

Determined!

ACTIVITY REPORT
2024



Screening campaign, Cairo, Al Salam City (Egypt), November 2023. Al Shehab © Mobarak Saad

COALITION PLUS IS GUIDED BY 3 MAIN PRINCIPLES OF ACTION

Defense of rights and social change

Coalition PLUS works to change society and conditions to guarantee better access to health and to defend the rights of people affected by and infected with HIV and hepatitis and the key populations in the epidemic.

Our partner associations are not only healthcare providers, they also have a mission to change the way societies view people living with HIV/AIDS and/or viral hepatitis and the key populations affected by these epidemics (sex workers, men who have sex with men, trans people, migrants, drug users, etc.).

Our associations incorporate gender sensitivity in their outreach actions, their programs and their advocacy.

Community-based approach

We advocate for the systematic involvement of people infected with, affected by or particularly vulnerable to HIV and viral hepatitis in the decision-making processes and the operational implementation of health programs that affect them.

A global network based on shared governance

Coalition PLUS operates as an international network within which each organization and each country carries equal weight in decisions.

Our member organizations are best placed to make the strategic decisions affecting them. Each one has its voice heard within the Union's political bodies and plays an important role in decision-making processes. Peer learning and solidarity is at the core of the network's vision.



Editorial by Professor Mehdi Karkouri, President

Dear friends,

The world is undergoing profound change in the face of global challenges that give us cause to re-think our relationships of power and to build a fairer and more equitable future. The past year presented in this activity report was marked by an affirmation of Coalition PLUS' stances on global governance, continued mobilization to promote innovation in community-based health, and capacity-building initiatives on the part of our regional networks.

As a network of associations in the fight against HIV/AIDS, viral hepatitis and sexually transmitted infections, Coalition PLUS stands ready to keep pace with these changes and join the forefront of the community response. We firmly believe that it is possible to build a world that defends health and human rights, thanks to a re-engineered global governance and powerful community-based actions.

One of these mobilization initiatives is International Testing Week, the fifth edition of which brought together some fifty countries last November – a shining example of the impact collective action can have. The success of this edition, launched in Cairo, Egypt, should not overshadow the alarming increase in the number of new HIV infections in the MENA region. ITW encourages us to step up our efforts in 2025, and to not give up on achieving the goal of eliminating HIV transmission in 2030.

2024 is barely over and yet new challenges have already emerged... The abrupt freezing of US funding of international HIV/AIDS response programs (USAID and PEPFAR) has plunged health systems in the Global South into chaos. The disruption of supply chains and the closure of clinics have left millions exposed both to existing epidemics and the emergence of new pandemics. International solidarity is needed now more than ever and appeals

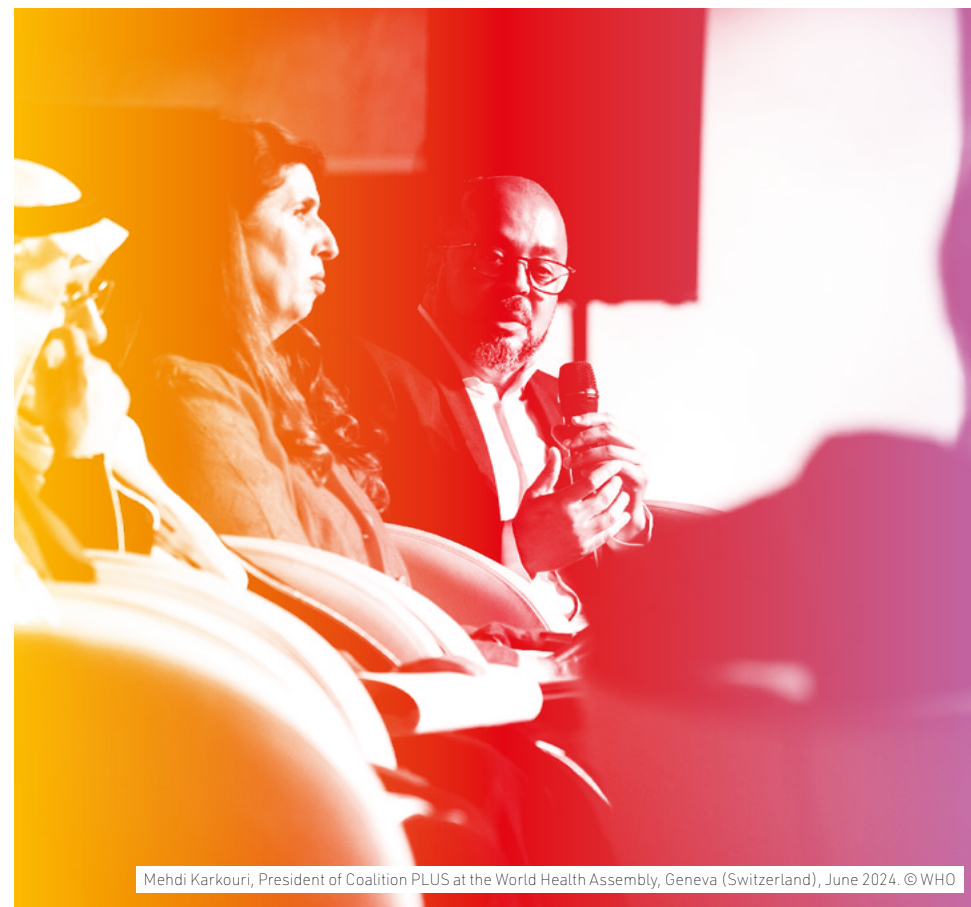
for funds from major international health agencies (like the Global Fund), planned for 2025, are reminders of the importance of securing access to HIV treatment and supporting local associations, vital actors in safeguarding the health and human rights of the most vulnerable populations.

The US' decision has also highlighted the need to rethink the financing of healthcare in Africa and to empower national health systems. Despite criticism of foreign health aid and program verticality, a sudden interruption of vital resources is not the solution. States' investments in their own health systems is crucial, but it needs to be backed by reflection on persistent colonial dynamics and the appropriation of wealth by the Global North. Policy alternatives – such as removing intellectual property barriers and the burden of debt – are what is needed to ensure sustainable domestic investment in health systems.

25 years ago, the Abuja Declaration advocated for the allocation of 15% of national budgets to the health sector. As a global network of community-based organizations, Coalition PLUS shares this ambition and that of greater international solidarity in order to bring an end to the HIV/AIDS epidemic.

There is still hope. In 2024, a formidable HIV prevention and treatment tool was developed, lenacapavir, produced by the Gilead laboratories. We are calling on Gilead to review its licensing strategy and on international agencies to make greater commitments so that this progress can become a watershed moment in HIV prevention. Our network of grassroots associations will unquestionably play a vital role in facilitating access to this prevention tool.

Finally, I would like to express my appreciation for the devotion of all those working on the ground: peer educators, health professionals and social workers. You are the backbone of our combat, maintaining access to health and prevention in often difficult conditions. We include most particularly our colleagues unjustly imprisoned and those whose work has been brought to a halt by the sudden cut-off of funding.



Mehdi Karkouri, President of Coalition PLUS at the World Health Assembly, Geneva (Switzerland), June 2024. © WHO

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The Coalition PLUS Secretariat gathered in Casablanca (Morocco) in June 2024. © Coalition PLUS

Who 01 are we?

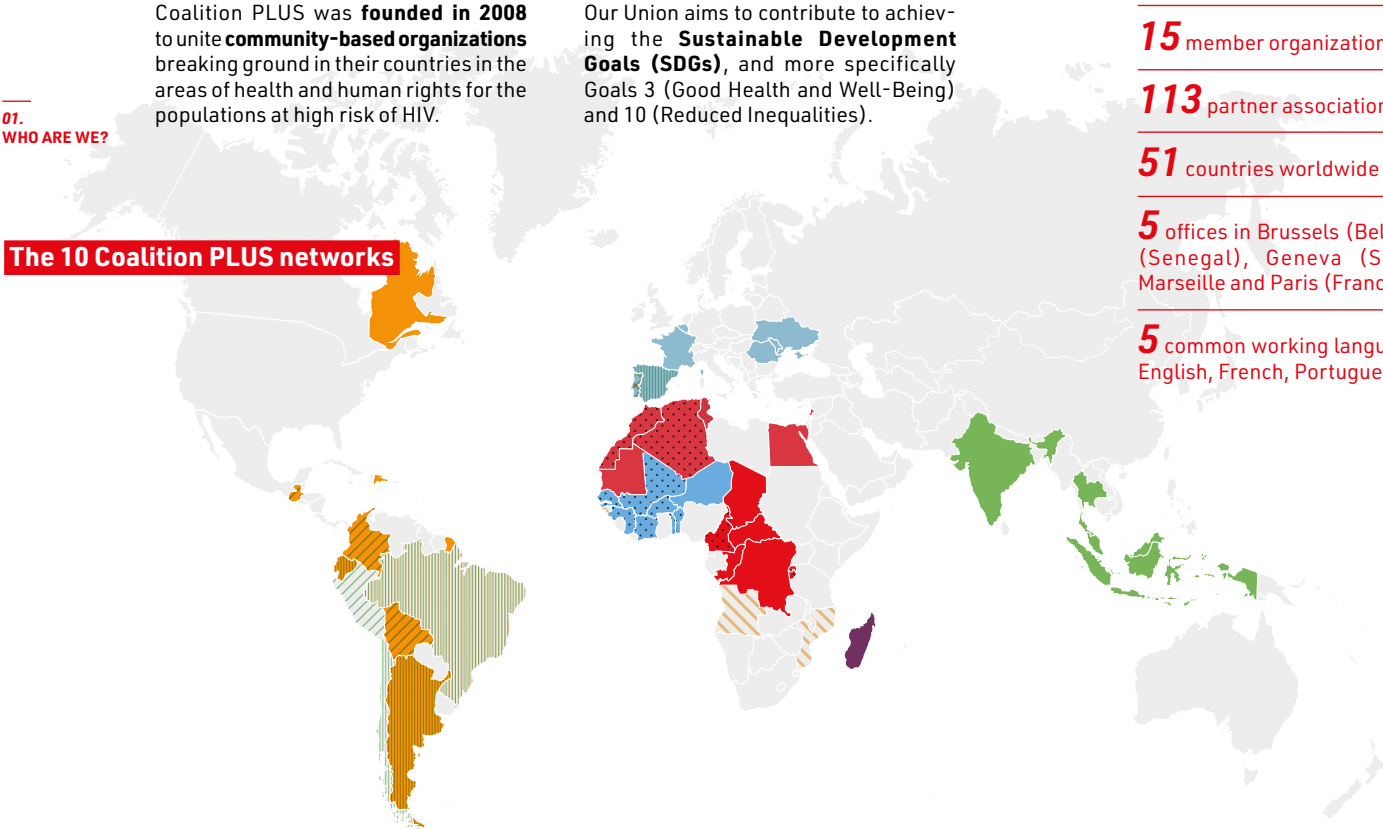
Coalition PLUS, a global network

01. WHO ARE WE?

Coalition PLUS was **founded in 2008** to unite **community-based organizations** breaking ground in their countries in the areas of health and human rights for the populations at high risk of HIV.

Our Union aims to contribute to achieving the **Sustainable Development Goals (SDGs)**, and more specifically Goals 3 (Good Health and Well-Being) and 10 (Reduced Inequalities).

The 10 Coalition PLUS networks



7 réseaux géographiques / 1 réseau linguistique / 2 réseaux thématiques



¹After aggregation of the Coalition PLUS project budgets, irrespective of the lead legal entity (Coalition PLUS, Coalition PLUS Fund, Coalition PLUS Belgium, Coalition PLUS Switzerland and members). Solely the accounts of Coalition PLUS (France), which acts as the managing entity, are presented in detail in this document. The de-

tailed accounts of the other legal entities and members are available through the official disclosure of public accounts channels in the countries concerned or on request.

²Not Full-Time Equivalents (FTEs)

Coalition PLUS in figures

15 member organizations

113 partner associations

51 countries worldwide

5 offices in Brussels (Belgium), Dakar (Senegal), Geneva (Switzerland), Marseille and Paris (France)

5 common working languages: Arabic, English, French, Portuguese, Spanish

26 ongoing programs supported by 13 public and private bodies

A total budget¹ of **€11 million** for all of the Coalition PLUS entities, 70% of which is directly passed on to the network's organizations

62 employees at the Coalition PLUS Secretariat offices and 27² within the regional and thematic network-lead associations

01. WHO ARE WE?

Activities are implemented within **10 networks encompassing 113 partner organizations in 51 countries**. These organizations share the goal of acting together to impact political and scientific developments and social change with regard to health, building on discussions and decentralized decisions that are aligned with regional contexts.

"Central and East Africa Platform" (PACE) geographic network: Burundi, Cameroon, Central African Republic, Chad, DR Congo, Republic of the Congo, Rwanda

"West Africa Platform" (PFAO) geographic network: Benin, Burkina Faso, Ivory Coast, Guinea-Conakry, Mali, Niger, Senegal, Togo

"Americas-Caribbean Platform" (PFAC) geographic network: Argentina, Bolivia, Canada (Quebec), Colombia, Dominican Republic, Ecuador, France (French Guyana, Martinique, Guadeloupe, Saint-Martin), Guatemala

"Europe Platform" geographic network: Belgium, France, Moldova, Portugal, Romania, Ukraine

"North Africa & Middle East Africa Platform" (MENA) geographic network: Algeria, Egypt, Lebanon, Mauritania, Morocco, Tunisia

"Indian Ocean Platform" (PFOI) geographic network: Comoros, France (Mayotte), Madagascar, Republic of Mauritius (Mauritius Island, Rodrigues Island), Seychelles

"South and Southeast Asia Platform" (SASEA) geographic network: India, Indonesia, Malaysia, Thailand

Lusophone linguistic network: Angola, Brazil, Cape Verde, East Timor, Guinea-Bissau, Mozambique, Portugal, São Tomé and Príncipe

Alliance globale des communautés pour la santé et les droits (AGCS PLUS): Algeria, Benin, Burkina Faso, Burundi, Cameroon, Côte d'Ivoire, Guinea-Conakry, Mali, Morocco, Senegal, Togo, Tunisia

Ibero-American Network of Studies on Gay Men, other MSM and Transgender People (RIGHT PLUS): Argentina, Bolivia, Brazil, Chile, Columbia, Dominican Republic, Ecuador, Guatemala, Peru, Portugal, Spain

The Coalition PLUS Executive Board: a forum for adaptation, debate, consensus and decision



The Coalition PLUS Executive Board gathered in Casablanca (Morocco) in October 2024. © Coalition PLUS

Member associations of the Executive Board in 2024

100% Life, Ukraine	AIDES, France	ALCS, Morocco	ANCS, Senegal	ANSS, Burundi
ARAS, Romania	ARCAD Santé PLUS, Mali	COCQ-SIDA, Canada (Quebec)	Fundación Huésped, Argentina	GAT, Portugal
IDH, Bolivia	Kimirina, Ecuador	REVS PLUS, Burkina Faso	PILS, Mauritius	Malaysian AIDS Council, Malaysia

The Union's political model is primarily reflected in its governance bodies: an Executive Board (EB) composed today of 15 member organizations from 15 countries.

Meeting over several days six times a year (including twice in person), the members of the EB determine and oversee the Union's strategic framework and directions.

The Union is managed by a Secretariat based in Europe (France, Belgium) and West Africa (Senegal) along with decentralized teams within the member associations which coordinate regional projects.

Governance is horizontal and shared between the members. It is guided by the principles of good governance and equality when it comes to decision-making, guaranteeing that decisions are fully adopted and supported by the collective.

The model provides a balance between: respect for the sovereignty and specificities of each member organization, collective strength in terms of visibility, influence and access to funding, and pooling of expertise and innovation capabilities and solidarity in the face of crises.

The Coalition PLUS governance model guarantees balanced representation of women and sexual and gender minorities

within decision-making bodies, thereby ensuring that their perspective and specific needs are fully taken into account in the Union's strategy. Of the 32 individuals with a seat on the EB, 17 are thus women and 15 men, and 60% openly belong to a HIV key population group.

Replicated within the networks, the shared governance helps ensure a local dimension to decisions and means of actions, keeping them in tune with grassroots level and the organizations responsible for their implementation.

Through its governance model and that of its decentralized networks, Coalition PLUS powers a long-term vision of the transformation of international relations between non-State actors.

The importance of affiliation with Coalition PLUS has been demonstrated in the institutional development and long-term existence of its members. By joining the Union, each member adheres to the 10 membership criteria¹ which set out a shared political vision and common standards for good governance and financial transparency. The members also benefit from the Union's support mechanisms:

- Annual financial assistance to develop structuring and voluntary activities
- Emergency fund for crisis and conflict situations
- Mobilization in situations involving violations of the rights of activists and sexual minorities
- Liquidity facilities

Lastly, Coalition PLUS has chosen a wide-area network format, currently encompassing 15 member organizations and 113 partner organizations operating in 51 countries. This broad geographic coverage facilitates large-scale mobilization in global crisis situations and the deployment of global strategies that can be adapted to each individual context.

Coalition PLUS priority areas of intervention for 2025-2030

- Strengthening the Union's and networks' governance
- Implementation of interventions and a minimum priority health services package (prevention, treatment)
- Innovations and knowledge production
- Defense of human rights: influence on public policies and social change
- Deployment of political and financial solidarity and protection mechanisms in response to crises
- Implementation of a gender policy for gender-responsive interventions
- In-house training courses on decolonization and the deconstruction of representations surrounding questions of racism
- Integration of challenges connected with climate change and technological innovations (artificial intelligence applied to health and human rights)

¹The 10 criteria to become a member of Coalition PLUS: legal recognition in the country of operation; Primary objective = HIV/AIDS response; CSO goal = societal transformation or any equivalent notion; Operating principle = community-based approach; Integration within the organization of the people concerned by its actions (including within decision-making bodies); Democratic governance and member representation; General and accrual accounting compliant with international norms; Accounts certified by an independent firm; Publication of an annual activity report; Adherence to the Coalition PLUS gender policy.

FOCUS: the Coalition PLUS Innovation Fund

01.
WHO ARE WE?

The Coalition PLUS Innovation Fund (CIF), created in 2023, aims to support pioneering projects within the Coalition PLUS network by fostering the emergence of pilot initiatives and new solutions to combat HIV and respond to other public health challenges.

The fund was designed to encourage innovative short-term projects, and aims to enable the implementation of ideas and interventions that are struggling to raise funding through traditional mechanisms.

Primarily funded by the French Development Agency (AFD) within the framework of its support for projects impacting vulnerable populations, the CIF grants funding of up to €20,000 per project, with the possibility of joint funding to maximize the impact of initiatives.

These projects are generally short-term in nature and are open to the 113 members and partners of Coalition PLUS, with a particular focus on projects that can be reproduced in other contexts or that have a direct impact on local communities.

The first edition of the CIF, in 2023, resulted in the selection of two initial projects that were implemented in 2024.



21 projects were submitted in 2024. Of these, the Selection Committee chose to finance 5 projects on the basis of technical expert opinions:

- Introduction of health services centered on the well-being and **mental health of LGBTQIA+ communities** in Côte d'Ivoire via a community radio
- Creation of a **chatbot** to direct requests for information on the website of our member MAC in Malaysia
- Needs assessment for people practicing **chemsex** in Tunisia and Morocco
- Implementation of a pilot study to identify **early signs of cancer** among WLWH in Cameroon
- And integration of testing and vaccination against HBV within **PrEP** services in Burundi

These projects were initiated over the course of 2024 and will be evaluated in 2025. A third edition of the CIF is scheduled for 2025.

Focus-Mental health and well-being services project for LGBTQIA+ communities in Benin

The project run by the association Bénin Synergie Plus (BeSyP) acted as a powerful tool to improve access to mental health and well-being services for the LGBTQIA+ community in Benin. In a context marked by stigmatization and violence, this project helped fill a significant gap in the range of services adapted to the specific needs of this community. Through training on self-esteem and skills-building workshops attended by 80 community leaders and health professionals, as well as support groups and counseling sessions that benefited 3,000 people, the project provided concrete support and allowed for reflection on ways to ensure the continuation of the services available.

01.
WHO ARE WE?



Photos taken during the training workshop on May 30-31, 2024, attended by 12 health professionals from sites offering health services adapted to SGM and 3 community leaders from the 4 departments concerned by the project. © BeSyP

En partenariat
avec


**RÉPUBLIQUE
FRANÇAISE**
*Liberté
Égalité
Fraternité*

 **AFD**
AGENCE FRANÇAISE
DE DÉVELOPPEMENT



Testing campaign in Cochabamba, Bolivia, 2023. © Wilder Cordova

02 Our actions

12th AFRAVIH International Francophone Conference, April 16-19, 2024

The AFRAVIH conference, held in Yaoundé (Cameroon), provided an opportunity to demonstrate the active engagement of the Coalition PLUS network and champion strong advocacy messages:

Advocacy for recognition of the profession of peer educator

"Our mission is to highlight the urgent need for official recognition of the role of peer educators-a crucial step in legitimizing their profession and ensuring the continuation of their vital work with the key populations affected by the epidemic."

— Papa Abdoulaye Deme,
Head of the Africa Office

Launch of an appeal to rid future generations of HPV cancers

AFRAVIH also generated strong mobilization in response to the urgent appeal made to governments, civil society, researchers and health professionals to combat human papillomavirus (HPV). HPV is responsible for 342,000 deaths per year and has been clearly identified as a major public health problem. Currently, HPV-related cancers disproportionately affect women and people living with HIV, predominantly located in countries in Sub-Saharan Africa.

To prevent the 650,000 cases of HPV-related cancer diagnosed each year, Coalition PLUS is demanding the guarantee of a universal vaccination for all young girls and boys, without discrimination, and the systemization of regular testing for early care-management of people with precancerous lesions.

Appeal for the decolonization of aid in the HIV/AIDS response

Another memorable moment of AFRAVIH 2024 was the address given by Serge Douomong Yotta, Director of Advocacy, which echoed our commitment to a fairer redistribution of resources and greater leadership by the regions most affected by the epidemic.

"If we consider that the fight against HIV should be waged where the virus is most active, then AIDS conferences should give priority to regions where HIV is most active. I would like to salute the AFRAVIH board's judicious decision to organize this edition in Cameroon. Beyond any political considerations, Cameroon is a country where it is essential to discuss HIV and human rights. There's still a lot to do, but above all, a lot to learn."

In 2022, of the 39 million people living with HIV worldwide, 25.6 million are in Africa, compared with just 2.9 million in Western and Central Europe and North America. We are faced with a ratio of 25.6 million to 2.9 million. Despite this reality, we continue to organize our international conferences in regions where the epidemic is less aggressive, knowing full well that delegates from southern countries will encounter difficulties in obtaining visas. We find all kinds of excuses to disqualify the countries of the South, arguing a lack of infrastructure, logistics and security."

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— Serge Douomong Yotta, Director of Advocacy

25th International AIDS Conference (AIDS 2024), July 22-26, 2024

The IAS, held in Munich (Germany), was an important event for Coalition PLUS.

Mobilization for International Testing Week (ITW)

- Themed stand held in the Global Village to publicize the campaign and invite new associations worldwide to take part in the event
- Side event held outside of ITW in partnership with the Global Fund to Fight AIDS, Tuberculosis and Malaria and Prevention Access Campaign (U=U). An opportunity to make new contacts and deepen ties with the private and institutional partners of ITW

Sharing our expertise

20 posters and 3 talks as well as a special session organized by the Americas Platform on International Testing Week.

Winning of the Robert Carr Research Award for the RISE Study

The RISE study analyses representation, inclusion sustainability and equity in Global Fund Country Coordinating Mechanisms (CCMs). Published in 2023, the study is an international research project led by Coalition PLUS in partnership with AIDES, AMFAR and the O'Neill Institute.

The study's goal is to analyze the participation of communities and civil society in CCMs. Conducted in 7 languages and with a total of 627 participants from 84 countries, the RISE study provides recommendations for the Global Fund and other donors or providers of technical assistance.

The Coalition PLUS Executive Board adopts a resolution on lenacapavir, October 2024

"We are asking Gilead to review its prices strategies and calling on international health bodies (UNAIDS, WHO, UNITAID) to make access to lenacapavir a priority"

– Extract from the resolution.

Long-acting treatments represent a major turning point in the fight against HIV. Lenacapavir (LEN) in particular demonstrated superior efficacy in the PURPOSE 1 and 2 trials, where it resulted in a spectacular reduction and even elimination of the risk of infection in some groups. Administered by injection twice a year, this tool could remove barriers to daily oral PrEP adherence and could be an option especially adapted to those most vulnerable, victims of stigmatization or insecurity. Yet despite its potential to transform the dynamics of the epidemics, access to LEN for the populations most in need is far from a foregone conclusion. The biopharmaceutical company Gilead marketing this treatment has embarked on a policy of voluntary licensing agreements in 120 countries, excluding the majority of middle-income countries, notably in Latin America, and restricting the possibilities for marketing low-cost generics beyond the defined list. The price of the drug remains unknown for now, even though production costs are estimated to be very low, which constrains the planning of prevention programs.

In light of these obstacles, Coalition PLUS is committed to gaining universal access to lenacapavir, with no price barrier or geographic exclusion, defends the use of flexibilities in intellectual property rights, including mandatory licenses, and advocates for the involvement of communities at all stages of the product's deployment.

The Union intends to develop international partnerships to step-up advocacy actions to incorporate LEN into existing prevention systems and to maximize its impact in the HIV response.



IAS, Munich, Germany, July 2024. Left to right: Birgit Poniatowski (International AIDS Society), Nicolas Ritter (Coalition PLUS), Her Serene Highness Princess Stéphanie of Monaco (Founding President of FIGHT AIDS MONACO and UNAIDS International Goodwill Ambassador), Winnie Byanyima (UNAIDS), Mehdi Karkouri (Coalition PLUS), Vincent Leclercq (Coalition PLUS). © UNAIDS

5th International Testing Week (ITW), November 18-24, 2024

ITW 2024 in figures

5 days: November 18-24 2024

46 countries

74 participating associations

84,704 tests performed (HIV, HBV, HCV, syphilis)

3.4% positive tests (HIV, HBV, HCV, syphilis)

For HIV during ITW...

35,488 HIV tests performed

57% first-time testers

2% of tests positive for HIV

73% of cases referred to treatment

For the first time, Coalition PLUS chose to launch the 2024 edition in the **MENA region**, signaling a major step forward in the fight against HIV/AIDS and viral hepatitis in this often-neglected zone.

The **example of Egypt** epitomizes the potential of this type of initiative: thanks to an ambitious HCV testing and treatment program, the country has shown that firm political will and national mobilization can produce lasting results.

Based on the experience gained from the first four editions, Coalition PLUS has broadened **participation in ITW to any organization wishing to be involved**. The 2024 edition was consequently joined by organizations from Tanzania and Hong Kong, and networks like International Network of People who Use Drugs (INPUD), Frontline AIDS, Prevention Access Campaign invited their member organizations to participate.

These organizations have a particular interest in this annual campaign's potential to mobilize, to generate new approaches and messages on the importance of testing and to advance advocacy on community-based testing and access to PrEP.

This strategy of openness inspired the 2024 edition and took form in the partnership concluded with the **Grindr 4 Equity Foundation**, which reached millions of people thanks to the dissemination of targeted messages encouraging testing and prevention.

ITW is also an opportunity to step-up **advocacy for PrEP**, an essential tool, access to which needs to be expanded to all key and vulnerable populations.

The announced arrival of **lenacapavir** raises the importance of this advocacy, given that this new molecule offers new outlooks for prophylaxis and HIV treatment, while also requiring sustained logistical planning community backing.

Of course, the success of ITW hinges on the **role of peer educators** from marginalized communities, who are able to reach those most isolated from the health system. Their understanding of social dynamics helps facilitate targeted testing, often among people who have never been tested before. This approach allows for early testing and efficient referral to care. In addition to testing, ITW is a key moment to advocate for strengthened health systems and for recognition of the role of community workers in public policies.

Through this coordinated and innovative actions, Coalition PLUS has consolidated its place as a pivotal player in sexual health and the fight against HIV/AIDS and hepatitis now more than ever, with the ambition that the Union's collective energy harnessed behind the 2025 edition will spark a new perspective on prevention, testing and access to treatment for all.



Awareness-raising and testing campaign, Al Salam City, Cairo (Egypt), 2023.
© Mobarak Saad

International symposium "Activism & resistance in the face of mounting homophobia in the Global South", December 8-10, 2024

Organized at the initiative of AGCS PLUS, the symposium was held in Cotonou (Benin) in partnership with One Advocacy World and with the support of Expertise France, L'Initiative, AFD and the French Interministerial Delegation to Combat Racism, Antisemitism and Anti LGBT Hate (DILCRAH).

Over the three days of the symposium, activists, academics and experts worked together to find solutions to the rising homophobia and transphobia in the Global South.

- Identify strategic advocacy and financing issues for LGBTQIA+ movements
- Strengthen regional networks and alliances to counter anti-gender initiatives
- Enhance the visibility and well-being of activists, taking into consideration cultural and religious diversities
- Prepare a roadmap and a joint statement for Human Rights Day
- Officially announce the creation of the Yves Yomb Award, to support LGBTQIA+ movements

Access to health services

Coalition PLUS contributes to improving the HIV response and to social change from a community perspective through:

- **Direct services** (such as testing for HIV and hepatitis and distribution of antiretroviral drugs)
- **Implementation research** (with a leading role for communities in its development)
- **Advocacy** (to advance the rights of populations)

The 10 Coalition PLUS geographic, thematic and linguistic networks

Thanks to their many shared similarities on a regional level with regard to the epidemiological contexts but also on a cultural and social front, the networks provide **a supportive framework** for community actions **adapted** to needs on the ground and **with a strong impact on the epidemic**.

The aim is to improve (in terms of quality, links with the health system, and diversity) the range of services offered by community-based organizations through the various peer capacity-building mechanisms in order to **impact the general health of those most vulnerable** (MSM, IDUs, SW, migrants, women and young people).

A variety of actions are in place: **demedicalized community-based testing services, promotion of self-tests and self-sampling, roll-out of sexual health services (HIV, STIs, HPV cancers, chem-sex, etc.), combined prevention services, mental health, harm reduction programs**.

Thanks to their understanding of the challenges associated with access to care, their experience in providing outreach services, and their ability to address social determinants, these networks act as a **bedrock of expertise and know-how** for community-based organizations but also public health authorities and actors.

The evaluations conducted in 2024 showed that the networks' actions:

"Helped incorporate community-based strategies into countries' health policies and ensured better participation of associations in the HIV response by positioning many member associations as Global Fund [Principal] Recipients. Targeted capacity-building adapted to the needs of the partner organizations has led to major advances in access to services for key populations (PrEP, community-based testing, service continuum) based on their context."

(Evaluation report).



Examples:

- Inclusion of community-based testing in the national strategy and its scale-up in Mauritania, Congo and Madagascar
- Advocacy for the inclusion of SHS for Key Populations (KP) in the process targeting the widespread adoption of the mandatory health insurance system in Morocco

Illustrations of key activities

Guaranteeing the role of community workers in access to PrEP

In March 2024, **the cumulative number of people** worldwide who initiated PrEP was estimated at 7.4 million¹. A far cry from the target of 10 million in 2025.

Of those who received PrEP at least once, more than 75% (2.6 million) were located in Africa. The Coalition PLUS MENA, PFAO and PACE networks ran an advocacy workshop in Nouakchott in June 2024, attended by **50 participants** including civil society representatives, people from key populations (SW, MSM), the Coalition PLUS technical teams, members of National AIDS Programs (PNLS) in Tunisia, Mauritania and Mali, the National AIDS Secretariat of Mauritania, doctors and lobbyists.

This two-day workshop focused on the **role of community workers in expanding access to and use of PrEP** in their respective regions. During the workshop, the participants collectively identified the key advocacy priorities to transform into concrete actions:

- Stepping up information and awareness campaigns to increase demand and adherence
- Developing service delivery models adapted to the needs of the different key populations
- Combating stigmatization and discrimination, which constitute major barriers to access
- Capacity-building for community workers to guarantee efficient delivery of PrEP services
- Advocacy for sustainable financing of initiatives originating from communities
- Promoting the incorporation of new long-acting PrEP options in national programs
- Finalizing and following national guidelines to guarantee equitable access

A **PrEP task force** was formed to oversee the implementation of these recommendations and to coordinate advocacy efforts.

¹<https://www.prepwatch.org/>

Training for caregivers in transgender health

In Mauritius, transgender individuals face social and cultural barriers that notably deter many of them from identifying as trans. Understanding and consideration of the specific needs of transgender people in the field of health are vital when it comes to ensuring inclusive services.

In June 2024, the PFOI, assisted by SASEA, organized **training for 28 peer educators and carers from community-based associations** (Collectif Arc En Ciel, PILS, Parapli Rouz, AILES) as well as AIDS UNIT nurses.

The participants were trained in gender identity, medical care and hormone treatment, mental health, HIV and STIs, and inclusion. As part of the workshop, the associations also identified the barriers to access to care in the context of Mauritius: access to hormone therapy, mental health for transgender people, lack of trained carers, and the need for legal recognition of transidentity. Based on this, each association set out a four-year **action plan** to improve care for TG people, in line with the services provided by each structure.

Anal health as a sign of health inequalities: a policy priority for Coalition PLUS

Anal cancers are almost all linked to HPV infection. Although rare among the general population, the risk of anal cancer is **8 times higher among HIV+ women** than women who are HIV-negative, and **80 times higher among MSM living with HIV** than among the non-HIV infected male population.

Within Coalition PLUS, the management of anal pathologies in people belonging to vulnerable populations is the subject of progressive and concerted development based on the willingness and capacity of organizations to implement this type of service.

80% of anal pathologies can be treated by trained community doctors, who also

play a vital role in early diagnosis of more complex cases, referring patients to specialists for treatment.

In total in 2024, 19 doctors and 3 nurses from 8 countries (Morocco, Republic of Côte d'Ivoire, Burkina Faso, Cameroon, Democratic Republic of Congo, Congo Brazzaville, Burundi and Mauritius) received training in proctology treatment and referral during regional workshops.

"Behind the combat. Review of needs and available services in the field of mental health and well-being for sexual and gender diversity in Burkina Faso, Côte d'Ivoire and Guinea-Conakry"

At a time when the mental health of LGBTQIA+ activists is being put under great strain in a context of violence and repression in some countries, this project led by the AGCS PLUS network in West Africa aims to assess the needs of and well-being services available to LGBTQIA+ activists in three countries: Burkina Faso, Côte d'Ivoire and Guinea-Conakry.

The study highlights the challenges in accessing mental care, and in particular the lack of trained psychologists, the high cost of consultations and the social pressures on activists. The project seeks to build the capacities of local actors, to finance specific mental health initiatives and to create safe spaces for psychological support.



Scientific research

02.
OUR ACTIONS

Community-based research at Coalition PLUS aims to actively involve the communities in all stages of research projects that affect them, in order to generate scientific data destined to advance advocacy and improve health services.

Coalition PLUS builds on solid partnerships with scientific and academic institutions so as to ensure balanced cooperation between academic researchers and community stakeholders.

These partnerships are formalized thanks to four Research Hubs, which structure and coordinate community-based research within the Coalition PLUS network on a decentralized basis. These Hubs act as forums for exchange and capacity-building as well as making it possible to pool human and material resources.



Screening tests in Antananarivo (Madagascar), Andravoangy district, November 2023. © Viviane Rakotoarivony



Screening tests in Kuala Lumpur (Malaysia), November 2023. © Kasra Rucci

Scientific valorization

→ Coalition PLUS' scientific valorization took the form of the publication of **9 articles** in peer-reviewed journals

→ The members also gave **4 oral presentations and 4 poster presentations** at conferences and took part in **2 seminars**

Research assistance for members and partners takes the form of training (in software especially), but also and above all capacity-building through learning by doing, throughout the project cycle.

In 2024, the Research Department:

→ Provided mentoring to prepare abstracts for conferences

→ Supported the preparation of **3 protocols or concept notes**

→ Assisted 4 people with the writing of a **scientific article**

→ Ran **3 training courses and 6 software follow-up sessions** (statistics, bibliography management, questionnaire creation)

Coalition PLUS also has a **thematic network focused on research: Red Ibero-Americana de estudios en hombres gay, otros hombres que tienen sexo con hombres y personas trans (Right PLUS)**. Right PLUS is composed of 5 centers of research excellence and 10 community-based organizations working together and each contributing their expertise and know-how. The network's goal is to put together community-based and participatory research projects in the Ibero-American region in order to place a spotlight on the phenomena observed by community-based organizations, and consequently improve the health of key populations.

Coalition PLUS continues to gain greater scientific and community legitimacy and receives a growing number of outside requests in connection with its community-based research expertise: revision of articles for scientific journals, project assessment (Selection Committee for L'Initiative projects, Jury for the ANR call for participatory research projects), participation in scientific debate and discussion forums (ANRS "Action Coordonnée 46" PrEP action group, ANRS expert group on priority pathogen identification, Inserm participatory research network), invitations to scientific seminars and events (TRT-5 days, Sidaction Jeunes Chercheurs-ses, Fundación Huésped Scientific Symposium).

02.
OUR ACTIONS

Focus on 3 ongoing research projects

LAMIS-2025

LAMIS-2025 (Latin American MSM Internet Survey) involves the Research Department, Hub Barcelona, Hub Buenos Aires and the Université Péruvienne Cayetano Heredia (member of Right PLUS). LAMIS-2025 is an **online survey that describes the socio-demographic and psychosocial characteristics connected with the sexual health of gay and bisexual men and MSM in Latin America and the Caribbean, and aims to identify the specific psycho-socio-sexual needs of the most high-risk sub-groups.**

LAMIS-2025 was led by the Right PLUS network, with fuller involvement of community-based organizations.

In 2024, 23 countries and territories in Central and South America and the Caribbean took part in the project, which was publicized by 29 community-based and academic organizations promoting the project at continental level among national networks and partners. The results of LAMIS-2025 will provide vital data to steer public policies, and improve understanding of and better address the specific current needs of gay men and MSM when it comes to general health and human rights, while also reinforcing the existing community-based health services in the region.

SAMAR

The SAMAR (Santé Anale au Maroc) anal health project, financed by ANRS-MIE, involves the Research Department, Hub Marseille and Hub Casablanca.

It aims to **evaluate the acceptability of the anal health services currently being rolled out in 8 community sexual health clinics run by ALCS in Morocco, focusing on MSM and SW regardless of their HIV status. It also seeks to identify means of improving these services in a context of persistent taboo surrounding**

anal health. The project will provide new data on anal HPV infection and strengthen healthcare channels tailored to the specific needs of MSM and SW in Morocco. Lastly, the project will identify advocacy needs (for access to vaccinations, for example).

SEXTRA AL

SEXTRA AL, financed by Sidaction, involves the Research Department, IpDH, Kimirina, and Hub Marseille. It ties in with the ANRS SEXTRA (2020–2023) project conducted in 8 countries, which aimed to **identify the sexual health needs of trans men and women involved in transactional sex online.** SEXTRA AL focuses on analyzing data from Bolivia and Ecuador in order to contribute to adapted community responses and to pave the way for future research on this rapidly evolving issue.

Targeting DUs in Togo and Benin

The project is financed by L'Initiative and led by Médecins du Monde (MdM), with Coalition PLUS tasked with the advocacy component and part of the research component in the form of a specific qualitative study among women. The research aspect aims to understand the needs of women drug users (WDUs) with regard to harm reduction (HR) and sexual health in these two countries, based on individual interviews and research-action workshops in order to adapt the services of local community-based organizations to their needs.

Advocacy

Technical support for members' and partners' advocacy, an ongoing commitment to support strategic outreach initiatives:

- A multi-country workshop on advocacy for domestic funding for the PFAO in Dakar
- A workshop on community-based advocacy in Indian Ocean
- A session on PrEP advocacy in Nouakchott
- Advocacy training for the Boards of Directors and Management Boards of associations involved in the fight against AIDS in Mauritius

Leadership & Influence

Assisting the regional platforms (West Africa, North Africa, Central Africa and the Indian Ocean) with the monitoring of their annual advocacy priorities.

International health policies

Strengthen strategic partnerships and foster collective momentum surrounding global health issues, especially the preparation for the replenishment of the Global Fund scheduled for 2025.

Alliance globale des communautés pour la santé et les droits (AGCS PLUS)

In 2024, AGCS PLUS was instrumental in the defense of human rights, mental health and the fight against discrimination against sexual and gender minorities.

Thanks to the strategic and operational support of Coalition PLUS, AGCS PLUS coordinated the regional mobilization to free 13 partners and employees of Alternatives Cameroun, resulting in the release of almost all of the prisoners.

On the mental health front, AGCS PLUS organized a successful pre-conference in the wings of the AFRAVIH 2024 conference held in Yaoundé, bringing together Francophone activists and presenting a novel study on mental health within SGM communities.

At the same time, AGCS PLUS left its mark on the African Commission on Human and Peoples' Rights (ACHPR) with the reading of its declaration at a plenary session, advocating in favor of repealing laws criminalizing sexual and gender minorities, which have been identified as a major impediment to the HIV response.

The network also jointly organized an international symposium on lowering homophobia in Cotonou, which culminated in concrete resolutions.



Awareness-raising and testing campaign, Cairo (Egypt). © Mobarak Saad



Antananarivo (Madagascar), 2023. © Viviane Rakotoarivony

03 Resilience and innovation

Since its inception, Coalition PLUS has demonstrated that the existence of a strong collective not only protects its members but also acts as an important catalyst for individual and collective development. Despite its recent creation (2008), Coalition PLUS has already established and revised its vision and standards, as well as putting in place a governance that reflects its values. In order for this governance to endure, collective efforts need to be made through discussions, expert contributions, network coordination and decision support. This shared governance remains a key tool to guarantee a shared vision and ensure that Coalition PLUS is on the front line when it comes to addressing current and future challenges.

The community-based health model, particularly within associations in the fight against HIV/AIDS, allows for programs to be developed that are tailored to the realities on the ground, with the flexibility to adapt activities to real needs. In this respect, the community-based health model spearheads continual innovation. What's more, the resilience characteristic of community structures positions them as leaders in crises situations, as was the case during the COVID-19 pandemic.

Building on community structuring and collective strength

From the outset, Coalition PLUS put in place an annual financial assistance mechanism to benefit its members. This structured financing enables the member organizations to maintain the level of structure and governance required to be part of Coalition PLUS, but also to implement their own strategies. It also provides funding in areas that are not traditionally nor sporadically supported by their financial partners.

The principle of freedom over the best use of the funds received via this mechanism is directly in line with the principle of locally targeting aid and adapting to the development pace of each organization, while respecting their own internal decision-making processes and the autonomy for each member of Coalition PLUS.

In 2024, the evaluation of this mechanism demonstrated that:

- It was vital to the proper functioning and development of the voluntary activities of organizations, regardless of its share in the organization's total budget
- It has a potential catalytic role and has a strong leveraging effect, providing access to new sources of funding (demanding in terms of management capabilities, reporting, level of co-financing, etc.) and lasting structuring (by facilitating training and retention of human resources)
- It is also indispensable in responding to crises. This assistance has provided a flexible and responsive tool in all of the urgent or unforeseen circumstances encountered by the organizations, irrespective of the gravity of each situation

Lastly, by focusing on the strategic fields of development of the organizations, this assistance helps them to work closely and lastingly on more structural leadership that goes beyond questions of external visibility and legitimacy, and which places the organizations on the front line when it comes to community advocacy, treatment and the national HIV response, as well as access to international financing.

Responding to global crises

In the face of multifaceted crises, Coalition PLUS adapts its responses:

- Use of the Emergency Fund
- Assistance to members
- Granting of liquidity facilities
- Security protocols
- Mobilization of international partners to coordinate the support response

Cameroon

On September 30, 2024, 13 Alternatives Cameroun LGBTQIA+ activists and beneficiaries were arrested for "homosexuality".

As of October 2024, Coalition PLUS stepped into action and an advocacy officer based in Yaoundé coordinated the response efforts (associations, lawyers, technical and financial partners). Today, 3 people are still imprisoned.

Sahel

Coalition PLUS adapted its support to respond to the urgent needs of the countries in the Sahel region, strengthening their resilience in the face of a fragile political and military context.

This support took the form of developing an advocacy strategy to mobilize management fees from the Global Fund for ARCAD SANTÉ PLUS in Mali. To achieve this objective, four technical meetings were held to gain recognition of the relevance of this payment and the purpose of these fees, guaranteeing the sustainability of human rights and health initiatives.

In addition, Coalition PLUS underscored the need for an efficient response to emergencies in the region to coincide

with the 30th anniversary of ARCAD SANTÉ PLUS. To this end, it promoted a plan to coordinate community actions with the support of the Global Fund and UNAIDS.

Furthermore, eight associations in the region were trained in resource mobilization, including the mapping of financial opportunities.

Lastly, with the assistance of Coalition PLUS, the "West Africa Platform geographic network" (PFAO) also produced a training guide for paralegals, thereby strengthening the capacities of twenty paralegals confronted with the challenges of vulnerable populations affected by the regional crises.



ANCS mobile clinic in the Ndong district (Kaolack, Senegal), 2024 © Mamadou Diop

Financial risk-sharing mechanisms

Civil society organizations, particularly community-based organizations, are vulnerable to economic fluctuations and unpredictable 'stop-start' aid flows. However, they often do not have access to financial tools such as loans or liquidity facilities in their countries. Although they may be able to adjust their budget, they sometimes grapple with urgent expenses which allow them to save money in the long run.

Coalition PLUS put in place a financial solidarity system from its creation as a means to support its network. Some members accept to receive their payments at a later date from time to time, making it possible to help other organizations in difficulty or in need of funds to invest. This mechanism has allowed several associations to avoid bankruptcy, to honor essential payments (wages, invoices) and to withstand periods of financial strain.

In 2024, Coalition PLUS supported several of its members by granting them project advances and interest-free loans, amounting to a total of €400,000, to help them overcome cash-flow problems.

DEI: anti-racism and decolonization

In 2024, Coalition PLUS undertook far-ranging work on questions surrounding equity, diversity and inclusion

to tie in with the collective reflections on decolonization and a determination to improve procedures within the Secretariat.

With the support of LAUDACE, a Diversity, Equity and Inclusion (DEI) consultancy, the Secretariat launched a review of procedures and employee perception.

A questionnaire was put in place, followed by interviews and two focus groups over the year. The recommen-

dations resulting from the review were shared with the Management Committee, which drew up an action plan per department to continue work on this subject in 2025.

At the same time, initial training on deconstructing racism was run in face-to-face format at the Coalition PLUS team seminar in Casablanca in May 2024. This training was followed by two further sessions on identifying racism and on psychological safety in the workplace, so that **employees are able to identify and address racism and discrimination at work within a framework of trust and security.**



Republic of Mauritius, 2023. © Kendy Mangra

Coalition PLUS' commitment to gender equality

In 2024, Coalition PLUS reached an important milestone with the adoption of its **gender policy**, reaffirming its commitment to gender equality and the integration of an intersectional approach in the HIV response.

This policy constitutes a strategic lever for reinforcing access to care and rights for women and sexual and gender minorities (SGM), **and has been incorporated as the 10th membership criterion** for Coalition PLUS members, illustrating its importance throughout the network.

The gender policy was finalized thanks to the efforts of the Gender Working Group, which had been tasked with a brainstorming and development process since February 2023. This collective work led to the adoption of a policy in line with our shared vision, and which could be implemented within the wide range of contexts within the network.

A gender policy aligned with the realities of key populations

In most of the countries within the Union, repressive legislation and the influence of anti-gender movements are exacerbating discrimination and violence against SGM, restricting their access to HIV prevention and treatment services. Women and young girls, who represent more than half of the people living with HIV, are also victims of these inequalities. Among them, trans women, sex workers, migrants, racialized women and women drug users are confronted with intersecting vulnerabilities which deepen their exclusion from health systems and increase their risk of HIV infection. Lastly, the lack of gender-disaggregated data within key populations represents a major obstacle to the adaptation of policies and programs to the needs of these populations. An effective HIV response requires an intersectional and gender-responsive approach.

5 commitments

01. Prevent, counter, and combat gender-based violence

02. Promote a gender-responsive organizational framework

03. Institute a wage policy favoring gender equality and inclusion

04. Incorporate the gender approach across all projects, programs and strategic documents

05. Systematically incorporate gender as a determinant of access to health in services and actions for users

Its gradual implementation is based on a number of key actions

- Dissemination and take-up of the policy at all network levels
- Reviews and self-assessments to identify the priority needs of member associations
- Establishment of action plans tailored to national and institutional contexts
- Capacity-building via awareness-raising tools and experience-sharing forums
- Regular monitoring by the Gender Working Group

A lasting transformation of our actions

The adoption of this policy reflects a structural transformation of our actions, with the aim of:

- Improving access to care by systematically incorporating an intersectional gender approach in treatment and prevention services and programs
- Developing targeted advocacy actions to combat gender-based violence and reduce discrimination against SGM
- Conducting research to better understand the obstacles encountered by women and SGM within key populations
- Collecting and analyzing disaggregated and targeted monitoring data



Community-based screening by women, for women in Kuala Lumpur (Malaysia), November 2023. © Kasra Rucci

Using artificial intelligence to further our mission: exploration and first steps

In 2024, Coalition PLUS undertook strategic reflection on the incorporation of artificial intelligence (AI) in its activities. This approach comes at a time when **generative AI advances are opening up novel opportunities for the fight against HIV, operations optimization and improved multilingual communication.**

A working group has been set up to explore the implications of these technologies and to put forward concrete courses of action. Various trials were conducted, particularly within the Secretariat and among the members, using translation, communication, training and data analysis apps. A webinar held in September 2024 confirmed a keen interest among the teams, while also raising concerns regarding data protection and algorithmic biases.

The Executive Board has consequently adopted several resolutions aiming to:

- Facilitate access to AI tools
- Develop specifications for interpretation and translation
- Conduct a review of the impacts of AI on health

Emphasis is also placed on the need for a framework of good practice to guarantee ethical and responsible use of these tools.

This initial exploratory phase paves the way for in-depth work in 2025, with the goal of structuring the use of AI within Coalition PLUS while respecting our community values and commitments.



Antananarivo (Madagascar), 2023. © Viviane Rakotoarivony



Screening tests in Antananarivo (Madagascar), Andravoangy district, November 2023. © Viviane Rakotoarivony

No international solidarity without climate justice

Coalition PLUS is actively involved in combating climate change, mindful of its direct impact on health and the populations at risk of HIV, in particular in countries in the Global South. For several years now, measures have been implemented to reduce the Union's carbon footprint, such as modifications to the travel policy and fewer in-person meetings.

In 2024, the Executive Board consolidated this commitment by tasking General Management with the **development of a climate and health policy incorporating carbon footprint reduction and consideration of climate issues in public health initiatives.** A working group was set up, composed of directors and employees, to structure this policy in several stages. The priorities identified concerned:

- Team awareness
- Reduced travel
- Evaluation of the environmental impact of activities
- Introduction of good practices within the Secretariat and EB

An initial interim review is scheduled for April 2025, before final approval of the policy by the Executive Board in October 2025.

This work forms part of a broader climate justice approach, in connection with gender issues and the decolonization process, aiming to guarantee an inclusive response adapted to the realities of the communities the most exposed to the effects of climate change.



Antananarivo (Madagascar), 2023. © Viviane Rakotoarivony

04

2025: a year of challenges

The role of Coalition PLUS in the global health architecture

The global health issues of 2025 present serious challenges for actors in the fight against HIV. The risk of a setback in the fight against malaria is real, stemming from the persistent financial crisis, the growing effects of climate change and the regression of human rights in many of the world's regions.

The global political context represents a significant challenge for sexual health and the fight against HIV. The successive decisions of the US administration (withdrawal from the World Health Organization (WHO), 90-day PEPFAR funding freeze and closure of USAID) have thrown community-based organizations into chaos, destabilizing health systems across the globe.

The rising popularity of far-right parties in Europe and in some Latin American countries is putting at risk the hard-fought gains in public health. Their hostility to the communities most affected by HIV and hepatitis are jeopardizing prevention and treatment efforts.

In several countries, the rights of LGBTQIA+ individuals are experiencing a decline, compounded by fears of tightening policy stances in 2025. This stigmatization curbs access to sexual health services, increases the risk of HIV transmission and affects the mental well-being of key populations.

2025 is also a replenishment year for numerous international health bodies, foremost among which is the Global Fund. These complex political and social dynamics constitute major risks for sexual health and the fight against HIV, and call for an appropriate level of vigilance and response.

Faced with the risk of the shelving of HIV issues, Coalition PLUS is advocating for resources to be optimized, active participation of communities within governance bodies, and enhanced measures to combat discrimination.

The Union demands recognition for peer educators and community workers as an integral part of health systems and advocates a more inclusive governance framework within the major health institutions worldwide.

Its activities are therefore concentrated on three strategic thrusts:

01. Make communities key agents of global health

By strengthening their participation and advocating for health systems rooted in local realities. Projects like RIPOSTE, La Fabrique des dialogues, RISE, PRIDE, EPIC, Projets hépatites, COHMSM and PreP femmes give the Union access to political tools and leaders that can help make peer education, outreach and community-based research essential means of reaching the most marginalized populations.

02. Coordinating influence within world health authorities

By being involved in WHO, UNAIDS and the Global Fund to make communities' voices heard. In May 2025, for example, Coalition PLUS is planning an event to coincide with the World Health Assembly to ensure a community presence at a pivotal political moment.

03. Maximizing impact while securing sustainable funding

By advocating for sufficient resources and refusing their reallocation to security priorities. Through the New Venture Fund for Global Fund Advocacy (NVF) for example, the Union is gearing up for the eighth replenishment of the Global Fund in line with needs, for key populations in particular.

Since 2019, Coalition PLUS has pushed for inclusion of the central role of communities in the fight against HIV and sustainable and inclusive funding for their actions on the world health agenda. In 2025, the Union aims to affirm its role as a front-line player and ensure that ending the HIV epidemic remains a political and financial priority, countering attempts to call into question multilateralism and the rise of reactionary movements by placing communities at the heart of the response.

04.
2025:
A YEAR OF
CHALLENGES

04.
2025:
A YEAR OF
CHALLENGES

Screening tests in Antananarivo (Madagascar), Andravoangy district, November 2023.
© Viviane Rakotoarivony



05 Finance

Appeals to public generosity

2024 was marked by the resumption of street marketing campaigns. The goal of these campaigns is to assess the development of face-to-face fundraising among the general public in France, with a moderate level of investment. Sporting a new logo and new branding, Coalition PLUS stopped passers-by in the Paris region to ask them to make a regular donation.

3 street marketing campaigns in France in 2024

1,033 new donors recruited.

Amount collected in France in 2024:

13,504 donors for a total amount collected of €1,692,513.78

Amount collected in Switzerland in 2024:

2,349 donors for a total amount collected of CHF 526,926

Amount collected in Belgium in 2024:

2,671 donors for a total amount collected of €294,895.50



Street marketing campaign in Paris (France) in 2024. © Justine Falquerho Agence Solidaire

Stream for love: an online charity event

€8,506 collected in 3 days

170 donors from 9 countries

264 laughs

20 streamers from the LBTQI community and allies

"I was proud to be able, in my own small way, to advance a cause that has been ongoing for so many years, and it's with the help of my community that we will do our part!"

– The streamer Ch0ouxx on her participation.

Helping the Coalition PLUS members develop fundraising among private individuals

In September 2024, the Coalition PLUS team carried out a capacity-building exercise in the Republic of Mauritius with the association PILS, with the aim of relaunching the street marketing fundraising program following its suspension during the COVID-19 pandemic. The goal: increase the association's equity and thereby its financial independence with regard to funders.

Coalition PLUS built a team of recruiters, contributed to providing efficient oversight and provided support for the PILS fundraising officers.

The campaign was a success both in terms of consolidating the links between Coalition PLUS and PILS and the number of donors recruited.

"It's been my pleasure to help out over all these years. Bravo for your commitment. I hope that the fight continues with ever-greater results each day."

– A donor on her monthly donation to Coalition PLUS.



Thank you to our partners



Community involvement program within 7 regional support networks for associations in the fight against HIV/AIDS in the Middle East, North Africa, West Africa, Central and East Africa, the Indian Ocean, American and the Caribbean, South and Southeast Asia, and 3 Coalition PLUS thematic and linguistic networks (Lusophone Network, RIGHT PLUS, AGCS PLUS).

In addition to building structural capacities and support for governance, this program contributes specific capacity-building activities for services, advocacy and community research.



Overall allocation to fund governance support activities for Coalition PLUS members, support for AGCS PLUS, and support for the Secretariat's activities and operation.



→ Exploratory and descriptive multi-country study aiming to identify the determinants of HIV and the sexual health needs of sex workers born male and offering their services online.

→ Surveys to Assess the Impact of the COVID-19 Health Crisis in the Community Setting in the MENA region.

→ Support for the activities and operation of the SES-STIM laboratory, the administrative hosting services for which are provided by Coalition PLUS.



Symposium for reflection on reducing homophobia and transphobia in the Global South



→ Access to PrEP for women: development and implementation of a modeled community intervention adapted to women vulnerable to HIV in Morocco and Mauritius, project led by ALCS (Morocco).

→ Access to quality health services for key populations.

→ Community response for access to care and rights for key populations in 7 Francophone African countries "RIPOSTE-the Voice of Key Populations", project led by REVS PLUS (Burkina Faso).

→ Support for the development of inclusive dialogs in Francophone Africa, involving young people, women and gender minorities to strengthen the impact of the fight against AIDS, tuberculosis and malaria.

→ participatory action research on the involvement of key populations and affected populations in CCMs, through the prism of community responsibility.

→ Dissemination of harm reduction expertise among community-based associations in Francophone West Africa (Togo and Benin) within the framework of the fight against HIV and tuberculosis within drug user populations, project led by Médecins du Monde France.

→ Improving the access of key populations, adolescents, young girls and women to inclusive HIV services that respect human rights in 6 countries in West and Central Africa, through legal reform, support for access to legal services and combating stigmatization, discrimination and gender-based violence (GBV) in health-care settings, project led by UNAIDS.



Short-term technical assistance for civil society and communities.



For better access to quality HIV services founded on the rights of the most vulnerable populations.



The laboratory has provided financial support for the second year running to International Testing Week (ITW) through its Africa department, amounting to €33,000.



Encouraging France to increase its level of support for the Global Fund and maintain its donor status for the 8th Conference of the Global Fund to Fight AIDS, Tuberculosis and Malaria in 2025.



Support for the capacity-building of community-based organizations in Madagascar to improve testing for HIV, STIs and hepatitis, strengthen coordination and reduce transmission.



→ In 2024, the City of Paris supported access to sexual and reproductive health services for women and adolescents in Ecuador, as well as the reintegration of women and girls survivors of gender-based violence.

→ In Madagascar, it supports harm reduction measures for injecting drug users.

→ In Algeria, it provides funding to improve access to information, treatment and combined prevention for vulnerable populations.

And more

MPact, as part of the SHAG Consortium.

Thank you to our sponsors



The company provides financial support and donates equipment to strengthen and deploy proctology care services in Burundi, Morocco, Mauritius and Mali.



The foundation provides financial support for the purchase of professional equipment and training for health care personnel to deploy proctology care services in Burundi, Morocco, Mauritius and Mali.



The company provides skill-based sponsorship in the form of French to Portuguese and Spanish translation.



The company provides skill-based sponsorship in the form of French to Arabic and Russian translation.



The company provides skill-based sponsorship in the form of French to English translation.

At **+€107,032.81**, the net profit for the 2024 fiscal year is down on the initial budget projection of **+€272K**, achieving **39%** of the target. This can be explained by a combination of structural and economic climate factors (slowdown of inflows, extraordinary expenses etc.). At the same time, the result for 2024 is **29% lower** than that recorded in 2023 (**€150,623**).

2024 was a year of transition for Coalition PLUS with the end of the first phase of PLAS 1 but also the gradual launch of new structural funding. Despite this context, Coalition PLUS managed to **maintain a controlled financial trajectory**, with a result representing **almost 1% of total income for the year**.

Unlike the previous year, the Balance Sheet indicators for 2024 show a more variable situation, marked by signs of partial improvement but also elements requiring attention in the short term.

The debt recovery level experienced a decline from €543K in 2023 to €227K in 2024, i.e. a 47% drop. This change can be explained in part by the liquidity facility granted to a member in difficulty and a decision to reschedule the recovery of certain debts.

However, an important positive development should be noted: the loan made to our subsidiary Coalition PLUS Suisse, free of charge, for investments in street marketing was repaid in full.

In terms of equity, the situation remains dynamic, up **+11%** to **€1,090K**, consolidating the financial structure despite a result that is below the initial target.

The liability to members was reduced considerably by **35%**, falling from **€2,856K to €1,858K** as a result of a proactive strategy to settle outstanding balances, in particular with AIDES.

There was a **correlation** between changes in income and expenses for 2024, reflecting a relative stability of the economic model in an environment that was, nevertheless, marked by funding transitions.

Compared with 2023, **income was up +22%**, totaling **€11.19M** against €9.2M the previous year. This rise is essentially attributable to the progression of several initiative agreements signed late in 2023 but active in 2024.

Therefore, the significant events to be noted for this fiscal year include:

→ The resumption of street marketing activities for €200K

→ **A contribution of €150K made to Coalition PLUS by the Swiss office and of €400K by the Coalition PLUS Endowment Fund** to fund Coalition PLUS' ordinary activities

The contribution from AIDES remained stable at €2.5M, confirming its place as Coalition PLUS' primary funding source just before the French Development Agency (AFD), which provided **€2.4M in 2024**.

There was also a **notable increase in funding from ANRS (+61%)** and L'Initiative **(+90%)**, owing to the arrival of highly finance-intensive projects, such as VESPA 3 and Accès Santé 2.

On the other hand, **donations from the public continued to decline** as a direct consequence of the progressive erosion of our individual donor database. Although this decrease is contained as a result of initiatives to secure loyalty, it underlines the need for strategic reflection on the replacement of collection channels.

Expenses followed the same dynamic as revenues, also rising by **+22%** to reach **€11.08M**. This parallelism made it possible to maintain a **surplus of +€107,032.81**, even though this was down on the initial projection.

Unlike the previous year, 2024 was marked by the resumption of several prominent international events held every two years, in particular, the **IAS AIDS Munich, AFRAVIH Yaoundé** and **ICASA** conferences in which Coalition PLUS participated. These undertakings represented a **significant financial mobilization**, which was reflected in the level of expenses.

In parallel, several structural programs, such as PLAS, the Program Agreements and Accès Santé 2 continued to grow, contributing to the gradual increase in the level of activity.

The financial position of Coalition PLUS continued along a trajectory of improvement in 2024 despite a net profit down on 2023.

The **net cash position continues to improve**, rising from **€813K to €1,006K** as a result of the **cash inflow received at the end of the year from the AFD agreements** in particular, which sustained the cash flows available.

Equity continued its consolidation, rising to €1,090K, up 11% compared with 2023 and sustained by the positive result and occasional contributions (endowment fund and Swiss Office).

On the other hand, the **total debt level increased** in connection with the **recognition of deferred income (future commitments to initiatives to be carried out in relation to multi-annual agreements)** regarding new agreements signed in 2024, reflecting a portfolio dynamic in the process of scaling up.

Lastly, the liability to members and other suppliers fell by 35% to €1,856M, approximately €800K of which relates to other liabilities (suppliers, Belgian Office, Swiss Office and invoices not received etc.). This positive development demonstrates an active reorganization which must be continued rigorously in 2025 in order to consolidate the net financial position permanently.

Finally, the financial statements for 2024 reflect a dynamic of progressive improvement. The net result, although slightly down on the 2023 figure, is still positive and demonstrates our ability to adapt to a transitioning financial environment, marked by the end of strategic funding (reduction in funding from the Robert Carr Foundation and decrease in value of the amount of the AFD program agreements) and the gradual launch of new projects.

Several indicators point to an encouraging trajectory, such as the progression of equity, the maintenance of substantially surplus cash and the implementation of concrete protection measures.

This situation reflects the resilience of our economic model and the efforts undertaken to shore up its financial sustainability. It calls for the continuation of the actions undertaken, the optimization of the operational tools and the sustainment of financing strategies in order to consolidate the balances within an uncertain context undergoing change.

– Guy Gagnon, Treasurer



Republic of Mauritius, 2023. © Kendy Mangra

Balance Sheet

	2023	2024	% change
BALANCE SHEET ASSETS	14,699	12,576	-14%
Net assets	1,115	927	
Receivables	12,638	10,571	
Cash	813	1,006	
Prepaid expenses	133	72	
Foreign currency translation adjustment	0.3	0	
BALANCE SHEET LIABILITIES	14,699	12,576	-14%
Equity	984	1,091	
including profit for the year	150	107	
Dedicated funds	70	80	
Debts and provisions	3,383	2,296	
Deferred income	10,259	9,095	
Foreign currency translation adjustment	3	14	



Screening session in Kuala Lumpur (Malaysia), November 2023. © Kasra Rucci

Income Statement

	2023	2024	% change
OPERATING INCOME	9,099	11,035	+21%
Grants and public subsidies	4,395	6,693	+52%
Donations	1,850	1,612	-13%
Financial contributions	2,500	2,500	+0%
Write-backs of depreciation, impairment, provisions and expense transfers	325	180	-45%
Contributions	15	15	+0%
Other	10	35	+21%
Use of dedicated funds	4	0	
OPERATING EXPENSES	8,852	10,802	+22%
Purchases, other purchases, external charges	2,148	2,835	+32%
Financial assistance and network support costs	4,139	4,584	+11%
Taxes and levies	174	140	-20%
Personnel expenses	2,376	2,684	+13%
Depreciation and provisions			
Dedicated funds carried forward	8	9	+13%
Other expenses	7	550	
OPERATING INCOME	247	233	-6%
FINANCIAL RESULT	(97)	(1)	-99%
EXTRAORDINARY INCOME	0	(124)	
ACCOUNTING RESULT	151	107	-29%

Type

Scientific article

Reference

Factors associated with ART interruption during the COVID-19 crisis in Burundi (the EPIC community-based research program)

Niyongabo A., Villes V., Diagne R., Castro Avila J., Mutima J.M., Gakima D., Nimbona P., Niyoncuti E., Rwamuko E., Manirakiza M., Riegel L., Lorente N., Delabre R.M., Rojas Castro D., Scientific Reports, <https://doi.org/10.1038/s41598-024-63805-2>.

Men Who Have Sex with Both Men and Women in West Africa: Factors Associated with a High Behavioral Risk of Acquiring HIV from Male Partners and Transmission to Women (CohMSM ANRS 12324–Expertise France)

Marion Fiorentino, Bakary Coulibaly, Clotilde Couder, Bintou Dembélé Keita, Camille Anoma, Élias Dah, Éphrem Mensah, Thomas Niamkey Alias, Juste Rodrigue Touré, Drissa Camara, Anouwsadat Rodolphe Kokouba, Gwenaëlle Maradan, Marion Mora, Michel Bourrelly, Lucas Riegel, Daniela Rojas-Castro, Bruno Spire, Christian Laurent, Luis Sagaon-Teyssier & Le groupe d'étude CohMSM, Archives of Sexual Behavior, <https://doi.org/10.1007/s10508-023-02715-2>

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Di Ciaccio M., Bourhaba O., Khoury C., Assi A., Abu Zaki S., Lorente N., Castro Avila J., Niyongabo A., Gakima D., Diouh A., Riegel L., Ben moussa A., Girard G., Karkouriv M., Delabre R.M., Rojas Castro, Journal of the International Association of Providers of AIDS Care JIAPAC, <https://doi.org/10.3917/spub.pr1.0009>

Psychosocial experience of the Covid-19 crisis among people who use or inject drugs in Algeria: a community-based qualitative study.

Di Ciaccio M., Boulahdour N., Tadjeddine A., Brouk N., Ouchalal R., Hami N., Bourhaba O., Adami E., Lorente N., Delabre R.M., Karkouri K., Rojas Castro D., Journal of Health Psychology, <https://doi.org/10.1177/13591053241259251>

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Di Ciaccio M., Villes V., Delabre R.M., Alain T., Morel S., Michels D., Schmidt A.J., Velter A., & Rojas Castro D., AIDS Care, <https://doi.org/10.1080/09540121.2023.2268887>

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İbrahim Sönmez, Nicolas Lorente, Jocelyn Mesías-Gazmuri, Axel J. Schmidt, Kai J. Jonas, Valeria Stuardo Avila, Ulrich Marcus, Maria Amelia Veras, Jordi Casabona Barbarà and Cinta Folch, Sexual Health, <https://doi.org/10.1071/SH23112>

Trabajadoras sexuales en el marco de la pandemia brasileña: efectos en y relaciones con la salud.

Amanda de Mello Calabria, Nicolas Lorente, Michel de Oliveira Furquim dos Santos, Ana Carolina Braga Azevedo, Paula Galdino Cardin de Carvalho, Daniel Dutra de Barros, Gizelle Aparecida Oliveira, Océane Apffel Font, Silvana de Souza Nascimento, Maria Amelia de Sousa Mascena Veras, Daniela Rojas Castro, José Miguel Nieto Olivar, SciELO Brasil / CAD Saúde Pública, <https://doi.org/10.1590/0102-311XPT181123>

COVID-19 vaccination intention among people who use drugs in France in 2021: results from the international community-based research program EPIC

C. Lacoux, V. Villes, L. Riegel, S. Coulmain, N. Lorente, S. Eddine Derras, D. Rojas Castro, P. Roux, R. M. Delabre & D. Michels, Harm Reduction Journal, <https://doi.org/10.1186/s12954-024-01096-6>

Article for the general public

Réponse communautaire aux drogues pendant la covid-19 au Burkina Faso et au Sénégal

B. Diane G. Dondbzanga, Juliana Castro Avila, Micaillou Magassouba, Eve Arlette Somda, Moussa Guindo, Lucas Riegel, Nicolas Lorente, Marion Di Ciaccio, Daniela Rojas Castro, SCIDAF, <https://journalarbreapalabres.wordpress.com/2024/12/01/journal-larbre-a-palabres-n-8-decembre-2024/>

Oral presentation

Violences dans le cadre du sexe transactionnel en ligne : une étude sur les hommes (cis et trans), les femmes trans et les personnes non-binaires en France

Salcedo, M. Lacoux, C. Sagaon Teyssier, L. Castro Avila, J. Valdez, E. Delabre, R.M., Michels D. & Rojas Castro D., AFRAVIH 2024

Engagement communautaire dans le maintien des populations clés (PC) dans les soins au Mali

Mariam Yebedie, B. Diane, G. Dondbzanga, Kanuya Couliba, Luis Sagaon-Teyssier, Laura Rouane, Daniel Simoes, Bintou Dembele Keita, Mamadou Cissé, Marion Di Ciaccio, Daniela Rojas Castro, AFRAVIH 2024

Aceptabilidad de la vacuna contra mpox y factores asociados en hombres GBHSH residentes en España

González-Casals H., Martínez H., Lorente N., Villegas L., Mena J., Apffel Font O., Casabona J., Meireles P., Folch C., XLII Reunión Anual de la Sociedad Española de Epidemiología (SEE)/XiX Congresso da Associação Portuguesa de Epidemiologia

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Experiencia comunitaria en el diseño de un manual sobre adherencia al tratamiento para VIH

Yaconi Aguayo L.M., XXI Simposio Fundación Huésped 2024

Programa Protegersex: Soporte mutuo y empoderamiento de trabajadores y trabajadoras del sexo

Villanueva Baselga S., XXI Simposio Fundación Huésped 2024

Consumo de cristal en contextos sexuales: articulando la respuesta comunitaria en México

Caisero P., XXI Simposio Fundación Huésped 2024

Calidad de atención sanitaria en hombres GBHSH diagnosticados con Mpox en Perú

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Fortaleciendo la prevención del VIH mediante la colaboración entre comunidad, servicios y academia en Portugal

Lana J., XXI Simposio Fundación Huésped 2024

30 años de monitorización bio-conductual del VIH en Cataluña

Folch Toda C., XXI Simposio Fundación Huésped 2024

Violencia basada en género facilitada por la tecnología en mujeres y población LGBTQIA+IQ+ del Caribe

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Tu pana te cuida: encuesta sobre VIH, sílis y estado de salud de los venezolanos en Colombia

Mojica Quintero EA., XXI Simposio Fundación Huésped 2024

Construcción de un proyecto interseccional e interdisciplinario con mujeres trans y travestis trabajadoras sexuales

Saggese G., XXI Simposio Fundación Huésped 2024

Iberoamerican Network on Gay Men, other MSM and Trans Studies (RIGHT Plus) + Community-Based Research Approach

Stuardo V., HIV4P 2024

COSMIC: developing a community-based surveillance system of socio-epidemiological aspects linked to sexual health in migrant population in Chile

Adrian C., Lobos, C., HIV4P 2024

IMDES: Impact and experiences of HIV health services decentralization in PLHIV, FSW and gay-bisexual men in Cochabamba-Bolivia

Montaña M., HIV4P 2024

Type

Oral presentation

Reference

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Cáceres C.F., HIV4P 2024

ESTHAR I and II: developing a community-based research line on sexual health of transmasculine and non binary people in Argentina.
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Acceptability, interest and access to health care services of Venezuelan population in human mobility situation in Ecuador.
Medina Matamoros J., HIV4P 2024

Poster

Vulnérabilités chez les usager.ère.s de drogues et adaptations en milieu communautaire en période de crise sanitaire au Burkina Faso et au Sénégal
Dondbzanga B.D.G., Castro Avila J., Di Ciccio M.,Colloque international sur les Sciences sociales et drogues en Afrique francophone (SCIDAF)

Réponse communautaire au VIH en Afrique de l'Ouest dans le contexte de la crise sanitaire du COVID-19
Dondbzanga B.D.G., Villes V., Diagne R., Guindo M., Kretzer L., Somda E.A., Magassouba M., Tall A.M., Coulibaly A., Castro Avila J., Apffel Font O., Riegel L., Lorente N., Di Ciccio, AFRAVIH 2024

Santé mentale et vulnérabilités socio-économiques parmi les personnes transgenres pendant la crise de la COVID-19 au Bénin : résultats du programme EPIC multi-pays.
Kpakpo G., Dondbzanga B. D. G., Villes V., Diagne R., Niyongabo A., Ouessou J., Degbeto M., Akpaka A., Kretzer L., Riegel L., Lorente N., Delabre R. M., Rojas Castro D., AFRAVIH 2024

Impacts socioéconomiques et sanitaires de la Covid- 19 sur les populations clés (HSH, PS, PVVIH) au Sénégal
Magassouba M., Mbodj M., Dondbzanga D., Diagne R., Mané F., Bara L., Pouye M., Lorente N., Riegel L., Delabre R., Rojas Castro D., Groupe de travail EPIC. AFRAVIH 2024

Report

EPIC: HIV/HCV Surveys to Assess the Impact of the COVID-19 Health Crisis in the Community Setting: Results from the EPIC-PILS Study.
Edited by PILS, Mauritius White G., Lorente N., Delabre R.M., Treebhoobun A., Rojas Castro D.

EPIC-Enquêtes pour évaluer l'impact de la crise sanitaire COVID-19 en milieu communautaire : les enjeux de la recherche communautaire dans le contexte de la crise sanitaire.
Iova C., Vozian V., Tossé G., Jones J.C., Delabre R., Lorente N., Riegel L., Kretzer K., Apffel Font O., Rojas Castro D., Tiphonnet E.

Round table

Presentation: Coalition PLUS expertise in community-based research
Nicolas, Marion Journées TRT-5 scientific days (Paris)

Symposium

Presentation: Coalition PLUS and community-based research
Marion, Sidaction *Université des Jeunes Chercheurs* (UJC)

2024 Capitalization publications

Scientific article/abstract

AFRAVIH2400795 (poster): Capitalization on experience of a community intervention model for access to PrEP for women vulnerable to HIV in Mali, Morocco and Mauritius, presented at the 12th AFRAVIH International Francophone Conference, 2024 (Yaoundé, Cameroon, April 16-19, 2024).

Authors: Cristina Iova¹, Amal Ben Moussa², Naoual Laazis², Hayat Boukhris², Fodé Diallo³, Agnès Dénou³, Annette Treebhoobun⁴, Patrice Monvoisin⁴, Gaëlle Tossé⁴, Mim Doorjeane⁴, Cindy Hurdoyal⁴, Neila Radegonde⁴, Estelle Tiphonnet Diawara⁵, Victor Vozian¹; Affiliations: ¹ Coalition Plus-Bucharest (Romania), ² ALCS-Casa-blanca (Morocco), ³ Arcad Santé Plus-Bamako (Mali), ⁴ PILS-Port Louis (Mauritius), ⁵ Coalition Plus-Pantin (France)

Capitalization reports

PrEP Femmes (Phase 1)
This capitalization report on phase 1 of the PrEP Femmes project, entitled "Access to PrEP for women: development and implementation of a modeled community intervention adapted to women vulnerable to HIV in Mali, Morocco and Mauritius", documents and analyzes an initiative led by ARCAD Santé PLUS (Mali) and PILS (Mauritius). Run from May 15, 2020 to May 30, 2024, this project aimed to develop a structured community-based approach to improve access to PrEP for at-risk women. It was jointly funded by L'Initiative.

Self- (inter)-assessment process in the community-based continuums project
This capitalization report is the fruit of extensive exchanges and the dedicated commitment of the team working on the project "Community-based continuums: Improving the impact of the community contribution in access to treatment and retention in care of key populations" conducted by Coalition PLUS and supported by Expertise France with L'Initiative. The document is available in French and English.

EPIC-Surveys to Assess the Impact of the COVID-19 Health Crisis in the Community Setting
This capitalization report analyzes the initiatives launched by Coalition PLUS and its partners as of spring 2020 to protect health workers and guarantee access to essential services for key populations. The result of a capitalization process initiated in June 2021, it highlights the lessons learned, the innovations developed and Coalition PLUS' capacity to mobilize, while underlining the challenges of community-based research in times of crises. A summary of the report is also available in French, English, Spanish and Portuguese.

Tagg Picc: adaptation of the Gundo-So program for young people living with HIV in Senegal

The Tagg Picc capitalization report documents a pilot project to adapt the Gundo-So program (ARCAD Santé PLUS, Mali) to support young people living with HIV in Senegal. It comprises two deliverables: the skills needed to provide support for HIV+ diagnosis, and adaptation of the approach dedicated to adult women to the context of young people. A summary of the report is also available.

Capitalization sheets

PFOI Network capitalization sheets

Role of peer educators (PEs) in retaining PLWHIV in care (Madagascar, Mauritius)

MENA Network capitalization sheets

Importance of peer educators in acceptance of HIV status and referral to care (Morocco, Mauritania)

PFAC Network capitalization sheets

Peer educator engagement to strengthen prevention and the inclusion of PLWHIV from the community-based testing stage (Ecuador, Guatemala, Dominican Republic, Argentina, Colombia)

Capitalization sheets-Cross-cutting analysis of experiences surrounding acceptance of HIV status, support and retention in care for people living with HIV

PFOI, MENA and PFAC network experience/sheet summary

Capitalization sheet-Uniform guidelines to community HIV interventions in Burundi

This capitalization sheet presents the reference document "Uniform and harmonized guidelines to community HIV interventions in Burundi", an initiative led by ANSS-Santé PLUS to strengthen official recognition of community health workers, and peer educators (PEs) especially. Produced within the framework of the Accès Santé 2 project, this sheet documents the development process for the guidelines, the lessons learned and the good practices identified.

Capitalization sheet-Les Halles de Bamako community clinic

This capitalization sheet retraces the experience of ARCAD Santé PLUS in the set-up of the Les Halles de Bamako sexual health clinic in 2010. Produced within the framework of the Accès Santé 2 project, this document highlights the added value of this unique scheme in Mali and its complementary role to the health system.

Acronyms

DAAAs: Direct-acting antivirals

AGCS PLUS: Network assessing the needs of LGBTQIA+ activists in West Africa

AI: Artificial Intelligence

ALCS: *Association de Lutte contre le Sida*, a HIV/AIDS NGO

ANRS: *Agence nationale de recherches sur le sida et les hépatites virales* (French Agency for Research on AIDS and Viral Hepatitis)

ARV: Antiretroviral drugs

EB: Executive Board

EPIC: Surveys to Assess the Impact of the COVID-19 Health Crisis in the Community Setting

CIF: Coalition PLUS Innovation Fund

WLWH: Women living with HIV

GAT: *Grupo de Ativistas em Tratamentos*, Portuguese Treatment Activist Group

GFAN: Global Fund Advocates Network

HIV4P: HIV Research for Prevention

Inserm: *Institut national de la santé et de la recherche médicale* (French National Institute of Health and Medical Research)

ISDAO: *Initiative Sankofa d'Afrique de l'Ouest* (activist-led fund dedicated to building a West African movement that advocates for sexual diversity and sexual rights)

STI: Sexually transmitted infection

LAMIS: Latin American MSM Internet Survey

FAA: Fight against AIDS

LGBTQIA+: Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Intersex, Asexual, and more

MdM: *Médecins du Monde*, international humanitarian organization

OECD: Organisation for Economic Co-operation and Development

WHO: World Health Organization

KP: Key populations

PEPFAR: President's Emergency Plan For AIDS Relief

PFOI: Indian Ocean West Africa Platform

UNDP: United Nations Development Programme

PrEP: Pre-Exposure Prophylaxis

RENAPC: *Réseau national des associations des positifs du Congo* (National Network of Associations for the HIV+ in Congo)

SAMAR: *Santé Anale au Maroc*, anal health project in Morocco

SESSTIM: *Sciences économiques et sociales de la santé et traitement de l'information médicale* (Health Economics and Social Sciences & Medical Information Processing)

SEXTRA AL: Study project on the sexual health of trans people involved in transactional sex

DU: Drug user

IDU: Injecting drug user

UJC: *Université des Jeunes Chercheurs*, multi-disciplinary training program run by Sidaction

HBV: Hepatitis B virus

HCV: Hepatitis C virus

HIV: Human Immunodeficiency Virus

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