



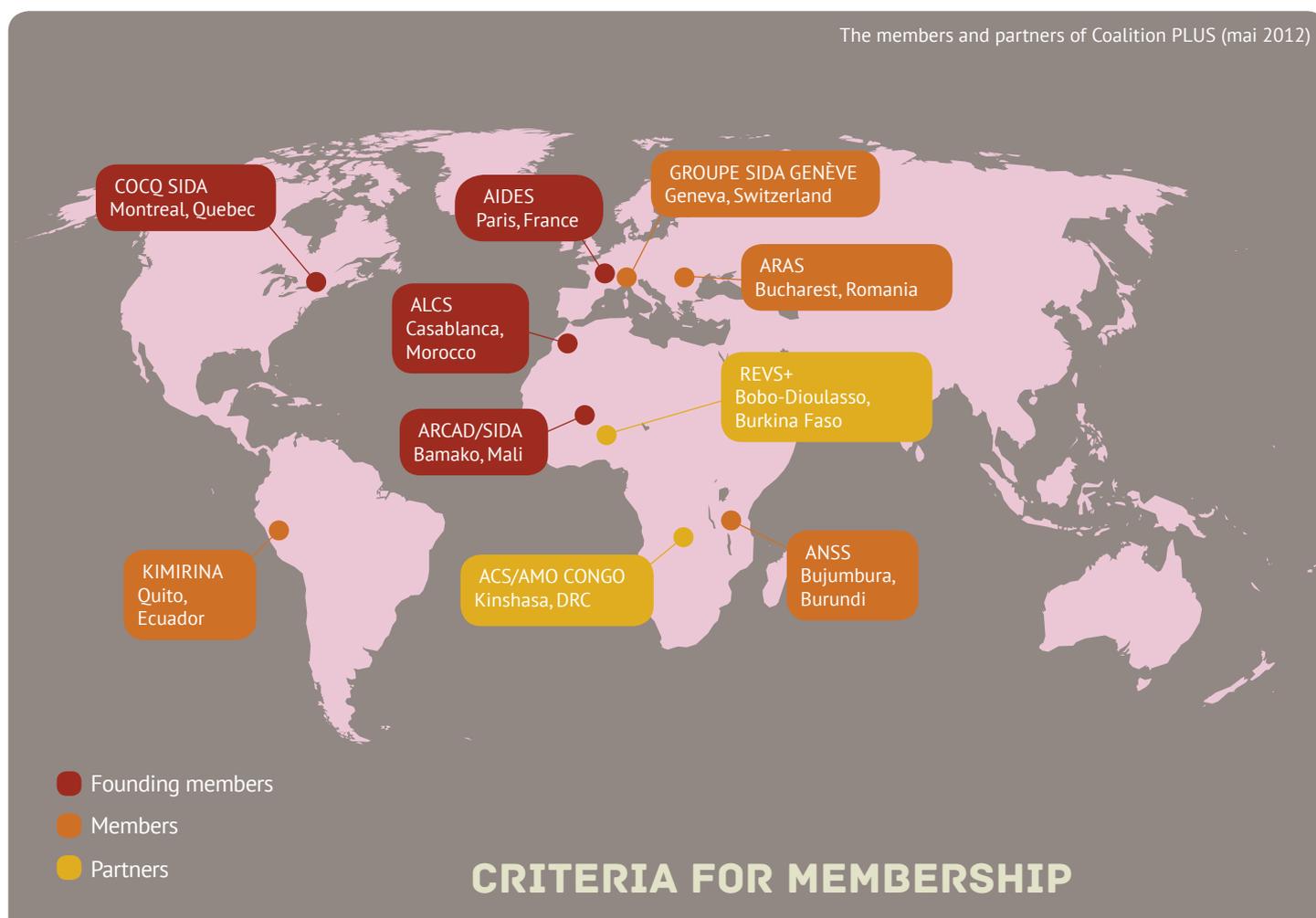
2011

ACTIVITY REPORT



THE MEMBERS AND PARTNERS OF COALITION PLUS

The members and partners of Coalition PLUS (mai 2012)



Coalition PLUS is an international francophone union of NGOs which, since 2008, has brought together community-based organizations fighting against HIV/AIDS in ten countries. Its primary objective is to promote the community-based approach in the fight against HIV/AIDS through the implementation of a support program for its members and partners, advocacy work and a community-based research program.

CRITERIA FOR MEMBERSHIP

- The NGO is legally recognized in its country.
- The primary purpose of the NGO is to fight against HIV/AIDS.
- The public interest objective aiming at "social transformation" or any equivalent notion is clearly stated in the NGO's aims.
- The community-based approach is the operating principle of the NGO.
- Infected persons, whether they are organization members or have a leading position in any of the organization's bodies (administrative board or equivalent), are present and involved in the NGO's.
- The texts regulating the NGO's governance ensure representativity of its members on the basis of democratic principles and are respected (organization committees meet regularly and any public decisions are recorded and made available to all affiliates).
- The NGO has adopted cost accounting and general accounting procedures in line with international norms.
- The NGO can supply accounts for the 2 previous years, audited and certified by an independent consultant/firm.
- The NGO creates an annual report of activities encompassing all the work carried out by the NGO and/or associated NGOs, if any (foundation or federation).

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ORGANIZATION OF COALITION PLUS IN 2011

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LETTER FROM THE PRESIDENT

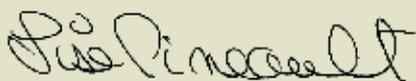
Coalition PLUS is an international union of community-based NGOs fighting HIV/AIDS. It was created in 2008, with the aim of putting those infected with HIV and those at risk of infection back at the center of programs in the fight against the epidemic. In 2011, Coalition PLUS comprised ten very important and influential African, European and American NGOs. It carried out several campaigns in order to help ensure that HIV/AIDS remained on the agenda of decision makers. It also initiated community-based research projects and supported its affiliate members and partners.

Yet the international environment remains hostile to the mobilization necessary to end the HIV/AIDS pandemic. The international financial crisis and the increase in repression and criminalization of most-at-risk groups have seriously impacted the propagation of HIV/AIDS and slowed universal access to care and to prevention.

This situation is unacceptable, especially given the fact that we now have the tools to end the epidemic.

Accordingly, a large number of community-based organizations who were the pioneers in providing universal care and prevention interventions to most-at-risk groups are now hindered on a daily basis from carrying-out their activities due to delayed payments of Global Fund grants, a lack of resources and hostile governmental decisions.

Faced with these new challenges, Coalition PLUS and its affiliates are redoubling their efforts and working together through the programs and activities described in the present report on activities.



Lise PINEAULT,
President of Coalition PLUS

Coalition PLUS,
a francophone
mobilization environment
for the promotion of
the community-based
approach.

ACTIVISM

Since its creation, COCQ-SIDA has never ceased in its fight against the inequities experienced by those infected by, affected by and vulnerable to HIV/AIDS. This year, as always, the organization carried out several activities.



DEFENDING RIGHTS AT COCQ-SIDA

COCQ-SIDA and a group of Canadian organizations intervened before the Supreme Court of Canada in two cases regarding criminalization of HIV exposure. This intervention was to influence the court's reflections and decisions regarding the circumstances in which seropositive people would have to disclose their serostatus to their sexual partner in order to avoid prosecution. The Supreme Court's decision, which will be delivered before the end of 2012, will have multiple repercussions, not only for seropositive people but also in regard to public health, justice and policing practices.

The organization also actively denounced discriminatory employment practices in the health sector. In fact, COCQ-SIDA and its partners of the "Focus group on employment and episodic disabilities" obtained a copy of the pre-employment questionnaires used by each of the 37 hospitals and 95 health and social services centers in Quebec. Concerned by the length and intrusive nature of these questionnaires, COCQ-SIDA and its affiliates requested the Quebec Human Rights and Youth Rights Commission to intervene. After analyzing the questionnaires the Commission expressed its strong concern about the use of these questionnaires and wrote a letter to all the institutions involved inviting them to revise their employment procedures.

Similarly, COCQ-SIDA carried out two surveys on the accessibility to dental care for people living with HIV/AIDS. The first survey was carried out on 189 seropositive people and the other on 769 dental clinics. The results highlighted cases of discrimination and stigmatization of people living with HIV/AIDS, as well as a lack of awareness and knowledge of the disease in some dental clinics.

The survey also revealed that a significant proportion of seropositive respondents were afraid to disclose their serostatus to dental health professionals and of being discriminated against during dental care visits. Consequently, COCQ-SIDA created a list of recommendations which will soon be presented to various dentists organizations (professional/educational).

More than 200 seropositive people contacted COCQ-SIDA' HIV Info Rights service for legal information, support and assistance in issues regarding insurance, employment, confidentiality, etc.

These different actions clearly underline the extent of HIV/AIDS-related inequity and how much there still remains to do to defend rights. COCQ-SIDA commits itself on a daily to this long-term mission.



Created by COCQ-SIDA in 2004 and updated in 2010, the leaflet entitled "The same rights as you" contains 6 sections of information about specific subjects regarding the rights of people living with HIV/AIDS in the workplace.

ACTIVISM



STRENGTHENING ADVOCACY ACTIONS FOR AMO CONGO

In 2011, the CBO AMO CONGO set itself the goal of focusing its advocacy work on funding and coordination of the fight against HIV/AIDS, as well as on improved access to care and treatment for seropositive people in the Democratic Republic of the Congo. In order to reach this goal, it employed a full-time advocacy officer and strengthened its advocacy competencies with Congolese political decision makers and other funders.

International funding, including the Global Fund to fight Aids, Tuberculosis and Malaria, continues to be the principle and essential contribution for programs in the fight against HIV/AIDS in the Democratic Republic of the Congo (DRC). Eighty-six percent of the country's HIV/AIDS funding comes from international funders, 11% from private donors and only 3% from the Congolese state. Furthermore, not one of the 11 provinces in the DRC has a specific budget line for the fight against HIV/AIDS. Given the general decrease in HIV/AIDS funding and the organization's wish to ensure permanent funding in the provinces, AMO CONGO started advocating for a specific HIV/AIDS budget line to be created in each province, the goal being to ensure an effective supply of antiretroviral treatments and to support community-based organizations in their missions. Accordingly, the AMO CONGO advocacy officer met with the authorities in Katanga on several occasions in order to present the situation, solicit their involvement and encourage them to put this problem firmly on their agenda.

After the DRC's application for Round 10 was rejected by the Global Fund in November 2011, AMO CONGO started a second campaign whose objective was to obtain official recognition of Community-Based Care (CBC) by the Ministry of Health and to demand the continued application of the Dual Track Financing system by the government. Accordingly, thanks to lobbying by AMO CONGO and its partners as well as media pressure, ministerial bodies agreed to engage in negotiations on these issues.



A third campaign aimed at reforming the DRC's CCM (*Country Coordinating Mechanism*), the body which coordinates activities and projects financed by the Global Fund to fight Aids, Tuberculosis and Malaria. The campaign was initiated in February 2011 by AMO CONGO and the other Congolese stakeholders from civil society engaged in the HIV/AIDS field. It received support from partners from the North and was underpinned by two main phases. The first involved meetings with the CCM president and the Congolese Ministry of Health as well as lobbying in Geneva. A protest in the streets of Kinshasa was also planned if demands were not met. The second step involved a meeting with Collette Colman, the Global Fund Portfolio Manager, in order to put greater pressure on the CCM presidency in the DRC. The campaign received press coverage and thanks to this and other factors, the Ministry of Health promised that the CCM would be reformed in July 2011.

Prior to the Congolese presidential and legislative election campaign on 28 November 2011, a fourth advocacy campaign was carried out by AMO CONGO. It aimed to obtain – using election candidates' commitments and promises - each candidate's guarantee to dedicate 15% of the State's budget to health, if elected. The social projects outlined by the three main political parties were analyzed and, at the end of this analysis, a document was drawn up and sent to each of the presidential candidates. NGO delegates, making up "Coalition 15%", met with the secretary generals of the opposition political parties and of the presidential majority. Firm engagements were obtained from the various stakeholders. On his swearing-in speech on the 20th December 2011, the Chief of State, Joseph Kabila, also promised the "relentless pursuit of the fight against AIDS/HIV". Follow-up actions to these commitments are currently being implemented.

The fourth advocacy campaign carried out by AMO CONGO aimed to obtain – using election commitments and promises - each candidate's guarantee to dedicate 15% of the State's budget to health, if elected.

At the international level, in November 2011, the AMO CONGO advocacy officer, together with his French and African partners, participated in the mobilization associated with the tax on financial transactions (TFT), at the G20 summit in Nice (France).

ACTIVISM



COALITION PLUS ADVOCACY PROGRAM

Global Fund

Coalition PLUS is regularly invited as a member of delegations to the Board of the Global Fund to fight Aids, Tuberculosis and Malaria. Invitations come from both the North African Middle Eastern delegation (ALCS, Moroccan member of Coalition PLUS) and the delegation of associations established in developed countries (Coalition PLUS Secretariat)

During meetings of the Board of the Global Fund, Coalition PLUS works closely with governmental delegates from francophone countries. In 2011, Coalition PLUS' advocacy efforts, among other things, helped to obtain the future right for countries whose applications for funding are rejected by the Technical Review Panel of the Global Fund, to re-submit an improved application without delay (instead of having to wait 12 to 18 months). Moreover, Coalition PLUS was able to limit the restrictions on access to Global Funds in so-called "middle-income" countries.

Coalition PLUS also mobilized the inter-organization group on the "5% initiative", destined to help community front-line workers in the South to better utilize the resources allocated by the Global Fund. Thanks to the boycott which Coalition PLUS participated in, the French authorities finally accepted to consult the stakeholders from the South who were the target for this initiative, so that the latter could contribute to its development.

Coalition PLUS' advocacy program has grown a great deal since the organization's creation in 2008 and in 2011 this growth almost doubled in size thanks to the recruitment of a new collaborator. Indeed, this recruitment helped the organization to take full advantage of the G8 and G20 summits in France (the location of the organization's headquarters) to carry out its advocacy actions. Coalition PLUS was also able to accelerate its advocacy with the pharmaceutical companies and UNITAID (access to generic drugs), as well as with the Global Fund to fight Aids, Tuberculosis and Malaria.

The Robin Hood Tax

The Robin Hood Tax campaign, initiated by Coalition PLUS in March 2009, was given a great boost in 2011. Several French and international NGOs joined the movement. Consequently the campaign was very successful on the political and media fronts.

Thanks to the dynamism of advocacy, the European Commission published a draft directive on the creation of a financial transaction tax. It was supported by many State Members ready to apply it. Indeed, in his final communiqué, the president of the G20 summit proposed a development and pandemics funding project, referring to the The Financial Transaction Tax (TFT). At the end of 2011, the French government declared that it too was ready to apply the Robin Hood Tax in France.

Access to generic drugs

After Gilead's announcement of its intention to enter the "patent pool", Coalition PLUS' advocacy program carried out media activities in order to encourage Johnson and Merck to follow in the footsteps of their competitor and authorize generic drugmakers access to their patents.

The effect of this advocacy was that Johnson & Merck agreed to unilaterally adopt voluntary license agreements with generic manufacturers for its anti-retroviral patents. However, the company refused to join the Patent Pool. Other pharmaceutical companies, like Roche, Boeringer, BMS and ViiV, have entered into negotiations to join the Patent Pool, while the Treatment Action Campaign in South Africa, the Treatment Action Group in the US and European Aids treatment Group have decided to join.

Throughout the year, several meetings were organized with different political, economic and NGO-based partners, in order to discuss topics such as funding the fight against HIV/AIDS and access to generic ARV drugs. In total, 70 meetings took place, 40 of which focusing on the Robin Hood Tax and 3 on the "5% Initiative". Moreover, 12 meetings took place between ministerial offices, managers of the Global Fund to fight Aids, Tuberculosis and Malaria, and funders. In regard to the Robin Hood Tax discussions, Coalition PLUS was invited 8 times to the French Presidency and was received twice by the ex-president of France, Nicolas Sarkozy.

The advocacy program also produced text, 8 of which were amendments, 18 press communications and 1 document on how the Robin Tax should be implemented in partnership with UNITAID, the latter financing the cost of creating the document. This document was adopted by the French Ministry of Finance in February 2012 to develop the The Financial Transaction Tax (TFT).

Finally, the Coalition PLUS advocacy program received a grant from the Open Society Foundations which should double in 2012.



Coalition PLUS supports the Robin Hood Tax of 0.05% on financial speculation. Simple to implement, this tax would help to raise millions of dollars for health and for the global fight against HIV/AIDS.



AIDES- PLWA FROM THE NORTH AND THE SOUTH UNITED IN THE FIGHT AGAINST HIV/AIDS

The international community is losing interest in the HIV/AIDS epidemic and no longer considers the fight against HIV/AIDS as a priority. It is using the financial crisis as an alibi in order to avoid tackling the question of how to fund the fight, and individual governments lack the courage and political will required to denounce this fact.

“More than violating human rights, a poor social and legal environment destroys all efforts in the fight against HIV/AIDS [...] ostracizing homosexuals, criminalizing injecting drug users, hounding sex workers, all this only leads to hindering an effective response to the HIV/AIDS epidemic”. These were the words of Jeanne Gapiya, president of the ANSS, an affiliate of Coalition PLUS, during her speech at the United Nations in April 2011 as part of the General Assembly on HIV/AIDS (United Nations General Assembly Special Session).

During the UN General Assembly on HIV/AIDS, and for the first time since the beginning of the epidemic, all the member States officially recognized the necessity to orient prevention policies towards three main groups: men who have sexual relations with men (MSM), sex workers and drug users. Furthermore a solemn commitment was made to provide 15 million sufferers with treatment between 2011 and 2015 and to close the gap in the funding required to fight against HIV/AIDS.

Despite the promises made, the Board of the Global Fund to fight Aids, Tuberculosis and Malaria took a historic decision and cancelled the 11th round of funding. Suppressing this two-billion dollar annual round, which would have helped treat 500,000 people affected by HIV/AIDS, deprives treatment to thousands of sufferers worldwide and condemns them to death.

It was in this context that AIDES, throughout all of 2011, mobilized its network and all of its partners to ensure that France would strengthen its support for the Global Fund. AIDES showed itself to be one of the main defenders of the Global Fund and its founding principles, notably by increasing the number of regular meetings with policy makers, press campaigns and lobbying activities. AIDES' advocacy was also very dynamic in ensuring that PLWA voices would be heard, both in the North and the South.

Moreover, the organization invested heavily in innovative funding ideas such as the The Financial Transaction Tax (TFT) also called the Robin Hood Tax, in order to create new funding sources to achieve universal access to care. Taking advantage of the French presidency of the G20 summit, AIDES network volunteers did not hesitate to express their demands and undressed themselves at the summit in Cannes, leaving only 0.05% of their clothes on. Their message was "0.05% may seem like nothing, but it's already a lot!". The goal of this action was to push the French government to show its mettle and bring it to play an international leading role on the question of Global Funding for development. Thanks to AIDES advocacy and to the mobilization carried out, implementing a FTT no longer seems to be a utopian idea. Furthermore, France initiated the idea for a the Financial Transaction Tax "for Africa" and "for development".



At Place de la Bourse in Paris, surrounded by troubadours, Robin Hood takes off all his clothes except for his underwear, just as he did at Cannes during the G20 summit (AIDES and Oxfam France happening – October 2011)

Assemblée Générale de l'ONU sur le sida 8-10 juin

Dossier de presse

10 ANS
D'ENGAGEMENTS DE
L'ONU CONTRE LE
SIDA,
10 ANS DE
**PROMESSES NON
TENUES,**
10 ANS D'ESPOIRS
DÉÇUS,
DES MILLIONS DE
VIES SACRIFIÉES



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ACTION



Membre de la Coalition Internationale Sida



THE NIGHT CLINIC EXPERIENCE FOR VULNERABLE GROUPS IN MALI

In 2010, ARCAD-SIDA created a sexual health night clinic, in order to ensure prevention, testing and care, primarily in groups of specific populations whose levels of HIV/AIDS prevalence are higher than the national average. In 2011 this offer continued and was generalized to young students as well as the informal sector.

The prevalence rate in Mali remains relatively low. Nevertheless, a strong propagation of the epidemic has been seen in certain groups of specific populations: sex workers, men who have sex with men (MSM), domestic helpers, truck drivers and “coxeurs”¹. This is especially due to different factors such as the low use of traditional health services, poor knowledge of HIV/AIDS and of sexually-transmitted infections (STIs), self-medication which is only slightly or not at all efficient against STIs and a low rate of condom use.

The stigmatization and rejection of these groups by society often pushes individuals underground, for example MSM. The consequences of this are risky sexual behaviors and therefore HIV/AIDS propagation. Because of this alarming situation, ARCAD-SIDA took the initiative to create a unit focusing on targeted prevention and care for these vulnerable groups. Mali's youth and the population in general have a rhythm of life which is quite nocturnal, and so it was decided to open a night clinic which is now open every day, except Monday, from four o'clock in the afternoon to midnight. Moreover, a medicalized van with a professional medical team, moves across the city in order to meet targeted groups. ARCAD-SIDA offers HIV tests, carries out prevention interventions and provides care using this service.

¹ A “coxeur” is a term widely used throughout West Africa to indicate a taxi tout.



Among the services it offers, ARCAD-SIDA proposes testing, carries out prevention activities and provides care.



In 2011, 210 prevention and information meetings were organized and attended by a total of 1,682 people. ARCAD-SIDA also carried out 4,187 medical consultations and 2,265 tests, of which 233 were positive. One thousand four hundred and sixty six people were treated for STIs. Among the populations most vulnerable to the epidemic, seroprevalence was highest in MSM (18.7%), sex workers (16.6%) and young people (4.5%).

Since its creation the night clinic has catered for a large number of people, both from the groups who constitute its primary target and from the general public. Accordingly, in 2011, 171 patients on ARV were followed-up, 29 of whom were MSM, 18 sex workers and 92 young people aged between 15 and 35. The involvement of the beneficiaries, the public and local authorities continues to contribute to the success of this initiative.



Currently, ARCAD-SIDA's night clinic provides care to 170 patients taking antiretroviral treatments.

ACTION



UNCERTAINTY SURROUNDING FUNDING IS PUTTING PREVENTION PROJECTS IN DANGER

The stop in financing by the Global Fund to fight Aids, Tuberculosis and Malaria has had regrettable consequences. Organizations like ARAS who have been caught up in the spiral of structural funding are now sometimes obliged to go against their own philosophies in order to obtain funds.

Since 2010, Romania has no longer been eligible for funding from the Global Fund to fight Aids, Tuberculosis and Malaria. It saw its financial sources for the fight against HIV/AIDS dry up almost overnight. The Romanian government which was supposed to continue financing projects initially funded by the Global Fund has not kept its commitments. HIV/AIDS community front-line workers have been obliged to abandon these projects or even change the sector in which they work. For example, because of the lack of funding, prevention projects have become very rare.

The number of HIV infections in Romania never ceases to increase, making the country a critical zone². Moreover, Romania is still the country with the lowest rate of absorption of structural funds in Europe³.

Despite this crisis situation, ARAS has benefitted from funds for its prevention activities. Two projects submitted to the Romanian Ministry for Labor and Social Solidarity were accepted within the framework of European structural funding. This consists in providing non-repayable direct assistance that the Romanian government has received since its entry into the EU through the European Social Fund and which the government must add to. These two projects have helped ARAS to continue its prevention programs in the groups in Romania who are most vulnerable to the epidemic: women, sex workers, drug users, the Roma community and the homeless. However, despite the fact that this funding has been a windfall for ARAS in many respects, it is unfortunately linked with the organization's entry into the spiral of structural funding.

² <http://www.eurosurveillance.eu/image/dynamic/EE/V16N48/art20032.pdf>.

³ <http://ec.europa.eu/esf/main.jsp?catId=440&langId=fr#opt3>

Despite a reduction in financial resources, the Romanian organization ARAS is continuing its prevention activities in groups which are most vulnerable to the epidemic: women, sex workers, drug users, the Roma community and the homeless.

In Romania, structural funds are managed by the Ministry of Labor with the aim of introducing people into the job market. Consequently, in order to benefit from these funds ARAS had to submit both projects with the objective of finding employment for people belonging to the various groups it cares for.

The first project targets vulnerable women. It is being carried out in 9 large cities where the organization is established. Activities focus primarily on prevention, sexual health education, social and psychological support as well as assistance on breaking into the job market (through professional training courses).

The second project targets injecting drug users in Bucharest, Constanta and Timisoara. Three thousand five hundred people benefit from it, receiving harm reduction information and material. Five hundred of these are on methadone or Suboxone substitution treatment. In order to receive funding, ARAS committed to providing 100 people with professional training and to finding work for half of them at the end of the project.

For the first time in its 20-year history, ARAS must show itself to be active in job-finding programs in order to carry out prevention activities. As the organization's mission is not based on helping people to find jobs, these projects are difficult to implement. Furthermore, in order to receive funding, ARAS must scrupulously adhere to the terms of the funding contract. Sometimes this entails going against its own principles, for example, when it has to divulge the personal details of its beneficiaries. In addition, the rules of the game can change from one day to the next, for example, when pre-financing provided at the beginning of the project must suddenly be repaid without explanation.

The two projects mentioned above must end in 2013. In January 2011, ARAS submitted a new application for funding with the Romanian Ministry of Labor to start new projects and is still waiting for a reply.



The organization ARAS' flagship project targets injecting drug users in Bucharest, Constanta and Timisoara. It provides harm reduction information and materials to 3,500 people.

It is very difficult for ARAS to find sources of funding other than structural funds and donations from some generous donors. Yet, without sufficient financial support, it becomes difficult for the organization to think about its future and to guarantee that it will be able to continue to provide its services.

ACTION

The organization AIDES has been present in the Caribbean for a long time. This is because the Caribbean is the second-most affected HIV/AIDS region in the world. Just as for metropolitan France, AIDES develops prevention and harm reduction interventions there as well as offering rapid HIV testing.



AIDES, STRENGTHENING ITS ACTIVITIES IN THE CARIBBEAN

AIDES is well established in the French overseas departments of Martinique and French Guiana and the overseas collectivity of Saint Martin. The Caribbean region has its own identity, characterized by internal migration inside its borders. Accordingly, AIDES activists work at the regional level, in partnership with local NGOs from Surinam, Haiti, the Dominican Republic and Saint Martin.

As well as prevention and testing activities, AIDES' work in the region offers targeted programs. In order to change the context of the lives of those who are seropositive and to encourage greater access to care, it organizes weekend educational programs in health within different health organizations/groups and manages nursing homes.

Within the framework of the European project INTERREG – financed by the European Union to aid European regions create partnerships to work together on common projects – AIDES collaborates with various local teams to develop prevention and anti-discrimination programs, targeted at the most vulnerable groups in the region (sex workers, MSM, crack users, migrants) and at those who are seropositive.



AIDES activists meet the children of a village in Guiana (November 2011)



COALITION PLUS' COMMUNICATION AND FUNDRAISING PROGRAM

Coalition PLUS redefined its communication and fundraising activities in 2011. The organization created its Facebook page and its Twitter feed (coalitionplus). It also created its first report on activities destined for private donors and partners. Finally, having decided to solicit international institutions, it began a recruitment process for a Communications and Fundraising Officer, based in Geneva, in the offices of Groupe sida Genève, a member of the Coalition PLUS.



FUNDRAISING BY GROUPE SIDA GENÈVE

Modeled on the French and Canadian fundraising campaigns of the organization AIDES and the Quebec Foundation in the Fight against HIV/AIDS, the campaign by Groupe sida Genève started in October 2011 and finished in December 2011. The result of a partnership with Coalition PLUS (which Groupe sida Genève has been a member of since February 2011), and with the French agency ONG-Conseil (a specialist in fundraising and in canvassing donors for non-governmental organizations), the project involved carrying out a test mission in Geneva, using campaign models already successfully used in France and in Canada. Its aim was to evaluate the potential of fundraising in Geneva and to adapt canvassing methods to the Swiss context in terms of future campaigns.

A team of eight recruiters, divided into two groups of four, helped raised awareness and recruited donors over the seven-week campaign on work days in public places close to shopping centers and post-offices in the canton of Geneva. An information stand was used. First of all, the recruiters had to talk with passers-by, increase the latter's awareness of the cause (the fight against HIV/AIDS), present them the two partner organizations, their inter-connections and the missions which form the core of their activities. Each interested individual was then asked to become a regular donor, through a direct debiting system.

The total sum raised during Groupe sida Genève's fundraising campaign in 2011 was divided equally between both partner organizations. Coalition PLUS used these donations to support activities carried out locally and internationally by affiliate organizations.

With regard to developing a relationship with donors, each received a welcome pack to confirm his/her membership. It included a letter of thanks, a Groupe sida Genève presentation leaflet, and a red ribbon. In January 2012 the first electronic newsletter was sent by the organization to all the recruited donors. They will continue to receive newsletters every three months from now on.

This first street-based fundraising campaign recruited 492 regular donors, for an average monthly donation of 22 Swiss Francs. This represents a total of approximately 130,000 Swiss Francs per year. In terms of visibility, the campaign received excellent media coverage, especially in Geneva's newspapers and online information platforms.

Group sida Genève launched its first fundraising campaign in the streets of Geneva in 2011 with the support of Coalition PLUS. The operation helped to both inform passers-by about the issues involved in the fight against HIV/AIDS and to mobilize donors who care about the cause.



Groupe sida Genève received a great deal of press coverage for its street fundraising campaign, carried out in collaboration with Coalition PLUS and the French agency ONG-Conseil.

ACTION



ALCS
association
de lutte
contre
le sida

Membre de la Coalition Internationale Sida



COCQ-SIDA
Membre de la Coalition Internationale Sida



ALCS AND COCQ-SIDA CAMPAIGNS “IF I WERE HIV POSITIVE”

Maroc

Apart from access to care, the fundamental need for seropositive people is to be able to talk about their disease, both in the public and private spheres, without fear of rejection, stigmatization or discrimination by close family and friends or by society. Unfortunately, disclosing one's serostatus may have serious consequences in all aspects of daily life (professional, educational, familial, etc.) and prejudices remain firmly rooted in the mentality of Moroccan society.

The campaign was launched on 1st March 2011 using different publicity strategies (billboards, posters, press inserts, etc). In 2011, several public personalities of Moroccan origin were involved: singer Sofia Marikh, journalist and TV presenter Ali Baddou, film director Nouredine Lakhmari and actor Hicham Nazza. The campaign lasted three months and was widely covered in the written press, showbiz magazines and on the internet. It also received a favorable reception from the public and was renewed in 2012 using other famous personalities.

Stigmatization and discrimination are recognized as major obstacles in the fight against HIV/AIDS, as much for prevention as for care. First started in 2006 by the French organization AIDES, the campaign “If I were HIV positive” was reworked by ALCS and COCQ-SIDA, who adapted it to the contexts of their own countries (Morocco and Canada).

In 2011, ALCS renewed the campaign for the general public, entitled “If I were HIV positive”, aiming to raise awareness in the Moroccan population about discrimination against seropositive people.



Nouredine Lakhmari (film director, on the left) and Sofia Marikh (singer) for ALCS; Michelle Blanc (specialist in social media) and Alexandre Despatie (Athlete) for COCQ-SIDA, Moroccan and Quebecois ambassadors for the 2011 campaign “If I were HIV positive”.

Quebec

After the success of the first campaign and the wave of mobilization which followed, COCQ-SIDA renewed the campaign in 2011 in Canada.

In 2011, five new personalities agreed to participate: specialist in social media Michel Blanc, television presenter Marie-Soleil Michon, Olympic medalist in diving Alexandre Despaties, television presenter Alexandra Diaz and sports commentator Matthieu Proulx. These five people joined up with the four spokespersons from the 2010 campaign. COCQ-SIDA also launched the blog sijetaisseropositif.org with the goal of informing the public and increasing awareness about the realities experienced by people living with HIV/AIDS.

The success of the French campaign by the organization AIDES and its subsequent adaptation outside of France shows that collaboration between francophone organizations can globally help to make a difference for all those affected by the problem of HIV/AIDS. The mobilization created by the campaign and the positive reception by the general public are messages of support and hope for those who are HIV-positive.

The “If I were seropositive” campaign is built around pictures of public personalities and the question “And if these well-known and admired people were HIV positive, how would you react?”. The objective is to highlight the absurdity of discriminating against people living with HIV/AIDS and to get the public to reflect on the situations of rejection and stigmatization which these people experience in their daily lives, in order to arouse a change in attitudes and behaviors. The slogan “We need to banish HIV/AIDS not the people with HIV/AIDS” emphasizes the necessity for a change in mentality.

ACTION



In order to improve access to screening tests and to promote the quality of service in its centers, ALCS implemented a quality assurance program on HIV-testing in 2010. This program was renewed in 2011 with broader objectives and the development of new norms.

QUALITY ASSURANCE PROGRAM IN ALCS' FIXED AND MOBILE CIDAGS

The main aim of the program is to improve the quality of ALCS' testing services in all (fixed and mobile) its Anonymous and Free HIV-Testing and Information Centers called CIDAGs. In order to promote and optimize its actions and services, ALCS proceeded with a restructuring program establishing several new procedures and regulations, providing capacity-building for its human resources section, implementing new management tools and renewing its equipment.

Moreover, the program helped to instill a culture of quality in the CIDAGs (Information and Free Anonymous Screening Centres) and to create trust between the different types of actors performing the tests, thereby improving the overall attractiveness of testing to members of the public. A satisfaction survey was carried out in 2011 with the CIDAGs' consultant doctors and beneficiaries. The results highlighted doctors' satisfaction with the quality of work, and confirmed their continued support for ALCS. The beneficiaries also expressed their satisfaction with the centers in terms of how they were welcomed, the service provided and the information they received from the doctors.

In the period between January and December 2011, ALCS carried out 46,919 rapid HIV tests in its 28 fixed centers and 4 mobile testing units. This represented 80% of all the HIV tests performed in Morocco in 2011. Testing was broken down as follows: 12,381 in fixed structures, 27,150 in mobile units and 6,938 on the national testing day. These tests revealed 407 positive cases, corresponding to a prevalence rate of 0.9%. Approximately 45% of the tests were performed on populations particularly vulnerable to the epidemic in Morocco: sex workers 34%, workmen 22%, truck drivers 19%, men who have sex with men (MSM) 18%, migrants 6% and drug users 1%.



A prevention team moving around by bicycle.



An ALCS prevention intervention with sex workers.

An ALCS prevention intervention in a rural area.



Mobile testing center (Casablanca).



5TH NATIONAL HIV TESTING DAY

May 14th, 2011 marked the 5th edition of this National Testing Day in different Moroccan cities. During the occasion, ALCS carried out 6,938 screening tests, 43% of which were on women. Tests were carried out in 81 sites, divided among 39 towns and 14 rural communes. Twelve of the 81 sites were covered by the 4 mobile testing units. The 69 fixed units were divided as follows: 21 ALCS testing centers, 8 government health centers, 5 youth centers, 33 offices of partner organizations (women's, human rights and development associations, etc) and a private medical surgery.

During the day, 83 consultant doctors, supported by 307 volunteers administered the tests. Furthermore, almost 31,980 contacts were established and 64,436 brochures as well as 31,612 condoms were distributed. The National Testing Day was also the occasion for ALCS to create strong ties with various concerned stakeholders and to carry out an event providing high visibility, while raising the Moroccan population's awareness of the HIV/AIDS problem and of the associated stigmatization of HIV positive people.

The 5th edition of the National Testing Day was a great success marked by the large-scale mobilization of ALCS volunteers. It was also the occasion for ALCS to collaborate with other organizations (NGOs, local organizations, etc) and governmental partners.

Despite the efforts of ALCS and the Ministry of Health to increase HIV testing, each year the number of total tests carried out in Morocco is below the number required. Since 2007, ALCS in partnership with the government have organized a National Testing Day, in order to encourage generalized testing and improve access to rapid testing.

Posters for the 5th National Testing Day in Morocco (14th May 2011)



ACTION



REVS+ RAISING AWARENESS THROUGH THEATRE

Launched in 2010, the REVS+ “raising awareness through theatre” project is innovative in regard to HIV/AIDS prevention and information. It deals with topics associated with the HIV/AIDS problem in an educational and entertaining way. The project became a reality in 2011 with the creation of the Hakili Gnouma theatre group.

Always on the lookout for new tools to respond to the population’s needs in a context where rural levels of illiteracy are high, REVS+, through the medium of theatre, found an effective means for transmitting its prevention messages, focusing on HIV/AIDS issues as well as other pathologies like malaria, tuberculosis, malnutrition and water-borne diseases.

The theatre group comprises eleven artists, nine of whom are women. Thanks to contracts won with different organizations in Bobo-Dioulasso, the actors were able to support themselves and help their families from the income they earned. This activity also helped REVS+ to generate additional income. In 2011, thirty performances were organized in the city of Bobo-Dioulasso and surrounding villages. Ten original theatrical sketches were played out. At each performance, the content of the show was adapted to the audience, to the topics touched on and to the desired language of communication.

Forum theatre has proven to be a particularly effective awareness-raising tool which attracts a large and varied public. The public identifies with the characters portrayed and situations played out. At the end of the show the audience members leave having enjoyed themselves while at the same time having learned something and, sometimes, having become genuinely aware of the problems highlighted. Encouragement from the public and from family and friends has helped the actors greatly, especially with respect to increased self-confidence.

Hakili Gnouma, which means “good positive thoughts” in Dioula (the local language), is the name given to the theatre group, created by the organization REVS+ in 2011. Through the topics dealt with and the messages conveyed, the actors contribute to raising awareness of prevention issues and to a change in mentality.



The theatre group Hakili Gnouma during a performance.

THE TECHNICAL SUPPORT PROGRAM IN FINANCIAL MANAGEMENT

Coalition PLUS' primary objective is to strengthen the presence of stakeholders from the South in the international community influential in the fight against HIV/AIDS, especially in the current context where African organizations' capacity to participate in decision making and management processes is being confiscated. In order to reach this goal therefore, African organizations must strictly comply with all the criteria set down by Coalition PLUS in order to become members and gain international credibility. The organizational and governance criteria for membership in the coalition, as defined in the Coalition PLUS members' charter, are complemented by financial management criteria, including, on the one hand, the adoption of cost accounting and general accounting procedures in line with international norms and, on the other hand, the capability to supply certified accounts for the years n-1 and n-2. Certified accounts require an audit by an independent, external auditor who is legally authorized to perform statutory auditing or the equivalent.

In 2011, the technical support program in financial management carried out 16 operations in nine organizations as follows: 3 diagnostic, 9 support/capacity building and 4 monitoring/advice.

Coalition PLUS' technical and financial partnership with SIDACTION, which employs a Burkinabe Financial Management Officer based in Ouagadougou, provided support to the organization REVS+ leading to its implementation of accrual accounting. Successive missions to Burkina Faso helped the directors of REVS+ to validate the installation of the software package TOMPRO and improve the financial reporting chain inside the organization, after the financial supervisor took office. In 2011 therefore, REVS+ carried out a great deal of work on its financial organization and on the construction of a cost accounting plan reflecting all its activities.

After the hard work by the accounts department of ANSS (Burundi) to input all accounting data and to make progress on accounts auditing for 2010 (the financial year concerned in the switch over to the accrual accounting system), support missions by the Financial Management Officer helped to finish auditing and create the full 2010 financial statements. This hard work and strong involvement by the ANSS team in the program led to its first legally certified audit by an independent statutory auditor. This certification (with reservations) bodes well for the possible full membership of ANSS in Coalition PLUS in 2012.

In the DRC, which is characterized by multiple economic, political and infra-structural difficulties, the organizational destabilization of the organization AMO CONGO, accentuated by the departure of its financial director, slowed the progress of the program in general (organizational and financial).

Finally, Coalition PLUS' technical support program in financial management continued its support/advice work with its long-standing African members (ARCAD SIDA in Mali and ALCS in Morocco) in terms of creating and improving internal management/control and budget analysis tools. The secondary objective here was to have these stakeholders transfer competencies to other Coalition PLUS partner organizations in the South. The decision to have ARCAD SIDA's Ibrahima Sissoko join Coalition PLUS' secretariat from 2011 onwards, in the role of technical advisor for financial management program missions, is part of this process.

Two and a half years after its initiation, the project Diagnosis/Update by the organization KIMIRINA in Ecuador confirmed that the organization met all the criteria required and was confirmed as a full member of Coalition PLUS.

Following the membership of three new organizations in 2011 (2 European and 1 South American) the principal objective of the financial management program this year was to increase support for the three African partners (ANSS in Burundi, REVS+ in Burkina Faso and AMO Congo in the DRC), in order to be able to propose at least one of these organizations to the Coalition PLUS administrators for membership in 2012.

INNOVATION



KIMIRINA – A GLOBAL APPROACH TO EFFECTIVELY FIGHT HIV/AIDS

In 2011, the Ecuadorian organization Kimirina continued its restructuring plan and established strategic action plans for the period 2012-2014, with targeted objectives and indicators to help it carry out its mission effectively: to promote and contribute to a global policy of health and of the defense of the rights of those affected, in order to respond effectively to the fight against HIV/AIDS.

Two fundamental concepts appear in the work of Kimirina: the global health approach to HIV/AIDS and the defense of the rights of LGBT (Lesbians, Gays, Bisexuals and Transgender individuals). Again this year, the organization continued to follow this guideline in all its projects and surveys. It also continued to create close ties with international organizations that have the same approach.

In 2010, the Board of the Global Fund to fight Aids, Tuberculosis and Malaria approved the financing of the 9th round in Ecuador for an initial period of two years (phase I) and Kimirina was appointed principal recipient. The organization has since coordinated projects financed by the Global Fund with other NGO partners. The program focuses on reducing mortality among PLHIV as well as reducing the speed of HIV/AIDS transmission in the populations most vulnerable to the epidemic and those who have a high prevalence in Ecuador: men who have sex with men (MSM), transsexuals, sex workers and marginalized young people. The organization concentrates its activities on changing behaviors within these population groups. Kimirina is active in 46 districts covering 11 provinces, mainly situated in coastal zones and where approximately 54% of the country's population lives. In 2010, 18,524 people were living with HIV in Ecuador, 8,338 of whom had AIDS. In 2011 this number was 18,000. The overall objective of the project is not only to reduce the mortality due to HIV/AIDS, by passing from 650 deaths a year in 2007 to 450 in 2014, but also to lower the incidence rate in the most vulnerable population groups.



Thanks to financial support from Schorer - the Netherlands' institute for homosexuality, health and well-being - Kimirina carries out many projects with the transgender population in Ecuador. The primary aim is to understand the needs of this population and to prevent the transmission of HIV/AIDS within it.

Kimirina became involved in the international community-based research project Partages, initiated by Coalition PLUS. The project's objective is to discover and better understand the factors which lead people to disclose or not to disclose their serostatus, and to act on public policies. In Ecuador it was carried out on a sample of 300 people.

A year after its initiation, the results of the project have been very interesting, especially in terms of the approach of most-at-risk populations. The majority of indicators have shown that the preliminary program objectives have been surpassed. Consequently, strong foundations have been established in order to reach the two goals of bringing about a change in behaviors and of providing easy access to testing for these populations. Thanks to this project, research studies in young people have also been carried out, the results of which will be available in the near future. In light of the progress made and the results obtained to date, Kimirina, as well as its partner organizations in this Global Fund HIV/AIDS project, are hoping to make the transition to phase II.

The organization Kimirina has actively collaborated with Coalition PLUS since the latter's creation in 2008. This collaboration was strengthened in 2011 when Kimirina became a full member of the coalition.

INNOVATION



AIDES – FACILITATING ACCESS TO COMMUNITY SCREENING TO STOP THE EPIDEMIC

Since 2010, AIDES activists in France have been authorized to propose rapid HIV testing during their harm reduction interventions. This is a non-medicalized, community-based rapid test for HIV, also called TROD. With a view to putting an end to the epidemic, 2011 was very much marked by the development of this service within the organization.

This “small revolution” in the HIV-testing offer meets two objectives: first, to facilitate access to multiple testing, as often as needed, especially for those belonging to most-at-risk groups in France (mainly homosexual men and Afro-Caribbeans); second, to provide groups and communities with a health management tool which can be used autonomously, depending on their needs and priorities. In terms of public health, the goal is to reduce the number of people who are not aware of their seroconversion and are therefore more likely to transmit the virus.

AIDES carries out rapid testing in the 23 Regional Health Centers (ARS) throughout France, in French Guiana and the Antilles. A document containing terms of reference regulates screening practices and obligations. It was validated by the results of research studies previously carried-out and serves as a point of reference for the Director-general for Health and the ARS. In 2011, AIDES trained 200 activists and carried out 1,015 interventions. The organization performed 3,000 tests, 90% of which were on gays and Afro-Caribbeans. Forty percent of the tests were performed in AIDES offices throughout France and 60% where those most vulnerable to the epidemic live (70% gay men, 15% Afro-Caribbeans, 15% psychoactive drug users). The French health insurance system agreed to co-finance 19 of these projects until 2013.



“You just need a finger to get tested”, a way of promoting community-based rapid testing – (AIDES conference -Lyon- June 2011)



COALITION PLUS' RESEARCH PROGRAM

The implementation of community-based research projects: the PARTAGES project

PARTAGES is an international research study carried out by Coalition PLUS which focuses on serostatus disclosure in people living with HIV. The primary objective of the project is to understand the individual, psychosocial and contextual determinants hindering or limiting serostatus disclosure, in order to implement targeted field interventions.

Initiated in 2010, the implementation of the PARTAGES research project continued successfully this year with the realization of several essential steps, co-financed by the ANRS and Sidaction. In particular, the study questionnaire was finalized and was translated into various local languages. Furthermore pre-tests were carried out and study interviewers trained. Data collection and input occurred between May and October. Finally, work on data analysis commenced at the end of the year with the support of the University of Quebec (UQAM) and a team of students from the Ecole Centrale de Paris (ECP). This work will continue in 2012 with the organization of a data-analysis workshop in Morocco.

PARTAGES is 7 partner countries (Mali, Morocco, DRC, Ecuador, Romania, France and Canada); 5 study and data collection sites in 5 countries; a total of 13 NGOs, laboratories and research institutions; 1,500 people interviewed with the aid of a standardized questionnaire adapted to different national/cultural contexts.

This year Coalition PLUS' research program organized its activities around three major issues: the implementation of the Partages project, capacity-building in research for the coalition's affiliates and actions promoting community-based research. In parallel, several new projects were developed.

PARTAGES⁺

PARTAGES is an international research project carried out by Coalition PLUS. It focuses on the disclosure of serostatus by people living with HIV/AIDS. This project was co-financed by the ANRS and Sidaction.

INNOVATION

Development of new projects

In 2011, Coalition PLUS, in association with its NGO - and research-based partners, submitted two new project funding proposals to the ANRS:

- A research project on the question of access to care for sex workers in Mali.
- An MSM (men who have sex with men) project proposed by a network of African countries (Burkina Faso, Mali, Cameroon, Côte d'Ivoire, Senegal).

Moreover, it is also planned in 2012 to explore the funding channels for the 5% initiative for AIDS, Tuberculosis and Malaria.

Technical support and capacity building

Throughout the year, Coalition PLUS' research program supported affiliate organizations who asked the former to set up projects and implement them. One example was a workshop, requested by ARCAD SIDA (Mali), to help this organization identify research questions arising from its night-clinic care activities with most-at-risk populations (sex workers, men who have sex with men (MSM), drug users). Following this initial operation, several research projects were established by Coalition PLUS to find the most efficient ways to deal with the problems encountered by ARCAD SIDA in the field. Coalition PLUS also supported many organizations in setting up research projects and also helped them with funding applications.

With the aim of involving its new adherents in the development of its research activities, Coalition PLUS organized a workshop in November 2011, with members of the REVS+ (Burkina Faso) research committee, and with the participation of collaborators from ANSS (Burundi) and from Groupe sida Genève (Switzerland). The objective was to strengthen the REVS+ committee members' know-how and interpersonal skills in regard to scientific advocacy, research ethics and community-based research, in order to ultimately improve the quality of their ongoing interventions and to help them develop complementary collaborative activities with researchers.



The last day of the workshop for the REVS+ (Burkina Faso) research team. The workshop was carried out in collaboration with ANSS and Groupe sida Genève.

Promoting community-based research

In 2011 the Coalition PLUS' research program started a project whose aim was to capitalize on the coalition affiliates' first experiences of community-based research. The objective was to produce a practical and methodological toolkit for community-based research, aimed at community stakeholders and researchers wishing to take part in collaborative research projects. This toolkit will cover the key steps in implementing a "partnership research" study, the various issues involved, facilitating factors, good practices and the potential obstacles and difficulties. Its content will be based on first-hand accounts, practical examples and more theoretical aspects. The project is financially supported by the French National Agency for Research on AIDS and Viral Hepatitis (ANRS) and should be published in the Agency's "Collection Sciences sociales et sida". It will also be translated into English. Its official launch is expected for the 19th International AIDS Conference in Washington DC in July 2012.

Moreover, the research program has continued to develop its activities in scientific advocacy, by participating in working groups on community-based research (the AD HOC PrEP group, ANRS), by developing international collaborations through its participation at conferences (IAS, AIDS IMPACT, etc) and by networking. Several articles have also been published in scientific journals such as *Digital Culture and Education*, *Archives of Sexual Behavior* and *Transcriptases*.

In 2012, the program will have a similar dynamic and various activities will be developed in association with upcoming conferences in Geneva (March) and Washington DC (July).



A training session for interviewers participating in the Partages study in Kinshasa (Democratic Republic of the Congo)

INNOVATION

The Pouvoir Partager project evolved from the Partages project, adapted culturally to the Malian context and financially supported by Fondation de France (FDF) as well as the Canadian Institutes of Health Research (CIHR).

POUVOIR PARTAGER/ POUVOIRS PARTAGÉS PROGRAM, IMPLEMENTATION AND CULTURAL ADAPTATION TO THE MALIAN CONTEXT

The project focuses on women and consists in a series of workshops for exchange and discussion about the issues surrounding the question of HIV positive disclosure, the reasons for deciding to disclose or not to disclose as well as the design of an action plan. One year beforehand, a similar project has already been initiated by ARCAD-SIDA (Mali) with the creation of a women's support group in the CESAC (Center for Care, Workshops and Advice for people living with HIV/AIDS) in Bamako. This group was called "Groundo SO" which means "Chamber of Secrets". The space provided this group of seropositive women with the opportunity to exchange opinions on topics of sexuality, family and daily life. During these debates, the question of disclosure in all its aspects often came up spontaneously without any input or suggestion by the workshop facilitator.

The Pouvoir Partager/Pouvoir Partagés program is therefore a windfall which will help to structure the needs identified by this group and bring answers to the problems surrounding disclosure. In March 2011, the goal was to start a process of implementation and adaptation of the program to the Malian context in order to evaluate its feasibility and relevance.

The first operation, accompanied by a delegation of 5 Malians, was organized in Montreal. It helped to design a draft program as well as an initial training program document.

The second operation was organized in Mali. Two members of the University of Quebec in Montreal (UQAM) went to support the local team in the training of workshop facilitators.



The Pouvoir Partager project is a program of workshops which deals with the question of disclosure of serostatus. This project is the result of collaboration between two founding members of Coalition PLUS-ARCAD-SIDA (Mali) and COCQ SIDA (Quebec) - in partnership with the University of Quebec in Montreal.

The goal of the third operation was to evaluate progress and to reflect on the sexual health aspect.

These different steps helped encourage a participative group methodology and develop strategies anchored in specific cultural contexts so that these women can have a shared understanding of each other, using meaningful context-driven tools to stimulate self-expression (household shopping basket, stones, sticks etc). From this work, an intermediate explanatory guide on the process was created to help train community front-line workers to set up and conduct similar workshops themselves. One hundred and sixteen women took part in the project test phase.

The results of this first phase show that disclosure is a key element in care for infected patients and is a recurrent question in the various contexts of daily life. Likewise, gender and social and cultural values have a great influence on this essential quality of life component in seropositive people.

The next step in the project will be to explore the topics of sexuality in seropositive women and disclosure of their serostatus to men. Nevertheless there is a risk that these project developments will be compromised by the deteriorating political situation in Mali.



"Reality is what is shared" (Bernardo Carvalho, Brazilian writer and journalist)

FINANCIAL REPORT

The data presented in this report allow a comparison to be made between the financial periods 2010 and 2011. The 2011 annual accounts (which integrate the summary of the expenditure account, profit and loss accounts and balance sheet) were certified by our statutory auditor when auditing was completed.

Employment	2011		2010		Change 2010/2011
	Euro	%	Euro	%	
Activities	555,664	37%	522,261	43%	6%
Advocacy	144,807	10%	99,159	8%	46%
Research	197,314	13%	166,867	14%	18%
Technical support	108,790	7%	90,577	7%	20%
Diagnosis	9,771	1%	24,783	2%	-61%
Communication/fundraising	50,205	3%	107,409	9%	-53%
Associative life	44,777	3%	33,466	3%	34%
Funding provided	653,000	43%	402,000	33%	62%
Contributions to members	632,000	42%	400,000	33%	58%
Funding of partners	21,000	1%	2,000	0%	950%
Operations	302,189	20%	297,187	24%	2%
Executive secretariat	179,239	12%	185,795	15%	-4%
General expenditure	98,985	7%	62,786	5%	58%
Conferences/symposia/formation	11,302	1%	21,877	2%	-48%
Consultants and external services	12,663	1%	26,729	2%	-53%
TOTAL EMPLOYMENT	1,510,853	100%	1,221,447	100%	24%

The 2011 financial period confirms the growth in Coalition PLUS activity between 2010 and 2011 (+24%). As well the integration of the 3 new members - ARAS (Romania), Groupe sida Genève (Switzerland) and Kimirina (Ecuador) - the coalition's programs have grown globally by 6% (46% for Advocacy, 20% for Technical support, 18% for Research).

This situation is evidence of the development of the coalition's structure in each of its activities (implementation of the community-based research project PARTAGES; representation activities within international bodies for the interests of those HIV-infected; organization of campaign stunts with activists; Coalition PLUS participation in international meetings; technical support for affiliates, etc) and of its financial support for its members, and, more occasionally, its partners.

RESOURCES	2011		2010		Change 2010/2011
	Euro	%	Euro	%	%
Grants	127,338	7%	17,876	1%	612%
ANRS/SIDACTION "PARTAGES"	69,844	4%			
ANRS "CAPITALISATION"	17,600	1%			
OSI-SOROS	35,027	2%	17,876	1%	96%
Other grants	4,867	0%			
Donations an Fundraising	97,570	6%	91,428	6%	7%
Quebec	60,491	3%	44,202	3%	37%
France	37,079	2%	47,226	3%	-21%
Members' contribution	1,500,510	86%	1,400,300	90%	7%
Affiliates' subscriptions	7,300	0%	4,500	0%	62%
Other products	16,492	1%	41,282	3%	-60%
Service delivery					
Transfer of operating costs	14,938	1%	41,073	3%	
Other products	1,554	0%	209	0%	
TOTAL RESOURCES	1,749,209	100%	1,555,385	100%	12%

In 2011, with an increased global budget of 12%, 86% of income came from founding members, mainly AIDES, as opposed to 90% and 98% in 2010 and 2009 respectively.

Accordingly, Coalition PLUS' process of diversification of resources, which started in 2010, continued in 2011 with a net progression. The overall portion of resources coming from donations and grants represented 13% in 2011, as opposed to 7% in 2010. Donations - and more particularly grants provided for the Research and Advocacy programs - saw a 108% growth between 2010 and 2011.

PROFIT AND LOSS ACCOUNT (First part)

	31/12/2011	31/12/2010
Sale of goods		
Provision of services		
Income from ancillary activities		
NET	0	0
Change in stock of finished goods and work in progress		
Capitalized production costs		
Operating subsidies	127,339	17,876
Write-off of provisions and transfer of	14,938	41,073
Fundraising	97,569	91,427
Subscriptions	7,300	4,500
Other income	1,501,077	1,400,358
TOTAL OPERATING (I)	1,748,223	1,555,234
Operating		
Purchase of goods for resale		
Change in stock		
Purchase of raw materials, supplies etc		
Change in stock		
Other purchases and external charges	418,752	536,530
State - Taxes and similar levies	24,486	15,599
Salaries and appointments	235,462	160,334
Social contributions	110,970	76,711
Other payroll costs		
Provisions for depreciation - fixed assets	5,499	3,392
Provisions for loss in value - fixed assets		
Provisions for current assets		
Provisions for contingencies and liabilities		
Other costs	706,511	426,520
TOTAL OPERATING (II)	1,501,680	1,219,086

PROFIT AND LOSS ACCOUNT (Second part)

	31/12/2011	31/12/2010
1 - OPERATING RESULT (I-II)	246,543	336,148
Allocated gain or transferred loss (IV)		
Allocated loss or transferred profit (IV)		
Financial income		
Income from shares in and loans to group companies		
Income from securities and other financial fixed assets		
Other financial income	5	5
Write-off of financial provisions and transfers of charges		74
Realised gains on exchange differences	13	
Proceeds from sale of securities		
NET FINANCIAL INCOME (V)	18	79
Financial expenses		
Depreciation and provisions expense		
Interest expenses		
Realised losses on exchange differences		485
Net loss from sale of securities		
TOTAL FINANCIAL INCOME (VI)	0	485
2 - FINANCIAL RESULT (V-VI)	18	-406
3 - CURRENT RESULT BEFORE TAX (I-II) + (V-VI)	246,561	335,742
Extraordinary income		
Extraordinary operating profits	969	72
Proceeds from sales of assets		
Write-off of depreciations, provisions and transfers of charges		
TOTAL EXTRAORDINARY INCOME (VII)	969	72
Extraordinary expenses		
Extraordinary operating expenses	1,344	916
Net book value of assets disposed of		960
Depreciations and provisions expenses		
TOTAL EXTRAORDINARY EXPENSES (VIII)	1,344	1,876
4 - TOTAL EXTRAORDINARY PROFIT (VII-VIII)	-375	-1,804
TOTAL INCOME (I+III+V+VII)	1,749,209	1,555,385
TOTAL EXPENSES (II+IV+VI+VIII)	1,503,023	1,221,447
5 - INTERIM BALANCE (I-II) + (V-VI)	246,186	333,937
+ Carry-over of unused resources from previous financial periods		
- Commitments to be fulfilled from designated resources	7,831	
SURPLUS OR DEFICIT	238,356	333,937

ASSETS	Gross	Deprec/amort & Provisions	Net 31/12/11	Net 31/12/10
INTANGIBLE FIXED ASSETS				
Start-up expenses				
R&D costs				
Coconcessions, patents & similar	1,923	641	1,282	
Purchased Goodwill (1)				
Other intangible assets				
Advances and pre-payments				
TANGIBLE FIXED ASSETS				
Land				
Buildings				
Industrial fixtures, fitting, plant, machinery & equip				
Other tangible fixed assets	17,207	7 761	9,446	5,655
Tangible assets in progress				
Advances and pre-payments				
FINANCIAL ASSETS (2)				
Share in subsidiaries and associated companies				
Other shares	198		198	198
Loans	275,000		275,000	
Other financial fixed assets	3,500		3,500	
FIXED ASSETS (I)	297,829	8 402	289,426	5,853
INVENTORIES OF PRODUCTS AND WORK IN PROGRESS				
Raw materials, supplies and other consumables				
Work in progress (for production)				
Work in progress (for services)				
Intermediate products and finished goods				
Inventories of goods purchased for resale				
ACCOUNT RECEIVABLE (3)				
Advances and payments				
Trade accounts receivable	7,223		7,223	24,074
Other accounts receivable	355,378		355,378	603,679
CASH AND OTHER				
Marketable securities				
Cash	256,313		256,313	67,043
Prepaid expenses (3)	10,295		10,295	2,563
CURRENT ASSETS (II)	629,209	0	629,209	697,359
Charges to be spread over several periods (III)				
Loan redemption premiums (IV)				
Unrealized exchange loss (V)			0	0
GENERAL TOTAL (I à V)	927,038	8,402	918,635	703,213

LIABILITIES	31/12/11	31/12/10
ORGANISATION'S CAPITAL		
Equity		
Association equity without the right to recover <i>including gifts and bequests, with return for fixed assets, investment subsidies granted to renewable assets</i>		
Reevaluation reserves		
Statutory or contractual reserves		
Regulated reserves		
Other reserves		
Profits/Losses brought forward	344,110	10,173
Result for the year (profit or loss) (4)	238,356	333,937
Ather liable equity capital		
Association equity with the right to recover		
Bring forward results under the control of 3 rd party financiers		
Reevaluation reserves		
Investment grants		
Regulated provisions		
Owners' rights (loan for use)		
TOTAL (I)	582,466	344,110
Liaison Accounts (II)		
Provisions for contingencies and charges		
TOTAL (III)	0	0
Dedicated funds		
Operating grants	7,831	
Other resources		
TOTAL (IV)	7,831	0
LIABILITIES (1)		
Debenture loans		
Loans from credit institutions (2)		
Loans and various financial debts (3)		
Received advances and prepayments		
Trade accounts payable	144,288	313,934
Tax payable	48,586	45,169
Trade accounts payable - fixed assets		
Other debts	101,988	
Deferred income (1)	33,477	
TOTAL (V)	328,339	359,103
Unrealized exchange profit (VI)		
GENERAL TOTAL (I à VI)	918,635	703,213

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