Morocco Report NCPI

NCPI Header

COUNTRY-

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

Dr Aziza Bennani

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Describe the process used for NCPI data gathering and validation:

Le questionnaire A à été complété par les départements ministériels impliqués dans la riposte au VIH/sida et validé lors de l'atelier national de validation du rapport final tenu le 15 Mars 2012. Le guestionnaire B à été complété par les ONG et les partenaires de coopération bilatérale et multilatérale de la riposte national au VIH/sida et validé lors de l'atelier national de validation du rapport final tenu le 15 Mars 2012.

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

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

Les questionnaires A et B complétés ont été présentés en plénière lors de l'atelier national da validation du rapport final tenu le 15 Mars 2012. Des discussions ont suivi ces présentations et un débat a été mené pour valider les questionnaires et résoudre les divergences eventuelles.

-NCPI - PARTA	[to be	administered to	government	officials]
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Organization	Names/Positions	A.I	A.II	A.III	A.IV	A.V	A.VI
Ministère de la Santé, PNLS	Dr Bennani Aziza, Chef de service	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la Santé, PNLS	Dr. Nadia Hamri	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la Santé, PNLS	Mme Latifa Ghargui	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la Santé, PNLS	Mlle Meriel Ghanam	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la Santé, PNLS	Dr Sakhri Noureddine	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la Santé, PNLS	Dr El Kettani Amina	Yes	Yes	Yes	Yes	Yes	Yes
Service des Maladies Infectieuses	Pr kamal Marhoum El Filali, Chef de service	Yes	Yes	Yes	Yes	Yes	Yes
Service des Maladies Infectieuses	Dr Hassan Lamdini	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la santé, SMMD	Mme rachidi soumaya	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la santé, SMMD	Mme rachida Kendi	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de l'Education Nationale	Dr ilham Menchafou	Yes	Yes	Yes	Yes	Yes	Yes
Administration Pénitentiaire	Dr Regragui Mouna	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la Santé, DP	Dr Rharbaoui	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la Santé, DPRF	Mme sanae Cherqaoui	Yes	Yes	Yes	Yes	Yes	Yes
DRS Grand Casablanca	Dr Idrissi Azami Amina	Yes	Yes	Yes	Yes	Yes	Yes
DRS- ORS	Dr fatiha guezzar	Yes	Yes	Yes	Yes	Yes	Yes
Inspection du Conice de Conté des							

FAR	Dr Sbai idrissi karim	Yes	Yes	Yes	Yes	Yes	Yes
Inspection du Service de Santé des FAR	Dr omar Sedrati	Yes	Yes	Yes	Yes	Yes	Yes
Institut National d'hygiene	Dr hicham Oumzil	Yes	Yes	Yes	Yes	Yes	Yes
Ministère de la Jeunesse et des Sports	Mme Othmani habiba	Yes	Yes	Yes	Yes	Yes	Yes
Centre National de Transfusion Sanguine	Mme Othmani habiba	Yes	Yes	Yes	Yes	Yes	Yes

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

Names/Positions	B.I	B.II	B.III	B.IV	B.V
BB 6 " '					D. V
DR Ourssas Ihoucine	Yes	Yes	Yes	Yes	Yes
Mr Dohri jaouad	Yes	Yes	Yes	Yes	Yes
nt Mme zahra Lahriyach	Yes	Yes	Yes	Yes	Yes
Dr Kandil abdelwahid	Yes	Yes	Yes	Yes	Yes
Mr fazouane abdesslam	Yes	Yes	Yes	Yes	Yes
Mme nezha El amrani	Yes	Yes	Yes	Yes	Yes
Dr Benalla Abdessamad	Yes	Yes	Yes	Yes	Yes
Mme El arabia Mina	Yes	Yes	Yes	Yes	Yes
Mr Otmane Cherki	Yes	Yes	Yes	Yes	Yes
Pr Sekkat Abdelhak	Yes	Yes	Yes	Yes	Yes
Mr Moustai Redouane	Yes	Yes	Yes	Yes	Yes
Mr Chahir Ahmed	Yes	Yes	Yes	Yes	Yes
Dr Alami Kamal	Yes	Yes	Yes	Yes	Yes
M. Houssine EL Rhilani	Yes	Yes	Yes	Yes	Yes
Mme Yabuta Mieko	Yes	Yes	Yes	Yes	Yes
	nt Mme zahra Lahriyach Dr Kandil abdelwahid Mr fazouane abdesslam Mme nezha El amrani Dr Benalla Abdessamad Mme El arabia Mina Mr Otmane Cherki Pr Sekkat Abdelhak Mr Moustai Redouane Mr Chahir Ahmed Dr Alami Kamal M. Houssine EL Rhilani	nt Mme zahra Lahriyach Yes Dr Kandil abdelwahid Yes Mr fazouane abdesslam Yes Mme nezha El amrani Yes Dr Benalla Abdessamad Yes Mme El arabia Mina Yes Mr Otmane Cherki Yes Pr Sekkat Abdelhak Yes Mr Moustai Redouane Yes Mr Chahir Ahmed Yes Dr Alami Kamal Yes M. Houssine EL Rhilani Yes	Dr Kandil abdelwahid Yes Yes Dr Kandil abdelwahid Yes Yes Mr fazouane abdesslam Yes Yes Mme nezha El amrani Yes Yes Dr Benalla Abdessamad Yes Yes Mme El arabia Mina Yes Yes Mr Otmane Cherki Yes Yes Pr Sekkat Abdelhak Yes Yes Mr Moustai Redouane Yes Yes Mr Chahir Ahmed Yes Yes Dr Alami Kamal Yes Yes M. Houssine EL Rhilani Yes Yes	Dr Kandil abdelwahid Yes Yes Yes Mr fazouane abdesslam Yes Yes Yes Mme nezha El amrani Yes Yes Yes Dr Benalla Abdessamad Yes Yes Yes Mme El arabia Mina Yes Yes Yes Mr Otmane Cherki Yes Yes Yes Pr Sekkat Abdelhak Yes Yes Yes Mr Moustai Redouane Yes Yes Yes Mr Chahir Ahmed Yes Yes Yes Mr Alami Kamal Yes Yes Yes M. Houssine EL Rhilani Yes Yes Yes	Dr Kandil abdelwahid Yes Yes Yes Yes Mr fazouane abdesslam Yes Yes Yes Yes Mme nezha El amrani Yes Yes Yes Yes Dr Benalla Abdessamad Yes Yes Yes Yes Mme El arabia Mina Yes Yes Yes Yes Mr Otmane Cherki Yes Yes Yes Yes Pr Sekkat Abdelhak Yes Yes Yes Yes Mr Moustai Redouane Yes Yes Yes Yes Mr Chahir Ahmed Yes Yes Yes Yes Dr Alami Kamal Yes Yes Yes Yes M. Houssine EL Rhilani Yes Yes Yes Yes

A - 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

IF YES, what was the period covered:

2007-2011

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.:

• Introduction de nouvelles populations cible (usager de drogue injectable UDI) • Elaboration du plan sectoriel • Elargissement de dépistage dans les ESSB et CDTMR. • Renforcement des plans régionaux et CRILS (ajout de trois régions prioritaires) • Création des unités de prise en charge des femmes et des enfants victime de violence • Mise en place d'un programme de prévention de transmission mère enfant (PTME) • Mise en place du programme d'appui psychosocial • Elaboration de la stratégie nationale sur la santé reproductive • Création d'une association des PVVIH

-1.1 Which government ministries or agencies

Name of government ministries or agencies [write in]:

Ministère de la Santé

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

_SECTORS	
Included in Strategy	Earmarked Budget
Yes	Yes
Yes	Yes
Yes	No

Yes	Yes	
No	No	
Yes	Yes	
Yes	Yes	

Other [write in]:

Administration penitentaire, Entraide Nationale, Agriculture, Affaires Islamiques, Communication

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

Le ministere de l'emploi : FM – coopération bilatérale et le système des nations unis

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

Men who have sex with men:

V۵c

Migrants/mobile populations:

Yes

Orphans and other vulnerable children:

Yes

People with disabilities:

Nο

People who inject drugs:

Yes

Sex workers:

Yes

Transgendered people:

No

Women and girls:

Yes

Young women/young men:

Yes

Other specific vulnerable subpopulations:

Yes

Prisons:

Yes

Schools:

Yes

Workplace:

Yes

Addressing stigma and discrimination:

Yes

Gender empowerment and/or gender equality:

Yes

HIV and poverty:

Yes

Human rights protection:

Yes

Involvement of people living with HIV:

Yes

IF NO, explain how key populations were identifed?:

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

Les jeunes, des deux genres, scolarisés ou non. Les femmes en situation de vulnérabilité. Les enfants en situation précaire . Les professionnels du sexe, féminins et masculins .Les usagers de drogues injectables. Les migrants, en particulier ceux en situation irrégulière .Les populations en situation de mobilité fréquente. Le personnel des services en uniforme. Les prisonniers. Les personnes atteintes d'Infections sexuellement transmissibles. Les personnes vivant avec le VIH et personnes affectées par le VIH

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

-1.6. Does the multisectoral strategy or operational plan include-

a) Formal programme goals?:

Yes

b) Clear targets or milestones?:

Yes

c) Detailed costs for each programmatic area?:

Yes

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

Yes

e) A monitoring and evaluation framework?:

Yes

-1.7

1.7. Has the country ensured "full involvement and participation" of civil society in the development of the multisectoral strategy?:

Active involvement

IF ACTIVE INVOLVEMENT, briefly explain how this was organised:

Le Plan stratégique national de lutte contre le SIDA 2007/2011, est le résultat d'un travail collectif engagé par tous les acteurs institutionnels et associatifs impliqués dans la lutte contre le VIH/sida. La société civile (ONG) a participé activement à toutes les étapes du processus de planification stratégique depuis l'analyse de la situation et de la riposte jusqu'à l'élaboration de la stratégie nationale. Des consultations externes ont concernés (i) les interventions de prévention proximité auprès des populations vulnérables menées par les ONG, (ii) la prise en charge médicale des personnes vivant avec le VIH (PVVIH) et (iii) la décentralisation des activités au niveau des régions. Une revue interne des centres de dépistage du VIH gérés par les ONG a aussi été menée. Toutes ces consultations et revues ont été sanctionnées par des rapports d'analyse qui ont été partagés avec l'ensemble des partenaires et discutés dans des ateliers spécifiques.

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

Yes

-1.9

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

Yes, all partners

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

-2.1. IF YES, is support for HIV integrated in the following specifc development plans?

Common Country Assessment/UN Development Assistance Framework:

Yes

National Development Plan:

No

Poverty Reduction Strategy:

Yes

Sector-wide approach:

Yes

Other [write in]:

-

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

HIV impact alleviation:

N/A

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

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

Yes

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

Yes

Other[write in below]:

_

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

5. Has the country followed up on commitments made in the 2011 Political Declaration on HIV/AIDS?:

Yes

5.1. Have the national strategy and national HIV budget been revised accordingly?:

Yes

5.2. 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

5.3. Is HIV programme coverage being monitored?:

Yes

-5.3⁻

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

Yes

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

Yes

IF YES, for which population groups?:

Jeunes Femmes Les professionnels du sexe, féminins et masculins Les usagers de drogues injectables Les prisonniers Les personnes atteintes d'Infections sexuellement transmissibles Les personnes vivant avec le VIH et personnes affectées par le VIH

Briefly explain how this information is used:

Suivi, analyse, évaluation, planification et prise de décision et/ou réajustement

(c) Is coverage monitored by geographical area:

Yes

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

À tous les niveaux : Nationale, régionale, provincial et local

Briefly explain how this information is used:

Suivi, analyse, évaluation, planification et prise de décision et/ou réajustement se font à tous les niveaux avec identification des régions prioritaires

5.4. Has the country developed a plan to strengthen health systems?:

Yes

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

• Formation • Equipements • Médicaments et fongibles (+ préservatifs) • Système d'information • Supports de communication

6. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate strategy planning efforts in the HIV programmes in 2011?:

Since 2009, what have been key achievements in this area:

• PTME • UDI • Extension de dépistage • Renforcement de la décentralisation de la prise en charge • Appui psychosocial • Renforcement de système de suivi évaluation (Etude RDS – mise en ouvre d'un outil de dispensation électronique des médicaments ARV et IO)

What challenges remain in this area:

· Mise en œuvre, la gestion et le suivi de ces plans régionaux avec déclinaison des fonds prévus

A - II. POLITICAL SUPPORT AND LEADERSHIP

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

A. Government ministers:

Yes

B. Other high offcials at sub-national level:

Yes

-1.1-

(For example, promised more resources to rectify identified weaknesses in the HIV response, spoke of HIV as a human rights issue in a major domestic/international forum, and such activities as visiting an HIV clinic, etc.):

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership:

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

Have terms of reference?:

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

Have active government leadership and participation?:	
Yes Have an official chair person?:	
Yes IF YES, what is his/her name and position title?:	
- Have a defined membership?:	
Yes IF YES, how many members?:	
Include civil society representatives?:	
Yes IF YES, how many?:	
Include people living with HIV?: Yes	
IF YES, how many?:	
Include the private sector?: Yes	
Strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?:	
Yes	
3. Does the country have a mechanism to promote interaction between government, civil society organization and the private sector for implementing HIV strategies/programmes?: fes	s,
F YES, briefly describe the main achievements:	
What challenges remain in this area: Représentativité des différents partenaires au sein de l'instance de coordination. Liens avec les instances régionales de	
coordination	
4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?:	
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4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?: 55% -5. Capacity-building: Yes Coordination with other implementing partners: Information on priority needs: Procurement and distribution of medications or other supplies:	

Ν

Yes

6.1. IF YES, were policies and laws amended to be consistent with the National HIV Control policies?:

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the political

support for the HIV programme in 2011?:

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

A - III. HUMAN RIGHTS

┌1.1
People living with HIV:
Men who have sex with men:
Migrants/mobile populations: Yes
Orphans and other vulnerable children: Yes
People with disabilities:
People who inject drugs:
Prison inmates:
Yes Sex workers:
Transgendered people:
Women and girls:
Yes Young women/young men:
Yes Other specific vulnerable subpopulations [write in]:
1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:
IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws:
- Briefly explain what mechanisms are in place to ensure these laws are implemented:
Briefly comment on the degree to which they are currently implemented:
2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?:
Yes
☐IF YES, for which subpopulations?
People living with HIV:
Men who have sex with men: Yes
Migrants/mobile populations:
Orphans and other vulnerable children:
People with disabilities:
People who inject drugs : Yes
Prison inmates:
Sex workers: Yes
Transgendered people:
Women and girls:
Young women/young men:
Other specific vulnerable subpopulations [write in below]:

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

Amendes et prison • PROSTITUTION (article 502 du Code pénal) • HSH : Article 489 du code pénal du Maroc, qui condamne « quiconque commet un acte impudique ou contre-nature avec un individu de son sexe ». • UDI

Briefly comment on how they pose barriers:

-

A - IV. PREVENTION

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

Yes	opulation:
┌IF YES, what key m	nessages are explicitly promoted?
Abstain from injec	ctina druas:
Yes	
Avoid commercial	sex:
No	
Avoid inter-genera	ational sex:
No	
Be faithful:	
No	
Be sexually abstin	nent:
Yes	
Delay sexual debu	ut:
Yes	
Engage in safe(r)	sex:
Yes	
Fight against viole	ence against women:
Yes	
	ce and involvement of people living with HIV:
Yes	
Greater involveme	ent of men in reproductive health programmes:
Yes	
Know your HIV sta	atus:
Yes	
Males to get circuit	mcised under medical supervision:
-	
Prevent mother-to	o-child transmission of HIV:
Yes	
_	equality between men and women:
Yes	
	per of sexual partners:
Yes	
Use clean needles	s and syringes:
Yes	
Use condoms con	isistently:
Yes	•
Other [write in belo	owj:
Fidélité	

the media?:

Yes

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

Yes

-2.1. IS HIV	education	part of the	curriculum in
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Primary schools?:

Yes

Secondary schools?:

Yes

Teacher training?:

Yes

2.2. Does the strategy include age-appropriate, gender-sensitive sexual and reproductive health elements?:

Yes

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

Yes

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

Yes

Briefly describe the content of this policy or strategy:

Voir PSN

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

	,	• •	•	•	, 0,
IDU	MSM	Sex workers	Customers of Sex Workers	Prison inmates	Other populations
Yes	Yes	Yes	Yes	Yes	-
Yes	No	No	No	No	-
Yes	Yes	Yes	Yes	Yes	-
Yes	No	No	No	No	-
No	No	Yes	Yes	Yes	-
Yes	Yes	Yes	Yes	Yes	-
Yes	Yes	Yes	Yes	Yes	-
No	No	Yes	No	No	-

3.2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate policy efforts in support of HIV prevention in 2011?:

Ω

Since 2009, what have been key achievements in this area:

Extension de la couverture par les programmes de prévention de proximité auprès des professionnel (le)s du sexe à plusieurs villes du pays Préparation de nouveaux programmes notamment pour les consommateurs de drogues injectables, les migrants en situation irrégulière et les routiers Ptme

What challenges remain in this area:

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

Yes

IF YES, how were these specific needs determined?:

Besoins déterminé :estimation réalisé chaque année par le PNLS

-4.1. To what extent has HIV prevention been implemented?

Blood safety:

Strongly Agree

Condom promotion:

Agree

Harm reduction for people who inject drugs:

Agree

HIV prevention for out-of-school young people:

Disagree

HIV prevention in the workplace:

Disagree

HIV testing and counseling:

Disagree

IEC on risk reduction:

Agree

IEC on stigma and discrimination reduction:

Agree

Prevention of mother-to-child transmission of HIV:

Agree

Prevention for people living with HIV:

Aaree

Reproductive health services including sexually transmitted infections prevention and treatment:

Strongly Agree

Risk reduction for intimate partners of key populations:

Disagree

Risk reduction for men who have sex with men:

Aaree

Risk reduction for sex workers:

Agree

School-based HIV education for young people:

Strongly Agree

Universal precautions in health care settings: Agree Other[write in]:

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in implementation of HIV prevention programmes in 2011?:

A - V. TREATMENT, CARE AND SUPPORT

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

Yes

If YES, Briefly identify the elements and what has been prioritized:

ARV APPUI PSYCHOSOCIAL PTME VOIR PSN

Briefly identify how HIV treatment, care and support services are being scaled-up?:

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

Antiretroviral therapy:

Agree

ART for TB patients:

Cotrimoxazole prophylaxis in people living with HIV:

Early infant diagnosis:

Agree

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

HIV testing and counselling for people with TB:

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

Nutritional care:

Paediatric AIDS treatment:

Agree

Post-delivery ART provision to women:

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

Disagree

Post-exposure prophylaxis for occupational exposures to HIV:

Psychosocial support for people living with HIV and their families:

Agree

Sexually transmitted infection management:

TB infection control in HIV treatment and care facilities:

TB preventive therapy for people living with HIV:

Disagree

TB screening for people living with HIV:

Treatment of common HIV-related infections:

Agree

Other [write in]:

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

Please clarify which social and economic support is provided:

APPUI PSYCHOSOCIAL

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

Yes

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

IF YES, for which commodities?:

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care, and support programmes in 2011?:

Ω

Since 2009, what have been key achievements in this area:

Introduction des médicaments ARV de deuxième et troisième ligne Le seuil d'éligibilité au ARV est passé de CD4<200 à CD4<350 Introduction de la méthadone Mise en œuvre et élargissement du programme d'appui psychosocial Augmentation de la couverture des personnes ayant besoin d'ARV à 40% (CD4<350) Renforcement de la décentralisation de la prise en charge des PVVIH Informatisation de la gestion du dossier du PPVIH suivi par les centres de prise en charge

What challenges remain in this area:

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

No

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2011?:

6

Since 2009, what have been key achievements in this area:

Le plan 2007/2011 a inclus les interventions visant les enfants infectés et affectés ainsi que les enfants vulnérables. Une étude d'évaluation des besoins est en cours.

What challenges remain in this area:

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A - VI. MONITORING AND EVALUATION

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

Yes

Briefly describe any challenges in development or implementation:

Dans le cadre du PSN 2007-2011 un plan de Suivi et Evaluation de la riposte nationale au VIH/sida a été mis en place Mettre à disposition des acteurs au niveau national et au niveau des régions des données pour analyser la situation Epidémiologique, suivre les programmes de prévention et de prise en charge et évaluer les résultats des activités menées sur le terrain.

1.1 IF YES, years covered:

2007 /2011

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

Yes, some partners

Briefly describe what the issues are:

Difficulté à aligner la totalité des partenaires aux normes et standard en matière de S&E Difficulté de collecté régulièrement les données Difficulté à mettre en place une base de données intégrée et centralisée

A data collection strategy:

Yes

Behavioural surveys:

Yes

Evaluation / research studies:

Yes

HIV Drug resistance surveillance:

Yes

HIV surveillance:

Yes

Routine programme monitoring:

Yes

A data analysis strategy:

Yes

A data dissemination and use strategy:

Yes

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

Yes

Guidelines on tools for data collection:

Yes

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

Yes

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

10%

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

In Progress

Briefly describe any obstacles:

Manques de ressources humaines

In the Ministry of Health?:

Yes

In the National HIV Commission (or equivalent)?:

Elsewhere [write in]?:

-

Permanent Staff [Add as many as needed]

POSITION [write in position titles in spaces below]	Fulltime	Part time	Since when?
Medecin	-	Χ	-
Ingénieur	X	-	-
Statisticienne	X	-	-

-Temporary Staff [Add as many as needed]

POSITION [write in position titles in spaces below]	Fulltime	Part time	Since when?
_	-	-	-

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

Yes

Briefly describe the data-sharing mechanisms:

Les données des programmes sont collectées régulièrement et centralisées au niveau du PNLS et utilisées pour le suivi des programmes. Ces données sont régulièrement publiées dans des rapports de suivi et partager à l'occasion d'atelier national ou régional, notamment à l'occasion du préparation du rapport national sur le sida.

What are the major challenges in this area:

Une grande partie des données échappent au suivi des activités du PNS par le PNLS, notamment ceux qui sont financées dans le cadre d'appui autre que celui du Fons Mondial ou le Système des Nations Unies.

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

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

Yes

IF YES, briefly describe the national database and who manages it.:

Les données sont centralisées au niveau du PNLS en utilisant plusieurs outils et bases de données. Il est prévu de Concevoir et mettre en place une base de données nationale centralisée.

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

Yes, all of the above

6.2. Is there a functional Health Information System?

At national level:

Yes

At subnational level:

Yes

IF YES, at what level(s)?:

-

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

Yes

-8. How are M&E data used?

For programme improvement?:

Yes

In developing / revising the national HIV response?:

	Yes
l	For resource allocation?:
l	Yes
	Other [write in]:
l	-

Briefly provide specific examples of how M&E data are used, and the main challenges, if any:

Les données de S&E ont été utilisées dans le cadre de la revue du PSN 2007-2011 Notamment les études (MoT, NASA, RDS HSH, RDS PSF, RDS UDI), revue des programmes de prévention, la revue Des programmes de prise en charge etc. L'élaboration de la proposition du Maroc eu Fonds Mondial Round 10. Réorientation de l'allocation des ressources financières dans le cadre du PSN 2012-2016, Le renferment des programmes de préventions auprès des MARPS L'élargissement du programme pTME Décentralisation de la prise en charge des PVVIH

9. In the last year, was training in M&E conducted At national level?: Yes IF YES, what was the number trained: At subnational level?: Vac IF YES, what was the number trained: At service delivery level including civil society?: IF YES, how many?: 100

9.1. Were other M&E capacity-building activities conducted` other than training?:

Yes

IF YES, describe what types of activities:

10. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the HIV-related monitoring and evaluation (M&E) in 2011?:

Since 2009, what have been key achievements in this area:

Renforcement des capacités en matière des études RDS, MoT

What challenges remain in this area:

Collecte régulière des données des programmes et la mise en place d'une base de données nationale

B - I. CIVIL SOCIETY INVOLVEMENT

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

Comments and examples:

- Participation effective des ONGs dans l'élaboration de la stratégie nationale de lutte contre l'infection à VIH
- 2. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") have civil society representatives been involved in the planning and budgeting process for the National Strategic Plan on HIV or for the most current activity plan (e.g. attending planning meetings and reviewing drafts)?: 4

Comments and examples:

Présence au CCM, aux differents ateliers du FMLSTP et coopérations bilatérales...

a. The national HIV strategy?: b. The national HIV budget?: c. The national HIV reports?: Comments and examples:

a. Developing the national M&E plan?:

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

Δ

Comments and examples:

- -6. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") is civil society able to access
- a. Adequate financial support to implement its HIV activities?:

3

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

4

Comments and examples:

• La crise financière a répercuté sur les enveloppes budgétaires dédiées aux ONG

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

People living with HIV:

25-50%

Men who have sex with men:

>75%

People who inject drugs:

>75%

Sex workers:

>75%

Transgendered people:

>75%

Testing and Counselling:

>75%

Reduction of Stigma and Discrimination:

>75%

Clinical services (ART/OI)*:

<25%

Home-based care:

10

Programmes for OVC**:

-

8. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to increase civil society participation in 2011?:

ç

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

-

B-II. POLITICAL SUPPORT AND LEADERSHIP

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

IF YES, describe some examples of when and how this has happened:

• Participation effective dans l'élaboration de la politique gouvernementale.

B-III. HUMAN RIGHTS

-1.1.

People living with HIV:

No
Men who have sex with men:
No .
Migrants/mobile populations:
No
Orphans and other vulnerable children: No
People with disabilities:
Yes
People who inject drugs:
No
Prison inmates:
Yes
Sex workers:
No Transport de martin de
Transgendered people: No
Women and girls:
No
Young women/young men:
No
Other specific vulnerable subpopulations [write in]:
-
.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:
No
f YES to Question 1.1 or 1.2, briefly describe the contents of these laws:
Briefly explain what mechanisms are in place to ensure that these laws are implemented:
orieny explain what mechanisms are in place to ensure that these laws are implemented.
Briefly comment on the degree to which they are currently implemented:
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Briefly describe the content of these laws, regulations or policies:

Briefly comment on how they pose barriers:

3. Does the country have a policy, law or regulation to reduce violence against women, including for example,

victims of sexual assault or women living with HIV?:

Yes

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

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

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

5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, key populations and/or other vulnerable sub-populations?:

IF YES, briefly describe this mechanism:

Mécanisme national pour ces droits

□6. Does the country have a policy or strategy of free services for the following?

e. Deed the country have a pency of changy of most confidence for the following.				
Provided free-of-charge to all people in the country	Provided free-of-charge to some people in the country	Provided, but only at a cost		
Yes	-	-		
Yes	-	-		
Yes	-	-		

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

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

Yes

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

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

IF YES, Briefly describe the content of this policy/strategy and the populations included:

PS, HSH, UDI, ROUTIERS

-8.1

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

Yes

IF YES, briefly explain the different types of approaches to ensure equal access for different populations: IEC, EP, services de PEC, pôle de médiation sociale...

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

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

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

Yes

No

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

Yes

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

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

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

Yes

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

Yes

12. Are the following legal support services available in the country? a. Legal aid systems for HIV casework: b. Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV: No 13. Are there programmes in place to reduce HIV-related stigma and discrimination?: Yes IF YES, what types of programmes? Programmes for health care workers: Programmes for the media: Programmes in the work place: Other [write in]: 14. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2011?: Since 2009, what have been key achievements in this area: What challenges remain in this area: 15. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the effort to implement human rights related policies, laws and regulations in 2011?: Since 2009, what have been key achievements in this area: What challenges remain in this area: **B-IV. PREVENTION** 1. Has the country identified the specific needs for HIV prevention programmes?: IF YES, how were these specific needs determined?: -1.1 To what extent has HIV prevention been implemented? **Blood safety:** Strongly Agree **Condom promotion:** Strongly Agree Harm reduction for people who inject drugs: HIV prevention for out-of-school young people: Disagree HIV prevention in the workplace: Disagree HIV testing and counseling: Agree IEC on risk reduction: Agree IEC on stigma and discrimination reduction: Prevention of mother-to-child transmission of HIV: Disagree Prevention for people living with HIV:

Reproductive health services including sexually transmitted infections prevention and treatment:

Risk reduction for intimate partners of key populations:

Agree

'17'

Agree

Risk reduction for men who have sex with men:

Agree

Risk reduction for sex workers:

Agree

School-based HIV education for young people:

Aaree

Universal precautions in health care settings:

Disagree

Other [write in]:

-

2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV prevention programmes in 2011?:

8

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

-

B - V. TREATMENT, CARE AND SUPPORT

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

Yes

IF YES, Briefly identify the elements and what has been prioritized:

Briefly identify how HIV treatment, care and support services are being scaled-up?:

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

Antiretroviral therapy:

Agree

ART for TB patients:

Agree

Cotrimoxazole prophylaxis in people living with HIV:

Strongly Agree

Early infant diagnosis:

Agree

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

N/A

HIV testing and counselling for people with TB:

Agree

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

N/A

Nutritional care:

Disagree

Paediatric AIDS treatment:

Agree

Post-delivery ART provision to women:

Agree

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

Agree

Post-exposure prophylaxis for occupational exposures to HIV:

Agree

Psychosocial support for people living with HIV and their families:

Agree

Sexually transmitted infection management:

Agree

TB infection control in HIV treatment and care facilities:

Agree

TB preventive therapy for people living with HIV:

Agree

TB screening for people living with HIV:

Agree

Treatment of common HIV-related infections:

Agree

Other	[write	in]:
-------	--------	------

1.2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2011?:

Since 2009, what have been key achievements in this area:

Introduction des médicaments ARV de deuxième et troisième ligne Le seuil d'éligibilité au ARV est passé de CD4<200 à CD4<350 Introduction de la méthadone Mise en œuvre et élargissement du programme d'appui psychosocial Augmentation de la couverture des personnes ayant besoin d'ARV à 40% (CD4<350) Renforcement de la décentralisation de la prise en charge des PVVIH Informatisation de la gestion du dossier du PPVIH suivi par les centres de prise en charge What challenges remain in this area:

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

Yes

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

Yes

- 2.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children?:
- 2.3. IF YES, does the country have an estimate of orphans and vulnerable children being reached by existing interventions?:

Nο

- 2.4. IF YES, what percentage of orphans and vulnerable children is being reached? :
- 3. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2011?":

Since 2009, what have been key achievements in this area:

What challenges remain in this area:

Source URL: http://aidsreportingtool.unaids.org/123/morocco-report-ncpi