

## Survey Response Details

### Response Information

**Started:** 4/30/2010 2:51:17 AM

**Completed:** 5/12/2010 6:45:57 AM

**Last Edited:** 5/12/2010 9:56:22 AM

**Total Time:** 12.03:54:39.6660000

### User Information

**Username:** ce\_MC

**Email:**

### Response Details

#### Page 1

**1) Country**

Monaco (0)

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

DOCTEUR ANNE NEGRE

**3) Postal address:**

DIRECTION DE L'ACTION SANITAIRE ET SOCIALE 46-48 BOULEVARD D'ITALIE MC 98000  
MONACO

**4) Telephone:**

Please include country code

(+377) 98.98.84.20

**5) Fax:**

Please include country code

(+377) 98.98.81.59

**6) E-mail:**

dass@gouv.mc

**7) Date of submission:**

Please enter in DD/MM/YYYY format

30/04/2010

#### Page 3

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

Collecte des données auprès des serices de santé (DASS, hôpital) et de l'association de prévention du VIH. Validation par les services du gouvernement de la Principauté de MONACO

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

SANS OBJET

10)

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

SANS OBJET

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11)

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

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 1	DIRECTION DE L'ACTION SANITAIRE ET SOCIALE	DIRECTEUR	A.I, A.II, A.III, A.IV, A.V

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	ASSOCIATION FIGHT AIDS MONACO	DIRECTEUR	B.I, B.II, B.III, B.IV

#### Page 5

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:**

2009 -2010

15)

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

**Number of Years**

15

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

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17)

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

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

<b>Target populations</b>	
a. Women and girls	No
b. Young women/young men	Yes
c. Injecting drug users	Yes
d. Men who have sex with men	Yes
e. Sex workers	No
f. Orphans and other vulnerable children	No
g. Other specific vulnerable subpopulations*	No
<b>Settings</b>	
h. Workplace	No
i. Schools	Yes
j. Prisons	Yes
<b>Cross-cutting issues</b>	
k. HIV and poverty	No
l. Human rights protection	No
m. Involvement of people living with HIV	No
n. Addressing stigma and discrimination	No
o. Gender empowerment and/or gender equality	No

18)

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

Yes (0)

**Page 10**

19)

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

Please enter the year in yyyy format

2009

**Page 11**

20)

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

JEUNES SCOLARISES

21)

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

Yes (0)

22)

**1.7 Does the multisectoral strategy or operational plan include:**

a. Formal programme goals?	No
b. Clear targets or milestones?	No
c. Detailed costs for each programmatic area?	No
d. An indication of funding sources to support programme?	Yes
e. A monitoring and evaluation framework?	Yes

23)

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

Active involvement (0)

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24)

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

Yes (0)

25)

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

Yes, all partners (0)

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26)

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

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

Yes (0)

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27)

**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	N/A
c. Poverty Reduction Strategy	N/A
d. Sector-wide approach	N/A
e. Autres: insérer	N/A

28)

**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)	Yes
Autres: insérer	No

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29)

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

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

N/A (0)

**Page 17**

30)

**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)

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31)

**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	No
Condom provision	No
HIV testing and counselling	Yes
Sexually transmitted infection services	No
Antiretroviral treatment	Yes
Care and support	Yes
Autres: insérer	

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32)

**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):**

## TEST DU VIH VOLONTAIRE INFORMATION POSSIBLE PAR L'OFFICE DE LA MEDECINE DU TRAVAIL

33)

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

No (0)

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34)

**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

35)

**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

36)

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

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

Yes (0)

37)

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

Yes (0)

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38)

**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)

39)

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

Yes (0)

**Page 26**

40)

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

**Question 7.4 (continued)**

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

No (0)

41)

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

No (0)

**Page 28**

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

**Question 7.4 (continued)**

**(c) Is coverage monitored by geographical area?**

No (0)

**Page 29**

43)

**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**

44)

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

**Question 7.5 (continued)**

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



**10 (10)**

45)

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

PRISE EN CHARGE EXHAUSTIVE DES PATIENTS VIH, QUEL QUE SOIT LE STADE DE L'INFECTION, DEPUIS LE DEBUT DE L'EPIDEMIE

46)

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

SANS OBJET

**Page 31**

47)

**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

48)

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

No (0)

**Page 32**

49)

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

**Question 2 (continued)**

**IF NO, briefly explain why not and how AIDS programmes are being managed:**

LA LUTTE CONTRE LE VIH EST ORGANISEE AU PLUS HAUT NIVEAU DU PAYS ET LES MOYENS NECESSAIRES SONT ALLOUES EN FONCTION DES BESOINS QUE CE SOIT POUR LA PRISE EN CHARGE DES PATIENTS (SANITAIRE ET SOCIALE)QUE POUR LES PROGRAMMES DE PREVENTION

**Page 34**

50)

**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?**

N/A (0)

**Page 35**

51)

**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	No

52)

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

Yes (0)

**Page 36**

53)

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

**6.1 IF YES, were policies and laws amended to be consistent with the National AIDS Control policies?**

No (0)

**Page 38**

54)

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

**Question 6.1 (continued)**

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

10 (10)

55)

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

IMPLICATION ET SOUTIEN DE LA POLITIQUE DE LUTTE CONTRE LE VIH AU PLUS HAUT NIVEAU DE L'ETAT

56)

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

SANS OBJET

**Page 39**

57)

**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**

58)

**Part A, Section III: PREVENTION**

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

Check for key message explicitly promoted (multiple options allowed)

- c. Be faithful (0)
- d. Reduce the number of sexual partners (0)
- e. Use condoms consistently (0)
- h. Abstain from injecting drugs (0)
- n. Know your HIV status (0)
- o. Prevent mother-to-child transmission of HIV (0)

59)

**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**

60)

**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)

61)

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

primary schools? No  
secondary schools? Yes  
teacher training? No

62)

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

Yes (0)

63)

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

No (0)

64)

**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)

**Page 42**

65)

**Part A, Section III: PREVENTION**

**Question 3 (continued)**

**IF NO, briefly explain:**

SANS OBJET : LES POPULATIONS VULNÉRABLES SONT PRISES EN CHARGE DE MANIÈRE EXHAUSTIVE PAR LES SERVICES SOCIAUX DE LA PRINCIPAUTE DE MONACO ET ONT ACCÈS AUX MÊMES PRISES EN CHARGE SANITAIRES ET SOCIALES ET DE PREVENTION

**Page 44**

66)

**Part A, III. PREVENTION**

**Question 3.1 (continued)**

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

**10 (10)**

67)

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

CAMPAGNES GRAND PUBLIC ANNUELLE ACTIONS DE PREVENTION PAR LES MEDIAS  
TOUT AU LONG DE L'ANNEE INFORMATION DANS LES ECOLES INFORMATION PAR LE BIAIS  
DE LA MEDECINE DU TRAVAIL

68)

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

SANS OBJET

**Page 45**

69)

**Part A, III. PREVENTION**

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

No (0)

**Page 46**

70)

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

Renouvellement annuel des actions d'information auprès des jeunes

71)

**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	Agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	Agree
Risk reduction for men who have sex with men	Agree
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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72)

**Part A, III. PREVENTION**

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

10 (10)

73)

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

Campagnes annuelles de prévention lors de la journée mondiale du SIDA Actions d'information à l'égard des jeunes

74)

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

S/O

**Page 48**

75)

**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**

76)

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

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

Yes (0)

77)

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

Yes (0)

78)

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

No (0)

Page 50

79)

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

Prise en compte exhaustive des dépenses nécessaires au traitement aux soins et au soutien des patients atteints par le VIH

80)

**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	Agree
Sexually transmitted infection management	Agree
Psychosocial support for people living with HIV and their families	Agree
Home-based care	Agree
Palliative care and treatment of common HIV-related infections	Agree
HIV testing and counselling for TB patients	Agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	Agree
TB infection control in HIV treatment and care facilities	Agree
Cotrimoxazole prophylaxis in HIV-infected people	Agree
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Agree
HIV care and support in the workplace (including alternative working arrangements)	Agree
Autres programmes: insérer	

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81)

**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)

82)

**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**

83)

**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?**

10 (10)

84)

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

Reconduction des moyens

85)

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

S/O

**Page 54**

86)

**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?**

N/A (0)

**Page 57**

87)

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

**1. Does the country have *one* national Monitoring and Evaluation (M&E) plan?**

In progress (0)

**Page 64**



88)

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

Yes (0)

**Page 65**

89)

**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:**

Enquête prospective sur le nombre de personnes atteintes par le VIH

90)

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

In progress (0)

**Page 69**

91)

**What are the major challenges?**

S/O

**Page 70**

92)

**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)

93)

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

Yes (0)

**Page 71**

**94) 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:**

Représentant d'aassociation

95)

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

Yes (0)

**Page 72**

96)

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

Déclaration anonyme de séropositivité au VIH gérée par la Direction de l'Action Sanitaire et Sociale

97)

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

No, none of the above (0)

**Page 73**

98)

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

At national level	Yes
At subnational level	No

**Page 74**

99)

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

No (0)

100)

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

2 (2)

101)

**Provide a specific example:**

S/O

102)

**What are the main challenges, if any?**

S/O

**Page 75**

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

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

2 (2)

104)

**Provide a specific example:**

S/O

105)

**What are the main challenges, if any?**

S/O

**Page 76**

106)

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

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

2 (2)

107)

**Provide a specific example:**

S/O

108)

**What are the main challenges, if any?**

S/O

**Page 77**

109) **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**

110)

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

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

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111)

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

**10.2 Were other M&E capacity-building activities conducted other than training?**

Yes (0)

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

**Question 10.2 (continued)**

**IF YES, describe what types of activities:**

Information des jeunes

**Page 82**

113) **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?**

10 (10)

114)

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

Suivi des nouvelles contaminations par le VIH en lien avec les services de soins et le milieu associatif

115)

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

S/O

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116)

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

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

No (0)

**Page 84**

117)

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

No (0)

**Page 86**

118)

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

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

No (0)

**Page 89**

120)

**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**

121)

**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?**

No (0)

**Page 91**

122)

**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

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123)

**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:**

Prise en charge des traitements et du soutien des personnes vivant avec le VIH y compris les plus démunis Accompagnement effectué par une association subventionnée par l'Etat

124)

**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**

125)

**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)

126)

**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)

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127)

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

**Question 9 (continued)**

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

Prise en charge et soutien de l'ensemble des personnes vivant avec le VIH par les services sociaux

128)

**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?**

No (0)

**Page 95**

129)

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

Yes (0)

130)

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

Yes (0)

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131)

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

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

Yes (0)

132)

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

Comité d'Ethique National traitant de l'ensemble des problèmes d'éthique y compris le VIH

**Page 97**

133)

**– 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**

No (0)

134)

**– 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)

135)

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

No (0)

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136)

**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)

137)

**– Legal aid systems for HIV casework**

No (0)

138)



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

No (0)

139)

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

Yes (0)

140)

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

No (0)

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141)

**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?**

10 (10)

142)

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

S/O

143)

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

S/O

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144)

**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?**

10 (10)

145)

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

S/O

146)

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

S/O

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147)

**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?**

5 (5)

148)

**Comments and examples:**

Soutien de la lutte contre les VIH et les discriminations au plus haut niveau de l'Etat

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149)

**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)?**

5 (5)

150)

**Comments and examples:**

Soutien de la lutte contre les VIH et les discriminations au plus haut niveau de l'Etat

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151)

**a. the national AIDS strategy?**

5 (5)

152)

**b. the national AIDS budget?**

0

153) **c. national AIDS reports?**

3 (3)

154) **Comments and examples:**

L'association FIGHT AIDS MONACO est régulièrement associée à l'élaboration des politiques de santé contre le VIH

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155) **Comments and examples:**

L'association FIGHT AIDS MONACO est régulièrement associée à l'élaboration des politiques de santé contre le VIH

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156) **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)?**

5 (5)

157) **Comments and examples:**

L'association FIGHT AIDS MONACO accueille l'ensemble des personnes vivants avec le VIH quel que soit le mode de contamination, qui peuvent ainsi s'exprimer sans discrimination

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

5 (5)

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

5 (5)

160)

**Comments and examples:**

L'Association FIGHT AIDS MONACO bénéficie d'un soutien au plus haut niveau de l'Etat

**Page 109****161) Part B, Section II. CIVIL SOCIETY PARTICIPATION**

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

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

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162)

**Part B, Section II. CIVIL SOCIETY PARTICIPATION****Question 7 (continued)**

**Overall, how would you rate the efforts to increase civil society participation in 2009?**

10 (10)

163)

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

L'association FIGHT AIDS MONACO est régulièrement associée à l'élaboration des politiques de santé contre le VIH

164)

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

S/O

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165)

**Part B, Section III: PREVENTION**

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

No (0)

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166)

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

Des actions de prévention sont régulièrement menées en direction des jeunes. Un accès gratuit aux seringues est organisé. Un accès large aux préservatifs est organisé y compris par le biais de distributeurs

167)

**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	Agree
Risk reduction for men who have sex with men	Agree
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	N/A
HIV prevention in the workplace	Agree
Autres: insérer	

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168)

**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?**

8 (8)

169)

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

170)

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

S/O

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171)

**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)

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172)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT****Question 1 (continued)****IF YES, how were these specific needs determined?**

Recensement des personnes séropositives au VIH par le biais du Centre de Dépistage Anonyme et Gratuit et des services de soins du Centre Hospitalier Princesse Grace

173)

**1.1 To what extent have the following HIV treatment, care and support services been implemented?****The majority of people in need  
have access****HIV treatment, care and support service**

Antiretroviral therapy	Agree
Nutritional care	Agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	Agree
Psychosocial support for people living with HIV and their families	Agree
Home-based care	Agree
Palliative care and treatment of common HIV-related infections	Agree
HIV testing and counselling for TB patients	Agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	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,	Agree

rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Agree
HIV care and support in the workplace (including alternative working arrangements)	Agree
Autres: insérer	

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174)

**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?**

10 (10)

175)

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

Prise en charge exhaustive des patients séropositifs au VIH tant en soins qu'en soutien

176)

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

S/O

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177)

**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?**

N/A (0)