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UNGASS - National Composite Policy Index (NCPI) 2007

West and Central Africa

Chad

COUNTRY:

Chad

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2/11/2008

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:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III / A.IV / A.V
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Dr Ali Mahamat MOUSSA, Coordonnateur Adjoint
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.I / A.II / A.III / A.IV / A.V
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Amadou ABDOULAYE, Administrateur Gestionnaire

:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.II
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Yousseuf KADJANGABA, Chargé de Communication
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III / A.IV
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Ibrahim A. MANOUFI, Chargé de Mobilisation Sociale
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.II / A.III
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Abdouwahab SANI, Chargé d'IEC
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Dr Blondin Diop ALIOUNE, Conseiller VIH/SIDA-PNLS/HGRN
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.IV / A.V
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	DAYANG Francois, Gestionnaire Projet PPSAC/PNLS
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.II
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Dr Mangdah Gagnet BARTOUSSIA, Coordonnateur APMS
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III / A.IV
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Rangar DJENADJIM, Chargé des Associations/ONG
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III / A.IV

:	Organisation	Hopital General de Reference National (HGRN)
:	Name/Position	Dr TCHOUMBOU Bertin, Coordonnateur Cellule ARV/HGRN
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.IV / A.V
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Dr Djimadoum MBANGA, Coordonnateur CNTS
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Dr Sile OUAMGUELE, Coordonnatrice PTME
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.III / A.IV
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Dr Khadidja GUIRSSIMI, Chargée gestion stocks ARV
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.IV
:	Organisation	Programme National de Lutte Contre le SIDA
:	Name/Position	Nalga KATIR, Chargée des OEV
:	<p>Respondents to Part A</p> [indicate which parts each respondent was queried on]	A.IV
:	Organisation	Bureau de coordination ONUSIDA-Tchad
:	Name/Position	Dr Claire MULANGA, Coordonnatrice
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	Reseau national des personnes vivant avec le VIH (RNTAP+)
:	Name/Position	GABDOUBE Celestin, Coordonnateur RNTAP+
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	ADAMA TOE, Président

:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Dr DJEMADJI Noel, Point Focal OMS
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.III / B.IV
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Dr Djédouboum KARBET, Point Focal PAM
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.III / B.IV
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Dr Ibrahim FARIA, CTP/UNOPs/PNUD
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Mme BOUKINEBE Melsette, Point Focal PNUD
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.II / B.III
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Toussaint MBAITOUBAM, Point Focal UNFPA
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.III
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Perrine LOOCK, Point Focal UNFPA
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.III
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Dr Tharcienne NDIHOKUBWAYO, Point Focal UNICEF
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.II / B.III / B.IV
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA

:	Name/Position	Dr Morgaye GUEIM, Point Focal UNICEF
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.II / B.III / B.IV
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Néomie JURISIC, Point Focal UNHCR
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Mme Keideur Meelom DINGAMNODJI, Point Focal FAO
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.III / B.IV
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	David CIBONGA, Point Focal OCHA
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.I / B.II / B.III / B.IV
:	Organisation	Membre de l'Equipe Conjointe du SNU sur le SIDA
:	Name/Position	Arsenne ENYEGUE, Dispensaire SNU
:	<p>Respondents to Part B</p> [indicate which parts each respondent was queried on]	B.III / B.IV
Position:	Full time/Part time	Full time
Position:	Full time/Part time	Full time
Position:	Full time/Part time	Full time
Position:	Full time/Part time	Full time
Position:	Full time/Part time	Full time

1. Has the country developed a national multisectoral strategy/action framework to combat AIDS?

Yes

IF YES, period covered:

2007-2011

1.1 How long has the country had a multisectoral strategy/action framework?

5

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

Health:	Strategy/Action framework	Yes
Health:	Earmarked budget	Yes
Education:	Strategy/Action framework	Yes
Education:	Earmarked budget	Yes
Labour:	Strategy/Action framework	Yes
Labour:	Earmarked budget	Yes
Transportation:	Strategy/Action framework	Yes
Transportation:	Earmarked budget	Yes
Military/Police:	Strategy/Action framework	Yes
Military/Police:	Earmarked budget	Yes
Women:	Strategy/Action framework	Yes
Women:	Earmarked budget	Yes
Young people:	Strategy/Action framework	Yes
Young people:	Earmarked budget	Yes
Agriculture:	Strategy/Action framework	Yes
Agriculture:	Earmarked budget	Yes
Finance:	Strategy/Action framework	No
Finance:	Earmarked budget	No
Human Resources:	Strategy/Action framework	Yes
Human Resources:	Earmarked budget	Yes
Justice:	Strategy/Action framework	Yes
Justice:	Earmarked budget	Yes
Minerals and Energy:	Strategy/Action framework	Yes
Minerals and Energy:	Earmarked budget	Yes
Planning:	Strategy/Action framework	Yes
Planning:	Earmarked budget	Yes
Public Works:	Strategy/Action framework	Yes
Public Works:	Earmarked budget	Yes
Tourism:	Strategy/Action framework	No
Tourism:	Earmarked budget	Yes
Trade and Industry:	Strategy/Action framework	No
Trade and Industry:	Earmarked budget	No
Other*::	Strategy/Action framework	Yes
Other*::	Earmarked budget	Yes

1.3 Does the multisectoral strategy/action framework address the following target populations, settings and cross-cutting issues?

a. Women and girls:	Yes
b. Young women/young men:	Yes
c. Specific vulnerable sub-populations:	Yes
d. Orphans and other vulnerable children:	Yes
e. Workplace:	Yes
f. Schools:	Yes
g. Prisons:	Yes
h. HIV, AIDS and poverty:	Yes
i. Human rights protection:	Yes
j. Involvement of people living with HIV:	Yes
k. Addressing stigma and discrimination:	Yes
l. Gender empowerment and/or gender equality:	Yes

1.4 Were target populations identified through a process of a needs assessment or needs analysis?

Yes

IF YES, when was this needs assessment /analysis conducted? Year:

2003

1.5 What are the target populations in the country?

- les femmes commerçantes mobiles;
- les hommes en tenues (militaires, gendarmes et policiers)
- les transporteurs;
- les jeunes;
- les migrants;
- les population en situation d'urgence (réfugiés, IDPs).

1.7 Does the multisectoral strategy/action framework or operational plan include:

a. Formal programme goals? :	Yes
b. Clear targets and/or milestones? :	Yes
c. Detailed budget of costs per programmatic area? :	Yes
d. Indications of funding sources?:	No
e. 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/action framework?

Active involvement

IF active involvement, briefly explain how this was done:

Le processus d'élaboration du cadre stratégique a commencé par des réunions de concertation avec la société civile (les réseaux de jeunes, les PVVIH, les confessions religieuses et les parlementaires). Ces groupes ont activement contribué dans le choix des objectifs à atteindre, les stratégies de lutte et de mise en oeuvre du plan, le choix des indicateurs de suivi et d'évaluation. La mise en oeuvre et le suivi de certaines activités sont confiés à la société civile, en particulier les jeunes, les PVVIH, les confessions religieuses et les parlementaires.

1.9 Has the multisectoral strategy/action framework been endorsed by most external Development Partners (bi-laterals; multi-laterals)?

Yes

1.10 Have external Development Partners (bi-laterals; multi-laterals) aligned and harmonized their HIV and AIDS programmes to the national multisectoral strategy/action framework?

Yes, all partners

**2. Has the country integrated HIV and AIDS into its general development plans such as:
a) National Development Plans,
b) Common Country Assessments/United Nations Development Assistance Framework,
c) Poverty Reduction Strategy Papers,
d) Sector Wide Approach?**

Yes

2.1 IF YES, in which development plans is policy support for HIV and AIDS integrated?

- a) National Development Plans:
- b) Common Country Assessments/United Nations Development Assistance Framework:
- c) Poverty Reduction Strategy Papers:
- d) Sector Wide Approach:

2.2 IF YES, which policy areas below are included in these development plans?

HIV Prevention:	Development Plans	a) / b) / c) / d)
Treatment for opportunistic infections:	Development Plans	a) / b) / c) / d)
Antiretroviral therapy:	Development Plans	a) / b) / c) / d)
Care and support (including social security or other schemes):	Development Plans	a) / b) / c) / d)
AIDS impact alleviation:	Development Plans	a) / b) / c) / d)
Reduction of gender inequalities as they relate to HIV prevention/treatment, care and/or support:	Development Plans	a) / b) / c) / d)
Reduction of income inequalities as they relate to HIV prevention/ treatment, care and /or support:	Development Plans	a) / b) / c) / d)
Reduction of stigma and discrimination:	Development Plans	a) / b) / c) / d)
Women's economic empowerment (e.g. access to credit, access to land, training):	Development Plans	b) / c) / d)

3. Has the country evaluated the impact of HIV and AIDS on its socio-economic development for planning purposes?

Yes

3.1 IF YES, to what extent has it informed resource allocation decisions?

5

4. Does the country have a strategy/action framework for addressing HIV and AIDS issues among its national uniformed services such as military, police, peacekeepers, prison staff, etc?

Yes

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

Behavioural change communication:	Yes
Condom provision :	Yes
HIV testing and counselling(*):	Yes
STI services :	Yes
Treatment:	Yes
Care and support :	Yes

**(*If HIV testing and counselling has been implemented for uniformed services beyond the pilot stage, what is the approach taken?
**

Is it voluntary or mandatory (e.g. at enrolment)? Briefly explain:

Le test de dépistage est volontaire et gratuit. Il est obligatoire pour le recrutement au sein des forces armées. Le Ministère de la Santé Publique vient de publier en 2007 un arrêté qui oblige tous les médecins à proposer systématiquement aux patients un test VIH. Ces derniers sont néanmoins libres d'accepter ou de refuser cette offre.

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

Yes

5.1 Has the National Strategic Plan/operational plan and national AIDS budget been revised accordingly?

Yes

5.2 Have the estimates of the size of the main target population sub-groups been updated?

Yes

5.3 Are there reliable estimates and projected future needs of the number of adults and children requiring antiretroviral therapy?

Estimates and projected needs

5.4 Is HIV and AIDS programme coverage being monitored?

Yes

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

Yes

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

Yes

IF YES, which population sub-groups?

- les travailleuses du sexe;
- les femmes commerçantes mobiles;
- les hommes en tenues (militaires, gendarmes et policiers)
- les transporteurs;
- les jeunes;
- les migrants;
- les population en situation d'urgence (réfugiés, IDPs).

(c) IF YES, is coverage monitored by geographical area?

Yes

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

Province

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

Yes

Overall, how would you rate strategy planning efforts in the HIV and AIDS programmes in 2007 and in 2005?

2007:	7
2005:	6

Comments on progress made in strategy planning efforts since 2005:

Il existe une volonté réel de planification du Cadre Stratégique National qui se traduit par des évaluations annuelles permanentes et régulières.

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

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

2. Does the country have an officially recognized national multisectoral AIDS management/coordination body? (National AIDS Council or equivalent)?

Yes

2.1 IF YES, when was it created? Year:

2007

2.2 IF YES, who is the Chair?

Name: Le CNLS n'est pas encore opérationnel

3. Does the country have a national AIDS body or other mechanism that promotes interaction between government, people living with HIV, civil society and the private sector for implementing HIV and AIDS strategies/ programmes?

Yes

3.1 IF YES, does it include?

Terms of reference :	Yes
Defined membership :	Yes
Action plan :	Yes
Functional Secretariat :	Yes
Regular meetings (*):	Yes

(*If it does include regular meetings, what is the frequency of the meetings:

Tous les 2 mois

IF YES, What are the main achievements?

Elaboration des textes de politique en matière de VIH notamment le Cadre Stratégique National, le Décret portant lutte contre le VIH et la protection des personnes vivant avec le VIH, le Décret instituant le CNLS et la publication du CRIS du Tchad en 2007.

IF YES, What are the main challenges for the work of this body?

Les défis à relever sont entre autres l'opérationnalisation du cadre institutionnel de coordination de la lutte contre le SIDA, l'harmonisation des indicateurs de suivi et évaluation et le manque du plan opérationnel de suivi et évaluation.

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

Non applicable

5. What kind of support does the NAC (or equivalent) provide to implementing partners of the national programme, particularly to civil society organizations?

Information on priority needs and services :	Yes
Technical guidance/materials:	Yes
Drugs/supplies procurement and distribution :	Yes
Coordination with other implementing partners :	Yes
Capacity-building :	Yes

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

No

Overall, how would you rate the political support for the HIV and AIDS programmes in 2007 and in 2005?

2007:	7
2005:	6

Comments on progress made in political support since 2005:

Le soutien politique se traduit par les actions suivantes du Gouvernement:

- La mise à disposition par le trésor public de plus de 1 milliard de Francs CFA pour l'achat des ARV et des réactifs;
- la gratuité des ARV qui a permis de mettre sous traitement plus de 7000 patients;
- La formation de plus de 70 prescripteurs des ARV;
- L'adoption du Cadre stratégique national 2007-2011 et le plan multisectoriel 2007-2009 ainsi que le rattachement à la primature du cadre institutionnel de la lutte le VIH/SIDA;
- La gratuité des examens biologiques et des médicaments pour la prise des infections opportunistes;
- L'extension des centres de dispensation des ARV;
- La prise en charge des orphelins.

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

Yes

1.1 IF YES, what key messages are explicitly promoted?

Be sexually abstinent:

Delay sexual debut:

Be faithful:

Reduce the number of sexual partners:

Use condoms consistently:

Engage in safe(r) sex:

Use clean needles and syringes:

Fight against violence against women:

Greater acceptance and involvement of people living with HIV:

Greater involvement of men in reproductive health programmes:

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 promoting HIV-related reproductive and sexual health education for young people?

Yes

2.1 Is HIV education part of the curriculum in

primary schools? : Yes

secondary schools? : Yes

teacher training? : Yes

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

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 (IEC) and other preventive health interventions for vulnerable sub-populations?

Yes

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

Targeted information on risk reduction and HIV education:	Sex workers
Targeted information on risk reduction and HIV education:	Clients of sex workers
Targeted information on risk reduction and HIV education:	Prison inmates
Targeted information on risk reduction and HIV education:	Other sub-populations (*)
Stigma & discrimination reduction:	Sex workers
Stigma & discrimination reduction:	Clients of sex workers
Stigma & discrimination reduction:	Prison inmates
Condom promotion:	Sex workers
Condom promotion:	Clients of sex workers
Condom promotion:	Prison inmates
Condom promotion:	Other sub-populations (*)
HIV testing & counselling:	Sex workers
HIV testing & counselling:	Clients of sex workers
HIV testing & counselling:	Prison inmates
HIV testing & counselling:	Other sub-populations (*)
Reproductive health, including STI prevention & treatment:	Sex workers
Reproductive health, including STI prevention & treatment:	Clients of sex workers
Reproductive health, including STI prevention & treatment:	Prison inmates
Reproductive health, including STI prevention & treatment:	Other sub-populations (*)
Vulnerability reduction (e.g. income generation):	Sex workers
Vulnerability reduction (e.g. income generation):	Other sub-populations (*)

(*If Other sub-populations, indicate which sub-populations

Il s'agit des migrants, des transporteurs, les femmes commercantes mobiles, et de la population en situation d'urgence (réfugiés et les IDPs)

Overall, how would you rate policy efforts in support of HIV prevention in 2007 and in 2005?

2007:	8
2005:	6

Comments on progress made in policy efforts in support of HIV prevention since 2005:

Ces dernières années, il y a une prise de conscience de la population générale par rapport au risque d'infection au VIH. Un relatif changement de comportement commence à s'observer.

4. Has the country identified the districts (or equivalent geographical/ decentralized level) in need of HIV prevention programmes?

Yes

IF YES, to what extent have the following HIV prevention programmes been implemented in identified districts* in need?

Blood safety:	The activity is available in	all districts* in need
Universal precautions in health care settings:	The activity is available in	some districts* in need
Prevention of mother-to-child transmission of HIV:	The activity is available in	some districts* in need
IEC on risk reduction:	The activity is available in	all districts* in need
IEC on stigma and discrimination reduction:	The activity is available in	most districts* in need
Condom promotion:	The activity is available in	most districts* in need
HIV testing & counselling:	The activity is available in	most districts* in need
Harm reduction for injecting drug users:	The activity is available in	N/A
Risk reduction for men who have sex with men:	The activity is available in	N/A
Risk reduction for sex workers:	The activity is available in	most districts* in need
Programmes for other vulnerable subpopulations:	The activity is available in	most districts* in need
Reproductive health services including STI prevention & treatment:	The activity is available in	most districts* in need
School-based AIDS education for young people:	The activity is available in	some districts* in need
Programmes for out-of-school young people:	The activity is available in	some districts* in need
HIV prevention in the workplace:	The activity is available in	some districts* in need

Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2007 and in 2005?

2007:	7
2005:	7
2007:	7
2005:	5

Comments on progress made in the implementation of HIV prevention programmes since 2005:

Un relâchement est observé dans les activités de prévention depuis le déclenchement des activités de prise en charge médicale au Tchad.

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

1.1 IF YES, does it give sufficient attention to barriers for women, children and most-at-risk populations?

Yes

2. Has the country identified the districts (or equivalent geographical/decentralized level) in need of HIV and AIDS treatment, care and support services?

Yes

IF YES, to what extent have the following HIV and AIDS treatment, care and support services been implemented in the identified districts* in need?

Antiretroviral therapy:	The service is available in	most districts* in need
Nutritional care:	The service is available in	some districts* in need
Paediatric AIDS treatment:	The service is available in	some districts* in need
Sexually transmitted infection management:	The service is available in	all districts* in need
Psychosocial support for people living with HIV and their families:	The service is available in	some districts* in need
Home-based care:	The service is available in	some districts* in need
Palliative care and treatment of common HIV-related infections:	The service is available in	most districts* in need
HIV testing and counselling for TB patients:	The service is available in	most districts* in need
TB screening for HIV-infected people:	The service is available in	some districts* in need
TB preventive therapy for HIV-infected people:	The service is available in	some districts* in need
TB infection control in HIV treatment and care facilities:	The service is available in	all districts* in need
Cotrimoxazole prophylaxis in HIV-infected people:	The service is available in	most districts* in need
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape):	The service is available in	some districts* in need
HIV treatment services in the workplace or treatment referral systems through the workplace:	The service is available in	some districts* in need
HIV care and support in the workplace (including alternative working arrangements):	The service is available in	N/A
Antiretroviral therapy:	The service is available in	most districts* in need
Nutritional care:	The service is available in	some districts* in need

Paediatric AIDS treatment:	The service is available in	some districts* in need
Sexually transmitted infection management:	The service is available in	all districts* in need
Psychosocial support for people living with HIV and their families:	The service is available in	some districts* in need
Home-based care:	The service is available in	some districts* in need
Palliative care and treatment of common HIV-related infections:	The service is available in	most districts* in need
HIV testing and counselling for TB patients:	The service is available in	most districts* in need
TB screening for HIV-infected people:	The service is available in	some districts* in need
TB preventive therapy for HIV-infected people:	The service is available in	some districts* in need
TB infection control in HIV treatment and care facilities:	The service is available in	all districts* in need
Cotrimoxazole prophylaxis in HIV-infected people:	The service is available in	most districts* in need
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape):	The service is available in	some districts* in need
HIV treatment services in the workplace or treatment referral systems through the workplace:	The service is available in	some districts* in need
HIV care and support in the workplace (including alternative working arrangements):	The service is available in	N/A

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

Yes

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

No

Overall, how would you rate the efforts in the implementation of HIV treatment, care and support services in 2007 and in 2005?

2007:	8
2005:	5

Comments on progress made since 2005:

Par rapport a 2005, il y a une accélération dans les activités de prise en charge médicale compte tenu de la gratuité des ARV.

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

Yes

5.1 IF YES, is there an operational definition for OVC in the country?

Yes

5.2 IF YES, does the country have a national action plan specifically for OVC?

Yes

5.3 IF YES, does the country have an estimate of OVC being reached by existing interventions?

Yes

IF YES, what percentage of OVC is being reached?

5,8

Overall, how would you rate the efforts to meet the needs of orphans and other vulnerable children?

2007: 5

2005: 3

Comments on progress made in efforts to meet the needs of OVC since 2005:

Beaucoup reste à faire en ce qui concerne la prise en charge des orphelins au Tchad malgré les efforts consentis depuis 2005.

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

In Progress

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

In progress

4. Is there a functional M&E Unit or Department?

In Progress

4.3 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/Department for review and consideration in the country's national reports?

Yes

IF YES, does this mechanism work? What are the major challenges?

Les difficultés demeurent l'harmonisation des indicateurs de suivi et évaluation et le manque de plan opérationnel de suivi et évaluation.

4.4 IF YES, to what degree do UN, bi-laterals, and other institutions share their M&E results?

3

5. Is there an M&E Committee or Working Group that meets regularly to coordinate M&E activities?

No

5.1 Does it include representation from civil society, including people living with HIV?

No

6.3 Is there a functional Health Information System (HIS)?

National level : Yes

Sub-national level (*): Yes

(*)If there is a functional sub-national HIS, at what level(s) does it function?

Au niveau régional

7. To what extent are M&E data used in planning and implementation?

3

What are examples of data use?

- Planification et gestion/approvisionnement des stocks des ARV;
- Planification des formations pour le renforcement des capacités;
- Extension des CDV;
- Elaboration des programmes pour les groupes et les zones vulnérables.

What are the main challenges to data use?

- Le manque d'un mécanisme et d'un système de suivi opérationnel;
- La complétude des données.

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

At national level? : No

At sub-national level? : No

Including civil society? : No

Overall, how would you rate the M&E efforts of the AIDS programme in 2007 and in 2005?

2007: 3

2005: 1

Comments on progress made in M&E since 2005:

- Cadre de suivi et évaluation élaboré en 2007;
- Plan de suivi et évaluation développé en 2007;
- Formations pour le renforcement des capacités planifiées en 2007;
- Révision du cadre stratégique national 2007-2011 et le plan opérationnel 2007-2009.

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

Yes

1.1 IF YES, specify:

Promulgation en novembre 2007 de la Loi portant lutte contre le VIH et la protection des personnes vivant avec le VIH.

2. Does the country have non-discrimination laws or regulations which specify protections for vulnerable sub-populations?

Yes

2.1 IF YES, for which sub-populations?

Women:	Yes
Young people :	Yes
Sex Workers :	Yes
Prison inmates :	Yes
Migrants/mobile populations :	Yes
Other::	Yes

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

Les mécanismes mis en place pour l'application de la Loi portant lutte contre le VIH et la protection des personnes vivant avec le VIH sont détaillées dans le plan opérationnel de mise déjà élaboré.

IF YES, Describe any systems of redress put in place to ensure the laws are having their desired effect:

Les juridictions tchadiennes et cliniques juridiques de l'observatoire des droits humains mis en place la Ligue Tchadienne des Droits de l'Homme (LTDH) peuvent des voies de recours pour que la loi ait l'effet désiré.

3. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for vulnerable sub-populations?

No

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

Yes

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

Yes

IF YES, briefly describe this mechanism

Ce travail est assuré par les cliniques juridiques implantées sur le territoire national par la Ligue Tchadienne des Droits de l'Homme (LTDH). Il y a également les associations des PVVIH qui jouent un rôle important de sensibilisation pour la lutte contre la discrimination.

6. Has the Government, through political and financial support, involved most-at-risk populations in governmental HIV-policy design and programme implementation?

Yes

IF YES, describe some examples

Les lois, politiques et l'ensemble des textes ayant trait au VIH au Tchad ont été élaborés avec la pleine participation des populations les plus à risque. On peut citer entre autres la loi portant lutte contre le VIH et la protection des PVVIH et l'élaboration de la proposition du Tchad pour la soumission au Fonds Mondial.

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

HIV prevention services :	Yes
Anti-retroviral treatment :	Yes
HIV-related care and support interventions :	Yes

IF YES, given resource constraints, briefly describe what steps are in place to implement these policies:

- L'augmentation substantielle du budget du Ministère de la Santé Publique;
- Instauration d'une taxe sur le tabac et les boissons alcoolisées;
- Affectation d'une quote part du fonds pétrolier.

8. Does the country have a policy to ensure equal access for women and men, to prevention, treatment, care and support? In particular, to ensure access for women outside the context of pregnancy and childbirth?

Yes

9. Does the country have a policy to ensure equal access for most-at-risk populations to prevention, treatment, care and support?

Yes

9.1 Are there differences in approaches for different most-at-risk populations?

Yes

IF YES, briefly explain the differences:

En matière de prévention, les approches varient en fonction des groupes vulnérables prioritaires. Quand il est question par exemple d'aborder les travailleuses du sexe, l'accent est mis sur le port du préservatif lors des rapports sexuels. Il en est de même pour des personnes ayant des rapports extra-conjugaux. Au meilleur des cas c'est la fidélité réciproque qui est conseillée aux couples. Pour les jeunes, il leur est conseillé l'abstinence pour éviter les rapports sexuels précoces qui sont à haut risque. Pour les jeunes qui ne peuvent pas s'abstenir, le port du préservatif est également recommandé. Pour la population générale, il leur est conseillé d'éviter les contacts avec les objets souillés, l'usage multiple des seringues et de se protéger lors des rapports sexuels à risque.

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

Yes

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

No

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

- 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

- 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: Yes

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

- Performance indicators or benchmarks for reduction of HIV-related stigma and discrimination: No

13. Have members of the judiciary (including labour courts/employment tribunals) been trained/sensitized to HIV and AIDS and human rights issues that may come up in the context of their work?

Yes

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

Legal aid systems for HIV and AIDS casework: Yes

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

Programmes to educate, raise awareness among people living with HIV concerning their rights: Yes

15. Are there programmes designed to change societal attitudes of stigmatization associated with HIV and AIDS to understanding and acceptance?

Yes

IF YES, what types of programmes?

Media : Yes

School education : Yes

Personalities regularly speaking out : Yes

Overall, how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV and AIDS in 2007 and in 2005?

2007: 8

2005: 5

Comments on progress made in promoting and protecting human rights in relation to HIV and AIDS since 2005:

Plaidoyer ayant abouti a l'adoption par l'Assemblée Nationale de la Loi portant lutte contre le VIH et la protection des personnes vivant avec le VIH.

Overall, how would you rate the effort to enforce the existing policies, laws and regulations in relation to human rights and HIV and AIDS in 2007 and in 2005?

2007: 8

2005: 5

Comments on progress made in enforcing existing policies, laws and regulations in relation to human rights and HIV and AIDS since 2005:

Plaidoyer de toutes les confessions religieuses et des leaders d'opinion en direction de l'Assemblée Nationale pour l'adoption de la Loi portant lutte contre le VIH et la protection des personnes vivant avec le VIH.

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

4

2. To what extent have civil society representatives been involved in the planning and budgeting process for the National Strategic Plan on AIDS or for the current activity plan (e.g. attending planning meetings and reviewing drafts)

5

3. To what extent are the services provided by civil society in areas of HIV prevention, treatment, care and support included

a. in both the National Strategic plans and national reports?: 4

b. in the national budget?: 2

4. Has the country included civil society in a National Review of the National Strategic Plan?

Yes

IF YES, when was the Review conducted? Year:

2005

5. To what extent is the civil society sector representation in HIV-related efforts inclusive of its diversity?

4

List the types of organizations representing civil society in HIV and AIDS efforts:

- Le reseau national des personnes vivant le VIH (RNTAP+);
- La Ligue Tchadienne des Droits de l'Homme;
- Comité Episcopal de lutte contre le SIDA;
- Le Reseau National des personnes vivant avec le VIH (RNTAP+);
- Reseau des femmes parlementaires et ministres de lutte contre le SIDA;
- Le comité national de lutte contre le SIDA (CONALUS);
- Le comité national des jeunes pour le lutte contre le SIDA (CONAJELUS);
- La Coordination des Associations féminines de lutte contre le SIDA (CAFELS);
- Les Coordination régionales de lutte contre le SIDA;
- Association Tchad Non-violence.

6. To what extent is civil society able to access

- | | |
|---|---|
| a. adequate financial support to implement its HIV activities?: | 3 |
| b. adequate technical support to implement its HIV activities?: | 3 |

Overall, how would you rate the efforts to increase civil society participation in 2007 and in 2005?

- | | |
|-------|---|
| 2007: | 7 |
| 2005: | 5 |

Comments on progress made in increasing civil society participation since 2005:

Accroissement du nombre des partenaires qui appuient la société civile dans la lutte contre le SIDA au Tchad.

1. Has the country identified the districts (or equivalent geographical/decentralized level) in need of HIV prevention programmes?

Yes

IF YES, to what extent have the following HIV prevention programmes been implemented in identified districts in need?

Blood safety:	The service is available in	all districts* in need
Universal precautions in health care settings:	The service is available in	some districts* in need
Prevention of mother-to-child transmission of HIV:	The service is available in	some districts* in need
IEC on risk reduction:	The service is available in	all districts* in need
IEC on stigma and discrimination reduction:	The service is available in	most districts* in need
Condom promotion:	The service is available in	most districts* in need
HIV testing & counselling:	The service is available in	most districts* in need
Harm reduction for injecting drug users:	The service is available in	N/A
Risk reduction for men who have sex with men:	The service is available in	N/A
Risk reduction for sex workers:	The service is available in	most districts* in need
Programmes for other vulnerable sub-populations:	The service is available in	most districts* in need
Reproductive health services including STI prevention & treatment:	The service is available in	most districts* in need
School-based AIDS education for young people:	The service is available in	some districts* in need
Programmes for out-of-school young people:	The service is available in	some districts* in need
HIV prevention in the workplace:	The service is available in	some districts* in need

1. Has the country identified the districts (or equivalent geographical/decentralized level) in need of HIV and AIDS treatment, care and support services?

Yes

Overall, how would you rate the efforts in the implementation of HIV treatment, care and support services in 2007 and in 2005?

2007:	7
2005:	5

Comments on progress made in the implementation of HIV treatment, care and support services since 2005:

En 2007, il y a une amélioration dans la prise en charge par rapport a 2005 compte tenu de la gratuité des ARV.

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

Prevention for youth :	51-75%
Prevention for sex workers :	51-75%
Clinical services (OI/ART)* :	<25%
Home-based care :	>75%
Programmes for OVC** :	51-75%

3. Does the country have a policy or strategy to address the additional HIV and AIDS-related needs of orphans and other vulnerable children (OVC)?

Yes

3.1 IF YES, is there an operational definition for OVC in the country?

Yes

3.2 IF YES, does the country have a national action plan specifically for OVC?

Yes

3.3 IF YES, does the country have an estimate of OVC being reached by existing interventions?

Yes

IF YES, what percentage of OVC is being reached?

5,8

Overall, how would you rate the efforts to meet the needs of orphans and other vulnerable children?

2007: 6

2005: 3

Comments on progress made since 2005:

A ses débuts, la prise en charge des orphelins était assurée par le financement du Fonds Mondial. Avec la suspension des activités du Fonds Mondial, elle est assurée par la Banque Mondiale à travers le PPLS2 puis par l'Etat à travers le Ministère de l'Action Sociale, de la Famille et de la Solidarité Nationale.

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