question 4 (continued)****IF YES, how were these specific needs determined?**

A partir de l'accompagnement des actions de terrain du SNLS, et à partir des résultats d'enquêtes: enquêtes sentinelles chez les professionnelles du sexe de 2009, étude CAP santé reproductive de 2008, enquête en cours chez les conducteurs, et chez les MSM. Une enquête sur le phénomène de stigmatisation dans les forces armées est envisagée, une enquête MICS est prévue en 2010.

82)

4.1 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	Don't agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	N/A
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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83)

Part A, III. PREVENTION

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

4 (4)

84)

What are remaining challenges in this area:

- Obtenir davantage d'informations à partir d' études précises - absence d'un document stratégique de communication et de prévention - besoin de davantage de formation pour les cadres nationaux afin d'augmenter la capacité à élaborer des documents et plan nationaux

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85)

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)

Page 49

86)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

1.1 IF YES, does it address barriers for women?

Yes (0)

87)

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

Yes (0)

88)

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

Yes (0)

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89)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

Question 2 (continued)**IF YES, how were these determined?**

A partir de la demande dans les structures de prestation de services VIH

90)

2.1 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	Don't agree
Sexually transmitted infection management	Don't agree
Psychosocial support for people living with HIV and their families	Don't agree
Home-based care	Don't agree
Palliative care and treatment of common HIV-related infections	Don't 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)	Don't agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Don't agree
HIV care and support in the workplace (including alternative working arrangements)	Don't agree
Autres programmes: insérer	

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91)

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?**

No (0)

92)

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?

No (0)

Page 53

93)

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?

7 (7)

94)

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

Le traitement se fait, fonctionne bien, et l'accès a déjà été amélioré.

95)

What are remaining challenges in this area:

Beaucoup d'abandon chez les patients sous traitement, le personnel formé abandonne, ou refuse de donner les traitement, démotivation du personnel. La composante communautaire et l'appui psychosocial sont à améliorer.

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96)

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

97)

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)

98)

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

Yes (0)

99)

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

Yes (0)

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100)

Part A, Section IV: TREATMENT, CARE AND SUPPORT**Question 5.3 (continued)****IF YES, what percentage of orphans and vulnerable children is being reached?**

Please enter the rounded percentage (0-100)

8

101)

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

6 (6)

102)

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

Des organisations sont présentes dans trois régions, et la Caritas est présente au niveau national à travers un réseau de consultations nutritionnelles.

103)

What are remaining challenges in this area:

Le Ministère de lutte contre la pauvreté n'a pas les moyens de mettre des activités pour élargir la couverture des activités. Il manque la mise en oeuvre de la stratégie, et également l'appui et l'engagement du gouvernement, ainsi que des moyens pour le suivi.

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104)

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

Yes (0)

Page 58

105)

1.1 IF YES, years covered:**Please enter the start year in yyyy format below**

2009

106)

1.1 IF YES, years covered:

Please enter the end year in yyyy format below

2013

107)

1.2 IF YES, was the M&E plan endorsed by key partners in M&E?

Yes (0)

108)

1.3 IF YES, was the M&E plan developed in consultation with civil society, including people living with HIV?

Yes (0)

109)

1.4 IF YES, have key partners aligned and harmonized their M&E requirements (including indicators) with the national M&E plan?

Yes, all partners (0)

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110)

Part A, Section V: MONITORING AND EVALUATION

2. Does the national Monitoring and Evaluation plan include?

a data collection strategy	Yes
a well-defined standardised set of indicators	Yes
guidelines on tools for data collection	Yes
a strategy for assessing data quality (i.e., validity, reliability)	Yes
a data analysis strategy	Yes
a data dissemination and use strategy	Yes

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111)

Part A, Section V: MONITORING AND EVALUATION

Question 2 (continued)

If you check "YES" indicating the national M&E plan include a data collection strategy, then does this data collection strategy address:

routine programme monitoring Yes

behavioural surveys	Yes
HIV surveillance	Yes
Evaluation / research studies	Yes

112)

3. Is there a budget for implementation of the M&E plan?

Yes (0)

Page 62

113)

3.2 IF YES, has full funding been secured?

No (0)

Page 64

114)

Part A, Section V: MONITORING AND EVALUATION**Question 3.2 (continued)**

IF you answer "NO" i.e., indicating the full funding has NOT been secured, briefly describe the challenges:

Les informations sur les financements disponibles sont parfois difficiles à obtenir, la planification annuelle des partenaires ne permet pas une vision sur le long terme.

115)

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

Yes (0)

Page 65

116)

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:

Les priorités sont définies avec le Plan Stratégique, le système de suivi évaluation répond aux priorités et aux indicateurs du plan. Une réunion annuelle d'évaluation du système est prévue, mais elle n'a pas encore eu lieu depuis le début du nouveau plan stratégique.

117)

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

Yes (0)

Page 66

118)

5.1 IF YES, is the national M&E Unit based

in the National AIDS Commission (or equivalent)? Yes
 in the Ministry of Health? No
 ailleurs ? (insérer)

119) **Number of permanent staff:**

Please enter an integer greater than or equal to 0

5

120) **Number of temporary staff:**

Please enter an integer greater than or equal to 0

0

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121)

Part A, Section V: MONITORING AND EVALUATION

Question 5.2 (continued)

Please describe the details of all the permanent staff:

	Position	Full time/Part time?	Since when? (please enter the year in yyyy format)
Permanent staff 1	Directeur	Full time	2009
Permanent staff 2	Responsable de suivi/évaluation	Full time	2009
Permanent staff 3	Responsable de suivi/évaluation	Full time	2009
Permanent staff 4	Gestionnaire de données	Full time	2009
Permanent staff 5	Responsable partenariat	Full time	2009
Permanent staff 6			
Permanent staff 7			
Permanent staff 8			
Permanent staff 9			
Permanent staff 10			
Permanent staff 11			
Permanent staff 12			
Permanent staff 13			
Permanent staff 14			

Permanent staff
15

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122)

Part A, Section V: MONITORING AND EVALUATION

5.3 IF YES, are there mechanisms in place to ensure that all major implementing partners submit their M&E data/reports to the M&E Unit for inclusion in the national M&E system?

Yes (0)

Page 69123) **Part A, Section V: MONITORING AND EVALUATION****Question 5.3 (continued)****IF YES, briefly describe the data-sharing mechanisms:**

Collecte directe des informations auprès des ONG. Points focaux responsables de la transmission des informations pour les ministères publics Pour le Ministère de la santé, système d'information sanitaire de routine. Pour les centres de prestation de soins, collecte directe et à travers les directions régionales de la santé

124)

What are the major challenges?

Démotivation du personnel, retard dans la transmission de l'information de faible qualité.

Page 70

125)

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, meets regularly (0)

126)

6.1 Does it include representation from civil society?

No (0)

Page 71

127)

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

No (0)

Page 73

128)

7.3 Is there a functional* Health Information System?

At national level	Yes
At subnational level	Yes

Page 74129) **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)?

Au niveau des régions sanitaires (équivalent des districts)

130)

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

No (0)

131)

9. To what extent are M&E data used

9.1 in developing / revising the national AIDS strategy?:

4 (4)

132)

Provide a specific example:

La stratégie PTME a été réorientée au niveau communautaire après analyse des difficultés et l'identification du facteur de pression sociale.

133)

What are the main challenges, if any?

Le problème de manque de qualité des données. Flux d'information irrégulier, fonctionnant uniquement sous la pression. MANque de dissémination des données, et absence de feedback aux structures qui produisent l'information.

Page 75**134) Part A, Section V: MONITORING AND EVALUATION****9.2 To what extent are M&E data used for resource allocation?**

4 (4)

135)

Provide a specific example:

Un centre avec une grande activité reçoit plus d'appui en raison de son nombre élevé de bénéficiaires.

136)

What are the main challenges, if any?

Le manque d'information épidémiologique sur les groupes cibles peut handicaper l'allocation des ressources (exemple pour le groupe des MSM).

Page 76

137)

Part A, Section V: MONITORING AND EVALUATION**9.3 To what extent are M&E data used for programme improvement?:**

4 (4)

138)

Provide a specific example:

L'étude sentinelle sur les professionnelles du sexe en 2007 a permis la mise en place d'initiatives programmatiques nouvelles. Les centres de traitement ambulatoires se sont développés également ainsi.

Page 77**139) 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, at all levels (0)

Page 78

140)

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

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

Page 79**141) 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

15

142) Please enter the number of people trained at subnational level.

Please enter an integer greater than 0

22

Page 80

143)

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

No (0)

Page 82**144) 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?**

9 (9)

145)

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

Rédaction et validation du plan de suivi et évaluation. Amélioration des fiches de recueil de données. Comité National suivi et évaluation s'est réuni régulièrement

146)

What are remaining challenges in this area:

Opérationnaliser davantage le plan: des activités prévues n'ont pas encore été mises en place.

Page 83

147)

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.)

Yes (0)

Page 84

148)

Part B, Section I. HUMAN RIGHTS

1.1 IF YES, specify if HIV is specifically mentioned and how or if this is a general nondiscrimination provision:

Il s'agit d'une disposition non discriminatoire générale.

149)

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

Yes (0)

Page 85

150)

Part B, Section I. HUMAN RIGHTS

2.1 IF YES, for which subpopulations?

a. Women	Yes
b. Young people	Yes
c. Injecting drug users	No
d. Men who have sex with men	No
e. Sex Workers	No
f. prison inmates	
g. Migrants/mobile populations	Yes
Autre: insérer	

151)

IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:

En fait, les mécanismes d'application sont méconnus.

152)

Briefly describe the content of these laws:

La loi sur la prévention, le traitement et le contrôle du VIH et SIDA votée en 2007 aborde les thématiques suivantes: (i) l'éducation en matière de VIH/SIDA dans les écoles publiques et privées, (ii) l'éducation en matière de VIH/SIDA sur le lieu de travail, (iii) les moyens de protection, procédures, médecine traditionnelle, test de dépistage et conseil, services de santé et d'assistance, confidentialité, actes discriminatoires, transmission volontaire du VIH. Politique nationale sur le genre en cours d'élaboration

153)

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

Les décrets d'application de la loi sur le VIH n'ont pas encore été publiés.

Page 86

154)

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?

Yes (0)

Page 87

155)

Part B, Section I. HUMAN RIGHTS

3.1 IF YES, for which subpopulations?

a. Women
 b. Young people
 c. Injecting drug users
 d. Men who have sex with men
 e. Sex Workers
 f. prison inmates
 g. Migrants/mobile populations
 femmes enceintes Yes

156)

IF YES, briefly describe the content of these laws, regulations or policies:

La loi rend obligatoire le test VIH pour les femmes enceintes.

157)

Briefly comment on how they pose barriers:

Certaines femmes enceintes séropositives subissent des brimades de la part de leurs partenaires.

Page 88**158) 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**159)****Part B, Section I. HUMAN RIGHTS****Question 4 (continued)**

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

Dans le plan stratégique, « la personne humaine au centre des préoccupations » fait partie des principes de base cités en préambule des objectifs. A partir d'une approche qui respecte les droits humains, se distinguera une attention spécifique aux populations vulnérables, incluant les femmes, les orphelins et les enfants, les personnes vivant en zones défavorisées. Les PVVIH doivent bénéficier d'une protection sociale adéquate. La lutte contre le SIDA doit être vue comme une question de protection sociale et de garantie des droits des citoyens.

160)

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**161)**

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

Question 6 (continued)**IF YES, describe some examples:**

Les associations de PVVIH ont été associées à toutes les étapes d'élaboration du plan stratégique.

163)

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

164)

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:

- Aide alimentaire - Appui scolaire aux orphelins et enfants vulnérables - Traitement ARV gratuit - Examens de suivi des personnes sous traitement ARV gratuits

165)

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

166)

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)

167)

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

168)

Part B, Section I. HUMAN RIGHTS**Question 9 (continued)****IF YES, briefly describe the content of this policy:**

La politique est implicite aux orientations du plan stratégique de lutte contre le SIDA (voir l'extrait précédent), et ces éléments ont été repris dans le Plan National de Développement Sanitaire 2.

169)

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

170)

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:**

- Stratégie mobile pour les programmes en faveur des professionnelles du sexe - prestations de service ssur le lieu de travail.

171)

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

No (0)

172)

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?

No (0)

Page 97

173)

– 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)

174)

– **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**

No (0)

175)

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

No (0)

Page 99

176)

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?

No (0)

177)

– **Legal aid systems for HIV casework**

No (0)

178)

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

No (0)

179)

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

Yes (0)

180)

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

Yes (0)

Page 100

181)

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
A travers le travail des ONGs au sein des communautés	Yes

Page 101

182)

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?**

3 (3)

183)

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

Existence d'associations et de réseaux de PVVIH. Programmes de sensibilisation et d'éducation. Alphabétisation des femmes infectées.

184)

What are remaining challenges in this area:

Interventions d'envergure encore très réduite. Faiblesses dans la coordination. Faiblesse des ressources mobilisées.

Page 102

185)

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?**

2 (2)

186)

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

Politique Nationale du genre en cours d'élaboration, lutte contre les violences basées sur le genre.

187)

What are remaining challenges in this area:

Absence de mécanismes (décrets d'application) pour pouvoir appliquer certaines lois.

Page 103

188)

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)

189)

Comments and examples:

Suite à une marche de plus de 5000 personnes organisée par la société civile, la loi sur le VIH a été approuvée par le parlement.

Page 104

190)

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)

191)

Comments and examples:

La société civile est en partie prenante dans toutes les activités du Secrétariat National de Lutte contre le SIDA.

Page 105

192)

a. the national AIDS strategy?

4 (4)

193)

b. the national AIDS budget?

3 (3)

194)

c. national AIDS reports?

4 (4)

195)

Comments and examples:

Le rapport sur l'accès universel en 2009 mentionne clairement la contribution de la société civile dans la prestation de soins. Les sites de traitements du secteur privés sont pris en compte dans la base de données nationales.

Page 106

196)

a. developing the national M&E plan?

4 (4)

197)

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

4 (4)

198)

c. M&E efforts at local level?

3 (3)

199)

Comments and examples:

Les rapports des activités menées par certaines organisations de la société civile au niveau local (communication, prévention) ne sont pas transmis systématiquement et régulièrement, et donc ne sont pas pris en compte dans la base de données du SNLS.

Page 107**200) 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)

201)

Comments and examples:

Pas d'exemples donnés

Page 108

202)

a. adequate financial support to implement its HIV activities?

2 (2)

203)

b. adequate technical support to implement its HIV activities?

2 (2)

204)

Comments and examples:

Il y a eu des difficultés d'accès au financement du Fonds Mondial.

Page 109205) **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%
Prevention for most-at-risk-populations	
- Injecting drug users	
- Men who have sex with men	
- Sex workers	>75%
Testing and Counselling	25-50%
Reduction of Stigma and Discrimination	25-50%
Clinical services (ART/OI)*	25-50%
Home-based care	<25%
Programmes for OVC**	25-50%

Page 110

206)

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

7 (7)

207)

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

Renforcement des capacités des organisations de la société civile et appui institutionnel.

208)

What are remaining challenges in this area:

Faible nombre d'organisations recevant un appui, et financements limités.

Page 111

209)

Part B, Section III: PREVENTION

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

No (0)

Page 112

210)

IF NO, how are HIV prevention programmes being scaled-up?

La revue à mi-parcours du plan stratégique II est prévue durant l'année 2010.

211)

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

Page 113

212)

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?

3 (3)

213)

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

Les projets financés l'ont été tardivement.

214)

What are remaining challenges in this area:

Absence d'un plan national de communication sur le VIH/SIDA

Page 114

215)

Part B, Section IV: TREATMENT, CARE AND SUPPORT

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

No (0)

Page 115

216)

IF NO, how are HIV treatment, care and support services being scaled-up?

L'absence de données fiables sur la prévalence entraîne des difficultés d'estimation des besoins et de planification.

217)

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	Don't agree
Nutritional care	Don't agree
Paediatric AIDS treatment	Don't agree
Sexually transmitted infection management	Don't agree

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

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218)

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?

3 (3)

219)

What are remaining challenges in this area:

Ruptures de stock d'ARV et de réactifs de laboratoire.

Page 117

220)

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

221)

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)

222)

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

Yes (0)

Page 119

223)

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

2 (2)

224)

What are remaining challenges in this area:

Le plan d'action national pour la prise en charge des orphelins et enfants vulnérables n'est pas encore mis en oeuvre.