

Côte d'Ivoire

Title

Plan Strategique National de Lutte Contre le SIDA
National Plan Against AIDS

Date of Plan

2000-2004

Contributors

Ministry of Health, WHO, UNDP, UNFPA, UNICEF, UNESCO, BM, National Program Against AIDS (PNSL/MST/TUB), NGOs, La Coopération Belge, La Coopération Française, La Coopération Canadienne, La Coopération Allemande (GTZ), L'IRD, Le Project RETRO-CI, Le COSCI, Le SPFS, and others.

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National Strategic Plan Against AIDS

I. Introduction

A. Summary

According to the United Nations Population Division, Côte d'Ivoire's population in 1999 was 14,526,000. Adults, aged 15 to 49, the group most likely to engage in high-risk behavior for HIV infection, represented approximately 47 percent of the total population. The HIV prevalence rate among this group was estimated by UNAIDS to be 10.76 percent. By the end of 1999, 760,000 adults and children were living with HIV and AIDS in Côte d'Ivoire and more than 420,000 children had been orphaned due to AIDS.

In response to the epidemic, Côte d'Ivoire developed Plan Strategique National de Lutte Contre le SIDA, 2000-2004 (National Program Against AIDS). According to our overview of this plan, Côte d'Ivoire has developed strategies and programs in 18 different areas to address the epidemic. Some examples of those activities are programs that focus on poverty, gender issues, human rights, orphans, and mother-to-child transmission of HIV. Special programs have been developed to target youth, women and commercial sex workers.

B. Background

From December 1998 to July 1999, 15 national consultants conducted an analysis of the situation of AIDS in Côte d'Ivoire. This work was the bases for the development of this National Strategic Plan Against AIDS (June-July 1999).

The strategic plan for AIDS, 2000 to 2004, defines the following general priorities:

- Reduce incidence of HIV among 15 to 24 years old by 2004;
- Decrease cultural and economic vulnerability of women;
- Provide ARV protocol for prevention of vertical transmission to 25% of seropositive women;
- Provide early diagnosis and syndromic management of STD;
- Provide clinical management and psychosocial support to PLWA and patients with TB;
- Improve access to condoms;
- Reduce transmission of HIV/STD among commercial sex workers and their clients;
- Reduce social and economic impact of HIV; and
- Establish education programs on HIV risk, that considers traditional practices.

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II. Goals of the Plan

A. Instructions

This grid is intended to outline the priorities set forward by national HIV and AIDS plans of several sub-Saharan African countries. The goals of each plan were assessed by Harvard AIDS Institute researchers according to "Critical Areas of Concern" and categorized with respect to the type(s) of "Intervention(s)" planned for each area. The Critical Areas of Concern and the Intervention categories were developed by researchers and faculty at the Harvard AIDS Institute. Please see Appendix A for definitions of these terms.

The areas which are marked as a "Priority" in this grid have a corresponding paragraph, quoted directly from the national plan, so that one can read the goal as it is stated in the plan. In order to view these quotes, simply click on the word "Priority."

On printed versions of this document, please locate the coordinates of the Priority on the grid using the line number in the far left column and the letter of the Intervention in the top row. Combining these coordinates will give you a Priority reference number. Please proceed to the following pages, Section II C, List of Priorities, to find the appropriate Priority reference number and the corresponding quote.

B. Grid of Priorities

Critical Areas of Concern		Interventions			
		A.	B.	C.	D.
Reduce HIV Transmission		Develop Policy	Strengthen Institutions	Service Delivery	Research
Socioeconomic Factors					
1	Poverty			Priority	
2	Illiteracy		Priority	Priority	
3	Mobility			Priority	Priority
4	Gender	Priority	Priority	Priority	Priority
5	Substance Abuse				
Behavioral Factors					
6	Sexual Behavior/Condom Use		Priority	Priority	Priority
7	Counseling Services				
Biological Factors					
8	Perinatal Transmission/Breastfeeding		Priority	Priority	Priority
9	STDs		Priority	Priority	
10	Blood and Instruments	Priority	Priority	Priority	
11	Vaccine Development				
Reduce HIV Impact					
Individual					
12	Treatment - ARV		Priority		
13	Treatment - Opportunistic/Other		Priority		
14	Support - Psychological			Priority	
15	Human Rights/Legal Framework		Priority	Priority	
Household and Community					
16	Children				
17	Orphans	Priority	Priority	Priority	
18	Health Services		Priority	Priority	
19	Income Decline/ Welfare		Priority	Priority	Priority
National					
20	Workforce (Including Health Workers)	Priority		Priority	
21	Resource Constraints	Priority			
22	Political Constraints				
23	Health Services		Priority		
24	Surveillance				
Special Focus Areas					
Program					
25	Youth	Priority	Priority	Priority	Priority
26	Women	Priority	Priority	Priority	Priority
27	Commercial Sex Workers		Priority	Priority	Priority

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C. List of Priorities

1C

- Develop programs against poverty to reduce HIV transmission.

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2B

- Increase number of teachers to reduce the rate of illiteracy in the country.
- Increase the number of schools and improve geographic distribution to reduce illiteracy.

Return to Grid

2C

- Develop illiteracy education programs including information about HIV/AIDS and traditional practices.
- Implement illiteracy education program including a team on HIV/AIDS.

Return to Grid

3C

- Creation of sentinel surveys about migrants and HIV/AIDS.
- Improve access to care and prevention of STDs and HIV by creation of health care centers at the border.
- Program of awareness for HIV/AIDS among migrants.

Return to Grid

3D

- Conduct surveys and collect data from pervious surveys about management and prevention of HIV/AIDS and STDs among migrants.

Return to Grid

4A

- Develop policies to increase awareness about HIV/AIDS and STDs and TB for women in urban and rural areas.

Return to Grid

4B

- Re-design strategies to increase awareness among women based on results of quantitative survey.

Return to Grid

4C

- Conduct awareness campaign to target women.
- Conduct program to reduce school dropout of girls due to non-desired pregnancy. Program would focus on promotion of sexual education.
- Improve girls' literacy rate. The objective will be to have 80% of 14 years old girls in school.
- Increase women's access to condoms at financial, cultural, and geographic levels.
- Program to improve women's access to economic opportunities.

Return to Grid

4D

- Conduct quantitative psycho-sociologic surveys targeted to women.
- Conduct research to identify barriers to the use of feminine condoms.
- Conduct survey to assess women' level of awareness of HIV/AIDS.

Return to Grid

6B

- Develop national programs for access to condoms.

Return to Grid

6C

- Increase local production of male and female condoms.
- Program to increase by 35 to 50% systemic use of condoms among adolescents.

Return to Grid

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6D

- Conduct a survey about the sexual behavior of general population in Cote d'Ivoire. This study will be compared to data from a 1989 study.

8B

[Return to Grid](#)

- Strengthen systematic testing for HIV/AIDS among pregnant women.
- Define national guidelines for prevention of vertical transmission of HIV.

[Return to Grid](#)

8C

- Awareness campaign among sero-positive pregnant women for acceptance of regular treatment with AZT for prevention of mother to child transmission.
- Awareness campaign for pregnant women about the transmission of HIV and the necessity of testing for pregnant women.
- Implement AZT protocols for sero-positive pregnant women for prevention of vertical transmission.
- Information and education program for young women on prevention of mother-to-child transmission of HIV/AIDS.
- Promote pre-marriage counseling to avoid mother to child transmission of HIV.

[Return to Grid](#)

8D

- Conduct research on prevention of vertical transmission of HIV/AIDS.

[Return to Grid](#)

9B

- Design algorithm for management of STDs.
- Ensure regular supply for public and private health, such as for STDs reagent.
- Identify health care personnel for management of STDs.
- Integrate management of STDs in the general health and primary health care system.
- Strengthen capacity of information and awareness about STDs.
- Strengthen national infrastructure's capacity for the treatment of STDs.
- Train personnel to perform follow-ups on patients with STDs.

[Return to Grid](#)

9C

- Include training about STDs in the curricula of students in schools.

[Return to Grid](#)

10A

- Define equipment policy for the next five years for centers of blood transfusion at the general level.
- Define financial policy for regional centers of blood transfusion.

[Return to Grid](#)

10B

- Improve working conditions and security conditions for all medical personnel.
- Create dedicated structures for safe blood transfusion in each health area.
- Initiate quality control program in all regional centers for blood transfusion.
- Provide equipment for center for blood transfusion.
- Train regional centers for blood transfusion.
- Train personnel to perform maintenance on equipment for blood transfusion centers.
- Train personnel for prevention of accidental transmission of HIV/AIDS.
- Train blood transfusion centers' personnel.

[Return to Grid](#)

10C

- Initiate programs for systematic testing of blood in regional blood transfusion centers.

[Return to Grid](#)

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12B

- Ensure regular supply of reagent for the follow-up of antiretroviral therapies.
- Train personnel in molecular biologic techniques, especially quantitative molecular biology and viral load.
- Train personnel to provide clinical and biological antiretroviral treatment.

Return to Grid

13B

- Coordinate activities of management of opportunistic infections in continuum of care.
- Improve access to drugs for treatment of opportunistic infection.
- Strengthen coordination of biological follow-up of HIV/AIDS and of opportunistic infections.
- Strengthen management of TB in rural areas.
- Strengthen national infrastructure for treatment of opportunistic infections.
- Train medical personnel to manage opportunistic infections.
- Provide training, both biological and clinical, for the follow-up of therapies of opportunistic infections.

Return to Grid

14C

- Improve psychological support through strengthening communication between parents and children at all levels.

Return to Grid

15B

- Improve legal framework in order to guarantee protection of persons living with HIV/AIDS and reduce stigmatization of people living with or affected by HIV/AIDS.
- Strengthen legal protection for people living with HIV/AIDS and their families.
- Support local committee for legal structure for people living with HIV/AIDS.

Return to Grid

15C

- Organize protection of rights of people living with and affected by HIV/AIDS.
- Promote rights and duties of people living with HIV/AIDS or affected by HIV/AIDS.

Return to Grid

17A

- Design policies for management of orphans from AIDS. The objective is that by end of 2004, 50% of the orphans will be covered under some program from the government.

Return to Grid

17B

- Strengthen activities of NGOs in terms of support to orphans from HIV/AIDS.
- Strengthen programs of support for orphans and extended families.

Return to Grid

17C

- Financial support for education and professional training of 10,000 orphans per year.
- Financial support to programs for orphans and extended families.
- Improve access to education grants for orphans of HIV/AIDS.
- Program of priority access to antiretrovirals for orphans of HIV/AIDS.

Return to Grid

18B

- Improve access to care by providing proximity care.
- Strengthen financial support to NGOs and community-based care associations.

Return to Grid

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18C

- Promotion of continual care for people living with HIV/AIDS at the local level.
- Develop specific program to improve quality of life of people living with HIV/AIDS through community-based care. This program includes direct assistance, hygiene, nutrition, and education.

Return to Grid

19B

- Strengthen social services personnel to help people living with HIV/AIDS.

Return to Grid

19C

- Improve access to income generating activities for people living with HIV/AIDS.
- Program for promotion of income generating activities for people living with HIV/AIDS.
- Program that promotes creation of a new income generating activity.

Return to Grid

19D

- Identify and evaluate economic opportunities currently available for people living with HIV/AIDS.

Return to Grid

20A

- Facilitate elaboration of policies for the management of HIV/AIDS in the private and public companies in Côte d'Ivoire. The object is that 50% of private and public companies in Côte d'Ivoire will have a specific policy in terms of management of HIV/AIDS for their personnel by 2004.

Return to Grid

20C

- Program of mandatory prevention centers and management centers for STDs and HIV/AIDS in all companies with more than 15 employees.

Return to Grid

21A

- Conduct strategy planning with a focus on designing rational human resources policy.

Return to Grid

23B

- Strengthen capacity in terms of diagnosis of HIV/AIDS and opportunistic infections at central, regional, and national level.
- Improve working conditions and security conditions for all medical personnel.
- Introduction of training about psycho-social management and medical management of STDs, AIDS and TB in curriculum of medical school and all training for health care and social professionals.

Return to Grid

25A

- Define policies to decrease unsafe sexual behavior among adolescents. The objective is to have 50% of adolescents practicing safer sex in 2004.

Return to Grid

25B

- Define sexual education program for schools.
- Design agenda for implementation of health association for adolescents.
- Strengthen association for adolescents outside the school, in urban and rural areas.
- Strengthen health association in school.
- Strengthen sexual education in school and university.
- Train teachers in school to sexual education.

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25C

- Program to increase by 35% to 50% systemic use of condoms among adolescents.

Return to Grid

25D

- Conduct surveys to evaluate health association in schools.

Return to Grid

26A

- Develop policies to increase awareness about HIV/AIDS, STDs, and TB among women in urban and rural areas.

Return to Grid

26B

- Re-design strategies to increase awareness among women based on the results of quantitative survey.

Return to Grid

26C

- Conduct awareness campaign to target women.
- Conduct programs to reduce school dropout rate of girls due to non-desired pregnancy. Programs would focus on promotion of sexual education.
- Improve girls' literacy rate. The objective will be to have 80% of 14 years old girls in school.
- Increase women's access to condoms at financial, cultural, and geographic levels.
- Increase use of feminine condom
- Implement programs to improve women's access to economic opportunities.
- Implement programs among traditional women practicing excision.

Return to Grid

26D

- Conduct quantitative psycho-sociologic surveys targeted to women
- Conduct research to identify barriers to the use of feminine condoms.
- Conduct survey to assess level of awareness of HIV/AIDS by women.

Return to Grid

27B

- Expand program specific for commercial sex workers to all regions of Côte d'Ivoire.
- Sanction psychosocial and economic support to commercial sex workers.
- Train health care professionals to practice of non-discrimination among commercial sex workers.
- Train members of commercial sex work project.

27C

- Awareness program among commercial sex workers for HIV/AIDS and promotion of treatment of STDs.
- Program to improve access of commercial sex workers and regular partners to health care including management of STDs.

Return to Grid

27D

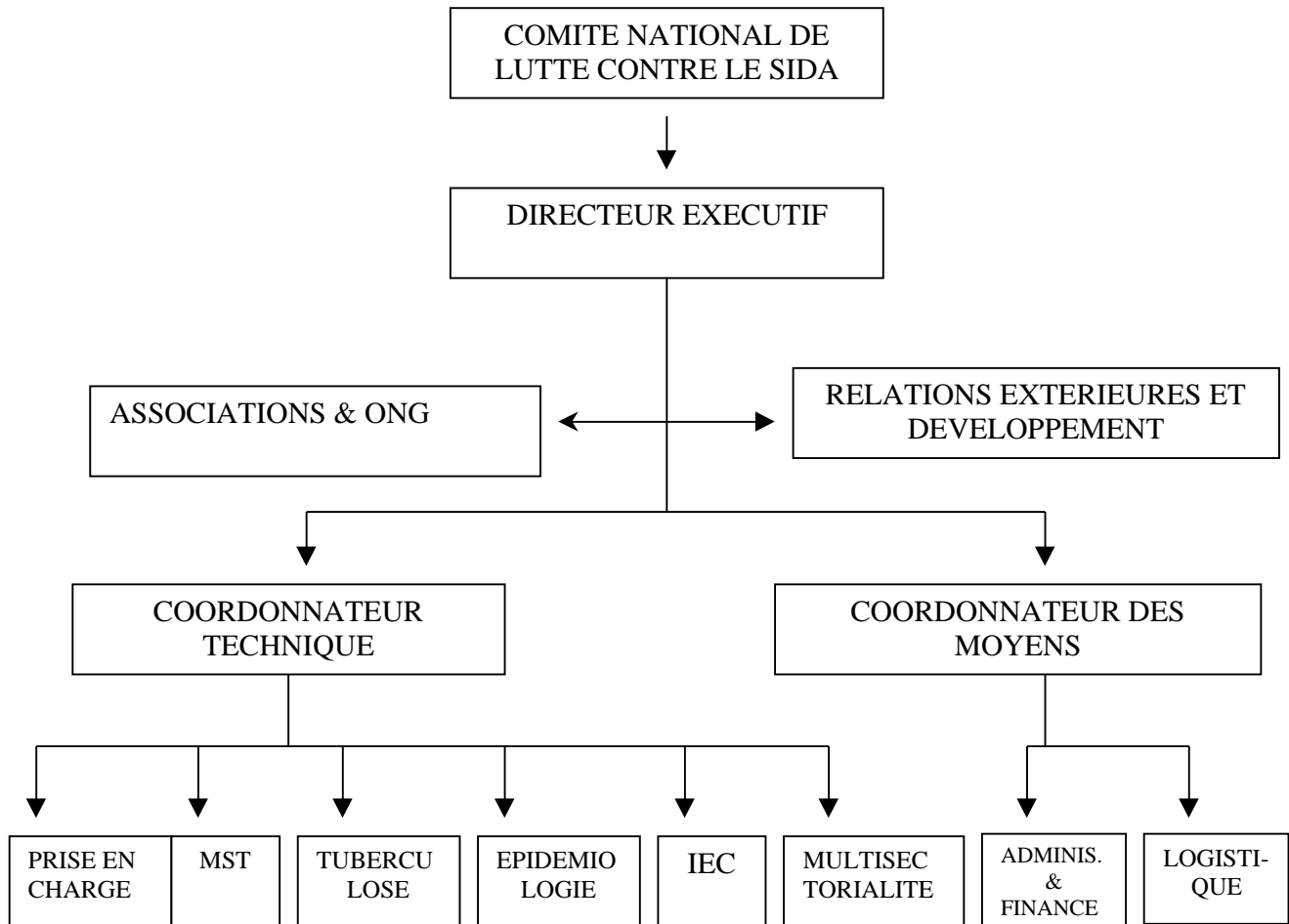
- Conduct survey to evaluate the needs of commercial sex workers in terms of medical care.

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III. Implementation

A. Organizational Structure



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B. Research, Monitoring, Evaluation

The National Strategic Plan Against AIDS will be evaluated twice. The first evaluation will take place in 2002 and the second evaluation at the end of the plan (2004).

C. Impact and Effectiveness Indicators

No information available.

D. Resource Mobilization and Funding

The National Plan Against AIDS will receive additional funding from the Côte d'Ivoire's government in order to reduce its dependence from international organizations. This plan also suggests additional resources from private companies which participate to the National AIDS programs and from community-based funding.