



Fontaine,
1996 — 2017
Burundi

Fontaine was a sociable, courageous, cheerful young woman, and very fashionable. She was also mature and responsible - she was the one in charge at the Maison de la Joie! It was Fontaine that would speak on behalf of the other youths and children at ceremonies like Christmas. She lost both her parents to AIDS. After their death, she lived with her grandmother and sisters.

She was placed at the Maison de la Joie to help her follow her antiretroviral treatment. In 2009, she was also diagnosed with heart disease, which weakened her. Fontaine was hospitalized, which led her to drop out of her second year. In 2017, after a decade of antiretroviral treatment and constant support of the association, she died in hospital aged 21. Her death greatly saddened the community of the young people and the adults who were there for her until the end.

Hakima,
2010 — 2019
Morocco

Hakima was hospitalized at the Casablanca CHU in the infectious diseases unit. She had to leave school because of her health problems. That was a huge blow for her, and she hoped one day to go back. Hakima loved drawing. She spent her time drawing fictional characters, animals and animations from her hospital bed, and was immensely proud of them. She didn't have an easy life. After her mother died, she fell out with her father and extended family. None of the adults in her family were willing to take her in, and she was often left wondering where she would live and if she would end up in an orphanage. It was very difficult for her. In the last months before her death, she lived with her older brother. But family conflicts and financial difficulties were a constant aspect of her life. Hakima stopped and started her treatment several times, and her health declined. The last time she was hospitalized, she was no longer talking or walking, and found the presence of others trying. Her loss is a great sadness to all who knew her.

A.D.,
1989 — 2019
Mali

Born in Nigeria, A.D. came to Kénikéba in the Kayes region, in the west of Mali, in search of a better life for herself and her family. As a sex worker - like many women in this gold-bearing zone -, she already had advanced HIV infection and was being treated by the referring health center in this district. When A.D. arrived at the CESAC in Bamako, her health had already deteriorated. With no family in Mali to support her, she could not afford the cost of care that would have given her access to coordinated treatment in a healthcare facility. Despite the efforts of the CESAC team, she died two weeks after her admission, aged just 30. Her death left us distraught. All she wanted was to improve her living conditions, like anyone else, yet A.D. died without dignity in another country, far from her family. The transportation of her body for the funeral had to be organized with the support of the CESAC and community-based associations, particularly ARCAD-SIDA and the AFAS (Association Féminine d'Aide et Soutien aux Veuves et Orphelins du SIDA).

Aïcha,
2001 — 2019
Republic of Congo

Aïcha was a shy, quiet and studious young girl. She was born with HIV, and her parents died while she was still a baby. She lived with her grandmother, who gave her her treatment without telling her she was HIV-positive. At the age of 7, Aïcha joined the support groups to raise awareness of HIV/AIDS among young people, as well as its treatment and nutrition. As she got older, these sessions made her curious about the treatment she took on a daily basis. She naturally wanted to know more, and spoke to a psychologist, who told her she was HIV-positive. Aïcha accepted the news well at the time. But as she reached adulthood, everything changed. Aïcha had a busy social life. She spent most of her time with her friends and often went out, like many young women. However, her family did not approve of this lifestyle and accused her (unfoundedly) of behaving like a prostitute, and of going out to infect men. Things got out of hand: her family exposed her HIV-positive status to the entire neighborhood, and further afield! Scorned by all around her, Aïcha became so desolate that she ended her life by drinking acid.

Thanks to the treatment, Aïcha could have lived a full life, without transmitting HIV. But instead she is gone. That is my biggest regret.

MILLION DEATHS

ZERO

PLAN

L.J.,
1991 — 2019
Togo

L.J. était un jeune plein d'énergie. Orphelin de père et de mère, vivant avec la VIH depuis

il avait pourtant suivi une scolarité régulière et avait la tête pleine d'aspirations ! A l'âge de 6 ans, L.J. était sous traitement antirétroviral et bénéficiait d'une prise en charge psychosociale au sein de l'association Espoir Vie Togo. Mais il était la cible de discriminations et de stigmatisations de la part de ses tuteurs, et ce, dès le décès de sa mère. Ce manque de soutien affectait son succès du traitement et la maladie a fini par le rattraper : en 2017, on lui a diagnostiqué une insuffisance rénale chronique due à une nephropathie lice

lente. Il a été alors placé à l'hôpital tard au CHU de Lomé, mais a été très rapidement transféré à l'hôpital de Lomé.

Il n'avait que 27 ans.

C'était pour moi un échec total.

B.B.,
1979 — 2018
Burundi

B.B. was admitted to ANSS' care in January 2005. She had thoracic herpes zoster and was generally in very poor health. We ran a HIV test which came back positive. At the time, we had to wait for the results of the CD4 test before starting treatment. She was put on antiretroviral treatment in August 2006. B.B. had a very complicated personal life: raped by one of her mother's colleagues, she became pregnant aged 14 and had to leave school. Rejected by her biological family, who could not accept her pregnancy, she developed psychosis and was a regular figure wandering the streets asking those she knew for money. B.B. often had fits, and had to be hospitalized on several occasions within a neuropsychiatric center. The ANSS paid her hospital fees. In 2012, B.B. once again fell pregnant. The ANSS provided support as part of its program to prevent mother-to-child HIV-transmission. She gave birth to a HIV-negative little girl. Our team did everything possible to ensure support for B.B., but she was badly affected by her family's rejection. She found it very difficult to keep up her treatment, leading her to develop opportunistic infections. Severely weakened, B.B. passed away in November 2018.

Pascal,
1990 — 2018
Cameroon

Pascal was diagnosed HIV-positive in 2012 and began his treatment at the central hospital in Yaoundé. He came to Humanity First to take part in support groups and educational talks on positive living. Having trained as a restaurant owner, Pascal opened a restaurant called "La Balance". He lent us his culinary services and was even in demand among local NGOs. It seemed that he had it all. But physically, Pascal was not well, he showed signs of fatigue and had spots across his skin. What's more, his highest viral load was detectable. After several follow-up tests, the diagnosis was definitive: he was suffering from Kaposi sarcoma and also had tuberculosis. He was admitted to the Jamot center to treat the tuberculosis, and was also undergoing chemotherapy for the Kaposi. Unfortunately, after three weeks in hospital, Pascal succumbed to the illness. His death came as a shock within our association and beyond, because Pascal was a model of resilience for our community, who are often ostracized from families due to their sexual orientation or HIV-positive status. He had decided to fight for his life and did not give up on learning he was HIV-positive. Quite the contrary, it made him all the more determined. But he stopped the treatment and the illness took over.

Covilen,
1974 — 2016
Mauritius

An AILES volunteer, Covilen was treated at a methadone substitution treatment center. He learned that he was HIV-positive when he was 20. It was all very sudden. His family and friends were extremely proud of him. But when his family learned that he was injecting heroine, they immediately disowned him. Despite all of his efforts, they never forgave him, never supported him. He was devastated, which pushed him further down the path of other psychoactive substances. In 2010, Covilen joined AILES as a peer educator. He quickly became one of our top people. He had this fervor this indignation against society, against his family, against the world. Yet he strove to transform this anger and this feeling of injustice into a desire to help his peers. Covilen was on antiretroviral treatment, but each quarrel with his family represented another obstacle to his health. The day he fell into a coma we realized he was no longer taking his medication. We were all greatly shocked and affected by his state of health. He died after just a few weeks of intensive care. He was 42.

Covilen left behind his indignation and this feeling of injustice that guide us, that give us strength in our struggle and give us the courage to denounce the inequalities we see every day in the field.

TAKE ACTION AGAINST AIDS

WWW.COALITIONPLUS.ORG