

Central African Republic (the) Report NCPI

NCPI Header

is indicator/topic relevant?: Yes

is data available?: Yes

Data measurement tool / source: NCPI

Other measurement tool / source: Examen des textes (Arrêtés et décrets)

From date: 03/01/2014

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Additional information related to entered data. e.g. reference to primary data source, methodological concerns::
RAS

Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source:: RAS

Data measurement tool / source: GARPR

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Describe the process used for NCPI data gathering and validation: La procédure suivie a été celle qui est décrite dans le guideline relatif au rapport GARPR de 2014. Le travail a consisté en une combinaison des activités de recherche documentaire, d'interviews des informateurs clés issus des structures Gouvernementales, de la Société civile et des organisations internationales impliquées dans la lutte contre la riposte nationale au VIH.

Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions: Le manque de moyen financier nous a amené à remplacer les grandes réunions de concertation par des contacts interpersonnels pour obtenir des clarifications sur les divergences.

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

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

Organization	Names/Positions	Respondents to Part A
Coordination Nationale du CNLS	Pr Nestor Mamadou NALI/ Coordonnateur National	
Coordination Nationale du CNLS	Mr MOKOSSO DAVY/ Conseiller en Suivi et Evaluation	
Coordination National du CNLS	Mme NGUELEBE Edwige/ Conseiller en Appui à la Société Civile	A4
Direction de Lutte contre le Sida et les IST/ Mini Santé	Dr DIEMER Saint Calvaire/ Directeur	

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

Organization	Names/Positions	Respondents to Part B
Réseau National des Organisations de Lutte contre le Sida	Mr NGUEREFARA Paul Bernard/ Coordonnateur	
Réseau National des Personnes Vivant avec le VIH (RECAPEV)	Mr GREMALE Gilbert	
Réseau Centrafricain sur l'Ethique le Droit et VIH (RECD)	Mr SAMBA Anicet/ Vice Président	

A.I Strategic plan

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

IF YES, what is the period covered: PSN 2012-2016

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.: La méthodologie utilisée pour l'élaboration du nouveau PSN a suivi trois phases: Analyse de la situation du VIH, Analyse de la réponse et Elaboration du PSN). La définition d'un Cadre des résultats a été une étape cruciale dans l'élaboration du nouveau PSN

IF YES, complete questions 1.1 through 1.10; IF NO, go to question 2.

1.1. Which government ministries or agencies have overall responsibility for the development and implementation of the national multi-sectoral strategy to respond to HIV?: La Primature par le biais de la Coordination du CNLS pour la coordination nationale du processus d'élaboration du PSN et de sa mise en œuvre. Les secteurs ciblés dans le PSN sont les suivants: i) Secteur de la santé à travers le Ministère de la Santé, ii) Secteur social représenté par le Ministère des Affaires Sociales, iii) Secteur de l'Education regroupe les Ministères de l'Education primaire et secondaire, de l'Enseignement Technique et de l'Enseignement supérieur et le Ministère de la Jeunesse, iv) Secteur de défense et sécurité pour l'ensemble des corps habillés à travers le CMLS, v) Coordination Tripartite Gouvernement-Patronat-Syndicat pour la lutte contre le Sida en milieu du travail dans le public et le privé à travers le Ministère de la Fonction Publique.

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

Education:

Included in Strategy: Yes

Earmarked Budget: No

Health:

Included in Strategy: Yes

Earmarked Budget: Yes

Labour:

Included in Strategy: Yes

Earmarked Budget: No

Military/Police:

Included in Strategy: Yes

Earmarked Budget: No

Social Welfare:

Included in Strategy: Yes

Earmarked Budget: No

Transportation:

Included in Strategy: No

Earmarked Budget: No

Women:

Included in Strategy: Yes

Earmarked Budget: No

Young People:

Included in Strategy: Yes

Earmarked Budget: No

Other: Milieu de travail (Coordination tripartite) qui englobe le syndicat, le Gouvernement et le secteur privé.

Included in Strategy: Yes

Earmarked Budget: No

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?: Une ligne budgétaire d'un montant de 2.000.000 est inscrite sur le budget de l'Etat pour tous les Ministère mais le décaissement de ces ressources est très difficile et cette situation s'est aggravée à cause de la crise que traverse le pays depuis plus d'un an. Des efforts de mobilisation des ressources sont faits pour financer la lutte mais dans un contexte d'intervention sur les urgences humanitaires.

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

KEY POPULATIONS AND OTHER VULNERABLE POPULATIONS:

Discordant couples: No

Elderly persons: No

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations: Yes

SETTINGS:

Prisons: No

Schools: No

Workplace: No

CROSS-CUTTING ISSUES:

Addressing stigma and discrimination: Yes

Gender empowerment and/or gender equality: No

HIV and poverty: No

Human rights protection: No

Involvement of people living with HIV: Yes

IF NO, explain how key populations were identified?: Les populations clés sont identifiées à l'issue de l'analyse de la situation. La crise que le pays connaît actuellement a permis aux partenaires d'appuyer le Gouvernement dans le ciblage des Personnes déplacées Internes, les personnes victimes de viol et les PVVIH et surtout celles qui sont considérées comme perdues de vue.

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

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: Yes

People with disabilities: No

People who inject drugs: No

Prison inmates: Yes

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific key populations/vulnerable subpopulations [write in]: Personnes victimes de violence basée sur le Genre, Les Personnes Déplacées Internes

: Yes

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

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

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 implementation?: No

e) A monitoring and evaluation framework?: Yes

1.8. 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.: Implication des responsables des réseaux dans tout le processus d'élaboration du CSN (RONALSI, RECAPEV, Réseau des Jeunes, Réseau des femmes, Réseau des Filles libres)

IF NO or MODERATE INVOLVEMENT, briefly explain why this was the case.: NA

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

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

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

2.1. Has the country integrated HIV in the following specific development plans?

SPECIFIC DEVELOPMENT PLANS:

Common Country Assessment/UN Development Assistance Framework: Yes

National Development Plan: N/A

Poverty Reduction Strategy: Yes

National Social Protection Strategic Plan: No

Sector-wide approach: Yes

Other [write in]: Plan National de Développement Sanitaire (PNDS)

: Yes

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

HIV-RELATED AREA INCLUDED IN PLAN(S):

Elimination of punitive laws: No

HIV impact alleviation (including palliative care for adults and children): 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

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

Women's economic empowerment (e.g. access to credit, access to land, training): No

Other [write in]: Promotion de l'utilisation des préservatifs

: Yes

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

3.1. IF YES, on a scale of 0 to 5 (where 0 is "Low" and 5 is "High"), to what extent has the evaluation informed resource allocation decisions?: 1

4. Does the country have 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 and children: A vérifier avec l'équipe de GAVI

5. Are health facilities providing HIV services integrated with other health services?

a) HIV Counselling & Testing with Sexual & Reproductive Health: Many

b) HIV Counselling & Testing and Tuberculosis: Many

c) **HIV Counselling & Testing and general outpatient care:** None

d) **HIV Counselling & Testing and chronic Non-Communicable Diseases:** Few

e) **ART and Tuberculosis:** Many

f) **ART and general outpatient care:** Many

g) **ART and chronic Non-Communicable Diseases:** Few

h) **PMTCT with Antenatal Care/Maternal & Child Health:** Many

i) **Other comments on HIV integration:** : Le disfonctionnement de beaucoup de structures sanitaires à cause de la crise politico militaire a eu des répercussions négatives dans le maintien et ou le renforcement de l'intégration des services de lutte contre le VIH

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 your country's HIV programmes in 2013?: 2

Since 2011, what have been key achievements in this area: Des efforts considérables ont été déployés pour la mise à la disposition du Gouvernement d'un nouveau cadre Stratégique multisectoriel axé sur les résultats. malheureusement, la crise jamais connue en RCA a ralenti cet élan.

What challenges remain in this area: L'insécurité, le manque de ressources pour la poursuite du processus de planification stratégique (élaboration des plans sectoriels), les difficultés pour le Gouvernement de mobiliser des ressources nationales, la destruction de certaines Formations sanitaires, le nombre importants de PVVIH sous ARV perdus de vue.

A.II Political support and leadership

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

A. Government ministers: Yes

B. Other high officials at sub-national level: Yes

1.1. In the last 12 months, have the head of government or other high officials taken action that demonstrated leadership in the response to HIV?: Yes

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership: La cérémonie de lancement des activités de la Journée Mondiale 2013 a été présidée par le Premier Ministre Chef du Gouvernement. Le Gouvernement a participé financièrement à l'organisation des différentes activités réalisées avec l'appui des Organisations de la Société civile et de certaines organisation du Système des Nations Unies

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

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

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

Have terms of reference?: No

Have active government leadership and participation?: Yes

Have an official chair person?: Yes

IF YES, what is his/her name and position title?: Président de la République Chef de l'Etat, Président du Comité National de Lutte contre le Sida

Have a defined membership?: Yes

IF YES, how many members?: 41 membres + un Représentant de chaque Ministère + un représentant de chaque organisation de la Coopération Bilatérale + un représentant de chaque Confession religieuse

Include civil society representatives?: Yes

IF YES, how many?: 25 membres

Include people living with HIV?: Yes

IF YES, how many?: 03 (2 représentants du RECAPEV et une Représentante du Congrès National des Jeunes femmes vivant avec le VIH(CNJFVH))

Include the private sector?: Yes

Strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?: No

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

IF YES, briefly describe the main achievements:: L'Assemblée Générale du CNLS. Cette instance joue un rôle important dans la validation des Cadres stratégiques Nationaux de lutte contre le Sida; le dernier CSN a été validé par cette instance.

What challenges remain in this area:: L'irrégularité des réunions, l'absence des réunion du Bureau de cette instance nationale

4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?: 25

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

Capacity-building: Yes

Coordination with other implementing partners: Yes

Information on priority needs: Yes

Procurement and distribution of medications or other supplies: Yes

Technical guidance: Yes

Other [write in]: Implication dans toutes les activités de prise en charge communautaire des PVVIH

: Yes

6. Has the country reviewed national policies and laws to determine which, if any, are inconsistent with the National HIV Control policies?: No

6.1. IF YES, were policies and laws amended to be consistent with the National HIV Control policies?: No

IF YES, name and describe how the policies / laws were amended:

Name and describe any inconsistencies that remain between any policies/laws and the National AIDS Control policies:: Les nouvelles directives de l'OMS 2013 ne sont pas encore officiellement adoptées. la révision de la loi fixant les droits et obligations des PPVVIH programmée n'a toujours pas été réalisée

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 2013?: 3

Since 2011, what have been key achievements in this area:: Augmentation de la contribution du Gouvernement au financement de la lutte jusqu'en décembre 2012, ii) Financement des activités de la JMS 2013, Présidence par le Premier Ministre Chef du Gouvernement au lancement de la JMS 2012, Poursuite de l'appui au fonctionnement de la Coordination Nationale du CNLS.

What challenges remain in this area:: Les priorités du Gouvernement sont plus d'ordre sécuritaire si bien que la lutte contre le Sida est reléguée à un niveau moins prioritaire

A.III Human rights

1.1. Does the country have non-discrimination laws or regulations which specify protections for specific key populations and other vulnerable groups? Select yes if the policy specifies any of the following key populations and vulnerable groups:

People living with HIV: Yes

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations [write in]: RAS

: No

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:

No

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 vulnerable groups?: No

IF YES, for which key populations and vulnerable groups?:

People living with HIV: No

Elderly persons: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]: Populations Déplacées internes, Victime de violence basée sur le genre

: No

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

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

IF YES, what key messages are explicitly promoted?:

Delay sexual debut: Yes

Engage in safe(r) sex: Yes

Fight against violence against women: Yes

Greater acceptance and involvement of people living with HIV: Yes

Greater involvement of men in reproductive health programmes: Yes

Know your HIV status: Yes

Males to get circumcised under medical supervision: No

Prevent mother-to-child transmission of HIV: Yes

Promote greater equality between men and women: Yes

Reduce the number of sexual partners: Yes

Use clean needles and syringes: Yes

Use condoms consistently: Yes

Other [write in]: Abstinence sexuelle

: Yes

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

Primary schools?: Yes

Secondary schools?: Yes

Teacher training?: Yes

2.2. Does the strategy include

a) age-appropriate sexual and reproductive health elements?: Yes

b) 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:: Mobilisation des filles libres, l'implication des groupes communautaires dans le suivi des PVVIH(Groupes de parole), Mobilisation par les pairs parmi les HSH

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

People who inject drugs:

Men who have sex with men: Condom promotion,HIV testing and counseling,Reproductive health, including sexually transmitted infections prevention and treatment,Stigma and discrimination reduction,Targeted information on risk reduction and HIV education

Sex workers: Condom promotion,HIV testing and counseling,Reproductive health, including sexually transmitted infections prevention and treatment,Stigma and discrimination reduction,Targeted information on risk reduction and HIV education,Vulnerability reduction (e.g. income generation)

Customers of sex workers: Condom promotion,HIV testing and counseling,Reproductive health, including sexually transmitted infections prevention and treatment,Targeted information on risk reduction and HIV education

Prison inmates: HIV testing and counseling,Reproductive health, including sexually transmitted infections prevention and treatment,Targeted information on risk reduction and HIV education

Other populations [write in]: Hommes et femmes en tenue

: Condom promotion,HIV testing and counseling,Reproductive health, including sexually transmitted infections prevention and treatment,Targeted information on risk reduction and HIV education

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 2013?: 4

Since 2011, what have been key achievements in this area: Implication de la Première Dame dans les activités de plaidoyer pour la promotion de la lutte en faveur des filles et femmes et la promotion du préservatifs féminins

What challenges remain in this area: Ralentissement des activités de prévention à cause des troubles socio-politico-militaires

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

IF YES, how were these specific needs determined?: Ces besoins sont liés à la vulnérabilité des populations ciblées

IF YES, what are these specific needs? : Conseil dépistage en faveur des populations clés tel que les PS, le HSH, les prisonniers, les femmes et les hommes en tenue,

4.1. To what extent has HIV prevention been implemented?

The majority of people in need have access to...:

Blood safety: Disagree

Condom promotion: Disagree

Economic support e.g. cash transfers: Strongly disagree

Harm reduction for people who inject drugs: N/A

HIV prevention for out-of-school young people: Agree

HIV prevention in the workplace: Agree

HIV testing and counseling: Agree

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: Agree

Reproductive health services including sexually transmitted infections prevention and treatment: Agree

Risk reduction for intimate partners of key populations: Disagree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Agree

Reduction of gender based violence: Agree

School-based HIV education for young people: Agree

Treatment as prevention: Disagree

Universal precautions in health care settings: Disagree

Other [write in]: Personnes déplacées internes

: Disagree

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 2013?: 2

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:: Conseil dépistage, Soins ARV pour les patients éligibles, Prophylaxie des Infections opportunistes, Suivi biologique des PVVIH (Bilan pré thérapeutique, bilan de suivi des patients sous ARV, Accompagnement communautaire, appui nutritionnel)

Briefly identify how HIV treatment, care and support services are being scaled-up?: Décentralisation, délégation des tâches et implication des organisations de la société civile y compris celles des personnes vivant avec le VIH

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

The majority of people in need have access to...:

Antiretroviral therapy: Agree

ART for TB patients: Disagree

Cotrimoxazole prophylaxis in people living with HIV: Agree

Early infant diagnosis: Agree

Economic support: Strongly disagree

Family based care and support: Agree

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

HIV testing and counselling for people with TB: Agree

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

Nutritional care: Agree

Paediatric AIDS treatment: Agree

Palliative care for children and adults Palliative care for children and adults: Disagree

Post-delivery ART provision to women: Agree

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

Post-exposure prophylaxis for occupational exposures to HIV: Disagree

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: Disagree

TB preventive therapy for people living with HIV: N/A

TB screening for people living with HIV: Disagree

Treatment of common HIV-related infections: Agree

Other [write in]: Suivi biologique en province

: Disagree

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

Please clarify which social and economic support is provided: Appui aux PVVIH et aux organisations des PVVIH à travers les AGR

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?: No

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 2013?: 5

Since 2011, what have been key achievements in this area?: Gratuité du suivi biologique et des soins ARV, Achat des ARV par le Gouvernement, Ferme volonté de décentralisation de la Prise en charge

What challenges remain in this area?: Faible décentralisation de la prise en charge pédiatrique, absence de la décentralisation du suivi biologique, non adoption des nouvelles directives 2013 de l'OMS

6. Does the country have a policy or strategy to address the needs of orphans and other vulnerable children?: No

6.1. IF YES, is there an operational definition for orphans and vulnerable children in the country?: No

6.2. IF YES, does the country have a national action plan specifically for orphans and 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 2013?: 2

Since 2011, what have been key achievements in this area?: Aucune

What challenges remain in this area?: Faible leadership dans ce domaine

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:: faiblesse de l'unité de S&E de l'instance nationale de coordination (Ressources humaines, matérielles et financières)

1.1. IF YES, years covered: Plan élaboré pour accompagner le CSN en cours (2012-2016)

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:: Le cadre du suivi du Plan est peu fonctionnel (Groupe d'appui technique S&E=Taskforce nationale)

2. Does the national Monitoring and Evaluation plan include?

A data collection strategy: Yes

IF YES, does it address::

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:: Faiblesse en ressources humaines et matérielles, non fonctionnalité du cadre de concertation qui devrait appuyer l'unité, Aucune activité de mobilisation des ressources n'a été développée autour du pan

4.1. Where is the national M&E Unit based?

In the Ministry of Health?: No

In the National HIV Commission (or equivalent)?: Yes

Elsewhere?: No

If elsewhere, please specify:

4.2. How many and what type of professional staff are working in the national M&E Unit?

POSITION [write in position titles]	Fulltime or Part-time?	Since when?
Un Conseiller en Suivi & Evaluation/ démographe statisticien	Temps plein	janvier 2011
Un assistant au conseiller en S&E/ démographe	Temps plein	janvier 2009

POSITION [write in position titles]	Fulltime or Part-time?	Since when?
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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?: No

Briefly describe the data-sharing mechanisms::

What are the major challenges in this area?: Faible appui des institutions nationales et internationales à cette unité, non respect du principe de three ones, faible leadership de l'unité

5. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?: No

6. Is there a central national database with HIV- related data?: No

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

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?:

IF YES, but only some of the above, which aspects does it include?:

6.2. Is there a functional Health Information System?

At national level: Yes

At subnational level: No

IF YES, at what level(s)?:

7.1. 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

7.2. Is HIV programme coverage being monitored?: Yes

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

(b) IF YES, is coverage monitored by population groups?: No

IF YES, for which population groups?:

Briefly explain how this information is used::

(c) Is coverage monitored by geographical area?: Yes

IF YES, at which geographical levels (provincial, district, other)?: Sites de prise en charge, Préfectures, régions sanitaires

Briefly explain how this information is used:: Centralisation des données au niveau du Ministère de la santé et au niveau de l'instance nationale de coordination. Utilisation de ces données pour mieux assurer le ravitaillement des sites et organiser la gestion des achats et stocks. utilisation des données pour le plaidoyer et informer les partenaires et le Gouvernement

8. Does the country publish an M&E report on HIV, including HIV surveillance data at least once a year?: No

9. How are M&E data used?

For programme improvement?: Yes

In developing / revising the national HIV response?: Yes

For resource allocation?: Yes

Other [write in]:

: No

Briefly provide specific examples of how M&E data are used, and the main challenges, if any: Le cadre de performance du CSN et des plan opérationnels sont conçus à l'aide des données de S&E, les propositions soumises au Fonds Mondial prennent en compte ces données, Le plaidoyer pour la mobilisation des ressources additionnelles aux ressources déjà mobilisées sont réaliser à l'aide de ces données

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

At national level?: Yes

IF YES, what was the number trained: 1 personne à dakar et 43 (Mbaïki et Sibut)

At subnational level?: Yes

IF YES, what was the number trained: Vérifier auprès de BATE et du dr KOMAYAN

At service delivery level including civil society?: No

IF YES, how many?:

10.1. Were other M&E capacity-building activities conducted other than training?: No

IF YES, describe what types of activities:

11. 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 2013?: 2

Since 2011, what have been key achievements in this area: Formation des responsables des sites de PEC à l'aide des nouveaux outils de suivi des patients, collecte et diffusion des données

What challenges remain in this area: Faible capacité de l'unité de S&E de l'instance nationale de coordination, la non fonctionnalité des unités de S&E des Préfectures et des secteurs

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?: 3

Comments and examples: Implication de certains responsables des OSC dans le plaidoyer et dans la formulation des projets et programmes (Réseau des ONG et Réseau des PVVIH), Comité militaire de Lutte contre le Sida (CMLS)

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: les responsables de toutes les OSC membres du CNLS ont été mis à contribution dans la formulation et la validation du CSN en cours

3. To what extent (on a scale of 0 to 5 where 0 is "Low" and 5 is "High") are the services provided by civil society in areas of HIV prevention, treatment, care and support included in:

a. The national HIV strategy?: 4

b. The national HIV budget?: 4

c. The national HIV reports?: 3

Comments and examples: La plupart des activités de mobilisation communautaire, de suivi à domicile des PVVIH dans le cadre du continuum de soins, de prévention du VIH à travers la sensibilisation, la distribution des préservatifs sont assurées par les OSC

4. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is civil society included in the monitoring and evaluation (M&E) of the HIV response?

a. Developing the national M&E plan?: 2

b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?: 1

c. Participate in using data for decision-making?: 4

Comments and examples: Un représentant du réseau des PVVIH prend part aux réunions de la taskforce S&E, Les associations de PVVIH appuyant les sites des PVVIH jouent des rôles non négligeables dans le suivi de la gestion des stock d'ARV et le suivi des commandes

5. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is civil society representation in HIV efforts inclusive of diverse organizations (e.g. organisations and networks of people living with HIV, of sex workers, community based organisations , and faith-based organizations)?: 4

Comments and examples: Le Réseau des filles libres (RENAFIL) est impliqué dans la mobilisation de leurs paires pour les activités de prévention des IST VIH. La Jeunesse des Eglises pour la sensibilisation dans les églises

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?: 2

b. Adequate technical support to implement its HIV activities?: 2

Comments and examples: Aucune table ronde de mobilisation des ressources n'a été organisée autour du CSN 2012-2016. toutefois, des partenaires Techniques et financiers financent directement certaines activités des OSC; ces types de financement directs échappent au suivi de l'instance nationale de coordination

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

Prevention for key-populations:

People living with HIV: 25-50%

Men who have sex with men: <25%

People who inject drugs:

Sex workers: 25-50%

Transgender people:

Palliative care : 25-50%

Testing and Counselling: 51-75%

Know your Rights/ Legal services: <25%

Reduction of Stigma and Discrimination: 51-75%

Clinical services (ART/OI): 25-50%

Home-based care: 25-50%

Programmes for OVC: <25%

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 2013?: 6

Since 2011, what have been key achievements in this area:: Promotion de la lutte contre la stigmatisation et la discrimination par le Réseau National des ONG avec l'appui d'Africaso, implication du réseau national des PVVIH et du Congrès national des jeunes femmes VIH+

What challenges remain in this area:: Faible leadership du cadre de concertation des OSC, faiblesse dans la décentralisation des activités de ces OSC.

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:: Implication des réseaux (ONG, Jeunes, PVVIH) dans le processus d'élaboration du CSN 2012-2016. Les HSH et les filles libres bénéficient du soutien du Gouvernement et de ses partenaires. Les hommes et femmes en tenue à travers le CMLS sont impliqués dans le processus d'élaboration des stratégies de lutte contre le Sida

B.III Human rights

1.1. Does the country have non-discrimination laws or regulations which specify protections for specific key populations and other vulnerable subpopulations? Circle yes if the policy specifies any of the following key populations:

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: Yes

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations [write in]:

: No

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:
No

IF 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::

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?: No

2.1. IF YES, for which sub-populations?

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

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: No

People who inject drugs: No

Prison inmates: No

Sex workers: No

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]:

: No

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.: Lois n°06 032 relative à la protection de a femme contre les violences

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: Loi fixant les droits et obligations des PVVIH, Code la famille, Lois n°06 032 relative à la protection de a femme contre les violences, Une version révisée de cette loi attend son adoption par l'Assemblée Nationale. Cette version se veut impersonnelle, intègre et/ou explicite les aspects suivants: l'éducation et l'information en matière de VIH/SIDA dans les communautés(écoles, lieux de travail, prisons etc...) les pratiques sécurisées de don du sang et des organes et leurs procédures, la pratique de la médecine traditionnelle, les conditions du test de dépistage et du counselling, la responsabilité des centres de dépistage et le test de dépistage anonyme ,Le rôle des services de santé et d'assistance, les questions relatives à la confidentialité et à l'annonce des résultats, certains actes discriminatoires dans la fonction publique et dans les mandats électifs.

5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, key populations and other vulnerable populations?: No

IF YES, briefly describe this mechanism:

6. Does the country have a policy or strategy of free services for the following? Indicate if these services are provided free-of-charge to all people, to some people or not at all (circle "yes" or "no" as applicable).

Antiretroviral treatment:

Provided free-of-charge to all people in the country: Yes

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: No

HIV prevention services:

Provided free-of-charge to all people in the country: No

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: Yes

HIV-related care and support interventions:

Provided free-of-charge to all people in the country: No

Provided free-of-charge to some people in the country: No

Provided, but only at a cost: Yes

If applicable, which populations have been identified as priority, and for which services?: PVVIH (Accès aux ARV et médicaments pour la prophylaxie des infections opportunistes), Tuberculeux (Accès aux antituberculeux et ARV), Femmes enceintes (Accès au dépistage et aux ARV)

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?: No

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?: Yes

IF YES, Briefly describe the content of this policy/strategy and the populations included:: Arrêté portant sur la gratuité des ARV (PVVIH, femmes enceintes)

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?: No

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

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

IF YES, briefly describe the content of the policy or law:: La loi fixant les droits et obligations des PVVIH interdit en ses articles 19, 20, 21 et 22. L'article stipule que hormis les cas prévus par la loi, la séropositivité ne constitue pas une cause d'inaptitude à la formation, à l'emploi ou à l'exercice de toutes activités.

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: No

b. Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts: No

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 enforcement⁴⁶ on HIV and human rights issues that may come up in the context of their work?: No

12. Are the following legal support services available in the country?

a. Legal aid systems for HIV casework: No

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: No

Programmes for the media: Yes

Programmes in the work place: Yes

Other [write in]: Vérifier au niveau du Ronalsi et du RECD

: No

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 2013?: 4

Since 2011, what have been key achievements in this area:: Début de réflexion pour la révision de la loi fixant les droits et obligations des PVVIH, Appui d'Africaso au RONALSI pour la promotion des programmes de lutte contre la discrimination et la stigmatisation. Une version révisée de cette loi attend son adoption par l'Assemblée Nationale. Cette version se veut impersonnelle, intègre et/ou explicite les aspects suivants: l'éducation et l'information en matière de VIH/SIDA dans les communautés(écoles, lieux de travail, prisons etc...) les pratiques sécurisées de don du sang et des organes et leurs procédures, la pratique de la médecine traditionnelle, les conditions du test de dépistage et du counselling, la responsabilité des centres de dépistage et le test de dépistage anonyme ,Le rôle des services de santé et d'assistance, les questions relatives à la confidentialité et à l'annonce des résultats, certains actes discriminatoires dans la fonction publique et dans les mandats électifs.

What challenges remain in this area:: Faible appui des partenaires

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 2013?: 4

Since 2011, what have been key achievements in this area:: Début de réflexion pour la révision de la loi fixant les droits et obligations des PVVIH, Appui d'Africaso au RONALSI pour la promotion des programmes de lutte contre la discrimination et la stigmatisation, crise militaro-politique entrainant l'inaccessibilité à certaines zones du pays

What challenges remain in this area:: Faible appui des partenaires; Problème de leadership national pour adresser cette question

B.IV Prevention

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

IF YES, how were these specific needs determined?: Détermination durant le processus d'élaboration du Cadre Stratégique National (Analyse de la situation)

IF YES, what are these specific needs? : Nécessité de disposer d'une stratégie nationale de communication, Insertion de l'enseignement du Sida dans les établissements scolaires, promotion des programmes de prévention dans le milieu de travail, élaboration et mise en œuvre d'une politique de promotion de l'usage des préservatifs, offre des services de conseil, dépistage dans les structures d'encadrement des jeunes, de paquets minimum d'intervention en faveur des HSH et des TS ainsi que d'autres populations vulnérables (Camionneur, populations en milieu carcéral, hommes et femmes en tenue etc....)

1.1 To what extent has HIV prevention been implemented?

The majority of people in need have access to...:

Blood safety: Disagree

Condom promotion: Disagree

Harm reduction for people who inject drugs: N/A

HIV prevention for out-of-school young people: Agree

HIV prevention in the workplace: Agree

HIV testing and counseling: Agree

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: Agree

Reproductive health services including sexually transmitted infections prevention and treatment: Disagree

Risk reduction for intimate partners of key populations: Disagree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Agree

School-based HIV education for young people: Agree

Universal precautions in health care settings: Agree

Other [write in]: Populations Déplacées Internes (PDI)

: Agree

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 2013?: 3

Since 2011, what have been key achievements in this area: Promotion de comportement à moindre risque dans les sites déplacés internes et auprès des Hommes et femmes en tenue et auprès des jeunes

What challenges remain in this area: Accès quasi impossible en province à cause de l'insécurité qui a gagné les 3/4 des villes du pays

B.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:: i) Accès des populations au dépistage, aux soins ARV ou non et au suivi biologique, ii) accès aux préservatifs et aux médicaments pour la prise en charge des Infections opportunistes, iii) Accompagnement des PVVIH à domicile, Assistance alimentaire aux PVVIH et aux OEV

Briefly identify how HIV treatment, care and support services are being scaled-up?: Promotion du dépistage et mobilisation des OSC

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

The majority of people in need have access to...:

Antiretroviral therapy: Disagree

ART for TB patients: Strongly disagree

Cotrimoxazole prophylaxis in people living with HIV: Strongly disagree

Early infant diagnosis: Disagree

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

HIV testing and counselling for people with TB: Agree

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

Nutritional care: Agree

Paediatric AIDS treatment: Disagree

Post-delivery ART provision to women: Disagree

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

Post-exposure prophylaxis for occupational exposures to HIV: Disagree

Psychosocial support for people living with HIV and their families: Disagree

Sexually transmitted infection management: Agree

TB infection control in HIV treatment and care facilities: Agree

TB preventive therapy for people living with HIV: N/A

TB screening for people living with HIV: Disagree

Treatment of common HIV-related infections: Disagree

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 2013?: 4

Since 2011, what have been key achievements in this area: Poursuite des activités de soins et soutien malgré l'insécurité qui a touché tout le pays, efforts déployés par les OSC pour la recherche des perdus de vue dans les sites des PDI

What challenges remain in this area: Inaccessibilité à certains sites de Prise en charge, Manque de ressources humaines et financière pour le passage à l'échelle, faible implication des OSC dans les activités de soins et soutien aux PVVIH

2. Does the country have a policy or strategy to address the 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?: No

3. 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 2013?: 5

Since 2011, what have been key achievements in this area: Des efforts importants sont déployés pour permettre aux patients sous ARV d'éviter des ruptures, l'implication des OSC dans la recherche des perdus de vue dans les sites des déplacés internes, insuffisance des ressources financières

What challenges remain in this area: L'insécurité dans le pays rend difficile le travail communautaire