Guinea Report NCPI

**NCPI Header**

- **is indicator/topic relevant?**: Yes
- **is data available?**: Yes
- **Data measurement tool / source**: NCPI
- **Other measurement tool / source**: 
- **From date**: 01/01/2013
- **To date**: 12/31/2013
- **Data related to this topic which does not fit into the indicator cells. Please specify methodology and reference to primary data source**: 
  - **Data measurement tool / source**: GARPR

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**Describe the process used for NCPI data gathering and validation**: - Identification des personnes à interroger au niveau de la société civile et des programmes nationaux - Formation des enquêteurs sur l'utilisation de l'outil de collecte des données - Collecte des données et analyse - Validation des données en présence des différents acteurs et partenaires - Saisie des données et remplissage de l'outil en ligne de l'ONUSIDA

**Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions**: - Organisation d'une réunion de validation avec l'ensemble des acteurs impliqués dans l'étude avant le remplissage en ligne.

**Highlight concerns, if any, related to the final NCPI data submitted (such as data quality, potential misinterpretation of questions and the like)**: Toutes ces préoccupations ont été atténuées grâce à la formation des enquêteurs, le suivi de la collecte et la validation nationale des données en présence des différents acteurs concernés.

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

<table>
<thead>
<tr>
<th>Organization</th>
<th>Names/Positions</th>
<th>Respondents to Part A</th>
</tr>
</thead>
<tbody>
<tr>
<td>CNLS</td>
<td>Institution Gouvernementale</td>
<td>A1,A2,A3,A4,A5,A6</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Organization</th>
<th>Names/Positions</th>
<th>Respondents to Part B</th>
</tr>
</thead>
<tbody>
<tr>
<td>CNLS</td>
<td>Institution Gouvernementale</td>
<td>B1,B2,B3,B4,B5</td>
</tr>
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**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: 2013 - 2017

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.: Les nouveautés dans la nouvelle stratégie nationale sont: - la prise en charge des populations clés (Hommes ayant des rapports sexuels avec les hommes, les utilisateurs de drogues injectables et les professionnelles du sexe); -la stratégie de prévention combinée chez les populations clés, - l'intégration de la politique d'élimination de la transmission Mère-Enfant du VIH à travers l'extension de la couverture en sites PTME et la mise en œuvre de l'option B+ (toute femme enceinte séropositive doit être mise sous ARV et cela pour toute sa vie); - la planification axée sur les résultats (GAR) qui prend en compte les cadres d'investissement de l'ONUSIDA, de l'OMS et du Fonds Mondial de lutte le Sida, la Tuberculose et le Paludisme, -les nouvelles directives de l'OMS-2013, traitement 2015,

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?: Secretariat Executif du Comité National de Lutte contre le Sida.

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: Yes

Health:

Included in Strategy: Yes

Earmarked Budget: Yes

Labour:

Included in Strategy: No

Earmarked Budget: No

Military/Police:

Included in Strategy: Yes

Earmarked Budget: Yes

Social Welfare:

Included in Strategy: Yes

Earmarked Budget: Yes

Transportation:
Included in Strategy: Yes

Earmarked Budget: Yes

Women:

Included in Strategy: Yes

Earmarked Budget: Yes

Young People:

Included in Strategy: Yes

Earmarked Budget: Yes

Other: Peche; Agriculture; Tourisme; Economie-Finance

Included in Strategy: Yes

Earmarked Budget: Yes

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?:

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: Yes

Elderly persons: No

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: Yes

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes
Other specific vulnerable subpopulations: Yes

SETTINGS:

Prisons: Yes
Schools: Yes
Workplace: Yes

CROSS-CUTTING ISSUES:

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 identified:

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: Yes
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]: Pecheurs; Routiers; Miniers
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?: Yes

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.: Le plan stratégique dispose d'un objectif spécifique relatif à l’implication active de la société civile. Les organisations de la société civile impliquées dans la lutte contre le VIH/SIDA sont répertoriées au niveau du CNLS. Pour faciliter leur gestion, des réseaux de coordination ont été mis en place, qui bénéficient de l'appui de l'Etat et de ses partenaires.

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

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: Tous les partenaires ont participé à la revue du cadre stratégique 2008-2012 et à l’élaboration et la validation de celui de 2013-2017.

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: Yes

Poverty Reduction Strategy: Yes

National Social Protection Strategic Plan: Yes

Sector-wide approach: Yes

Other [write in]:
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: Yes
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: Yes
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): Yes
Other [write in]:

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?: 4

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: Le renforcement du système de santé fait partie intégrante du Cadre Stratégique national 2013-2017. Ainsi, la logistique des médicaments, la formation des ressources humaines et le renforcement des capacités des structures sanitaires sont régulièrement financées par l'Etat et les partenaires en vue de répondre à la demande.

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: Few

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

e) ART and Tuberculosis: Many

f) ART and general outpatient care: Few

g) ART and chronic Non-Communicable Diseases: Few
h) PMTCT with Antenatal Care/Maternal & Child Health: Many


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? 9


What challenges remain in this area:: -Mobilisation des ressources financieres pour la validation et la diffusion des certaines etudes realisees (Enquete sur l'estimation de la taille des PS et des HSH au niveau de la ville de Conakry; Enquete sur l'estimation de la taille des PS et des HSH a l'interieur du Pays).

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: - Creation et alimentation d'une ligne budgetaire dans le Budget National de Developpement (BND) pour l'achat des medicaments destines a la prise en charge du VIH/SIDA depuis 2012; - Creation et alimentation d'une ligne budgetaire pour le fonctionnement du Comite National de lutter contre le sida (CNLS) - Soutien a la mise en place de quatre Coordinations Regionales du Secretariat Executif du CNLS, toutes operationnelles en 2013

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?: Yes

Have active government leadership and participation?: Yes

Have an official chair person?: Yes

IF YES, what is his/her name and position title?: Premier Ministre du Gouvernement: Mr Mohamed Said FOFANA

Have a defined membership?: Yes

IF YES, how many members?: 58
Include civil society representatives?: Yes

IF YES, how many?: 8

Include people living with HIV?: Yes

IF YES, how many?: 2

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 coordination between government, civil society organizations, and the private sector for implementing HIV strategies/programmes?: Yes

IF YES, briefly describe the main achievements: Le CNLS joue le rôle d'interface entre le gouvernement, les organisations de la société civile, et le secteur privé pour mettre en place les stratégies/programmes liés au VIH dans le Pays. Toutes les interventions sont guidées par le Cadre Stratégique National 2013-2017. Pour faciliter la collaboration entre les différents partenaires, un cadre de concertation appelé Forum National des Partenaire a été mis en place en Septembre 2012. Il se réunit une fois par an et dispose d'un bureau exécutif.

What challenges remain in this area: - La coordination effective des activités mises en œuvre à l'échelle nationale entre les différents programmes (par exemple VIH et TB) - Mobilisation des ressources financières pour la mise à l'échelle des interventions

4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?: 0

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]: Financement des Plans d'Action Operationnels (PAO)

: No

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

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

IF YES, name and describe how the policies / laws were amended: Amendement et publication en 2012 de l'ordonnance 056 relative à la prévention, aux soins, soutien et protection des personnes infectées et affectées par le VIH.
Name and describe any inconsistencies that remain between any policies/laws and the National AIDS 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 2013?: 9


What challenges remain in this area?: - Mobilisation des ressources financieres suffisantes pour une mise à l'échelle des interventions

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: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: Yes

Prison inmates: Yes

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations [write in]: Routiers, miniers, pêcheurs

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

IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws: I s'agit de l'ordonnance 056 relative à la prévention, aux soins, soutien et protection des personnes infectées et affectées par le VIH. cette ordonnance a été amendée et publiée en 2012.
Briefly explain what mechanisms are in place to ensure these laws are implemented:

- Large diffusion du contenu de la loi à travers les mass-medias
- Utilisation de la loi dans les modules d’enseignements sur le VIH/SIDA

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

Malgré les efforts fournis dans la vulgarisation de cette ordonnance, force est de noter que la stigmatisation et la discrimination envers les PVPIH reste encore une préoccupation en Guinée. L’enquête EDS-MICS 2012 révèle en effet que 94,6% (11182/11823) des femmes et hommes de 15-49 ans ayant entendu parler du sida, n’ont pas des attitudes de tolérance à l’égard des personnes vivant avec le VIH/sida.

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]:

: 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?:

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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: Yes
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]: No

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: Le Cadre Stratégique National 2013-2017 met un accent particulier sur les populations clés et vulnérables dans ses stratégies de prévention. Ces stratégies sont basées sur les campagnes cibles, les campagnes de mass-médias, les campagnes de mobilisation pour le dépistage volontaire et a l’initiative des prestataires, l’éducation par les pairs.

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

**People who inject drugs**: Condom promotion, HIV testing and counseling, Needle & syringe exchange, 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)

**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, Vulnerability reduction (e.g. income generation)

**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, Stigma and discrimination reduction, Targeted information on risk reduction and HIV education, Vulnerability reduction (e.g. income generation)

**Prison inmates**: 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)

**Other populations [write in]**: Pecheur, Routiers, Hommes en uniforme, Miniers

- 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)

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?: 9

Since 2011, what have been key achievements in this area:
- Distribution de préservatifs dans tout le pays
- Dépistage du VIH au niveau des structures de santé
- Campagnes de dépistage du VIH
- Traitement syndromique des IST
- Equipe mobile de prise en charge et de suivi des IST chez les populations clés (PS, HSH) à Conakry

What challenges remain in this area:
- L’approvisionnement régulier des populations cibles en préservatifs
- La persistance des fausses croyances sur le VIH
- La stigmatisation envers les personnes atteintes et affectées par le VIH
- La faible couverture des populations cibles

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

IF YES, how were these specific needs determined?: Sur la base des résultats des enquêtes nationales (par exemple l’ESD-MICS 2012, ESCOMB 2012, Estimation de la taille des populations clés).

IF YES, what are these specific needs?: Amélioration des connaissances sur le VIH/SIDA - Acces des populations clés aux services de prevention (preservatifs, communication pour le changement de comportement, depistage du VIH, traitement des IST, lubrifiants)

4.1. To what extent has HIV prevention been implemented?
The majority of people in need have access to:

**Blood safety**: Strongly agree

**Condom promotion**: Agree

**Economic support e.g. cash transfers**: 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**: Agree

**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**: 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 2013?: 6

**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: - Le dépistage du VIH - Le traitement IO, ARV y compris PTME - L’accompagnement psychosocial (appui aux familles, enfants orphelins, etc.)

Briefly identify how HIV treatment, care and support services are being scaled-up?: - Mise à l'échelle des services (dépistage, PTME, traitement IO, ARV).

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: Strongly agree

ART for TB patients: Agree

Cotrimoxazole prophylaxis in people living with HIV: Agree

Early infant diagnosis: Disagree

Economic support: Disagree

Family based care and support: Agree

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

HIV testing and counselling for people with TB: Strongly 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: Agree

Post-delivery ART provision to women: Strongly 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: Strongly 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: Agree

Treatment of common HIV-related infections: Agree
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: Le gouvernement subventionne l'achat des vivres (riz, huile, etc) destines aux PVVIH à travers le CNLS.

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?: Yes

IF YES, for which commodities?: ARV, Cotrimoxazole et autres medicaments contre les IO.

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?: 8

Since 2011, what have been key achievements in this area?: - Le gouvernement a honore ses engagements en augmentant significativement chaque annee a l’achat des ARV, des vivres et aussi au fonctionnement du Secretariat Executif du CNLS.

What challenges remain in this area?: - La couverture nationale du traitement ARV - Le niveau de financement du gouvernement - Le suivi des malades sous ARV

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

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

6.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children?: Yes

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?: 6

Since 2011, what have been key achievements in this area?: La prise en charge des orphelins et des autres enfants vulnérables est une partie intégrante des activités du CNLS (soutien nutritionnel, appui à la scolarisation).

What challenges remain in this area?: - L'identification et le suivi des orphelins et des autres enfants vulnérables - La disponibilite des vivres

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: -Insuffissance de ressources financières pour la mise en œuvre du plan d'action annuel Suivi-Evaluation -Insuffissance des ressources humaines qualifiées surtout au niveau périphérique -Faible alignment des partenaires au plan national de suivi-évaluation -Faible coordination du système national de suivi-évaluation -faible intégration des indicateurs traceur au niveau du système national d’information sanitaire et autres secteurs de développement
1.1. IF YES, years covered: 2013-2017

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: Intégration des indicateurs

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?: 2,5

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

Briefly describe any obstacles:

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?
### 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:**
- Rapportage des données par le niveau périphérique au niveau des directions préfectorales de santé,
- Compilation trimestrielle des données au niveau préfectoral,
- Validation des données compilées au niveau des directions régionales de la santé (semestrielle),
- Transmission des données au niveau central à la fin de chaque semestre. En cas de non complétude des données à la fin du semestre, une collecte données est souvent organisée.

**What are the major challenges in this area:**
- Faible complétude des données conformément au calendrier de rapportage indiqué dans le plan de Suivi-Evaluation

### 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:**
- CRIS

### 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

**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:** Yes

**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?** Yes

**IF YES, for which population groups?**
- Homme ayant les rapports sexuels avec les hommes
- Professionelles de sexe

**Briefly explain how this information is used:**
(c) Is coverage monitored by geographical area?: Yes

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

Briefly explain how this information is used::

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

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:: Les données des suivi-évaluation sont utilisées pour la prise de décision. cela se fait lors des réunions du groupe national de référence en Suivi-Evaluation de la maladie et lors des rencontres de la commission nationale Suivi-Evaluation VIH

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

At national level?: Yes

IF YES, what was the number trained?: 14

At subnational level?: No

IF YES, what was the number trained:

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?: Yes

IF YES, describe what types of activities: Réalisation de l'évaluation MESST

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?: 7

Since 2011, what have been key achievements in this area:: -Rédaction régulière des rapports de progrès -Réalisation certaines enquêtes de surveillance comportementales et biologiques auprès des population à haut risque -Réalisation des études d’estimation de la taille des hommes ayant les rapports sexuels avec les hommes -Réalisation des études d’estimation de la taille des professionnelles de sexe

What challenges remain in this area::

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?: 4

Comments and examples: La société civile est fortement impliquée dans la planification et la mise en œuvre des stratégies nationales dans le domaine de la prévention, la prise en charge et le soutien aux personnes infectées et infectées par le VIH/SIDA en Guinée. Elle intervient aussi dans le plaidoyer et la mobilisation sociale. Par exemple, des centres de dépistage, de prise en charge médicale et psychosociale ainsi que d'appui nutritionnel sont mis en place et gérés par des organisations de la société civile guinéenne.

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: C'est la société civile qui dirige le Comité de Coordination Multisectoriel de lutte contre le VIH/SIDA en Guinée. Cette instance est responsable de la rédaction de toutes les propositions de financement que le pays soumet aux institutions internationales, y compris le Fonds Mondial de lutte contre le VIH. Le Tuberculose et la Malaria. En outre des centres de dépistage, de prise en charge médicale et psychosociale ainsi que d'appui nutritionnel sont mis en place et gérés par des organisations de la société civile guinéenne.

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?: 4

Comments and examples: Toutes les organisations de la société civile guinéenne impliquées dans la lutte contre le VIH soumettent des rapports périodiques au Secretariat Exécutif de lutte contre le VIH/SIDA. Elles se retrouvent en outre dans des réseaux de lutte contre le VIH qui bénéficient de l'appui financier du Secretariat Exécutif.

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?: 4

b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?: 4

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

Comments and examples: La société civile est impliquée dans la collecte, l’analyse et l’interprétation des données conduisant à la rédaction du rapport annuel de suivi de la riposte contre le VIH/SIDA en Guinée.

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:

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?: 4
b. Adequate technical support to implement its HIV activities?: 4

Comments and examples: Le CNLS accorde un financement annuel aux organisations de la société civile à travers le financement de leurs plan d’actions annuels.

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: 51–75%

Men who have sex with men: 25-50%

People who inject drugs: <25%

Sex workers: 25-50%

Transgender people: <25%

Palliative care: <25%

Testing and Counselling: <25%

Know your Rights/ Legal services: <25%

Reduction of Stigma and Discrimination: <25%

Clinical services (ART/OI): <25%

Home-based care: <25%

Programmes for OVC: 25-50%

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?: 8

Since 2011, what have been key achievements in this area: - Le Comité de Coordination Multisectoriel (CCM) est dirigé par un membre de la société civile, en l’occurrence un religieux - Le Secrétariat Exécutif du CNLS comprend huit membres de la société civile, sur 58 et deux représentants des personnes vivant avec le VIH/SIDA

What challenges remain in this area: - Perrenisation du financement des organisations de la société civile.

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: Deux représentants des personnes vivant avec le VIH sont membres du Secrétariat Exécutif du CNLS guinéen. Ils participent pleinement à la conception et la mise en œuvre de politiques gouvernementales liées au VIH.
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: Yes
Migrants/mobile populations: Yes
Orphans and other vulnerable children: Yes
People with disabilities: Yes
People who inject drugs: Yes
Prison inmates: Yes
Sex workers: Yes
Transgender people: No
Women and girls: No
Young women/young men: No
Other specific vulnerable subpopulations [write in]: Routiers, miniers, pecheurs

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: I s'agit de l'ordonnance 056 relative à la prévention, aux soins, soutien et protection des personnes infectées et affectées par le VIH. Cette ordonnance a été amendée et publiée en 2012.

Briefly explain what mechanisms are in place to ensure that these laws are implemented: - Large diffusion du contenu de la loi à travers les mass-medias - Utilisation de la loi dans les modules d'enseignements sur le VIH/SIDA

Briefly comment on the degree to which they are currently implemented: Malgré les efforts fournis dans la vulgarisation de cette ordonnance, force est de noter que la stigmatisation et la discrimination envers les PVVIH reste encore une préoccupation en Guinée. L'enquête EDS-MICS 2012 révèle en effet que 94,6% (11182/11823) des femmes et hommes de 15-49 ans ayant entendu parler du sida, n'ont pas des attitudes de tolérance à l'égard des personnes vivant avec le VIH/sida.

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: I s'agit de l'ordonnance 056 relative à la prévention, aux soins, soutien et protection des personnes infectées et affectées par le VIH. Cette ordonnance a été amendée et publiée en 2012. Par ailleurs, le pays a approuvé et signé plusieurs conventions et traités en matière de protection des droits des femmes et des personnes vulnérables.

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: I s'agit de l'ordonnance 056 relative à la prévention, aux soins, soutien et protection des personnes infectées et affectées par le VIH. Cette ordonnance a été amendée et publiée en 2012.

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: Yes

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

Provided, but only at a cost: No

HIV-related care and support interventions:

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

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?: Yes

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: - Gratuite des soins de prevention et de prise en charg du VIH/SIDA dans tout le pays.

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: - Depistage et traitement gratuit pour la population generale - Depistage et traitement gratuit chez la femme enceinte

9. Does the country have a policy or law prohibiting HIV screening for general employment purposes (recruitment, assignment/relocation, appointment, promotion, termination)?: No

IF YES, briefly describe the content of the policy or law:

10. Does the country have the following human rights monitoring and enforcement mechanisms?
1. 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 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: 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: Yes

Programmes for the media: Yes

Programmes in the work place: Yes

Other [write in]:

: 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?: 7

Since 2011, 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 2013?: 7

Since 2011, 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?: Yes

IF YES, how were these specific needs determined?: Sur la base des études nationales réalisées.

IF YES, what are these specific needs?:
- Accès à une bonne information sur les moyens de prévention du VIH - Information et accès aux services de dépistage volontaire - Lutte contre la discrimination et la stigmatisation envers les PVVIH

1.1 To what extent has HIV prevention been implemented?

The majority of people in need have access to:

Blood safety: Strongly agree

Condom promotion: Agree

Harm reduction for people who inject drugs: Agree

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: Strongly agree

Risk reduction for intimate partners of key populations: Agree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Strongly agree

School-based HIV education for young people: Agree

Universal precautions in health care settings: Agree

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 2013?: 7
Since 2011, what have been key achievements in this area: - Distribution de préservatifs dans tout le pays - Dépistage du VIH au niveau des structures de santé - Campagnes de dépistage du VIH - Traitement syndromique des IST - Equipe mobile de prise en charge et de suivi des IST chez les populations clés (PS, HSH) à Conakry

What challenges remain in this area: - L'approvisionnement régulier des populations cibles en préservatifs - La persistance des fausses croyances sur le VIH - La stigmatisation envers les personnes atteintes et affectées par le VIH - La faible couverture des populations cibles

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: - Le dépistage du VIH - Le traitement IO, ARV y compris PTME - L'accompagnement psychosocial (appui aux familles, enfants orphelins, etc.)

Briefly identify how HIV treatment, care and support services are being scaled-up?: - Mise à l'échelle des services (dépistage, PTME, traitement IO, ARV).

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: Strongly agree
ART for TB patients: Agree
Cotrimoxazole prophylaxis in people living with HIV: Agree
Early infant diagnosis: Disagree
HIV care and support in the workplace (including alternative working arrangements): Agree
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: 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: Strongly 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 2013?: 7

Since 2011, what have been key achievements in this area: Le dépistage et la prise en charge du VIH sont en pleine expansion dans le pays, grâce à l’augmentation du budget de l’État qui permet de maintenir un nombre de plus en plus croissant sur la file active de traitement.

What challenges remain in this area: - La couverture nationale du traitement ARV - Le niveau de financement du gouvernement - Le suivi des malades sous ARV

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?: Yes

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?: 6

Since 2011, what have been key achievements in this area: La prise en charge des orphelins et des autres enfants vulnérables est une partie intégrante des activités du CNLS (soutien nutritionnel, appui à la scolarisation).

What challenges remain in this area: - L’identification et le suivi des orphelins et des autres enfants vulnérables - La disponibilité des vivres