Côte d'Ivoire Report NCPI

NCPI Header

Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:
- Postal address:
- Telephone:
- Fax:
- E-mail:

Describe the process used for NCPI data gathering and validation:

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]

<table>
<thead>
<tr>
<th>Organization</th>
<th>Names/Positions</th>
<th>A.I</th>
<th>A.II</th>
<th>A.III</th>
<th>A.IV</th>
<th>A.V</th>
<th>A.VI</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSLS</td>
<td>DPSES</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
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<tr>
<td>MSLS</td>
<td>DGLS</td>
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<td>No</td>
<td>No</td>
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<tr>
<td>Ministère de la justice</td>
<td>-</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
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<td>No</td>
</tr>
<tr>
<td>MSLS</td>
<td>DPS/PLS PHV</td>
<td>No</td>
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<td>No</td>
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</tr>
<tr>
<td>MSLS</td>
<td>DT (PNPEC)</td>
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<td>No</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>MSLS</td>
<td>DPSES</td>
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<td>No</td>
<td>No</td>
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<td>Yes</td>
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</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>B.I</th>
<th>B.II</th>
<th>B.III</th>
<th>B.IV</th>
<th>B.V</th>
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</thead>
<tbody>
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<td>No</td>
<td>No</td>
<td>No</td>
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<td>No</td>
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</tbody>
</table>

A - I. STRATEGIC PLAN

1. Has the country developed a national multisectoral strategy to respond to HIV? (Multisectoral strategies should include, but are not limited to, those developed by Ministries such as the ones listed under 1.2):
   Yes

   IF YES, what was the period covered:
   2011-2015

   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 axes stratégiques ont changé. Nous avons la gouvernance, réduction de l'impact, prise en charge, prévention

   1.1 Which government ministries or agencies —

   Name of government ministries or agencies [write in]:
   Ministère de la Santé et de la Lutte contre le Sida (MSLS)
1.2. Which sectors are included in the multisectoral strategy with a specific HIV budget for their activities?

<table>
<thead>
<tr>
<th>SECTORS</th>
<th>Included in Strategy</th>
<th>Earmarked Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>Yes</td>
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<td>Yes</td>
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<td></td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Other [write in]:

- 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, settings and cross-cutting issues?

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

Transgendered people:
- No

Women and girls:
- Yes

Young women/young men:
- Yes

Other specific vulnerable subpopulations:
- Yes

Prisons:
- Yes

Schools:
- Yes

Workplace:
- Yes

Addressing stigma and discrimination:
- Yes

Gender empowerment and/or gender equality:
- Yes

HIV and poverty:
- Yes

Human rights protection:
- Yes

Involvement of people living with HIV:
- Yes

IF NO, explain how key populations were identified?:

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

Hommes ayant des rapports sexuels avec d'autres hommes (HSH), Utilisateurs de Drogues Injectables (UDI), Populations carcérales, Professionnels du sexe, Population en uniforme
1.5. Does the multisectoral strategy include an operational plan?: Yes
1.6. Does the multisectoral strategy or operational plan include:
   a) Formal programme goals?: Yes
   b) Clear targets or milestones?: Yes
   c) Detailed costs for each programmatic area?: Yes
   d) An indication of funding sources to support programme implementation?: Yes
   e) A monitoring and evaluation framework?: Yes

1.7. 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:

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

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

2. Has the country integrated HIV into its general development plans such as in: (a) National Development Plan; (b) Common Country Assessment / UN Development Assistance Framework; (c) Poverty Reduction Strategy; and (d) sector-wide approach?:
   Yes
2.1. IF YES, is support for HIV integrated in the following specific development plans?
   Common Country Assessment/UN Development Assistance Framework:
   Yes
   National Development Plan:
   Yes
   Poverty Reduction Strategy:
   Yes
   Sector-wide approach:
   Yes
   Other [write in]:
   Plan National de Développement Sanitaire (PNDS)

2.2. IF YES, are the following specific HIV-related areas included in one or more of the development plans?
   HIV impact alleviation:
   Yes
   Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support:
   Yes
   Reduction of income inequalities as they relate to HIV prevention/treatment, care and/or support:
   No
   Reduction of stigma and discrimination:
   Yes
   Treatment, care, and support (including social security or other schemes):
   Yes
   Women’s economic empowerment (e.g. access to credit, access to land, training):
   Yes
   Other [write in below]:
   -

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

3

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

Yes

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

Yes

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

-

5.2. Are there reliable estimates of current needs and of future needs of the number of adults and children requiring antiretroviral therapy?:

Estimates of Current and Future Needs

5.3. Is HIV programme coverage being monitored?:

Yes

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

Yes

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

Yes

IF YES, for which population groups?:

Hommes ayant des rapports sexuels avec d'autres hommes (HSH), Utilisateurs de Drogues Injectables (UDI), Populations carcérales, Professionnels du sexe, Population en uniforme

Briefly explain how this information is used:

Toutes ces informations sont utilisées pour améliorer la riposte nationale au VIH/Sida

5.3 (c) Is coverage monitored by geographical area:

No

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

Yes

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

Il n'y a pas d'intégration de services préalablement inexistants dans les structures de santé.

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

8

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

Elaboration du Plan Stratégique

What challenges remain in this area:

-

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

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

Yes

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

Journées Mondiale de la Lutte contre le Sida, Semaine Nationale de la Lutte contre le Sida

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

Yes

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?:
Président de la République

Have a defined membership?:

Yes

IF YES, how many members?:

-

Include civil society representatives?:

Yes

IF YES, how many?:

-

Include people living with HIV?:

Yes

IF YES, how many?:

-

Include the private sector?:

Yes

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

Yes

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

Yes

IF YES, briefly describe the main achievements:

-

What challenges remain in this area:

-

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

-

5.

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 below]:

-

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?:

No

7. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the political support for the HIV programme in 2011?:

10

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

Création d'un ministère en charge de la lutte contre le Sida

What challenges remain in this area:

Problèmes de coordination

A - III. HUMAN RIGHTS

1.1

People living with HIV:

No
<table>
<thead>
<tr>
<th>Population Type</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men who have sex with men</td>
<td>No</td>
</tr>
<tr>
<td>Migrants/mobile populations</td>
<td>No</td>
</tr>
<tr>
<td>Orphans and other vulnerable children</td>
<td>Yes</td>
</tr>
<tr>
<td>People with disabilities</td>
<td>Yes</td>
</tr>
<tr>
<td>People who inject drugs</td>
<td>No</td>
</tr>
<tr>
<td>Prison inmates</td>
<td>Yes</td>
</tr>
<tr>
<td>Sex workers</td>
<td>No</td>
</tr>
<tr>
<td>Transgendered people</td>
<td>No</td>
</tr>
<tr>
<td>Women and girls</td>
<td>Yes</td>
</tr>
<tr>
<td>Young women/young men</td>
<td>No</td>
</tr>
<tr>
<td>Other specific vulnerable subpopulations [write in]</td>
<td>-</td>
</tr>
</tbody>
</table>

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:

Briefly explain what mechanisms are in place to ensure these laws are implemented:

- Mécanisme de saisine
  - Institution des droits de l'homme : Commission Nationale des Droits de l'Homme de Côte d'Ivoire
  - Comité ministériel : • Plate forme de la société civile : la Ligue Ivoirienne des Droits de l'Homme, Association des femmes juristes de Côte d'Ivoire
  - Mécanisme de l’assistance judiciaire

Contenu des lois • présentations des organes, des objectifs des modes de saisine et de traitements des dossiers.

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

- Les populations concernées par les lois ne sont pas suffisamment informées de leur existence.
- Il faut sensibiliser ses populations afin de leur faire connaître les textes qui font la promotion de leurs droits et les différents moyens de litige.
- Les institutions qui ont vocation à faire la promotion des Droits de l’Homme fonctionnent plus ou moins (absence de budget de fonctionnement)
- Difficulté d’accès à la justice (coût et accessibilité géographique)

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?: Yes

IF YES, for which subpopulations?

- People living with HIV: 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: Yes
- Sex workers: No
- Transgendered people: No
- Women and girls: No
- Young women/young men: No
- Other specific vulnerable subpopulations [write in below]: -
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?:

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstain from injecting drugs:</td>
<td></td>
</tr>
<tr>
<td>Avoid commercial sex:</td>
<td></td>
</tr>
<tr>
<td>Avoid inter-generational sex:</td>
<td></td>
</tr>
<tr>
<td>Be faithful:</td>
<td></td>
</tr>
<tr>
<td>Be sexually abstinent:</td>
<td></td>
</tr>
<tr>
<td>Delay sexual debut:</td>
<td></td>
</tr>
<tr>
<td>Engage in safe(r) sex:</td>
<td></td>
</tr>
<tr>
<td>Fight against violence against women:</td>
<td></td>
</tr>
<tr>
<td>Greater acceptance and involvement of people living with HIV:</td>
<td></td>
</tr>
<tr>
<td>Greater involvement of men in reproductive health programmes:</td>
<td></td>
</tr>
<tr>
<td>Know your HIV status:</td>
<td></td>
</tr>
<tr>
<td>Males to get circumcised under medical supervision:</td>
<td></td>
</tr>
<tr>
<td>Prevent mother-to-child transmission of HIV:</td>
<td></td>
</tr>
<tr>
<td>Promote greater equality between men and women:</td>
<td></td>
</tr>
<tr>
<td>Reduce the number of sexual partners:</td>
<td></td>
</tr>
<tr>
<td>Use clean needles and syringes:</td>
<td></td>
</tr>
<tr>
<td>Use condoms consistently:</td>
<td></td>
</tr>
<tr>
<td>Other [write in below]:</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

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

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary schools?:</td>
<td></td>
</tr>
<tr>
<td>Secondary schools?:</td>
<td></td>
</tr>
<tr>
<td>Teacher training?:</td>
<td></td>
</tr>
</tbody>
</table>

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

| Yes | No |

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

| Yes | No |
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:
Mise en place de la Direction de la prévention

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

<table>
<thead>
<tr>
<th>IDU</th>
<th>MSM</th>
<th>Sex workers</th>
<th>Customers of Sex Workers</th>
<th>Prison inmates</th>
<th>Other populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Jeunes hommes, jeunes filles</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>-</td>
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<tr>
<td>Yes</td>
<td>Yes</td>
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<td>No</td>
<td>Yes</td>
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<td>No</td>
<td>No</td>
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</tbody>
</table>

3.2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate policy efforts in support of HIV prevention in 2011?:
7

Since 2009, what have been key achievements in this area:
- création du Programme national de Lutte contre le Sida chez les Populations Hautement Vulnérables (PLS PHV)
- création de la Direction de la Prévention du Sida (DSP)

What challenges remain in this area:
- très peu de données sur les Utilisateurs de Drogues Injectables (UDI)

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

IF YES, how were these specific needs determined?:
- analyse situationnelle réalisée

4.1. To what extent has HIV prevention been implemented?

- Blood safety: Strongly Disagree
- 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:
Agree
5. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts in implementation of HIV prevention programmes in 2011?:
7

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:
   - Gratuité des ARV
   - Personnel qualifié
   - Disponibilité des ARV et autres intrants
   - Disponibilité des établissements sanitaires
   Briefly identify how HIV treatment, care and support services are being scaled-up?:
   - Intégration des services de prise en charge, de PTME, de CDV dans les services de soins
   - Stratégies avancées de PTME, CDV dans les zones non couvertes

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

<table>
<thead>
<tr>
<th>Service</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antiretroviral therapy</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>ART for TB patients</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Cotrimoxazole prophylaxis in people living with HIV</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Early infant diagnosis</td>
<td>Agree</td>
</tr>
<tr>
<td>HIV care and support in the workplace (including alternative working arrangements):</td>
<td>Strongly Disagree</td>
</tr>
<tr>
<td>HIV testing and counselling for people with TB:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>HIV treatment services in the workplace or treatment referral systems through the workplace:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Nutritional care</td>
<td>Disagree</td>
</tr>
<tr>
<td>Paediatric AIDS treatment</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Post-delivery ART provision to women:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault):</td>
<td>Strongly Disagree</td>
</tr>
<tr>
<td>Post-exposure prophylaxis for occupational exposures to HIV:</td>
<td>Agree</td>
</tr>
<tr>
<td>Psychosocial support for people living with HIV and their families:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Sexually transmitted infection management:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>TB infection control in HIV treatment and care facilities:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>TB preventive therapy for people living with HIV:</td>
<td>Strongly Disagree</td>
</tr>
<tr>
<td>TB screening for people living with HIV:</td>
<td>Strongly Disagree</td>
</tr>
<tr>
<td>Treatment of common HIV-related infections:</td>
<td>Strongly Agree</td>
</tr>
<tr>
<td>Other [write in]:</td>
<td>-</td>
</tr>
</tbody>
</table>

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:
   A travers la création des activités génératrices de revenus

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 - intrants stratégiques - préservatifs

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

9

Since 2009, what have been key achievements in this area:
- gratuité des ARV et du cotrimoxazole - distribution de frottis (aliment, ) gratuitement aux personnes vivant avec le VIH - soutien juridique (association des femmes juristes apportant un appui global)

What challenges remain in this area:
- tous les établissements sanitaires ne sont pas couverts - toutes les PVVIH éligibles aux ne bénéficient pas d’ARV gratuits

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

Yes

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

Yes

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

Yes

IF YES, does the country have an estimate of orphans and vulnerable children being reached by existing interventions?

Yes

IF YES, what percentage of orphans and vulnerable children is being reached?

-

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

7

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

-

What challenges remain in this area:

-

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:
- problème de disponibilité des données - existence de circuits d’information parralleles

1.1 IF YES, years covered:
PNIS 2011-2015

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:
- ils ne s’alignent pas sur les indicateurs nationaux - ils n’utilisent pas les outils nationaux - ils créent des circuits parralleles de données

2. Does the national Monitoring and Evaluation plan include?

A data collection strategy:
Yes

Behavioural surveys:
Yes

Evaluation / research studies:
Yes

HIV Drug resistance surveillance:
Yes

HIV surveillance:
Yes

Routine programme monitoring:
Yes

A data analysis strategy:
Yes

A data dissemination and use strategy:
Yes

A well-defined standardised set of indicators that includes sex and age disaggregation (where appropriate):
Yes
Guidelines on tools for data collection:

Yes

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

Yes

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

-

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?:

Yes

In the National HIV Commission (or equivalent)?:

No

Elsewhere [write in]?:

-

Permanent Staff [Add as many as needed]

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<th>Part time</th>
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<tr>
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Temporary Staff [Add as many as needed]

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<tbody>
<tr>
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<td>-</td>
</tr>
</tbody>
</table>

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

No

Briefly describe the data-sharing mechanisms:

A l’occasion des rapports d’engagement nationaux et internationaux

What are the major challenges in this area:

-retention d’informations de la part des partenaires

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?:

No

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?:

-

6.2. Is there a functional Health Information System?

At national level:

Yes

At subnational level:

Yes

IF YES, at what level(s)?:

-

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

Yes

8. How are M&E data used?

For programme improvement?:

Yes
In developing / revising the national HIV response?:
Yes
For resource allocation?:
Yes
Other [write in]:
-

Briefly provide specific examples of how M&E data are used, and the main challenges, if any:
Les données de Suivi-Evaluation permettent de faire la planification pour les années à venir (Plan d'action, Plan stratégique, etc).

9. In the last year, was training in M&E conducted:
At national level?:
No
At subnational level?:
No
At service delivery level including civil society?:
No

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

10. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the HIV-related monitoring and evaluation (M&E) in 2011?:
5

Since 2009, what have been key achievements in this area:
-élaboration du Rapport annuel sur le VIH
-élaboration du Rapport UNGASS 2010 et GARP 2012

What challenges remain in this area:
-non appropriation du cadre de Suivi-Evaluation par les partenaires

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 a pris une part active dans la formulation des politiques et stratégies nationales et de leurs outils (PSN, PNSE, PAT, PON, PNIS)

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:
La société civile a pris une part active au processus de planification et de budgétisation pour les différents plans stratégiques nationaux

a. The national HIV strategy?:
4
b. The national HIV budget?:
1
c. The national HIV reports?:
3

Comments and examples:
-La société civile a été fortement impliquée dans la formulation de la stratégie nationale -Faiblesses du budget alloué à la société civile (cas du FNLS) -Les services fournis par la société civile sont rapportés au niveau national, mais le mécanisme de rapportage est à améliorer (renforcement des capacités des acteurs en SE, mise à disposition d’outils de collectes harmonisés)

4.

a. Developing the national M&E plan?:
3
b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?:
3

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

Comments and examples:
Réseau Ivoirien des personnes vivant avec le VIH (RIP+), COSCI conseil des ONG de lutte contre le sida Réseau Ivoirien des jeunes contre le Sida (RUES), Fédération des mouvements et associations de jeunesse d’enfance de Côte d’Ivoire (FEMAJECI) Réseau des organisations féminines (RIOF) Alliances des religieux engagés dans la lutte contre le sida et les autres pandémies (ARSIP) Réseau des professionnels des médias, des arts et des sports de lutte contre le sida et les autres pandémies en Côte d’Ivoire (REPMASCI) Arc en ciel (association de MSM) Blety (association des professionnels du sexe) Coalition des Entreprise de Côte d’Ivoire pour la lutte contre le sida (CECI)

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:
- En dehors du secteur public les principaux bénéficiaires des fonds alloués sont les organisations de la société. -Les Appuis techniques ponctuels orientés vers les résultats du partenaire, ne prenant pas suffisamment en compte le renforcement de capacité, institutionnel de la société civile

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

- People living with HIV: 51-75%
- Men who have sex with men: 25-50%
- People who inject drugs: <25%
- Sex workers: 25-50%
- Transgendered people: <25%
- Testing and Counselling: >75%
- Reduction of Stigma and Discrimination: 51-75%
- Clinical services (ART/OI)*: >75%
- Home-based care: >75%
- Programmes for OVC**: 51-75%

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 2011?:
5

Since 2009, what have been key achievements in this area:
- Renforcement de capacités techniques, matérielles et financières -Mobilisation de ressources financière -Implication dans tous les processus d’élaboration de stratégies et programmes
What challenges remain in this area:
- Absence de synergie dans les activités de coordination -Insuffisance de financement -Faible implication de la société civile dans la prise de décision

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:
- Plan stratégique national (2011-2015) -Documents de politiques nationale du PNOEV, du PNSR, du PLSHV et du PNPEC
B - III. HUMAN RIGHTS

1.1. People living with HIV: No
Men who have sex with men: No
Migrants/mobile populations: No
Orphans and other vulnerable children: Yes
People with disabilities: Yes
People who inject drugs: No
Prison inmates: Yes
Sex workers: No
Transgendered people: No
Women and girls: Yes
Young women/young men: No
Other specific vulnerable subpopulations [write in]:

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?: Yes
If YES to Question 1.1 or 1.2, briefly describe the contents of these laws:
Mécanisme de saisine • Institution des droits de l’homme : Commission Nationale des Droits de l’Homme de Côte d’Ivoire
• Comité ministériel : • Plate forme de la société civile : la Ligue Ivoirienne des Droits de l’Homme, Association des femmes juristes de Côte d’Ivoire Mécanisme de l’assistance judiciaire Contenu des lois • présentations des organes, des objectifs des modes de saisine et de traitements des dossiers.
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:
• Les populations concernées par les lois ne sont pas suffisamment informées de leur existence. • Il faut sensibiliser ses populations afin de leur faire connaitre les textes qui font la promotion de leurs droits et les différents moyens de litige. • Les institutions qui ont vocation à faire la promotion des Droits de l’Homme fonctionnent plus ou moins (absence de budget de fonctionnement) • Difficulté d’accès à la justice (coût et accessibilité géographique)

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?: Yes

2.1. IF YES, for which sub-populations?

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: Yes
Sex workers: No
Transgendered people:
No
Women and girls:
No
Young women/young men:
No
Other specific vulnerable subpopulations [write in]:
-

Briefly describe the content of these laws, regulations or policies:
Interdiction de relations sexuelles dans les prisons

Briefly comment on how they pose barriers:
Ne permet pas aux personnes incarcérées d’avoir accès aux préservatifs

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:
•La loi n° : 98-757 du 23 décembre 1998 portant répression des mutilations génitales féminines •Loi n° 81-640 du 31 juillet 1981 portant institution du code pénal : Répression des atteintes à l’intégrité physique morale et sexuelle (répression du viol, violence et voies de fait, répression de l’incitation à la débauche…) •Loi sur le mariage : portant interdiction des mariages forcés, précoces

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:
Le cadre stratégique national est la traduction de la prise en compte de la dimension des Droits Humains dans la lutte contre le sida. C’est le cadre référentiel à partir duquel sont déclinées toutes les politiques en matière de lutte contre le sida.
Exemples : •Politique de santé en milieu carcéral Cette politique prend en compte •Politique de lutte contre le sida dans le monde du travail Cette politique repose sur les directives du BIT •Politique nationale de prise en charge des Orphelins en enfants rendus vulnérables du fait du VIH, •Politique nationale de prise en charge des PVVIH

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

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

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<td>-</td>
</tr>
<tr>
<td>Yes</td>
<td>-</td>
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</tr>
</tbody>
</table>

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:
La Côte d’Ivoire s’est dotée d’un cadre stratégique national 2011-2015 qui prend en compte la population générale, les populations clés, et les autres sous populations vulnérables. Le cadre de mise en œuvre de ce plan stratégique se retrouve dans les attributions des différents programmes ci-après : •PNOEV •PNSR •PLSHV •PNPEC

8.1

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

IF YES, briefly explain the different types of approaches to ensure equal access for different populations:
-Gratuité des services (accès au CDV, aux soins et soutien, PTME…) -Gratuité des ARV -Extension de la couverture nationale des services de prise en charge et de PTME

9. Does the country have a policy or law prohibiting HIV screening for general employment purposes (recruitment,
10. Does the country have the following human rights monitoring and enforcement mechanisms?

a. Existence of independent national institutions for the promotion and protection of human rights, including human rights commissions, law reform commissions, watchdogs, and ombudspersons which consider HIV-related issues within their work:
   Yes
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:
- L’inter syndical de lutte contre le VIH dans le monde du travail. Elle regroupe les trois centrales syndicales et traitent les questions spécifiques du VIH sur le lieu du travail. - Les comités d’entreprise de lutte contre le VIH sur le lieu du travail. Ils ont un rôle de pilotage des programmes de lutte contre le VIH en entreprise

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?:
   No

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

a. Legal aid systems for HIV casework:
   No
b. Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV:
   Yes

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

   Yes

If YES, what types of programmes?

- Programmes for health care workers:
  No
- Programmes for the media:
  No
- Programmes in the work place:
  No
- Other [write in]:
  Programme en direction de société civile (REPMASCI, ARSIP, RIP+)

14. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2011?:

   3

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

What challenges remain in this area:
- Absence de directives nationales - Inexistence de centres de veille pour la lutte contre la stigmatisation - Insuffisance de promotion autour des centres d’écoute pour la prise en charge des personnes stigmatisées - Manque de suivi des activités réalisées

15. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the effort to implement human rights related policies, laws and regulations in 2011?:

   0

Since 2009, what have been key achievements in this area:
La Côte d’Ivoire est encore au stade de projet de loi sur le sida. Les réalisations dans ce domaine ne peuvent être évaluées

What challenges remain in this area:
- Absence de directives nationales - Inexistence de centres de veille pour la lutte contre la stigmatisation - Insuffisance de promotion autour des centres d’écoute pour la prise en charge des personnes stigmatisées - Manque de suivi des activités réalisées
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 Plan stratégique 2006-2010 afin d’identifier les faiblesses dans la mise en œuvre des programmes de prévention

| Blood safety:          | Disagree |
|                       |          |
| Condom promotion:     | Agree    |
|                       |          |
| Harm reduction for people who inject drugs: | Strongly Disagree |
|                       |          |
| HIV prevention for out-of-school young people: | Disagree |
|                       |          |
| HIV prevention in the workplace: | Disagree |
|                       |          |
| HIV testing and counseling: | Agree |
|                       |          |
| IEC on risk reduction: | Agree    |
|                       |          |
| IEC on stigma and discrimination reduction: | Disagree |
|                       |          |
| Prevention of mother-to-child transmission of HIV: | Disagree |
|                       |          |
| Prevention for people living with HIV: | Agree |
|                       |          |
| Reproductive health services including sexually transmitted infections prevention and treatment: | Disagree |
|                       |          |
| Risk reduction for intimate partners of key populations: | Disagree |
|                       |          |
| Risk reduction for men who have sex with men: | Disagree |
|                       |          |
| Risk reduction for sex workers: | Disagree |
|                       |          |
| School-based HIV education for young people: | Disagree |
|                       |          |
| Universal precautions in health care settings: | Disagree |
|                       |          |
| Other [write in]:     |          |
|                       |          |

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

Since 2009, what have been key achievements in this area:
   - Des ressources ont été mobilisées auprès des bailleurs - Extension de la couverture en matière de prévention (CDV, PTME,)
   - Mise en œuvre du Projet d’Urgence Multisectoriel de Lutte contre le Sida - Promotion de l’Accès Universel à la Prévention - Intensification de la prévention à l’attention des jeunes non scolarisés (projet Côte d’Ivoire Extensed Responsce to Aids CIERA/PEPFAR)

What challenges remain in this area:
   - Faible engagement des dirigeants d’entreprises - Insuffisance des comités d’entreprise - Insuffisance dans la couverture nationale des organisations de la société civile - Manque de suivi des activités de prévention - Couverture incomplète en matière de services offerts - Insuffisance d’outils et de matériels de prévention - Insuffisance de formation à l’utilisation des outils et matériels de prévention - Insuffisance de ressources mobilisées en interne pour la pérennisation des activités

B - V. TREATMENT, CARE AND SUPPORT

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

IF YES, Briefly identify the elements and what has been prioritized:
   - personnel qualifié - matériel adapté - motivation du personnel qualifié - disponibilité d’intrants

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

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

Antiretroviral therapy:
N/A
ART for TB patients:
N/A
Cotrimoxazole prophylaxis in people living with HIV:
N/A
Early infant diagnosis:
N/A
HIV care and support in the workplace (including alternative working arrangements):
N/A
HIV testing and counselling for people with TB:
N/A
HIV treatment services in the workplace or treatment referral systems through the workplace:
N/A
Nutritional care:
N/A
Paediatric AIDS treatment:
N/A
Post-delivery ART provision to women:
N/A
Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault):
N/A
Post-exposure prophylaxis for occupational exposures to HIV:
N/A
Psychosocial support for people living with HIV and their families:
N/A
Sexually transmitted infection management:
N/A
TB infection control in HIV treatment and care facilities:
N/A
TB preventive therapy for people living with HIV:
N/A
TB screening for people living with HIV:
N/A
Treatment of common HIV-related infections:
N/A
Other [write in]:
-

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

5

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

- Des ressources ont été mobilisées auprès des bailleurs - L'action des ONG a amené l'Etat à décentraliser les points de ravitaillement en ARV. Ce qui a poussé le système des Nations Unies à faire des missions d'évaluation et d'assistance à l'endroit des populations déplacées internes (PDI) - Intensification des soins et soutien en direction des OEV et PVVIH (Projet CIERA/PEPFAR) - Mise en place d'un système de suivi des ARV - Création et redynamisation de 258 comités d'entreprise

What challenges remain in this area:

- Insuffisance de services intégrés de la prévention, et des soins et soutien dans les structures de santé - Insuffisance de la couverture nationale des centres de prise en charge

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

Yes

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

Yes

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

Yes

2.3. IF YES, does the country have an estimate of orphans and vulnerable children being reached by existing interventions?:

Yes

2.4. IF YES, what percentage of orphans and vulnerable children is being reached?:

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

6
Since 2009, what have been key achievements in this area:
- Des ressources ont été mobilisées auprès des bailleurs - L’action des ONG a amené l’Etat à décentraliser les points de ravitaillement en ARV. Ce qui a poussé le système des Nations Unies à faire des missions d’évaluation et d’assistance à l’endroit des populations déplacées internes (PDI) - Intensification des soins et soutien en direction des OEV et PVVIH (Projet CIERA/PEPFAR) - Mise en place d’un système de suivi des ARV

What challenges remain in this area:
- Insuffisance de services intégrés de traitement et des soins et accompagnement dans les structures de santé - Insuffisance de la couverture nationale des centres de prise en charge

Source URL: http://aidsreportingtool.unaids.org/48/c%C3%B4te-divoire-report-ncpi