

Côte d'Ivoire

HIV/AIDS epidemiological summary

HIV-1 prevalence information among antenatal clinic attendees has been available since the mid-1980s from Côte d'Ivoire. In Côte d'Ivoire, Abidjan is considered the major urban area. In 10 years, HIV-1 prevalence among antenatal women increased from 3% in 1986 to 14% in 1995. In 1998, 11% of antenatal clinic women tested in one site were HIV-positive. Five per cent of the women less than 20 years of age were HIV-1-positive. In 1997, the median HIV prevalence among antenatal clinic women from nine sites outside Abidjan was 10%, ranging from 6% to 13%. Seven per cent of tested antenatal clinic attendees less than 20 years of age were HIV-positive. The peak age group was the 20–24-year-old group with 12% of clinic attendees testing HIV-positive.

HIV-1 prevalence among sex workers tested in Abidjan increased from 27% in 1986 to over 84% in 1992–93. In 1994–95, nearly 70% of sex workers tested were HIV-1-positive. In Odiénné, HIV-1 prevalence among sex workers tested increased from 37% in 1987 to 53% in 1990. In a separate study conducted in five regions in 1987, 34% of sex workers tested were HIV-1- and/or HIV-2-positive.

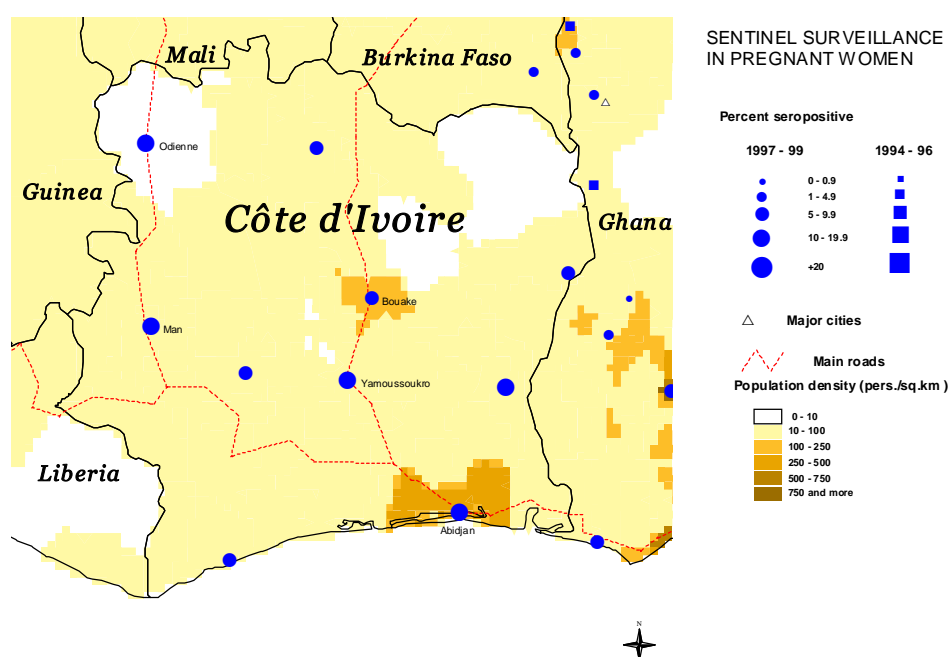
In Abidjan, 1987, 8% of STI clinic attendees tested positive for HIV-1 and/or HIV-2. HIV-1 prevalence increased from 17% to 18% of male STI clinic patients tested between 1990 and 1992. A small study of male STI patients, conducted outside Abidjan in 1987, reported HIV-1 and/or HIV-2 prevalence of 35%. Information by virus type was not available.

Estimated number of people living with HIV/AIDS, end 1999	Adults and children	Adults (15-49)	Adult rate (%)	Women (15-49)	Children (0-14)
Source: UNAIDS/WHO, June 2000	760 000	730 000	10.76	400 000	32 000

Demographic impact of HIV/AIDS	Year	Estimate	Source
Children who lost their mother or both parents due to HIV/AIDS at age 14 or younger since the beginning of the epidemic	1999	420 000	UNAIDS/WHO, June 2000
Estimated AIDS deaths	1999	72 000	UNAIDS/WHO, June 2000

Behavioural indicators	Year	Age group	Male	Female
Reported condom use during most recent intercourse with a non-regular partner (%)	-	-	-	-
Reported non-regular sexual partnership over a 12-month period (%)	1993	15–19	24.0	4.0

Measured HIV prevalence	Year	Median	Min.	Max.
Women in antenatal care clinics – major urban areas (%)	1998	10.6	10.6	10.6



Economic Impact of HIV/AIDS

Summary of economic impact of HIV/AIDS

Compared to many other sub-Saharan African countries, data on the economic impact on Côte d'Ivoire are relatively extensive. Preliminary results of a recently developed model on the macroeconomic impact of AIDS show that the impact is average for sub-Saharan Africa. A household survey carried out in the mid-1990s shows a dramatic impact on wealth in households affected by AIDS. This impact is exacerbated in rural areas, where tending for the sick leads to shifts in production patterns from cash crops to food. In the business sector, available data show the extent to which urban businesses can be handicapped by this disease. In the public sectors, especially education, a model developed by UNAIDS and UNICEF shows how increasing mortality rates due to AIDS leads to discontinuity in teaching, with many pupils losing or having a change in their teachers. The health sector is having to cope with hospitals where over 40% of beds are occupied by patients with AIDS-related illness and yet there are still extensive investments required to scale-up AIDS programmes equivalent to US\$ 2-3.5 per capita and 0.5% of GDP.

Macro-economic impact

Preliminary results of a model developed in 2000 estimate the loss in GDP growth per capita as a result of AIDS to be 0.8% (1).

Economic impact of HIV/AIDS on households

Empirical data collected in a 1996 study show that, following an AIDS death, average household consumption falls 44% on the previous year and households with an AIDS patient spend twice as much on medical expenses as those without (2). In the mid-1990s, the average expenditure required to care for a male AIDS patient was 25% of annual net income in the North and 50% of annual net income (US\$ 300) in the Mid-West (2).

Economic impact of HIV/AIDS on agriculture

In 1997, it was found that one method for coping with HIV/AIDS was switching to food versus cash crops, as a result of which production was reduced to two-thirds of previous levels (3).

Economic impact of HIV/AIDS on firms

Supply: A survey of three firms in Abidjan showed average annual costs per employee due to HIV ranging from 0.8% to 3.2% of the wage bill in 1997 (4). Another survey of four businesses found total medical costs of between 146 million and 298 million FCFA in 1993 (5).

Economic impact of HIV/AIDS on education

Supply: In 1996/7 and 1997/8, 64% and 70% of teachers' deaths of known causes were HIV-related (6); a model developed by UNAIDS and UNICEF in 2000 shows that, of around 1.7 million primary school students, 23 000 children would have lost a teacher to AIDS in 1999 (7).

Demand: Not available

Economic impact on the health sector

Supply: Not available

Demand: 41% of all hospital beds in Abidjan were occupied by AIDS patients in 1997 (8). By 1997, AIDS-related costs absorbed 11% of the total public health system budget (9).

Resource gap: The annual costs of scaling-up HIV/AIDS programmes nationwide are estimated to be between US\$ 34 million and US\$ 55 million (10).

Management and implementation of the national response to HIV/AIDS

Policy formulation

Existence of National HIV/AIDS policy (either a written document or part of one)

Yes	No
	X

Comments/Key elements: The national strategic plan is the only document used as the basis of the national response.

Source: UNAIDS

Date: 20 June 2000

Existence of HIV/AIDS policy in the following sectors:

Sector	Yes	No
Agriculture		
Education		
Health		
Military		
Workplace		
Sports		
Others		

Comments/Key elements: Based on impact studies. Specific sectoral policies are under development.

Source: UNAIDS

Date: 20 June 2000

Existence of HIV/AIDS-specific legislation against discrimination on the grounds of HIV

Yes	No
	X

Comments/Key elements: The existing legislation will suffice, if applied.

Source: UNAIDS

Date: 20 June 2000

Organizational structure**Existence of high-level structure in support of the national response**

(e.g. National AIDS Committee/Commission, Inter-Ministerial Committee, Presidential-level bodies)

Yes	No
	X

Comments/Key elements: The creation of a permanent structure attached to the Office of the Prime Minister or the Ministry of Planning is being explored.

Source: UNAIDS

Date: 20 June 2000

Planning and programming**Existence of national strategic plan on HIV/AIDS**

Yes	No
X	

Comments/Key elements: National strategic plan for the period 2000–2004

Source: UNAIDS

Date: 20 June 2000

National strategic plan on HIV/AIDS includes clearly identified priorities

Yes	No
X	

Comments/Key elements: Plan stratégique national de lutte contre le SIDA, 2000–2004, Ministry of Health, Programme National de Lutte contre le SIDA, Abidjan.

Source: UNAIDS

Date: 20 June 2000

Existence of budget for implementation of the national strategic plan

Yes	No

Comments/Key elements: The national strategic plan does not suggest costs. International aid is frozen. Only the UN system supports the national programme.

Source: UNAIDS

Date: 20 June 2000

General demographic and socioeconomic indicators

Demographic Indicators	Year	Estimate	Source
Total population (thousands)	1999	14 526	UNPOP
Population aged 15-49 (thousands)	1999	6807	UNPOP
Annual population growth (%)	1990–1998	2.6	UNPOP
% of population urbanized	1998	44	UNPOP
Average annual growth rate of urban population (%)	1990–1998	3.7	UNPOP
Economic indicators	Year	Estimate	Source
GNP per capita (US\$)	1997	710	World Bank
GNP per capita average annual growth rate (%)	1996–1997	4.3	World Bank
Human development index rank (HDI)	2000	154	UNDP
% population economically active	-	-	-
Unemployment rate	-	-	-
Education indicators	Year	Estimate	Source
Total adult literacy rate	1995	40	UNESCO
Adult male literacy rate	1995	50	UNESCO
Adult female literacy rate	1995	30	UNESCO
Male secondary school enrolment ratio	1996	32.6	UNESCO
Female secondary school enrolment ratio	1996	15.5	UNESCO
Health indicators	Year	Estimate	Source
Crude birth rate (births per 1000 pop.)	1999	37	UNPOP
Crude death rate (deaths per 1000 pop.)	1999	16	UNPOP
Maternal mortality rate (per 100,000 live births)	1990	810	WHO
Life expectancy at birth	1998	47	UNPOP
Total fertility rate	1998	5.0	UNPOP
Infant mortality rate (per 1000 live births)	1990	85	UNICEF/UNPOP
Contraceptive prevalence rate (%)	1990–1999	15	UNICEF/UNPOP
% of births attended by trained health personnel	1990–1999	47	UNICEF
% of one-year-old children fully immunized-DPT	1995–1998	61	UNICEF

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