Mali Report NCPI

NCPI Header

is indicator/topic relevant?: Yes
is data available?: Yes
Data measurement tool / source: NCPI
Other measurement tool / source:
From date: 03/04/2014
To date: 03/27/2014
Additional information related to entered data. e.g. reference to primary data source, methodological concerns:
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: Mise en place des groupes de travail Etablissement d’un calendrier de travail Remplissage des questionnaires Validation avec le groupe d’élaboration du GARPR 2014

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

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

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

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<th>Organization</th>
<th>Names/Positions</th>
<th>Respondents to Part A</th>
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<tr>
<td>SE/HCNLS</td>
<td>Ibrahim T DIALLO</td>
<td>A1,A2,A3,A4,A5,A6</td>
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<td>CSLS/MSHP</td>
<td>Dr Ouman DEMBELE</td>
<td>A1,A2,A3,A4,A5,A6</td>
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<td>CSLS/MSHP</td>
<td>Dr Tako BALLO</td>
<td>A1,A2</td>
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<td>SE/HCNLS</td>
<td>Daouda Y DAIKITE</td>
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<td>OMS</td>
<td>Dr Nahé BAH</td>
<td>A1,A2,A3,A4,A5,A6</td>
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NCPI - PART B [to be administered to civil society organizations, bilateral agencies, and UN organizations]
### A.I Strategic plan

1. Has the country developed a national multisectoral strategy to respond to HIV?: No

   IF YES, what is the period covered:

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

   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?

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

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<tr>
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<th>Respondents to Part B</th>
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<td>Modibo KANE</td>
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<td>ARCAD SIDA</td>
<td>Dr CAMARA Adame YATTASSAYE</td>
<td>B2</td>
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<td>ARCAD SIDA</td>
<td>Dr Issiaka DEMBELE</td>
<td>B2</td>
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<td>GP/SP</td>
<td>Souleymane DOLO</td>
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<td>AFAS/AMAS</td>
<td>Ali Djerma</td>
<td>B3</td>
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<td>UNFPA</td>
<td>Dr Kalifa TRAORE</td>
<td>B2,B4</td>
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<td>UNICEF</td>
<td>Dr NDEYE NGONE TOURE</td>
<td>B3,B4</td>
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<td>ONU/SIDA</td>
<td>Dr Aïssata CISSE Dury</td>
<td>B1,B2,B3,B4,B5</td>
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<tr>
<td>Plan Mali</td>
<td>Dr Thienta</td>
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**Education:**

- **Included in Strategy:** No
- **Earmarked Budget:** No

**Health:**

- **Included in Strategy:** No
- **Earmarked Budget:** No

**Labour:**

- **Included in Strategy:** No
- **Earmarked Budget:** No

**Military/Police:**

- **Included in Strategy:** No
- **Earmarked Budget:** No

**Social Welfare:**
Included in Strategy: No
Earmarked Budget: No

Transportation:
Included in Strategy: No
Earmarked Budget: No

Women:
Included in Strategy: No
Earmarked Budget: No

Young People:
Included in Strategy: No
Earmarked Budget: No

Other:
Included in Strategy: No
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?

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: No
Migrants/mobile populations: No
Orphans and other vulnerable children: No
People with disabilities: No
People who inject drugs: No
Sex workers: No
Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable subpopulations: No

SETTINGS:

Prisons: No

Schools: No

Workplace: No

CROSS-CUTTING ISSUES:

Addressing stigma and discrimination: No

Gender empowerment and/or gender equality: No

HIV and poverty: No

Human rights protection: No

Involvement of people living with HIV: No

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: 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 key populations/vulnerable subpopulations [write in]: No

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)? No

1.6. Does the multisectoral strategy include an operational plan? No

1.7. Does the multisectoral strategy or operational plan include:

a) Formal programme goals?:

b) Clear targets or milestones?:

c) Detailed costs for each programmatic area?:

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

e) A monitoring and evaluation framework?:

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

IF ACTIVE INVOLVEMENT, briefly explain how this was organised.: 

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)?:

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

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

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

SPECIFIC DEVELOPMENT PLANS:

Common Country Assessment/UN Development Assistance Framework:

National Development Plan:

Poverty Reduction Strategy:

National Social Protection Strategic Plan:
Sector-wide approach:

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:
- HIV impact alleviation (including palliative care for adults and children):
- Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support:
- Reduction of income inequalities as they relate to HIV prevention/treatment, care and/or support:
- Reduction of stigma and discrimination:
- Treatment, care, and support (including social protection or other schemes):
- Women’s economic empowerment (e.g. access to credit, access to land, training):
- Other [write in]:

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

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?: 5

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: Tous les districts sanitaires assurant la prise en charge de plus de 50 malades VIH sont dotés en appareil de comptage CD4 et en appareil d'hémotologie. Quatre régions administratives disposent d’un appareil de charge virale et 6 autres appareils sont disponibles à Bamako. La formation des ressources humaines dans la prise en charge, le suivi biologique, le suivi évaluation et le contrôle de qualité. Le renforcement logistique de la cellule de la Pharmacie Populaire du Mali et certains ONG

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: Many
- 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:

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?: 10

Since 2011, what have been key achievements in this area: Obtention du round 8 du Fonds mondial ; Elaboration d’un nouveau cadre stratégique et d’un plan opérationnel Création d’un Fonds national de lutte contre le Sida Evaluation de la séroprévalence du VIH dans la population 15_49 ans Réalisation de l’enquête de surveillance sentinelle chez les femmes enceintes Tenue de la réunion du Haut conseil national de lutte contre le Sida sous la présidence du chef de l’état

What challenges remain in this area: Persistance du conflit politico-militaire et les mouvements de populations ; Accentuation de la pauvreté ; Insuffisance des ressources pour la mise en œuvre des activités

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: DYD

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?: Ibrahim Boubacar KEITA, Chef de l’Etat, Président de la République et Président du Haut Conseil National de Lutte contre le Sida (HCNLS)

Have a defined membership?: Yes
IF YES, how many members?: ITD

Include civil society representatives?: Yes

IF YES, how many?:

Include people living with HIV?: Yes

IF YES, how many?:

Include the private sector?: Yes

Strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?: Yes

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

IF YES, briefly describe the main achievements?: DYD

What challenges remain in this area?: DYD

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

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]: DYD

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:
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?: 5

Since 2011, what have been key achievements in this area: Adoption de la loi °06-028 du 29 juin 2006 fixant les règles relatives à la prévention, à la prise en charge et au contrôle du VIH/SIDA

What challenges remain in this area: Non disponibilité du Décret d'application de la loi

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: 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 subpopulations [write in]: Populations des zones minière, zones minières et les zones de conflits

: 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]: 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: No

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: A compléter

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, 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

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

Other populations [write in]: Porteurs d'uniformes, populations déplacées, populations des zones agricoles et minières

: 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

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?: 8

Since 2011, what have been key achievements in this area: A compléter

What challenges remain in this area: A compléter

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

IF YES, how were these specific needs determined?: Analyse situationnelle (revue du CSN 2006-2010)

IF YES, what are these specific needs?: A compléter

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: Strongly agree

Economic support e.g. cash transfers: Agree

Harm reduction for people who inject drugs: Disagree

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

HIV prevention in the workplace: Strongly agree

HIV testing and counseling: Strongly agree

IEC on risk reduction: Strongly agree

IEC on stigma and discrimination reduction: Strongly agree

Prevention of mother-to-child transmission of HIV: Strongly agree
Prevention for people living with HIV: Strongly agree

Reproductive health services including sexually transmitted infections prevention and treatment: Strongly agree

Risk reduction for intimate partners of key populations: Strongly agree

Risk reduction for men who have sex with men: Agree

Risk reduction for sex workers: Strongly agree

Reduction of gender based violence: Strongly agree

School-based HIV education for young people: Strongly agree

Treatment as prevention: Strongly agree

Universal precautions in health care settings: Strongly 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? 8

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: A compléter

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

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: Strongly agree

Cotrimoxazole prophylaxis in people living with HIV: Strongly agree

Early infant diagnosis: Strongly agree

Economic support: Agree

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: Strongly agree

Palliative care for children and adults: Strongly agree

Post-delivery ART provision to women: Strongly agree

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

Post-exposure prophylaxis for occupational exposures to HIV: Strongly agree

Psychosocial support for people living with HIV and their families: Strongly agree

Sexually transmitted infection management: Strongly agree

TB infection control in HIV treatment and care facilities: Strongly agree

TB preventive therapy for people living with HIV: Strongly agree

TB screening for people living with HIV: Strongly agree

Treatment of common HIV-related infections: Strongly agree

Other [write in]: dépistage du VHB pour les personnes vivant avec le VIH, dépistage du VHC pour les personnes vivant avec le VIH

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 scolaire Appui nutritionnel Activités Génératrice de Revenus Gratuité de la prise en charge et du suivi biologique

3. Does the country have a policy or strategy for developing/using generic medications or parallel importing of medications for HIV?: No

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?: Les ARV, les réactifs, les intrants pour la biologie et les médicaments pour les infections opportunistes

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?: 9

Since 2011, what have been key achievements in this area: Extension de la couverture de terme de prise en charge Equipement des laboratoires des districts sanitaires en matériels de comptage des CD4 et 4 capitales régionales en appareils
What challenges remain in this area: Fonctionnement et entretien des appareils, surcharge de travail pour les équipes techniques, insuffisance de suivi des activités, non disponibilité des sources électriques dans tous les districts sanitaires, inexistence de base de données centrale

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?: 8

Since 2011, what have been key achievements in this area: Parrainage des enfants pour leur inscription scolaire, Dotation en fournitures scolaires et vestimentaires, Appui nutritionnel

What challenges remain in this area: Insuffisance de moyens

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: Insuffisance dans la collecte et la remontée des données non sanitaires Faible coordination nationale et régionale des activités de suivi Insuffisance des moyens pour la mise en œuvre des enquêtes spécifiques Insuffisance des ressources financières

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: Certains partenaires ont des orientations par rapport à des groupes spécifiques

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?: Environ 8%

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

Briefly describe any obstacles: Insuffisance de ressources humaines qualifiées A compléter

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?

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<tr>
<th>POSITION [write in position titles]</th>
<th>Fulltime or Part-time?</th>
<th>Since when?</th>
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<td>A compléter</td>
<td>Temps plein</td>
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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?: Yes

Briefly describe the data-sharing mechanisms: Mise en place d’un groupe de référence national pour le suivi évaluation
Mise en place d’un groupe de référence au niveau de chaque région pour le suivi évaluation

What are the major challenges in this area: Insuffisance des ressources financières Mobilité du personnel de suivi évaluation

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: Base de données pour le suivi des indicateurs, développée sous la technologie DevInfo

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?: No, none of the above

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

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6.2. Is there a functional Health Information System?

At national level: Yes

At subnational level: Yes

IF YES, at what level(s): Cellule sectorielle de Lutte contre le Sida du Ministère en charge de la Santé

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?: Professionnelles du sexe Routiers vendeuses ambulantes Aides familiales Hommes ayant des rapports avec des hommes Population des zones agricoles et minières Porteurs d'uniformes (Militaires, police)

Briefly explain how this information is used: Pour la planification des activités et la sensibilisation des populations

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

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

Briefly explain how this information is used: Pour la planification des activités et la sensibilisation des populations

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]: A compléter

: Yes

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

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

At national level?: Yes

IF YES, what was the number trained?: 2

At subnational level?: Yes
IF YES, what was the number trained: 5

At service delivery level including civil society?: No

IF YES, how many?: 1

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?: 8

Since 2011, what have been key achievements in this area?: Etude qualitative auprès des MSM Etude de surveillance sentinelle Enquête Démographique de Santé VIH Estimation des ressources et Dépenses en matière de Sida Audit de la qualité des données

What challenges remain in this area?: Insuffisance de ressources Mobilité du personnel

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?: 5

Comments and examples: La participation active à l’élaboration des documents de politiques Le plaidoyer pour la mise en place du Fonds National de Lutte contre le Sida La mise en place d’une commission VIH Sida au sein de l’Assemblée Nationale La participation active de la société civile aux différentes sessions du Haut Conseil National de Lutte contre le Sida

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)?: 5


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?: 5

b. The national HIV budget?: 5
c. The national HIV reports?: 5


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?: 5
b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?: 5

c. Participate in using data for decision-making?: 5

Comments and examples: Participation à l’élaboration plan national de suivi évaluation Membres du groupe de référence en matière de suivi évaluation Membre du Haut Conseil National de Lutte contre le Sida Participation aux missions de suivi et supervision des différents programmes

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)?: 5

Comments and examples: Associations des PVVIH, Réseau des associations de PVVIH, ONG SOUTOURA et ARCAD SIDA (professionnelle du sexe et MSM), ONG DANAYA SO (professionnelle du sexe), Groupe pivot santé Population (Faitière)

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?: 5

b. Adequate technical support to implement its HIV activities?: 5

Comments and examples: Intégration de leur Plan opération dans le besoin national Assistance technique dans la mise en œuvre des activités Possibilité d'accéder à des financements intérieurs et extérieurs

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: 51-75%

People who inject drugs: <25%

Sex workers: 51-75%

Transgender people: <25%

Palliative care: 51-75%

Testing and Counselling: 51-75%

Know your Rights/ Legal services: 25-50%

Reduction of Stigma and Discrimination: 51-75%

Clinical services (ART/OI): 51-75%

Home-based care: >75%

Programmes for OVC: >75%
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: Prise en charge communautaire des PVVIH et OEV Prise en charge des populations clés (PS, MSM, Population carcérale) Participation à l’élaboration du CSN 2013-2017 Participation à l’élaboration du plan stratégique d’élimination de la TME Participation à l’élaboration des rapports UNGASS, AU, GARPR et REDES

What challenges remain in this area: Faible capacité de certaines associations

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: Mise à disposition d’un siège social aux associations et réseaux de PVVIH Financement des programmes santé positive/ dignité et prévention des associations et réseaux de PVVIH Attribution gratuite de surfaces cultivables aux associations de PVVIH Participation des MSM à l’élaboration du protocole d’étude auprès des MSM dont les résultats d’élaborer un programme d’intervention approprié Participation à l’élaboration et à la mise en place du Fonds National du 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 sub-populations? Circle yes if the policy specifies any of the following key 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 subpopulations [write in]: Porteurs d’uniformes, population des zones agricoles et minières, population des zones de conflits, populations déplacées
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: A compléter
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: Les différents documents (CSN, CSCRP, déclaration de Politique) font référence aux droits de l'homme et à la constitution du Mali.

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?: Pas de population prioritaire pour l'accès aux 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?: No

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?: No

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

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?: 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?: 6
Since 2011, what have been key achievements in this area: Campagne nationale de vulgarisation de la loi 06-028 du 29 juin 2006 fixant les règles relatives à la prévention, à la prise en charge et le contrôle du VIH. La vulgarisation du concept de la santé positive/ dignité prévention. La journée de sensibilisation sur la stigmatisation en milieu de travail par le Ministère en charge de l’emploi. Atelier national de formation des magistrats sur le VIH et la loi 06-028 du 29 juin 2006

What challenges remain in this area: Difficultés des décrets d’application de la loi N° 06-028 du 29 juin 2006 fixant les règles relatives à la prévention, à la prise en charge et au contrôle du VIH/ SIDA

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: Campagne nationale de vulgarisation de la loi 06-028 du 29 juin 2006 fixant les règles relatives à la prévention, à la prise en charge et le contrôle du VIH/ SIDA.

What challenges remain in this area: Difficultés des décrets d’application de la loi N° 06-028 du 29 juin 2006 fixant les règles relatives à la prévention, à la prise en charge et au contrôle du VIH/ SIDA.

B.IV Prevention

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

IF YES, how were these specific needs determined?: Revue du CSN 2006-2010

IF YES, what are these specific needs?: Interventions (prévention, sensibilisation) spécifiques auprès des populations clés et vulnérables

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: Strongly agree

Harm reduction for people who inject drugs: Agree

HIV prevention for out-of-school young people: Strongly agree

HIV prevention in the workplace: Strongly agree

HIV testing and counseling: Strongly agree

IEC on risk reduction: Strongly agree

IEC on stigma and discrimination reduction: Strongly agree

Prevention of mother-to-child transmission of HIV: Strongly agree

Prevention for people living with HIV: Strongly agree

Reproductive health services including sexually transmitted infections prevention and treatment: Strongly agree
Risk reduction for intimate partners of key populations: Strongly agree

Risk reduction for men who have sex with men: Strongly agree

Risk reduction for sex workers: Strongly agree

School-based HIV education for young people: Strongly agree

Universal precautions in health care settings: Strongly agree

Other [write in]: Porteurs d’uniformes, population des zones agricoles et minières, populations déplacées et population des zones de conflits

: Strongly 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?: 8

Since 2011, what have been key achievements in this area:
Reprise du financement du volet prévention de la société civile du Fonds Mondial Les prospections dans les sites minières pour l’élaboration des programmes d’interventions efficaces en matière de prévention Formation des porteurs d’uniforme dans les zones de conflits sur la prévention du VIH et les droits humains Atelier de formation sur la prise en charge psychosocial des populations en période de crise Sensibilisation des populations des zones de conflits Approvisionnement des porteurs d’uniforme en kits de prévention du VIH

What challenges remain in this area: Insuffisance de ressources financières

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:
Mise sous ARV et assuré le suivi biologique des PVVIH Traitement des IO Directives, normes et procédures en matière de prise en charge selon les normes de l'OMS

Briefly identify how HIV treatment, care and support services are being scaled-up:
Décentralisation de la prise en charge globale Renforcement des capacités des structures et prestataires de service sur la PEC Fourniture de l’accompagnement psychosocial Appui scolaire, vestimentaire, alimentaire aux OEV et PVVIH Supervision formative des activités de PEC

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: Strongly agree

Cotrimoxazole prophylaxis in people living with HIV: Strongly agree

Early infant diagnosis: Strongly agree

HIV care and support in the workplace (including alternative working arrangements): Strongly agree
HIV testing and counselling for people with TB: Strongly agree

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

Nutritional care: Strongly agree

Paediatric AIDS treatment: Strongly agree

Post-delivery ART provision to women: Strongly agree

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

Post-exposure prophylaxis for occupational exposures to HIV: Strongly agree

Psychosocial support for people living with HIV and their families: Strongly agree

Sexually transmitted infection management: Strongly agree

TB infection control in HIV treatment and care facilities: Strongly agree

TB preventive therapy for people living with HIV: Strongly agree

TB screening for people living with HIV: Strongly agree

Treatment of common HIV-related infections: Strongly agree

Other [write in]: la thérapie préventive de la VHB et VHC pour les personnes vivant avec le VIH

: Agree

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?: 8

Since 2011, what have been key achievements in this area: Extension des sites de PEC Augmentation du nombre de personnes sous ARV Renforcement du plateau technique

What challenges remain in this area: Difficultés de retrouver les perdus de vu Survenu des résistances aux ARV (1ère et 2ème ligne) Difficulté dans la tenue des dossiers patients Difficulté dans la gestion des stocks de médicaments et réactifs

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?: 7

Since 2011, what have been key achievements in this area: Prise en charge des frais et fournitures scolaires des OEV Appui nutritionnel et vestimentaire
What challenges remain in this area: Insuffisance de ressources financières et de coordination des activités des différents intervenants