

Tunisia Report NCPI

NCPI Header

is indicator/topic relevant?: Yes

is data available?: Yes

Data measurement tool / source: NCPI

Other measurement tool / source:

From date: 01/01/2012

To date: 12/31/2013

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

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

Data measurement tool / source: GARPR

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Describe the process used for NCPI data gathering and validation: Distribution des questionnaires NCPI pour chaque

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]

Organization	Names/Positions	Respondents to Part A
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NCPI - PART B [to be administered to civil society organizations, bilateral agencies, and UN organizations]

Organization	Names/Positions	Respondents to Part B
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A.I Strategic plan

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

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

IF YES, briefly describe key developments/modifications between the current national strategy and the prior one. IF NO or NOT APPLICABLE, briefly explain why.: C'est le plan stratégique national (PSN; 2012-2016) qui vient d'être révisé suite à la revue annuelle de la mise en oeuvre de ce plan au cours de l'année 2012 qui a montré des faiblesses au niveau de la priorisation des axes stratégiques et de leur pertinence. C'est ainsi que l'un des axes de ce PSN qui est relatif à la promotion des droits humains a été considéré comme un axe transversal et un principe directeur dans la mise en oeuvre de tout le PSN. Ainsi, la révision a abouti au PSN 2014-2017 qui est en cours de finalisation et de validation et qui comporte désormais trois résultats d'impact prioritaires: Résultat d'impact 1 : Les nouvelles infections sont réduites de 50% d'ici 2017; Résultat d'impact 2 : La mortalité des PVVIH est réduite d'au moins 60% d'ici 2017; Résultat d'impact 3 : La gouvernance, la coordination et le suivi évaluation de la réponse nationale au VIH/sida sont efficaces.

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

1.1. Which government ministries or agencies have overall responsibility for the development and implementation of the national multi-sectoral strategy to respond to HIV?: Le Ministère de la Santé abrite le Programme National de Lutte contre le Sida au niveau de la Direction des Soins de Santé de Base.

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

Education:

Included in Strategy: Yes

Earmarked Budget: No

Health:

Included in Strategy: Yes

Earmarked Budget: Yes

Labour:

Included in Strategy: Yes

Earmarked Budget: No

Military/Police:

Included in Strategy: Yes

Earmarked Budget: Yes

Social Welfare:

Included in Strategy: Yes

Earmarked Budget: No

Transportation:

Included in Strategy: No

Earmarked Budget: No

Women:

Included in Strategy: No

Earmarked Budget: No

Young People:

Included in Strategy: Yes

Earmarked Budget: No

Other: Sécurité sociale

Included in Strategy: Yes

Earmarked Budget: Yes

IF NO earmarked budget for some or all of the above sectors, explain what funding is used to ensure implementation of their HIV-specific activities?: Pour les secteurs autres que le ministère de la santé, il n'y a pas de budget spécifique car les activités de lutte contre le VIH sont intégrées dans d'autres services. En plus, le Ministère de la Santé finance les activités d'Information Education Communication et de dépistage du VIH au niveau de ces ministères. Remarque: En Tunisie, il n'y a pas de Ministère de travail ; la dispensation du travail est assurée par la Présidence du Gouvernement, le ministère de l'emploi et le Ministère des Affaires Sociales

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

KEY POPULATIONS AND OTHER VULNERABLE POPULATIONS:

Discordant couples: Yes

Elderly persons: No

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: Yes

Sex workers: Yes

Transgender people: No

Women and girls: No

Young women/young men: Yes

Other specific vulnerable subpopulations: No

SETTINGS:

Prisons: Yes

Schools: Yes

Workplace: No

CROSS-CUTTING ISSUES:

Addressing stigma and discrimination: Yes

Gender empowerment and/or gender equality: Yes

HIV and poverty: Yes

Human rights protection: Yes

Involvement of people living with HIV: Yes

IF NO, explain how key populations were identified?:

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

People living with HIV: Yes

Men who have sex with men: Yes

Migrants/mobile populations: Yes

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: No

Prison inmates: Yes

Sex workers: Yes

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific key populations/vulnerable subpopulations [write in]::

: No

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

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

1.7. Does the multisectoral strategy or operational plan include:

a) Formal programme goals?: Yes

b) Clear targets or milestones?: Yes

c) Detailed costs for each programmatic area?: Yes

d) An indication of funding sources to support programme implementation?: No

e) A monitoring and evaluation framework?: No

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

IF ACTIVE INVOLVEMENT, briefly explain how this was organised.: La société civile y compris les PVVIH et les populations clés ont participé à l'élaboration du plan stratégique national et à sa validation qui ont été menée selon une approche participative et inclusive.

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

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

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

IF SOME PARTNERS or NO, briefly explain for which areas there is no alignment/harmonization and why: Ce sont les partenaires du système des Nations Unies qui se sont alignés sur la stratégie à travers l'UNDAF 2007-2011 qui a été étendu jusqu'à 2014 suite à la révolution de 2011. Les partenaires bilatéraux n'ont pas été sollicités.

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

SPECIFIC DEVELOPMENT PLANS:

Common Country Assessment/UN Development Assistance Framework: Yes

National Development Plan: N/A

Poverty Reduction Strategy: No

National Social Protection Strategic Plan: N/A

Sector-wide approach: Yes

Other [write in]:

:

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

HIV-RELATED AREA INCLUDED IN PLAN(S):

Elimination of punitive laws: No

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

Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support: Yes

Reduction of income inequalities as they relate to HIV prevention/ treatment, care and /or support: Yes

Reduction of stigma and discrimination: Yes

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

Women's economic empowerment (e.g. access to credit, access to land, training): Yes

Other [write in]:

:

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

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 plan to strengthen health systems?: Yes

Please include information as to how this has impacted HIV-related infrastructure, human resources and capacities, and logistical systems to deliver medications and children: La réponse est oui bienqu'il n'existe pas encore de plan de renforcement. La Tunisie a entamé depuis 2013 un dialogue National pour la réforme du système de santé. Un état des lieux a été réalisé, des enjeux ont été dégagés et il est planifié de démarrer le dialogue avec les citoyens en avril 2014. La conférence nationale est planifiée pour fin juin 2014 suite à quoi le processus de planification pour une réforme du système de santé va commencer.

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

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

b) HIV Counselling & Testing and Tuberculosis: Many

c) HIV Counselling & Testing and general outpatient care: Few

d) HIV Counselling & Testing and chronic Non-Communicable Diseases: None

e) ART and Tuberculosis: None

f) ART and general outpatient care:

g) ART and chronic Non-Communicable Diseases: None

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

i) Other comments on HIV integration: :

6. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate strategy planning efforts in your country's HIV programmes in 2013?: 7

Since 2011, what have been key achievements in this area: Les réalisations les plus importantes sont: la révision du PSN 2012-2014 et l'élaboration du PSN 2014-2017 actualisé, la révision du plan national de suivi et évaluation qui est en cours et l'élaboration en cours de validation de la stratégie de dépistage du VIH. Toutes ces activités ont démarré en 2013.

What challenges remain in this area: L'implication des autres acteurs nationaux dans la mise en œuvre, le financement et le suivi-évaluation à cause de l'insuffisance d'appropriation du PSN Manque de ressources humaines dans la coordination et le suivi de la mise en œuvre du PSN Difficultés rencontrées dans la gestion des stocks (médicaments, réactifs, seringues etc.)

A.II Political support and leadership

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

A. Government ministers: Yes

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

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

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership: Le chef du gouvernement a rédigé une lettre de soutien pour appuyer la candidature de la Tunisie à l'organisation de la Conférence internationale sur le SIDA et les MST en Afrique (CISMA) en 2015. Le ministre de la santé a présidé une table ronde sur le VIH lors de la célébration de la journée mondiale de lutte contre le sida 2013.

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

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

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

Have terms of reference?: Yes

Have active government leadership and participation?: Yes

Have an official chair person?: Yes

IF YES, what is his/her name and position title?: Professeur Nabil Ben Salah; Directeur Général de la Santé/ Ministère de la Santé

Have a defined membership?: Yes

IF YES, how many members?: 30

Include civil society representatives?: Yes

IF YES, how many?: 5

Include people living with HIV?: Yes

IF YES, how many?: 2

Include the private sector?: Yes

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

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

IF YES, briefly describe the main achievements:: Tous les programmes sont élaborés selon une approche participative et inclusive des différents Intervenants et acteurs.

What challenges remain in this area:: Le comité national de lutte contre le sida est peu fonctionnel. Le manque de ressources humaines au niveau du PNL (Programme de lutte contre le sida) entrave la bonne marche de coordination et de suivi.

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

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

Capacity-building: No

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]:

: No

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

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

IF YES, name and describe how the policies / laws were amended: La loi stipulant l'obligation de déclarer les maladies transmissibles incluant le VIH (loi 92-71 du 27 juillet 1992) a été amendée par l'anonymisation du dépistage volontaire.

Name and describe any inconsistencies that remain between any policies/laws and the National AIDS Control policies:: La consommation des drogues en général et celle des drogues injectables sont des problèmes réels et grandissant

en Tunisie. Tous les plans stratégiques ont comporté des axes d'intervention y relatifs . Mais ceci est confronté à la loi qui punit très sévèrement les consommateurs de drogues et entrave à mise en œuvre de la stratégie de réduction des risques.

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the political support for the HIV programme in 2013?: 5

Since 2011, what have been key achievements in this area:: Décentralisation du suivi immuno/virologique ; Création d'un comité multisectoriel pour l'amélioration de la gestion de stocks

What challenges remain in this area:: Comité national de lutte contre le sida peu fonctionnel Des lois répressives vis à vis des populations clés

A.III Human rights

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

People living with HIV: No

Men who have sex with men: No

Migrants/mobile populations: No

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: No

Prison inmates: Yes

Sex workers: No

Transgender people: No

Women and girls: Yes

Young women/young men: No

Other specific vulnerable subpopulations [write in]:

: No

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

IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws:: La constitution tunisienne garantit les droits humains. Égalité de tous les citoyens en termes de droit au travail, à la protection sociale et devant la loi.

Briefly explain what mechanisms are in place to ensure these laws are implemented:: Les tribunaux; l'inspection du travail

Briefly comment on the degree to which they are currently implemented: Généralement bon et s'est amélioré après la révolution de 2011 qui a donné la liberté à la société civile de surveiller le respect des droits humains et à encourager les citoyens à porter plainte en cas de violation de leurs droits.

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

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

People living with HIV: No

Elderly persons: No

Men who have sex with men: Yes

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: Yes

Prison inmates: Yes

Sex workers: Yes

Transgender people: Yes

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]::

: No

Briefly describe the content of these laws, regulations or policies:: La loi N°92-52 du 18 mai 1992 interdit absolument la consommation de drogues quoique l'article 20 accorde au consommateur la possibilité de suivre un traitement de désintoxication avec La loi N°92-52 du 18 mai 1992 interdit absolument la consommation de drogues quoique l'article 20 accorde au consommateur la possibilité de suivre un traitement de désintoxication avec arrêt des poursuites judiciaires une seule fois ; L'article 230 du code pénal prévoit jusqu'à 3 ans de prison pour sodomie entre adultes consentants (incluant les rapports sexuels entre hommes). L'article 231 dudit code prévoit de 6 mois à 2 ans de prison pour les femmes qui s'offrent aux passants ou se livrent à la prostitution même à titre occasionnel.

Briefly comment on how they pose barriers:: Pour les UDI, la sanction des consommateurs rend l'accès à cette population difficile. La distribution du préservatif dans les prisons et les établissements scolaires est interdite Les éducateurs pairs qui ne sont pas connus par la police, rencontrent des difficultés à mener des actions de prévention de proximité.

A.IV Prevention

1. Does the country have a policy or strategy that promotes information, education and communication (IEC) on HIV to the general population?: Yes

IF YES, what key messages are explicitly promoted?:

Delay sexual debut: Yes

Engage in safe(r) sex: Yes

Fight against violence against women: Yes

Greater acceptance and involvement of people living with HIV: Yes

Greater involvement of men in reproductive health programmes: Yes

Know your HIV status: Yes

Males to get circumcised under medical supervision: No

Prevent mother-to-child transmission of HIV: Yes

Promote greater equality between men and women: Yes

Reduce the number of sexual partners: Yes

Use clean needles and syringes: Yes

Use condoms consistently: Yes

Other [write in]: Traitez toutes les IST

: Yes

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

2. Does the country have a policy or strategy to promote life-skills based HIV education for young people?: No

2.1. Is HIV education part of the curriculum in:

Primary schools?: No

Secondary schools?: Yes

Teacher training?: No

2.2. Does the strategy include

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

b) gender-sensitive sexual and reproductive health elements?: Yes

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

3. Does the country have a policy or strategy to promote information, education and communication and other preventive health interventions for key or other vulnerable sub-populations?: No

Briefly describe the content of this policy or strategy:: Un des quatre axes du PSN 2012-2016 cible la réduction de la transmission du VIH auprès de toutes les populations citées plus haut et prévoit la promotion du dépistage du VIH, l'utilisation du préservatif, l'utilisation de matériel stérile pour le CDI, la communication pour un changement de comportement . La revue annuelle du PSN en 2013 a montré que cet axe a été l'un des axes du PSN le plus mis en oeuvre.

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

People who inject drugs: Condom promotion,HIV testing and counseling,Needle & syringe exchange,Reproductive health, including sexually transmitted infections prevention and treatment,Stigma and discrimination reduction,Targeted information on risk reduction and HIV education

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

Sex workers:

Customers of sex workers:

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

Other populations [write in]:: PVVIH

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

3.2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate policy efforts in support of HIV prevention in 2013?: 7

Since 2011, what have been key achievements in this area:: meilleure connaissance de la cartographie des populations clés ; Meilleur accès aux populations clés; intégration de la proposition systématique du test VIH à toutes les femmes enceintes;

What challenges remain in this area:: - Insuffisance de coordination entre les acteurs de la prévention - Manque de reporting sur les activités réalisées - Qualité de la communication non évaluée

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

IF YES, how were these specific needs determined?: Les différentes évaluations des stratégies mises en place ont permis de dégager des besoins spécifiques allant jusqu'à la révision du PSN.

IF YES, what are these specific needs ? : - Réaliser les Enquêtes sérocomportementales de manière périodique, - Renforcer les activités de dépistage au niveau des centres de conseil et de dépistage anonyme et gratuit (CCDAG) ; - généraliser la stratégie PTME et surtout la proposition systématique du test VIH chez la femme enceinte ; - développer la stratégie Réduction des Risques et la faire adopter;

4.1. To what extent has HIV prevention been implemented?

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

Blood safety: Strongly agree

Condom promotion: Agree

Economic support e.g. cash transfers: Disagree

Harm reduction for people who inject drugs: 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: Disagree

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: Agree

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

Reduction of gender based violence: Strongly disagree

School-based HIV education for young people: Disagree

Treatment as prevention: Strongly disagree

Universal precautions in health care settings: Agree

Other [write in]:

:

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in implementation of HIV prevention programmes in 2013?: 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: - La prise en charge médicale et le suivi immuno-virologique des PVVIH sont prioritaires ; - La prise en charge psychosociale et la lutte contre la discrimination et la

stigmatisation

Briefly identify how HIV treatment, care and support services are being scaled-up?: La Tunisie dispose de 4 pôles universitaires de prise en charge des PVVIH et la réflexion sur la décentralisation est en cours.

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

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

Antiretroviral therapy: Agree

ART for TB patients: Agree

Cotrimoxazole prophylaxis in people living with HIV: Agree

Early infant diagnosis: Agree

Economic support: Agree

Family based care and support: Agree

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

HIV testing and counselling for people with TB: Agree

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

Nutritional care: Strongly disagree

Paediatric AIDS treatment: Agree

Palliative care for children and adults Palliative care for children and adults: Strongly disagree

Post-delivery ART provision to women: Agree

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

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

TB screening for people living with HIV: Strongly agree

Treatment of common HIV-related infections: Strongly agree

Other [write in]:

:

2. Does the government have a policy or strategy in place to provide social and economic support to people infected/affected by HIV?: No

Please clarify which social and economic support is provided: Sans avoir une stratégie structurée et documentée, la Tunisie apporte quand même un soutien économique aux PVVIH et leurs familles assués par le ministère des Affaires Sociales: - Les PVVIH bénéficient d'une carte d'handicapé qui leur permet l'accès aux soins et la gratuité partielle du transport. - Une indemnité mensuelle est octroyée aux familles pauvres. - Les PVVIH reçoivent un appui pour la création d'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?: No

IF YES, for which commodities?:

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care, and support programmes in 2013?: 8

Since 2011, what have been key achievements in this area?: L'augmentation du budget réservé à la prise en charge.

What challenges remain in this area?: Réduire le coût des ARV Meilleur accès aux génériques des ARV Améliorer l'accès aux ARV de 3ème ligne - Difficulté d'accès aux médicaments des IO - Difficulté d'intégration de la prise en charge des migrants et personnes déplacées résidant en Tunisie - Décentralisation de la thérapie anti rétrovirale - Difficulté d'amélioration l'observance

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

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

6.2. IF YES, does the country have a national action plan specifically for orphans and vulnerable children?: No

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2013?: 4

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

What challenges remain in this area?: - Manque d'informations sur les orphelins ; - Insuffisance dans la prise en charge psychosociale et économique

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::

1.1. IF YES, years covered: 2006-2011 élaboré en 2009; En cours d'actualisation en 2014

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:: - Difficulté dans la collecte des données, - L'évaluation a mis en évidence des insuffisances du plan S&E (grand nombre d'indicateurs) - Relâchement des partenaires relatif à l'instabilité qu'a connue la Tunisie depuis la révolution de 2011

2. Does the national Monitoring and Evaluation plan include?

A data collection strategy: Yes

IF YES, does it address::

Behavioural surveys: Yes

Evaluation / research studies: Yes

HIV Drug resistance surveillance: Yes

HIV surveillance: Yes

Routine programme monitoring: Yes

A data analysis strategy: Yes

A data dissemination and use strategy: Yes

A well-defined standardised set of indicators that includes sex and age disaggregation (where appropriate): No

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?: 0

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

Briefly describe any obstacles:: Cette unité est limitée à un chargé de suivi-évaluation, instable vu le turn over du personnel

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?: No

If elsewhere, please specify:

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

POSITION [write in position titles]	Fulltime or Part-time?	Since when?
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POSITION [write in position titles]	Fulltime or Part-time?	Since when?
1 personne	Temps plein	2013

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:: Il n'y a pas de mécanisme défini et fonctionnel. Les partenaires sont contactés pour transmettre leurs rapports. Pas de transmission informatisée des données

What are the major challenges in this area:: - Difficulté d'opérationnalisation du plan S&E est liée aux partenaires qui rapportent plus à l'unité de gestion du programme d'appui du GFATM - Difficulté liée à l'unité de S&E qui manque de ressources humaines, de base de données et d'outils de collecte des données

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

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

6.1. IF YES, does it include information about the content, key populations and geographical coverage of HIV services, as well as their implementing organizations?:

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

6.2. Is there a functional Health Information System?

At national level: No

At subnational level: No

IF YES, at what level(s)?:

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

7.2. Is HIV programme coverage being monitored?: No

(a) IF YES, is coverage monitored by sex (male, female)?: No

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

IF YES, for which population groups?:

Briefly explain how this information is used::

(c) Is coverage monitored by geographical area?: No

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

Briefly explain how this information is used::

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

9. How are M&E data used?

For programme improvement?: Yes

In developing / revising the national HIV response?: Yes

For resource allocation?: Yes

Other [write in]:

: No

Briefly provide specific examples of how M&E data are used, and the main challenges, if any: Les estimations par Spectrum de l'ONUSIDA ont aidé à l'élaboration du plan stratégique national (les orientations), l'élaboration de la stratégie de dépistage VIH; un meilleur ciblage des populations ; Difficulté : non disponibilité de certaines données

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

At national level?: Yes

IF YES, what was the number trained?: 35

At subnational level?: No

IF YES, what was the number trained:

At service delivery level including civil society?: No

IF YES, how many?:

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

IF YES, describe what types of activities: - Dans le cadre de l'évaluation et l'actualisation du plan national de suivi-évaluation, l'analyse des 12 composantes du système de S&E a été réalisée en 2013. L'actualisation du plan S&E est en cours.

11. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the HIV-related monitoring and evaluation (M&E) in 2013?: 4

Since 2011, what have been key achievements in this area?: L'évaluation en 2013 et l'actualisation en cours.

What challenges remain in this area?: Le manque de ressources humaines, la non appropriation des 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: - Les ONGs ont contribué au renforcement de l'engagement politique des principaux leaders et à l'élaboration de stratégies et politiques nationales. Mais la contribution est parfois limitée à cause de l'instabilité politique survenue après la révolution et le manque d'expérience de certaines ONG.

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 été associée dans la formulation des stratégies et politiques nationales à travers la participation dans les différentes étapes de l'élaboration des Plans stratégiques nationaux ainsi que par sa présence au niveau des différentes instances et comités du pays. La réponse Nationale de lutte contre le VIH/sida les IST repose sur une approche multisectorielle et décentralisée qui accorde à chacun des acteurs (public, privé, société civile et partenaires) le rôle qui lui revient dans la lutte contre le SIDA. A cet effet, nous pouvons citer l'exemple de la préparation du nouveau plan stratégique 2012-2016 qui s'est étalée sur une période environ de 12 mois avec l'organisation de six ateliers de réflexion et de consensus avec l'ensemble des partenaires notamment avec la participation de la société civile. Les représentants de la société civile ont été associés dans la mise en place des plans d'action du programme GFATM à travers la participation au niveau des différents groupes de travail chargés de la budgétisation. L'approche participative a été préconisée lors de la préparation du plan opérationnel et les plans sectoriels qui ont été proposés, discutés, consolidés et validés par tous les partenaires

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

a. The national HIV strategy?: 3

b. The national HIV budget?: 3

c. The national HIV reports?: 3

Comments and examples: Concernant la stratégie nationale, les activités des ONGs sont incluses dans la planification et la budgétisation de cette stratégie. Au niveau des activités financées par le GFATM, les ONGs sous bénéficiaires sont responsables de la mise en œuvre des différentes actions de prévention ainsi que de la mesure des indicateurs techniques y afférents. Par contre, les ONGs n'ont aucun impact sur la part du budget de l'Etat réservé à la lutte contre le SIDA.

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

a. Developing the national M&E plan?: 3

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: Le retard de la mise en œuvre du système du S&E de la riposte nationale ainsi que l'absence d'un plan opérationnel pour son fonctionnement est à la cause de plusieurs obstacles qui ont limité en grande partie l'implication de la Société Civile dans le suivi et l'évaluation de la riposte. Ajouté à cela, l'absence des moyens de renforcement des capacités notamment la formation du personnel Pour le programme d'appui du GFATM au titre du Mécanisme Transitoire de Financement, un poste de responsable en S&E au sein des ONGs a été créé au niveau de l'unité S&E du PNLS pour renforcer les capacités des ONGs en matière de S&E. La Société Civile intervient à travers le CCM dans la planification et le suivi des activités rattachées au projet FM. Les données du SE ne sont pas toujours prises en compte dans la prise de décision

5. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is civil society representation in HIV efforts inclusive of diverse organizations (e.g. organisations and networks of people living with HIV, of sex workers, community based organisations, and faith-based organizations)?: 3

Comments and examples: Les ONGs représentant les PVVIH sont impliquées activement dans les étapes de la prise en charge des PVVIH. Les autres populations clés ne sont pas encore suffisamment organisées.

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?: 2

Comments and examples: Depuis la mise en place du financement accordé par le Fonds Mondial, plusieurs ONGs ont bénéficié d'un soutien technique et financier pour la mise en œuvre de leurs activités liées au VIH. Ceci a largement contribué à l'amélioration de la structure des ONGs thématiques. Cependant, ce soutien reste limité à quelques ONGs (qui reçoivent le financement accordé par le GFATM). Pour le reste des ONGs, il existe un manque important dans les ressources humaines, techniques et financières. Par ailleurs, les ONGs thématiques (qui interviennent spécifiquement dans le domaine du VIH) ont réussi au cours de la dernière période à mobiliser des ressources financières autres que celles en provenance du GFATM.

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

Prevention for key-populations:

People living with HIV: 25-50%

Men who have sex with men: 51-75%

People who inject drugs: 51-75%

Sex workers: 51-75%

Transgender people:

Palliative care : <25%

Testing and Counselling: 25-50%

Know your Rights/ Legal services: 25-50%

Reduction of Stigma and Discrimination:

Clinical services (ART/OI): <25%

Home-based care: <25%

Programmes for OVC: <25%

8. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the efforts to increase civil society participation in 2013?: 7

Since 2011, what have been key achievements in this area: - La réforme du CCM assure plus de participation de la société civile - La création des comités issus du CCM (Oversight , gestion des conflits d'intérêt...) composés entre autre par des représentants de la Société Civile. - La réalisation des enquêtes sérocomportementales auprès des populations clés (MSM, UDI et PS) avec la collaboration étroite entre les ONGs thématiques et le MS - La création de 2 ONG de soutien aux PVVIH : Rahma et Dar Essalam - Création de l'OVEDH (Observatoire de l'équité et des droits humains) - Participation dans l'élaboration des requêtes de financement présentées au GFATM. Vu la situation qu' a connu le pays , depuis 2011 et notamment aux frontières, les activités de certaines ONG (CRT, Scouts) ont connu un développement important.

What challenges remain in this area: - l'implication de la Société Civile au niveau des régions (infranational) reste toujours insuffisante. - Les populations clés ne sont pas encore suffisamment organisées du fait d'une discrimination encore perceptible au niveau de la société. - Insuffisance de capacités des ONG notamment en matière de mobilisation de ressources. Difficulté de révision des textes de loi touchant les populations clés (dépénalisation/allègement des peines). - Interdiction de la méthadone dans le traitement de substitution chez les CDI.

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: - Les PVVIH ainsi que les populations clés sont représentées par les ONGs thématiques qui sont impliquées dans la préparation des plans stratégiques nationaux. - Participation des représentants de ces populations aux : CCM, au comité directeur des ONGs et de divers réunions sur le sujet.

B.III Human rights

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

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: Yes

Men who have sex with men: No

Migrants/mobile populations: Yes

Orphans and other vulnerable children: Yes

People with disabilities: Yes

People who inject drugs: No

Prison inmates: Yes

Sex workers: No

Transgender people: No

Women and girls: Yes

Young women/young men: Yes

Other specific vulnerable subpopulations [write in]::

: No

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

Yes

IF YES to Question 1.1 or 1.2, briefly describe the contents of these laws: Ratification des conventions internationales et inscription des droits humains dans la nouvelle constitution

Briefly explain what mechanisms are in place to ensure that these laws are implemented: Projet de mise en place d'une instance provisoire pour le contrôle de la constitutionnalisation des nouvelles lois. La loi relative à la mise en place de cette instance est en cours de délibération au niveau de l'Assemblée Nationale Constituante.

Briefly comment on the degree to which they are currently implemented: L'application de ces lois rencontre des difficultés aussi bien au niveau des juges qu'au niveau des professionnels et des employeurs du secteur privé.

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?

KEY POPULATIONS and VULNERABLE SUBPOPULATIONS:

People living with HIV: No

Men who have sex with men: Yes

Migrants/mobile populations: No

Orphans and other vulnerable children: No

People with disabilities: No

People who inject drugs: Yes

Prison inmates: No

Sex workers: Yes

Transgender people: No

Women and girls: No

Young women/young men: No

Other specific vulnerable populations [write in]:

: No

Briefly describe the content of these laws, regulations or policies: La loi 92/52 punit sévèrement les consommateurs de drogues et accorde une seule chance au consommateur s'il exprime son désir et s'engage à poursuivre une cure de désintoxication. Les articles 230 et 231 du code Pénal prévoient des peines d'emprisonnement à l'encontre des personnes qui pratiquent la sodomie et aux femmes qui s'offrent aux passants.

Briefly comment on how they pose barriers: - La criminalisation limite l'accès de ces populations aux activités de prévention et de prise en charge - Elles renforcent la stigmatisation et la discrimination

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.: - Nouvelle constitution garantit l' « égalité des droits entre l'homme et la femme » - La Tunisie dispose d'un Code du statut personnel de la femme progressiste et unique dans le monde arabe depuis 1959 - Ratification de la convention (CEDAW)

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:: L'axe 3 du plan stratégique national 2012-2016 est réservé au renforcement du cadre juridique et à la promotion des droits humains.

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

IF YES, briefly describe this mechanism:: - l'Observatoire de l'équité et des droits humains est une ONG qui surveille et enregistre les cas de discrimination.

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

Antiretroviral treatment:

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

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

Provided, but only at a cost: No

HIV prevention services:

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

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

Provided, but only at a cost: No

HIV-related care and support interventions:

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

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

Provided, but only at a cost: No

If applicable, which populations have been identified as priority, and for which services?: Seuls les Tunisiens sont pris en charge gratuitement, les étrangers ont accès aux différents services mais de manière payante.

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:: - Les CCDAGs sont ouverts pour toute la population à titre gratuit. - La prise en charge des PVVIH est assurée à titre gratuit aux tunisiens résidant en Tunisie. - 25 centres de dépistage du VIH (CCDAG) sont agréés par l'Etat (Ministère de la Santé) - L'Etat met à la disposition des PVVIH 4 Services médicaux universitaires de Maladies infectieuses (Tunis, Sousse , Sfax et Monastir)

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 totale du dépistage et de la prise en charge des PVVIH sans discrimination. - L'accès aux soins est correcte pour les personnes PVVIH - Pour les autres populations, l'accès équitable est à améliorer

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

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

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

a. Existence of independent national institutions for the promotion and protection of human rights, including human rights commissions, law reform commissions, watchdogs, and ombudspersons which consider HIV-related issues within their work: No

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

IF YES on any of the above questions, describe some examples::

11. In the last 2 years, have there been the following training and/or capacity-building activities:

a. Programmes to educate, raise awareness among people living with HIV and key populations concerning their rights (in the context of HIV)?: Yes

b. Programmes for members of the judiciary and law enforcement⁴⁶ on HIV and human rights issues that may come up in the context of their work?: Yes

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

a. Legal aid systems for HIV casework: No

b. Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV: No

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

IF YES, what types of programmes?:

Programmes for health care workers: Yes

Programmes for the media: Yes

Programmes in the work place: Yes

Other [write in]:

: No

14. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2013?: 7

Since 2011, what have been key achievements in this area?: Organisation d'ateliers de sensibilisation et d'information au profil de personnels de la justice et du Ministère de l'intérieur. Organisation de journées de sensibilisation et d'information pour les leaders d'opinion Organisation d'une journée de sensibilisation pour les décideurs politiques sur les droits de l'homme et la lutte contre la stigmatisation et la discrimination . La nouvelle constitution a instauré la reconnaissance du caractère universel des droits de l'Homme

What challenges remain in this area?: Toujours un problème d'application et de controle Absence de statistiques fiables liées à la non application des lois Les Mass media n'ont pas accompagné la lutte contre la stigmatisation et la promotion de droit de l'homme Dans les conditions, il y a des idéologies multipleset le manque de climat propice

15. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the effort to implement human rights related policies, laws and regulations in 2013?: 3

Since 2011, what have been key achievements in this area?: Des enquêtes ont été ouvertes pour déterminer les responsables en matière d'abus des droits de l'homme.

What challenges remain in this area?: Plusieurs pistes sont au stade de la sensibilisation et ne sont pas encore passées à la concrétisation, particulièrement concernant la discrimination contre les populations clés La conjoncture sociopolitique de la Tunisie post révolution constitue en partie un obstacle pour le respect total des droits de l'homme.

B.IV Prevention

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

IF YES, how were these specific needs determined?: - Dans le cadre du PSN 2012-2016 suite à l'analyse de situation. - À travers des réunions avec tous les concernés :Ministère de la Santé, ONGs ,.....

IF YES, what are these specific needs? : - Elargir la prévention auprès du grand public - Renforcer la sécurité transfusionnelle ; - Promouvoir le dépistage anonyme ; - Améliorer la qualité de l'examen médical pré-nuptial ; - Promouvoir l'utilisation du préservatif - Améliorer la distribution de seringues stériles - Renforcer la stratégie de Prévention de la Transmission Mère Enfant (PTME) - Renforcer les capacités des ONG

1.1 To what extent has HIV prevention been implemented?

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

Blood safety: Strongly agree

Condom promotion: Strongly agree

Harm reduction for people who inject drugs: Agree

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

HIV prevention in the workplace: Disagree

HIV testing and counseling: Agree

IEC on risk reduction:

IEC on stigma and discrimination reduction: Agree

Prevention of mother-to-child transmission of HIV: Agree

Prevention for people living with HIV: Agree

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

Risk reduction for intimate partners of key populations: Disagree

Risk reduction for men who have sex with men: 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 2013?: 7

Since 2011, what have been key achievements in this area:: - Promotion du dépistage - Promotion de l'utilisation du préservatif - Programme d'échange de seringues stériles - Révision et dynamisation de la stratégie PTME - Mise à disposition de la population des tests rapides, des préservatifs

What challenges remain in this area:: La discrimination contre la population clé La prise en charge des PVVIH étrangers - Elargir ces interventions pour toucher plus de jeunes non scolarisés - Le milieu scolaire et universitaire n'est pas touché par des programmes spécifiques réguliers. - Les Mass medias n'ont pas joué leur rôle pour vulgariser une information pertinente. - L'absence de service de soins ambulatoire et de prise en charge des toxicomanes - L'absence d'un observatoire national de toxicomanie - Nombre réduit des ONGs dans le domaine du VIH sida - L'absence de traitement de substitution pour les CDI

B.V Treatment, care and support

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

IF YES, Briefly identify the elements and what has been prioritized:: - Gratuité du traitement - Suivi médical et psychologique des PVVIH - Soutien social des PVVIH par les ONGs

Briefly identify how HIV treatment, care and support services are being scaled-up?: - décentralisation des services hospitaliers prenant en charge les PVVIH. - Extension du traitement aux étrangers en Tunisie

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

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

Antiretroviral therapy: Strongly agree

ART for TB patients: Strongly agree

Cotrimoxazole prophylaxis in people living with HIV: Strongly agree

Early infant diagnosis: Strongly agree

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

HIV testing and counselling for people with TB: Agree

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

Nutritional care: Disagree

Paediatric AIDS treatment: Strongly agree

Post-delivery ART provision to women: Strongly agree

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

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: Strongly agree

TB preventive therapy for people living with HIV: Agree

TB screening for people living with HIV: Strongly agree

Treatment of common HIV-related infections: Strongly agree

Other [write in]: Soins dentaires pour les PVVIH

: Strongly disagree

1.2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2013?: 8

Since 2011, what have been key achievements in this area: - Consensus thérapeutique - Gestion des ARVs

What challenges remain in this area: - Les couts élevés des ARVs - L'extension de soins aux étrangers résidents en Tunisie

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

Yes

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

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

3. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2013?: 7

Since 2011, what have been key achievements in this area:: - La continuation de la prise en charge des PVVIH - Le respect de l'anonymat dans les centres de dépistage

What challenges remain in this area:: La décentralisation de la prise en charge des PVVIH