

## Survey Response Details

### Response Information

**Started:** 12/3/2009 10:12:33 AM

**Completed:** 3/30/2010 4:05:47 PM

**Last Edited:** 4/9/2010 6:40:34 AM

**Total Time:** 117.05:53:14.7900000

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### Response Details

#### Page 1

**1) Country**

Niger (0)

**2) Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:**

Médecin Colonel Kadri MOUNKAILA

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**7) Date of submission:**

Please enter in DD/MM/YYYY format

30/03/2010

#### Page 3

**8) Describe the process used for NCPI data gathering and validation:**

Formation de tous les membres de la taskforce (equipe resteiante) au remplissage du questionnaire. Identification et ventilation du questionnaire aux structures publiques, privées, et des institutions du système des Nations Unies

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

En cas de désaccord, une preuve écrite est demandé ou une argumentation à celui ou la structure qui conteste.

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

1. Le dépouillement de certaines questions qualitatives et leur interpretation peuvent introduire des biais. 2. Les répondants au questionnaire des structures ne sont pas forcément ceux qui connaissent bien la situation de la réponse à l'épidémie du VIH au Niger.

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

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 1	Ministère de la Défense Nationale /FDS	Med Cdt Dodo Boubacar / Coodonnateur Comité Sectoriel FDS	A.I, A.II, A.III, A.IV, A.V

12)

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 2	Ministère de l'Education Nationale	Goumey Younoussi/ Coodonnateur Comité Sectoriel Education	A.I, A.II, A.III, A.IV, A.V
Respondent 3	Ministère des Enseignements Supérieur et Secondaire et de la Recherche	Mme Coulibaly Rahila	A.I, A.II, A.III, A.IV, A.V
Respondent 4	Ministère de la Communication		A.I, A.II, A.III, A.IV, A.V
Respondent 5	Ministère de la Jeunesse et des Sports		A.I, A.II, A.III, A.IV, A.V
Respondent 6	Ministère de la Population et des Reformes Sociales	Mme Mariama	A.I, A.II, A.III, A.IV
Respondent 7	Ministère de la Promotion des jeunes Entrepreneurs et de la Reformes des entreprises publiques	Mme Aminata Ousseini	A.I, A.II, A.III, A.V
Respondent 8	Ministère de l'Economie et des Finances	Mme Chégou Amina	A.I, A.II, A.III, A.V
Respondent 9	Ministère de l'Equipement	Namassa Kané	A.I, A.II, A.III, A.IV, A.V
Respondent 10	Ministère de L'Intérieur de la Sécurité Publique et de la Décentralisation	AdboulKader Garba Moussa	A.I, A.II, A.III, A.V
Respondent 11	Ministère de l'Urbanisme et de l'Habitat	Mme Sadou Aissata Ba	A.I, A.II, A.III, A.IV, A.V

Respondent 12	Ministère du Commerce	Souleymane Mamadou	A.I, A.II, A.III, A.V
Respondent 13	Ministère des Transports et de l'Aviation civile	Mme Hassane Mariama	A. I, A. II, A. III, A. IV, A. V
Respondent 14	Ministère de l'Hydraulique		A.I, A.II, A.III, A.IV, A.V
Respondent 15	Ministère de la Promotion de la Femme et de la Protection de l'Enfant	Mme Iddé Hadiara	A. I, A. II, A. III, A. IV, A. V
Respondent 16	Ministère de la Santé Publique	Issa Kanta /RSE/ULSS	A.I, A.II, A.III, A.IV, A.V
Respondent 17			
Respondent 18			
Respondent 19			
Respondent 20			
Respondent 21			
Respondent 22			
Respondent 23			
Respondent 24			
Respondent 25			

13)

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

Organization Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 1 RAIL/Sida Ibrahim Ngora	B.I, B.II, B.III, B.IV

14)

Organization	Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 2 REFNI		B.I, B.II, B.III, B.IV
Respondent 3 SOLTHIS	Pierre Teissere	B. I, B. II, B. III, B. IV
Respondent 4 TIMDRIA		B.I, B.II, B.III, B.IV
Respondent 5 Mission Française de Coopération		B. I, B. II, B. III, B. IV
Respondent 6 OMS	Dr Habi Gado / Point Focal VIH	B.I, B.II, B.III, B.IV
Respondent 7 ONUSIDA	Dr Eric Verschueren/ UCC	B. I, B. II, B. III, B. IV

Respondent 8	PAM	Bintou Tidjani/ Point Focal VIH	B.I, B.II, B.III, B.IV
Respondent 9	PNUD	Aissa Ouahido/Point Focal VIH	B.I, B.II, B.III, B.IV
Respondent 10	UNFPA	Dr Abdou Aboubacar/Point Focal VIH	B.I, B.II, B.III, B.IV
Respondent 11	UNICEF	Dr Emilie Homawoo / Point Focal VIH	B.I, B.II, B.III, B.IV
Respondent 12	AIVO	Pasteur Mathieu Soalla	B.I, B.II, B.III, B.IV
Respondent 13	ANDDH	Issoufou Abdou Mallam	B.I, B.II, B.III, B.IV
Respondent 14	Banque Mondiale	Djibrilla Karamoko	B.I, B.II, B.III, B.IV
Respondent 15	Cabinet Bozari	Bozari Maman	B.I, B.II, B.III, B.IV
Respondent 16	CADEV	Adamou Boureima	B.I, B.II, B.III, B.IV
Respondent 17	Care International	Dr Fatouma	B.I, B.II, B.III, B.IV
Respondent 18	CODAE		B.I, B.II, B.III, B.IV
Respondent 19	Coopération Technique Belque		B.I, B.II, B.III, B.IV
Respondent 20	Catholic Relief Services	Siddo Adamou Halidou	B.I, B.II, B.III, B.IV
Respondent 21	FAO	Sani Mourtala	B.I, B.II, B.III, B.IV
Respondent 22	GIN/PDSS	Dr Massaoudou Zeinabou	B.I, B.II, B.III, B.IV
Respondent 23	GTZ		B.I, B.II, B.III, B.IV
Respondent 24	Chambre de Commerce, d'Agriculture et d'Industrie du Niger	Jérôme Modi	B.I, B.II, B.III, B.IV
Respondent 25			

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15)

**Part A, Section 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 (0)****Page 7**

16) **Part A, Section I: STRATEGIC PLAN**

**Question 1 (continued)**

**Period covered:**

2008-2012

17)

**1.1 How long has the country had a multisectoral strategy?**

**Number of Years**

8

18)

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

	Included in strategy	Earmarked budget
Health	Yes	Yes
Education	Yes	Yes
Labour	Yes	Yes
Transportation	Yes	Yes
Military/Police	Yes	Yes
Women	Yes	Yes
Young people	Yes	Yes
Other*	Yes	Yes

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19) **Part A, Section I: STRATEGIC PLAN**

**Question 1.2 (continued)**

**If "Other" sectors are included, please specify:**

Agriculture, Finances, Fonction Publique, Justice, Energie et Mines, Tourisme, Commerce et Industrie, Affaires Religieuses

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20)

**Part A, Section I: STRATEGIC PLAN**

**1.3 Does the multisectoral strategy address the following target populations, settings and crosscutting issues?**

<b>Target populations</b>	
a. Women and girls	Yes
b. Young women/young men	Yes
c. Injecting drug users	No

d. Men who have sex with men	No
e. Sex workers	Yes
f. Orphans and other vulnerable children	Yes
g. Other specific vulnerable subpopulations*	Yes

**Settings**

h. Workplace	Yes
i. Schools	Yes
j. Prisons	Yes

**Cross-cutting issues**

k. HIV and poverty	Yes
l. Human rights protection	Yes
m. Involvement of people living with HIV	Yes
n. Addressing stigma and discrimination	Yes
o. Gender empowerment and/or gender equality	Yes

21)

**1.4 Were target populations identified through a needs assessment?**

Yes (0)

**Page 10**

22)

**Part A, Section I: STRATEGIC PLAN****Question 1.4 (continued)****IF YES, when was this needs assessment conducted?**

Please enter the year in yyyy format

2007

**Page 11**

23)

**Part A, Section I: STRATEGIC PLAN****1.5 What are the identified target populations for HIV programmes in the country?**

-Professionnelles de Sexe et leurs clients, -Jeunes 15-24 ans, -Populations mobiles : (Migrants, Routiers, éléments des FDS, miniers), -Population carcérale, -Groupes vulnérables (femmes, orphelins et enfants vulnérables).

24)

**1.6 Does the multisectoral strategy include an operational plan?**

Yes (0)

25)

**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? | Yes |
| e. A monitoring and evaluation framework?                 | Yes |

26)

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

Active involvement (0)

**Page 12**

27)

**Part A, Section I: STRATEGIC PLAN****Question 1.8 (continued)**

**IF active involvement, briefly explain how this was organised:**

Planification décentralisée (départements, régions, national). Pleine participation des secteurs et de la société civile (plan sectoriel). Plusieurs rencontres d'élaboration du Plan National Multisectoriel regroupant les acteurs du public et de la société civile ont eu lieu et le plan a été validée de façon consensuelle.

28)

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

Yes (0)

29)

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

Yes, all partners (0)

**Page 14**

30)

**Part A, Section I: STRATEGIC PLAN**

**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 (0)

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31)

**Part A, Section I: STRATEGIC PLAN****2.1 IF YES, in which specific development plan(s) is support for HIV integrated?**

a. National Development Plan	Yes
b. Common Country Assessment / UN Development Assistance Framework	No
c. Poverty Reduction Strategy	Yes
d. Sector-wide approach	Yes
e. Autres: insérer	

32)

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

HIV-related area included in development plan(s)	
HIV prevention	Yes
Treatment for opportunistic infections	Yes
Antiretroviral treatment	Yes
Care and support (including social security or other schemes)	Yes
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
Women's economic empowerment (e.g. access to credit, access to land, training)	Yes
Autres: insérer	

**Page 16**

33)

**Part A, Section I: STRATEGIC PLAN****3. Has the country evaluated the impact of HIV on its socioeconomic development for planning purposes?**

No (0)

**Page 17**

34)

**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 (0)

**Page 18**

35)

**Part A, Section I: STRATEGIC PLAN**

**4.1 IF YES, which of the following programmes have been implemented beyond the pilot stage to reach a significant proportion of the uniformed services?**

Behavioural change communication	Yes
Condom provision	Yes
HIV testing and counselling	Yes
Sexually transmitted infection services	Yes
Antiretroviral treatment	Yes
Care and support	Yes
Autres: insérer	

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36)

**Part A, Section I: STRATEGIC PLAN****Question 4.1 (continued)**

**If HIV testing and counselling is provided to uniformed services, briefly describe the approach taken to HIV testing and counselling (e.g, indicate if HIV testing is voluntary or mandatory etc):**

Formation du personnel de santé

37)

**5. Does the country have non-discrimination laws or regulations which specify protections for most-at-risk populations or other vulnerable subpopulations?**

Yes (0)

Page 20

38)

**Part A, Section I: STRATEGIC PLAN**

**5.1 IF YES, for which subpopulations?**

a. Women	Yes
b. Young people	Yes
c. Injecting drug users	Yes
d. Men who have sex with men	Yes
e. Sex Workers	Yes
f. Prison inmates	Yes
g. Migrants/mobile populations	Yes
Autres: insérer	

39)

**IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:**

- Loi promulguée en avril 2008 - Vulgarisation de cette loi dans les différents secteurs d'activités - Décrets d'application en voie de finalisation.

40)

**Briefly comment on the degree to which these laws are currently implemented:**

- Décrets d'application en voie de finalisation.

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41)

**Part A, Section I: STRATEGIC PLAN**

**6. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for most-at-risk populations or other vulnerable subpopulations?**

No (0)

**Page 23**

42)

**Part A, Section I: STRATEGIC PLAN**

**7. Has the country followed up on commitments towards universal access made during the High-Level AIDS Review in June 2006?**

Yes (0)

**Page 24**

43)

**Part A, Section I: STRATEGIC PLAN**

**7.1 Have the national strategy and national HIV budget been revised accordingly?**

Yes (0)

44)

**7.2 Have the estimates of the size of the main target populations been updated?**

Yes (0)

**Page 25**

45)

**Part A, Section I: STRATEGIC PLAN****7.3 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 (0)

46)

**7.4 Is HIV programme coverage being monitored?**

Yes (0)

**Page 26**

47)

**Part A, Section I: STRATEGIC PLAN****Question 7.4 (continued)****(a) IF YES, is coverage monitored by sex (male, female)?**

Yes (0)

48)

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

Yes (0)

**Page 27**

49)

**Part A, Section I: STRATEGIC PLAN****Question 7.4 (b) (continued)****IF YES, for which population groups?**

- Jeunes - PS et leurs clients - Femmes - Routiers/camionneurs - Miniers - FDS

50)

**Briefly explain how this information is used:**

Lors des planifications, on tient compte des groupes cibles les plus touchés pour intensifier les actions de prévention.

**Page 28**51) **Part A, Section I: STRATEGIC PLAN****Question 7.4 (continued)****(c) Is coverage monitored by geographical area?**

No (0)

**Page 29**

52)

**7.5 Has the country developed a plan to strengthen health systems, including infrastructure, human resources and capacities, and logistical systems to deliver drugs?**

Yes (0)

**Page 30**

53)

**Part A, Section I: STRATEGIC PLAN**

**Question 7.5 (continued)**

**Overall, how would you rate strategy planning efforts in the HIV programmes in 2009?**

7 (7)

54)

**Since 2007, what have been key achievements in this area:**

- L'élaboration d'un deuxième cadre strategique, d'un plan national multisectoriel, d'un plan national de suivi et évaluation. - Le Renforcement du cadre de concertation VIH-TB, la décentralisation de la PEC médicale.

55)

**What are remaining challenges in this area:**

Il ya encore un certain nombre d'acteurs non alignés sur ces différents documents.

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56)

**Part A, Section II: POLITICAL SUPPORT**

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

President/Head of government	Yes
Other high officials	Yes
Other officials in regions and/or districts	Yes

57)

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

Yes (0)

**Page 32**

58)

**2.1 IF YES, when was it created?**

Please enter the year in yyyy format

2002

59)

**2.2 IF YES, who is the Chair?**

Name	Chef d'Escadron DJIBO Salou
Position/title	, Président du CSRD, Chef de l'Etat

60)

**2.3 IF YES, does the national multisectoral AIDS coordination body:**

have terms of reference?	Yes
have active government leadership and participation?	Yes
have a defined membership?	Yes
include civil society representatives?	Yes
include people living with HIV?	Yes
include the private sector?	Yes
have an action plan?	Yes
have a functional Secretariat?	Yes
meet at least quarterly?	No
review actions on policy decisions regularly?	No
actively promote policy decisions?	Yes
provide opportunity for civil society to influence decision-making?	Yes
strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?	Yes

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61)

**Part A, Section II: POLITICAL SUPPORT****Question 2.3 (continued)**

**If you answer "yes" to the question "does the National multisectoral AIDS coordination body have a defined membership", how many members?**

Please enter an integer greater than or equal to 1

60

62)

**If you answer "yes" to the question "does the National multisectoral AIDS coordination**

**body include civil society representatives", how many?**

Please enter an integer greater than or equal to 1

18

63)

**If you answer "yes" to the question "does the National multisectoral AIDS coordination body include people living with HIV", how many?**

Please enter an integer greater than or equal to 1

4

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64)

**Part A, Section II: POLITICAL SUPPORT**

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

**Yes (0)**

**Page 35**

65)

**Part A, Section II: POLITICAL SUPPORT**

**Question 3 (continued)**

**IF YES, briefly describe the main achievements:**

-Coalisation Nationale des entreprises en cours de mise en place -Implication de la Société Civile dans plusieurs activités

66)

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

Information on priority needs	Yes
Technical guidance	Yes
Procurement and distribution of drugs or other supplies	Yes
Coordination with other implementing partners	Yes
Capacity-building	Yes
Autres: insérer	

67)

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

No (0)

**Page 38**

68)

**Part A, Section II: POLITICAL SUPPORT****Question 6.1 (continued)**

**Overall, how would you rate the political support for the HIV programmes in 2009?**

7 (7)

**Page 39**

69)

**Part A, Section III: PREVENTION**

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

Yes (0)

**Page 40**

70)

**Part A, Section III: PREVENTION**

**1.1 IF YES, what key messages are explicitly promoted?**

Check for key message explicitly promoted (multiple options allowed)

- a. Be sexually abstinent (0)
- b. Delay sexual debut (0)
- c. Be faithful (0)
- d. Reduce the number of sexual partners (0)
- e. Use condoms consistently (0)
- f. Engage in safe(r) sex (0)
- i. Use clean needles and syringes (0)
- j. Fight against violence against women (0)
- k. Greater acceptance and involvement of people living with HIV (0)
- l. Greater involvement of men in reproductive health

programmes (0)

n. Know your HIV status (0)

o. Prevent mother-to-child transmission of HIV (0)

71)

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

Yes (0)

**Page 41**

72)

**Part A, Section III: PREVENTION**

**2. Does the country have a policy or strategy promoting HIV-related reproductive and sexual health education for young people?**

Yes (0)

73)

**2.1 Is HIV education part of the curriculum in:**

primary schools? Yes  
secondary schools? Yes  
teacher training? Yes

74)

**2.2 Does the strategy/curriculum provide the same reproductive and sexual health education for young men and young women?**

Yes (0)

75)

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

Yes (0)

76)

**3. Does the country have a policy or strategy to promote information, education and communication and other preventive health interventions for most-at-risk or other vulnerable sub-populations?**

Yes (0)

**Page 42**

77)

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

Check which specific populations and elements are included in the policy/strategy

Targeted information on risk reduction and HIV education	Sex workers, Clients of sex workers, Prison inmates, Other populations
Stigma and discrimination reduction	Sex workers, Clients of sex workers, Prison inmates, Other populations
Condom promotion	Sex workers, Clients of sex workers, Prison inmates, Other populations
HIV testing and counselling	Sex workers, Clients of sex workers, Prison inmates, Other populations
Reproductive health, including sexually transmitted infections prevention and treatment	Sex workers, Clients of sex workers, Prison inmates, Other populations
Vulnerability reduction (e.g. income generation)	Other populations
Drug substitution therapy	
Needle & syringe exchange	

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**78) Part A, III. PREVENTION**

**Question 3.1 (continued)**

**You have checked one or more policy/strategy for "Other populations". Please specify what are "other populations".**

Jeunes, Populations mobiles : (Migrants, Routiers, éléments des FDS, miniers), Groupes vulnérables (femmes, orphelins et enfants vulnérables).

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79)

**Part A, III. PREVENTION**

**Question 3.1 (continued)**

**Overall, how would you rate the policy efforts in support of HIV prevention in 2009?**

7 (7)

80)

**Since 2007, what have been key achievements in this area:**

Elaboration/revue de la politique nationale PTME Elaboration/revue de la transfusion sanguine

81)

**What are remaining challenges in this area:**

**Page 45**

82)

**Part A, III. PREVENTION**

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

Yes (0)

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83)

**Part A, III. PREVENTION**

**Question 4 (continued)**

**IF YES, how were these specific needs determined?**

A travers l'élaboration du plan national multisectoriel qui a été communal, départemental régional puis national.

84)

**4.1 To what extent has HIV prevention been implemented?**

<b>The majority of people in need have access</b>
---

<b>HIV prevention component</b>	
Blood safety	Agree
Universal precautions in health care settings	Agree
Prevention of mother-to-child transmission of HIV	Agree
IEC* on risk reduction	Agree
IEC* on stigma and discrimination reduction	Agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	Don't agree
Risk reduction for men who have sex with men	Don't agree
Risk reduction for sex workers	Agree
Reproductive health services including sexually transmitted infections prevention and treatment	Agree
School-based HIV education for young people	Agree
HIV prevention for out-of-school young people	Agree
HIV prevention in the workplace	Don't agree
Autres: insérer	

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85)

**Part A, III. PREVENTION**

**Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2009?**

5 (5)

86)

**Since 2007, what have been key achievements in this area:**

- Dépistage VIH au sein des FDS et population générale - Diffusion de messages - Distribution des préservatifs

87)

**What are remaining challenges in this area:**

- Insuffisance des moyens conséquents pour assurer les campagnes de masse - Insuffisance de formation en counselling des agents de santé - Insuffisance de la vulgarisation des lois

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88)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**1. Does the country have a policy or strategy to promote comprehensive HIV treatment, care and support? (Comprehensive care includes, but is not limited to, treatment, HIV testing and counselling, psychosocial care, and home and community-based care).**

Yes (0)

**Page 49**

89)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**1.1 IF YES, does it address barriers for women?**

Yes (0)

90)

**1.2 IF YES, does it address barriers for most-at-risk populations?**

Yes (0)

91)

**2. Has the country identified the specific needs for HIV treatment, care and support services?**

Yes (0)

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92)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT****Question 2 (continued)****IF YES, how were these determined?**

- Estimation des besoins - Renforcement des capacités des agents (Diplôme Inter Universitaire sur le VIH/Sida - Plan de décentralisation de la PEC - Formation d'éducateurs thérapeutiques et d'agents psychosociaux.

93)

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

The majority of people in need  
have access

**HIV treatment, care and support service**

Antiretroviral therapy	Agree
Nutritional care	Agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	Agree
Psychosocial support for people living with HIV and their families	Agree
Home-based care	Don't agree
Palliative care and treatment of common HIV-related infections	Don't agree
HIV testing and counselling for TB patients	Agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	Don't agree
TB infection control in HIV treatment and care facilities	Agree
Cotrimoxazole prophylaxis in HIV-infected people	Agree
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Don't agree
HIV care and support in the workplace (including alternative working arrangements)	Don't agree
Autres programmes: insérer	

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94)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT****3. Does the country have a policy for developing/using generic drugs or parallel importing of drugs for HIV?**

No (0)

95)

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

No (0)

**Page 53**

96)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**Overall, how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2009?**

7 (7)

97)

**Since 2007, what have been key achievements in this area:**

- approvisionnement en MEG même si ça a été ponctué de ruptures - PEC appropriée des patients

98)

**What are remaining challenges in this area:**

- Effectivité de la PEC en milieu communautaire - Approvisionnement régulier en MEG

**Page 54**

99)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

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

No (0)

**Page 57**

100)

**Part A, Section V: MONITORING AND EVALUATION**

**1. Does the country have *one* national Monitoring and Evaluation (M&E) plan?**

Yes (0)

**Page 58**

101)

**1.1 IF YES, years covered:**

**Please enter the start year in yyyy format below**

2008

102) **1.1 IF YES, years covered:  
Please enter the end year in yyyy format below**

2012

103) **1.2 IF YES, was the M&E plan endorsed by key partners in M&E?**

Yes (0)

104) **1.3 IF YES, was the M&E plan developed in consultation with civil society, including people living with HIV?**

Yes (0)

105) **1.4 IF YES, have key partners aligned and harmonized their M&E requirements (including indicators) with the national M&E plan?**

Yes, most partners (0)

**Page 60**

106) **Part A, Section V: MONITORING AND EVALUATION**

**2. Does the national Monitoring and Evaluation plan include?**

a data collection strategy	Yes
a well-defined standardised set of indicators	Yes
guidelines on tools for data collection	Yes
a strategy for assessing data quality (i.e., validity, reliability)	Yes
a data analysis strategy	Yes
a data dissemination and use strategy	Yes

**Page 61**

107) **Part A, Section V: MONITORING AND EVALUATION**

**Question 2 (continued)**  
**If you check "YES" indicating the national M&E plan include a data collection strategy,**

then does this data collection strategy address:

routine programme monitoring	Yes
behavioural surveys	Yes
HIV surveillance	Yes
Evaluation / research studies	Yes

108)

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

Yes (0)

**Page 62**

109)

**Part A, Section V: MONITORING AND EVALUATION**

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

Please enter the rounded percentage (1-100). If the percentage is less than 1, please enter "1".

6

110)

**3.2 IF YES, has full funding been secured?**

No (0)

111)

**3.3 IF YES, are M&E expenditures being monitored?**

Yes (0)

**Page 64**

112)

**4. Are M&E priorities determined through a national M&E system assessment?**

Yes (0)

**Page 65**

113)

**5. Is there a functional national M&E Unit?**

Yes (0)

**Page 66**

114)

**5.1 IF YES, is the national M&E Unit based**

in the National AIDS Commission (or equivalent)? Yes  
 in the Ministry of Health? No  
 ailleurs ? (insérer)

115) **Number of permanent staff:**

Please enter an integer greater than or equal to 0  
 3

116) **Number of temporary staff:**

Please enter an integer greater than or equal to 0  
 0

**Page 67**

117)

**Part A, Section V: MONITORING AND EVALUATION**

**Question 5.2 (continued)**

**Please describe the details of all the permanent staff:**

	Position	Full time/Part time?	Since when? (please enter the year in yyyy format)
Permanent staff 1	Directeur de S&E	Full time	2008
Permanent staff 2	Gestionnaire de Base de Données	Full time	2008
Permanent staff 3	Assistante S&E	Full time	2009
Permanent staff 4			
Permanent staff 5			
Permanent staff 6			
Permanent staff 7			
Permanent staff 8			
Permanent staff 9			
Permanent staff 10			
Permanent staff 11			
Permanent staff 12			
Permanent staff 13			
Permanent staff 14			

Permanent staff  
15

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118)

**Part A, Section V: MONITORING AND EVALUATION**

**5.3 IF YES, are there mechanisms in place to ensure that all major implementing partners submit their M&E data/reports to the M&E Unit for inclusion in the national M&E system?**

Yes (0)

**Page 69**119) **Part A, Section V: MONITORING AND EVALUATION****Question 5.3 (continued)****IF YES, briefly describe the data-sharing mechanisms:**

Les réunions ordinaires programmées et annoncées dans le cadre du suivi et de l'évaluation sont :  
-les réunions de coordination des activités de suivi et d'évaluation, qui regroupent la DSE, les chargés de S&E de niveau régional, les points focaux S&E des secteurs clés ; -les réunions du Groupe Technique de Travail en suivi et évaluation, qui regroupent les membres de cette institution. La Coordination Intersectorielle de Lutte contre les IST/VIH/sida (CISLS) publie tous les trois mois un bulletin d'information, un espace a été réservé pour permettre à la DSE de partager les données avec le grand public. Un portail sera développé par la CISLS et mis en ligne. Ce portail est un site d'Internet qui proposera un moteur de recherche, des liens et des accès à d'autres sites, des annuaires et des groupes de discussions.

**Page 70**

120)

**Part A, Section V: MONITORING AND EVALUATION**

**6. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?**

Yes, meets regularly (0)

121)

**6.1 Does it include representation from civil society?**

Yes (0)

**Page 71**122) **Part A, Section V: MONITORING AND EVALUATION****Question 6.1 (continued)**

**IF YES, briefly describe who the representatives from civil society are and what their role is:**

Réseaux, ONG et Associations  Point focal Suivi et Evaluation RAIL  Point focal Suivi et Evaluation RENIP+  Point focal Suivi et Evaluation ROASEN  Responsable RENSE  Point focal Suivi et Evaluation MVS  Point focal S&E GIN-PDSS  Responsable Suivi et Evaluation ANIMAS  Responsable Suivi et Evaluation SOLTHIS  Point focal VIH Croix Rouge Internationale  Responsable S&E Agence d'encadrement CCISD  Responsable S&E Agence d'encadrement Care Niger  Responsable S&E Agence d'encadrement AFVP/Lafia Matassa  Village SOS-Enfants (1)  AfriCare (1)  World Vision (1)

123)

**7. Is there a central national database with HIV- related data?**

Yes (0)

**Page 72**

124)

**Part A, Section V: MONITORING AND EVALUATION**

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

La DSE/CISLS centralise toutes les données sur la réponse nationale dans la base de données Niger - CRIS3 (Country Response Information System )dont les fonctionnalités sont proches de celles d'un entrepôt de données (datawarehouse). Cette base nationale, en plus du stockage, permet d'importer automatiquement les données venant des différents secteurs et celle venant des niveaux décentralisés afin de faciliter la compilation et la saisie. Cette base de données est gérée au Niveau central par un Gestionnaire de Base de données et au Niveau régional (3 régions pilotes) par les responsables régionaux de suivi évaluation

125)

**7.2 IF YES, does it include information about the content, target populations and geographical coverage of HIV services, as well as their implementing organizations?**

Yes, all of the above (0)

**Page 73**

126)

**7.3 Is there a functional\* Health Information System?**

At national level	Yes
At subnational level	Yes

**Page 74**

**127) Part A, Section V: MONITORING AND EVALUATION**

**For Question 7.2, you have checked "Yes, but only some of the above", please specify what the central database has included.**

**For Question 7.3, you have indicated "Yes" to "subnational level", please specify at what level(s)?**

- Régional - Départemental - Sous-départemental

128)

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

No (0)

129)

**9. To what extent are M&E data used**

**9.1 in developing / revising the national AIDS strategy?:**

4 (4)

130)

**Provide a specific example:**

- Evaluation CSN a permis l'orientation pour le 2e CSN

**Page 75**

131) **Part A, Section V: MONITORING AND EVALUATION**

**9.2 To what extent are M&E data used for resource allocation?**

4 (4)

132)

**Provide a specific example:**

Estimation des besoins en ARV

**Page 76**

133)

**Part A, Section V: MONITORING AND EVALUATION**

**9.3 To what extent are M&E data used for programme improvement?:**

4 (4)

134)

**Provide a specific example:**

**Page 77****135) Part A, Section V: MONITORING AND EVALUATION**

**10. Is there a plan for increasing human capacity in M&E at national, subnational and service-delivery levels?:**

Yes, at all levels (0)

**Page 78**

136)

**10.1 In the last year, was training in M&E conducted**

At national level?	Yes
At subnational level?	No
At service delivery level including civil society?	No

**Page 79****137) Part A, Section V: MONITORING AND EVALUATION**

**Question 10.1 (continued)**

**Please enter the number of people trained at national level.**

Please enter an integer greater than 0

52

**Page 80**

138)

**Part A, Section V: MONITORING AND EVALUATION**

**10.2 Were other M&E capacity-building activities conducted other than training?**

Yes (0)

**Page 81****139) Part A, Section V: MONITORING AND EVALUATION**

**Question 10.2 (continued)**

**IF YES, describe what types of activities:**

- Elaboration (validation) sur les supports de collecte des données du secteur de la santé et la société civile.

**Page 82****140) Part A, Section V: MONITORING AND EVALUATION****Question 10.2 (continued)****Overall, how would you rate the M&E efforts of the HIV programme in 2009?**

7 (7)

141)

**Since 2007, what have been key achievements in this area:**

-Elaboration et validation d'un Plan National de Suivi et d'Evaluation du Cadre Stratégique National de Lutte contre les IST/VIH/sida 2008-2012 incluant (un cadre de performance, un plan de collecte de données, un plan de gestion de la qualité des données, un plan d'analyse et de rapportage des données, un plan de dissémination des données, un plan de mise en œuvre (en fonction des 12 composantes), un budget), -Implémentation au niveau central et au niveau régional (3 régions pilotes) d'une base de données prenant en compte l'ensemble des indicateurs avec le système CRIS3 recommandé par l'ONUSIDA, -Mise en place d'un groupe technique de travail en suivi et évaluation sur le VIH -Elaboration d'un manuel opérationnel de suivi et d'évaluation, -Elaboration d'un plan annuel budgétisé de travail en S&E 2009 en fonction des 12 composantes, -Elaboration d'un guide de gestion des données, -Acquisition de matériels informatiques pour la base de données centrale et pour les régions -Lancement du programme national de Surveillance Sentinelle des IST/VIH -Elaboration des outils de collecte et de rapportage des données - Elaboration Plan de SE du secteur santé

**Page 83**

142)

**Part B, Section I: HUMAN RIGHTS**

**1. Does the country have laws and regulations that protect people living with HIV against discrimination? (including both general non-discrimination provisions and provisions that specifically mention HIV, focus on schooling, housing, employment, health care etc.)**

Yes (0)

**Page 84**

143)

**Part B, Section I. HUMAN RIGHTS**

**1.1 IF YES, specify if HIV is specifically mentioned and how or if this is a general nondiscrimination provision:**

VIH est mentionné.

144)

**2. Does the country have non-discrimination laws or regulations which specify protections for most-at-risk populations and other vulnerable subpopulations?**

Yes (0)

**Page 85**

145)

**Part B, Section I. HUMAN RIGHTS****2.1 IF YES, for which subpopulations?**

a. Women	Yes
b. Young people	Yes
c. Injecting drug users	No
d. Men who have sex with men	No
e. Sex Workers	No
f. prison inmates	No
g. Migrants/mobile populations	No
Autre: insérer	

**Page 86**

146)

**Part B, Section I. HUMAN RIGHTS**

**3. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for most-at-risk populations and other vulnerable subpopulations?**

No (0)

**Page 88**147) **Part B, Section I. HUMAN RIGHTS**

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

Yes (0)

**Page 89**

148)

**Part B, Section I. HUMAN RIGHTS****Question 4 (continued)**

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

cf CSN/ Principes directeurs

149)

**5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, most-at-risk populations and/or other vulnerable subpopulations?**

No (0)

**Page 90**

150)

**6. Has the Government, through political and financial support, involved people living with HIV, most-at-risk populations and/or other vulnerable subpopulations in governmental HIV-policy design and programme implementation?**

Yes (0)

**Page 91**

151)

**Part B, Section I. HUMAN RIGHTS**

**Question 6 (continued)**

**IF YES, describe some examples:**

- Implication des réseaux des acteurs intervenant dans la lutte ainsi que ceux des PVVIH dans l'élaboration des documents nationaux (CSN, Plan multisectoriel, Guide de prise en charge, directives nationales, rédaction des propositions au FM etc.

152)

**7. Does the country have a policy of free services for the following:**

a. HIV prevention services	Yes
b. Antiretroviral treatment	Yes
c. HIV-related care and support interventions	Yes

**Page 92**

153)

**Part B, Section I. HUMAN RIGHTS**

**Question 7 (continued)**

**IF YES, given resource constraints, briefly describe what steps are in place to implement these policies and include information on any restrictions or barriers to**

**access for different populations:**

- Paquet gratuité ne couvrent pas tous examens de suivis, le transport jusqu'aux SP, la PEC nutritionnelle (appui alimentaire limité à quelques sites)

154)

**8. Does the country have a policy to ensure equal access for women and men to HIV prevention, treatment, care and support?**

Yes (0)

**Page 93**

155)

**Part B, Section I. HUMAN RIGHTS**

**8.1 In particular, does the country have a policy to ensure access to HIV prevention, treatment, care and support for women outside the context of pregnancy and childbirth?**

Yes (0)

156)

**9. Does the country have a policy to ensure equal access for most-at-risk populations and/or other vulnerable subpopulations to HIV prevention, treatment, care and support?**

Yes (0)

**Page 94**

157)

**Part B, Section I. HUMAN RIGHTS**

**Question 9 (continued)**

**IF YES, briefly describe the content of this policy:**

Différents groupes à risque ciblés par la politique nationale

158)

**9.1 IF YES, does this policy include different types of approaches to ensure equal access for different most-at-risk populations and/or other vulnerable sub-populations?**

Yes (0)

**Page 95**

159)

**Part B, Section I. HUMAN RIGHTS**

**Question 9.1 (continued)**

**IF YES, briefly explain the different types of approaches to ensure equal access for different populations:**

- cliniques IST/PS et formation de paires éducateurs - formation paires éducateurs / prison

160)

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

Yes (0)

161)

**11.Does the country have a policy to ensure that HIV research protocols involving human subjects are reviewed and approved by a national/local ethical review committee?**

Yes (0)

**Page 96**

162)

**Part B, Section I. HUMAN RIGHTS**

**11.1 IF YES, does the ethical review committee include representatives of civil society including people living with HIV?**

Yes (0)

163)

**IF YES, describe the approach and effectiveness of this review committee:**

Comité nationale qui examine et valide tous protocoles de recherche insistant surtout sur les aspects éthiques/patients

**Page 97**

164)

**– Existence of independent national institutions for the promotion and protection of human rights, including human rights commissions, law reform commissions, watchdogs, and ombudspersons which consider HIV-related issues within their work**

Yes (0)

165)

**– Focal points within governmental health and other departments to monitor HIV-related human rights abuses and HIV-related discrimination in areas such as housing and employment**

No (0)

166)

**– Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts**

No (0)

**Page 98**

167)

**Part B, Section I. HUMAN RIGHTS**

**Question 12 (continued)**

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

- ANNDH dont activités pas spécifiques au VIH - RENIP+ dont un des rôles est la défense des PVVIH

**Page 99**

168)

**Part B, Section I. HUMAN RIGHTS**

**13. In the last 2 years, have members of the judiciary (including labour courts/ employment tribunals) been trained/sensitized to HIV and human rights issues that may come up in the context of their work?**

No (0)

169)

**– Legal aid systems for HIV casework**

No (0)

170)

**– Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV**

No (0)

171)

**– Programmes to educate, raise awareness among people living with HIV concerning their rights**

No (0)

172)

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

Yes (0)

**Page 100**

173)

**Part B, Section I. HUMAN RIGHTS****Question 15 (continued)****IF YES, what types of programmes?**

Media	Yes
School education	Yes
Personalities regularly speaking out	Yes
Autres: insérer	

**Page 101**

174)

**Part B, Section I. HUMAN RIGHTS****Question 15 (continued)****Overall, how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2009?**

6 (6)

175)

**Since 2007, what have been key achievements in this area:**

- élaboration de la loi et vote à l'Assemblée Nationale (Guide juridique)

176)

**What are remaining challenges in this area:**

Suivi du vote du décret d'application

**Page 102**

177)

**Part B, Section I. HUMAN RIGHTS****Question 15 (continued)****Overall, how would you rate the efforts to enforce the existing policies, laws and regulations in 2009?**

8 (8)

178)

**Since 2007, what have been key achievements in this area:**

- CSN - PNM - CSN Communication - PNSE

**Page 103**

179)

**Part B, Section II: CIVIL SOCIETY\* PARTICIPATION**

**1. To what extent has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?**

4 (4)

180)

**Comments and examples:**

Forte implication et mobilisation

**Page 104**

181)

**Part B, Section II. CIVIL SOCIETY PARTICIPATION**

**2. To what extent 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 (4)

182)

**Comments and examples:**

Participation à l'élaboration des planifications et aux ateliers de validation directions nationales

**Page 105**

183)

**a. the national AIDS strategy?**

5 (5)

184)

**b. the national AIDS budget?**

3 (3)

185)

**c. national AIDS reports?**

5 (5)

186)

**Comments and examples:**

Les ONG/Associations tirent l'essentiel de leur financement des partenaires financiers et non de l'Etat

**Page 106**

187)

**a. developing the national M&E plan?**

4 (4)

188)

**b. participating in the national M&E committee / working group responsible for coordination of M&E activities?**

4 (4)

189)

**c. M&E efforts at local level?**

4 (4)

190)

**Comments and examples:**

En matière de S&E il a été mis en pn plus une taskforce avec comme membre la société civile dans sa diversité

**Page 107****191) Part B, Section II. CIVIL SOCIETY PARTICIPATION****5. To what extent is the civil society sector representation in HIV efforts inclusive of diverse organizations (e.g. networks of people living with HIV, organizations of sex workers, faith-based organizations)?**

5 (5)

192)

**Comments and examples:**

Tous les acteurs représentés

**Page 108**

193)

**a. adequate financial support to implement its HIV activities?**

4 (4)

194)

**b. adequate technical support to implement its HIV activities?**

2 (2)

195)

**Comments and examples:**

Les ONG/Associations ont la latitude de chercher des financements auprès de bailleurs. Mais souvent c'est au niveau de l'encadrement technique qu'il y a insuffisance

**Page 109****196) Part B, Section II. CIVIL SOCIETY PARTICIPATION****7. What percentage of the following HIV programmes/services is estimated to be provided by civil society?**

Prevention for youth	<25%
<b>Prevention for most-at-risk-populations</b>	
- Injecting drug users	<25%
- Men who have sex with men	<25%
- Sexworkers	<25%
Testing and Counselling	<25%
Reduction of Stigma and Discrimination	<25%
Clinical services (ART/OI)*	<25%
Home-based care	<25%
Programmes for OVC**	<25%

**Page 110**

197)

**Part B, Section II. CIVIL SOCIETY PARTICIPATION****Question 7 (continued)****Overall, how would you rate the efforts to increase civil society participation in 2009?**

6 (6)

198)

**Since 2007, what have been key achievements in this area:**

Elaboration d'une proposition pour le R9 axé sur la société civile avec un grand volet de renforcement des capacités

199)

**What are remaining challenges in this area:**

Améliorer les compétences et la crédibilité des structures de la société civile

## Page 111

200)

### Part B, Section III: PREVENTION

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

No (0)

## Page 112

201)

#### IF NO, how are HIV prevention programmes being scaled-up?

Le pays sait que la priorité en matière de lutte est la prévention et avant tout la prévention dans les groupes plus exposés au risque, mais cela n'est pas suivi par une analyse concrète des besoins et des actions/activités à mener. Il y a l'intention d'intensifier la prévention à travers les financements recherchés.

202)

#### 1.1 To what extent has HIV prevention been implemented?

The majority of people in need  
have access

##### HIV prevention component

Blood safety	Agree
Universal precautions in health care settings	Agree
Prevention of mother-to-child transmission of HIV	Agree
IEC* on risk reduction	Agree
IEC* on stigma and discrimination reduction	Don't agree
Condom promotion	Agree
HIV testing and counselling	Don't agree
Harm reduction for injecting drug users	Don't agree
Risk reduction for men who have sex with men	Don't agree
Risk reduction for sex workers	Agree
Reproductive health services including sexually transmitted infections prevention and treatment	Don't agree
School-based HIV education for young people	Don't agree
HIV prevention for out-of-school young people	Don't agree
HIV prevention in the workplace	Don't agree
Autres: insérer	

## Page 113

203)

**Part B, Section III: PREVENTION**

**Question 1.1 (continued)**

**Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2009?**

5 (5)

204)

**Since 2007, what have been key achievements in this area:**

La promotion du préservatifs

205)

**What are remaining challenges in this area:**

Le développement d'une vision basée sur la réalité du pays Les financements La prise en compte des besoins spécifiques des différents groupes vulnérables

**Page 114**

206)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

**1. Has the country identified the specific needs for HIV treatment, care and support services?**

Yes (0)

**Page 115**

207)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

**Question 1 (continued)**

**IF YES, how were these specific needs determined?**

Analyse situationnelle du système de santé

208)

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

<b>The majority of people in need have access</b>	
<b>HIV treatment, care and support service</b>	
Antiretroviral therapy	Don't agree
Nutritional care	Don't agree

Paediatric AIDS treatment	Don't agree
Sexually transmitted infection management	Don't agree
Psychosocial support for people living with HIV and their families	Don't agree
Home-based care	Don't agree
Palliative care and treatment of common HIV-related infections	Don't agree
HIV testing and counselling for TB patients	Agree
TB screening for HIV-infected people	Don't agree
TB preventive therapy for HIV-infected people	Don't agree
TB infection control in HIV treatment and care facilities	Don't agree
Cotrimoxazole prophylaxis in HIV-infected people	Agree
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Don't agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Don't agree
HIV care and support in the workplace (including alternative working arrangements)	Don't agree
Autres: insérer	

**Page 116**

209)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT****Question 1.1 (continued)**

**Overall, how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2009?**

7 (7)

210)

**Since 2007, what have been key achievements in this area:**

- Décentralisation régionale - Introduction charge virale

211)

**What are remaining challenges in this area:**

- Passage à l'échelle - Approvisionnement à régulariser et maîtriser

**Page 117**

212)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

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

Yes (0)

**Page 118**

213)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT****2.1 IF YES, is there an operational definition for orphans and vulnerable children in the country?**

Yes (0)

214)

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

Yes (0)

215)

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

Yes (0)

**Page 119**

216)

**Overall, how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2009?**

4 (4)

217)

**Since 2007, what have been key achievements in this area:**

Prise en compte de la question des OEV dans le round 7 du Fonds Mondial/Sida

218)

**What are remaining challenges in this area:**

- Elaborer une politique nationale - Dresser la situation statistique - Impliquer davantage les organisations de la SC.