



ACTIVITY REPORT 2015

Solthis, international health NGO

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This report has been printed in July 2016. The financial report has been certified by the expert Accountants at the Auditors Price Waterhouse Coopers and by Solthis General Assembly.

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EDITORIAL

In this report we are proud to present, the tremendous work accomplished by our teams. Through their expertise, their commitment and despite the Ebola epidemic and the security risks they faced, they were able to implement a large number of essential activities to ensure access to health for all.

In Guinea and in Sierra Leone, our HIV continuity of care programmes in the context of Ebola, have, through the 5% initiative, enabled us both to ensure the safety of healthcare providers, to encourage patients lost to follow-up to return for treatment but also prevention and control of infections in hospitals.

Through the OPP-ERA project, funded by Unitaid, Solthis and its partners have, for the first time, introduced access to viral load testing into the public health system in Guinea through an innovative strategy of open and polyvalent platforms. Phase 2, which is due to start in 2016, should enable us to go even further towards achieving the 90-90-90 strategy promoted by the international community.

We also continued our strategic development: Solthis officially became Solidarité Thérapeutique et Initiatives pour la Santé (Therapeutic Solidarity and Initiatives for Health). Based on strengthening health systems, we extended our scope of action to include the main infections in developing countries and issues around sexual and reproductive health. Our JADES project on young people's health in Mali and Niger was launched early in 2016 as was our Diavina operational research project which we run with French National Agency for Aids Research (ANRS).

In addition, new international institutions have confidence in us: The World Bank on a project for key populations in Niger; the European Union on a project for the right to health in prisons in Niger; as well as the AFD in Sierra Leone on a project to enhance the role of communities in the quality of care. Because of them but also the loyal support of institutions like the Bettencourt Schueller Foundation, City of Paris, or the Fondation de France, we are continuing our activities in the field.

2015 saw the adoption of the new sustainable development goals' agenda. The evolution of Solthis towards a more cross-cutting approach, focusing on systems and health determinants, allows us to better grasp the new challenges that arise.

We are living through a globalization of contrasts. On the one hand increases in threats to health and population growth in poor countries stir up tensions. On the other, new health solutions, including technologies, which should enable us to resolve a growing number of diseases. Will solidarity between peoples, between nations, on a global scale be able to resolve this paradox? Solthis teams fully intend to take their share of responsibility and to extend their commitment to secure a world where the right to health is finally a reality.

Louis Pizarro, MD, CEO



SOLTHIS, INTERNATIONAL HEALTH NGO

OUR MISSION

Solthis is an international solidarity NGO dedicated to improving the health of people in countries with limited resources. We take action on prevention and access to quality care by strengthening health systems and services in the countries where we operate.

Founded in 2003 by research physicians from the Pitié-Salpêtrière hospital, Solthis has been working for over 10 years in West Africa. Through our work we sign up to a sustainable development strategy in order to bring a long-term response to meet the public health challenges in these countries.

We have developed an intervention strategy based upon a holistic approach to health challenges and we are strengthening all elements of the health system and services: men and women, institutions, networks and technologies.

OUR PRINCIPLES

Act without replacing

Since its foundation, Solthis has adhered to the principle of “non-substitution”. Our teams work at the request of national authorities, devise programmes of action with them, with a view to empowering our local partners and to long term development.

Mobilise multidisciplinary academic expertise serving field action

We mobilise multidisciplinary experts in the countries of the North and South to take into account all aspects of the health challenges: medical, social, economic or political.

We promote the exchange of expertise and North/South partnerships with university hospitals, research institutes, universities and international organisations.

OUR VALUES

Since its foundation, Solthis has continued to develop, to innovate and to adapt, while remaining true to its values.

Solidarity and commitment

We act in the name of the right to health for all.

Transparency

We are committed to communicating transparently on the actions which we take, on the management and use of our funds.

Professionalism

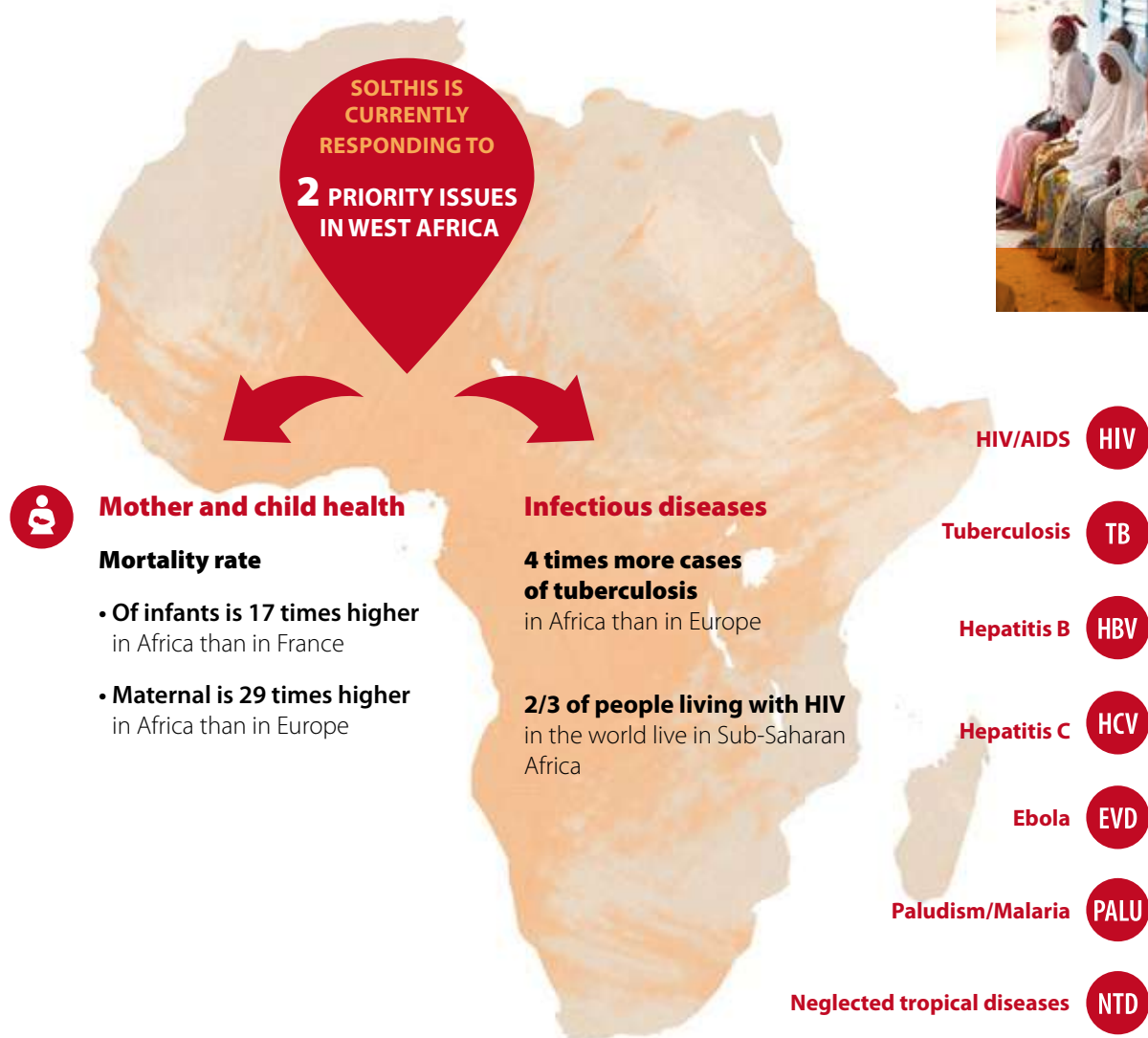
Solthis is an NGO of committed health and development professionals. We operate in a scientific and empirical way to find cost-effective solutions which are suitable for dealing with the realities we face on the ground.

Creativity, innovation

We have developed innovative programmes both medically, by providing access to viral load, for example, and pedagogically by the creation of ad hoc and educational tools for both patients and health-care providers.



OUR HEALTH PRIORITIES



OUR ACTION

Improve health for all in countries with limited resources

Give the people access to prevention and quality health services

OUR EXPERTISE

Strengthen health systems and services on the long term

We are working towards delivering a concrete, comprehensive and sustainable solution regarding public health by taking action on all components of the national health systems and services.

OUR AREAS OF EXPERTISE

To improve access, quality, efficiency and fairness in access to healthcare services provided, we must take action on all components of the health systems.



Health services

Give people access to quality health services in health facilities through better integration/coordination of services between them and of the healthcare organization.



Laboratories and technical platforms

Improve diagnoses and patients biological monitoring by training and mentoring local technicians in using technologies to carry out tests and interpret results and managing technical facilities.



Governance and health policies

Support the development of national policies, sectorial strategies and standards and procedures. Strengthen dialogue with civil society.



Human resources

Support our national partners to devise and monitor their national strategies for training and delegating tasks



Health Information System (HIS)

Strengthen the system for gathering and processing health data to ensure proper patient monitoring, analysis of epidemics and evaluation of health programs.



Community sector

Support community stakeholders and patients to give them ownership of their health and of the health systems strengthening.



Health products and pharmaceutical systems

Enable consistent access to quality medicines and ensure the appropriate usage of health products by prescribers, dispensers and patients.



Health Financing

Work with our partners to mobilize international funds, for equitable access to health and to ensure that international development assistance addresses local realities.

2015 Key figures

OUR 3 MODES OF INTERVENTION

For more than 10 years we have developed an expertise around 3 modes of intervention to take action on the main components of the health systems.

CB

Capacity building

Support for health professionals, facilities and authorities following a strategy of skills' capacity building, counselling and support for change.

OR

Operational research

Solthis contributes to field workers reflection to transform operational problems into research questions.

AD

Advocacy

Solthis works to defend fair access to care for all, to change existing practices and policies and to ensure that international aid mechanisms are fit for purpose.

4



countries of intervention
in West Africa and 1 mission
in Tunisia in 2015



+

100

health centres
with ongoing support



88%

of our workforce are in the field



3,9

million budget
spent in 2015

1500

health professionals trained in 2015

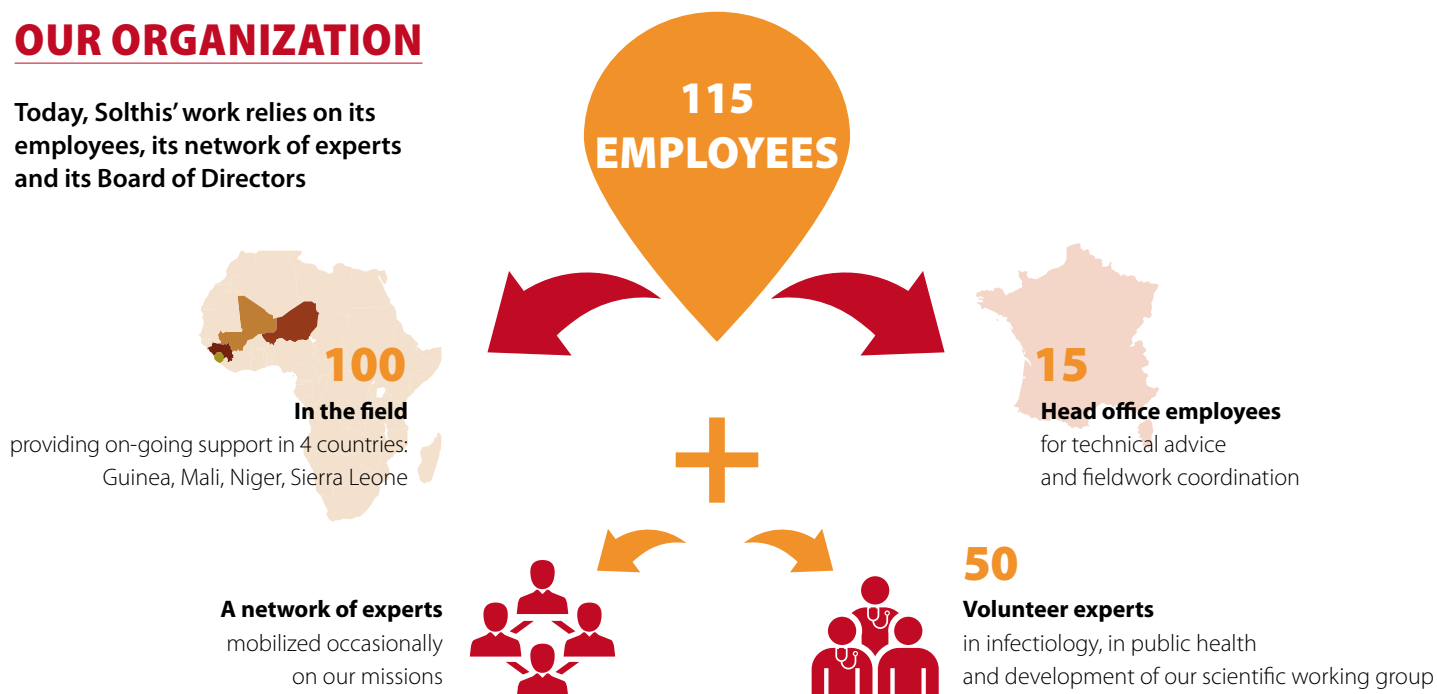
+

1

million patients
per year visit centres
supported by Solthis

OUR ORGANIZATION

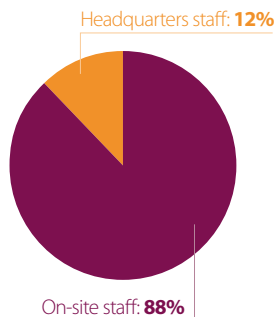
Today, Solthis' work relies on its employees, its network of experts and its Board of Directors



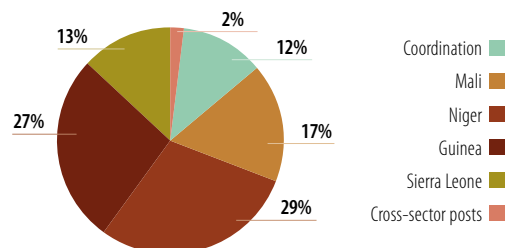
AN INTERNATIONAL NGO

The vast majority of Solthis' workforce is operating in the field (88% of the total staff). Among these 88%, 81% of the workforce is comprised of local staff members and 19% are international.

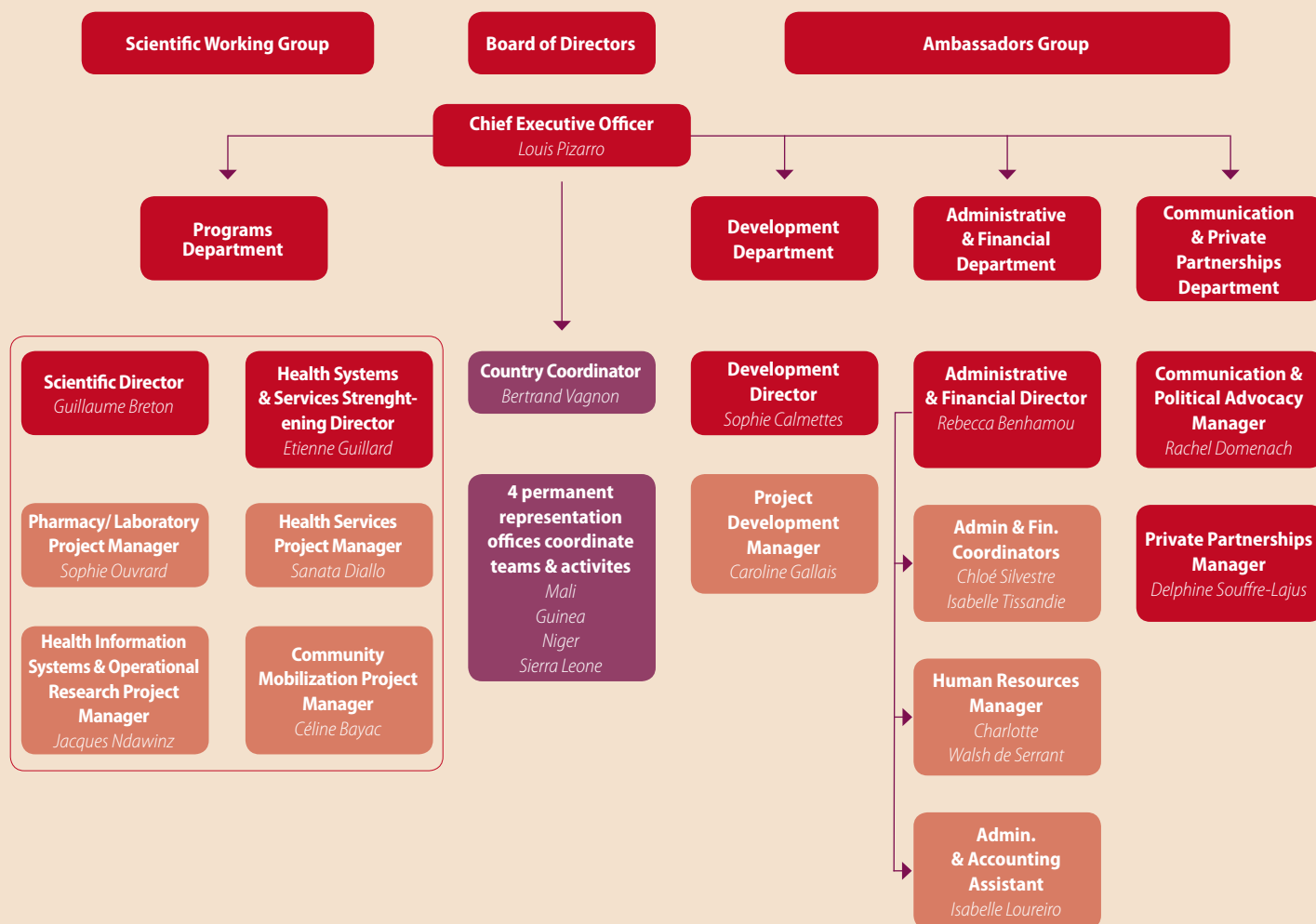
Distribution of the Payroll



Manpower per country



OUR HEADQUARTERS TEAM



THE BOARD OF DIRECTORS

Pr Christine KATLAMA,

Chairman
Responsible for the Day Hospital
and the AIDS Clinical Research
Unit of the Department of
Infectious and Tropical Diseases -
Pitié-Salpêtrière Hospital.

Pr Brigitte AUTRAN,

Treasurer
Professor of Immunology at Paris
VI, Department of Immunology
Cell and Tissue Laboratory -
Pitié-Salpêtrière Hospital

Armand de BOISSIERE,

Secretary General
of the Bettencourt Schueller
Foundation.

Benjamin CORIAT,

Professor of Economics at
the University of Paris XIII and
President of the ANRS AC 27.

Pr Christine ROUZIOUX,

Head of department of Virology
of Necker Hospital, Paris.

Dr. Roland TUBIANA,

Secretary General
Hospital practitioner, Service
of Infectious Diseases at Pitié-
Salpêtrière Hospital, Paris.

Jean-Pierre VALERIOLA,

Former Director of
Communication and
Development of the Bettencourt
Schueller Foundation.

Philippe VILLIN,

CEO "Philippe Villin Conseil".

THE LIFE OF THE ASSOCIATION IN 2015

The General Assembly was held on June 30 2015.

The moral report and the annual accounts were approved. As Armand de Boissière's mandate was expiring, it has been extended for 3 years.

Two Board of Directors meetings were held:

- June 4th 2015: accounts and the activity report for 2014 were closed
- December 17th 2015: the programmes and the budgets were put to a vote for 2015



THE SCIENTIFIC WORKING GROUP

Composed of international infectious disease, public health and development experts, the scientific working group provides advice and expertise for Solthis' actions and programmes. The members also participate in temporary missions on the field to provide support and training.

Pr Eric ADEHOSSI, Department of Internal Medicine, National Hospital, Niamey (Niger)
Françoise AEBERHARD, Psychologist, Consultant, Department of Infectious Diseases, Pitié-Salpêtrière Hospital (AP-HP), Paris
Pr Brigitte AUTRAN, Immunologist, Laboratory of Immunology, Pitié-Salpêtrière Hospital (AP-HP), Paris
Dr Elie AZRIA, Clinical Fellow, Department of Gynaecology and Obstetrics, Bichat-Claude Bernard Hospital (AP-HP), Paris
Pr Olivier BOUCHAUD, Clinical Fellow, Department of infectious diseases, Avicennes Hospital (AP-HP), Paris
Pr Elisabeth BOUVET, Director of the CDAG HIV/HCV/HBV, Bichat-Claude Bernard Hospital (AP-HP), Paris
Pr Gilles BRÜCKER, Professor of Public Health at the University of Paris XI, Kremlin Bicêtre, Paris
Pr Vincent CALVEZ, Virologist, Laboratory of Virology, Pitié-Salpêtrière Hospital (AP-HP), Paris
Dr Ana CANESTRI, Infectious Disease Specialist, Department of Infectious Diseases, Saint Antoine Hospital (AP-HP), Paris
Dr Guislaine CARCELAIN, Immunologist, Laboratory of Cellular and Tissue Immunology, Pitié-Salpêtrière Hospital (AP-HP), Paris
Pr Mohamed CISSE, Senior university lecturer, Head of the Department of Dermatology, Donka University Hospital, Conakry (Guinea)
Pr Dominique COSTAGLIOLA, Director of Inserm Unité 943, University Pierre and Marie Curie, Paris
Pr Christian COURPOTIN, Paediatrician, International Consultant
Pr Patrice DEBRÉ, Head of Department of Immunology Laboratory of Cell and Tissue Pitié-Salpêtrière Hospital, Paris
Dr Diane DESCAMPS, Virologist, Laboratory of Virology, Bichat-Claude Bernard Hospital (AP-HP), Paris
Dr Charlotte DEZE, Medical Coordinator, Médecins du Monde, Ivory Coast
Dr Benjamin DJOUDALBAYE, Senior Health Officer HIV/AIDS, TB, Malaria and OI/D Department of Social Affairs, African Union Commission, Addis Ababa (Ethiopia)
Pr Marc DOMMERGUES, Head of the Department of Obstetric Gynaecology, Pitié-Salpêtrière Hospital (AP-HP), Paris
Pr Serge EHOLIE, MD, Senior lecturer, Department of Infectious and Tropical Diseases, University Hospital Treichville, Abidjan (Ivory Coast)
Pr Arnaud FONTANET, Head of the Department of the Epidemiology of Emerging Diseases, Institut Pasteur, Paris
Dr Pierre FRANGE, Pediatrician, unit of pediatric immunology, hematology and rheumatology at Necker Hospital (AP-HP), Paris
Dr David GERMANAUD, Pediatrician, Pediatric Department of Robert Debré Hospital, Paris



Pr Pierre-Marie GIRARD, Head of the Department of Infectious Diseases, Saint Antoine Hospital (AP-HP), Paris
Dr Florence HUBER, Hospital practitioner, infectious diseases service at Cayenne Hospital Centre
Pr Vincent JARLIER, Head of the Department of Bacteriology, Pitié-Salpêtrière Hospital (AP-HP), Paris
Dr Bernard JARROUSSE, Head of the Department of Internal Medicine, Lagry-Marne la Vallée Hospital
Pr Christine KATLAMA, Director of the Outpatient Clinic and the AIDS Clinical Research Unit, Department of Infectious Diseases, Pitié-Salpêtrière Hospital (AP-HP), Paris
Grégoire LURTON, PhD student at Washington University, Institute for Health Metrics and Evaluation (IHME)
Yoann MADEC, Doctor in statistics, Epidemiology of Emerging Diseases, Institut Pasteur, Paris
Dr Almoustapha MAÏGA, Clinical fellow, medical analysis laboratory, Gabriel Toure Hospital and PhD Virologist, virology laboratory SEREFO-USTTB, Bamako (Mali)
Dr Anne-Geneviève MARCELIN, Virologist, Department of Virology, Pitié-Salpêtrière Hospital (AP-HP), Paris
Dr Vanina MEYSSONNIER, Internist and infectious diseases specialist – Croix Saint Simon Hospital, Paris
Pr Robert MURPHY, Head of the Department of Infectious Diseases, Northwestern University Medical School, Chicago
Dr Charlotte NGO, Physician, Department of gynaecology-obstetrics, George Pompidou Hospital (AP-HP), Paris
Pr Théodore NIYONGABO, Department of Internal Medicine, University Hospital Kamenge and Director of the CNR (National Reference Centre for HIV/AIDS), Bujumbura (Burundi)
Dr Gilles PEYTAVIN, Pharmacist, Bichat-Claude Bernard Hospital Pharmacy (AP-HP), Paris
Dr Cecilia PIZZOCOLO, Department of Infectious Diseases, Saint Louis Hospital (AP-HP), Paris
Hélène ROGER, International Programs Director, Sidaction
Pr Christine ROUZIOUX, Virologist, Department of Virology Necker Hospital (APHP) and University Paris-Descartes, Paris
Dr Aliou SYLLA, Coordinator of the Sectorial Group for Coordination of the Fight Against HIV/AIDS (Cellule sectorielle de coordination de la lutte contre le VIH/Sida) (CSLS), Mali
Pr Mariam SYLLA, Pediatrician, Department of Paediatrics, CHU Gabriel Touré, Bamako (Mali)
Stéphanie TCHOMBIANO, HIV health expert
Dr Tuan TRAN-MINH, International Consultant
Dr Roland TUBIANA, Physician, Department of Infectious Diseases, Pitié-Salpêtrière Hospital (AP-HP), Paris
Dr Marc-Antoine VALANTIN, Physician, Department of Infectious Diseases Pitié-Salpêtrière Hospital, Paris.
Pr Jean-Paul VIARD, Physician, Department of Immunology, Hôtel-Dieu Hospital, Paris

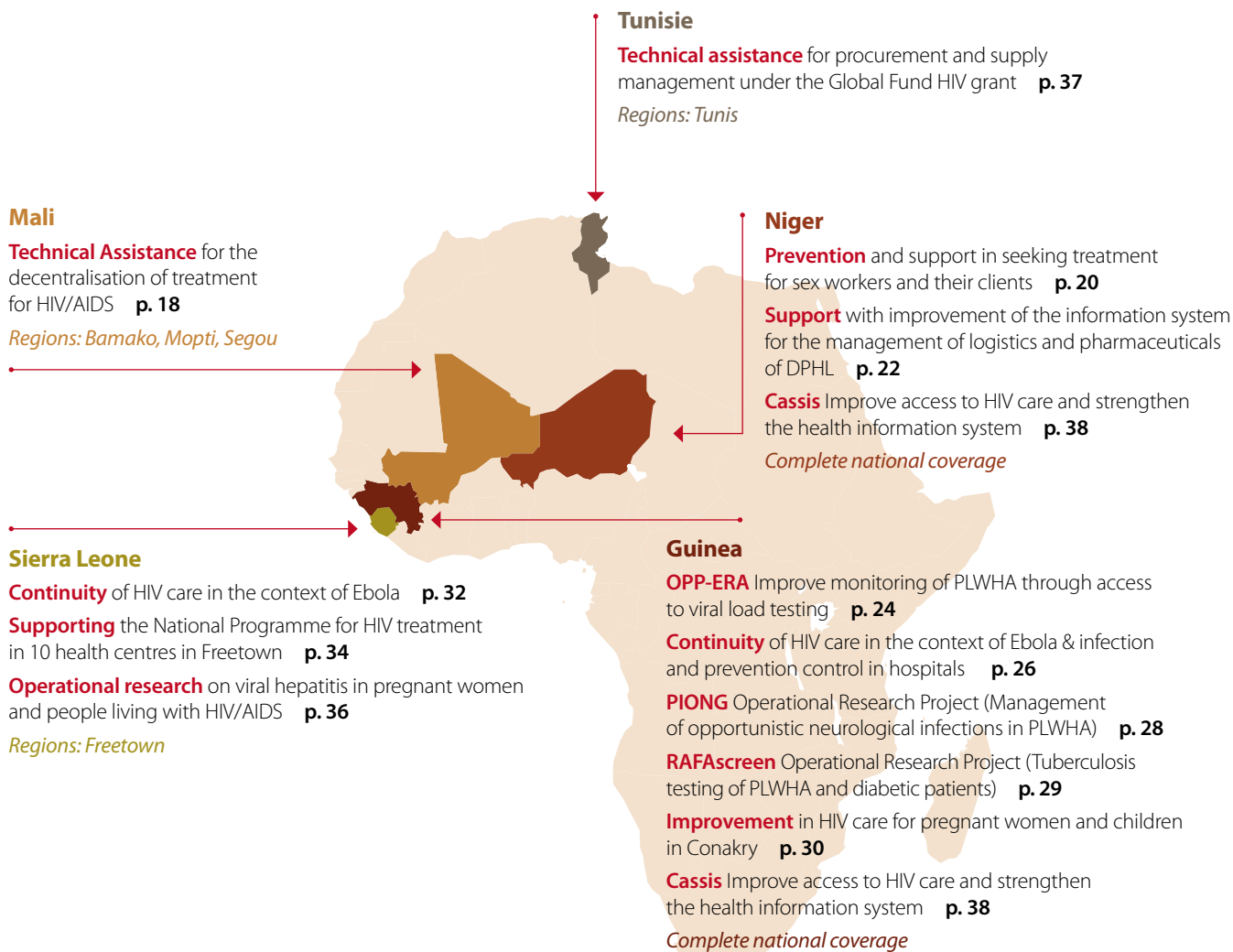


 **Solthis**
Therapeutic Solidarity
and Initiatives for Health



OUR ACTIVITIES

SOLTHIS IN 2015



PRINCIPAL NATIONAL PARTNERS

Mali

HCNLS: directly attached to the Presidency, the High National Council for the Fight against AIDS is mandated to coordinate the development of the national HIV/AIDS policy, its dissemination and monitoring, and to establish the HIV/AIDS strategic framework.

CSLS-MS: the Ministry of Health Unit for the Fight against HIV/AIDS support unit attached to the Secretary General for the Ministry of Health, it is responsible for the management, coordination and orientation of the fight against HIV/AIDS in the health sector.

Sierra Leone

NAS: the National HIV/AIDS Secretariat has the objective of coordinating national policy on the fight against HIV/AIDS in Sierra Leone. Administratively dependent on the Prime Minister's office, it is in charge of coordinating and developing the national strategic plan based on prevention, treatment and care. The NAS is the principal beneficiary of the Global Fund in its HIV component.

NACP: the National AIDS Control Programme attached to the Ministry of Health, is responsible for coordinating the implementation of the health sector's response to HIV.

Nethips: the Network of HIV Positives in Sierra Leone aims to improve living conditions for people living with HIV in the country. The network plays a role of coordination, advocacy and capacity building at national level.

Guinea

CNLS: reporting to the Prime Minister, the National Committee for the Fight against AIDS is responsible for instigating and coordinating the development and implementation of the national intersectoral strategy for the fight against HIV/AIDS. It is directed by the Executive Secretariat, which is one of the two principal recipients of Round 10-HIV of the Global Fund.

PNPCSP: reporting to the DNSP (National Directorate for Public Health) within the Ministry of Health and Public Hygiene, the National Programme for Treatment and Prevention of STIs/HIV/AIDS is responsible for implementing the Ministry's sectoral policy with regards to the fight against STIs/HIV/AIDS.

Niger

CISLS: directly attached to the President of the Republic since 2008, the Office for Intersectoral Coordination of the Fight against STI/HIV/AIDS ensures the coordination, monitoring and evaluation of all activities related to the fight against STIs/HIV/AIDS throughout the country. The Coordination is the principal recipient of the Global Fund.

ULSS: attached to the Ministry of Health, the Intersectoral Health Unit for the Fight against AIDS, is responsible for coordinating all aspects of the fight against AIDS which fall under the responsibility of the Ministry of Health: treatment and care, prevention in healthcare setting, and epidemiology.



Mali



Technical Assistance for the decentralisation of treatment for HIV/AIDS in Segou, Mopti and Bamako regions

Key facts

- **Launch:** November 2012
- **Duration of project:** 3 years
- **Where we work:** Bamako, Mopti and Segou regions
- **Budget 2015 :** €300 000
- **Source of funding:** Global Fund Round 8 phase 2
- **Partners:** Unit for the fight against AIDS of the Ministry of Health and Public Hygiene (CSLS-MSHP), Regional Health Directorates of Bamako, Segou and Mopti and reference health centers in the corresponding localities.

The issues

Solthis has been working in partnership with the Ministry of Health in Mali since 2003. Since November 2009, Solthis has received a Global Fund grant for technical assistance in the decentralisation of treatment for HIV and the improvement of quality of care in Segou, Mopti and Bamako regions.

The UNDP is the main recipient of this grant, with the Ministry of Health's Unit for the Fight against AIDS of the Ministry of Health and Public Hygiene (CSLS-MSHP) being sub-recipient. Solthis implemented the project activities in co-operation with the Regional Health Directorates.

“The support by Solthis of health professionals on quality of care and on monitoring and evaluation enabled the region to have the best results when data was updated by the UNDP.”

Dr Guindo Ando B. Doctor of Infectious diseases, responsible for monitoring and evaluation of HIV activities at the RHD in Mopti.

Objectives

Overall Objective

Contribute to the reduction in morbidity and mortality linked to HIV and AIDS by moving towards universal access to prevention and treatment services and to quality care.

Specific Objectives

- Increase, diversify and improve availability of appropriate prevention services at national level, especially for vulnerable and at risk populations.
- Promote access to good quality ARV treatment throughout the country.
- Build national capacity for coordination, monitoring and evaluation.



Restitution workshop held in Mopti on november 15

Activities and results

Technical support from Solthis through clinical mentoring, training health personnel, particularly in provider-initiative testing, the purchase of materials and health equipment, the rehabilitation of premises, and the funding of data supervision activities, have enabled significant improvements in all the centres with support in the field of screening, prevention of mother to child transmission of HIV and the overall care for patients living with HIV.

This project's activities in 2015 have enabled:

- Support for 12 health centres to improve adult and paediatric care in Bamako and Mopti.
- Improvement in PMTCT services (Prevention of Transmission of HIV/AIDS from Mother to Child) in Bamako and Mopti.
- Organisation of 4 rounds of meetings of the therapeutic committee (medical staff) in Bamako, Mopti and Segou involving 140 medical personnel and institutional leaders.
- Training of 112 health workers on a range of topics including: adult and paediatric treatment for HIV, PMTCT, patient education and psycho-social care, operational research and monitoring by paramedics, under medical supervision, of HIV patients whose condition is stabilised.

End of project workshop on Solthis action in Mopti

This workshop, organised in November 2015 with all our partners, allowed us to showcase 2 striking outcomes of our support in this region:

- The number of patents recorded as on antiretroviral treatment increased by 47% between 2010 and 2015 despite the political and security situations.
- The level of testing for HIV amongst malnourished children has risen from 17% to 61% between 2013 and 2015.

With the grant from the Global Fund coming to a close, at the end of 2015, Solthis along with its Malian partners has also focused on the transfer of skills to local partners to sustain their achievements and ensure continuity in the actions undertaken:

- 2 centres of excellence were chosen in Mopti to run development courses for health workers in the field of HIV.
- Strengthening the coordination unit of the Regional Health Directorate of Mopti.
- In coordination with the Regional Health Directorate, identifying human resources needed to work in an advisory capacity with health professionals who may need this.

Outlook

In 2016, Solthis' support, under the new funding model of the Global Fund, translates into support of the CSLS-MSHP in its training, mentoring and post-training monitoring of care personnel working in PMTCT and in comprehensive care.


112
health workers trained in 2015


140
health personnel took part in medical staff meetings and workshops

In Mopti, the HIV testing rate for malnourished children rose from
17% to 61%
between 2013 and 2015.



Niger



Prevention and support in seeking treatment for sex workers and their clients in Niger

Key facts

- **Launch:** January 2015
- **Duration of project:** 1 year
- **Where we work:** Tillabéri and Agadez regions
- **Budget 2015:** €100,000
- **Source de funding:** World Bank and PSI
- **Partners:** CISLS (Intersectoral Coordination of the Fight against STI/HIV/AIDS); NGOs: Population Services International (PSI), Lafia Matassa and ANBEF

The issues

Sex workers, their clients, men who have sex with other men are some of the people most affected by HIV/AIDS in Niger. This project has enabled a reduction in cases of HIV amongst these key populations in Tillabéri and Agadez regions.

Solthis established this project in response to a call for a proposal from the CISLS, in consortium with the NGO PSI (leader) and Lafia Matassa and ANBEF, local organisations financed by the World Bank.

“Even if there are low levels of HIV prevalence in the general population, at risk groups have very high levels and need better care.”

Mathilde Corre, Solthis Head of Mission in Niger

Objectives

Increase the adoption of safer behaviour in these key populations through the provision of prevention services, support in obtaining appropriate treatment, care and socio-economic support.

Activities and results in 2015

Overall the consortium's actions on this project in 2015 in Tillabery and Agadez enabled:

- The organisation of educational discussion sessions with 37,863 sex workers.
- The distribution of 129,957 female and male condoms.
- The directing of 6,368 sex workers and their clients to health centres to be tested for sexually transmissible infections and HIV.
- The training of 20 members of self-help groups in community life and in the establishment of IGAs (income generating activities) and 10 IGA projects set up.

More specifically, Solthis has been involved in implementing training, establishing effective and efficient partnerships to support clients and sex workers in obtaining treatment and care. The objective was to facilitate the adoption of safer behaviour amongst these key populations and thus to reduce infection and the mortality rate.



Training peer educators in Tillabery

The activities conducted by Solthis focused on prevention, testing and developing the capacity of local stakeholders and enabled them to:

- Conduct preliminary studies with sex workers to pin point the needs and therefore the interventions to be undertaken and to identify community workers (peer educators) within the target groups.
- Train community mediators and peer educators.
- Train leaders and members of partner NGOs in working practices based on human rights and the fight against stigmatisation and discrimination.
- Hold educational workshops with several dozen bar tenders, restaurants, hotels and brothels, with 45 health workers from health facilities involved in the establishment of the project. These workshops were attended by around thirty media personalities with the aim of involving them in the implementation of the project.
- Produce an advertising feature which was then broadcast on national radio and television.



45
Health workers trained by
Solthis then involved in
appropriate care

3,366

Group education sessions
organised by the consortium



6,368

sex workers and 357 clients
directed to treatment
and care centres



Support with improvement of the information system for the management of logistics and pharmaceuticals

Key facts

- **Launch:** February 2015
- **Duration of project:** 18 months
- **Where we work:** Throughout the country
- **Budget 2015:** €100,000
- **Source de funding:** 5% Initiative – Canal 1
- **Partners:** Pharmacy Directorate (DPHL)



A Ministry of Health pharmacy manager using the software

The issues

Niger currently receives a subsidy from the Global Fund's Transitional Mechanism and New Funding Model. Despite the country's improvements, these past few years, in management of the procurement and supply of HIV/AIDS medication, there are still challenges ahead, including the collection and reporting of data from pharmacies in treatment centres to central level, as well as organisation and strengthening at central level for the analysis and use of this information. The needs analysis demonstrated the relevance

of acquiring a software tool to facilitate stock management and monitoring patients at treatment sites and at local, regional or national institutions. Lastly, pharmacies in the treatment centres need comprehensive management software for health products and patient monitoring to allow them to monitor both HIV patients and those with tuberculosis or, in the future, patients suffering from other diseases which require monitoring.

► Objectives

Improve the efficiency of the supply system by strengthening the pharmaceutical and logistics management information system.

The development and deployment of this software will:

► At the level of support sites:

- Improve stock control and monitoring consumption through a stock control system.
- Improve patient monitoring and the quality of care via a module for tracking dispensations and patient history.

► At the level of national institutions:

- Facilitate the collection and reporting of this data by collaborating on a multi-site hub for compilation and analysis.
- Automatically provide control panels to facilitate pilot projects. To show, for example, analysis of stock consumption, evaluation of availability and monitor the active queue for pharmacy, allowing the analysis of potential shortages and excess stock.
- Assist with the consolidation of projections and decision making.

► Finally, this software is intended to improve pharmaceutical management.

To this end, one of the functionalities of this software is to monitor patients in the pharmacy, to be able to monitor and record which patient receives which product and thus secure the pharmaceutical circuit. This functionality is of course linked to information tracked by Fuchia, the monitoring software installed by Solthis within the CASSIS project (pages 38-41).



Activities and results in 2015

We supported our national partners with drafting software specifications for stock control, the dispensing of medicines and the management of pharmaceutical information and logistics within the country.

We then assisted with the process of selecting the software in light of existing packages in this field. Next, Solthis supported its partners with monitoring the software development work on technical aspects of pharmaceuticals and the necessary adaptations at every stage in accordance with the specification. Solthis and its partners were continuously in touch with the software developer so that the final result met the national needs as closely as possible. Eight pilot locations were chosen for deployment and so that staff in charge of pharmaceutical stock control could be trained.

We also ensured that there was good central coordination with health programmes (NMCP National Malaria Control Programme, PNLT, CISLS, ULSS, ONPPC) and partners providing stock management (Save the Children, CRS...).

Outlook

This project will end in June 2016. The Solthis team will be involved in the preparation of training material for software users and supervisors. Training on using the software will also be organised for central stakeholders and those at the eight pilot locations.

An end of project workshop will make recommendations for the deployment of the software to other support sites in Niger.

“This software is a major opportunity to improve the management of medicines in Niger”

Issaka Sonde, Solthis Head of Project in Niger



Guinea



OPP-ERA: Improve monitoring of people living with HIV through access to viral load testing

Key facts

- **Launch:** February 2013
- **Duration of project:** 2 years (phase 1)
- **Where we work:** Throughout the country
- **Budget 2015:** €130,000
- **Source de funding:** Funded by UNI-TAID, implemented by a consortium of French partners: Expertise France, ANRS, Sidaction and Solthis in 4 countries.
In Guinea, Solthis is responsible for implementation. In 2015, the FBS and the City of Paris co-funded this project in Guinea.
- **Partners:** PNPSP – National Healthcare and STI/HIV/AIDS Prevention Programme, SE/CNLS – Executive Secretariat of the National Committee for the Fight against AIDS, DNPL: National Directorate of Pharmacy and Laboratories, LNSP: National Public Health Laboratory
CMT: Technical medical committee
Directorate of Donka National Hospital

The issues

In most countries with limited resources, monitoring of patients on antiretroviral therapy is based primarily on clinical examination and CD4 counts.

However, these tools are insufficient to identify and prevent cases of treatment failure. This limitation leads to moving on unnecessarily or too late to scarcer and more expensive second line treatments. The measuring of HIV viral load is necessary to ensure appropriate treatment.



Objectives

Project OPP-ERA's objective is to improve the monitoring of people living with HIV through free access to Viral Load (VL) testing. It also aims to open the VL technology market to new suppliers through the « Open Polyvalent Platforms (OPP) » model, and thus reduce the cost of the test and broaden access to this examination for infected patients.

Funded by Unitaid, project OPP-ERA was implemented by Expertise France, ANRS, Sidaction and Solthis in Burundi, Cameroon, Ivory Coast and Guinea.



“The results of the viral load test strengthen the support of PLWHA in terms of taking their medication, or in preventing any future failures that may impair the success of the treatment.”

Christine Rouzioux, Scientific Director of the OPP-ERA Programme

Activities and results in 2015

In Guinea, project OPP-ERA, established by Solthis, has, for the first time, introduced free access to VL testing in the public health system of Guinea. This continued during the Ebola crisis.

Two open platforms were installed and equipped from 2014:

- One at INSP (National Institute for Public Health) where Solthis renovated the molecular biology laboratory.
- The other at Donka University Hospital, the main site for care and treatment of patients living with HIV/AIDS (PLWHA), where Solthis has built and equipped a dedicated laboratory.

Training laboratory technicians to carry out viral load testing

Supporting clinicians in prescription of viral load testing

The Solthis team and PNPSP also mentored clinicians from the main treatment sites in Conakry. Since 2014 meetings and workshops had already enabled the training of prescribing clinicians in viral load. At the beginning of 2016, training aimed at over 50 prescribing clinicians enabled them to be educated both in the importance of prescribing this test, and also in how to interpret the results to both, strengthen compliance and / or modify treatment.

Outlook

The project is continuing in 2016 with the objective of offering viral load measuring on a wider scale and of achieving early diagnosis of infection in infants.

The use of these polyvalent platforms is also planned for the diagnosis of tuberculosis.

+ 6,500

viral load tests completed since the start of the project



74%

of patients monitored are in virological success

1

very sensitive technique to a threshold of 500 copies/ml (threshold adapted to WHO recommendations of less than 1000 copies/ml to define successful treatment)



Continuity of HIV care in the context of Ebola & infection and prevention control in hospitals

Key facts

- **Launch:** April 2015
- **Duration of project:** 9 months
- **Where we work:** Guinea
- **Budget 2015:** €330,000
- **Source de funding:** 5% Initiative
- **Partners:** GERES
- **Beneficiaries:**
 - PNPCSP – National Programme for Treatment and Prevention of STIs/ HIV/AIDS
 - SE/CNLS – Executive Secretariat of the National Committee for the Fight against AIDS
 - National Directorate for Hospitals and Care,
 - National Directorate for Hygiene, National Institute for Public Health
 - Regional, Prefectoral and Municipal offices,
 - Health facility staff,
 - Members of patient associations

The issues

Guinea, along with Sierra Leone and Liberia, was one of the three countries most affected by the Ebola epidemic. Apart from those infected, the Ebola epidemic disrupted the whole of the health system, affecting access to care for all populations.

Continuity of care for people living with HIV/AIDS, tuberculosis and malaria was particularly at risk: an increase in the number of people of whom we lost sight, health products out of stock, shortage of protective equipment against Ebola.

Objectives

Limit the impact of the Ebola epidemic on the continuity of care for HIV and tuberculosis in Guinea



Hospital hygiene training on a health care site

Activities and results in 2015

Continuation of care for patients

Solthis has worked towards the spacing out of follow-up appointments without any interruption of treatment and also for the support of carers to adapt the treatment of patients who have had their treatment interrupted. In order to get those patients of whom we have lost track, back in the care system, Solthis has developed a methodology to identify and find those of whom they lost sight, relying on the training of two health workers and two patients who are members of associations, to be responsible for the active search.

Strengthening elements of the health system

The strengthening translates into the collection and analysis of data at national and local level to measure the impact of the Ebola epidemic on the continuity of care for HIV and allow the national programme to better direct its actions. Pharmacists at treatment sites were also helped to manage their ARV stocks through the issuing of three month prescriptions. Finally, Solthis provided technical assistance to the Central Pharmacy of Guinea for the management of stocks of ARVs and to ensure availability of protective equipment in HIV and Tuberculosis units.

Safety of caregivers and patients in health facilities: training in hospital hygiene

In partnership with GERES (Study Group on the Exposure Risk of Care Providers), Solthis teams conducted a needs analysis on the prevention of infections in health facilities in 23 health centres. A plan for Prevention and Control of Infections (PCI), tailored to each facility, was developed including the training of a hygiene team and support workers in precautionary measures. Solthis followed up on the introduction of infection control measures.

Finally, the training of laboratory staff strengthened their capacity with regard to hygiene and the management of waste.

Scientific Research

The Solthis team based in Conakry helped to facilitate the implementation in the field of the JIKI trial, a clinical trial to test the effectiveness of Favipiravir on patients infected with Ebola. This trial was conducted by Inserm, Alima, MSF and the Red Cross.

As part of the data collected to analyse the impact of Ebola on the continuity of HIV care, Solthis conducted a study on attendance by patients

under ARV treatment at Donka National hospital in Conakry, with particular emphasis on the number of lost to follow-up patients. Following this analysis, an article was published in The Lancet on 11 April 2015 and a poster presented to the CROI 2015. (cf p.42).

“Six months after our 1st mission, I could see that our work had been effective.

The success was the result of continuous work by the Solthis Hygiene team.”

Jean-Baptiste Brunet, epidemiologist at GERES



Outlook

This crisis has highlighted the need to consider the reconstruction and improvement of health systems in the three countries affected by the Ebola virus. The WHO and a number of international bodies, including The

World Bank and the European Union, are supporting these countries through this process. In Guinea, Solthis is involved with working parties which are developing national plans for the reconstruction of health systems.



PIONG Operational Research Project

Management of opportunistic neurological infections in PLWHA in Guinea.

Key facts

- **Launch:** May 2014
- **Duration of project:** 18 months
- **Where we work:** Conakry
- **Budget 2015:** €50,000
- **Source de funding:** Bettencourt Schueller Foundation, Support for a Masters student in international health at ISPED/Bordeaux
- **Partners:** National Hospitals of Donka and Ignace Deen

The issues

Opportunistic infections of the central nervous system constitute a diagnostic and therapeutic challenge. A study conducted in 2010 showed that, given the limitations of the diagnostic tools, only 46% of people living with HIV/AIDS (PLWHA) with suspected opportunistic neurological infections were receiving treatment, with a mortality rate of 52%.

Objective

To study the impact of simple inexpensive diagnostic tools and training in the practice of lumbar punctures (on a dummy), to improve the management of neurological infections.

Results in 2015

This case study involved eight departments of both national hospitals in Conakry. The study looked at 77 patients. Despite the Ebola crisis, the number of lumbar punctures tripled and the use of rapid diagnostic tests (Cryptococcal Antigen and Urine LAM) have led to diagnosis in 89% of cases (confirmed in 52% and probable in 37%), against 50% previously. Cerebral tuberculosis, which was an unusual diagnosis in our 2010 study, proved to be the most common condition (38% of cases), just ahead of cerebral toxoplasmosis (35%).

Despite these encouraging results, mortality rates remain very high (42%), reflecting the severity of neurological damage and people presenting late to hospital. 62% of them had impaired consciousness, sometimes leading to coma, by the time they reached hospital.



94%

of patients started treatment for opportunistic infections against 46% previously



RAFAscreen Operational Research Project

Tuberculosis testing of PLWHA and diabetic patients.

Key facts

- **Launch:** March 2015
- **Duration of project:** 36 months (phase 1 of 18 months in progress)
- **Where we work:** Benin, Senegal and Guinea. Solthis is responsible for monitoring activities in Guinea
- **Budget 2015:** €10,000
- **Source de funding:** 5% Initiative, WHO/TDR (Programme for Research and Training in Tropical Diseases)
- **Partners in Guinea:**
 - Ignace Deen Pneumo-Phtisiology Department (co-ordinating partner in Guinea)
 - National reference Laboratory for Tuberculosis
 - National Programme for the Fight against AIDS
 - Diabetology Department of Donka hospital

The issues

Tuberculosis remains a major challenge for public health, especially in Sub Saharan Africa. People living with HIV/AIDS (PLWHA) and other people like diabetics are at high risk of developing this disease, yet they are not adequately screened.



Outlook

At the end of the first phase, the best screening algorithms will be implemented in pilot health centres. The project provides for an operations research capacity-building element for local teams which will be provided by LSHTM, WHO/TDR and Solthis.

Objective

Improve tuberculosis testing for patients living with HIV and diabetic patients.

Results in 2015

Solthis was involved with the launch of the project (steering committee in Cotonou, opening the research facility in Conakry). In November, Solthis organised training on study procedures for research teams comprising 32 people from the outpatient treatment centre and the diabetological service of Donka and the anti-tuberculosis centre of la Carrière. Almost 1,000 patients have already been recruited in Guinea. In each country, the project aims to include 3,000 patients of whom 1,000 PLWHA and 2,000 diabetics. Solthis is also responsible for quality control of the data collected.



948

patients recruited in Guinea:
468 HIV patients
and 480 diabetic patients



32

caregivers trained in the research
procedures of this study



Improvement in HIV care for pregnant women and children in Conakry

Key facts

- **Launch:** 2013
- **End of project:** 2015
- **Where we work:** Conakry, Donka and Ignace Deen University Hospitals
- **Budget 2015:** €140,000
- **Source de funding:** City of Paris, Bettencourt Schueller Foundation
- **Partners:** PNPSP – National Programme for Treatment and Prevention of STIs/HIV/AIDS
- **Beneficiaries:**
Caregivers in maternity and paediatric units.
Pregnant women and infants exposed to HIV.

The issues

A minority of women have access to HIV testing during pregnancy or childbirth. Therefore they cannot benefit from treatment to reduce maternal-foetal transmission of HIV. Furthermore, diagnosis of HIV infection in children is rarely performed.



► Objectives

To improve HIV testing and access to treatment for pregnant women and children.

In 2013, Solthis began a project with PNPSP, a pilot remedial project on Prevention of Transmission of HIV from Mother to Child (PMTCT) in the two largest maternity units in Conakry at the University Hospitals of Ignace Deen and Donka. This was to systematise testing at the time of childbirth, to provide treatment for all infected women and to improve the link between maternity and paediatric HIV departments for monitoring infants exposed to HIV.

At the same time, Solthis carried out activities to improve HIV testing for children in hospital and for malnourished children in addition to medical care for children infected with HIV.

“Mothers are very keen to know the HIV status of their child as early as 6 weeks after birth and that has been made possible through the PMTCT project set up by Solthis.”

A general practitioner in the paediatric department at Ignace Deen Hospital

Activities and results in 2015

childbirth. 936 were HIV positive and 82% were given antiretroviral therapy to prevent maternal-fœtal transmission.

In 2015 at the national maternity hospital in Donka, 106 women treated with antiretroviral therapy in the context of PMTCT, benefited from an HIV-1 viral load (VL) with an undetectable VL. In 2015, Solthis continued to support maternity wards and paediatric departments in both Donka and Ignace Deen national hospitals. Despite the Ebola health crisis, HIV testing continued. So, almost 400 children benefited from HIV testing at the Ignace

Deen national hospital and 14% of them were given antiretroviral treatment. Otherwise, Solthis continued its capacity building activities with:

- The initial training of 48 healthcare personnel and the provision of tools for testing and management of paediatric HIV.
- The organisation of 2 exchange workshops with 28 health professionals on the circuit and support of pregnant or breastfeeding women from the PMTCT project and their babies.
- Weekly mentoring of the maternity clinician on the prescription and interpretation of the VL test in women on the PMTCT programme.
- The organisation of practical training at the INSE laboratory on filter paper sampling used for diagnosis of HIV in children by PCR.



106

women in the maternity department at Donka had HIV-1 viral load testing under the PMTCT project.



400

children had HIV testing at the Ignace Deen national hospital and 14% of them were given ARV treatment.



48

maternity and paediatric department healthcare personnel received initial training on testing and treatment of paediatric HIV.

Outlook

In 2016, Solthis began an operational research project where the objective was to reduce maternal-fœtal transmission of HIV and improve the survival of children born to mothers infected with HIV by testing them at birth and treating them early. This project

known as DIAVINA - DIA-gnostic Virologique et Initiation à la Naissance – supported by the ANRS and City of Paris, intends to include 300 pairs of mothers and children in the study sample from the maternity and paediatric departments at Ignace Deen.



Sierra Leone



Key facts

- **Launch:** January 2015
- **Duration of project:** 1 year
- **Where we work:** Freetown
- **Budget 2015:** €160,000
- **Source de funding:** 5% Initiative, Fondation de France, Fondation JM Bruneau, Fondation Enfants d'Urgence
- **Partners:**
 - NACP (National AIDS Control Programme)
 - NAS (National HIV/AIDS Secretariat),
 - Nethips (Network of HIV Positives in Sierra Leone)

Continuity of HIV care in the context of Ebola

The issues

Sierra Leone was one of the three countries most affected by Ebola in 2015. At the end of 2014, continuity of care for people living with HIV/AIDS was particularly at risk: the risk of a national shortage of ARV drugs for children and adults, discontinuity of paediatric care, decline in attendance at health centres by patients and absenteeism among nursing staff.

Objectives

Limit the impact of the Ebola epidemic on the continuity of care for HIV.

Activities and results in 2015

Ensure the safety of healthcare workers and patients in 9 health centres in Freetown

Solthis has provided on the spot training and monitoring for 88 HIV health unit workers in hygiene and preventive measures. Solthis provided technical assistance to the National Programme to guarantee availability of protective equipment in these HIV units.

Reintegrate the lost to follow-up patients into the treatment circuit

Solthis provided technical assistance and support to find patients who did not attend their last appointment. Solthis also supported NAS in a global analysis of active file data to determine the impact of the epidemic in terms of the 'lost' and thus prioritise emergency action.

Maintenance of continuity of care

Guarantee the continued availability of ARV treatment for children and adults

Support for pharmacists on-site

In 2015, Solthis teams in Sierra Leone supported a total of 30 pharmacists and caregivers to improve stock control and prevent breaks in treatment. In October 2015 a 4-day training was delivered to 17 caregivers in ARV pharmacology, storage and control of stocks, logistics management information system, analysis of distribution and consumption, quantification and forecasting.

“Training in prevention and control of infections and follow up provided by Solthis has had a great impact during the Ebola crisis in our hospital.”

Caregiver at Rokupa hospital

National Support

Solthis provided technical assistance to the Logistic Unit of NAS and helped with setting up a distribution plan for healthcare facilities throughout the country.

Solthis provided support for needs analysis, placing and delivery of emergency orders for HIV medication in the context of a supply chain that was undermined by the epidemic. Solthis also assisted with obtaining the release of a loan of paediatric HIV medicines on behalf of Guinea.

Managing treatment interruptions and adapting healthcare provision

Solthis produced 2 posters dealing with compliance, which were distributed to all the 9 sites we supported. We trained 53 caregivers in managing treatment interruptions and adherence. In addition, 25 community advisors were trained in compliance and the use of these posters.

We also trained 16 nurses (caregivers), heads of department or prescribing physicians in the management of treatment failure, which helped us to help them in a situation where a large number of patients had temporarily discontinued their treatment. We also conducted 13 mentoring sessions on site, on treatment failure and switching to second-line treatment.

Lastly, 3 training sessions were organised in the region to educate 82 traditional midwives on the importance of referring pregnant women to a hospital to give birth within the context of the Ebola virus epidemic.

Analysis of the impact of Ebola on continuity of HIV care

Qualitative and quantitative data was collected from the sites to evaluate the impact of Ebola on continuity of care and to document treatment interruptions, their causes and consequences.



Outlook

Solthis is actively involved in Sierra Leone with the WHO, the World Bank and the European Union in working groups on rebuilding health systems in a post Ebola context.



Sierra Leone



Supporting the National Programme for HIV treatment in 10 health centres in Freetown

Key facts

- **Launch:** January 2015
- **Duration of project:** 1 year
- **Where we work:** Freetown
- **Budget 2015:** €290,000
- **Source de funding:** Bettencourt Schueller Foundation
- **Partners:**
 - NACP (National AIDS Control Programme)
 - NAS (National HIV/AIDS Secretariat)
 - Nethips, (Network of HIV Positives in Sierra Leone)



Clinical mentoring during a screening session of pregnant women in the maternity department of PCMH

The issues

In Sierra Leone, the HIV/AIDS epidemic affects 1.6% of adults, but large disparities persist, with women in urban environments more affected, and those people considered to be most at risk of infection, like sex workers or men who have sexual relations with men.

The Ebola health crisis seriously affected the care and treatment of tens of thousands of people living with HIV/AIDS (PLWHA) in 2015.

► Objectives

Sustainably improve access to and the quality of HIV treatment and care in the country.

Since 2011 Solthis has been working to:

- Improve access to treatment with emphasis on children and prevention of mother to child transmission (PMTCT)
- Improve availability of treatment at national level
- Improve the quality of HIV treatment and care in health centres by improving coordination between paediatric, PMTCT and HIV services
- Improve data collection tools

Activities and results in 2015

Support for HIV/TB coordinating bodies

Sierra Leone has developed a national strategic plan for the fight against HIV/AIDS. Solthis has signed up, complementing their project on continuity of care in an Ebola context, to this national framework, providing support both nationally and locally.

We also provided technical support with drafting the NAS 2016-2020 national strategic HIV plan, and for developing the National Framework for action on Tuberculosis, and to encourage deeper integration of HIV and TB in the general medical setting.

We also supported these national HIV and Tuberculosis partners with the submission of a plan to the Global Fund for the reprogramming of ongoing grants because of the Ebola situation, which would allow continuity of care for people in the country who are living with HIV and Tuberculosis.

We supported the PLWHA Nethips network community observatory project on access to treatment by participating in the review of data produced and building the capacity of the 48 people working on this study.

Support for national supply chain management

At national level, Solthis supported the logistics unit of NAS in a situation where there is serious pressure on stocks:

- During the Ebola epidemic, our teams supported NAS with the implementation of a distribution plan for health facilities in Freetown and other districts, to guarantee the continued availability of ARV treatment (see pages 32-33 for our other actions).
- We provided technical support for quantifying national needs and for the development of a procurement and stock management plan, as part of the reprogramming of the 2016/2017 Global Fund grant.
- We took part in a workshop, organised by the Ministry of Health of Sierra Leone and the Global Fund on structuring the NPPU (National Pharmaceutical Procurement Unit) for national procurement and stock management.

In the regions, we supported the organisation of quarterly meetings between regional pharmacists and the central level to discuss the respective practices and difficulties in managing orders and reports linked to HIV medicines and inputs and to seek solutions together.

Support for health centres

The capacity building of healthcare teams at the 10 sites we supported in 2015, as well as training, has also led to clinical mentoring and following this, the quality improvement process, already begun with Solthis in previous years.

This capacity building has, in particular, led to an improvement in psychosocial support and counselling by these caregivers. Their clinical skills, especially for the identification and management of opportunistic infections have also been strengthened, thereby improving care for PLWHA.

In terms of pharmacy, the skills of new pharmacists (particularly in Rokupa, Connaught, PCMH and Lumley centres) were enhanced through on-going mentoring, in particular for monitoring HIV products.

Sierra Leone

Support for professionals responsible for data collection and the Health Information System

At national level, we provided technical support for integration of HIV data into the DHIS2 software. We also took part in the HIS technical group on the preparation of the HIV programme on the "Global AIDS Response Progress Report" with NAS, the NACP and the UNAIDS. We also contributed to data collection for the IBSS 2013 report. At site level, in 2015 we followed up on training provided in 2014 to professionals responsible for data collection on the new NACP collection tools, and we provided technical and logistical assistance for the implementation of the Open MRS software at Connaught hospital, in particular supporting the reorganisation of patient data entry and the restoration of buildings.

Outlook

In 2016, Solthis continued to support its national partners, especially through its EMPOWER project financed by the AFD (French Development Agency), City of Paris and the Bettencourt Schueller Foundation. This project strives for the empowerment of patients to obtain quality care for HIV.



48

caregivers trained on the challenges of paediatric supervision

0

stock shortages of 1st line ARVs at national level



79

Health professionals trained in care and PMTCT



Vaccination at birth of babies born to mothers infected with hepatitis B

Operational research on viral hepatitis in pregnant women and people living with HIV/AIDS

Today in Sierra Leone, pregnant women and people living with HIV/AIDS (PWLHA) are not systematically tested for Hepatitis B and C and there is little epidemiological data available on this subject. In partnership with the Sierra Leonean Ministry of Health, Solthis conducted a study intended to establish the prevalence of Hepatitis B and C amongst these two target groups

The study, completed in September 2015, enabled us to test 200 pregnant women at the «Princess Christian Maternity Hospital» and 300 adults with HIV at «Connaught Hospital». The incidence of hepatitis B was 9 % amongst pregnant women and 8 % amongst PWLHA. The incidence of hepatitis C was 0.5 % amongst pregnant women and 0.3 % amongst PWLHA.

Following the test results, PWLHA infected with hepatitis B had their antiretroviral treatment modified to include Tenofovir which is effective against HIV and the hepatitis B viruses.

For pregnant women infected with hepatitis B, who were tested as part of this study, their babies were vaccinated at birth against hepatitis B to avoid transmission of the virus. This approach, which is part of WHO recommendations, aims to prevent transmission of hepatitis B from mother to child and the development of chronic hepatitis B, which is a significant cause of mortality (cirrhosis and cancer of the liver) in adults who were infected at birth.



TUNISIA



Technical assistance for procurement and supply management under the Global Fund HIV grant

Key facts

- **Date of completion:** October - November 2015
- **Budget:** €15,000
- **Source of funding:** 5% Initiative - Canal 1
- **Partners:** National Office of family and population (ONFP)

“We issued practical recommendations to improve and secure the procurement and storage of HIV inputs.”

Coline Koog, consultant pharmacist from Solthis's expert network

The issues

As part of the Global Fund's new funding model, Tunisia had to submit an HIV concept note by 1st January 2016 for a period of 3 years. As part of finalising the contract with the Global Fund, the primary recipient, ONFP, requested technical assistance from 5% Initiative with quantifying national needs and drafting the associated PSM documents (management of procurement and stocks). With their experience in this area, Solthis was chosen as the operator to carry out this technical assistance.

Activities and results in 2015

Assessment of the system for management of procurement and stocks

The mission enabled us to carry out an assessment of the PSM system, to understand the supply chain and to highlight weaknesses in the health information system. We issued recommendations to improve supply chain performance.

Estimation of national needs for different categories of product

Despite the difficulties of data collection, we were able to quantify antiretrovirals and health products for the treatment of HIV/AIDS, opportunistic infections and co-infections, as well as reagents and consumables for biological and virological monitoring for the four groups of target patients (Tunisian children and adults, migrant children and adults).

Plan of Action and budget for the Global Fund's new funding model

We went on to devise the plan of action and budget, and activities were included in the plan of action to improve the performance of PSM.

Objectives

Provide support for quantifying and devising a procurement plan of inputs for the fight against HIV/AIDS from the HIV grant, in line with the requirements of the Global Fund's new funding model.



Guinea / Niger



Project CASSIS : Improve access to HIV care and strengthen the health information system

Key facts

- **Launch:** 2013
- **Duration of project:** 3 years
- **Where we work:** Guinea and Niger
- **Budget 2015:** €2.2 million
- **Source de funding:** 5% Initiative, City of Paris, Bettencourt Schueller Foundation
- **Partners:**
 - In Guinea:** Executive Secretariat of the National Committee for the Fight against AIDS (SE/CNLS) and National Programme for Treatment and Prevention of STIs/HIV/AIDS (PNPCSP)
 - In Niger:** Intersectoral Coordination of the Fight against STI/HIV/AIDS (CISLS) an Intersectoral Health Unit for the Fight against AIDS (ULSS).
- **UNAIDS** Guinea and Niger

The issues

Niger and Guinea receive grants from the Global Fund to fund their national programmes for the fight against HIV/AIDS but despite their voluntary commitment and the progress that has been made in these countries, access to treatment remains inadequate. In Niger and in Guinea only 1/3 of people living with HIV/AIDS have access to antiretroviral treatment.

Objectives

Build an accessible, efficient and sustainable medical treatment system for HIV/AIDS

Project CASSIS (Capacity strengthening for HIV Care and Health Information System) is involved with capacity building in two areas:

- **Access to care:** improving both the decentralisation of care and the quality of treatment and care of patients by strengthening the capacities of caregivers and optimising the organisation of care.
- **The Health Information System:** strengthening health data collection and reporting systems at the sites, at intermediary and central levels, as well as the capacity for strategic analysis of this data to enable effective national management.

Guinea



Mission to support data management at the Timbi Madina centre (Mamou region)

Activities and results in 2015

Access to healthcare and quality of care

In 2015 Solthis focused on strengthening the capacities of healthcare staff at care and treatment sites:

- Refresher training to maintain the skills of nursing staff, organised by and PNPCSP, delivered by national instructors.
- Continued support and clinical and pharmaceutical mentoring to enhance skills on issues such as the difficulty of getting started on ARVs without a CD4 count, or for co-infected patients, quantification of HIV inputs, drug interactions or even internal quality control of the laboratories.
- Organisation of an inter-site meeting at Kindia in August with those responsible for PMTCT and dispensers from the sites, in collaboration with teams from central and prefectural management, to share experiences, especially with regard to prescription and dispensing, and management and procurement of ARV stocks.

Improve availability and use of data from HIV programmes in Guinea

At site level: support for the computerisation and consolidation of data collection and analysis

Solthis supported staff responsible for data collection both with filling in records, physical archiving and transmission of reports, but also to

strengthen their analytical capabilities for the calculation of indicators. Solthis supported the computerisation of data collection by installing FUGEN software at five sites. This software is an automated tool for calculating indicators on the monthly care and treatment report from the FUCHIA software database.

At intermediate level: strengthening the supervision of data collection, monitoring and analysis

We assisted those responsible for statistics from regional health directorates, to improve their skills on the use of supervision checklists on site, on the analysis of data and reports, the examination of these data and making recommendations, to ensure the connection between the treatment and care sites and the PNPCSP.

At central level: strengthening the supervision of data collection, feedback and administration of the health information system

We supported the PNPCSP to supervise collection, reporting and archiving of data in regional and prefectural directorates and at the sites. Since 2014, Solthis has developed AGIR.VIH software for archiving, management and analysis of reports on treatment and care of HIV. It was completed in 2015 and a training session on its use was organised for PNPCSP, the health directorate for Conakry city and the health authorities of the Conakry communes.

An annual feedback workshop, bringing together stakeholders in the health information systems, who work at different levels of the health >



system, was organised in December 2015 by Solthis and the PNPSP. This annual workshop was a forum during which stakeholders from care and treatment sites presented the results of their activities and shared their experiences.

In August 2015, we organised a workshop with the care and treatment services at Ignace Deen hospital, on difficulties encountered, which resulted in recommendations for the regular production of monthly reports and the consolidation of the active file of patients on ARVs in the services.

“I have improved my daily routines, networked with other sites and benefited from their expertise through discussion meetings initiated by Solthis; I also took part in several training courses as a trainer”

Dr Djéli Sira KOUYATE, Pharmacist, focal point for the Matoto health center



Activities and results in 2015

At health facility level, we achieved the following:

Upgrading 16 health facilities: kitting out and donation of equipment, setting up functional circuits for medication and laboratory tests.

Strengthening the capacities of healthcare staff by:

- On-site visits and clinical mentoring, in conjunction with national sponsors, to improve the practices of healthcare professionals at the sites, in a structured quality improvement programme around key indicators.
- The organisation of 4 clinical staff meetings in the capital and in the regions.

Strengthening data management by:

- Consolidation of data collection circuits at the sites.
- Training and support of site staff in analysing the data produced.

At regional level we provided support for Regional Health Authorities to:

- Strengthen management teams through formative supervision.
- Establish regional sponsors (experienced doctors and pharmacists from regional hospitals) to buddy new sites just starting HIV treatment and care.
- Strengthen the supervision of data collection, recording and analysis.

At national level, we have worked with the Ministry of Public Health to support:

- The organisation of joint support missions at the sites.
- The implementation of training for data handlers on site and the management and use of data for the strategic management of the national programme for the fight against HIV at national level.
- The integration of HIV data in the National Health Information System.
- The establishment of a national pool of trainers and the creation of a national training plan and the development of training modules updated with international recommendations and national protocols.



Support in Loga District Hospital laboratory (Dosso region)

16
treatment and
care sites supported

232
health professionals trained and
326 received refresher training

79
data handlers and
managers supported

37
sites supported with
health information system



Tri-ARV board game devised by Solthis

Strengthen medical skills through play and improve the carer- patient relationship

In addition to the CASSIS project in Niger, with funding from SI-DACTION and the Bettencourt Schueller Foundation, Solthis developed a specific section on building the capacity of paramedics from the district hospitals in Tillabéri and Dosso regions, to improve the treatment and care of HIV/AIDS and relieve pressure on hospitals in Niamey.

Based on Trivial Pursuit, Solthis developed a prototype game intended to test and consolidate the knowledge of paramedics on their medical and pharmaceutical skills. This innovative educational tool in particular allows their training and empowerment with regard to prescription of antiretroviral therapy.

We also developed a specific training module on the carer-patient relationship, in order to improve the interpersonal skills of healthcare providers vis-à-vis patients, acting upon behaviours, listening to patients and formulating questions.

SCIENTIFIC AND ACADEMIC REFLEXION

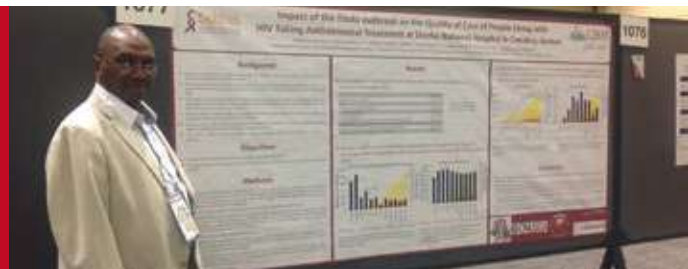
Created by university doctors, supported by a scientific group of experts of public health and development, Solthis develops numerous partnerships with research and public health institutes, university hospitals, universities and faculties, networks of partners, especially African, and with other humanitarian organizations.

Solthis thanks to its multidisciplinary expertise, supports operational research in several ways: by contributing to the reflection of field actors, helping to identify new solutions based on scientific evidence, supporting the dissemination of research projects' results to policy

makers to ensure that the results are taken into account in practice, but also by promoting the results of research projects and their authors in international scientific conferences or by publishing in specialized journals.

Solthis teams also teach in several masters and medical, public health and international affairs universities. Our experts are also regularly invited to speak at specialized conferences and symposia

Operational research: our scientific communications in 2015



Légende photo: Professor Cissé presenting the poster during the 2015 CROI.

CROI 2015 - 22nd Conference on retroviruses and opportunistic infections – Seattle. 23 to 26 February 2015.

Jacques Ndawinz from Solthis and Professor Cissé from the Donka national hospital presented their poster on the impact of the Ebola epidemics on the continuity of care for PLWHIV, under ARV treatment at Donka National hospital in Conakry (Guinea). During the CROI 2015 were also presented the preliminary results of the JIKI trial, to which Solthis contributes by facilitating its implementation in the field thanks to our team in Conakry.



THE LANCET: The medical journal The Lancet, published on 11 April 2015 the results of a study conducted by Solthis in collaboration with its Guinean partners, the Donka National Hospital in Conakry and the PNPCSP, on the effect of the Ebola epidemic on the continuum of HIV care in Conakry. This Correspondence is entitled "Prevention of HIV spread during the Ebola outbreak".

Other publications



Médecine et Santé Tropicales, 2015, Volume 25, number 3
Editorial from Louis Pizarro on health professionals' role in the international aid organization.



Transversal – March/April 2015
The review Transversal edited by Si-daction published an article on the access to second and third line ARV treatment: a key factor to the success of programs to fight against AIDS, in which Etienne Guillard is interviewed.

Interventions and classes

- 📍 **Classes at the Master's in International Affairs programme at Sciences Po – Paris, January to May 2015.** Louis Pizarro, Chief Executive Officer, taught a class on “Non-State actors and Global Health” to Master's students.
- 📍 **Classes at the Master's in international cooperation, humanitarian action and policies development at University Paris I Pantheon-Sorbonne – Paris, march 2015.** Louis Pizarro, taught a class on “Health NGOs and evaluation strategies”.
- 📍 **Workshop – Public Health Master's at Pasteur/CNAM in November 2015.** Louis Pizarro organised a workshop day on HIV management and issues linked to development to master's students.
- 📍 **Workshop - ISPED Master's in Public Health – Bordeaux, November 2015.** Louis Pizarro organised a workshop day on NGOs and public health issues.
- 📍 **Participation at the ISPED Master's in Public Health – Bordeaux, March 2015.** Every year Solthis gives a presentation for the ISPED Master's in Public Health. In 2015, Etienne Guillard ensured the coordination and led classes in the teaching Unit “Medicines and health products in limited resources settings”.
- 📍 **Classes at the University Diploma Essential and Humanitarian Pharmacy at the Caen University, Faculty of Pharmacy, September 2015.** Etienne Guillard taught during the 2 teaching modules on “Pharmaceutical issues in the fight against HIV/AIDS” and “Health systems, their components and their strengthening”.
- 📍 **Participation at the Forum of pharmacy jobs at the University Paris Sud, Faculty of Pharmacy, September 2015.** Etienne Guillard spoke on the profession of international public health, humanitarian and development pharmacist.
- 📍 **Participation at the Francophone seminar UAEM in Bordeaux, October 2015.** Etienne Guillard presented during the inaugural conference the theme on challenges to medicines and health products' access in limited resources settings.
- 📍 **Classes on biostatistics at the Faculty of Medicine of Pierre and Marie Curie University, Pitié-Salpêtrière site. January to March 2015.** Jacques Ndawinz, Health Information Systems Manager taught a class on biostatistics to health students.
- 📍 **Participation during the opening of the doctoral school 393 Pierre Louis of public health in Saint-Malo on October 20th 2015.** Jacques Ndawinz intervenes during the epidemiology and biomedical data sciences session to present the study on Ebola epidemics impact on the continuity of care for patients living with HIV in Guinea.

OUR ACADEMIC, SCIENTIFIC AND ASSOCIATIVE PARTNERS

Solthis is dedicated to developing multidisciplinary partnerships in order to take into account the many dimensions of public health issues. This can be seen through collaboration with actors from different backgrounds: medical, anthropological, economic, political and community actors.

Academic and scientific partners

- 🕒 **Pitié-Salpêtrière, Necker and Bichat University Hospital Centres in Paris, and in Bordeaux:** collaboration on operational research projects, internships
- 🕒 **Pasteur Institute in Paris** (Epidemiological Unit for Emerging Diseases): operational research project support
- 🕒 **PARIS I Sorbonne:** teaching at the Master and collaborative work on research projects
- 🕒 **ISPED** (Public Health, Epidemiology and Development Institute in Bordeaux): presentations within the framework of the ISPED masters, student internships in the field
- 🕒 **ANRS** (National Agency for HIV and Viral Hepatitis Research)
- 🕒 **RESAPSI** African Network ensuring the medical management of people living with HIV/Aids): participation in RESAPSI workshops
- 🕒 **Sciences Po** (Institute of Political Study in Paris): intervention within the framework of the Masters of International Affairs, student internships at headquarters and in the field, partnership with the African section of the Alumni
- 🕒 **IMEA** (Institute of Medicine and Applied Epidemiology): presentation to the IMEA DISs, student management
- 🕒 **RAF-VIH** (African Network for HIV training): interventions within the framework of DIUs of Ouagadougou on HIV management in sub-Saharan Africa on testing, PMTCT, information system and pharmacies
- 🕒 **LASDEL** (Laboratory of study and research on social dynamics and local development): socio-anthropological research conducted using surveys
- 🕒 **Pharmacy University of Chatenay-Malabry:** teaching for the Humanitarian Pharmacy module
- 🕒 **Caen University:** presentation for the Humanitarian Pharmacy Degree
- 🕒 **GERES** (Study group on risk exposure of health workers)
- 🕒 **Miseli** (research and training association on local dynamics' anthropology)
- 🕒 **EHESP** (School of Public health): students internships
- 🕒 **AVIESAN Sud** Francophone network for NTD (neglected tropical diseases) and coordinated tuberculosis action
- 🕒 **ONUSIDA/JURTA:** Joint UN Regional Team on Aids for West and Central Africa. Solthis participates in meetings on questions concerning technical assistance, capacity building, etc



Our annual scientific conference was held in January 2016 at the Pitié-Salpêtrière Hospital.

Associative partners



Solthis is a member of this international solidarity organizations' platform. Since December 2012, Solthis is the leader of the Health Commission (see Advocacy page 45).



This Health Collective has been founded in 2015 by 8 international solidarity organisations: Action contre la Faim, Equipop, Global health advocates, Médecins du Monde, Oxfam France, The Planning Familial, Sidaction and Solthis to ask France to keep its financial and political commitments to global health (see Advocacy page 45).



Elsa platform

Solthis has become a member in 2015 of the ELSA (Together Let's fight against AIDS in Africa) Platform, a consortium of French associations involved in the fight against HIV/AIDS: Sidaction, Le Planning familial, SIS réseau, Solidarité SIDA and Solthis. More than 80 African community based associations are partners of the ELSA platform.



Our other partners

- ◊ REMED
- ◊ VIH.org
- ◊ Crips
- ◊ MSF
- ◊ Les Amis du Fonds mondial Europe
- ◊ Coalition +
- ◊ ONE
- ◊ ENDA SANTE

ADVOCACY

Health is a right for all

Thanks to its dual focus on scientific research and fieldwork, over a number of years Solthis has developed advocacy expertise in three key areas:

- 🕒 **Defending equal access to healthcare for all.**
- 🕒 **Evolving care practices and policies, particularly for HIV/AIDS.**
- 🕒 **Participating in improving international aid systems (funding and technical assistance) to match the realities in the field.**

Solthis forms a link between stakeholders in the field and international decision makers to improve information flow and existing financial and technical partnership practices. Solthis also places significant weight on disseminating scientific literature and building international networks.

Our lobbying is evidence-based, drawn from identified and documented facts. It is carried out in partnership with other partners and organisations.

On the ground, Solthis' teams develop advocacy campaigns alongside national partners and patient associations, in particular around issues relating to access to care.

In France, Solthis leads the Health Commission of Coordination Sud (a platform of French NGOs) and works with French associations to promote international health and solidarity, as well as institutions and global organisations such as the Ministry of Foreign Affairs and International Development, UNAIDS and the Global Fund.

Advocacy Campaigns in 2015

Joint campaigning in France

This focused on challenging Government to maintain funding related to international health programmes.

In 2015, Solthis continued its role as head of the Health Commission of Coordination Sud, a role taken on in September 2012.

In 2015, Solthis worked with 7 other international solidarity organisations in the creation of "Health Collective 2015" (Collectif Santé 2015) with a common objective: to work together to ensure global health remains a priority for French development policy.

It also mobilised other NGOs to support an increase in public aid for development in the 2016 Finance Bill.



NGOs mobilization in favour of a French ODA's increase in the 2016 finance bill



Infography from the Health Collective 2015



Robin Hood campaign for a European tax on financial transactions. President Hollande presented with a petition of 1 million signatures.

Public stances

- ❏ **Disappointment at the financing conference in Addis-Ababa: adoption of a programme of inaction!** - Coordination Sud press release on 17 July 2015 echoed by Solthis.
- ❏ **France dropped its contribution to the global health budget by 15%!** – Press release published on 29 July 2015 by the Health Collective 2015 focused on the cuts announced in the budget for global health programmes.
- ❏ **15 years to improve global health, it's the moment of truth!** - Article published by the Health Collective in the Huffington Post on 25 September 2015 to mark the opening in New York of the United Nations summit on sustainable development and post 2015, calling on France to assume its responsibilities.
- ❏ **COP 21: the time to act is now!** - Article published in Libération newspaper on 10 December 2015 - Solthis co-signed this article with a number of NGOs calling for innovative financing such as a tax on financial transactions being used for climate projects, global health, and international solidarity programmes.

NGOs working on development, climate and health issues meet President François Hollande

On September 12, 2015 Solthis participated with other international NGOs in a meeting at the Elysee Palace with President François Hollande on development issues in preparation for the UN General Assembly in late September and the COP21 in Paris



Solthis highlighted France's global health commitments pledged to the Global Fund, UNICEF and Gavi and asked for a renewal of France's commitment to mother and child health, sexual and reproductive health, the fight against pandemics and more broadly requested an increase in public aid for French official development assistance (ODA) to meet the commitment of 0.7% of GNI allocated to ODA including 0.1% devoted to Health ODA. Solthis spoke as a member of the Health Collective 2015 and as the leader of the Health Commission of Coordination Sud.

At this meeting, the President of the Republic was also presented with a petition of 1 million signatures in the context of the Robin Wood campaign for a European tax on financial transactions, which Solthis worked on with several other NGOs.

Global Fund advocacy

At the end of 2014, Solthis published a report entitled *Managing Risk in Fragile States: Putting Health first!* Optimising the Efficiency of Global Fund Grants, which notably included 6 case studies and 30 recommendations.

Funding from the Charities Aid Foundation has enabled Solthis to have a dedicated staff member for one year to drive evidence based advocacy drawn from difficulties experienced on the ground during the implementation of the Global Fund grant.

Widely disseminated at the November 2014 Global Fund AGM, it garnered a lot of interest from both Northern and Southern NGOs, and was picked up by a number of media outlets.

In 2015, Solthis continued the report's dissemination to multiple stakeholders, including MAEDI (French Ministry for Foreign Affairs), 5% Initiative, partner associations such as the Elsa Platform, Coordination Sud and Res-améd so that they could digest the specific recommendations contained therein.

At the beginning of April 2015, Solthis was invited to present the report by

the Center for Global Development at a workshop organised at the University of Berkeley in San Francisco entitled 'Innovative Grantmaking Designs'.

In 2015, the Global Fund undertook the revision of the framework for its 2017/2022 strategy, adopted in November 2015. In order to develop the outline of this policy framework, the Global Fund's partners were consulted throughout 2015. Solthis participated the group of experts mobilized to develop the "Challenging Operating Environment Strategy", defending in particular the need to relax financial risk management, access to funding and implementation of grants in fragile states.





FINANCIAL REPORT

SIGNIFICANT FACTS 2015

Solthis is a non profit organisation, recognised to be of public utility in accordance with the 1901 law. Since August 2015 Solthis has reached out to the generosity of the general public as part of its strategy to diversify its funding sources.

For the 2015 financial year, the association approved a budget of 3.9 million Euros and a net income of 2,700 Euros.

The association's funds totalled 328,300 Euros at 31 December 2015.

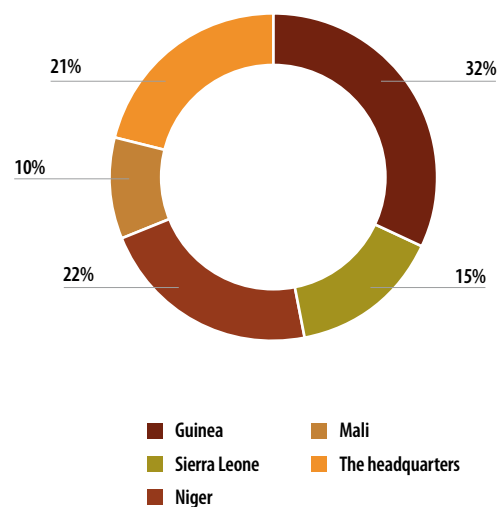


Budget of
3.9 millions euros

EXPENDITURE

2015 was defined by the signing of major contracts and a greater diversification of funding sources, notably the World Bank funded project "Prevention, treatment and support for sex workers and their clients in Niger". Solthis strengthened its presence as a key player in the area of technical assistance, with technical assistance projects in Tunisia in 2015 to quantify national needs and the development of management documents and procurement of associated stock, financed by Channel 1 of 5% Initiative, led by Expertise France on behalf of MAEDI (Ministry of Foreign Affairs and International Development).

The analysis of our field work in 2015 shows significant growth of our activities in Guinea (+ 30%, linked in particular to the implementation of our project providing continuity of care and hospital hygiene in the context of the Ebola crisis), a slight growth in Mali and Niger, and a slight reduction in Sierra Leone pending the signing of the EMPOWER project financed by AFD which started in early 2016.



The social mission covers expenses incurred by Solthis aimed at improving the health of populations by sustainably strengthening health systems in countries with limited resources.

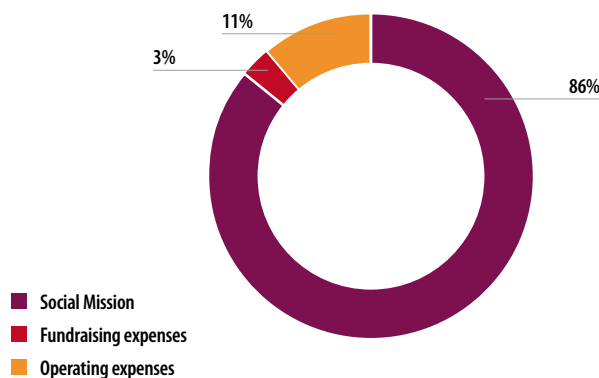
- **Social mission France** includes expenditures for all activities undertaken in France (such as conferences or research work on the West Africa area).

- **Social mission abroad** covers all expenses incurred on the ground, including:

- operational expenditures relating to the activities to improve systems and health services (training, equipment for support sites, contribution to overheads and transport), operational research and advocacy.
- support to operations: expenditures incurred in respect of the headquarters-field coordination, including HR costs and on-site follow-up mission expenses.

Fundraising expenses: Solthis continued to structure its efforts to seek private funds to support the growth of its operations and to intensify the diversification of its funding. For this purpose, in 2015, the Solthis' Ambassadors Club was created.

Operating expenses: the headquarters of the association is located in Paris. It oversees the operational activities of the field teams and helps ensure the link with academic, institutional and associative partners.



FINANCIAL TRANSPARENCY

Certification of 2015 accounts by PricewaterhouseCoopers

Auditors were approved during the Solthis AGM, 13 June 2016 and certified by the PricewaterhouseCoopers Auditors audit and accountancy office.



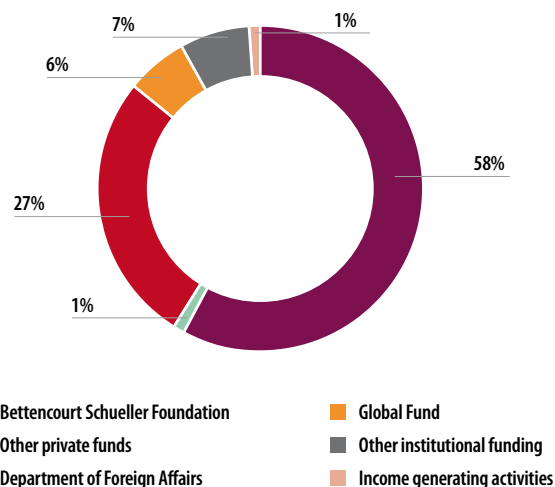
IDEAS label: recognition of the quality of governance, financial management and monitoring of the effectiveness of Solthis' work.

Solthis was awarded the IDEAS label in 2013. This label certifies Solthis in governance, financial management, good practices and monitoring the effectiveness of its work.

SOURCES OF REVENUE

Solthis increased the diversification of its funding sources in 2015:

In 2015, Solthis implemented two HIV continuity of care projects in Guinea and Sierra Leone, in the context of Ebola, funded by 5% Initiative - led by Expertise France on behalf of MAEDI - working on this occasion in Guinea on issues surrounding hospital hygiene and carers' rights. The association also worked with the RAFASCREEN project on HIV-TB co-infection in Guinea. In 2015, in Niger, our team worked on a project funded by the World Bank, aimed at "Prevention, treatment and support of sex workers and their clients", and an initial contract was signed at the end of the year with the European Union on the improvement of living conditions for detainees. Lastly, in Guinea, Solthis was selected to become a sub-recipient of the Government component of the Global Fund grant which began in October 2015.



EXPENDITURE STATEMENT

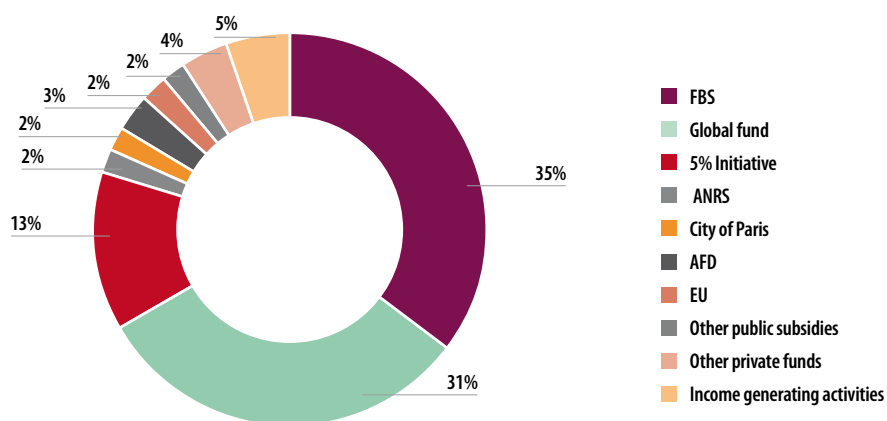
EXPENDITURE	
1. Social Mission	3,056.8
1.1 Social Mission France	15.4
1.2 Social Mission Abroad	3,041.3
Operating expenses	2,361
Support to operations	680.4
2. Fundraising expenses	116
3. Operating Expenses	377
I. Total expenditure for the financial year	3,540
II. Allocations to provisions	-
III. Allocated funds carried forward	421.8
IV. Surplus income for the financial year	2.7
V. Overall total	3,964.5

REVENUE	
1. Resources raised from the public	
2. Other private funds	2,106.3
3. Grants and other public subsidies	1,425.6
4. Other Revenue	45
I. Total revenue for the financial year	3,576.9
II. Reversals of provisions	-
III. Retained designated funds from previous years	387.5
IV. Variation of use of designated resources raised from the public	-
V. Deficit for the financial year	-
VI. Overall total	3,964.5

OUTLOOK 2016

The 2016 budget approved by the Board of Directors amounted to 5.5 million Euros. In effect, some of the work undertaken in 2015 in the search for new funding resulted in opportunities for 2016:

- Solthis positioned itself as sub-recipient of Global Fund grants in Mali and Niger
- Project EMPOWER in Sierra Leone was accepted by the AFD and began at the start of 2016.
- Project JADES focusing on the health of young girls in Mali and Niger has been approved by 5% Initiative for a term of 3 years and began in early 2016.
- ANRS has agreed to co-finance the DIAVINA project, an innovative project of operational research to protect infants exposed to HIV-AIDS.
- Technical assistance for the support in updating active ARVs patients' files in Chad financed by Channel 1 of 5% Initiative will be carried out in 2016.



IN 2015, THE FOLLOWING PARTNERS SUPPORTED SOLTHIS FINANCIALLY:



Since its inception in 2003, the Bettencourt Schueller Foundation has given vital support to Solthis. The Foundation continued to support all of Solthis activities in 2015.



In 2013, Solthis became a sub-recipient of UNDP in Mali under phase 2 of Round 8 for technical assistance to HIV support decentralisation. This project continued in 2015 in the Segou, Mopti and Bamako regions. In addition, at the end of 2015, Solthis was selected in Guinea as a sub-recipient of CNLS (National Committee for the Fight against AIDS) in Mali under the new funding mechanism (2015-2017). In this context, Solthis implements activities in the fields of study and research, training and building the capacity of stakeholders in charge of HIV care, and development of the health information systems, pharmacies and laboratories.



5% Initiative AIDS, Tuberculosis, Malaria is implemented by Expertise France and led by the Ministry of Foreign Affairs and International Development. Solthis experts were deployed in 2015 on three technical assistance missions financed by Channel 1 of 5% Initiative:

- supporting the preparation of documents related to the management of supplies and stocks under the Global Fund HIV grant in Tunisia;
- supporting the improvement of the DPHL information system for logistics and pharmaceutical management in Niger;
- support for the preparation of documents related to the Global Fund HIV grant in Guinea (component supply and stock management).

In addition, Solthis received two funding grants under the Channel 3 call for proposals opened in response to the exceptional context of the Ebola epidemic for its projects focused on continuity of HIV care in Guinea and Sierra Leone.

5% Initiative also funds the implementation of the CASSIS project over 3 years (2013-2016). This project aims to improve access to care and the health information systems of HIV/AIDS programmes funded by the Global Fund in Niger and Guinea. CASSIS worked in partnership with UNAIDS and Solthis' national partners (Niger: ULSS, CISLS; Guinea: PNPCSP, SE/CNLS). Lastly, Solthis is a member of the RAFASCREEN project consortium led by the Benin National Programme against Tuberculosis (PNT). Funded by 5% Initiative, this project aims to improve the detection of TB patients infected with HIV and diabetes in Benin, Guinea and Senegal. Within the framework of this project, Solthis monitors activities implemented in Guinea.



Solthis received funding from the global initiative for health UNITAID for the OPP-ERA project. This project aims to improve the monitoring of people living with HIV by opening up the viral load technology market to new suppliers by promoting the “Open Polyvalent Platforms” (OPP) model. The OPP-ERA pilot phase is being implemented in four countries (Burundi, Cameroon, Ivory Coast and Guinea) by a consortium of partners led by Expertise France, which includes the ANRS, Sidaction and Solthis. Solthis is the project operator for Guinea where two “open” viral load devices have been installed.



Within the framework of the OPP-ERA project, Solthis received additional funding from the National Agency for Research on AIDS.



In 2014 and early 2015, Solthis intervened in support of the Favibola trial in Conakry, Guinea, led by INSERM and the ANRS in partnership with ADERA.



Solthis was chosen for the implementation of the “Prevention and support for treatment, care, and socio-economic support for sex workers and their clients in Agadez and Tillabéri” project within the framework of a CISLS call for tenders in Niger supported by World Bank funding. Solthis implements this project in partnership with the NGOs Population Services International (leader), Lafia Matassa and ANBEF.



Since 2009, the City of Paris has partnered with Solthis on its programme to support the medical care of people living with HIV in Conakry, Guinea. In 2015, the City of Paris also gave a one off grant for the purchase of protective equipment against Ebola.



Under the Sidaction ‘Training’ call for proposals, Solthis received support for its project to build the capacity of paramedics to better care for people with HIV/AIDS in the Dosso and Tillabéri regions in Niger. Notably, Sidaction funding helped to develop specific training on the doctor-patient relationship module and an educational board game ‘Tri-ARV pursuit’ aimed at caregivers.

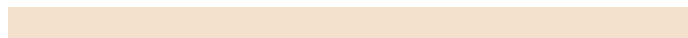
Our financial partners



The FRIO, who provide institutional and organisational reinforcement, supported Solthis in the charity's development of income-generating activities. The FRIO is managed by Coordination Sud and is supported by the Ministry of Foreign Affairs and International Development and the French Development Agency (AFD).



The advocacy project funded by the Foundation aims to improve the implementation of Global Fund grants in fragile states. This project took place in 2014 and was completed by April 2015.



The Fondation de France and the JM. Bruneau Foundation, under the aegis of the Fondation de France, supported Solthis in Sierra Leone as part of the continuity of care for people living with HIV in context of the Ebola epidemic programme in 2015.



The Fondation Enfants d'Urgence supported the continuity of care for people living with HIV in the context of the Ebola epidemic programme in 2015.



We would also like to thank:

GARD-Canada: sponsorship in kind for air transport of our teams

Webassoc: volunteer web professionals support for our digital communication

Elsevier Masson: provision of the 'Travel Medicine and Infectious Diseases' journal in all of our countries

Translators Without Borders: translation of various documents throughout the year

PerMondo: translation of documents

WE DEEPLY THANK ALL OUR PARTNERS!

Solthis is opening up to private donations and intensifies its search for new partnerships with companies and foundations

In 2015, Solthis opened up its programs' funding to individual donation (appealing to public generosity) and continues to intensify its search for partnerships with companies and foundations as part of the diversification of its resources to ensure the sustainability of its intervention model, flexible and independent.

To meet donor co-financing requirements and to carry out all our projects, to be able to extend them, to strengthen some of their activities or even to develop innovative pilot projects, we need private funding.

The countries in which we operate have sanitary and geopolitical contexts which might change rapidly as demonstrated by the Ebola outbreak. Dealing with these situations, especially to meet the needs of patients and care professionals, requires great adaptability and responsiveness and rapid mobilization of resources, which only an increased diversification of our funding can help us to afford.

You are a corporate companies or a foundation? Supporting our projects means:

Enhancing the image of your company through:

- **special access to scientific knowledge and latest advances in global health issues**
- **a better awareness on Africa through our great experience**
- **A partnership reflecting your corporate image, operations devised together according to your priorities:**



How can we act together?

You can commit yourself with Solthis in different ways, chose which ones best suits you:

A direct donation: by financing all or part of a Solthis project.

An activity to mobilize your employees: a sports challenge, a playful fundraising at an exhibition stand and/or on-line... we can offer a set of genuine tools for internal cohesion, which can take various forms that we will help you to devise.

A product-sharing operation: convert a part of your product sales profits into a donation and convey an image of solidarity through your packaging.

Skills and in-kind sponsorship: equipment, information and communication technology, vehicle. Our team is at your disposal to define with you a personalized partnership.

For more information about our projects to best support our action:

<http://solthis.org/en/how-to-act-together/>

Enterprises or individuals,

You can also make a donation on

www.solthis.org

GLOSSARY

AD	Advocacy	PLWHA	People Living with HIV
ARV/ART	Antiretroviral/Antiretroviral treatment	PMTCT	Prevention of Mother to Child Transmission
CASSIS	Capacities for Access to Healthcare and for the Health Information System	PSI	Population Services International
CB	Capacity building	PSM	Procurement and Supply Management
CMT	Technical medical committee	PWLHA	Pregnant women and people living with HIV
DBS	Dried Blood Spot	RHD	Regional Health Directorate
DNPL	National Directorate of Pharmacy and Laboratories	STI	Sexually Transmitted Infections
DNSP	National Directorate for Public Health	TB	Tuberculosis
DPHL	Pharmacy and Laboratory Directorate	TPE	Therapeutic Patient Education
EVD	Ebola Virus Disease	UNAIDS	Joint United Nations Programme on HIV/AIDS
FBS	Bettencourt Schueller Foundation	UNDP	United Nations Development Programme
HBV/HCV	Hepatitis B/C virus	VL	Viral Load
HIS	Health Information System	WHO	World Health Organization
IGA	Income Generating Activity		
INSP	National Institute for Public Health		
ISPED	Institute of Public Health, Epidemiology and Development		
LNSP	National Public Health Laboratory		
MAEDI	Ministry of Foreign Affairs and International Development		
MOHS	Ministry of Health and Sanitation		
MSHP	Ministry of Health and Public Hygiene		
NGO	Non Governmental Organization		
NMCP	National Malaria Control Programme		
NPPU	National Pharmaceutical Procurement Unit		
NTD	Neglected Tropical Diseases		
ODA	Official Development Assistance		
OI	Opportunistic Infections		
ONFP	National Office of Family and Population		
OR	Operational research		
PALU	Paludism/Malaria		
PCI	Prevention and Control of Infections		
PCR	Polymerase Chain Reaction		
PLTB	People/Patients Living with Tuberculosis		

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We also wish to thank all Solthis' employees and volunteers for their contribution.



**Everyone has the right to health care
Let's act together!**

 **Solthis**
Therapeutic Solidarity
and Initiatives for Health

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