

Survey Response Details

Response Information

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Response Details

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- 1) **Country**
Central African Republic (0)
- 2) **Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:**
Dr Marcel MASSANGA
- 3) **Postal address:**
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- 6) **Date of submission:**
Please enter in DD/MM/YYYY format
31/03/2010

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- 7) **Describe the process used for NCPI data gathering and validation:**
Deux Coordonnateurs techniques ont été identifiés (un pour chaque partie) pour la collecte des données. Les questionnaires prévus ont été remis aux différentes cibles préalablement retenues et des entretiens ont été réalisés avec ces répondants autour des questionnaires à des dates et heures convenues. Les coordonnateurs techniques ont procédé après à la compilation des données issues des différents questionnaires.
- 8) **Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:**

Pour la résolution des désaccords concernant certaines réponses, des consultations supplémentaires auprès des répondants concernés ont été faites par les coordonnateurs techniques pour la clarification afin de retenir des réponses fiables.

9)

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

des commentaires faits par certains répondants, on peut relever des appréciations parfois subjectives.

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10)

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	Coordination Nationale du Comité National de Lutte contre le SIDA (CN/CNLS)	Mme Yacinthe WODOBODE, Coordonnateur National du CNLS	A.I, A.II

11)

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 2	Direction Générale de lutte contre le SIDA	Dr Marie Madelène Hoornaert, Directrice Générale	A.I, A.II
Respondent 3	Région Sanitaire	Dr Fernande DJENGBO, Directrice de la région sanitaire N°7	A.I, A.II
Respondent 4	Préfecture sanitaire	Dr NAGUEZANGBA, Chef de la préfecture sanitaire de l'Ombella Mpoko	A.I, A.II
Respondent 5	Ministère des Affaires Sociales	Directrice Générale des Affaires Sociales	A.III, A.IV
Respondent 6	Ministère de la Défense Nationale	Dr GONDJE, Point Focal	A.III, A.IV
Respondent 7	Ministère de l'Education Nationale	Mr SEKELA, Point Focal	A.III, A.IV
Respondent 8	Ministère Développement Rural	Mme NDAOULE, Point Focal	A.III, A.IV
Respondent 9	Ministère de la Fonction Publique	Dr DOUMA, Point Focal	A.III, A.IV
Respondent 10	Ministère de la Santé Publique	Dr MBEKO, Directeur du Centre de référence des MST et de Traitement Ambulatoire de Bangui	A.III, A.IV
Respondent 11	Ministère de la Santé Publique Coordination Nationale du	Mme SEVICE, Chef de service d'IEC et de plaidoyer	A.III, A.IV

Respondent 12	Coordination Nationale du Comité National de Lutte contre le SIDA (CN/CNLS)	Mr Frédéric KOBEMBI, Conseiller en Suivi Evaluation	A.V
Respondent 13	Coordination Nationale du Comité National de Lutte contre le SIDA (CN/CNLS)	Dr BATE Lucien, Responsable de Suivi Evaluation du programme Fonds Mondial	A.V
Respondent 14	Direction de lutte contre le SIDA	Mr TNEGBIA J. Pierre, Point Focal Suivi Evaluation	A.V
Respondent 15	Ministère de la Santé Publique	Responsable du SNIS	A.V
Respondent 16	Groupe d'Appui Technique en Suivi Evaluation (GAT)	Dr FIOMONA Ludovic, membre	A.V
Respondent 17	Groupe d'Appui Technique en Suivi Evaluation (GAT)	Dr Honoré MONGBAZIAMA, membre	A.V
Respondent 18	Groupe d'Appui Technique en Suivi Evaluation (GAT)	Dr DOUMA, membre	
Respondent 19	Groupe d'Appui Technique en Suivi Evaluation (GAT)	Mme Chantal MAZIBAYI	
Respondent 20	Haut Commissariat au droit de l'Homme	Mr Abakar Dieudonné NIAKANDA, Haut Commissaire au droit de l'Homme	
Respondent 21	Primature	Mr MBATA Gervais, Conseiller Juridique	
Respondent 22	Région Sanitaire N°1	Dr Alain ASSANA, Directeur de la Région Sanitaire N°1	A.I, A.II
Respondent 23			
Respondent 24			
Respondent 25			

12)

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	Réseau Centrafricain pour l'Ethique et le Droit (RCED)	Conseiller	B.I

13)

	Organization	Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 2	Ligue des droits de l'Homme	Mme PANA Gisèle, Présidente de la Ligue	B.I
Respondent 3	Association des femmes Juristes	Mme NGANAFEI Viviane, Membre	B.I
Respondent 4	Réseau Centrafricain des Personnes Vivant avec le VIH (RECAPEV)	KOYAMET, Membre	B.II
Respondent	Conseil National des Jeunes Filles		

Respondent 5	Congres national des Jeunes Filles VIH+ (CNJFV+)	Mme FEITIA, Présidente	B.II
Respondent 6	Association des Filles Libres	Mme SENGUE Natacha, Présidente	B.II
Respondent 7	Association Centrafricaine pour le Marketing Social (ACAMS)	Mr OUASSONGO, Coordonnateur	B.II, B.III
Respondent 8	Association Centrafricaine pour le Bien Etre Social (ACABEF)		B.II, B.III
Respondent 9	Association des Oeuvres Médicales et Sanitaires en Centrafrique	Mme Brazza KOKESSA, Coordonnatrice	B.II, B.III
Respondent 10	Comité Islamique Centrafricain (SICA)	Immam KOBINE, Secrétaire Général	B.II
Respondent 11	Réseau Centrafricain des Jeunes pour la Lutte contre le SIDA	Mr NGOMBE Cyriaque, Chargé de nouvelles technologies	B.II
Respondent 12	Réseau Centrafricain des Jeunes pour la Lutte contre le SIDA	Mr NGUEREFARA Paul, Coordonnateur pour appui	B.II
Respondent 13	Amis d'Afrique	Mr BIADE Dominique	B.III
Respondent 14	FANTCA	Président	B.III
Respondent 15	Coeur Charitable	Mr TENEGBIA, Président	B.III
Respondent 16	Groupe KAMACH	Dr GBAGBA, Conseiller Médicale	B.III
Respondent 17	Vaincre Le SIDA (VLS)	Assistant	B.III
Respondent 18			
Respondent 19			
Respondent 20			
Respondent 21			
Respondent 22			
Respondent 23			
Respondent 24			
Respondent 25			

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14)

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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15) Part A, Section I: STRATEGIC PLAN

Question 1 (continued)

Period covered:

2006 à 2010

16)

1.1 How long has the country had a multisectoral strategy?

Number of Years

05

17)

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

Page 8

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?

Ils recherchent leur propre financement auprès des bailleurs de fonds

Page 9

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*	No

Settings

h. Workplace	Yes
i. Schools	Yes
j. Prisons	No

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?

Lors des enquêtes démographiques

Page 11

22)

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

Les personnes vivant avec le VIH, les hommes en uniformes, les orphelins et autres enfants rendus vulnérables par le VIH et le SIDA

23)

1.6 Does the multisectoral strategy include an operational plan?

No (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:

a travers l'implication de leurs représentant au processus d'élaboration du Cadre Stratégique National de lutte contre le Sida et leur implication dans la mise en oeuvre du cadre

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, some partners (0)

Page 13

29)

Part A, Section I: STRATEGIC PLAN

Question 1.10 (continued)

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

c'est lié à l'absence du plan opérationnel de mise en oeuvre

Page 14

30)

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

31)

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	
e. Autres: insérer	

32)

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)	No
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	No
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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33)

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

34)

Part A, Section I: STRATEGIC PLAN

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

2 (2)

35)

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

36)

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	No
Autres: insérer	

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37)

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 test VIH est volontaire; mais obligatoire au recrutement

38)

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

39)

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	Yes
g. Migrants/mobile populations	Yes
Autres: insérer Persones vivant avec le VIH	
	Yes

40)

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

Formation des professionnels de la justice, des forces de l'ordre et de la défense, des ONG défenseurs des droits de l'homme

41)

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

ces lois sont appliquées par les instances judiciaires

Page 21

42)

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

43)

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

44)

Part A, Section I: STRATEGIC PLAN**7.1 Have the national strategy and national HIV budget been revised accordingly?**

No (0)

45)

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

No (0)

Page 25

46)

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)

47)

7.4 Is HIV programme coverage being monitored?

Yes (0)

Page 26

48)

Part A, Section I: STRATEGIC PLAN**Question 7.4 (continued)****(a) IF YES, is coverage monitored by sex (male, female)?**

No (0)

Page 28

49)

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

Yes (0)

Page 29

50)

Part A, Section I: STRATEGIC PLAN

Question 7.4 (c) (continued)

IF YES, at which geographical levels (provincial, district, other)?

District,

51)

Briefly explain how this information is used:

District-Région Sanitaire-Niveau Central

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?

5 (5)

54)

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

Existence d'un document Cadre Stratégique National existence du document de plan national de Suivi Evaluation

55)

What are remaining challenges in this area:

l'absence du plan opérationnel de mise en oeuvre

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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)

Page 32

58)

2.1 IF YES, when was it created?

Please enter the year in yyyy format

2001

59)

2.2 IF YES, who is the Chair?

Name	Général François BOZIZE
Position/title	Président de la République, Chef de l'Etat

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?	

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61)

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

35

62)

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

20

63)

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

02

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64)

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?

No (0)

Page 35

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)

Page 38

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?**

5 (5)

68)

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

Document Cadre Stratégique National de lutte contre le SIDA Plan National de Suivi Evaluation

69)

What are remaining challenges in this area:

Elaboration du plan opérationnel

Page 39

70)

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)

Page 40

71)

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)
- c. Be faithful (0)
- d. Reduce the number of sexual partners (0)
- e. Use condoms consistently (0)
- f. Engage in safe(r) sex (0)
- g. Avoid commercial 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)

72)

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)

Page 41

73)

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)

74)

2.1 Is HIV education part of the curriculum in:

primary schools? Yes
secondary schools? Yes
teacher training? Yes

75)

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

Yes (0)

76)

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

No (0)

77)

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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78)

Part A, Section III: PREVENTION

Question 3 (continued)

IF NO, briefly explain:

absence d'étude d'identification pour le ciblage de ces populations spécifiques: étude en cours

Page 44

79)

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)

80)

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

Implication des média effectif croissant des personnes utilisant le service conseil dépistage promotion des préservatifs implication de plusieurs secteurs (acteurs)

81)

What are remaining challenges in this area:

Amélioration de la PTP actions à l'égard des sous populations spécifiques vulnérables prise en charge des IST enseignement du VIH dans tous les établissements scolaires mobilisation des ressources financières

Page 45

82)

Part A, III. PREVENTION

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

No (0)

Page 46

83)

4.1 To what extent has HIV prevention been implemented?

**The majority of people in need
have access**

HIV prevention component

Blood safety	Don't 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	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	Agree
School-based HIV education for young people	Agree
HIV prevention for out-of-school young people	Don't agree
HIV prevention in the workplace	Agree
Autres: insérer	

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84)

Part A, III. PREVENTION

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

6 (6)

85)

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

extension des sites PTPE et CDV, promotion du préservatif

86)

What are remaining challenges in this area:

Suivi et Evaluation reduction des risques pour les sous populations spécifiques et vulnérables

Page 48

87)

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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88)

Part A, Section IV: TREATMENT, CARE AND SUPPORT

1.1 IF YES, does it address barriers for women?

Yes (0)

89)

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

Yes (0)

90)

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

No (0)

Page 50

91)

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

en se fondant sur les domaines d'intervention prioritaires du Cadre Stratégique National

92)

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	Don't agree
Nutritional care	Don't agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	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	Agree
HIV testing and counselling for TB patients	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	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	Don't agree
HIV care and support in the workplace (including alternative working arrangements)	Don't agree
Autres programmes: insérer	

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93)

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)

94)

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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95)

Part A, Section IV: TREATMENT, CARE AND SUPPORT**Question 4 (continued)****IF YES, for which commodities?:**

Préservatifs, Antirétroviral, médicaments pour le traitement des infections opportunistes

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96)

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?

5 (5)

97)

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

extension de sites de prise en charge Augmentation du nombre de personnes vivant avec le VIH

prises en charge

98)

What are remaining challenges in this area:

Sécurisation et perennisation du financement des ARV

Page 54

99)

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)

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100)

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)

101)

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

Yes (0)

102)

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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103)

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

5 (5)

104)

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

Prise en charge multiforme

105)

What are remaining challenges in this area:

Problèmes de ressources financières

Page 57

106)

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

Yes (0)

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107)

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

2007

108)

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

2010

109)

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

Yes (0)

110)

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

Yes (0)

111)

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

Yes, but only some partners (0)

Page 59

112)

Part A, Section V: MONITORING AND EVALUATION

Question 1.4 (continued)

IF YES, but only some partners or IF NO, briefly describe what the issues are:

Certains indicateurs utilisés par d'autres partenaires ne figurent pas dans le plan de suivi évaluation

Page 60

113)

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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114)

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

115)

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

Yes (0)

Page 62

116)

Part A, Section V: MONITORING AND EVALUATION**3.1 IF YES, what percentage of the total HIV programme funding is budgeted for M&E**

activities?

Please enter the rounded percentage (1-100). If the percentage is less than 1, please enter "1".

6

117)

3.2 IF YES, has full funding been secured?

No (0)

Page 64

118)

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:

Faible plaidoyer pour la mobilisation des ressources faible budget national alloué au volet VIH irrégularité dans le décaissement des fonds du programme Fonds Mondial

Page 65

119)

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

Yes (0)

Page 66

120)

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

in the National AIDS Commission (or equivalent)? Yes
in the Ministry of Health?
ailleurs ? (insérer)

121) Number of permanent staff:

Please enter an integer greater than or equal to 0

2

122) Number of temporary staff:

Please enter an integer greater than or equal to 0

3

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123)

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	Conseiller en Suivi Evaluation	Full time	
Permanent staff 2	Assistant en Suivi Evaluation	Full time	
Permanent staff 3			
Permanent staff 4			
Permanent staff 5			
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			

124)

Please describe the details of all the temporary staff:

	Position	Full time/Part time?	Since when? (please enter the year in yyyy format)
Temporary staff 1	Chef d'unité Suivi Evaluation du Fonds Mondial		
Temporary staff 2	Assistant Suivi Evaluation du Fonds Mondial		
Temporary staff 3	Assistante Suivi Evaluation du Fonds Mondial		
Temporary staff 4			
Temporary staff 5			
Temporary staff 6			
Temporary staff 7			
Temporary staff 8			

Temporary staff
9
Temporary staff
10
Temporary staff
11
Temporary staff
12
Temporary staff
13
Temporary staff
14
Temporary staff
15

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125)

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 69126) **Part A, Section V: MONITORING AND EVALUATION****Question 5.3 (continued)****IF YES, briefly describe the data-sharing mechanisms:**

Lors des missions de supervision et de collecte des données

127)

What are the major challenges?

Non respect du circuit d'information insuffisance des ressources humaines sur les plans qualitatif et quantitatif

Page 70

128)

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)

129)

6.1 Does it include representation from civil society?

Yes (0)

Page 71**130) 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:**

un représentant des PVVIH des représentants des ONG nationales et internationales un
 représentant de la Faculté des Sciences de la Santé

131)

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

No (0)

Page 73

132)

7.3 Is there a functional* Health Information System?

At national level	Yes
At subnational level	Yes

Page 74

133)

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

No (0)

134)

9. To what extent are M&E data used**9.1 in developing / revising the national AIDS strategy?:**

3 (3)

135)

Provide a specific example:

ces données de Suivi Evaluation sont utilisées lors de l'élaboration du Cadre Stratégique de lutte

Page 75**136) Part A, Section V: MONITORING AND EVALUATION****9.2 To what extent are M&E data used for resource allocation?**

3 (3)

137)

Provide a specific example:

Augmentation de Budget de Suivi Evaluation en vue de la multiplication des outils de collecte des données

Page 76

138)

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

3 (3)

139)

Provide a specific example:

Les données de programmes Fonds Mondial et Banque Mondiale ont permis de réorienter les stratégies afin d'améliorer les programmes

Page 77**140) 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**141) 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 subnational level (0)

142)

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 80

143)

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

Yes (0)

Page 81144) **Part A, Section V: MONITORING AND EVALUATION****Question 10.2 (continued)****IF YES, describe what types of activities:**

Appui logistiques (outils informatiques, motos), distribution des outils de collecte des données

Page 82145) **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?**

5 (5)

146)

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

Elaboration du plan national de Suivi Evaluation mise en place du Groupe d'Appui Technique au Suivi Evaluation(GAT S/E) renforcement des capacités des acteurs standartisation des indicateurs et des outils des collecte des données

147)

What are remaining challenges in this area:

Mise en place de la Banque des données respect du circuit de l'information telque indiqué par le plan de Suivi Evaluayion

Page 83

148)

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

149)

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:

La loi N° 06/030 du 12 Septembre 2006 fixant les droits et obligations des PVVIH

150)

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

151)

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	No
g. Migrants/mobile populations	No
Autre: insérer	

152)

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

Sensibilisation des juges

153)

Briefly describe the content of these laws:

la fixant les droits et les obligations des PVVIH loi portant protection de la femme contre les violences code de la famille code pénal et procédure pénal

154)

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

Promotion de l'égalité et de l'équité

Page 86

155)

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

156)

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

157)

Part B, Section I. HUMAN RIGHTS

Question 4 (continued)

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

instrument juridique national et rappel des instruments juridiques internationaux des protection des droits Sensibilisation de tous au respect de ces instruments juridiques

158)

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?

Yes (0)

Page 90

159)

Part B, Section I. HUMAN RIGHTS**Question 5 (continued)****IF YES, briefly describe this mechanism:**

le mécanisme consistent en la saisie des juridictions nationales Certaines ONG assurent l'orientation et l'écoute des victimes

160)

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

161)

Part B, Section I. HUMAN RIGHTS**Question 6 (continued)****IF YES, describe some examples:**

les organisations en réseau Le Cadre Stratégique National 2006-2010 la Décentralisation des activités

162)

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

163)

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:

Grâce aux financements Fonds Mondial et Banque Mondiale le gouvernement mène une politique de services gratuits

164)

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

165)

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)

166)

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

167)

Part B, Section I. HUMAN RIGHTS

Question 9 (continued)

IF YES, briefly describe the content of this policy:

Souscription du Pays aux principes d'accès universels

168)

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

169)

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:

la déclaration universelle de droit de l'Homme le principe d'accès universel à la prévention au ,
traitement, soin et soutien

170)

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

No (0)

171)

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

172)

– 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)

173)

– 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)

174)

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

No (0)

Page 98

175)

Part B, Section I. HUMAN RIGHTS**Question 12 (continued)**

IF YES on any of the above questions, describe some examples:

existence de points focaux dans chaque département ministériel

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?

Yes (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
Autres: insérer Association des jeunes et des femmes	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?

6 (6)

183)

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

existence des lois et reglements dans ce domaine formation sur les droits des PVVIH

184)

What are remaining challenges in this area:

La vulgarisation et l'atteinte des populations cibles

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?

6 (6)

186)

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

l'adoption et la vulgarisation des textes et reglements à la matière

187)

What are remaining challenges in this area:

La vulgarisation à tous les niveaux

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?

3 (3)

189)

Comments and examples:

La contribution de la société civile à la formulation des stratégies et des politiques nationales

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)?

3 (3)

191)

Comments and examples:

Participation de la société civile aux réunions de planification et de révision des programmes

Page 105

192)

a. the national AIDS strategy?

3 (3)

193)

b. the national AIDS budget?

1 (1)

194)

c. national AIDS reports?

2 (2)

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195)

a. developing the national M&E plan?

2 (2)

196)

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

2 (2)

197)

c. M&E efforts at local level?

2 (2)

198)

Comments and examples:

la société civile est présente dans les missions intégrées de Suivi Evaluation, lors de l'élaboration du plan national de suivi Evaluation

Page 107**199) 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)?

3 (3)

200)

Comments and examples:

il ya le RECAPEV, l'ASSOMESCA, le RECAJELS, ASSOCIATION DES FILLES LIBRES

Page 108

201)

a. adequate financial support to implement its HIV activities?

2 (2)

202)

b. adequate technical support to implement its HIV activities?

3 (3)

203)

Comments and examples:

Quelques Structures relevant de la société civile sont sous bénéficiaires des programmes de Fonds Mondial, Banque Mondiale...

Page 109**204) 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	<25%
Testing and Counselling	<25%
Reduction of Stigma and Discrimination	25-50%
Clinical services (ART/OI)*	<25%
Home-based care	<25%
Programmes for OVC**	25-50%

Page 110

205)

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)

206)

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

Conseil dépistage prise en charge des infections opportunistes prise en charge par les ARV prise en charge psychosociale prévention par la sensibilisation

207)

What are remaining challenges in this area:

rupture des ARV et des produits pour les IO la formation à la prise en charge

Page 111

208)

Part B, Section III: PREVENTION

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

Yes (0)

Page 112

209)

Part B, Section III: PREVENTION

Question 1 (continued)**IF YES, how were these specific needs determined?**

lors des ateliers régionaux ayant précédé l'élaboration du Cadre Stratégique National 2006-2010

210)

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	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	

Page 113

211)

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)

212)

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

renforcement des capacités des acteurs promotion des préservatifs disponibilité des service CDV

213)

What are remaining challenges in this area:

implication totale des média

Page 114

214)

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

215)

Part B, Section IV: TREATMENT, CARE AND SUPPORT**Question 1 (continued)**

IF YES, how were these specific needs determined?

études d'identification des besoins

216)

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	Don't 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	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)	N/A
Autres: insérer	

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217)

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)

218)

Since 2007, what have been key achievements in this area:augmentation des personnes mises sous ARV prise en charge nutritionnel et psychosociale
formation des prescripteurs harmonisation des protocoles de prise en charge

219)

What are remaining challenges in this area:

rupture des ARV perennisation du financement des ARV

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)

223)

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

Yes (0)

Page 119**224)**

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

6 (6)

225)

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

Prise en charge multiforme

226)

What are remaining challenges in this area:

couvrir l'effectif total des OEV