



**UNAIDS**  
JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

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## Country Situation

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HIV prevalence rates remain very low (0.1%) among the overall population; however, higher rates were registered among sex workers (2.5%). In the Souss Massa region, prevalence rates for this group varied between 5% and 6% since 2001, which is evidence of a concentrated epidemic. The senior level political commitment offers a favorable environment for the response to AIDS through a continuous mobilization of various ministry sectors, and the reinforcement of civil society intervention capacities. The implementation of the 2007-2011 National Strategic Plan, which determined the objectives and targets for “universal access” has been effectively launched. The social communication campaign on AIDS has been sustained and expanded, while the prevention programmes for youths, women, and the populations at high risk of infection (SW, and MSM) have been reinforced. A harm reduction programme targeting IDU has been launched in two cities in addition to a vulnerability reduction in favor of migrant populations. Access to HIV voluntary counseling and testing has made progress thanks to the efforts of the NGOs involved and the Ministry of Health. National testing days were organized in January 2007.

Access to antiretroviral therapy is granted to all diagnosed people living with HIV. The launch of the 6th round of the Global Fund proposal contributed to a significant increase in the funding of partners' activities. The different actions undertaken to date are now considered as best practices in the MEAN region, in particular the social communication campaign, the implementation of the harm reduction programme, outreach interventions for SW, and the activities related to antiretroviral therapy access. An effective coordination network has been established among the international partners, which enabled harmonizing their support initiatives. The challenges that still hinder the implementation of the different initiatives are related to the high illiteracy rates, the difficulty of reaching exposed populations in hard to reach areas or in rural areas, the illegal characteristic of prostitution, as well as the dogma, stigma and discrimination for people living with HIV.

### UNAIDS Support to the National Response

#### **UNAIDS activities at country level during 2007**

UNAIDS and its co-sponsors have made concerted efforts during 2007 to reinforce national leadership for AIDS response, and to assist Morocco in its efforts to achieve universal access to prevention, treatment, care and support services. A new UN integrated plan for the period 2007-2011 has been finalized, and its implementation has been initiated as part of the 2007 workplan.

Efforts have been focused on a better harmonization / alignment of interventions and the implementation of joint actions.

Support actions included mainly:

- ▶ The development of the new National Strategic Plan for the Response to AIDS 2007-2011, and the elaboration of regional plans for the response to AIDS in four priority regions.
- ▶ Technical assistance for the preparation of a harm reduction programme for the benefit of IDU, and its implementation in Tangier and Tetouan
- ▶ A survey and a national workshop on migrant populations' vulnerability to HIV, in preparation for the development of an integrated action plan in this field.
- ▶ The elaboration of specific programmes for the reduction of women's vulnerability in rural areas.
- ▶ The launch of a training programme on human rights and HIV/AIDS based programme development/planning.
- ▶ Expansion of prevention programs targeting in-school and out-of-school youth.
- ▶ Review of epidemiological estimations and projections.
- ▶ Institutionalization of a unified monitoring and evaluation system, and the preparation of the national report to UNGASS.

## **UNAIDS achievements at country level during 2007**

### ***Participation of PLHIV, civil society and other non-state actors***

The development process of the National Strategic Plan – with the assistance of UNAIDS - consisted of an analysis of the previous plan. This process was integrated within a national consultation on the issue of universal access to HIV prevention and care services. Several studies and evaluations have been undertaken to assess the outreach prevention initiatives targeting SW, treatment care and support for people living with HIV, voluntary testing services, and decentralization. The outcome of these consultations and reviews was shared with the different partners. Three sectoral workshops have been organized in collaboration with the Ministry of Education, the Ministry of Youth and the Ministry of Justice; in addition to a situation analysis and AIDS response workshop organized in the region of Souss Massa Draa. The national consensus workshop gathered all national partners to define the main axes of the National Strategy for the period 2007-2011. Quantitative targets for 2007-2011 have been determined for the different axes, including prevention, support and care services. Regional AIDS response plans have been elaborated in 2007, with UNAIDS support, for four priority regions: Grand Casablanca, Marrakech Tensift Al Haouz, Sous Massa Draa, Tanger Tétouan, Tadla Azilal. The process and the timing for the elaboration of the regional plans, which were determined following workshops organized at the national level, include four main steps: 1) situation and response data collection and analysis; 2) organization of an analysis and planning workshop; 3) elaboration of the regional plan and first year action plan; 4) translation of these plans into workplans for the different partner sectors and NGOs.

## **Prevention**

A study conducted by the Ministry of Public Health, in collaboration with UNAIDS and UNODC, in 2005, on a sample of IDU, has revealed the magnitude of this problem and the risk of HIV infection in the different sites where the study was conducted. Based on the results of this study, the National Strategic Plan for the Response to AIDS 2007-2011 has integrated a harm reduction programme for IDU. A harm reduction strategy was elaborated in 2007 with the support of UNAIDS.

A workshop was also held on the introduction of injecting drugs substitute treatment, with the participation of all partners concerned. The objective of this workshop was to build consensus on the products to be used, the modalities to be adopted, and the steps to follow for the implementation of this approach.

The harm reduction programme for IDU will be implemented at a first stage in Tangier and Tetouan. Two local associations, one of which is composed of former drug users, have been created to support the implementation of the programme and to assist in the rehabilitation and social integration efforts. The programme will ensure the distribution of syringes and condoms, the construction and equipment of centres, the provision of methadone substitution treatment, and the development of an outreach prevention strategy. Training was offered to outreach educators, and a mapping process was designed to launch the outreach intervention strategy in the field. The implementation of this strategy is supported through the coordinated assistance of the Global Fund, UNAIDS, GTZ, and the Spanish Cooperation. A number of studies will be conducted as early as January 2008 for the situation analysis of the remaining target sites throughout the country.

### **Main challenges / activities for 2008**

The most important challenge facing the partners in 2008 and beyond is related to the expansion of the coverage of HIV related activities to attain the universal access objectives. Partners' capacity, especially NGOs, is still an issue that calls for the mobilization of new actors in the intervention priority regions. This will require:

- ▶ A serious effort to reinforce partners' capacities, and to encourage the transfer of skills and experiences among partners.
- ▶ Reinforcing decentralization in the priority regions to allow them to independently plan, coordinate, monitor and evaluate their respective interventions.
- ▶ Stronger integration within the development programs and a more active participation of local authorities and communes.
- ▶ Quality assurance of service provision represents another challenge linked to the expansion of interventions, and will require the creation of adequate tools and mechanisms. The mobilization and implication of other governmental sectors and the private sector - medical and non-medical - constitutes another key priority.