Gabon Report NCPI

NCPI Header

COUNTRY

Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:
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Describe the process used for NCPI data gathering and validation:
Recrutement d’un consultant pour la collecte des données. Collecte réalisée auprès des informateurs clés au niveau du gouvernement, de la société civile et des partenaires techniques et financiers. Atelier de consensus.

Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:
Discussions en séance plénière au cours de l'atelier et recommandations sur une base consensuelle

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

<table>
<thead>
<tr>
<th>Organization</th>
<th>Names/Positions</th>
<th>A.I</th>
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NCPI - PART A [to be administered to government officials]

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<td>REGOSIDA</td>
<td>Secrétaire exécutif</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? (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:
   2008-2012
   IF YES, briefly describe key developments/modifications between the current national strategy and the prior one.
   IF NO or NOT APPLICABLE, briefly explain why:
   1. Meilleure connaissance de la situation épidémiologique du pays
   2. Mise en place des comités ministériels de lutte contre le VIH/sida
   3. Mise en place des comités VIH dans les grandes entreprises
   4. Meilleure prise en compte des OEV
   5. Plus grande implication de la société civile dans la réponse nationale

1.1 Which government ministries or agencies

Name of government ministries or agencies [write in]:
Ministère de la santé

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

<table>
<thead>
<tr>
<th>SECTORS</th>
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<th>Earmarked Budget</th>
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</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:
   Yes
   People who inject drugs:
   No
   Sex workers:
   Yes
   Transgendered people:
   No
Women and girls:
Yes
Young women/young men:
Yes
Other specific vulnerable subpopulations:
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]?:

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

1.6. Does the multisectoral strategy or operational plan include
a) Formal programme goals?:
Yes
b) Clear targets or milestones?:
Yes
c) Detailed costs for each programmatic area?:
Yes
d) An indication of funding sources to support programme implementation?:
Yes
e) A monitoring and evaluation framework?:
Yes

1.7

1.7. Has the country ensured “full involvement and participation” of civil society in the development of the multisectoral strategy?:
Moderate involvement
IF NO or MODERATE INVOLVEMENT, briefly explain why this was the case:
La société civile est impliquée mais est encore faible dans son organisation et dans son leadership.

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

1.9

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

2. Has the country integrated HIV into its general development plans such as in: (a) National Development Plan;
(b) Common Country Assessment / UN Development Assistance Framework; (c) Poverty Reduction Strategy; and (d) sector-wide approach?:
Yes

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

Common Country Assessment/UN Development Assistance Framework:
Yes
National Development Plan:
Poverty Reduction Strategy: Yes
Sector-wide approach: Yes
Other [write in]: -

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

HIV 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:
Yes
Reduction of stigma and discrimination:
Yes
Treatment, care, and support (including social security or other schemes):
Yes
Women’s economic empowerment (e.g. access to credit, access to land, training):
Yes
Other [write in below]: -

3. Has the country evaluated the impact of HIV on its socioeconomic development for planning purposes?: No

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

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

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

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

5.3. Is HIV programme coverage being monitored?:
Yes

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

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

5.3 (c) IF YES, for which population groups?:
OEV_ 8. Personnes vivant avec le VIH
Briefly explain how this information is used:

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

5.3 (d) Briefly explain how this information is used:
Utilisation à travers les comités provinciaux de lutte contre le sida. Utilisation par le renforcement des capacités des acteurs de la mise en œuvre des programmes. Utilisation pour l’élaboration des plans de travail annuels et pour l’évaluation des besoins d’enquête et de recherche

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:
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?: 7

Since 2009, what have been key achievements in this area:
1. Accroissement du budget alloué à la réponse au VIH. 2. Intensification des campagnes de sensibilisation. 3. Plus grande implication de la société civile. 4. Meilleure couverture en ARV et en préservatifs masculins et féminins

What challenges remain in this area:
1. Faiblesse de la coordination de la réponse. 2. Insuffisance du financement de la réponse nationale. 3. Insuffisance des ressources humaines qualifiées dans les régions au niveau décentralisé. 4. Insuffisance dans la diffusion des documents de stratégie et de politique nationale. 5. Faiblesse du cadre de suivi et évaluation

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:
1. Importantes décisions prises par le Président de la République pour intensifier les efforts de la réponse au VIH (Gratuité de l'accès au ARV/Augmentation du financement pour la lutte contre VIH/ Prise en charge des bilans de suivi des patients par l'assurance maladie de la Caisse Nationale de Garantie Sociale. 2. Implication de la première Dame et des membres du Gouvernement dans la célébration de la Journée Mondiale de lutte contre le sida. 3. Appui du Gabon pour l'adoption de la résolution sur le VIH/sida. 4. Conduite par la première Dame du projet CAN SANS 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?:
Non défini
Include civil society representatives?:
Yes
IF YES, how many?:
Non défini
Include people living with HIV?:
Yes
IF YES, how many?:
Non défini
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?:
No
What challenges remain in this area:
1. La non opérationnalisation du CNLS_ 2. Difficultés dans la coordination des interventions des Organisations de la société civile

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?:
   Yes
IF YES, name and describe how the policies / laws were amended:
1. Directives nationales pour la lutte contre la tuberculose_ 2. Lois relatives aux coûts des prestations médicales et des médicaments
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 2011?:

8

Since 2009, what have been key achievements in this area:
1. Création de la Direction Générale de la Prévention du sida (DGPS)_ 2. Augmentation de 150% de la dotation des fonds alloués à l'achat des ARV_ 3. La décision de juin 2011 pour la création des comités ministériels de lutte contre le VIH/sida

What challenges remain in this area:
1. Insuffisance des ressources financières_ 2. Besoin de renforcement des capacités du laboratoire national pour le suivi biologique (charges virales)_ 3. Absence d'un réseau de laboratoires pour l'assurance qualité_ 4. La non opérationnalisation du CNLS_. La lenteur dans la mise en oeuvre des décisions du Chef de l'Etat

A - III. HUMAN RIGHTS

1.1

People living with HIV:
   Yes
Men who have sex with men:
   No
Migrants/mobile populations:
   No
Orphans and other vulnerable children:
   Yes
People with disabilities:
   Yes
People who inject drugs:
   No
Prison inmates:
   Yes
Sex workers:
   Yes
Transgendered people:
   No
Women and girls:
   Yes
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 law:

1. La Constitution gabonaise qui stipule que tous les citoyens sont égaux.
2. La loi sur la violation du secret médical.
3. Le code du travail.

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

Les moyens de contrôle passent par les chambres parlementaires et par le recours à la justice.

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

2. L'accès pour tous aux soins, à la prévention et à la prise en charge.

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

IF YES, for which subpopulations?

- People living with HIV:
- Men who have sex with men:
- Migrants/mobile populations:
- Orphans and other vulnerable children:
- People with disabilities:
- People who inject drugs:
- Prison inmates:
- Sex workers:
- Transgendered people:
- Women and girls:
- Young women/young men:
- Other specific vulnerable subpopulations [write in below]:

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

-

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?

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

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?:
No
Secondary schools?:
Yes
Teacher training?:
Yes

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

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

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

Briefly describe the content of this policy or strategy:
Campagnes de sensibilisation et spots pour susciter un chanement de comportement

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

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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?: 6

Since 2009, what have been key achievements in this area:
1. Relance de la stratégie du marketing social du préservatif
2. Elaboration et début de mise en oeuvre de la stratégie de communication et du plan intégré de communication
3. Réalisation de la campagne de prévention CAN SANS SIDA

What challenges remain in this area:
1. Déficit de financement
2. Déficit en ressources humaines
3. Coût élevé de la communication

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

If YES, how were these specific needs determined?:

4.1. To what extent has HIV prevention been implemented?

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: Agree
Risk reduction for men who have sex with men: Strongly Disagree
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]: Les hommes en uniforme (Strongly 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?: 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:

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

Antiretroviral therapy:
**Strongly Agree**

**ART for TB patients:**

**Cotrimoxazole prophylaxis in people living with HIV:**

**Early infant diagnosis:**

**Agree**

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

**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**

**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:**

**Agree**

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

**Strongly Agree**

**Sexually transmitted infection management:**

**Agree**

**TB infection control in HIV treatment and care facilities:**

**Agree**

**TB preventive therapy for people living with HIV:**

**Disagree**

**TB screening for people living with HIV:**

**Disagree**

**Treatment of common HIV-related infections:**

**Strongly Agree**

**Other [write in]:**

Suivi biologique du VIH (strongly agree)

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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:


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

Yes

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

No

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?:

8

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


What challenges remain in this area:

1. Evaluation plus précise des besoins en matière de traitement_2. Rupture intempestives des intrants et des stocks d’ARV

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?:
20.1%
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?:
5
Since 2009, what have been key achievements in this area:
1. Opérationnalisation de la Direction Générale chargée des OEV_2. Effectivité du soutien alimentaire et éducationnel en faveur des OEV
What challenges remain in this area:
1. Insuffisance du budget alloué aux OEV_2. Identification des OEV sur toute l’étendue du territoire national (méthode d’enrolement insuffisante)

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:
1. Nécessité d’une réelle appropriation préalable par le gouvernement_2. Insuffisance du système national d’information sanitaire (SNIS) et faiblesses de la collaboration avec le département des statistiques nationales_3. Insuffisance des ressources humaines qualifiées et du financement du système de S/E
1.1 IF YES, years covered:
2008-2012
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:
Les partenaires techniques et financiers de la réponse nationale ont un niveau d’exigence dans le domaine du S/E supérieur à la pratique courante en S/E.

<table>
<thead>
<tr>
<th>Does the national Monitoring and Evaluation plan include?</th>
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<tbody>
<tr>
<td><strong>A data collection strategy:</strong></td>
</tr>
<tr>
<td>Yes</td>
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<tr>
<td><strong>Behavioural surveys:</strong></td>
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<tr>
<td>Yes</td>
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<tr>
<td><strong>Evaluation / research studies:</strong></td>
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<td>Yes</td>
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<tr>
<td><strong>HIV Drug resistance surveillance:</strong></td>
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<td>Yes</td>
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<tr>
<td><strong>HIV surveillance:</strong></td>
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<tr>
<td>Yes</td>
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<tr>
<td><strong>Routine programme monitoring:</strong></td>
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<td><strong>A data analysis strategy:</strong></td>
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<td>Yes</td>
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<td><strong>A data dissemination and use strategy:</strong></td>
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<td><strong>A well-defined standardised set of indicators that includes sex and age disaggregation (where appropriate):</strong></td>
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<tr>
<td>Yes</td>
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<tr>
<td><strong>Guidelines on tools for data collection:</strong></td>
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<td>Yes</td>
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</tbody>
</table>

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?:
3%
4. Is there a functional national M&E Unit?:
In Progress
Briefly describe any obstacles:
1. insuffisance des ressources humaines qualifiées_2. déficit budgétaire_3. Absence de système efficace de centralisation des données
4.1. Where is the national M&E Unit based?
In the Ministry of Health?
In the National HIV Commission (or equivalent)?: 
- 
Elsewhere [write in]?: 
- 

<table>
<thead>
<tr>
<th>Permanent Staff [Add as many as needed]</th>
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<tbody>
<tr>
<td><strong>POSITION</strong> [write in position titles in spaces below]</td>
</tr>
<tr>
<td>Directeur de la planification (Direction Générale de la Prévention du Sida : DGPS)</td>
</tr>
<tr>
<td>Directeur des statistiques et des études (DGPS)</td>
</tr>
<tr>
<td>Responsable surveillance épidémiologique (Programme de lutte contre le sida et les IST : Pelist)</td>
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<tr>
<td>Responsable du suivi et évaluation (Plist)</td>
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<tr>
<td>Direction des statistiques (Min Santé)</td>
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<td>Conseiller en suivi et évaluation (ONUSIDA)</td>
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<td>Chargé de programme VIH (OMS)</td>
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<td>Chargé de programme VIH (UNICEF)</td>
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<td>Chargé de programme VIH/SR (UNFPA)</td>
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<tr>
<td>Chargé de suivi et évaluation (Cellule de gestion Fonds mondial)</td>
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<td>Chargé du suivi et évaluation (REGOSIDA)</td>
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<td>Chargé du suivi et évaluation (Réseau des PVVIH)</td>
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<td>Chargé de suivi et évaluation secteur privé</td>
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<tr>
<td>Chargé de suivi et évaluation comité multisectoriel</td>
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<tr>
<td>Chargés de suivi et évaluation comités multisectoriels (ministères)</td>
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<th>Temporary Staff [Add as many as needed]</th>
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<td><strong>POSITION</strong> [write in position titles in spaces below]</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?:
No
Briefly describe the data-sharing mechanisms:
-

What are the major challenges in this area:
-
5. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?:
No
6. Is there a central national database with HIV-related data?:
Yes
IF YES, briefly describe the national database and who manages it: Ministère de la Santé/Programme de lutte contre les IST et le sida
6.1. If YES, does it include information about the content, key populations and geographical coverage of HIV services, as well as their implementing organizations?:
Yes, all of the above
6.2. Is there a functional Health Information System?
At national level:
Yes
At subnational level:
Yes
IF YES, at what level(s)?: Niveau central national et niveau intermédiaire régional

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

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

At national level?:
Yes

IF YES, what was the number trained:
50

At subnational level?:
Yes

IF YES, what was the number trained:
150

At service delivery level including civil society?:
Yes

IF YES, how many?:
600

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

IF YES, describe what types of activities:
1. Renforcement des capacités opérationnelles_2. Mise en réseau des CTA dans les dix régions sanitaires

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:


What challenges remain in this area:

1. Insuffisance des ressources humaines qualifiées_2. Insuffisance de ressources financières et d'équipements

B - I. CIVIL SOCIETY INVOLVEMENT

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

4

Comments and examples:
La société civile est en gestation, ce qui explique en partie son manque de leadership. Elle a cependant participé à l'élaboration des documents nationaux de référence (PSN, etc.)

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 pu participer, grâce aux partenaires techniques et financiers, aux processus de planification. Elle a toutefois faiblement participé à la budgétisation des activités les plus courantes ainsi qu'à leur mise en œuvre

3.

a. The national HIV strategy?:
3

b. The national HIV budget?:
2

c. The national HIV reports?:
3

Comments and examples:
le suivi et évaluation constitue le maillon faible de la chaîne de la riposte nationale au VIH. Les parties prenantes ne sont pas clairement identifiées et la coordination du S/E est mal assurée. ceci explique la faible production ou utilisation des
4.  
   a. Developing the national M&E plan?:  
      2  
   b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?:  
      2  
   c. Participate in using data for decision-making?:  
      2  
   Comments and examples:  
      -  

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)?:  
5  
Comments and examples:  
-  

6. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is civil society able to access  
   a. Adequate financial support to implement its HIV activities?:  
      3  
   b. Adequate technical support to implement its HIV activities?:  
      3  
   Comments and examples:  
      La capacité et la bonne foi de certaines ONG sont mitigées. L’appui des PTF et l’organisation de formations ont contribué à renforcer les capacités des organisations de la société civile dans la mobilisation des ressources en particulier. Les associations continuent ainsi à bénéficier indirectement des différents financements.  

7. What percentage of the following HIV programmes/services is estimated to be provided by civil society?  
   People living with HIV:  
      25-50%  
   Men who have sex with men:  
      <25%  
   People who inject drugs:  
      <25%  
   Sex workers:  
      51-75%  
   Transgendered people:  
      <25%  
   Testing and Counselling:  
      25-50%  
   Reduction of Stigma and Discrimination:  
      51-75%  
   Clinical services (ART/OI)*:  
      <25%  
   Home-based care:  
      25-50%  
   Programmes for OVC**:  
      25-50%  

8. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts to increase civil society participation in 2011?:  
5  
Since 2009, what have been key achievements in this area:  
1. La présidence du CCM est assurée par la société civile_2. La Fondation de la première Dame a été créée_3. Des actions concrètes sont menées (organisation de la Journée Mondiale de lutte contre le sida: campagnes de sensibilisation des jeunes, sensibilisation de proximité contre la stigmatisation, participation aux activités de la PTME, prise en charge des OEV  
What challenges remain in this area:  

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

Yes

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

Lors de l'élaboration du PSN 2008-2012, les jeunes, les transporteurs et les représentants des personnes vivant avec le VIH ont participé à l'analyse de la situation de la réponse nationale. Pleine participation également lors de l'élaboration du plan national de S/E, de la stratégie nationale de communication ainsi que celle du marketinf social du préservatif

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:
No
Sex workers:
No
Transgendered people:
No
Women and girls:
No
Young women/young men:
No
Other specific vulnerable subpopulations [write in]:
Les femmes enceintes et les personnes économiquement faibles

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?

People living with HIV:
-
Men who have sex with men:
-
Migrants/mobile populations:
-
Orphans and other vulnerable children:
-
People with disabilities:
-
People who inject drugs:
-
Prison inmates:
-
Sex workers:
-
Transgendered people:
-
Women and girls:
- Young women/young men:
- Other specific vulnerable subpopulations [write in]:

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:
   1. Condamnation par la loi de toute violence qu’elle soit domestique, psychologique, économique ou sexuelle. 2. Mesures de protection pour les femmes, les mineurs et pour les femmes vivant avec le VIH.

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

   Yes

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

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

   No

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

<table>
<thead>
<tr>
<th>Provided free-of-charge to all people in the country</th>
<th>Provided free-of-charge to some people in the country</th>
<th>Provided, but only at a cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>No</td>
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<td>Yes</td>
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</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:
   -

   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:
   La gratuité de l’accès aux soins et au traitement

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

   No

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 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:
   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]:

- 

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?:

  2

Since 2009, what have been key achievements in this area:
L’accès pour tous aux soins et à la prise en charge médicale

What challenges remain in this area:
L’insuffisance de mesures prises pour l’application des textes

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?:

  4

Since 2009, what have been key achievements in this area:
L’accès universel aux soins

What challenges remain in this area:
L’insuffisance de mesures prises pour l’application des textes

B - IV. PREVENTION

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

IF YES, how were these specific needs determined?:

- 

1.1 To what extent has HIV prevention been implemented?

   Blood safety:
   Strongly Disagree

   Condom promotion:
   Disagree

   Harm reduction for people who inject drugs:
   Disagree

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

   HIV prevention in the workplace:
   Agree

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

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

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

What challenges remain in this area:
1. Faibles capacité en matière de S/E_2. Stratégies peu présentes pour mobiliser les ressources

B - V. TREATMENT, CARE AND SUPPORT

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

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

Briefly identify how HIV treatment, care and support services are being scaled-up?:
1. Présence des CTA dans toutes les provinces du pays_2. Les CTA sont mis aux normes internationales de prise en charge médicale_3. Décision de gratuité de la prise en charge des PVVIH

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

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

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

Since 2009, what have been key achievements in this area:
Mesure politique de gratuité des soins et traitement avec hausse importante du fonds spécial d’aide à la lutte contre le VIH

What challenges remain in this area:
1. La mesure de gratuité des soins/traitement n’est pas encore mise en œuvre 1 an après sa promulgation. 2. Risque de rupture de stock en ARV du fait de la hausse considérable de la demande liée à la mesure de gratuité des soins. 3. Capacité de financement de l'état fortement mise à contribution. 4. Accessibilité limitée des CTA pour des personnes vivant en milieu rural ou dans les départements

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?: 20.5%

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:
1. Augmentation du budget de l'état pour assurer une meilleure prise en charge des PVVIH. 2. Décision de gratuité des soins et traitements. 3. Traitement des infections opportunistes

What challenges remain in this area:
1. Lenteur dans la mise en œuvre de la décision de gratuité des soins. 2. Inaccessibilité des CTA aux PVVIH résidant dans les départements autres que celui où est implanté le CTA. 3. Difficulté de concilier l'accès aux CTA et la lutte contre la stigmatisation

Source URL: http://aidsreportingtool.unaids.org/75/gabon-report-ncpi