#STILL STANDING

2025 ACTIVITY REPORT

COALITION PLUS

EDITORIAL BY PROFESSOR MEHDI KARKOURI, PRESIDENT OF COALITION PLUS

The history of the fight against AIDS is paved with milestones. 2025 was unquestionably one of them. Thirty years ago, in 1996, the arrival of the first three-drug regimens, or triple therapies, ushered in an era of hope and a fierce battle for universal access to treatments. Since then, we have saved dozens of millions of lives and prevented just as many infections thanks to the unfailing mobilization of non-profits, doctors and donor States. We have transformed HIV into its own "school of public health", giving the people concerned a central role in the response.

And yet 2025 will forever be characterized by a cruel paradox. At a time when science has never been closer to providing us with the means of putting an end to the epidemic, the financial and political worlds have slammed on the brakes. The withdrawal of major funders and the rise in conservative currents have weakened an ecosystem that we have spent decades building. The models predict a resurgence of the HIV epidemic, with growing numbers of infections and deaths in the coming years if this mobilization continues to wane. But Coalition PLUS has not only stood firm in the face of this adversity, it has stepped up the momentum.

In a profound spirit of kinship, my thoughts go to our colleagues working on the front lines of the epidemic. You are the ones forging ahead in sometimes dangerous and all too often insecure situations, where community outreach is hindered and the rights of our communities are openly disregarded. To those who are holding out despite the threats, know that Coalition PLUS stands by your side.

SCIENCE AT THE SERVICE OF COMMUNITIES

Our strength lies in our ability to turn research into action. In 2025, we continued to invest heavily in community-based research, resulting in the execution of ambitious projects such as LAMIS and SCAR. By documenting the reality experienced by key populations, we are going beyond pure science; we are producing evidence to support our demand for rights to be respected and for better access to health services.

This expertise enabled us to make a historic step forward this year: the adoption of a PrEP fast-track plan. We shall not allow innovations to remain the privilege of the richest countries. Coalition PLUS has positioned itself as a major actor in the world-wide distribution of pre-exposure prophylaxis. Our role is clear: to inform, to assist and to break down social and political barriers so that each and every person in need can protect themselves, regardless of where they live.

URGENT ACTION, LONG-TERM ADVOCACY

The past year was sadly one of widespread uncertainty. True to our values of solidarity, we deployed exceptional emergency aid to support our member and partner organizations operating in volatile political and financial contexts. Whether in the face of the repression of minorities or the collapse of local health services, Coalition PLUS answered the call, taking action to guarantee the continuity of essential services and the security of the activists on the ground.

At the same time, we have been a loudspeaker for the voice of communities on the global stage, both at the World Health Assembly and at the Global Fund Replenishment Conference. In an upended geopolitical context and one of successive crises, we have put everything possible into reminding decision-makers that every euro invested in the Global Fund is an investment that saves lives and contributes to the global fight against HIV, TB and malaria, and more broadly to strengthening healthcare systems and preparing for future pandemics. We will not let treatments for the Global South become a budgetary afterthought variable.

ANOTHER SUCCESSFUL INTERNATIONAL TESTING WEEK

The success of International Testing Week 2025 is a testament to our network's incredible vitality. Thousands of initiatives across the world helped bring testing to those often with little access to traditional health systems. This mobilization is tangible proof that the community-based approach is the only building block able to reach the "last mile" in public health. More than 92,000 screening tests were carried out in one week on five continents, consolidating the place of this campaign on the world health agenda. The launch of this campaign, in the city of Bogotá, placed the spotlight on the incredible efforts of community actors in Colombia and in the Americas and Caribbean Region where Coalition PLUS has a platform.

PARTNERSHIPS AS A STRATEGIC PRIORITY

Lastly, 2025 was marked by the ramp-up of our partnership development. We strengthened our connections with our sister organizations and with other major international networks. Beyond the question of tactics, this choice was a strategic one. In the face of global crises, the response must be collective. By pooling our strengths, our expertise and our advocacy skills, we can create a united front that can withstand the conservative winds blowing right now and influence global decisions.

I would like to take this opportunity to thank all of Coalition PLUS's institutional and financial partners as well as our donors who allow our movement to act both locally and globally against the epidemic, and for the health and rights of communities.

TURNING THE CRISIS INTO AN OPPORTUNITY

The current upheavals may be sudden, but they also offer an opportunity for us to make a deep-seated change to our models. The future of the fight against AIDS does not reside in a play-off between non-profit and government action, but rather in a judicious mix of the two: community-led action must be recognized as a health profession in its own right and benefit from stable domestic funding.

As a doctor and President of Coalition PLUS, I firmly believe that we can only curb the epidemic by placing participation and human rights at the center of each decision. Coalition PLUS is ready to meet the challenges ahead.


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"The current upheavals may be sudden, but they also offer an opportunity for us to make a deep-seated change to our models."

Mehdi Karkouri, President

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Bamako, Mali, September 2025. A woman living with HIV coming to collect her antiretroviral treatment at the Center for Treatment, Activities and Counseling for People Living with HIV/AIDS. ©The Global Fund / Vincent Becker

Montreal, Quebec (Canada), April 2026. Coalition PLUS Executive Board. Left to right: Martine Kabugubugu and Jeanne Gapiya Niyonzimayia (ANSS-Santé-PLUS), Cécile Henriot (Coalition PLUS), Magattte Mbodj (ANCS), Oleksii Zavadynskyi (100% LIFE) ©Renaud Philippe

01. WHO ARE WE?

“By pooling our strengths, our expertise and our advocacy skills, we can create a united front that can withstand the conservative winds blowing right now and influence global decisions.

Mehdi Karkouri, President

01. COALITION PLUS: 115 ASSOCIATIONS WORKING FOR THE HEALTH AND RIGHTS OF THE POPULATIONS VULNERABLE TO HIV

01.
WHO ARE WE?

Created in 2008, Coalition PLUS is a network of over 115 community-based organizations committed to the health and rights of key populations vulnerable to HIV and hepatitis across the globe.

Our driving goal is to be a solid, effective and sustainable link in the HIV and hepatitis response, constructed with the communities concerned, in a world plagued by crises and backtracking on rights. To achieve this, we aim to:

- Impact the global health of the populations vulnerable to and affected by HIV around the world
- Influence national, regional and international public policy
- Strengthen the horizontal and inclusive governance of Coalition PLUS

Our activities are implemented within 10 networks encompassing 115 partner organizations in 54 countries.

These organizations strive to act together to impact political decision-making, scientific research and social change with regard to health, within a framework of discussions and decentralized decisions that are aligned with regional contexts.

Ndorong community clinic in Kaolack, Senegal, December 2024. Souadou Dia, lab technician, taking a blood sample from a patient. ©Mamadou Diop

COALITION PLUS PRIORITY AREAS OF INTERVENTION (2025 - 2030)

- **Strengthening the Union's and networks' governance**
- **Rolling out interventions and a minimum priority health services package (prevention, treatment) aligned with the needs of those vulnerable**
- **Innovating and producing knowledge**
- **Defending human rights: influencing public policies and social change**
- **Deploying political and financial solidarity and protection mechanisms in response to crises**
- **Implementing a gender policy for gender-responsive interventions; in-house training courses on decolonization and the deconstruction of representations surrounding questions of racism**

COALITION PLUS IN FIGURES

115

partner associations, 15 of which make up the governance of the Executive Board

54

countries worldwide

6 offices:

Barcelona (Spain), Brussels (Belgium), Dakar (Senegal), Geneva (Switzerland), Marseille and Paris (France)

5 common working languages

Arabic, English, French, Portuguese, Spanish

WE ARE HELPING ACHIEVE THE SUSTAINABLE DEVELOPMENT GOALS (SDGs)

and SDG 3 (Good health and well-being) and SDG 10 (Reduced inequalities) in particular

9 million euros

A total budget of

of which 70% are directly passed on to the network's organizations

17 ongoing programs

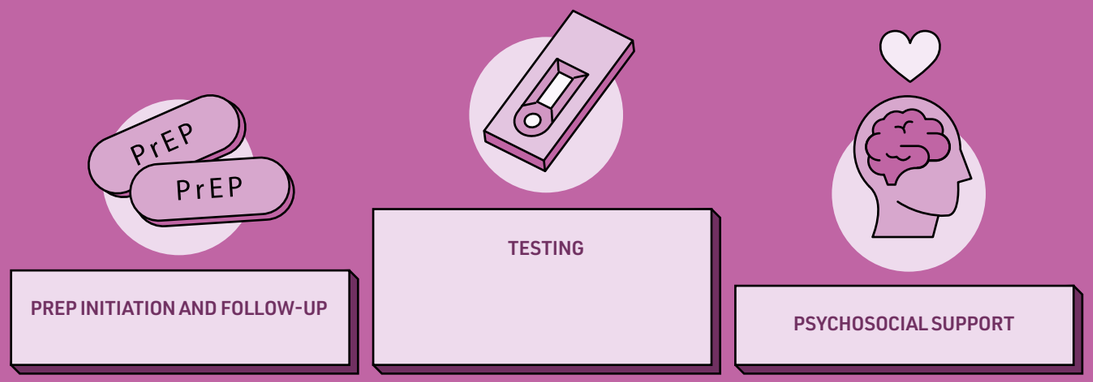
supported by 13 public and private bodies

64 employees

02. OUR IMPACT IN 2025

*Survey of 14 Coalition PLUS member organizations
from January 1 to December 31, 2025

AT A GLANCE



TOP 3 ACTIVITIES

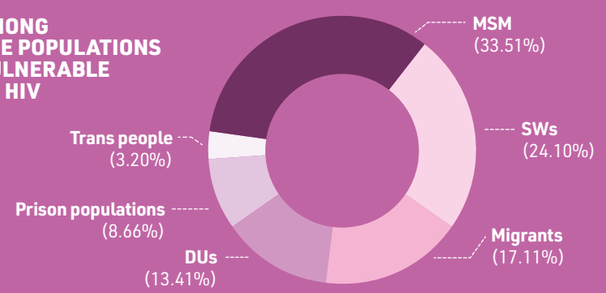
370,666
HIV tests performed

7,553
people trained

87 ongoing
research projects

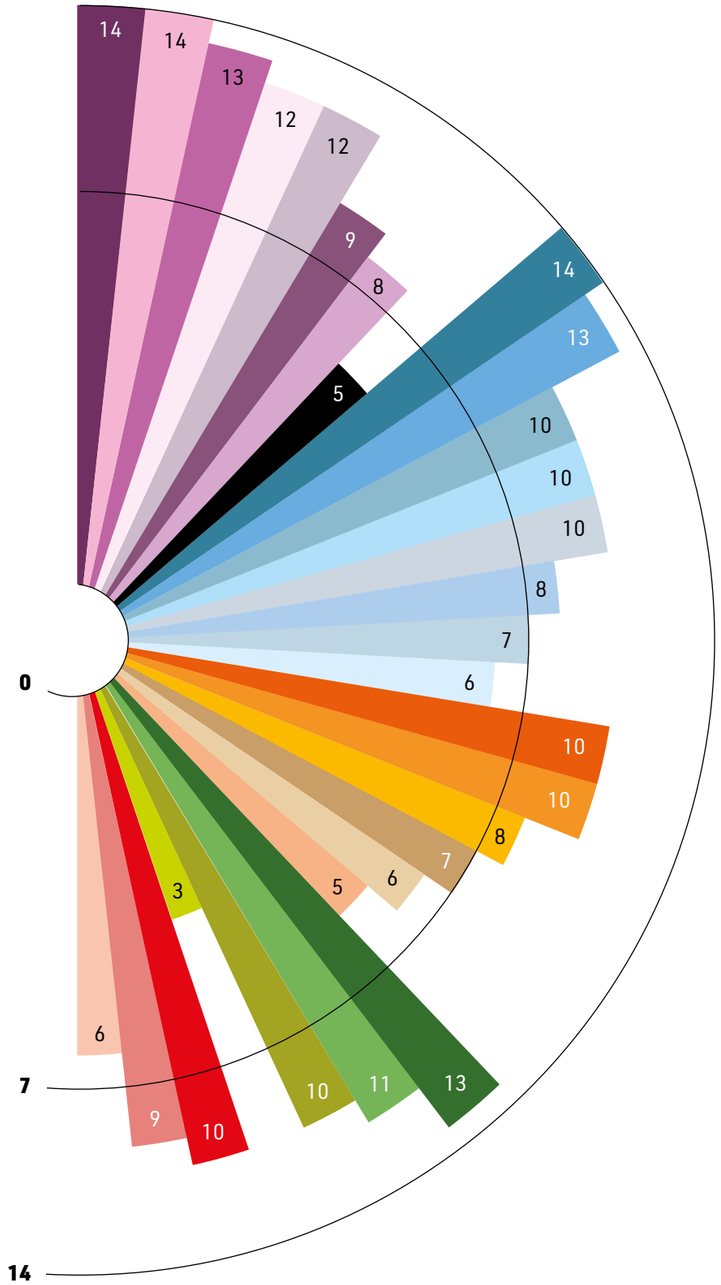
884,458
beneficiaries

AMONG THE POPULATIONS VULNERABLE TO HIV



OVERVIEW OF SEXUAL HEALTH SERVICES AVAILABLE WITHIN OUR NETWORK'S ORGANIZATIONS

*Survey of 14 Coalition PLUS member organizations
from January 1 to December 31, 2025



PREVENTION
- PrEP initiation and follow-up
- HIV testing
- STI testing
- Distribution of sexual health-related documentation
- Distribution of sexual health materials
- Virtual prevention
- Distribution of drug HR materials
- Contraception

PSYCHOLOGICAL, ECONOMIC, AND LEGAL SUPPORT
- Psychosocial counseling and support including adherence assistance
- Community mobilization and self-help
- Recording of cases of human rights violations
- Legal assistance
- Identification of patients lost to follow-up
- Comprehensive care in cases of GBV
- Family mediation
- Income-generating activities, training, job market entry

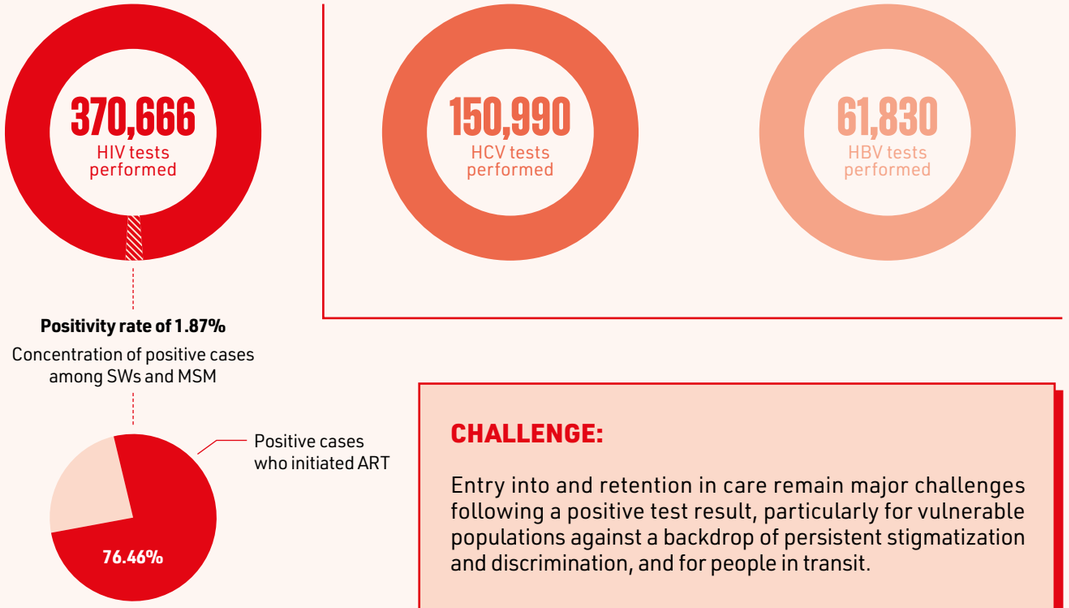
TREATMENT
- Management of STIs – diagnosis and treatment
- Treatment for PLHIV
- Treatment of proctological pathologies
- Diagnosis and treatment of HIV/TB co-infection
- Obstetric and gynecology care and follow-up
- Addiction treatment – OST prescription and follow-up

REFERRAL
- Referral for psychosocial care
- Referral to HR services
- Emergency shelter, accommodation
- Referral for post-abortion care

BIOLOGICAL FOLLOW-UP
- Biochemical analyses
- Viral load
- CD4

HIV AND HEPATITIS TESTING

Community-based testing, as part of an outreach approach, enables early detection of infections and facilitates quick access to antiretroviral treatment, thereby reducing HIV transmission.



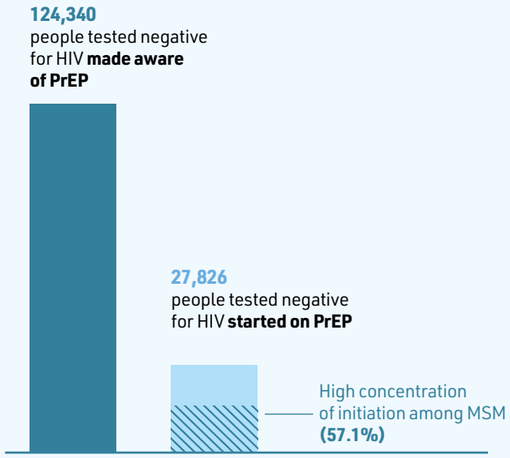
CHALLENGE:

Entry into and retention in care remain major challenges following a positive test result, particularly for vulnerable populations against a backdrop of persistent stigmatization and discrimination, and for people in transit.

PREP

Community-based associations are on the front line when it comes to raising awareness of PrEP among the populations concerned. They play a vital role in guiding people towards PrEP initiation and follow-up.

100% **of the associations carry out PrEP initiation and follow-up**



TRAINING FOR HEALTH HUMAN RESOURCES

7,553
people trained

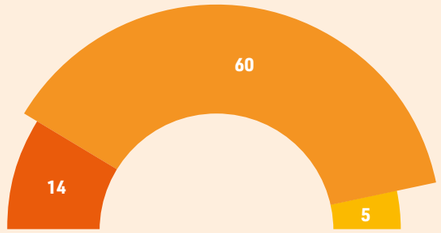
Community staff **(75.54%)**
Paramedical staff **(10.81%)**
Medical staff **(13.65%)**

Three-quarters of the people trained are community health workers, health mediators and peer educators.

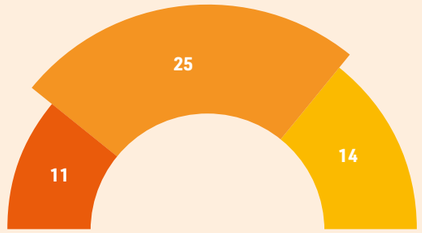
ADVOCACY AND PUBLIC POLICY

Coalition PLUS uses lobbying to influence political decision-makers and public bodies in order to improve policies impacting the fight against HIV/AIDS.

POLICY CHANGE: **79**



SEATS ON DECISION-MAKING BODIES: **50**



Regional
National
International

THE GEOGRAPHIC NETWORKS

"Central and East Africa Platform" (PACE)

Burundi, Cameroon, Central African Republic, Chad, DR Congo, Gabon, Republic of the Congo, Rwanda.

PACE carried out an exploratory mission to incorporate the Gabonese association "Page Blanche pour Ton Histoire" (PBPTH) into the platform, thereby expanding its territorial coverage. Since then, PBPTH has benefited from governance and structuring support from the PACE members.

"West Africa Platform" (PFAO)

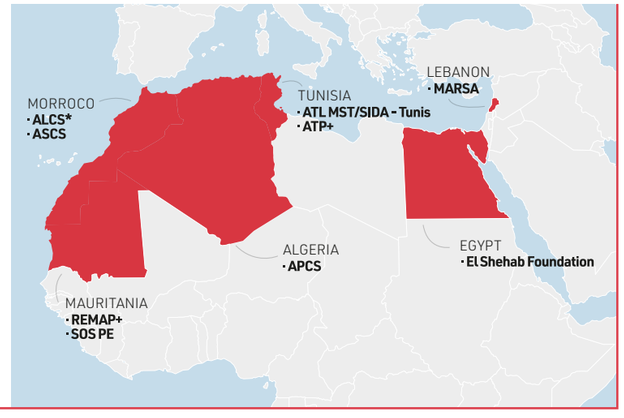
Benin, Burkina Faso, Côte d'Ivoire, Guinea-Conakry, Mali, Niger, Senegal, Togo.

The platform organized a media training session in Mali on the basics of HIV and hepatitis, human rights in relation to sexual health, STIs and HIV/AIDS, and the barriers that limit access to HIV and TB treatment.

"Middle East and North Africa Platform" (MENA)

Algeria, Egypt, Lebanon, Mauritania, Morocco, Tunisia.

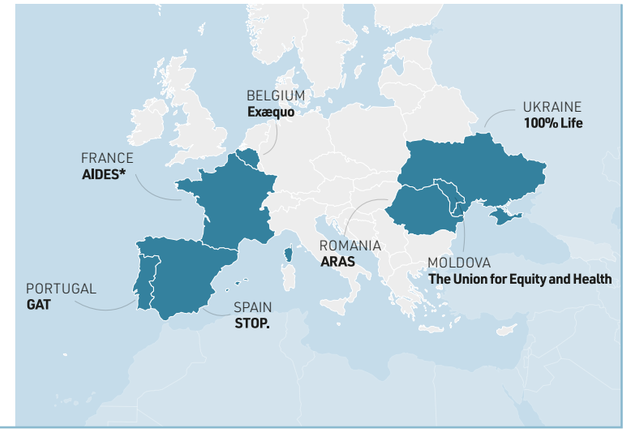
ALCS ran a feedback workshop in Morocco to present, enrich and validate the results of the participatory community analysis carried out in Morocco and Tunisia on chemsex. Attended by 30 stakeholders (UNAIDS, Ministry of Health, health professionals, peer educators), the workshop aimed to develop a joint community action to reduce the risks connected with this practice in both countries.



"Europe Platform" (PE)

Belgium, France, Moldova, Portugal, Romania, Spain, Ukraine.

In France, AIDES co-organized the Person-Centred Care Advocacy Academy (EACS), a conference bringing together some fifty advocates, activists, researchers and healthcare providers from across continental Europe to discuss ideas, foster innovation and establish networks.



"Americas-Caribbean Platform" (PFAC)

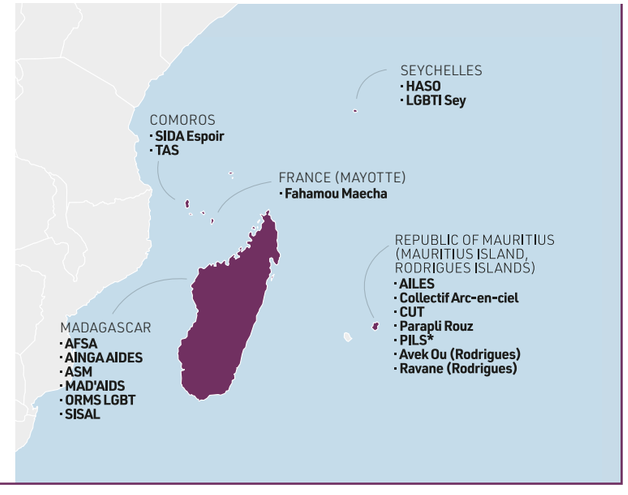
Argentina, Bolivia, Canada (Quebec), Colombia, Dominican Republic, Ecuador, France (French Guyana, Martinique, Guadeloupe, Saint-Martin), Guatemala.

In the Dominican Republic, the platform set up a workshop on mental health care for carers, managers, community workers and members of the boards of CAS (Guatemala), Red Somos (Colombia), IpDH (Bolivia), Kimirina (Ecuador) and Fundación Huésped (Argentina).

"Indian Ocean Platform" (PFOI)

Comoros, France (Mayotte), Madagascar, Republic of Mauritius (Mauritius Island, Rodrigues Island), Seychelles.

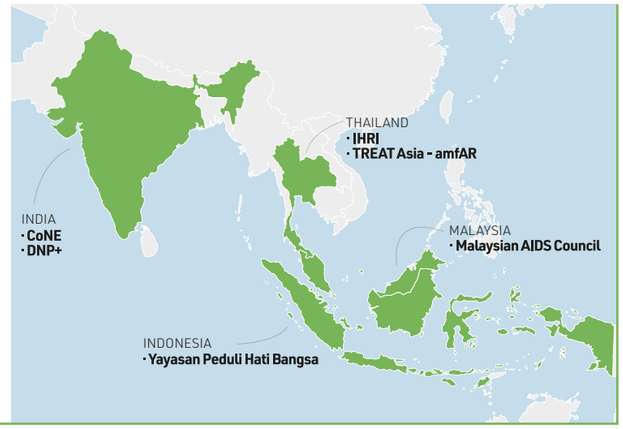
PILS (Mauritius Island) ran training in Madagascar for 7 Malagasy partner associations (AINGA AIDS, ORMS LBGT, MAD'AIDS, CUT, AFSA, SISAL, ASM) on the basics of harm reduction in order to set out the fundamental principles and develop advocacy messages and strategies tailored to the context of Madagascar.



"South and Southeast Asia Platform" (SASEA)

India, Indonesia, Malaysia, Thailand.

Yayasan Peduli Hati Bangsa (Indonesia) put in place a community-led monitoring (CLM) system to collect and disseminate data. The system identifies gaps in health services in order to improve quality and care provision as well as to refer key populations to the appropriate services.



THE THEMATIC AND LINGUISTIC NETWORKS

Ibero-American Network of Studies on Gay Men, other MSM and Transgender People (Right PLUS)

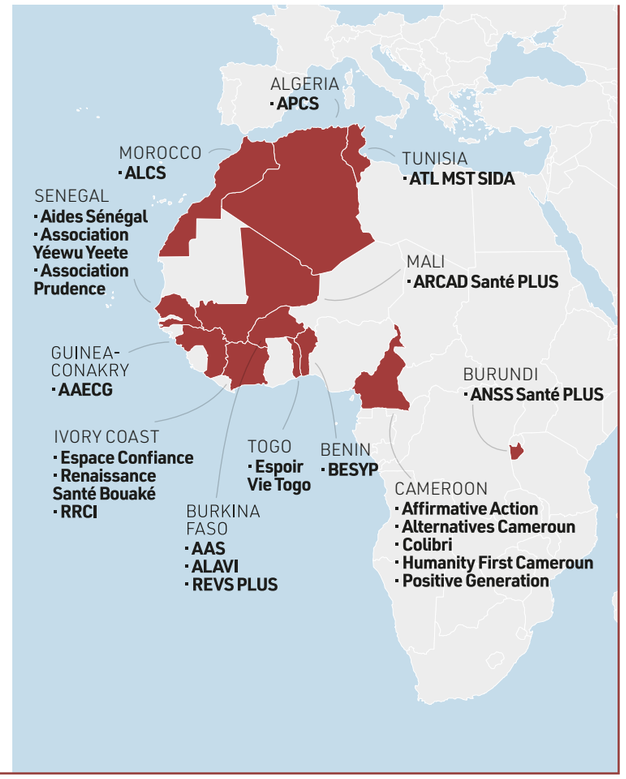
Argentina, Bolivia, Brazil, Chile, Colombia, Dominican Republic, Ecuador, Guatemala, Peru, Portugal, Spain.

The Right PLUS network organized its first webinar as part of a series of quarterly online discussions designed to share projects and experiences within the network while also strengthening the sense of belonging.This initial webinar, entitled "Migration, health and vulnerable populations", presented two projects centered on care for migrants in Colombia and Chile.

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

Algeria, Benin, Burkina Faso, Burundi, Cameroon, Côte d'Ivoire, Guinea-Conakry, Mali, Morocco, Senegal, Togo, Tunisia.

AGCS PLUS presented the Yves Yomb Award, a distinction celebrating community leadership in Africa, at the ICASA conference. This award places the spotlight on stakeholders committed to promoting human rights, equitable access to healthcare and the fight against inequalities. In 2025, the award went to Cheick Hamala Sidibé for his commitment to human rights and access to quality health services in Francophone Africa.



Lusophone linguistic network

Angola, Brazil, Cape Verde, East Timor, Guinea-Bissau, Mozambique, Portugal, São Tomé and Príncipe.

The network organized four training sessions in Guinea-Bissau, São Tomé and Príncipe, Cape Verde and Angola for carers and peer educators These sessions aimed to strengthen the implementation of integrated community-based testing services and to improve monitoring systems and data collection systems.

03. INTERNATIONAL AND HORIZONTAL GOVERNANCE

Coalition PLUS's political model is governed by the principle of equality in decisions, so as to guarantee their full take-up by the collective. This model strikes a balance between respect for the sovereignty and specific characteristics of each member and collective strength in terms of visibility, influence, and access to funding. It also encourages the pooling of expertise and innovation capabilities as well as solidarity in the face of crises.

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 COALITION PLUS EXECUTIVE BOARD: DEBATE, AGREEMENT, ACTION

The Executive Board (EB) is composed of 15 organizations from 15 different countries. Meeting six times a year (including twice in person), the members of the EB determine and oversee the Union's strategic framework and directions.

By joining the Union, each member adheres to the 10 membership criteria[1] 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

[1]The 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.

MEMBER ASSOCIATIONS ON THE EB IN 2025

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

THE SECRETARIAT AND NETWORK COORDINATION

The Union is led by a Secretariat based in West Africa (Senegal) and Europe (France, Belgium, Spain) and employees working within the member organizations to coordinate the regional projects they manage directly.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COALITION PLUS'S COMMITMENT TO GENDER EQUALITY

The Union guarantees balanced representation of women and sexual and gender minorities (SGMs) within decision-making bodies, thereby ensuring that their perspective and specific needs are fully taken into account in its strategy. Of the 32 individuals with a seat on the EB, 17 are women and 15 men.

Coalition PLUS's gender policy, adopted in 2024, is aligned with the realities of the key populations in the HIV epidemic and is built around five commitments:

- Prevent, counter and combat gender-based violence
- Promote a gender-responsive organizational framework
- Institute a wage policy favoring gender equality and inclusion
- Incorporate the gender approach across all projects, programs and strategic documents
- Systematically incorporate gender as a determinant of access to health in services and actions for users


Bujumbura, Burundi, November 2025. The 'Maison de la Joie' facility currently has 9 AIDS orphans, also HIV-positive, in its care. Former residents of the orphanage turned out for Jeanne Gapiya Niyonzima's visit (center). ©?

02. 2025: REMODELING THE HIV RESPONSE

“Lack of adequate funding will not prevent us from staking out a place in the discussions that concern us, and doing so loudly if need be. It will not condemn us to inaction or silence.”

Vincent Leclercq,
Executive Director of Coalition PLUS

Paris, France, April 2025. Public protest by AIDES and Coalition PLUS activists against the consequences of the funding cuts for HIV programs. © Bastien André

01. #STILLSTANDING: IN THE EYE OF THE STORM, WE REMAIN UNBROKEN!

STILL STANDING par COALITION PLUS

JANUARY 20

The US Administration announces budget cuts for PEPFAR and USAID.

FEBRUARY 5

Statement released by Coalition PLUS: "Rethinking global health".

FEBRUARY 21

Publication of the survey on the impact of the cuts within the Coalition PLUS network.

MARCH 7

#StandUpForScience to support researchers in the US, where academic freedom is being jeopardized by budget cuts, program suppressions and redundancies.

MARCH 19

UNAIDS declares that the US aid freeze will result in 6.3 million additional AIDS-related deaths by 2029.

APRIL 29

Public protest in Paris with AIDES against the consequences of the halt to PEPFAR funding, calling for an increase in France's contribution to the Global Fund.

JUNE 28

To conclude Pride Month, Coalition PLUS and AIDES call for a collective awakening in an article published in the daily newspaper Libération.

NOVEMBER 17-19

Press trip to Burundi (Le Monde, La Croix and photographer Benjamin Girette).

NOVEMBER

Launch of phase 2 of the budget cut survey to update data, in partnership with Aidsfonds, Frontline AIDS and Sidaction for publication on January 20, 2026.

DECEMBER 1

'Link pour AIDES' charity dinner in France to raise international aid.

DECEMBER 1

Launch of the #StillStanding communication and fundraising campaign to document the impact of the budget cuts on associations and communities.

Watch the video

#SURVEY

On January 20, 2025, a day after the presidential inauguration of Donald Trump, a 90-day pause on all U.S. foreign aid was announced.

In February, faced with the sudden cuts in international aid and the orchestrated dismantling of USAID and PEPFAR, Coalition PLUS launched a large-scale survey of its partner associations.

The **49 respondent associations** reported on the impact of this freeze on activities relating to family planning, gender diversity, LGBTQI+ rights and climate change.

In terms of HIV-specific services, the survey showed that **only the following activities are largely maintained: HIV treatment and care and prevention of mother-to-child transmission**.

- Of the respondents, 29 organizations said they had suffered at least one impact resulting from the freeze of US funding
- 18 organizations (37%) had suffered an impact on the **supply of inputs**, and several had experienced shortages of **condoms**, **screening** tests and **PrEP**
- 27 organizations (55%) had suffered an impact on partial or full human resources funding resulting in **redundancies** and a lack of funds for severance pay
- 27 organizations (55%) had suffered an impact on the **range of services offered** and were forced to cut back or stop their **testing** or treatment activities for people living with HIV

Beyond the immediate and sudden effects, the drastic reduction in international aid for the fight against HIV/AIDS raises the question of how to promote the emancipation of healthcare systems in the Global South, including their access to treatment innovations.

#RESPONSE

Faced with these budget cuts which are undermining the global fight against HIV/AIDS, Coalition PLUS launched the campaign #StillStanding on December 1 to coincide with World AIDS Day.

This **communication** and **fundraising** campaign aims to maintain essential HIV prevention and treatment services in a bid to protect the progress of the past twenty years, and thereby prevent a rebound of the epidemic worldwide.

The campaign sets four priorities:

01. Maintain **essential services** for the populations most at risk (testing, access to treatment, harm reduction tools, psychosocial support)
02. Support the **roll-out of preventive innovations** such as long-acting PrEP
03. Strengthen the **stability of Coalition PLUS member organizations** at both an organizational and financial level
04. **Mobilize** decision-makers, the general public and donors around the drastic consequences of this funding crisis

The issue is also **political** given that community-based associations are the only ones that guarantee access to prevention tools and treatment for the populations now openly excluded from US funding programs: people from LGBTQI+ communities, sex workers, drug users, migrants, etc.

Without care for the populations most exposed to the virus, a resurgence of the epidemic is inevitable. UNAIDS has estimated that 4 million additional AIDS-related deaths and 6 million new infections will be directly caused by these budget cuts.

Epidemics do not recognize borders, and without funding HIV/AIDS will become a major 21st-century epidemic, just as it was in the previous century.

02. CONTRIBUTING TO THE GLOBAL FUND IS NOT AN EXPENSE; IT IS A STRATEGIC AND SOCIALLY RESPONSIBLE INVESTMENT

AIDES and Coalition PLUS ran an advocacy campaign throughout 2025 centered on three complementary thrusts: policy advocacy, community mobilization and media presence.

MARCH 12

Hakima Himmich (ALCS) in Morocco and Bintou Dembelé (ARCAD Santé PLUS) in Mali speaking in support of the initiative launched by Friends of the Global Fund Europe: Together, we call upon the European Commission to pledge €715 million to the Global Fund's eighth replenishment.

APRIL 7

Publication of the global health survey in partnership with AIDES and Viavoice.

MAY 20

Interview with Mehdi Karkouri in the newspaper Le Figaro (France).

JUNE 9-13

Press trip in Malaysia (Le Figaro, France Culture, Remaides and photographer Laurence Geai).

SEPTEMBER 17

Press trip in Morocco with the Global Fund and French radio station RFI ('Priorité Santé' radio show).

OCTOBER 6

Interview with Hakima Himmich in Le Figaro.

OCTOBER 13

Launch of the social media-exclusive campaign *"On ne s'engage pas à moitié"* ["All in"], led by 11 celebrities and politicians.

ON THE POLITICAL FRONT

Both organizations stepped up their efforts targeting parliament, culminating in the hosting of an event on September 16 co-sponsored by four MPs from different political parties in the French National Assembly.

Meetings were obtained with all of the ministries concerned (Foreign Affairs, Budget, Health, Prime Minister) as well as with the Presidential Cabinet: a first in a number of years on this subject.

At the same time, an active presence was maintained in strategic international forums (Seville conference, World Health Summit in Berlin, EACS in Paris).

ON THE MEDIA FRONT

The communication campaign *"On ne s'engage pas à moitié"* ["All in"] generated more than 900,000 interactions.

The targeting strategy focused on traditionally right-wing media, notably including two advertorials and a press trip in Malaysia published in Le Figaro, helped expand the reach of the advocacy efforts beyond existing circles.

The Sweet Punk campaign for Coalition PLUS and AIDES received the 'Cas d'OR' Social Media & Influence award at the Grandes Causes 2026 award ceremony.

COMMUNITY MOBILIZATION

Formed the core theme of the sequence, reinforcing the institutional legitimacy of both organizations in the eyes of decision-makers while maintaining their activist roots.

Despite the particularly difficult budgetary and political context, this sequence allowed AIDES and Coalition PLUS to establish themselves as a central interface in debates on global health funding.

Project carried out with the financial support of **New Venture Fund**

03. DRAWING RESILIENCE FROM PARTNERSHIPS

"BEHIND THE NUMBERS, LIVES"

A campaign conducted with AIDES, The One Campaign, Action Santé Mondiale, Sidaction, Global Citizen, Solidarité Sida and Friends of the Global Fund Europe

The group of associations working for global health used this campaign to remind people that behind the numbers there are faces, journeys, human lives. In response to the withdrawal of State funding and an accounting-focused mindset that stifles solidarity, this mobilization gives a face to those expunged by budgets.

02.
A SHIFTING GLOBAL HEALTH ARCHITECTURE

Paris, France, November 2025. AIDES and Coalition PLUS activists holding a demonstration to urge France to contribute a decent level of funding to the Global Fund. ©Bastien André

JANUARY 30

Public reaction to the risk of reallocation of solidarity levies.

SEPTEMBER 23

Launch of the inter-association campaign.

NOVEMBER 12

Projection outside the French Ministry of Economy and Finance to alert the public to the tragic consequences of the reductions in the financial commitments of France and the world's large powerhouses to combating the pandemics.

NOVEMBER 21

Global Fund Replenishment Conference.

Project carried out with the financial support of **New Venture Fund**

"COMMUNITIES AT THE HEART OF GLOBAL HEALTH AND HEALTH SECURITY"

A side event in conjunction with the 78th World Health Assembly held in Geneva, co-organized with Frontline AIDS, in partnership with UNAIDS and WHO.

On the sidelines of the 78th World Health Assembly held in Geneva, Coalition PLUS and Frontline AIDS organized a side event on May 19 to examine ways to maintain HIV prevention, community-based services and treatment in an unprecedented context of shrinking aid.

Broadcast live on social media, the event drew on the collective expertise and determination of governments, civil society, communities, United Nations agencies and global health partners to discuss what could make a difference in the current situation in order for governments to be able to place the priority on HIV prevention and community-led services.

Participants discussed strategies, tools and new solutions to guarantee sustainable funding and cost-effective interventions in an open and forward-looking ambiance, enabling healthcare systems and community-based systems to be maintained in regions that are already stretched to the limits. These solutions and tools incorporate social impact obligations and other innovative funding models, social contracts, integration that places the priority on HIV prevention and community-based services, priority-setting exercises, less criminalizing environments, estimations of budgetary unit costs for community-based services, etc.

The event underscored how HIV prevention and community-led services are not just desirable inclusions, but are in fact essential to the implementation of resilient and cost-effective health systems that guarantee equitable access to healthcare for all, and particularly for the most marginalized populations.

"Whatever the situation may be, we will continue to act. We will continue to act because we were taking action long before resources were available. Community-based actors have carried sick patients on carts. Community-based actors have run awareness-raising sessions under a baobab. Resources only arrived later."

Magatte Mbodj,
Executive Director of ANCS, Senegal

Project carried out with the financial support of **AFD**

03. OUR ACTIVITIES

Bujumbura, Burundi, November 2025. NGO RNJ+ at the 6th edition of International Testing Week. ©Benjamin Girette

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

- the strengthening of direct services for the populations most affected
- research with a leading role for communities in its implementation
- advocacy to advance the rights of populations

01. IMPROVING ACCESS TO QUALITY HEALTH SERVICES FOR EVERYONE

The cuts in international health funding and the strong pushback on human rights in many countries are severely affecting the continuity of care and access to quality health services for everyone. Community-based organizations are mobilizing their expertise and know-how to support a shift towards more sustainable health systems, by working to improve the efficiency of services and the equity and quality of care.

Through **capacity-building**, the **roll-out of innovations** and **knowledge sharing between peers**, Coalition PLUS directly contributes to building the skills and qualifications of Health Human Resources, improving access to health services and influencing national, regional and international policy.

This commitment is embedded within the global health challenges of people living with HIV (PLHIV) and people vulnerable to HIV, who often suffer the greatest social vulnerabilities. It aims to **not only cover specific HIV-related needs** (testing, prevention, treatment) but also **health needs as a whole**, whether inherent or not to HIV: comorbidities, non-communicable diseases, aging, mental health, etc. Community-based systems play a central role in this approach, **offering a tailored and secure response aligned with communities' realities, while national systems often struggle to guarantee equitable and respectful access**.

This commitment is also embedded within the **challenges of health rights and the rights of sexual and gender minorities**: offering everyone, regardless of their life circumstances, fair and safe health conditions and access to care. The progress made in access to treatment is not sufficient to achieve the global targets to end the epidemic by 2030 as long as unequal access to services and human rights abuses continue, affecting above all those most vulnerable, and SGMs in particular.

IMPROVING ACCESS TO PREP IN PREVENTION STRATEGIES

After the arrival of ARV drugs 30 years ago, PrEP constitutes the second revolution in the fight against AIDS. This **preventive treatment provides complete protection for people exposed to HIV**. While it has existed in the form of a daily oral therapy for the past 10 years, other forms (once-monthly oral PrEP, twice-yearly injectable, vaginal ring, twice-monthly injectable) have gradually been made available, opening the way for broader roll-out both geographically and in terms of target groups.

PrEP distribution at the KK Kuala Lumpur clinic. ©Laurence Geai

The Coalition PLUS networks are particularly active when it comes to **community referral to PrEP**. Community-based actors are those best placed to promote this treatment as part of an outreach strategy within communities and form a key link for those starting treatment. Moreover, from a task-sharing perspective, and in the same way as community-based provision of ARV which operates particularly well in contexts where health systems are fragile, community-based provision of PrEP could be an option based on the same principle in order to improve its accessibility.

The roll-out of new prevention tools such as long-acting PrEP is creating new needs in terms of support for demand generation, fostering community take-up and adaptation of intervention strategies. The organizations in the Coalition PLUS network are particularly active when it comes to monitoring the opportunities surrounding new forms of PrEP and are already preparing their contribution to future roll-outs.

To cope with the decline in services essential to the fight against HIV due to the drastic cuts in international aid, the Coalition PLUS Executive Board has adopted a **PrEP fast-track plan to contribute to catch-up efforts and to its upscaling, notably thanks to the new forms of PrEP**:

- Evaluation of PrEP roll-out in the regions
- Advocacy surrounding prices and intellectual property
- Development of pilot programs
- Enhanced exchanges of knowledge and best practices

6TH INTERNATIONAL TESTING WEEK FROM NOVEMBER 17 TO 23, 2025: UNWAVERING SOLIDARITY TO PROMOTE TESTING, RESISTANCE AND ACTION

Faced with the collapse of HIV funding, the associations mobilized in some fifty countries drew on collective impetus to drive this campaign in support of the thousands of lives jeopardized by sudden and reactionary political decisions.

Over an entire week, these associations proved that community mobilization and engagement remain unwavering in the face of adversity. Despite centers closing, teams being disbanded and supplies running short, community-based organizations have continued to demonstrate unfailing innovation capabilities since the start of the epidemic.

From November 17 to 25, 2025, **the participating associations stepped up their testing of HIV, viral hepatitis, syphilis, certain cancers and other sexually transmitted infections, making screening for these infections the banner of the global response to these epidemics**.

This year, a new partner joined our ranks: **Frontline AIDS**. With a dozen additional countries, the global impact of this mobilization climbed to 92,193 tests.

International Testing Week 2025 in Bolivia. ©IDH

LAUNCH IN BOGOTÁ TO HIGHLIGHT THE EPIDEMIC IN LATIN AMERICA

While the number of new HIV diagnoses continues to rise in Latin America, Coalition PLUS chose to place the spotlight on community mobilization in the region by launching its campaign in Bogotá, Colombia, alongside its partner **Red Somos**. A launch ceremony, attended by representatives of the government, UNAIDS, WHO and the Global Fund, was held on November 18 and a wide range of activities were run across the entire week to reinforce the campaign's visibility and impact.

INVESTING IN HIV TESTING IS AN INFORMED ECONOMIC CHOICE, ESPECIALLY WHEN THE ACTIVITIES ARE DESIGNED BY AND FOR THE COMMUNITIES CONCERNED

Community-based testing, carried out as part of an outreach approach, favors early detection of infections, fosters rapid access to antiretroviral treatment, and consequently lowers HIV transmission. It also helps reinforce prevention among HIV-negative individuals by facilitating PrEP take-up.

In the long term, **this strategy lowers the costs connected with care and preventable complications while at the same time improving public health outcomes**, making it a sustainable investment that benefits both the communities and health systems.

International Testing Week 2025 in Argentina. ©Fundación Huésped

RESULTS

92,193 TESTS PERFORMED
in 49 countries by 70 associations.

93% FOR PEOPLE TESTED HIV-POSITIVE
were referred to treatment, demonstrating the solidity of our health continuum.

1,890 PREP INITIATIONS
as part of a combined prevention approach among the most at-risk populations.

Project carried out with the financial support of AFD, Expertise France, the Région Île-de-France, and the Robert Carr Foundation

ANAL HEALTH

Treatment of anal pathologies within Coalition PLUS has expanded progressively and as part of a concerted effort based on the willingness and capacities of the associations to implement these services and to mobilize the necessary resources (specific medical equipment and expertise for their technical facilities).

The initiatives also included **intensive efforts in terms of demand generation and training for trainers on the deconstruction of representations surrounding anal health**.

Several networks issued recommendations during their review in terms of **advocacy in order to create an environment more favorable to key populations**, while identifying and mobilizing partners and referral structures for a more comprehensive continuum of care.

Recommendations on national **HPV vaccination** guidelines have also been identified in some countries.

RESULTS ATTAINED BETWEEN 2024 AND 2025

3 TRAINERS
ran regional (PFAC and PACE) and national (Burundi, Morocco) training courses for 25 doctors and 7 nurses.

7 DOCTORS
took advanced training courses at the reference sites.

These training courses, combined with the creation of a minimum technical care facility, made it possible for anal health consultations to be conducted within

26 COMMUNITY-BASED ORGANIZATIONS
in the Coalition PLUS network, at 52 consultation sites.

The impact survey showed an increase of

+141% IN PROCTOLOGY REFERRALS WITHIN THE PFAO.
Peer educators have become the main gateway (68% of all referrals).

In terms of skills development, the evaluations demonstrate an excellent level of interpersonal and practical know-how (80.5%).

Some of the trainees were also able to obtain skills in the diagnosis and treatment of HPV cervical lesions.

Project carried out with the financial support of AFD, Expertise France and A. Legrand

AN ONLINE TOOLKIT TO LEARN ABOUT COMMUNITY-BASED HEALTH

Training is one of the key factors when it comes to stepping up the fight against HIV. Which is why Coalition PLUS has created an online toolkit covering **6 core topics**.

Developed in collaboration with the community-based health experts within the member associations of the Coalition PLUS network, these training courses are practical and interactive, as well as being tailored to the realities on the ground.

The goal is to provide all the tools needed to listen to, understand and guide those most vulnerable to the HIV epidemic.

Thanks to this toolkit, each trainer can organize one or more sessions for groups of a dozen peer educators, mediators and health providers, on core topics:

- PrEP
- The sexual health pathway
- Gender-based violence
- Harm reduction for injecting drug users
- Virtual prevention
- Reproductive health

Discover the toolkit

Project carried out with the financial support of Expertise France

International Testing Week 2025 in Argentina. ©Fundación Huésped

02. SCIENTIFIC RESEARCH WITH AND FOR COMMUNITIES

Since its creation, Coalition PLUS has made research, and more particularly community-based research, one of its strategic priorities. While many community-based organizations come up against structural limitations and instead focus on health services and advocacy efforts, Coalition PLUS has chosen to ensure it has human resources qualified in research while also developing and consolidating solid academic partnerships.

"**community-based research:** active participation of community actors in all stages of the design and implementation of research projects resulting in the production of scientific knowledge concerning them."

For Coalition PLUS, this is not only a political struggle but an ethical necessity in line with the principle "nothing about us without us". This **community participation guarantees greater alignment between research questions, realities on the ground and the specific needs of key populations.** The scientific relevance and validity of community-based research projects ultimately ensure a greater impact on the quality and adaptation of health services, and also feeds into advocacy actions to effectively defend the rights of key populations.

- A research team
- Four scientific hubs: ALCS, Casablanca; CEEISCAT, Barcelona; Fundación Huésped, Buenos Aires; SESSTIM, Marseille
- A research and strategic information steering committee (CoPRIS) to examine and channel requests from the Coalition PLUS partner associations

STRUCTURING ACTIVITIES

This structuring allows available human and technical resources to be pooled in order to meet the research needs of community actors looking to implement a new project, or in need of ad hoc support to analyze existing data, with a literature review or with sharing tools.

The research team ensures that collaboration between academic researchers and community actors is balanced, and that everyone can contribute their expertise and know-how regardless of their professional background.

One of the key aspects is the **active participation and involvement of community actors in each step of project implementation**: from the first discussions on the research question and methodology to the dissemination of findings, both at a scientific level (publications, conferences) and community level (feedback workshops, scientific popularization). This active participation allows for **mutual learning**, contributes to the **deconstruction of negative conceptions** of others, and enhances the relevance, scientific validity and impact of our research activities on the key and marginalized populations we work with.

The research team and hubs also receive ongoing support through:

- The drafting of abstracts for conferences
- Preparation of a concept note, protocols or funding applications
- Assistance with the writing of scientific articles
- Technical training.

Not only does Coalition PLUS support its members and partners with their research projects and activities, it also runs its own internal research projects.


©Mamadou Diop

LAMIS 2025

LAMIS-2025 (Latin American MSM Internet Survey) follows on from LAMIS-2018, an online regional survey that received responses from 64,655 **gay, bisexual and other men who have sex with men (GBMSM)** in 18 countries in Latin America and the Caribbean. This initiative gathered essential data on HIV, STIs, hepatitis, mental health and violence, while also contributing to UNAIDS key indicators.

LAMIS-2025 extended the scope to **24 countries and territories in Latin America and the Caribbean**, and introduced a participatory process involving **10 community-based organizations** and **5 academic institutions** (Executive Committee) in the revision of the 2018 questionnaire in order both to simplify it and incorporate current issues such as DoxyPEP, migration, mental health and violence.

The community-based organizations on the Executive Committee and outside of it (at least one in each country) also oversaw the new questionnaire, making any necessary adjustments to optimize its delivery. These same community-based organizations were tasked with running campaigns to promote the survey at national level, adapting the communication materials provided by the project's general coordination board.

A preliminary data extraction was carried out in December 2025 with the aim of preparing 3 abstracts for AIDS 2026, the 26th International AIDS Conference, based on a sample of 26,005 participants.

A project carried out with the financial support of AFD, Grindr4Equality, Scruff.

SCAR

The overarching aim of the SCAR (Severe Cuts, AIDS Resurgence) project was to analyze **how the withdrawal of international aid is reconfiguring access to prevention and care in the fight against HIV, the care paths of vulnerable populations and community dynamics**, drawing on the contributions of social psychology.

The aim of phase 1 was to assess the situation of HIV prevention and care in 5 countries (Burundi, Colombia, Côte d'Ivoire, Indonesia, Mozambique) in 2023 and 2024 (prior to the funding cuts).

Phase 2 will then **document the impact of the withdrawal of US funding and other international funding in the medium and long term**.

The preliminary results of phase 1 highlight a **drastic weakening of community health systems, with interconnected impacts on different levels**.

- On a **structural** level, the cuts have resulted in fewer HIV prevention activities, outreach actions and decentralized services.
- On a **professional and personnel level**, the lack of resources (HIV prevention tools, funding for transport) is causing cases of burn-out among peer educators.
- In terms of **beneficiaries**, the decline in the activities of COs and the transport-related barriers have limited access to antiretroviral drugs (despite their availability at national level) and to prevention tools, causing an increase in the number of patients lost to follow-up care and in seroconversions.

In a context of an upsurge of far-right politics and decreasing multilateral global health governance, the communities most affected by HIV are facing a new form of invisibilization and deterioration in their state of health, raising fears of a global resurgence of the epidemic.

A project carried out with the financial support of AFD, Expertise France and Sidaction

03. ADVOCACY TO MAKE COMMUNITIES' VOICES HEARD

4 PILLARS

01. Recognition of community-based expertise
02. Funding for the fight against HIV and hepatitis
03. Promotion of human rights
04. Technical support for advocacy efforts

In 2025, Coalition PLUS's advocacy actions were implemented against a background of breakdown. The US funding cuts and the reductions in international aid have reshuffled the cards in the global funding of the HIV response and triggered a systemic shockwave. At this tipping point, Coalition PLUS made the choice to **issue a continuous alert on the impact of these cuts in each country and the burden they represent for community-based systems**. These efforts were consolidated by the surveys conducted to accurately document the effects of the budget cuts.

Against this backdrop of severe strains, Coalition PLUS has consolidated its positions, strengthened its alliances and continued its actions so that communities remain present and influential in the decision-making forums concerning them.

Berlin, Germany, World Health Summit, October 2025 ©Coalition PLUS

3 X 10% CAMPAIGN

The new global HIV targets place the emphasis on the creation of an environment conducive to eradicating HIV/AIDS, identified in the 10-10-10 targets: less than 10% of countries have punitive legal and policy environments that deny or limit access to services; less than 10% of people living with HIV and key populations experience stigma and discrimination; less than 10% of women, girls, people living with HIV and key populations experience gender inequality and violence.

2025 was marked by the **consolidation and culmination of the project's strategic objectives**. Several results are worthy of note among the main achievements of this operational phase:

- **Support for legal reform:** removing the human rights barriers to access to care via an assessment of the legal environment in Benin, Cameroon and the Central African Republic. The local partners were on the front line running awareness-raising campaigns based on these assessments, targeting State actors, communities and various financial and technical partners.
- **Capitalization and experience-sharing:** particularly the HIV legal reform in the Central African Republic and the drug law reform in Côte d'Ivoire.


©The Global Fund / Vincent Becker

Project carried out with the financial support of UNAIDS and Expertise France - L'Initiative


©The Global Fund / Vincent Becker

FABRIQUE DES DIALOGUES

The *Fabrique des Dialogues* ["The Dialogue Factory"] project aims to **foster inclusive and effective dialogs, particularly for youth, women and gender minorities** to improve national outcomes in the fight against AIDS, malaria, and tuberculosis and in gender (including sexual health and reproductive rights), youth and human rights issues in French-speaking Africa.

The major activity of 2025 was the launch of the first cycle of Calls for Expression of Interest. In total, **13 associations were selected**.

Ten countries are represented, seven from West Africa and three from Central Africa, as well as one sub-region (MENA).

A series of workshops and national discussion forums were organized in four partner countries in order to jointly establish best practices and to define the collective advocacy policies.

Moreover, in response to the US funding cuts and to guarantee the meaningful participation of community-based actors in international processes, €26,000 were reallocated from the initial budget to create an emergency fund. This provision supported the mobilization and coordination of civil society in prioritizing GC7 activities and identifying the issues for GC8. These interventions strengthened local actors' preparations and built momentum around their national advocacy.

FABRIQUE DES DIALOGUES

Project carried out with the financial support of Expertise France - L'Initiative

REPAIR

In September 2025, Coalition PLUS and its partners launched the REPAIR project in Dakar for **recognition of peer educators** (PEs), consisting of strategic workshops bringing together experts, institutional representatives and community-based actors from **Senegal** and **Burundi**.

Faced with the crucial yet all too often little-recognized role of peer educators in the fight against HIV, hepatitis, tuberculosis and gender-based violence, REPAIR aims to establish a **professional framework and acknowledge this essential profession** in community-based health.

This innovative project aims to introduce **peer certification**, jointly develop **reference frameworks for PEs** with the stakeholders and draw up a shared roadmap for lasting institutional recognition.

The launch workshops laid the foundations for the **participatory methodology, adapted to the local contexts**, and initiated strong lobbying of national health authorities.

In addition, the REPAIR project paves the way for effective strategic partnerships with regional education authorities and higher education institutions in Senegal and Burundi, shaping a path towards true recognition and appreciation of the profession of peer educator. REPAIR thus aims to support PEs, improve the quality of operations on the ground and inspire other initiatives on the African continent.

Project carried out with the financial support of Expertise France


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OCTOBER 12-14

World Health Summit
Berlin (Germany)

A Coalition PLUS community delegation attended the summit. The key sessions included: Side event co-organized by Women For Global Fund and Frontline AIDS on the topic: "Indigenous, Community-Led & Gender-Transformative Action to End AIDS, TB & Malaria."

The speakers included: Yoemi Tuhaloo, Mauritian trans woman and human rights defender. Paralegal officer at PILS, a Coalition PLUS member organization, she advocates for the empowerment and recognition of the rights of trans people, promoting confidence and visibility.

OCTOBER 15-18

EACS
Paris (France)

Round table on the impact of the withdrawal of funding for HIV programs organized by TRT-5 and ANRS.

Participation of Jeanne Gapiya at ANSS SANTÉ PLUS on the experience of Burundi and co-moderation by Soufia Bham, Advocacy Technical Support Officer at Coalition PLUS.

DECEMBER 3-7

ICASA
Accra (Ghana)
Presentation of the Yves Yomb Award

AGCS PLUS's participation in the ICASA 2025 Conference tied in with efforts to reinforce regional advocacy and institutional visibility, and consolidate strategic partnerships in the HIV response in Africa.

On this occasion, AGCS PLUS presented the Yves Yomb Award, a symbol of recognition of community leadership in Africa placing the spotlight on actors committed to the defense of human rights, access to health and combating inequalities, to Cheick Hamala Sidibé.

GAINING RECOGNITION FOR COALITION PLUS'S UNIQUE ROLE ON THE GLOBAL HEALTH CHESSBOARD AND IN THE FIGHT AGAINST HIV AND HEPATITIS

In 2025, the fight against AIDS bore the brunt of the global crises: budgetary pressures, denial of human rights and persistent inequalities in access to care.

The brutality of this state of affairs paradoxically brought a subject with low media coverage up until now to the forefront – global health and its funding.

In 2025, Coalition PLUS therefore focused its communication on two priorities: amplifying advocacy messages (funding, prevention/PrEP, human rights, the role of communities) and strengthening the institutional and media influence of the organization and its spokespersons taking into account their legitimacy and their expertise in the sequence.

2025 BENCHMARKS

SEVERAL HUNDRED MEDIA REPORTS

3 PRESS TRIPS

France Culture, Le Figaro, Remaides, RFI, Le Monde, La Croix

6 STRUCTURAL CAMPAIGNS

advocacy / influence / mobilization

A community of

10,000 FOLLOWERS

49 EMAILS

88,714 MAILSHOTS

VISITORS

32 PUBLICATIONS

22 000 WEBSITE

43,000 PAGES VIEWED

“Coalition PLUS is constantly committed to balancing long-term financial sustainability with help for organizationsthat need it today. These are important policy issues and our governing bodies discuss them regularly.”

Guy Gagnon,
Treasurer for Coalition PLUS

Kuala Lumpur, Malaysia, June 2025. T-home, a shelter for trans people partially funded by MAC. 8 trans women are housed here. This morning, they are cooking local dishes to sell. © Laurence Geai

04. FINANCE

01. FINANCIAL REPORT

The figures for 2025 reflect the challenging economic environment in which Coalition PLUS operates and the constant need to balance two competing priorities. On the one hand, we must consolidate our finances to ensure we are ready for the future, but at the same time we need to respond to urgent funding requirements and adjust our budgets to reflect changing conditions.

The organization reported net income of **€19,572** for fiscal year 2025, slightly exceeding the break-even result projected in the year-end budget. Whilst this represents a positive outcome, it remains below the **€50,000** surplus targeted in our revised Financial Improvement Plan (also called the "PASF").

Unlike the previous fiscal year, this result was achieved without drawing on the Endowment Fund or relying on the exceptional support measures implemented in 2024. Instead, it primarily reflects the organization's day-to-day operations under the new French accounting standards (ANC **no. 2022-06**).

Fiscal year 2025 also saw a reduction in the overall budget, as a number of (CP1) agreements gradually came to an end, selected activities funded by L'Initiative were postponed, and funding from the RCF was reduced. Total revenue was €9.17M, down 18.01% on the figure of €11.19M posted in 2024.

FY 2025 was a pivotal period for Coalition PLUS in financial terms, with:

- ongoing efforts to scale up the SGS PLAS 2 project
- several key funding agreements gradually coming to an end, including CP1, pending renewal for 2026
- a significant 33% decline in funding from the RCF in 2025
- a general climate of uncertainty surrounding available resources
- a continuing decline in charitable donations

The decrease in revenue also led to lower operating activity and reduced expenses, which fell from €11.09M in 2024 to €9.15M in 2025, down 17.43%.

The organization's spending continued to be concentrated in three main areas:

- distributions to members and partners, which remained our largest expense item (more than 60% of the total).
- personnel costs, which remained stable and in fact were down slightly by 9% from 2024
- continued high levels of operational spending on major projects.

In absolute terms, revenue fell by €2.02M, while expenditure was down by only €1.94M. Although lower spending offset most of the decrease in revenue, the approximately €80K difference between the two resulted in lower net income, which fell from €107K in 2024 to €20K in 2025.

2025 was also the first time France's **new accounting regulation "ANC no. 2022-06"** was applied in practice. The revised standards change the way our financial statements are presented, introducing a much narrower definition of extraordinary items and eliminating the practice of reallocating expenses between offices. Due to these changes, our year-end results reflect only our core operating activities.

Unlike last year, the balance sheet remained broadly stable throughout 2025. At the same time, several structural challenges continue to require careful management.

The €819K receivable from Coalition PLUS Belgium remained the organization's largest financial asset at year-end. Under the revised Financial Improvement Plan, it will be repaid over a period of several years.

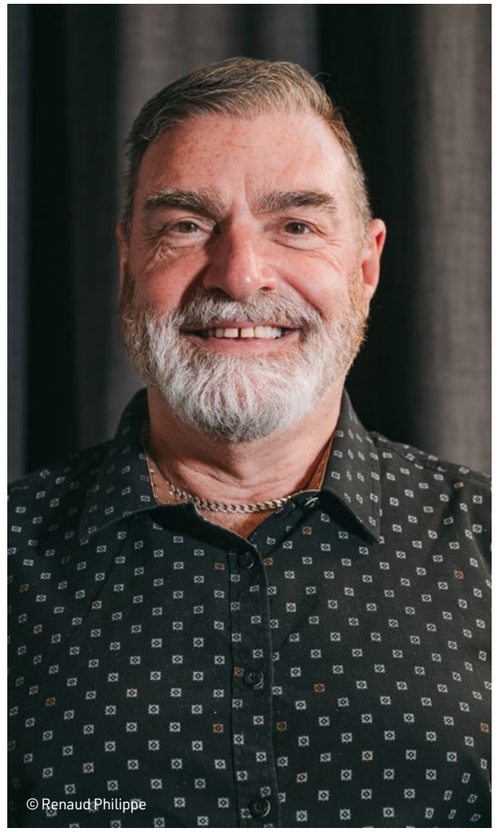
Installments originally due in 2025 and 2026 will now be paid during fiscal year 2026, while the overall repayment timetable remains unchanged with full repayment by 2028.

This arrangement was made possible by a tripartite agreement between the Endowment Fund, Coalition PLUS Belgium, and Coalition PLUS France intended to guarantee repayment.

Accordingly, no impairment provision was recorded against the receivable as of December 31, 2025.

Liabilities to members and other suppliers increased modestly to €2.041M, up from €1.858M in 2024. The increase primarily reflects higher commitments under multi-year funding agreements, higher deferred revenue, and a larger balance of restricted funds that had not yet been spent at year-end.

Guy Gagnon,
Treasurer for Coalition PLUS


© Renaud Philippe

Our net cash position continued to improve, reaching approximately €1.43M at year-end, supported in part by grant payments received from funding partners late in the fiscal year.

Net assets also strengthened slightly, increasing to €1.11M from €1.09M in 2024.

Overall, the organization's financial position remained stable in the near term, with stronger cash reserves and preserved net assets providing a solid foundation. But a more challenging funding environment will require continued efforts to secure sustainable revenue streams and maintain a balanced budget.

02. BALANCE SHEET

	2024	2025	% CHANGE
BALANCE SHEET ASSETS	**€12.576M**	**€13.605M**	**8%**
Net assets	€0.928M	€0.937M	1%
Receivables	€10.570M	€11.198M	6%
Cash	€1.007M	€1.427M	42%
Prepaid expenses	€0.072M	€0.039M	-46%
Foreign currency translation adjustment	€0.000M	€0.005M	n/a
BALANCE SHEET LIABILITIES	**€12.576M**	**€13.605M**	**8%**
Equity	€1.091M	€1.110M	2%
of which accounting result	€0.107M	€0.020M	-81%
Dedicated funds	€0.080M	€0.017M	-79%
Debts and provisions	€2.592M	€2.418M	-7%
Deferred income	€9.095M	€10.059M	11%
Foreign currency translation adjustment	€0.014M	€0.000M	-100%

Bujumbura, Burundi, November 2025. Mother-and-child consultation at the Turiho center (run by ANSS Santé PLUS) with a HIV-positive patient and her infant, who remains HIV-negative thanks to her mother's ARV therapy adherence. © Coalition PLUS / Benjamin Girette

03. INCOME STATEMENT

	2024	2025	% CHANGE
OPERATING INCOME	**€11.035M**	**€9.162M**	**-17%**
Grants and public subsidies	€6.693M	€4.918M	-27%
Donations	€1.612M	€1.417M	-12%
Financial contributions	€2.500M	€2.500M	0%
Write-backs of depreciation and impairment	€0.180M	€0.014M	-92%
Contributions	€0.015M	€0.015M	0%
Other	€0.035M	€0.235M	571%
Use of dedicated funds	€0.000M	€0.063M	n/a
OPERATING EXPENSES	**€10.802M**	**€9.137M**	**-27%**
Purchases, other purchases, external charges	€2.835M	€1.612M	-43%
Financial assistance and network support costs	€4.584M	€4.154M	-9%
Taxes and levies	€0.140M	€0.222M	59%
Personnel expenses	€2.684M	€2.432M	-9%
Depreciation and provisions			n/a
Dedicated funds carried forward	€0.009M	€0.000M	-100%
Other expenses	€0.550M	€0.717M	30%
OPERATING INCOME	€0.233M	€0.025M	-89%
FINANCIAL RESULT	-€0.0015M	-€0.005M	n/a
EXTRAORDINARY INCOME	-€0.1245M	€0.000M	n/a
ACCOUNTING RESULT	**€0.107M**	**€0.020M**	**-82%**

THANK YOU TO OUR PARTNERS

France

AFD
AGENCE FRANÇAISE DE DÉVELOPPEMENT

- Strengthening community involvement 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, Americas 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 funds specific capacity-building activities for services, advocacy and community research.

- Improving the general health and rights of the populations vulnerable to and affected by HIV around the world by reinforcing community-based organizations in their strategies, their interventions and their international influence

AIDES
MILITER · AGIR · TRANSFORMER
MEMBRE DE COALITION PLUS

Funding agreement for governance support activities aimed at Coalition PLUS member and partner associations, and for the Secretariat's activities and operation.

Sidaction
ENSEMBLE CONTRE LE SIDA

- Documentation and analysis of the consequences of the US aid and global funding cuts on the rights and involvement of communities in the fight against HIV.
- Cross-sector exploratory and community-based study to identify sexual health needs and barriers to access to HIV prevention among men (cis or trans) and trans women involved in online transactional sex in Bolivia and Ecuador.

EXPERTISE FRANCE
GROUPE AFD

L'INITIATIVE
sida, tuberculose, paludisme

- 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 HIV/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) in 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.
- Establishing a legal and political framework for the effective recognition, sustainability and integration of peer educators as health human resources in Burundi and Senegal (REPAIR).

Grindr

The foundation provides support by making its application available to disseminate prevention and testing promotion campaigns to its users, and for scientific surveys.

newventurefund

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.

Région îledeFrance

- Support for the capacity-building of community-based organizations in Madagascar to improve testing for HIV, STIs and hepatitis, strengthen coordination and reduce transmission.
- Support for International Testing Week 2025 in Morocco and Senegal.

PARIS

- Reducing health risks and social harm among injecting drug users (IDUs) through an outreach scheme in Madagascar.
- Optimizing access to HIV prevention, testing and treatment services through greater integration of beneficiaries in a continued care pathway in Algeria.

anrs
MALADIES INFECTIEUSES ÉMERGENTES Inserm

Support for the activities and operation of the SESSTIM laboratory, the administrative hosting services for which are provided by Coalition PLUS, pursuant to a framework agreement between INSERM, Aix-Marseille Université and Coalition PLUS.

ROBERT CARR FUND
For civil society networks

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

THANK YOU TO OUR SPONSORS

A.LEGRAND
Innovateur en proctologie depuis 1932

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

eurofins foundation

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

IPAC

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

Traducteo

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

KNOWLEDGE SHARING ON COMMUNITY-BASED KNOWLEDGE AND EXPERTISE

In 2025, Collation PLUS continued its efforts to document community practices, highlight the lessons learned from grassroots projects and promote their dissemination within the network and beyond.

A series of topic-based knowledge sharing sheets were consequently put together to underscore innovative approaches to prevention, access to care and the defense of the rights of the key populations vulnerable to HIV.

ASSOCIATION DE LUTTE CONTRE LE SIDA (ALCS) IN MOROCCO: VIRTUAL PREVENTION FOR MEN WHO HAVE SEX WITH MEN (MSM)

ALCS has put in place a virtual prevention intervention for men who have sex with men (MSM), primarily via dating apps, to raise the awareness of populations vulnerable to HIV, promote sexual health services and increase national prevention coverage. The initiative, launched in 2026, was formalized with the creation of a team of web coaches and tailored community-based tools. Knowledge sharing on this experience highlighted the importance of a flexible and community-based approach in the fight against HIV, among MSM in particular.

HARM REDUCTION: COLLECTIF URGENCE TOXIDA (CUT) AND COMMUNITY INNOVATION IN MAURITIUS

The needle-syringe program, run by CUT, aims to reduce HIV transmission among injecting drug users in Mauritius thanks to a community-based approach. This knowledge sharing explores the strategies used, the lessons learned and the results achieved, while emphasizing the challenges connected with stigmatization and funding. The goal is to document best practices in order to reinforce the efficacy of the program, in place for almost 20 years, and inspire similar interventions.

PROJECT CHAMS: PREVENTING AND FIGHTING VIOLENCE AGAINST WOMEN SEX WORKERS – ALCS

In a context where the feminization of the HIV epidemic is exacerbated by the high prevalence of violence against women, ALCS launched a project in 2019 dedicated to the prevention and treatment of gender-based violence, specifically with and among women sex workers. This knowledge sharing questions the contribution and specific aspects of the association's intervention using a two-pronged approach. The first centers on activating the individual, social and community resources of women survivors, with the goal of strengthening their capacities, empowering them and moving away from a mindset of victimization. The second uses prevention strategies targeting environmental interventions and legal changes.

CONNECTING PEOPLE WITH HIV TO THE NATIONAL PUBLIC HEALTH SYSTEM VIA COMMUNITY-BASED PEER EDUCATORS FROM THE CORPORACIÓN KIMIRINA IN QUITO, ECUADOR

The civil society organization Corporación Kimirina has implemented a community-based model since 2017 aiming to help people living with HIV integrate the national health system. In the face of continuing barriers to access to care – stigmatization, administrative formalities, long waiting periods before beginning treatment – this model revolves around the community navigator, a peer educator who provides personalized assistance for users. This initiative helps significantly reduce referral times, builds trust within the community and demonstrates the vital role of community mediation between key populations and public health services.

AGCS PLUS: 18 YEARS OF ACTIVIST GOVERNANCE PROMOTING THE HEALTH AND RIGHTS OF SEXUAL MINORITIES IN AFRICA

Created in 2007 in a hostile environment, AGCS PLUS is a pan-African community-based network that has evolved from an informal movement to an influential regional actor in its 18 years of operation thanks to its community roots and activism. This capitalization comes at a critical juncture in its history, marked by the structuring and professionalization of its governance as a means to strengthen its organizational autonomy. Whilst not intended to be exhaustive, this knowledge sharing retraces the network's history, structuring and internal dynamics while highlighting its attributes, its specific characteristics, the challenges faced and leads for future improvements. These productions aim to drive collective learning, strengthen community-based advocacy and promote inspiring practices within the Coalition PLUS network, as well as among institutional and non-profit partners.

05.
PUBLICATIONS

Ndorong community clinic in Kaolack, Senegal, December 2024. A mediator and a midwife discussing a patient. ©Mamadou Diop

“People in the Global South wanted to speak up and be heard.”

Dr. Aliou Sylla,
ARCAD Santé PLUS, Mali

SCIENTIFIC ARTICLES

Spire, B., & **Di Ciaccio, M.** (2025). Community Aspects of HIV Biomedical Prevention. Annual Review of Pharmacology and Toxicology. https://doi.org/10.1146/annurev-pharmtox-062124-044855

Di Ciaccio, M., Yebedie, M., Coulibaly, K., Dondbzanga, D., Traoré, D., Cissé, Dembélé, B., Rouane, L., Delabre, R.M., Simões, D., Rojas Castro, D., Sagaon-Teyssier, L. (2025). The added value of community-based organisations in retaining people living with HIV (PLHIV) in the continuum of care in Mali. *African Journal of AIDS Research*, 1–11 https://doi.org/10.2989/16085906.2024.2434023

Salazar, M., **Lorente, N**., Schmidt, A. J., Jonas, K., Svallfors, S., Ekström, A. M., Berglund, T., Cáceres, C. F., Strömdahl, S., Stuardo, V., & Casabona, J. (2025). Prevalence and associated factors of selling sex among men who have sex with men (MSM) in Latin America: Results from the Latin American MSM Internet Survey in 18 countries (LAMIS-2018). *BMJ Global Health, 10* (12) https://doi.org/10.1136/bmjgh-2025-021058 (accepted November 2025, published in December)

Di Ciaccio, M., **Bourhaba, O.**, Adami, E., Boulahdour, N., Ben Moussa, A., Sodqi, M., Bensaid, S., **Riegel, L.**, **Rojas Castro, D.**, Karkouri, M., & **Lorente, N.** (2025). Syndemic perspective of how people living with HIV faced the COVID-19 crisis in North Africa. *Scientific Reports, 16*(1), 249. https://doi.org/10.1038/s41598-025-29487-0 (accepted November 2025, published in December)

Robledo, M. S., Costa, M., Lacoux, C., Jones, J., **Avila, J. C.**, Valdez, E., **Delabre, R. M.**, Sagaon-Teyssier, L., & **Castro, D. R.** (2025). Violences dans les relations sexuelles trans-actionnelles en ligne parmi les hommes (cis et trans), les femmes trans et les personnes non binaires en France: Résultats de l'étude ANRS SEXTRA. *Santé Publique, 37*(4), 23-33. https://doi.org/10.3917/spub.254.0023

Stuardo Ávila, V., **Apffel Font, O.**, León Cáceres, A., Radusky, P., Aristegui, I., Mendoza, H., Veras, M., Pinheiro, R., Mesa, D.V., Barriga, M.A., Gómez, L., Reyes-Díaz, M., Parra, V., Lisboa Donoso, C., Kretzer, L., **Castro Ávila, J.**, **Delabre, R.M.**, **Riegel, L.**, Folch Toda, C., Casabona, J., Cáceres, C.F., Lorente, N., **Rojas-Castro, D.** (2025). Impact of COVID-19 on key populations and people living with HIV: recommendations and sociopolitical responses from the EPIC community research program in Latin America, BMC Public Health https://doi.org/10.1186/s12889-025-22017-7

Lisboa, C., Stuardo, V., Robles, V.H., **Lorente, N.**, Cortés, E., Parra, V., Sagredo, G., **Rojas Castro, D.** (2025). Impacto de la COVID-19 y el acceso al tratamiento en personas viviendo con VIH en Chile/ Impact of COVID-19 and access to treatment in people living with HIV in Chile. Rev. chil. infectol. vol. *42* no.2 https://doi.org/10.4067/s0716-10182025000200117

Di Ciaccio, M., Adami, E., Boulahdour, N., **Bourhaba, O.**, **Castro Avila, J.**, **Lorente, N.**, Beldi Chouikha, K., Nabli, M., Torkhani, S., Karkouri, M., **Rojas Castro, D.** (2025). An intersectional analysis of social constraints and agency among sex workers in Tunisia during the COVID-19 pandemic; the community-based qualitative study EPIC-MENA, Global Public Health https://doi.org/10.1080/17441692.2025.2486436

Protiere, C., **Sow, A.**, Estellon, V., **Bureau, M.**, Leclercq, V., Grégoire, M., Bladou, F., **Spire, B.**, **Michels, D.**, Roux, P., & PaacX group (2025). Diversity of Chemsex Experiences among Men Who Have Sex with Men: Results from the French ANRS PaacX Study Using Q-Methodology. Archives of Sexual Behavior, 54(3), 1129–1140. https://doi.org/10.1007/s10508-024-03007-z

Dos Santos, M., **Salcedo, M.**, Mora, M., Siguier, M., Velter, A., **Leclercq, V.**, & Girard, G. (2025). Negotiating Access to Healthcare and Experience of Stigma Among Cisgender Gay Men Diagnosed with Mpox During the 2022 Epidemic in France: A Qualitative Study. AIDS and Behavior, 29(9), 2831–2840. https://doi.org/10.1007/s10461-025-04739-2

A.Eubanks, **M.Hoyer**, **A.Sow**, M.Mora, L.Assoumou, L.Beniguel, J.Ghosn, J.C. Jones, D.Costagliola, **B.Spire**, JM.Molina, G.Liegeon, L.Sagaon-Teyssier, C.Protière (2025). Willingness to participate in a long-acting injectable cabotegravir HIV pre-exposure prophylaxis study among men who have sex with men in the French ANRS-PREVENIR cohort. Sexually Transmitted Infections. https://doi.org/10.1136/sextrans-2025-056662

E.Sietins, L.Sagaon-Teyssier, **A.Sow**, L.Assoumou, M.Mora, L.Beniguel, D.Rojas-Castro, D.Michels, J.C.Jones, J.Ghosn, D.Costagliola, **B.Spire**, P.Roux, JM.Molina, C.Protiere (2025). Trajectories of Chemsex Engagement Across Time Among PrEP-Using Men Who Have Sex with Men: Results from the French ANRS-Prévenir Cohort. International Journal of Sexual Health. https://doi.org/10.1080/19317611.2025.2511902

R.Van Huizen, M.Annequin, Marion Mora, **A.Faye**, M.Fiorentino, **M.Bourrelly**, G.Maradan, C.Berenger, F.Michard, Y.Yazdanpanah, A.Freire Maresca, E.Rouveix, L.Cuenot, L.Balhan, M.Costa, D.Michels, L.Blanquart, G.Rincon, C.Protiere, B.Spire, the ANRS-Trans&HIV study group (2025). Socioeconomic marginalization, social exclusion, and engagement in transactional sex among transgender women living with HIV: the role of multidimensional gender affirmation. AIDS Care. https://doi.org/10.1080/09540121.2025.2560094

L.Sagaon-Teyssier, **M.Hoyer**, C.Donadille, **A.Sow**, L.Assoumou, J.Ghosn, D.Costagliola, **B.Spire**, JM.Molina, C.Protiere, P.Roux (2025). Differences between men who have sex with men that use drugs and engage in chemsex and those who do not engage in chemsex in the French ANRS-PREVENIR cohort: the need to rethink harm reduction services. Substance Abuse Treatment Prevention and Policy. https://doi.org/10.1186/s13011-025-00661-x

L.Sagaon-Teyssier, **M.Hoyer**, **M.Dos Santos**, M.Mora, **M.Bourrelly**, C.Protière, G.Maradan, P.Verger, D.Michels, M.Salcedo, A.Velter, M.Certoux, P.Peretti-Watel, PBV. Tong, V.Lugaz, **V.Leclercq**, L.Assoumou, M.Siguier, G.Pialoux, JM.Molina, P.Roux, **B.Spire**, G.Girard (2025). Acceptability of public health information and prevention measures by gay men, bisexual men and men who have sex with men during the French Mpox outbreak in 2022: the ANRS-MPX-SHS cross-sectional survey. Sexually Transmitted Infections. https://doi.org/10.1136/sextrans-2024-056406

S.Garbolino, **M.Dos Santos**, O.Pimond, L.Sayag, N.Khatmi, P.Roux (2025). "You have to love the party setting": an ethnography of the blurred lines between roles and experiential knowledge in a French harm reduction collective working in the party setting. Harm Reduction Journal. https://doi.org/10.1186/s12954-025-01209-9

I.Anwar, **A.Faye**, C.Donadille, L.Briand Madrid, L.Lalanne, MJauffret-Roustide, M.Auriacombe, P.Roux (2025). Gender-based factors associated with hepatitis C testing in people who inject drugs: results from the French COSINUS cohort. BMJ Open. https://doi.org/10.1136/bmjopen-2024-091707

MAJ.Noorman, KAGJ.Romijnders, **S.Lefebvre**, JSY. Lau, VL.Bakeroot, J.Power, C.Protiere, Sarah E. Stutterheim, JBF.de Wit (2025). From initial awareness to sustained involvement: using social and behavioral stage models to better understand engagement in HIV cure efforts in the Netherlands, France, Australia, and sub-saharan Africa. AIDS Care. https://doi.org/10.1080/09540121.2025.2592889

C.Boutet, **M.Di Ciaccio**, **B.Spire**, A.Velter, L.Sagaon-Teyssier (2025). A Competing Risks Duration Model to Study PrEP Discontinuation Among MSM in France: The ERAS 2023 Study. AIDS and Behavior. https://doi.org/10.1007/s10461-025-04729-4

C.Ramier, C.Protopopescu, **V.Di Beo**, L.Parlati, F.Marcellin, F.Carrat, T.Asselah, M.Bourlière, P.Carrieri (2025). Behaviour-Based Predictive Scores of Hepatocellular Carcinoma in People With Chronic Hepatitis B (ANRS CO22 HEPATHER). Liver International. https://doi.org/10.1111/liv.70065

T.Barré, C.Ramier, K.Ory, T.Saidi, P.Sogni, Fabien Zoulim, **M.Bureau-Stoltmann**, C.Protopopescu, F.Marcellin, P.Carrieri, the ANRS CO13 HEPAVIH Study Group (2025). Liver Enzyme Elevation After Hepatitis C Virus Cure: Is There a Sex Effect? (ANRS CO13 HEPAVIH Cohort). Journal of Viral Hepatitis. https://doi.org/10.1111/jvh.70007

T.Barré, C.Ramier, L.Wittkop, P.Sogni, D.Zucman, R.Tardieu, P.Carrieri, F.Marcellin, for the ANRS CO13 HEPAVIH Study Group, D Salmon, L Wittkop, P Sogni, P Carrieri, B Spire, K Ory, P Trimoulet, J Izopet, L Serfaty, L Alric, M A Valantin, G Pialoux, J Chas, K Barange, A Naqvi, E Rosenthal, A Bicart-See, O Bouchaud, A Gervais, C Lascoux-Combe, C Goujard, K Lacombe, C Duvivier, D Neau, P Morlat, F Bani-Sadr, F Boufassa, C Solas, H Fontaine, L Piroth, A Simon, D Zucman, F Boué, P Miailhes, E Billaud, H Aumaître, D Rey, G Peytavin, O Zaeglel-Faucher, D Salmon, R Usubillaga, P Sogni, B Bienvenu, O Launay-Puybasset, C Bernasconi, A Brunet, B Silbermann, H Boucher, F Rollot, O Zak Dit Zbar, S Pol, C Le Jeunne-Ballif, P Louergue, H Mehawej, L Merine-Belardi, F Almasi, N Benammar, L Alagna, S Chaussade, L Guillevin, B Terris, C Norgeux, C Katlama, M A Valantin, H Stitou, F Caby, L Paris, L Schneider, R Tubiana, A Simon, L Roudière, O Benveniste, G Breton, M Bonmarchand, M Kirstetter, F Charlotte, F Capron, V Calvez, V Thibaut, C Soulie, B Abdi, S Lambert-Niclot, S Bregigeon-Ronot, O Zaegel-Faucher, H Laroche, A Menard, E Gaubert-Marechal, S Thirée, C Tamalet, C Hakimi, J C Poluzzi (2025). Low CD4 Cell Count Is Associated With Post–Hepatitis C Virus Cure Mortality in People With HIV (ANRS CO13 HEPAVIH Cohort). Clinical Infectious Diseases. https://doi.org/10.1093/cid/ciaf016

M.Lotto, C.Ramier, F.Carrat, L.Périères, E.Delaroque-Astagneau, J.Nicol, F.Marcellin, F.Zoulim, **V.Di Beo**, M.Bertheau, S.Pol, C.Protopopescu, M.Bourlière, P.Carrieri (2025). Mortality risk in migrant and non-migrant individuals with chronic hepatitis B virus infection: a French hospital-based cohort study (ANRS CO22 HEPATHER). BMC Global and Public Health. https://doi.org/10.1186/s44263-025-00173-7

C.Ramier, F.Carrat, **V.Di Beo**, L.Parlati, M.Lotto, F.Marcellin, C.Protopopescu, P.Carrieri, M.Bourliere (2025). Unhealthy Behaviours and All-Cause Mortality Among People With Chronic Hepatitis B, With and Without Hepatitis Delta (ANRS CO22 HEPATHER). Journal of Viral Hepatitis. https://doi.org/10.1111/jvh.70033

T.Barré, **V.Di Beo**, C.Protopopescu, E.Lahaie, R.Andler, V.Nguyen-Thanh, A.Pasquereau, P.Carrieri, F.Beck (2025). Prevalence and factors associated with tobacco and cannabis co-use in France: Results from a national representative survey. Drug and Alcohol Dependence Reports. https://doi.org/10.1016/j.dadr.2025.100381

T.Barré, E.Lahaie, V.Di Beo, P.Carrieri, R.Andler, V.Nguyen-Thanh, F.Beck (2025). Recreational nitrous oxide use in France in 2022: Results from a nationwide representative sample of adults. Drug and Alcohol Review. https://doi.org/10.1111/dar.14039

T.Barré, C.Ramier, C.Protopopescu, P.Sogni, K.Ory, T.Saidi, S.Abgrall, S.Brégigeon-Ronot, P.Carrieri, F.Marcellin (2025). Perceived disabling physical pain and suicidal ideation in aging people living with HIV cured of hepatitis C: A multi-center survey in France (ANRS CO13 HEPAVIH). HIV Medicine. https://doi.org/10.1111/hiv.70121

A.Gish, E.Radwan, C.Richeval, C.Protopopescu, JF.Wiart, F.Hakim, D.Allorge, P.Carrieri, **T.Barré**, JM.Gaulier (2025). Liquid Chromatography–Tandem Mass Spectrometry Method for Simultaneous Quantification of Four Endocannabinoids and Endocannabinoid-Like Substances in Plasma: Application in an HIV–Hepatitis C Virus Coinfected Population. Therapeutic Drug Monitoring. https://doi.org/10.1097/FTD.0000000000001397

F.Marcellin, **V.di Beo**, P.Sogni, C.Ramier, C.Brouard, Y.Allier, A.Mourad, **M.Bureau-Stoltmann**, S.Deuffic-Burban, P.Carrieri, B.Rolland, M.Bourliere, C.Protopopescu (2025). Bridging the Gap: How Distance to Hospitals Limits HCV Treatment Initiation in France. Journal of Viral Hepatitis. https://doi.org/10.1111/jvh.70102

D.Fortin, **V.Di Beo**, M.Kowalski, EL. Sevigny, J.Grigg, C.Protopopescu, GR. Potter (2025). Cannabis growers as gardeners: results from a survey among Italian and British small-scale growers. International Journal of Drug Policy. https://doi.org/10.1016/j.drugpo.2025.104959

F.Marcellin, **V.Di Beo**, C.Brouard, C.Ramier, Y.Allier, A.Mourad, **M.Bureau-Stoltmann**, P.Sogni, S.Deuffic-Burban, M.Bourlière, B.Rolland, P.Carrieri, C.Protopopescu, Traitement de l'hépatite C : variations temporelles et régionales de la part des primo-prescriptions d'antiviraux à action directe par les médecins généralistes et facteurs associés, projet ANRS Fantasio 2, France hexagonale, 2019-2022 (2025). Bull Épidémiol Hebd

ARTICLE FOR THE GENERAL PUBLIC

Alaoui I, Di Ciaccio M, Lorente N. (2025). La santé communautaire en péril : reconfigurations de l'architecture en santé mondiale face à la crise de financement dans la lutte contre le VIH. Alternatives Humanitaires, *30 - L'aide en danger : après le choc de 2025, les conséquences et la riposte.* https://www.alternatives-humanitaires.org/fr/2025/11/27/la-sante-communautaire-en-peril-reconfigurations-de-larchitecture-en-sante-mondiale-face-a-la-crise-de-financement-dans-la-lutte-contre-le-vih/

ORAL PRESENTATIONS

Martínez-Riveros H., Rocha M., **Apffel Font O.**, Meireles P., Stuardo V., **Rojas Castro D.**, **Lorente N.**, Folch C., LIBEROPOX study group. (2025). Desafíos metodológicos y aprendizajes del estudio LIBERO-POX sobre mpox en la red Iberoamericana Right PLUS. XLIII Reunión Anual de la Sociedad Española de Epidemiología (SEE) y XX Congreso da Associação Portuguesa de Epidemiologia (APE) – Sept 2-5, Las Palmas de Gran Canaria (Spain).

Casabona, J, **Lorente, N**, **Apffel, O**, Folch, C. (2025). Investigación aplicada y participativa entre la academia y la comunidad, Iberoamericana: la red Right PLUS, proceso y lecciones aprendidas. XLIII Reunión Anual de la Sociedad Española de Epidemiología (SEE) y XX Congreso da Associação Portuguesa de Epidemiologia (APE) – Sept 2-5, Las Palmas de Gran Canaria (Spain).

Radusky P.D., **Lorente N.**, Folch C., Reyes M.E., Casabona J. (2025). ¿Qué aprendimos de la Encuesta Latinoamericana por Internet para HSH (LAMIS-2018) y cómo informó el desarrollo de LAMIS-2025?. XXII Simposio Científico Regional Fundación Huésped. August 27-29, Buenos Aires.

Castro Avila J., Mendoza H., **Lorente N.**, **Di Ciaccio M.**, Valdez E., **Rojas Castro D.**, Becquet V. (2025). Sex work in Bolivia during the Covid-19 crisis: intersectional impact and adaptative strategies. Orally presented at the 16th AIDS Impact conference, May 26-28, Casablanca.

Radusky P.D., **Lorente N.**, Folch C., Reyes M.E., Casabona J. (2025). What Did We Learn from the Latin American MSM Internet Survey (LAMIS-2018), and How Can It Inform the Development of LAMIS-2025? Orally presented at the 16th AIDS Impact conference, May 26-28, Casablanca.

Meireles P., **Lorente N.**, Folch C. (2025). Mpox diagnosis, vaccine, and preventive behaviours in gay, bisexual, and other MSM in the Ibero- American region: results from the LIBERO-POX study. Orally presented at the 16th AIDS Impact conference, May 26-28, Casablanca.

Novais M., **Lana J.**, Cabama J., Aliu Djalo M., Barreto K., Machado F., Camara A., Infante R., Pedro R., Vaz A., Castigo L., Mufanequico C., Xavier E., Leclercq V., Dioh M., Ritter N., Cook E., **Lorente N.**, Coutinho O, Freitas R, Meireles P. (2025). International Testing Week 2020-24: results from community-based initiative offering integrated STIs testing in Portuguese-speaking African countries. Orally presented at the 16th AIDS Impact conference, May 26-28, Casablanca.

Casabona J., **Lorente N.**, **Apffel Font O.**, Folch C., The Right PLUS Network. (2025). Community and academic collaborative applied research in the Ibero-American region: the Right PLUS network. Process and lessons learned. Orally presented at the 16th AIDS Impact conference, May 26-28, Casablanca (Symposium Right PLUS).

Ixcot D., Castellanos E., **Lorente N.**, Rodas L., **Gómez L.** (2025). Integration of mental health services into a community-based combined HIV prevention clinic targeted at GBMSM in Guatemala. Orally presented at the 16th AIDS Impact conference, May 26-28, Casablanca (Symposium Right PLUS).

POSTERS

Michel NDIONE L., Coulibaly A., Adamou A., Some K.V.G., Sambou D., Adiffon A.C., Boiro F., Degbe D., **Cook E.**, **Scavenius M.**, **Henriot C.**, **Diagne R.** (2025). Contextual analysis of the implementation of proctological management in community- based organizations (CBOs) in West Africa: Discovering neglected intimacy. Poster presented at the 16th AIDS Impact conference, May 26-28, Casablanca (Morocco).

Novais M., Lana J., Djalo MA., Barreto K., Camara A., Machado F., Coutinho O., **Riegel L.**, Freitas R., Meireles P. (2025) Community-Based Testing for HIV and Coinfections in Guinea-Bissau – insights from a two-month intervention. Poster presented at the 16th AIDS Impact conference, May 26-28, Casablanca (Morocco).

ROUND TABLES AND SEMINARS

Lorente, N., Castro Avila, J., Mendoza, H., Medina, J. (2025). Seminario SEXTRA-AL en el Hub Barcelona - presentación general del proyecto ANRS-SEXTRA. February 5, Badalona, Spain.

Lorente, N. (2025). Coalition PLUS y la investigación comunitaria. Seminario de restitución SEXTRA. March 20, Cochabamba, Bolivia.

Spire, B., Lorente, N. (2025). Doing research with people, not for people. Oct 15, IAS Person-Centred Care Advocacy Academy, Paris, France.

Lorente, N. (2025). Community-based and participatory research in the field of HIV. Round table. European AIDS Clinical Society (EACS), Oct 15-18, Paris, France.

Lorente, N. (2025). Recerca comunitària a Coalition PLUS. Reunió trimestral del CEEISCAT. December 12, Badalona, Spain.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ACRONYMS

AGCS PLUS
Alliance Globale des Communautés pour la Santé et les Droits [Global Alliance of Communities for Health and Rights]

AIDS
Acquired Immunodeficiency Syndrome

ALCS
Association de lutte contre le sida, an HIV/AIDS NGO (Morocco)

ANRS
Agence nationale de recherche sur le sida et les hépatites [National Agency for Research on AIDS and Hepatitis] - autonomous Inserm agency

ARV
Antiretroviral drugs

CCM
Country Coordinating Mechanism

CEEISCAT
Centre d'estudis epidemiològics sobre les ITS i la sida de Catalunya (Badalona, Catalonia, Spain)

CIF
Coalition PLUS Innovation Fund

COPRIS
Research and strategic information steering committee

COS
Community-based organizations

DAAS
Direct-acting antivirals (drugs used to treat hepatitis C)

DUS
Drug users

EB
Executive Board

FAA
Fight against AIDS

GBMSM
Gay, bisexual and other men who have sex with men

GBV
Gender-based violence

GFAN
Global Fund Advocates Network

HBV
Hepatitis B virus

HCV
Hepatitis C virus

HIV
Human Immunodeficiency Virus

INSERM
Institut national de la santé et de la recherche médicale [National Institute of Health and Medical Research], French public institution with a scientific and technical vocation

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

ITW
International Testing Week

KPS
Key populations

LAMIS
Latin American MSM Internet Survey

LGBTQIA+
Acronym for people in the lesbian, gay, bisexual, transgender and intersex community

MENA
Middle East and North Africa Platform

MSM
Men who have sex with men

OECD
Organisation for Economic Co-operation and Development

PACE
Central and East Africa Platform

PE
Europe Platform

PEP
Post-Exposure Prophylaxis

PEPFAR
President's Emergency Plan for AIDS Relief

PFAC
Americas-Caribbean Platform

PFAO
West Africa Platform

PFOI
Indian Ocean Platform

PREP
Pre-Exposure Prophylaxis

RIGHT PLUS
Ibero-American Network of Studies on Gay Men, other MSM and Transgender People

SASEA
South and Southeast Asia Platform

SCAR
Severe Cuts, AIDS Resurgence

SDG
Sustainable Development Goal

SESSTIM
Unité mixte de recherche Sciences économiques et sociales de la santé et traitement de l'information médicale, [Joint Research Unit for Health Economics and Social Sciences & Medical Information Processing], based in France

STI
Sexually transmitted infection

SWS
Sex workers

UNDP
United Nations Development Programme

USAID
U.S. Agency for International Development

WHO
World Health Organization

WLWH
Women living with HIV

Malaysia, Kuala Lumpur, June 2025. The PKKUM association visits beneficiaries (trans people and sex workers) to give them HIV and STI tests. The women wait their turn to be tested.. © Laurence Geai

CONTACTS

BELGIUM
Boulevard Emile Jacqmain 90
1000 Brussels

SPAIN
% MGA Consultant
Carrer Mallorca 318, 4o-2a
08037 Barcelona

FRANCE
Tour Essor 14, rue Scandicci
93508 Pantin Cedex
And
Faculté de Médecine
27 Bd Jean Moulin
13385 Marseille Cedex 5

SENEGAL
Afrique Villa N°2466 Immeuble AF
3e étage appartements C et D
rue DD 116, Sicap Dieupeul II Dakar

SWITZERLAND
c/o Calliopée
Rue de Chantepoulet 10
1201 Geneva, Switzerland

Email: coalitionplus@coalitionplus.org
Website: www.coalitionplus.org
Social networks: @coalitionplus

Publication Manager
Vincent Leclercq

Coordination
Emilie Monod

Contributions
Arnold Abongo Mwengo, Cécile Henriot, Cheikh Mohamad Hafis Seck, Cristina Iova, Delphine Rapoud, Emilie Monod, Emmanuel Cook, Federico Pipitone, Florence Giard, Franck Amani, Guy Gagnon, Ines Alaoui, Keurtsing Tchouankea, Lucas Riegel, Mehdi Karkouri, Manon Scavenius, Marion Di Ciaccio, Nicolas Lorente, Pape Abdoulaye Dème, Sawsen Khodja, Serge Douomong Yotta, Sophie Merlevede, Soufia Bham, Thomas Van Bogaert.

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COALITION PLUS IS GUIDED BY 3 MAIN PRINCIPLES OF ACTION

01.

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 populations vulnerable to 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.

02.

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.

03.

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.

COALITION
PLUS