

Progress towards Universal Access

Cote d'Ivoire

Universal access implies that all people should be able to have access to information and services that are:
Equitable – accessible – affordable – comprehensive – sustainable

In 2006, countries worldwide committed to setting ambitious national targets for scaling up towards Universal Access to HIV prevention, treatment, care and support by 2010. The targets focus on what could be achieved if the following obstacles can be addressed:

- Predictable and sustainable financing
- Strengthening human resources and health systems
- Access to affordable commodities
- Stigma, discrimination, gender and human rights

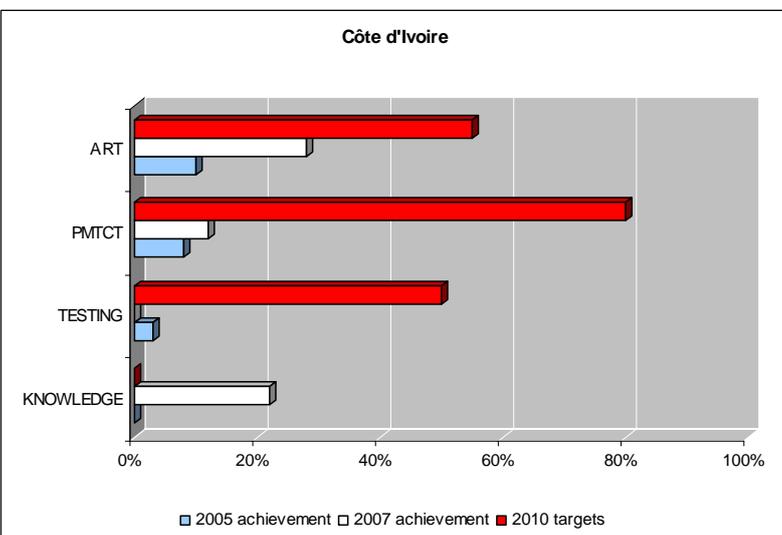
Review of National reports in 2008 demonstrated that Universal Access has catalyzed an accelerated and strengthened national HIV response with more results-based planning and a general overall increase in access to services. National political leadership and coordination were found to be critical to scale up. However more emphasis was needed on addressing the obstacles to scale up which would not support reaching universal access but also the achievement of the Millennium Development Goals. Specifically, there is a need to accelerate progress on HIV-prevention efforts, and to better utilize the resources available within civil society and people living with HIV.

Universal access has generated a continuing engagement with national partners to monitor and review progress towards universal access. This has resulted in a number of countries revising their national targets to ensure a sharper focus on areas in need of additional support.

Progress in Ivory Coast

Substantial efforts have been made in prevention, care and treatment but gender inequalities, low service coverage in some parts of the country and limited financial resources represent major obstacles to the achievement of universal access targets.

Decreasing costs of drugs, social mobilisation and increased numbers of ART sites have contributed to significant progress in treatment coverage. Similar improvements have been seen in prevention of mother to child transmission with free ART for HIV positive pregnant women, expansion of the number of sites and integration of services. Improvement in prevention is much more significant in specific high risk groups, such as sex workers and men having sex with men, than in the general population in which knowledge on HIV and testing service uptake is still low.



Key actions to reach universal access include the re-deployment of service providers where there is depleted personnel due to the internal conflict, intensification of prevention interventions for high risk groups, integration of HIV and gender into development and sectoral plans, strengthening and decentralisation of the HIV/AIDS coordinating authority and intensification of resources mobilisation.

Figure 1. The graph presents a snapshot of progress towards universal access based on 2005 and 2007 reported UNGASS achievements and 2010 reported targets, as per data available. Please note that ARV and PMTCT targets may be subject to change based on revised numbers in need of ART.

"(We) commit ourselves to pursuing all necessary efforts to scale up nationally driven, sustainable and comprehensive responses... towards the goal of universal access to comprehensive prevention programmes, treatment, care and support by 2010."

2006 Political Declaration, (UN General Assembly, 15 June 2006)