



ACTIVITY REPORT 2016

Solthis, Global Health NGO

 **Solthis**
Therapeutic Solidarity
and Initiatives for Health

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This report has been printed in July 2017. The financial report has been certified by the expert Accountants at the Auditors Price Waterhouse Coopers and by Solthis General Assembly.



IDEAS LABEL: Recognition of the quality of governance, financial management and monitoring of the effectiveness of Solthis' work



Dr Louis PIZARRO
MD, CEO

EDITORIAL

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2016 was a pivotal year for Solthis.

We elected a new President, Roland Tubiana to succeed Christine Katlama. A few lines are far from enough to describe the importance and contribution of Christine Katlama to our association. Not only did she participate alongside Gilles Brücker and Brigitte Autran in the foundation of Solthis, but above all, throughout these past 13 years, she has instilled the principles and values that guide our action.

2016 was also marked by the end of the financial agreement with the Bettencourt-Schueller Foundation. With the support of the Foundation, Solthis was created and developed to become a recognized international solidarity actor. Throughout, the Foundation has supported our association enabling us to develop a sustainable model for our actions. We wish to thank the Foundation for its unwavering support and guidance throughout these 13 partnership years.

Lastly, a third major event took place this year: Solthis was chosen to lead the OPP-ERA Project consortium alongside ANRS, Expertise France and Sidaction. This project, funded by UNITAID for \$14.7million for the second phase 2016/2019, aims at increasing access to molecular biology examinations in developing countries, including HIV / AIDS, Tuberculosis and Hepatitis. It enables Solthis to strengthen its capacity to implement ambitious international programmes.

Of course, many other projects were launched in 2016 and our teams continued to move forward projects initiated in the field before 2016. Through this annual report, you will discover 14 projects implemented in 2016 which testify to the richness of our action.

13 years after Solthis's Foundation, our desire to act and our determination remain the same: our most precious strength is to make sure the right to health becomes a genuine reality for all inhabitants of our planet. And with your support, we will pursue our action.



**SOLTHIS,
GLOBAL 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

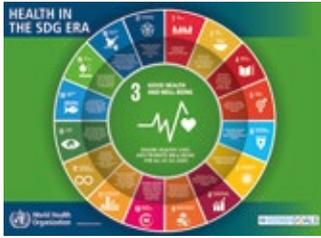
We are committed to communicating transparently on the actions which we take, on the management and use of our funds.

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.

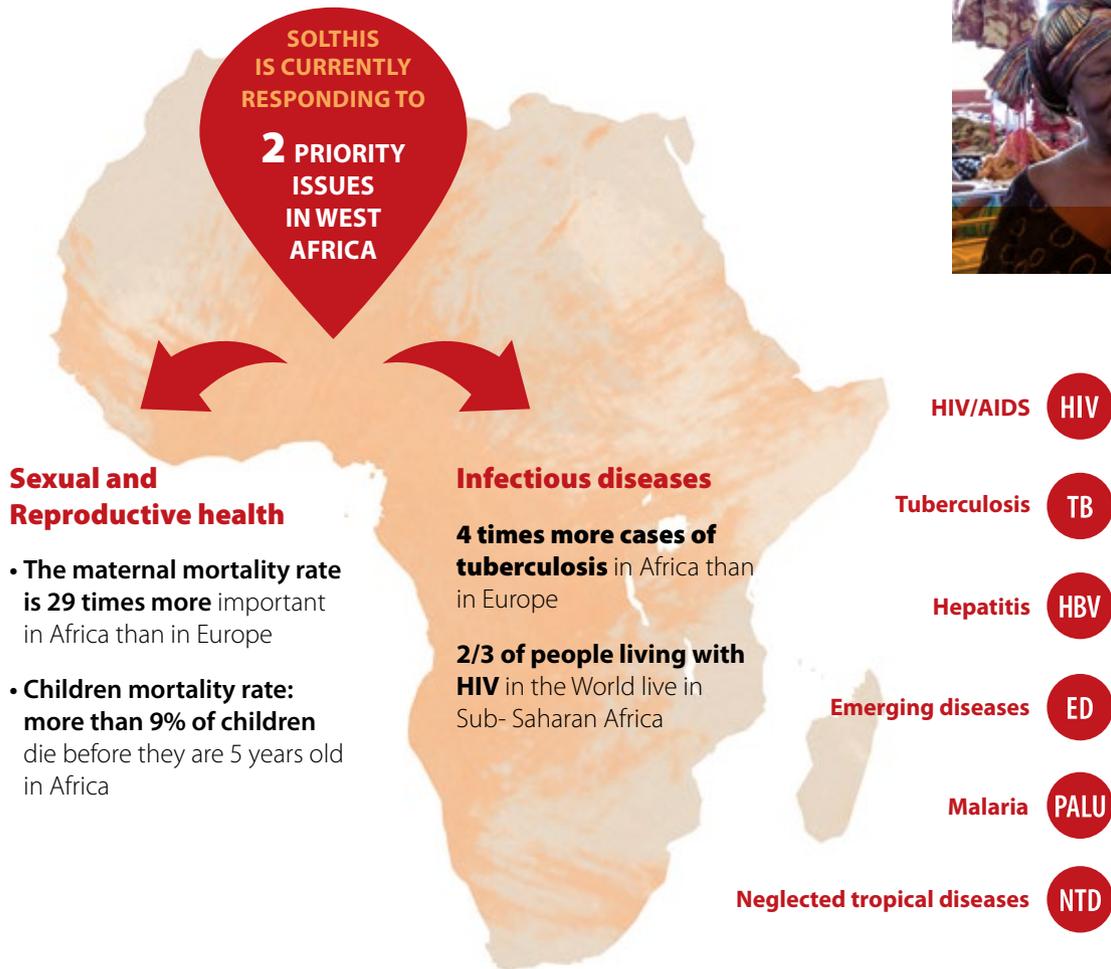
Creativity, innovation

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.



Health in the context of the International Community Sustainable Development Goals

Solthis contributes to the achievement of the 2015-2030 Sustainable Development Goals through strengthening health systems and its health priorities



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.

→ **Improve health for all in countries with limited resources**

→ **Give the people access to prevention and quality health 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.

2016 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 system

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.

14

projects in 8 countries



+ 100

health centers with ongoing support



87%

Of our workforce are in the field

1 000

adolescents sensitized to Sexual and Reproductive Health Rights

4,3

millions completed budget in 2016

2000

health professionals trained

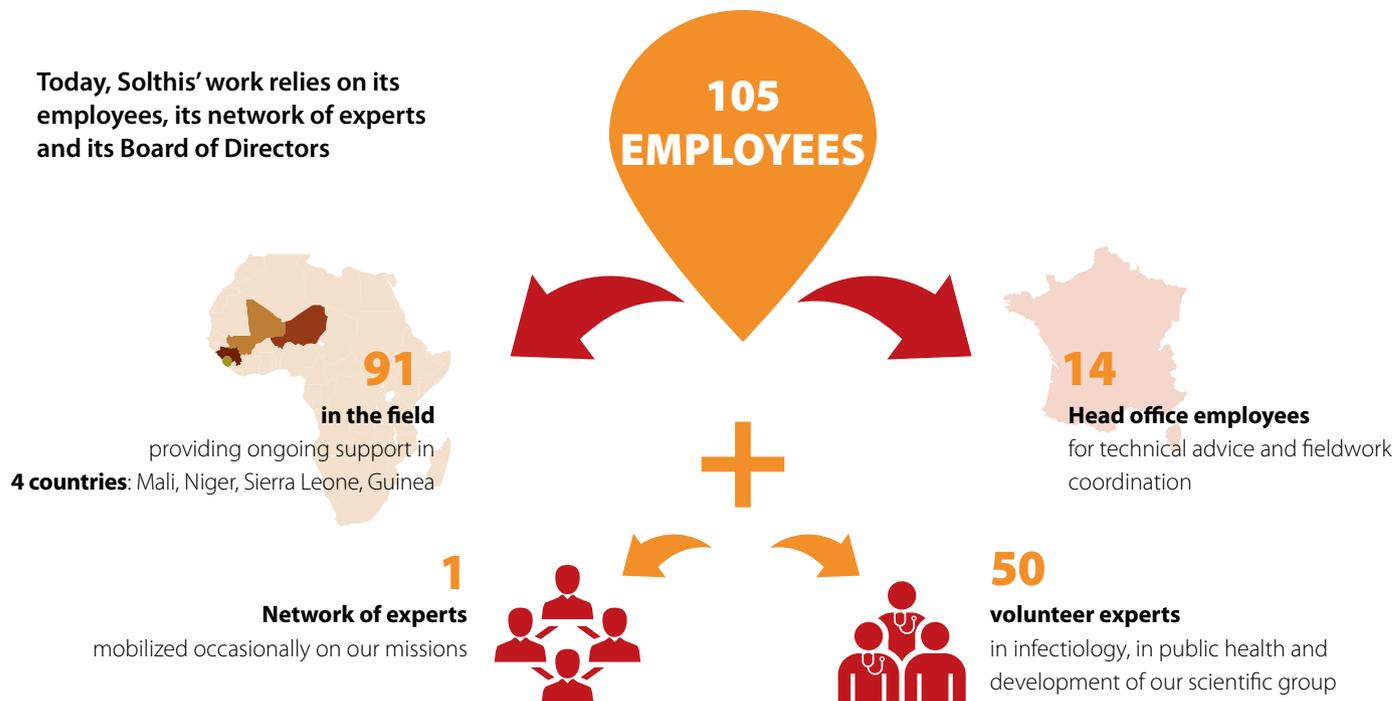


+ 1

million patients visit per year centers supported by Solthis

Our Organization

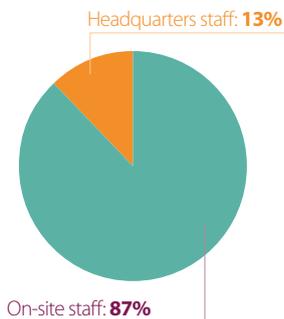
Today, Solthis' work relies on its employees, its network of experts and its Board of Directors



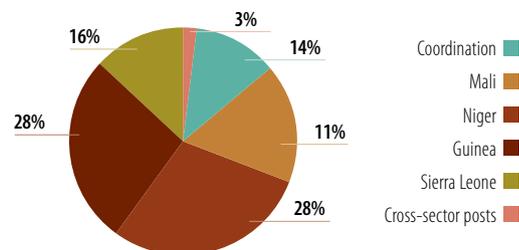
AN INTERNATIONAL NGO

The vast majority of Solthis' workforce is operating in the field (87% of the total staff). Among these 87%, 70% of the workforce is comprised of local staff members.

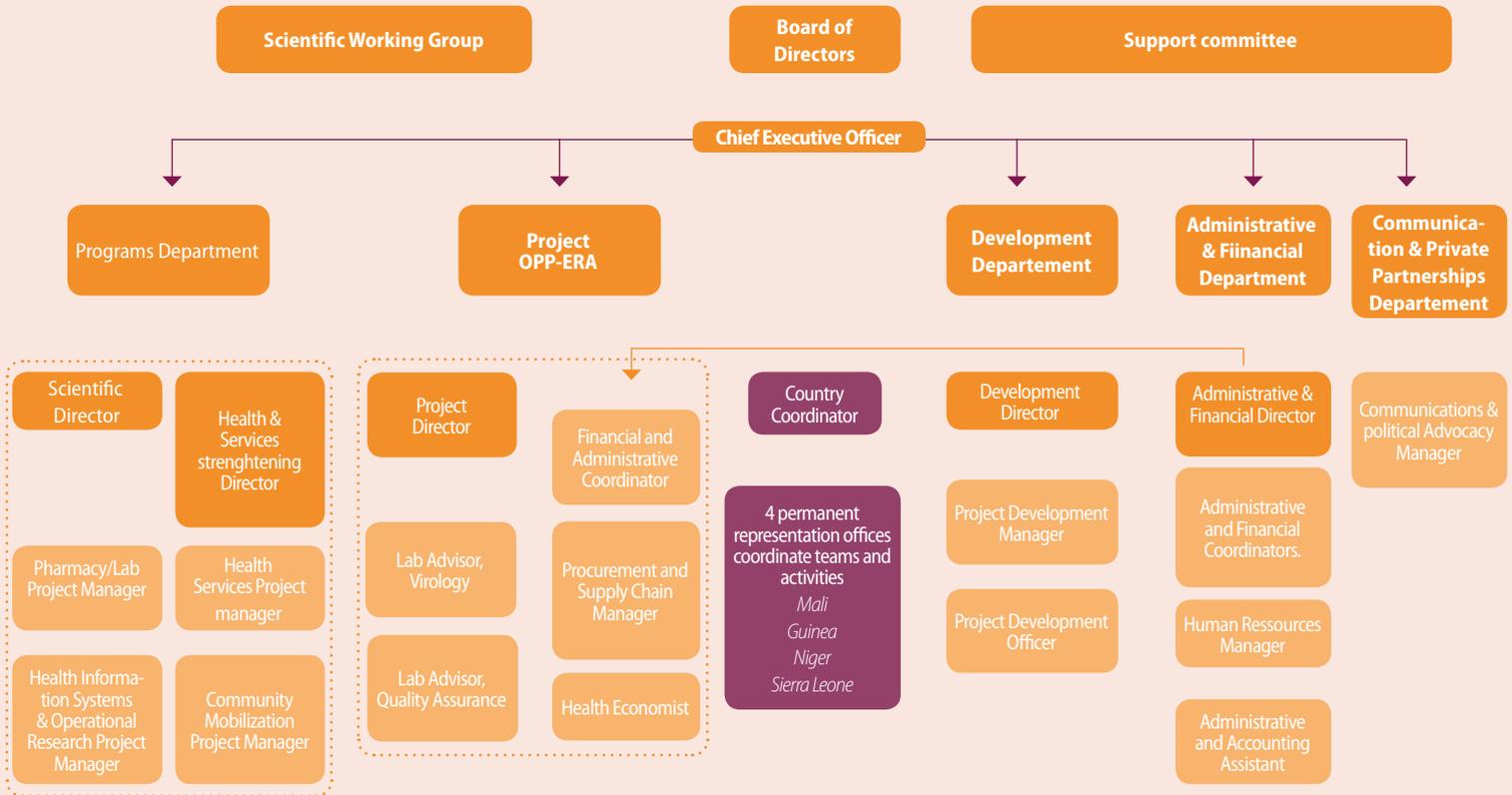
Distribution of the payroll



Manpower per country



Our Headquarters Team



THE BOARD OF DIRECTORS ON THE 31ST OF DECEMBER 2016

Dr Roland TUBIANA,

Chairman
Hospital practitioner, Service
of infectious Diseases at Pitié-
Salpêtrière Hospital, Paris

Pr Brigitte AUTRAN,

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

Ms. Bettina AURBACH,

Secretary General
Chief Executive Officer of Albert
Menès, founder of Brand Around

Mr. Henri BALBAUD,

CEO of HBRH Consulting firm,
consultant in human Resources
and communications

Mr. Armand de BOISSIERE,

Secretary General of Bettencourt-
Schueller Foundation

Pr Pierre BUFFET,

professor of parasitology at
the National Institute of blood
transfusion and at Paris Descartes
University

Mr. Eric CHENNEVEAU,

entrepreneur, chairman and
business owner of several
companies

Ms. Annabel DESGREES-DU-LOU,

demographer, research director
at the Research Institute for
Development (IRD) and member
of Population and Development
Center (CEPED)

Dr Pierre FRANGE,

pediatrician, Laboratory of
microbiology and clinical unit of
pediatric immunology, Necker
Hospital

Pr Christine KATLAMA,

Head of the Outpatient Clinic
and of the AIDS Clinical Research
Unit - Department of Infectious
and Tropical Diseases at the Pitié
Salpêtrière Hospital

Pr Christine ROUZIUX,

Head of department of Virology -
Necker Hospital

Mr. Jean-Pierre VALERIOLA,

Former Director
of Communication and
Development - Bettencourt
Schueller Foundation

Mr. Philippe VILLIN,

CEO "Philippe Villin Consulting"
firm

THE LIFE OF THE ASSOCIATION IN 2016

The General Assembly was held on June 29 2016

The moral report and the annual accounts were approved. Christine Katlama, Brigitte Autran and Jean-Pierre Valériola's mandates renewed for 3 years till June 2018. Three new board members have been appointed: Bettina Aurbach, Henri Balbaud and Eric Chenneveau.

An extraordinary General Assembly was held on December 15 2016

to ratify the modification of the registered office of the association. Three new board members were appointed: Annabel Desgrées du Loû, Pierre Buffet and Pierre Frange.

Three Board of Directors meetings were held:

- June 13 2016: accounts for 2015 were closed
- November 28 2016: the board of Solthis endowment fund was appointed.
- December 15 2016: the 2017 budget was voted.

SCIENTIFIC WORKING GROUP

Composed of international experts in infectious diseases, public health and developing, the group hold an advisory role for the definition of Solthis programs and actions. The Working Group is also involved in the field through specific missions of technical support and training.

Pr Eric ADEHOSSI, Head of Department of Internal Medicine - National Hospital, Niamey (Niger)
Françoise AEBERHARD, psychologist-consultant, Infectious Diseases Department of Pitié-Salpêtrière Hospital (AP-HP), Paris
Pr Brigitte AUTRAN, Immunologist - Laboratory of Cell and Tissue Department, Pitié-Salpêtrière Hospital (AP-HP), Paris
Elie AZRIA, MD, Head of Gynecology and Obstetrics Department, Bichat-Claude Bernard Hospital (AP-HP), Paris
Renaud BECQUET, INSERM researcher in Epidemiology, INSERM research center U1219, ISPED, University of Bordeaux
Pr Elisabeth BOUVET, Head of CDAG HIV / HCV / HBV Hospital Bichat-Claude Bernard (AP-HP), Paris
Pr Olivier BOUCHAUD, Head of Infectious Diseases Department of Avicenne Hospital (AP-HP), Paris
Pr Gilles BRUCKER, Professor of Public Health at the University of Paris XI, Kremlin Bicêtre, Paris
Pr Pierre BUFFET, MD Dermatology Infectious diseases, PhD Microbial biochemistry, Professor of parasitology at the National Institute of Blood Transfusion & at Paris Descartes University
Pr Vincent CALVEZ, virologist, Laboratory Department, Pitié Salpêtrière Hospital (AP-HP), Paris
Ana CANESTRI, MD. Infectiologist, Infectious Diseases Department of Tenon Hospital (AP-HP), Paris
Guislaine CARCELAIN, MD. Immunology Laboratory of Cell and Tissue Department, Pitié-Salpêtrière Hospital (AP-HP), Paris
Pr Mohamed CISSE, Senior University Lecturer and Head of Dermatology Department of the University Hospital of Donka, Conakry (Guinea)
Pr Dominique COSTAGLIOLA, Head of Inserm Unit 943, Pierre et Marie Curie University, Paris
Pr Christian COURPOTIN, Pediatrician, International Consultant
Pr Patrice DEBRE, Immunology Laboratory of Cell and Tissue Department, Pitié Salpêtrière Hospital (AP-HP), Paris
Annabel DESGREES-DU-LOU, demographer, research director at IRD and CEPED,
Pr Diane DESCAMPS, Virology Laboratory, Bichat-Claude Bernard Hospital (AP-HP), Paris
Charlotte DEZE, MD. Medical coordinator at Doctors without Borders (MSF), Ivory Coast
Benjamin DJOUDALBAYE, MD. Senior Officer for Health AIDS, Tuberculosis and Malaria, African Union
Pr Marc DOMMERGUES, Chief of Obstetrics and Gynecology Department, Pitié Salpêtrière Hospital (AP-HP), Paris
Pr Serge EHOLIE, Infectious and Tropical Diseases Department, Treichville Hospital, Abidjan (Ivory Coast)
Arnaud FONTANET, MD. Head of the Research and Expertise Epidemiology of Emerging Diseases Unit at Pasteur Institute, Paris
Pierre FRANGE, MD. Unit of pediatric immunology, hematology and rheumatology at Necker Hospital (AP-HP), Paris



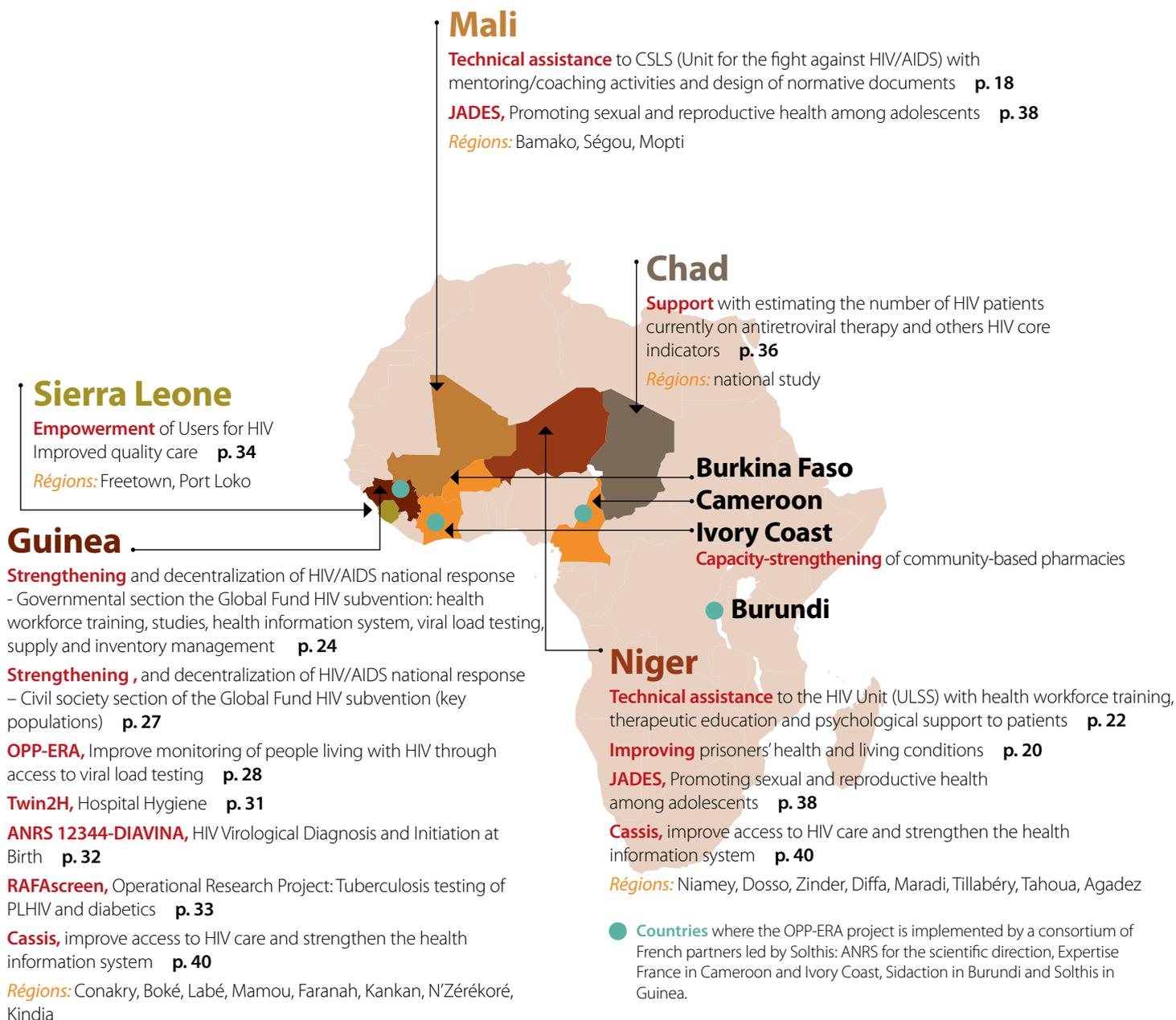
David GERMAUD, MD. Pediatric Department - Robert Debré Hospital, Paris
Pr Pierre-Marie GIRARD, Head of Infectious Diseases Department, Saint Antoine Hospital (AP-HP), Paris
Florence HUBER, MD. Infectiology and dermatology Department, Cayenne Hospital
Pr Vincent JARLIER, Head of Bacteriology Department, Pitié-Salpêtrière Hospital (AP-HP), Paris
Bernard JARROUSSE, MD. Chief of Internal Medicine, Lagry-Marne Valley Hospital
Pr Christine KATLAMA, Head 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 the Washington University, Institute for Health Metrics and Evaluation (IHME)
Yoann MADEC, PhD in Statistics, Research Unit and expertise, Epidemiology of Emerging Diseases, Institut Pasteur, Paris
Almoustapha MAIGA, PhD. Head of the medical analysis laboratory at Gabriel Toure Hospital and PhD Virologist at the virology laboratory SEREFO-USTTB, Bamako (Mali)
Anne-Genevieve MARCELIN, PhD. Virology Department, Pitié-Salpêtrière Hospital (AP-HP), Paris
Vanina MEYSSONNIER, MD. Internist and infectious diseases specialist - Croix Saint Simon Hospital
Pr Robert MURPHY, Head of Infectious Diseases Department, Northwestern University Medical School in Chicago
Charlotte NGO, MD. Gynecology and Obstetrics Department, George Pompidou Hospital (AP-HP), Paris
Pr Theodore NIYONGABO, Department of Internal Medicine University Hospital Kamege and Director of the CNR (National Reference Center for HIV / AIDS), Bujumbura (Burundi)
Joanna ORNE-GLIEMANN, Public health researcher, INSERM research center U1219, ISPED, University of Bordeaux
Gilles PEYTAVIN, MD. Pharmacist, Bichat-Claude Bernard Hospital Pharmacy (AP-HP), Paris
Cecilia PIZZOCCOLO, MD. Infectiologist, Fournier Institute and former Scientific Director at Solthis
Hélène ROGER, International programs director, Sidaction, Paris
Pr Christine ROUZIOUX, Virology Department, Necker Hospital (AP-HP) and Paris-Descartes University, Paris
Alliou SYLLA, MD. Director of Coalition Plus Afrique
Pr Mariam SYLLA, Pediatrics Department, Gabriel Touré Hospital, Bamako (Mali)
Stéphanie TCHOMBIANO, International development expert
Tuan TRAN-MINH, MD. International consultant for the French Red Cross
Roland TUBIANA, MD. Infectious Diseases Department, Pitié-Salpêtrière Hospital (AP-HP), Paris
Marc-Antoine VALANTIN, MD. Infectious Diseases Department, Pitié-Salpêtrière Hospital, Paris
Jean-Paul VIARD, MD. Infectious Diseases Department, Hôtel-Dieu Hospital (AP-HP), Paris





OUR ACTIVITIES

Our core programme countries in 2016



Mali

HCNLS: High National Council for the Fight against HIV/AIDS, attached to Mali Republic Presidency

CSLS-MSHP: Ministry of Health and Sanitation Unit for the Fight against HIV/AIDS, reporting to the Ministry of Health Secretary General

ASDAP: Association for Support of Population Initiatives

WALE: Non-Governmental Organization « Action, Health, Populations » engaged in the fight against HIV

Guinea

CNLS: National Committee for the Fight Against AIDS, attached to the Prime Minister Office and managed by the Executive Secretariat (SE/CNLS)

PNPCSP: the National Programme for Treatment and Prevention of STIs/HIV/AIDS reporting to the National Directorate of Public Health within the Ministry of Health and sanitation

REGAP +: Guinean Network of People living and affected with HIV/AIDS

FEF: "Fondation Espoir Guinée" - Guinea Hope Foundation

AJFDG: "Association des jeunes filles dévouées de Guinée"

AAEC: "Afrique Arc en Ciel"

Niger

CISLS: Bureau for Intersectoral Coordination of the Fight against STIs/HIV/AIDS, directly attached to the Republic President since 2008

ULSS: Intersectoral Unit of the Health Ministry for the Fight against HIV/AIDS

DSME: Mother and Child Bureau, attached to the General Directorate of Health and reproduction within the Ministry of public Health. Within the Bureau, works a special Unit dedicated to Youth and Adolescents Health promotion (DSAJ)

DGASP/R: Prison Administration, Security and Reintegration General Directorate within the Ministry of Justice

ANDDH: Association for Human Right Protection in Niger

LAFIA MATASSA: Non-Governmental Organization for youth and adolescents Health

Sierra Leone

NAS: the National AIDS/HIV Secretariat, attached to the President's Office

NACP: the National AIDS/HIV Control Programme, attached to the Ministry of Health

Nethips: Network of HIV Positives in Sierra Leone



Mali



Technical assistance for the AIDS Unit of the Ministry of Health in organizing mentoring / coaching sessions and producing normative documents

Key facts

- **Launch:** January 2016
- **Duration of project:** 2 years
- **Where we work:** Regions of Kayes, Ségou, Mopti, Koulikoro, Sikasso, Gao, Tombouctou and the Bamako district
- **Budget 2016:** €181,000
- **Source of funding:** Global Fund - Grant 2016-2017 with UNDP being the main recipient. Solthis has been chosen as the sub-recipient to support the Unit for the fight against AIDS of the Ministry of Health and Public Hygiene (CSLS-MSHP)
- **Partners / Beneficiaries:**
 - Unit for the fight against AIDS of the Ministry of Health and Public Hygiene (CSLS-MSHP)
 - National Health Directorate
 - Regional Health Directorates of Kayes, Ségou, Mopti, Koulikoro, Sikasso, Gao, Tombouctou Regions and the Bamako District
 - Reference health centers and certain community centers of corresponding localities.

Issues

In the context of the decentralization of HIV treatment in Mali, we face two challenges: unsatisfactory treatment quality and a significant number of patients “lost to follow up” since they are no longer in the healthcare system. This observation can be explained by several factors which Solthis’ technical assistance seeks to mitigate:

- Training is not sufficient to allow health care professionals to apply good practices and should be complemented by additional on-site mentoring/coaching activities.
- Supervisions are often done by people who do not have sufficient technical (clinical, pharmaceutical, laboratory) expertise to support the health professionals in their daily practices.

In addition, providing good treatment and care also means working on the non-clinical or biological aspects in order to support patients in living with their illnesses and receiving treatment

for life. In Mali, there were no guidelines for patient educational therapy or for psycho-social support, which is needed in order to regulate this aspect of patient care management.

Objectives

Through capacity building of the CSLS/MSHP (Unit for the fight against AIDS of the Ministry of Health and Public Hygiene) and of health care professionals in Mali, contribute to improvements in quality of care for adults, children and adolescents as well as to the PMTCT (Prevention of mother-to-child HIV transmission).



Solthis head of mission mentoring on the subject of patient education and dispensation with staff of the Commune II Reference Health Center in Bamako.

Activities and results

In concrete terms, Solthis provided technical support on 3 aspects:

- Supporting the implementation of clinical mentoring/coaching sessions aimed at improving patient care management.
- Supporting the production of reference documents on patient education and psycho-social care management.
- Conducting a multi-purpose study: to document the importance of the phenomenon of treatment interruption (dubbed “loss of follow up”) ; to identify the related factors to this phenomenon; to analyze the supporting activities for patients in order to engage more of them in receiving treatment and care.

Clinical coaching:

It has allowed for visible improvements in all centers where coaches have been trained in the field of HIV testing, PMTCT and global care management for PLHIV (People living with HIV). These improvements are in particular reflected in:

- Support provided to 7 regional health directorates in the Bamako district via training sessions. These sessions are for officers who are responsible for the monitoring and evaluation of HIV activities of their directorates. They aim to improve the post-training supervision through coaching activities for adult, adolescent and pediatric treatment.
- Training of 45 coaches in PMTCT: 4 of them are from regional health directorates and 41 of them are from reference health centers.
- Training of 25 coaches in adult, adolescent and pediatric care

management: 8 of them are from regional health directorates, 13 of them are from reference health centers and integrated community-based centers and 4 of them are from community NGOs.

Production of national reference documents

Solthis believes that the drafting of these documents should be done together with national stakeholders in order to facilitate ownership. Solthis has also organized 2 workshops with its partners on the drafting and the validation of the following documents:

- National directives on Patient Education in Mali,
- Guidelines and Procedures on Psychological and Social Support of people living with HIV/AIDS in Mali,
- Part of the learning material designed for the training of healthcare professionals working in the field of patient education, especially the participant’s workbook.

“The coaching has calmed relations with healthcare providers to the point where some of them wish we would come back often”

a trained coach

Outlook

In 2017, Solthis will continue its work on the improvement of the quality of care management for PLHIV, especially:

- On the mentoring/coaching aspect, continue with the roll-out of this strategy, especially in the context of delegation with the development of mentoring/coaching activities for nurses and mid-wives.
- Continue with the study on treatment interruptions and the related factors. This study aims to identify concrete operational paths that could be followed in order to increase patient engagement in their care.



45

coaches trained for PMTCT
of which 44 are mid-wives
and 1 is doctor.



22

coaching doctors trained for adult,
adolescent and pediatric care
management.



Niger



Improvement of prisoners' living conditions in Niger

Issues

This project aims to promote human rights in Niger by improving prisoners' living conditions. On the one hand, this project makes quality sanitary, legal and social services accessible for prisoners. On the other hand, it aims to strengthen Nigerien civil society's role as advocates for human rights.

“Thanks to the trainings and the weekly staff meetings that Solthis conducted with our medical personnel, prisoners who are ill can be better cared for now. The project has raised the awareness of the guards and the prisoners about illnesses that could be found in the prison environment. All that was concrete result and it has helped us a lot!”

Lieutenant Allassane Hanaki, Major at the Niamey Detention House

Key facts

- **Launch:** January 2016
- **Duration of project:** 3 years
- **Where we work:** Niamey and Say
- **Budget 2016:** €145,650
- **Source of funding:** European Union, Bettencourt Schueller Foundation and Agence Française de Développement
- **Partners:** ANDDH (Nigerien Association for Defending Human Rights)
- **Beneficiaries:** Prisoners and personnel at detention houses in Niamey and Say

Objective

Contribute to the strengthening and the promotion of human rights in Niger to improve prisoners' living conditions. Three major goals have been achieved resulting in the following:

- The respect of prisoners' rights in Niamey and Say
- The strengthening of prisoner's rights at national level
- The strengthening of ANDDH's (the Nigerien Association for Defending Human Rights) capabilities of defending and promoting human rights at national level

Activities and results in 2016

Participatory analysis of needs

In 2016, Solthis carried out a participatory analysis of needs on the right to health and social and legal aid. To do this, situational analyses as well as a socio-anthropological study on power relations among prisoners were conducted by Solthis in 2 detention centers in Niamey and Say. In addition, 2 participatory analysis workshops were also held in May 2016 with 41 people attending.

Strengthening the provision of health services

An allocation of basic medical supplies, even little ones, has allowed us to improve the medical staff's work in these two detention centers. As a result, the quality of care management of prisoners there has also seen improvement. We also managed to raise the awareness of the managerial staff there about signs of the most common diseases within the prison environment and the appropriate conduct to proceed with in the event of an outbreak of these signs. 7 caregivers from the prison infirmaries and 3 social workers were trained in the most common diseases (HIV, STD, tuberculosis, malaria, fever, diarrhea, dermatosis), and to take universal precautions of care and hygiene, to set up a reference system with which they could direct a prisoner to a hospital as well as to deal with the mental problems of prisoners.

A meeting gathering the reference institutions responsible for treating sick prisoners in Niamey and Say, as well as the national programs, was



held in order to reflect upon issues of the reference and counter-reference system in the prison environment and to make the referral system of sick prisoners more fluid.

The managerial staff in the prisons have also learnt about human rights and the rights of prisoners.

Capacity building among prisoners

Prisoners have acquired knowledge of common diseases in the prison environment, the prevention of these diseases, the hygienic measures to observe as well as their judicial rights and judicial procedures to take. Finally, 64 prisoner peer-educators had their technical competences strengthened by the Solthis' team. They could now in turn teach other prisoners.

Capacity building within ANDDH

14 members of the National Executive Board of ANDDH and 10 members of the regional board were trained for participatory methodologies, peer education, writing, and advocacy methods.

ANDDH conducted an organizational analysis and drafted a strategic advocacy plan, with support from an expert consultant of Solthis who is familiar with issues related to the prison environment.

Outlook

In 2017, Solthis will continue with its work in capacity building among healthcare personnel, legal aid and social workers as a continuation of trainings they have received in 2016. Solthis will also participate in the relaunch of the national platform of actions in the prison environment, a consultative framework approved by the Ministry of Justice. Finally, an "observatory of prisoners' rights" will be established by ANDDH.

657

prisoners were impacted by the awareness sessions

68

guards learnt about common diseases and human rights issues

64

prisoner peer-educators were trained



Technical assistance for the HIV Unit of the Ministry of Health: training of healthcare professionals, patient education, psychological and social support for patients

Key facts

- **Launch:** January 2016
- **Duration of project:** 3 years
- **Where we work:** all regions in Niger
- **Budget 2016:** €74,700
- **Source of funding:** NFM (New Funding Model) grant from the Global fund
- **Partners:** Inter-sectoral Coordination of the Fight against STI/HIV/AIDS (CISLS) – main recipient of the Global fund grant
- **Beneficiaries:** Inter-sectoral Health Unit for the Fight against AIDS (ULSS) - sub-recipient of the Global fund grant

Issues

Through the technical assistance it provides, Solthis contributes to efforts to address two major issues in Niger for a better quality of care management for PLHIV (People Living with HIV):

- Improve training quality especially with expert trainers on technical and clinical issues,
- Support patients in living with HIV as well as in their lifelong treatment by working on aspects other than the clinical and biological ones, of care management such as patient education and psycho-social guidelines.

Objectives

To provide technical support to ULSS in their implementation of activities using the HIV grant from the Global Fund. These activities involve the training of healthcare professionals, the development of patient education, and psychological and social support given to PLHIV as well as the updating of the care management protocol.



healthcare professionals have been trained for ARV treatment prescription



paramedics trained for inventory management and dispensation of ARV treatment

Activities and results in 2016

Support in the conception and the implementation of an action plan for training activities in ULSS

In order to strengthen the capacities of a pool of Nigerien trainers, Solthis organized a training session for 14 trainers on active teaching, clinical mentoring and post-training follow-up. During these three training sessions, Solthis was able to mobilize some of the trainers for inventory management and the dispensation of ARV treatment, which benefited a total of 75 paramedics.

Support for the development of national guidelines on patient education and its training modules

Solthis' experts worked in collaboration with a group of Nigerien partners and made contributions to the elaboration of the national guidelines on patient education. These guidelines were approved during a workshop held on 28th and 29th July.

Based on these guidelines, Solthis designed training modules on patient education which include the participant's handbook, the facilitator's guide and other related presentations.

Support for the updating of normative documents on PLHIV care management, especially concerning the prescription of antiretroviral treatment and opportunistic infections

In order to update these national documents, which were last reviewed in 2013, Solthis adopted the following actions:

- Organising consultation meetings: for example, the Technical Medical Committee Day which gathered round 25 stakeholders in Niamey and bi-annual meetings on ARV prescriptions held in 7 regions with a total of 175 actors participating.
- A document review of ARV treatment guidelines and opportunistic infections, then an on-the-spot situational analysis of the use of these guidelines with prescribers in Niamey before proceeding to update them.

Support for the development of an operational plan on psychological and social support of patients:

In 2013, a national policy document on continuity of care and psychological and social support for PLHIV in Niger was drafted. ULSS asked for Solthis' support in attaching an additional operational plan to the document, including necessary activities and resources to mobilize. After a document review, a writing workshop was organized with the national task force. The document was approved in late July.

Outlook

In 2017, Solthis will continue to support ULSS in the following ways:

- Training: it concerns the updating of teaching materials and the training of 75 doctors and 175 nurses or mid-wives on the general care management of HIV-positive patients.
- Post-training follow-up: site visits to accompany professionals who have already been trained in the application of what they have learnt to real situations.
- Organization of bi-annual meetings on ARV prescription or technical medical committee meetings.
- Support for the updating of care management guidelines.



The « Tri-ARV pursuit », a board game to strengthen medical competence

Along with the CASSIS Project (Capacity strengthening for HIV Care and Health Information System) funded by Initiative 5% in Niger and Guinea, in 2015, Solthis developed an innovative tool to strengthen paramedics' skills of care management of patients in Niger, thanks to the funding given by SIDACTION and FBS. Based on the principle of "Trivial Pursuit", this board game allows the players to test and consolidate their knowledge and trainers to train and empower healthcare professionals in ARV prescription. A specific module on the healthcare provider – patient relationship aiming to improve attention, behaviour and wording for communication has been added. This game was used in 2016 for the training of paramedics.



Guinea



Global fund project - Governmental section: strengthening and decentralization of the national response to HIV/AIDS in the Republic of Guinea

Key facts

- **Launch:** October 2015
- **Duration of project:** 27 months
- **Where we work:** Guinea (Conakry and regions)
- **Budget 2016:** €521,527
- **Source of funding:** Global fund's New Funding Model (2015-2017)
- **Partners:**
 - CNLS (National Committee for the Fight against AIDS) – main recipient of the grant
 - PNP CSP (National Programme for Treatment and Prevention of STIs/HIV/AIDS)
- **Beneficiaries:**
 - HIV-positive patients and PLHIV co-infected by tuberculosis
 - Healthcare professionals from structures receiving aid
 - Regional and prefectural health directorates
 - National trainers
 - Public laboratories

Issues

The HIV/AIDS epidemic in Guinea is widespread with an estimated prevalence of 1.7%, making it the 6th most deadly disease at national level. The coverage of ARV treatment remains low in relation to the number of people infected, who are yet to receive treatment:

only one third of HIV patients have access to ARV treatment.

Guinea receives a grant from the Global fund for the period of 2015-2017 in order to strengthen its efforts in combatting HIV/AIDS and to aim at reaching the "90-90-90" target set by UNAIDS. This

target sets out a goal that by 2020, 90% of all people living with HIV will know their HIV status, 90% of all people with diagnosed HIV infection will receive sustained antiretroviral therapy, and 90% of all people receiving antiretroviral therapy will have viral suppression.

Objective

Reduce mortality and morbidity rates of adults and children living with HIV by providing them with better access to treatment, to care and to support.



Training workshop on operational research.

Activities and results in 2016

Within the framework of the Government Section of the Global fund grant, Solthis, as sub-recipient of this grant, took action in several areas of the global strategy to fight HIV/AIDS in 2016:

- Training of medical staff in paediatric and adult care management
- Training of healthcare providers for provider-initiated testing and counseling
- Capacity building in stock management and the supply of provisions of ARV treatment
- Strengthening of the health information system with regard to data collecting tools and HIV data management
- Capacity building of healthcare workers in conducting viral load tests

“The training was of great quality and it has allowed me to be useful for people living with HIV”

Dr. Michel GOEPOGUI, health worker from one of the new HIV care centers in Conakry

- Operational research studies, the results of which will be used to improve HIV care management in Guinea

Since the effective launch of project activities, the following progress has been made in 2016:

- Every region now has three national trainers trained by Solthis. They are in charge of training other health workers in their regions for adult and paediatric care management and provider-initiated testing and counselling. There are 23 such trainers in total throughout the territory.
- The decentralization of general HIV care management for adults and children is now in place in the Conakry region. For the 13 new sites where decentralization has been planned, 12 have been conducting HIV care management since August 2016. These sites contribute to increasing the number of people under ARV treatment and provide better care to PLHIV because the capacities of their health workers have been strengthened in the context of this project.

Different national manuals and guidebooks have been drafted and approved, and are now reference documents for the country. They are training manuals on testing for HIV and general HIV care management. Other manuals on input procedures and ARV logistic management as well as data collection tools for seropositive patients within these care management sites for PLHIV have been reviewed. Solthis has also supported CNLS (National Committee for the Fight against AIDS) in working out some technical specifications for viral load measuring apparatus. The purchase of such apparatus has been planned for 2017 with the grant in question.

Outlook

Trainings of caregivers will continue to take place in these regions in 2017 with support from Solthis. This will allow new HIV care management sites to become operational. With support from Solthis, 6 new platforms of access to viral load testing will be in place in 6 regions in Guinea (Kindia, Boké, Mamou, Labé, Faranah and Nzérékoré).

Operational research studies initiated in 2016 will be concluded in 2017 in order to identify precisely the weak areas of HIV care management in Guinea (resistance and observance of treatment, constraints of family-based testing, feasibility of preventative treatments against tuberculosis).



Community center for the “Key populations project” in Conakry (page 27)



12
new HIV care management sites became operational in Conakry



23
national trainers trained for general care management for adults and children



148
healthcare providers trained for care management for adults and children in Conakry



158
healthcare providers trained for provider-initiated testing and counseling in Conakry



Strengthening and decentralization of the national response to HIV/AIDS – Key Populations Project

Key facts

- **Launch:** November 2016
- **Duration of project:** 1 year
- **Budget 2016:** €18,500
- **Source of funding:** Global fund's New Funding Model – HIV Grant for the civil society section, its main recipient is PSI (Population Services International) and its sub-recipient is Solthis.
- **Beneficiaries:** key populations, healthcare professionals, local politicians, lawyers and judges, press owners, journalists, traditional communicators, youngsters
- **Associative partners:** Afrique Arc-en-Ciel
Guinean Association of Devoted Young Girls (AJDG)

Issues

In Guinea, the HIV prevalence rate is at 1.7% among those aged between 15 and 49. However, the epidemic is concentrated within certain groups where high prevalence rates can be detected, especially among men

having sex with other men (56.6%) and sex workers (16.7%).

Indeed, access to prevention and care services for these key population groups is limited, partly due to the strong social rejection to

which they are subjected. On the other hand, it's also due to the fact that services offered do not quite adapt to the situations of these populations.

Objectives

Improve access to prevention services, care services and to treatment for these key populations.

- Improve the provision of appropriate services through capacity building among healthcare workers
- Improving the sanitary, social and legal environment of these populations through setting up a community center and advocacy for human rights

Activities and results

This project was launched in November 2016. During the first few months, activities were mainly focused on recruiting the management team and the training of 5 peer-educators in charge of mobilizing the key populations and moderating educational talks at the community center.

Outlook

The effective launch of activities took place in January 2017, where a community center opened and several health services became available (prevention, testing and care of STIs). Other activities, including training and advocacy workshops, also started.

“Establishing a community center for the key populations is a significant step forward for the fight against HIV/AIDS in Guinea. We count on the expertise of Solthis.”

M. GACK, Member of Afrique Arc-en-Ciel - Coordinator of the community center

1st

community center for the key populations in Guinea



5

peer-educators trained



OPP-ERA: Improving follow-up of PLHIV through access to viral load testing

Key facts

- **Phase 1:** February 2013 – July 2016
- **Phase 2:** August 2016 – July 2019
- **Where we work:** Conakry and Kankan
- **Budget for Guinea in 2016:** €163,807
- **Source of funding:** Funded by UNITAID, implemented by a consortium of partners from France: Solthis working in Guinea, l'ANRS for the scientific direction part, Expertise France working in Côte d'Ivoire and Cameroon, and Sidaction working in Burundi
- **Partners:**
 - PNPCSP: 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
 - INSP: National Public Health Laboratory
 - Donka National Hospital
 - CMT: Technical medical committee

Issues

Viral load is the key indicator to measure ARV treatment effectiveness. It allows for the identification and prevention of treatment failure. However, its access is limited in sub-Saharan African countries albeit this region is home to 70% of the HIV population in the world. Improving access to viral load testing is one of the prerequisites for reaching the 3rd 90-90-90 target set by UNAIDS for the year 2020, which aims for the goal that 90% of patients receiving antiretroviral therapy be virally suppressed by 2020.



Objective

The OPP-ERA project aims to improve follow-up of PLHIV through expanding access to viral load testing by making the OPP (Open Polyvalent Platforms) available in Guinea. This solution aims to open up the viral load testing technology market to new suppliers in order to cut the cost of tests, expand access and access to other molecular biology tests.

Supported by Unitaid, the OPP-ERA project is being co-funded and implemented by a consortium of partners : Solthis, lead partner for phase 2 is in charge of the implementation in Guinea, ANRS is in charge of the scientific direction and results' promotion, Expertise France is in charge of the implementation in Cote d' Ivoire and Cameroon and Sidaction of the the implementation in Burundi.

Activities and results

In Guinea, activities conducted in 2016 have contributed to strengthening the two OPPs installed in the INSP Laboratory and in the Donka' hospital. They also helped to relaunch the viral load testing which had seen a drop in number during the Ebola outbreak even though access was maintained during the whole crisis.

Notable results in 2016:

- 9434 viral load tests were conducted, 75% of which had a value inferior to 1000 copies of RNA per millilitre, the threshold under which treatment success is recognized according to the WHO.
- 60 ARV prescribing physicians were trained in interpreting viral load test results and managing treatment failure.
- 4 biologists from the Kankan regional hospital's laboratory were trained in using the OPP. This was an attempt to decentralize access to viral load tests in Guinea.
- Laboratories of INSP and ATC of Donka were equipped with centrifuges, heating plates for PCR tests, etc.
- A debriefing workshop for Phase 1 held in December has allowed us to take stock of the situation concerning our achievement and difficulties encountered, as well as to draft recommendations for Phase 2.
- The process of taking, collecting and transporting samples as well as outcome yields have been re-organized.

“Monitoring a patient under ARV treatment without measuring his/her viral load is no different from driving a vehicle at night without turning on the headlight”

President of REFIG, a network of associations for the PLHIV in Guinea



OPP-ERA laboratory in the Donka Hospital, Conakry

9,434
viral load tests conducted


75%
of the patients monitored
are virally suppressed

↳ Perspectives: anticipated results from Phase 2 in Guinea

- ↳ Optimal use of OPP
- ↳ Demonstrating the polyvalence of OPP for the diagnosis of tuberculosis, of HIV Early Infant Diagnises (EID) as well as the use of blotting paper
- ↳ Involving new providers in the OPP market
- ↳ Sharing knowledge related to OPP



Launch of Phase 2 of the OPP-ERA project in Guinea



Signing ceremony of the official launch of OPP-ERA Phase 2, attended by the director of Unitaïd.

OPP-ERA Phase 2 – from August 2016 to July 2019 – 13.1 million Euros– Solthis as the lead partner

UNITAID has extended its support to the OPP-ERA project for another 3 years. This 2nd phase aims to increase access to effective viral load testing on a larger scale and make it affordable to patients in Burundi, Cameroon, Côte d'Ivoire and Guinea.

It will also enable users of OPP, a system of molecular biology techniques which is open and innovative, to screen for early development of HIV in infants as well as to diagnose other infectious diseases such as tuberculosis and viral hepatitis.

Solthis is the lead partner for the implementation of this Phase 2, together with ANRS, Expertise France and Sidaction.



TWIN 2H: hospital hygiene

Issues

Key facts

- **Launch of Phase 2:** August 2016
- **End of project:** July 31st 2017
- **Where we work:** Nzérékoré regional hospital and Guéckédou prefectural hospital
- **Budget 2016 for Guinea:** €23,000
- **Source of funding:** Expertise France
- **Partners:**
 - Management teams of the regional health directorate of Nzérékoré and that of the prefectural health directorate of Guéckédou
 - Regional hospital of Nzérékoré, prefectural hospital of Guéckédou



The Ebola outbreak started in Guinea forest region in 2013 and later spread to other regions in West Africa. In December 2015, Guinea was declared Ebola-free by the WHO. Nevertheless, new cases have been confirmed in the Nzérékoré region. Health authorities then took the necessary measures. Beyond the possibility of Ebola making a comeback, this epidemic has shown the fundamental importance of measures that support prevention and hospital hygiene in order to manage and control the risk of infection. That is why this project has been extended to a second phase after the implementation of its first phase.

Activities and results

Solthis helped the directorate of the regional hospital of Nzérékoré to reinvigorate its hygiene committee and to conduct an assessment of its infection prevention & control activities for 2016. Solthis has also conducted a participatory evaluation of needs regarding hygiene in this hospital. Analysis of the results, revealed some shortcomings as regards the following aspects:

- Individual practices in the care setting,
- Existence and application of reference documents,
- Information system and data traceability,
- Stock management,

Based on this analysis, priority areas for action with respect to the project's objectives were set for the year 2017.

Outlook

In 2017, Solthis will continue to support the two hospitals with training identified hygiene referents, and implementing the routine indicators. These will strengthen healthcare professionals' knowledge, competence and attitudes as well as their practices regarding infection control and prevention. Restoration work and hospital equipment supplies have also been planned. Along with that, Solthis will also strengthen the regional health services' capacities regarding infection control and prevention and hygiene in general.

Objectives

- Contribute to the sustainable rebuilding of health system capacities in order to ensure quality care, especially regarding hygiene, and the safety of medical staff and patients.
- Strengthen the two hospitals' capacities of infection risk management and hygiene.



Operational research project ANRS 12344-DIAVINA - HIV infection diagnosis at birth

Key facts

- **Launch:** 2016
- **End of project:** 2019
- **Where we work:** Conakry, CHU Ignace Deen
- **Budget 2016:** €46,000
- **Source of funding:** ANRS, Paris Municipality
- **Partners:**
 - PNP CSP – National Healthcare and STI/HIV/AIDS Prevention Programme
 - Ignace Deen National Hospital (maternity, pediatrics and laboratory)
 - Association in support of people living with HIV (Fondation Espoir Guinée)
 - INSP – National Public Health Laboratory
- **Beneficiaries:**
 - Healthcare workers in maternity and pediatrics
 - Pregnant women and infants exposed to HIV

Issues

In Guinea, despite the improvement of PMTCT programmes, a number of children are still born to HIV-positive mothers who did not receive ARV treatment during their pregnancy. These children are at a particularly high risk of HIV infection. Without treatment, infants infected during the perinatal period face a high risk of death within the first year of their life (50% of deaths).

Objective

- Take action for pregnant women whose HIV status is discovered in the labour room,
- Strengthen the preventive treatment and the screening for HIV in infants at birth, in order to increase their chances of survival.

Activities and results

This project aims to show the efficiency of a new strategy which includes strengthened antiretroviral prophylactic medications to reduce the transmission rate of HIV and to screen for the virus in new-borns who are at high risks of infection. In the event of a positive result, this diagnosis will allow for an immediate start of ARV treatment, thus increasing the infected infants' chances of survival.

2016 was the preparatory phase of the project in 3 main areas: completion of the study protocol; consultation meetings with other partners of the project and activities in preparation for the registering of women and children participating in the project:

1. Recruitment of the project implementation team.
2. Thorough needs assessment to guarantee the success of the operational phase of the project.
3. Sourcing and procurement of all the materials and logistic resources, which are essential for the launch of the study following the needs assessment
4. In terms of training and capacity building, a pre-launch workshop for the project in Guinea was held by Solthis in December, with local partners participating.
5. Restoration work on 2 consultation rooms for paediatrics and maternity at the Ignace Deen University Hospital was undertaken.

The first session to register mothers and children took place in February 2017 in the maternity and paediatrics departments of Ignace Deen University Hospital in Conakry.



RAFAscreen Operational research project

Tuberculosis testing of PLHIV and diabetic patients

Key facts

- **Launch:** March 2015
- **Duration of project:** 36 months
- **Where we work:** Benin, Senegal and Guinea. Solthis monitored activities in Guinea
- **Budget 2016:** €13,800
- **Source of funding:** Initiative 5 %, 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

Issues

Tuberculosis remains a major public health challenge, especially in sub-Saharan Africa. People living with HIV (PLHIV) and other population groups such as diabetics are at particularly high risk of developing tuberculosis, yet they are not adequately screened.

Objective

Improve tuberculosis testing for people living with HIV (PLHIV) and diabetic patients.



Activities and results

Support for the local clinical research

Within the framework of this project, Solthis plays a supporting role in carrying out clinical research to understand the specific features of the infections of certain HIV patients. Solthis also supports the local Guinean team of Professor Sow who heads the Pneumo-Phtisiology Department of the Ignace Deen Hospital in Conakry. Professor Sow is also the main investigator of the project in Guinea.

Project monitoring in Guinea was carried out jointly by the local scientific director and the Scientific director of Solthis. Weekly monitoring on data quality and on observance of study procedures were conducted.

Attending meetings with research teams

The local scientific director participated in the first supervision visit of the Rafascreen steering committee in Guinea from January 31st to February 4th in 2016. He also joined the consultation meetings (12 April and 18 October 2016) where all the stakeholders of the project met to evaluate the implementation of the project, exchange with the research teams as well as to propose solutions in order to achieve recruitment targets within the scheduled deadlines.


3,000

patients registered in Guinea:
1080 are PLHIV
1920 are diabetics



Sierra Leone



Key facts

- **Launch:** January 2016
- **Duration of project:** 3 years
- **Where we work:** 12 health centers in 3 districts including the Western Urban Area (10 health centers in Freetown), the Tombo Health Center in Western Rural Area and the Governmental Hospital in Port Loko
- **Budget 2016:** €421,000
- **Source of funding:** AFD (French Agency for Development), Paris Municipality, Bettencourt Schuller Foundation, the National HIV/AIDS Control Program of Sierra Leone and private funds.
- **Partners:**
 - NETHIPS (Network of HIV Positives in Sierra Leone),
 - National AIDS Secretariat (NAS),
 - National AIDS Control Program (NACP)
- **Beneficiaries:**
 - Healthcare professionals from the 12 sites supported
 - Leaders and members from the 12 support groups affiliated with the NETHIPS network

Empowering users for quality & patient-oriented HIV care management

Issues

Already fragile, the healthcare system in Sierra Leone has been particularly affected by the Ebola outbreak. Its consequences can still be felt when it comes to the continuity of care for PLHIV. The implementation of the Empower project was crucial in mitigating the devastating effects of the outbreak on the organization of quality HIV treatment. It also plays an essential role in strengthening civil society, especially the national network of PLHIV.

Activities and results

Strengthen the capacities of PLHIV to exercise their right to health

The empowerment of HIV patients should be done by revitalizing the network of the 11 support groups and the strengthening of the national NETHIPS network. By doing so, actions to lead advocacy campaigns based on viable data could then take place.

For example, in collaboration with other key partners such as UNAIDS, Solthis has supported NETHIPS in developing its strategic plan. It has also helped NETHIPS with the drafting and the dissemination of a chart among support groups, healthcare professionals and expert patients to inform patients of their rights.

Lastly, given that we judge that a better relationship and better understanding between patients and healthcare professionals would be crucial for the improvement of care management, we held a 3-day workshop and other educational activities on the topic of the caregiver-patient relationship.

Objective

Contribute to the strengthening of civil society regarding the exercise of the right to health:

- Capacity building programs within civil society, especially that of the NETHIPS network and support groups, should enable them to improve the situation of HIV-positive patients receiving care and fight against discrimination and stigmatization.
- Equip caregivers with the means to better evaluate users' needs whilst strengthening their capacities and promoting the notions of healthcare teams' responsibility and accountability regarding users of the healthcare system.

Strengthen the capacities of healthcare professionals regarding quality care management

Solthis conducted classroom trainings in 12 health centers, as well as clinical and pharmaceutical mentoring sessions of 300 hours per month to ensure quality pedagogical monitoring. Different services, including clinical, HIV, antenatal, childbirth, postnatal and paediatric services, were involved to ensure a holistic and complete strengthening of the health system.

Solthis has also given its support to the organization of health care services by providing health centers with small medical equipment and supporting the re-organization of the archiving system of medical records.

Lastly, promotional tools for the observance of treatment have been created, printed and distributed to 12 health facilities and support groups. Sessions to train workers in the use of these tools have also taken place, and their use was supervised during the on-site training / mentoring sessions and during visits to support groups.

Strengthen the institutional capacities of national actors to guarantee sustainability of the results

Throughout the year, Solthis has provided technical support to NAS and NACP by actively participating in working groups on subjects of caregiving for adults and children as well as Prevention of Mother to Child Transmission (PMTCT). In particular, Solthis has participated in the updating of national guidelines on treatments based on the recommendations of the WHO.

Solthis has also provided technical support to NACP by devising national training manuals on PMTCT, pediatric care and early infant diagnosis as well as the distribution of training-of-trainer courses and cascading training courses in 3 of the 4 regions of Sierra Leone.

In view of the importance of HIV-tuberculosis coinfection, in 2016, Solthis joined the technical working group to review the national strategic plan to combat tuberculosis for the period of 2016-2020.

In addition, thanks to the support of Solthis, the list of medicines that are essential for HIV treatment was updated and added to the SIGL (System of Informations and logistical management tools) and to the national list of essential medicines.

Outlook

In 2017, teams from Solthis will continue to support capacity building for NETHIPS and other support groups, further strengthen the capacities of intermediary-level authorities and continue to improve the caregiver-patient relationship.



Donation of small medical equipment to the Rokupa Hospital, here a baby scale was given within the Empower project.

“Solthis has truly helped us to improve our knowledge and our practices, thanks to the training and the clinical mentoring sessions given by its team.”

Mariama Sheriff, HIV Nurse Counselor, Lumley Government Hospital


251

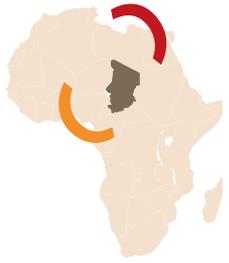
healthcare professionals trained

300

hours/month of clinical and pharmaceutical mentoring


5,417

people living with HIV were monitored in the 12 centers supported



Chad



Support to update key figures of the HIV-infected patient cohort under ARV treatment

Key facts

- **Launch:** 28/12/2015
- **End of project:** 31/12/2016
- **Budget 2016:** €67,000
- **Source of funding:** Initiative 5%, Channel 1
- **Beneficiaries:** Ministry of Health
- **Partner:** TeAM

Issues

As part of the efforts to strengthen the HIV data management system in Chad, Solthis was requested to provide technical assistance to support the work on estimating the number of HIV patients who are under ARV treatment on a regular basis. This number is a key indicator which allows for the quantifying of supplies and the planning of the human and financial resources of the National programme to fight HIV.

Activities and results

This study provided an accurate estimate of the HIV-Positive patient cohort under ARV treatment, and other key indicators of the cohort. The results will help to assess the progress made in decentralizing HIV care and to identify new strategies to overcome barriers to retention in HIV care.

This technical assistance enabled us to:

- quantify the HIV-positive patient cohort under medication, within each HIV healthcare center and by therapeutic categories;
- describe the clinical and biological profile of patients under ARV treatment
- describe the follow-up frequency rate: the rate of “lost to follow-up” patients, care retention rate at 12 and 24 months; delays and anticipation of consultation appointment, rate of transferred patients and patients receiving HIV care; number of transferred and dead patients etc.
- assess the performance of the national HIV data management system and make recommendations for its enhancement. An implementation plan has been fixed to strengthen the system according to the study results and recommendations by the steering committee

84

hospitals investigated

180

health workers supervised

34,000

patients included in this study

Objectives

Estimate the active list of patients and other indicators for the monitoring of HIV patient groups that are under ARV treatment in Chad.

Evaluate the performance of the data management system for HIV care management and contribute to its improvement.

In 2016, in collaboration with the consulting firm TeAM, the lead partner of the project, and the Ministry of Health, Solthis carried out the first phase of its support for the study on reviewing the quality of data of the national health information system (“Data quality review”), which was funded by the Global fund. Phase 2 is set to take place in 2017.



Cameroon – Ivory Coast – Burkina Faso



Key facts

- **Launch:** October 2016
- **Duration:** 3 months
- **Where we work:** Cameroon, Ivory Coast, Burkina Faso
- **Budget:** €30,000
- **Source of funding:** Sidaction
- **Beneficiaries:** 6 associative structures supported by Sidaction
- **Associative partners:**
 - REVS+ à Bobo-Dioulasso, AAS and ALAVI in Ouagadougou
 - Alternatives Cameroun and SWAA littoral in Douala
 - Espace Con fiance in Abidjan

6

community pharmacies supported

1

“mini-Vidal” created for ARV treatment, STI and OI medicines

28

persons trained

Building capacity in community pharmacies

Issues

Community-based pharmacies contribute to expanding access to treatments for HIV, opportunistic infections and STIs (Sexually Transmitted Infections).

Managed within community structures, these pharmacies sometimes have dedicated personnel to work in the pharmacies, but they need to have their capacities strengthened in this matter.

It's for this purpose that Sidaction has called on Solthis for its expertise. This is part of Sidaction's programme on strengthening healthcare services and community support for key populations in 5 African sub-Saharan countries.

Activities and results

Solthis's support has made it possible to establish a diagnosis of priority needs for every community pharmacy. Based on this diagnosis, a plan of capacity building was made. Teams in charge of community pharmacies were trained in the correct use of different stock management tools, order placing procedures, dispensation techniques, appropriate use of drugs as well as organizing and prioritizing activities in a pharmacy.



Training of teams in charge of community-based pharmacies.

Objective

Strengthen the capacities of teams in charge of pharmacy activities in the 6 associative structures supported by Sidaction and help them to improve their skills.

Moreover, implementing this plan has enabled us to equip the pharmacies with technical data sheets, update the recommendation guidelines on pharmacy management and to create a specific « mini Vidal » for ART and medicines that treat opportunistic diseases and STIs.

The teams also used an auto-evaluation grid to evaluate the effectiveness of their activities based on the good practices of dispensation and pharmaceutical management, as well as to monitor how they put their knowledge into practice, their activities, recommendations and defined goals.



Mali / Niger



Jades Project: Promoting sexual and reproductive health among adolescents

Key facts

- **Launch:** January 2016
- **Duration of project:** 3 years
- **Where we work:** Niamey and Maradi in Niger; Bamako and Ségou in Mali
- **Budget 2016:** €328,790
- **Source of funding:** Initiative 5%
- **Partners for the implementation of project:**
 - Equilibres & Populations NGO
 - Ministry of Health of Mali, Ministry of Health of Niger
 - Socio-anthropological Laboratory Miseli
 - Associations in Mali: Walé in Ségou, Asdap in Bamako
 - Association in Niger: Lafia Matassa
- **Beneficiaries:** Youngsters - community health centers and reference hospitals – 2 middle schools /high-schools – parents of pupils- community leaders

Issues

In consortium with the French NGO Equilibres & Populations as well as its partners in the field (socio-anthropological laboratory, associations from the civil society, local and national authorities), Solthis carried out a pilot operation to promote adolescents' sexual health in order to reduce new HIV infections and the mortality and morbidity rates related to HIV/AIDS. Young people who are between 15 and 24 years' old make up 39% of the entire group of new HIV infection cases. The particular vulnerability of this demographic group regarding HIV infection is aggravated by its low access to health-care services that are adapted to its needs and young girls suffer even more from this vulnerability. Infection risks are high also due to limited knowledge of STIs/HIV, access deficit of quality information and socio-cultural factors related to taboos concerning sexuality.



Strategic workshop in Mali

▮ Objectives

- Implement and evaluate innovative strategies promoting sexual health for adolescents in order to reduce risky behaviors and new infections among adolescents
- In Niger, improve access of HIV-positive adolescents to quality care which is adapted to their situations



Identifying young peer-educators in Niger

📌 Activities and results for 2016

Thanks to this project, 998 youngsters were educated on early pregnancy prevention and STI.

A situation analysis was carried out in Mali and in Niger on knowledge, practices and socio-cultural determinants of Sexual and Reproductive Health (SRH). It was done with a participatory approach, via literature reviews of current SRH initiatives, of two socio-anthropological studies on SRH determinants for young people and their access to healthcare services, as well as of another study on care management for infected adolescents in Niger.

Following this phase of research and analysis, workshops to share the results were organized with all parties involved in this project: young people, doctors, paramedical staff, institutional and associative participants. After that, workshops on strategic planning were also held, bringing together 40 participants in Mali and 50 in Niger. These workshops have allowed us to understand needs regarding knowledge of the right to sexual and reproductive health and to look into ways to reach out to adolescents both in school and out of school, a demographic group which has up to now been little involved with our activities.

In the same year (2016), sessions to test with advanced strategy were organized in Mali and Niger, thus enabling 511 youngsters of which 145 girls aged 18 to 24 to be tested.

Young peer-educators (30 per country) were trained in early 2017 to strengthen their knowledge in the field of SRH and leadership. This training allowed them to moderate events such as debates and educational talks.

“Because nowadays it is still taboo to talk about sexuality, especially when it’s between adults and youth. The best way to talk about it is among the youth themselves.” a young peer-educator

📌 Outlook

Continue to empower young people and allow them to fully become the stakeholders of the project and to discuss their emotional and sexual life without concerns thanks to the SRH knowledge they possess. With the support from Equilibres & Populations and Plateforme Elsa, strengthen the capacities of local associations so that at the end of the project, they will be able to continue with the innovative strategies introduced in the project and contribute to making the change.


998
adolescents educated


511
HIV tests conducted

150
participants to
4 workshops



Guinea / Niger



Project CASSIS: Improving access to HIV care and strengthening the health information system



Key facts

- **Launch:** 2013
- **Duration of project:** 3 years
- **Where we work:** Guinea & Niger
- **Budget 2016:** €213,912
- **Source of funding:** Initiative 5%
- **Partners for the implementation:**

In Guinea: Executive Secretariat of the National Committee for the Fight against AIDS (SE/CNLS), 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)

Issues

Project CASSIS aims to strengthen the implementation and monitoring of efforts to fight HIV/AIDS in Niger and in Guinea.

In order to support the decentralization of care, this project « opened up » 15 new sites in 6 district hospitals in Niger (in the regions of Dosso and Tillabéri) and in 9 health facilities in Guinea.

An innovative approach (dubbed « patronage ») was trialled in Niger and yielded success, with a pool of national experts set up to guarantee care sustainability and the monitoring of actions.

This project has also made improvements to the HIV health information system by strengthening the capacities of stakeholders involved at the three levels of the health information system (national, intermediary and on site).

► Objectives

- **Improving both the decentralization of care and the quality of patient care management** by strengthening the capacities of caregivers and optimising the organisation of care.
- **Strengthening health data collection and reporting systems on site**, at intermediary and central levels, as well as the capacity for strategic analysis of this data to enable effective national management.

Activities and results for 2016

Guinea

Access to care and quality of care

The first half of 2016 has seen the conclusion of mentoring sessions at the sites, the implementation of two in-depth training sessions and other supervision missions at all sites. One inter-site meeting at Conakry attracted 46 participants and 6 facilitators.

Health information system

Solthis held a training session on the use of collection tools and data analysis for 50 healthcare providers from HIV care sites in Guinea. Joint supervision missions took place in all of the 13 sites receiving assistance. A second workshop to strengthen the retro information of HIV data was held and there Solthis continued to give its support to the Ministry of Health to strengthen its National Health Information System.

A workshop to deliver results of project CASSIS was organized by Solthis and the PNPCSP on 18th May 2016, in collaboration with other members of the consortium, CNLS and UNAIDS.

Niger

Access to care and quality of care

A basic training session involving 15 doctors and paramedics who had been newly appointed to work in the 6 hospitals in the regions of Tillabéri and Dosso was held in Niamey. Sponsors and the medical team from Solthis conducted post-training mentoring and supported all the other health workers remotely.

Health information system

Personnel in charge of epidemiological monitoring received post-training support on data analysis and the creation of quarterly reports on care on site. Teams from the Ministry and directors from the health information and programming service were directly involved in the post-training monitoring missions in order to achieve greater ownership of supervision techniques.

A workshop to deliver the results of project CASSIS was organized by Solthis and ULSS on 5th April 2016, in collaboration with CISLS, regional sponsors, as well as both the national and international partners working in the field of global health.

Outlook

Within the framework of the new grants from the Global Fund, Solthis was chosen by CNLS as the grant's sub-recipient to carry out work in Guinea. The Agir VIH software developed in the context of project CASSIS was put to use and trainers from Solthis put their expertise to the service of this ambitious project which aims to expand and de-centralize care.

In Niger, sponsors' experiences were reviewed in the context of the new grant from the Global fund. Their experience is a guarantee of the sustainability of the very first positive results obtained.

In addition, promoting the delegation of tasks to paramedics as an attempt to compensate for the insufficient availability and mobility of trained doctors should remain a priority in order to strengthen HIV care quality in Niger.



new HIV care sites became operational in these two countries



caregivers were trained: 322 in Guinea, 558 in Niger



managerial personnel were trained for patient monitoring in Guinea



HIV care sites were supported as part of the work on Health Information System carried out in these two countries



sites were computerized in Guinea for the purpose of data collecting

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.

Thanks to its multidisciplinary expertise, Solthis supports operational research in several ways: by contributing to field actors' reflexion, 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.

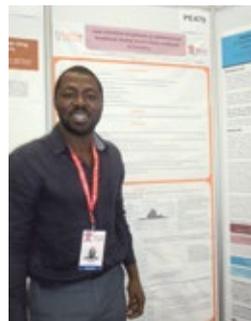
Operational Research: Our scientific communications in 2016

CROI 2016: 23rd Conference on Retroviruses and Opportunistic infections - Boston, 22nd-25th of February, 2016

Solthis presented at the conference, a poster of its study on "Access to HIV care in health districts affected by Ebola epidemic in Sierra Leone".

Launching of the Francophone Network of Neglected Tropical Diseases: Solthis is one of the steering committee members

In April 2016, Louis Pizarro and Guillaume Breton participated to the official launching of the Francophone Network of Neglected Tropical Diseases (NTDs) at the initiative of the National Alliance for Life and Health Sciences (AVIESAN). This network aims to federate and promote French Expertise in the NTDs.



Presentation of Solthis' poster at the IAS 2016

AIDS 2016 – AIDS International Conference– Durban, 18th -22th of July 2016



A poster of our study on low retention among patients under ART treatment during the Ebola epidemic in Conakry was presented at AIDS 2016 and quoted in "**La lettre de l'infectiologie**" on Wednesday, 20th of July in the article "Impact of Ebola epidemic on HIV care management in Conakry". The article highlights the fact that "the involvement of an NGO like Solthis in operational research projects enable knowledge enrichment from field data and can boost advocacy and response to future epidemics".

ASLM 2016 – 3rd Conference organized by the African Society for Laboratory Medicine – Cape Town, December 3-8 2016

As part of the OPP-ERA project implemented by a consortium of French actors, Solthis co-organized a satellite symposium during ASLM 2016 on “How to reach the third ‘90’ goal in West and Central Africa” with Merieux Foundation, MSF and UNITAID.

Christine Rouzioux (virologist - laboratory of the Necker Hospital in Paris) also presented for OPP-ERA consortium, a poster on “Implementation of HIV-1 viral load testing in four West and Central Africa countries using Open Polyvalent Platforms (OPP)”.

AFRAVIH 2016: 8th International Francophone Conference on HIV/Hepatitis - Bruxelles, 20th -23rd of April, 2016

During this major gathering point for francophone actors involved in the fight against HIV/AIDS and Hepatitis, Solthis had a wide presence:

3 oral Communications

- Limited access for people living with HIV to antiretroviral treatment during 2014-2015 Ebola outbreak: case of Guinea and Sierra Leone - 2 oral presentations by Jacques NDAWINZ
- Pilot experience for the decentralization of HIV care global management in Niger, presented by Roubanatou ABDOULAYE-MAMADOU

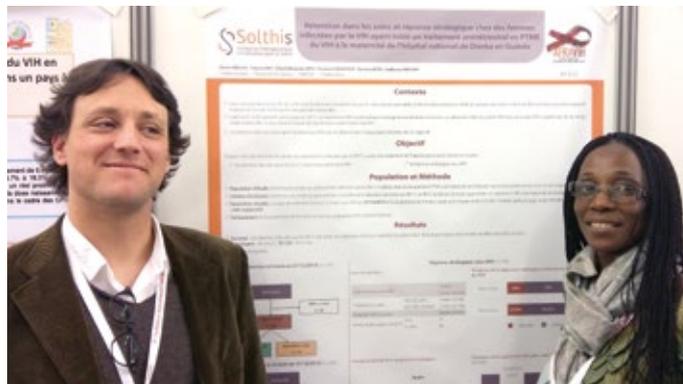
Mini-reading on the evolution of international funding by Louis Pizarro

3 Posters

- Retention and virological suppression among HIV-positive women by initiating an antiretroviral therapy for the prevention of mother-to-child HIV transmission at Donka National Hospital maternity in Guinea
- Age impact on long-term retention among children in the pediatric cohort at Gabriel Toure University Hospital, Bamako, Mali
- Health care management of central nervous system’s opportunistic infections among hospitalized people living with HIV in Guinea

Symposiums Participation

- AFRAVIH Symposium “Institutional, associative and community actors’ synergy, a key component to efficiency” realized in partnership with Aides, Sidaction, Elsa Platform, AIDS Prevention and Solthis” - with joint interventions of Louis PIZARRO (Solthis) and Renaud Becquet (ISPED) “Researchers and NGOs at the center of an action-research”



- ELSA Platform Symposium entitled “Autonomous and competent actors in the fight against HIV: rethinking support! - Intervention of Etienne Guillard (Solthis): “Community organizations, essential components for sustainable strengthening of health systems – what synergies, what interactions to be established?”



For the occasion, Solthis presented at the ELSA Platform stand, its “Tri-ARV pursuit” game: an innovative board game designed by Solthis and funded by Sidaction to test and strengthen knowledge of health professionals in HIV Care management.

Interventions and classes

- ◉ **Classes to Master's students of International Affairs programme at Sciences Po – Paris, January to May 2016.** Classes by Louis Pizarro, Solthis Chief Executive Officer, on “Non-State actors and Global Health”.
- ◉ **Biostatistics classes in the Faculty of Medicine at Pierre et Marie Curie University, Pitié-Salpêtrière site, January to March 2016.** Classes by Jacques Ndawinz, Health Information system Manager at Solthis.
- ◉ **Intervention at ISPED-Bordeaux in Public Health Master's, 2016.** Etienne Guillard ensured coordination and gave classes to the “Medicines and health products in countries with limited resources” teaching Unit.
- ◉ **Workshop – Public Health Master's – ISPED – Bordeaux. Mars 2016** Louis Pizarro organized one-day workshop on NGO and Global Health Issues.
- ◉ **Classes to the International cooperation, humanitarian action and policies development Master's at Paris I Pantheon-Sorbonne University - Paris, March 2016.** Classes by Louis Pizarro in “Global Health”
- ◉ **Classes to the Humanitarian Action Master's students – Paris Est Créteil University (UPEC), October 2016.** Classes by Louis Pizarro in Global Health.
- ◉ **Intervention to the Pharmacy Careers Forum at Paris Sud University, Faculty of Pharmacy, October 2016.** Etienne Guillard intervened about international public health, humanitarian and development pharmacists.
- ◉ **Workshop – Master's of public Health at Pasteur/CNAM in November 2016.** Louis Pizarro animated a half day workshop on HIV care management and on development issues.

Forums and Exhibition



- ◉ **Pharmagora Plus exhibition - April 2016:** Etienne GUILLARD, Solthis Director of Health Systems and Services Strengthening and ReMeD administrator intervened during the round table discussion on “Diagnostic and screening tests in pharmacy: Cases of Malaria and AIDS”.



- ◉ **Salon des Solidarités - May 2016** Solthis participated from IDEAS stand, and Rachel Domenach, Solthis communications manager, co-hosted IDEAS oral session on the benefits of IDEAS labeling for an association.

- ◉ **Intervention during the XXI Pharo News, Marseille, October 2016** on “Health crisis: ensuring continuity of care for chronic diseases -challenges of health products supply”
- ◉ **Forum on Public Health Careers, Pasteur CNAM School in Paris, November 2016 -** Guillaume Breton, Solthis scientific director was one of the speakers.



In 2016 Solthis published the 17th issue of its scientific letter.

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.

Scientific and Academic Partners

- 🕒 **Pitié - Salpêtrière, Necker and Bichat University Hospital Centres in Paris, and in Bordeaux** collaboration on operational research projects, internships for students
- 🕒 **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
- 🕒 **Pierre et Marie Curie University, Paris Est Créteil (UPEC) and ISPED** (Institute of Public Health, Epidemiology and Development)
- 🕒 **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 Paris** (Institute of Political Study in Paris): intervention in the International Affairs Master's, student internships at Solthis headquarters and in the field, partnership with the Alumni African Division
- 🕒 **IMEA** (Institute of Medicine and Applied Epidemiology): presentation to the IMEA DISs, student management
- 🕒 **RAF-VIH** (African Network for HIV training)
- 🕒 **LASDEL** (Laboratory of study and research on social dynamics and local development): intervention of Louis Pizarro, Solthis CEO at LASDEL conference on Neglected problems of Health Systems in Africa, early 2017
- 🕒 **Pharmacy University of Chatenay-Malabry, Caen Faculty and Paris South University** Interventions and teaching
- 🕒 **GERES** (Study group on risk exposure of health workers)
- 🕒 **MISELI** (Research and Training Association on Local Dynamics' Anthropology)
- 🕒 **EHESP** (Public Health School): students internships
- 🕒 **AVIESAN Sud** Francophone Network for NTD (neglected tropical diseases) and coordinated tuberculosis action
- 🕒 **ONUSIDA/JURTA** Technical Assistance Group in West and Central Africa
- 🕒 **AFRAVIH** (Alliance Francophone des acteurs Français contre le VIH)
- 🕒 **IRD**: Institute of Research and Development
- 🕒 **Institute of Tropical Medicine of the Army Health Service** (Ecole du Pharo) – Marseille

Associative partners

Solthis is member of several platforms and inter-associative networks



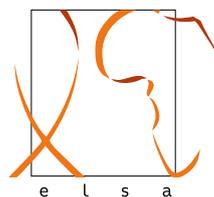
Collectif Santé Mondiale:

This health collective has been founded in 2015 by 9 international solidarity organisations to urge France to Keep its financial and political commitments to global health



Coordination Sud:

Solthis is member of this international solidarity organizations' platform and is the leader of the health and development commission since December 2012.



ELSA Platform:

Solthis has become a member in 2015 of ELSA platform (Together Lets's Fight against AIDS in Africa), a consortium of French associations involved in the fight against HIV/AIDS (Le planning Familial, Sidaction, SIS Réseau, Solidarité Sida and Solthis). More than 80 African community associations are partners of the platform.



IDEAS:

is an association of general interest for fostering philanthropic initiatives. Solthis was awarded the IDEAS Label in 2013, which attests to good practices in terms of Governance, financial management and monitoring of the effectiveness of actions

Other associative partners

- o Coalition +
- o Convergences
- o Crips
- o Djantoli
- o ENDA SANTE

- o Les Amis du Fonds Mondial Europe
- o MSF
- o REMED
- o VIH.org



ADVOCACY

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
- 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.

Right to health for all

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 and to the empowerment of patients and health systems'users.

Our Advocacy Actions in 2016

Taking action with our partners

Since 2012, Solthis has been the leader of the Health Commission of Co-ordination Sud member NGOs, and works in cooperation with French associations for the promotion of health and international solidarity, as well as with institutional actors and global organizations such as the Ministry of Foreign Affairs and International Development (MAEDI), UNAIDS or the Global Fund. Solthis is also a founding member of the "Collectif Santé Mondiale" (Global Health Collective).

Urging public authorities to fulfill France commitments to Global health

In 2016, Solthis continued advocating for France financial commitments to Global Health, particularly the global funds to fight HIV, Tuberculosis

Memuna Jaral Jalloh, Solthis PMTCT Manager in Sierra Leone was chosen to represent UNAIDS campaign "Ending AIDS" - before the High-level meeting against AIDS June 8 to 10, 2016 – The carried message claimed the need to involve men in preventing Mother -to - child transmission of HIV virus (PMTCT).



and Malaria whose replenishment for a three-year period 2017/2019 took place in September 2016 in Montreal. Under risks of budget cuts, the maintenance of the French contribution to the Global Fund and Unitaid was relieving news. Nevertheless, Solthis continues to work alongside other associative partners, to call the attention of the government on the lack of sound financial investment to realize France's commitment to promote sexual and reproductive health rights, fight against pandemics and strengthen healthcare systems. More broadly, to respect the commitment of the GNI's 0.7% allocated to the French ODA, of which 0.1% should be devoted to health. Solthis mainly communicated on the campaign launched by Coordination Sud during fall 2017: "Budget 2017: still not good, France must do better!" (Budget 2017: le compte n'y est toujours pas, la France doit mieux faire!").

Sharing our expertise on francophone countries and implementation of Global Fund's Grants in fragile states

Solthis also participated with Coordination Sud and other stakeholders in consultations on French global health strategy.

Solthis contributed as well to the study on "Performance of francophone African countries in the fight against pandemics: analysis of tools for the evaluation of international programs and prospects for renewal" financed by the MAEDI and in partnership with Paris 1 Panthéon-Sorbonne, SESSTIM and ANRS.

Finally, in line with its report "Risk management in fragile states: health first!" and drawing on its experience as a sub-recipient, Solthis pursued advocating with Global Fund teams for the need to ease financial risk management, access to Global Fund's Grants and their implementation in fragile states, also called "Challenging Operating Environment".

Key public stances in 2016

“Mr President, let's stand for a genuine “solidarity pact”! Credit to Coordination Sud for the press box initiative which was joined by 70 organizations, including Solthis, to call solemnly for the adoption of a genuine

solidarity pact when the government is rather undertaking a hyper-security position. The call was published on the 12th of February, 2016

Unfulfilled commitments by World most developed countries: G7 is still relying on statements, yet no action - 7 NGOs, members of “ the Collectif Santé Mondiale” including Solthis came together to denounce G7 bare statements without concrete actions whereas health was a priority on its agenda.

Call on the Government by 5 French NGOs to confirm in Montreal, the French contribution to the Global Fund and to complementary mechanisms such as UNITAID. The campaign was launched on the 15th of September 2016, on the eve of the 5th International Replenishment conference of the global funds dedicated to fight AIDS, Tuberculosis and Malaria. It was co-authored by Solthis and 4 other NGO members of the Collectif Santé Mondiale.



Solthis supported Coordination Sud campaign to advocate for a strong ODA in the 2017 French budget.



FINANCIAL REPORT

SIGNIFICANT FACTS 2016

Solthis is a non-profit organization, recognized to be of general interest 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 2016 financial year, the association approved a budget of 4.3 million Euros and a net income of 53,000 Euros, of which 19,000 Euros realized from lucrative activities. The association's funds totaled 381,000 Euros at 31st of December 2016.



Budget of

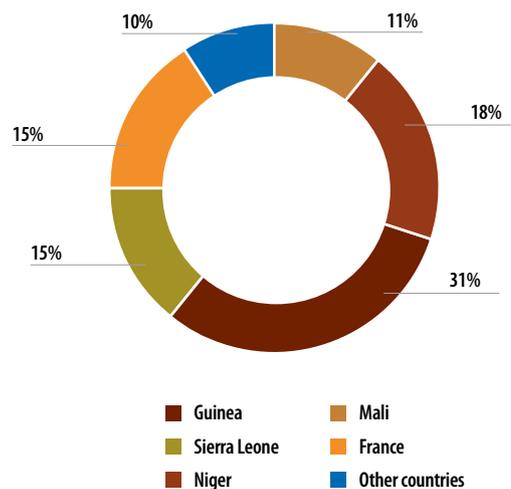
4.3 million euros

EXPENDITURE

2016 was defined by the signing of major contracts and a greater diversification of funding sources, notably with the project "Empowerment of users for quality HIV care in Sierra Leone" co-funded by AFD (Agence Française de Développement), the European Union, the City of Paris and the Bettencourt Schueller Foundation.

Solthis strengthened its presence as a key player in the area of technical assistances, with projects in Mali for assisting the Ministry of Health in training and supervising healthcare workers, a project funded by the Global Fund – HIV NFM Grants in Mali (Solthis is a sub-recipient of UNDP); in Niger for providing technical assistance to the Ministry of Health – HIV unit to train healthcare workers, patient education and psychosocial support, a project funded by the Global Fund; and also in Chad for giving technical assistance to update the number of HIV patients currently on antiretroviral treatment, a project funded 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 2016 shows significant growth of our activities in Guinea (linked in particular to the OPP-ERA Project and the increasing number of the Global Fund programs), a slight decline in Mali and Niger, and a slight reduction in Sierra Leone pending the signing of new projects.



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.

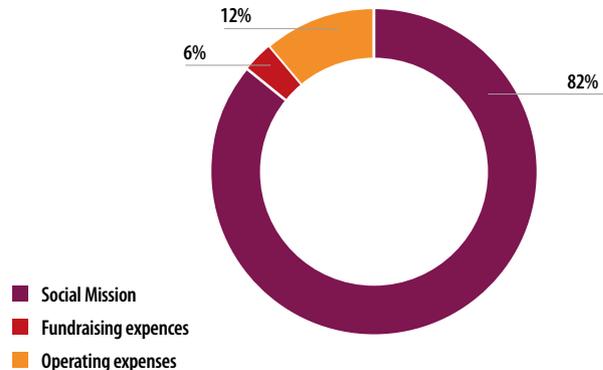
• **Social mission France** includes expenditures for all activities undertaken in France (such as conferences or research work on the West Africa area).

• **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' support committee was created.

Operating expenses: the headquarters of the association, previously located in Paris, was relocated to Bagnolet on October 3rd 2016. It oversees operational activities of the field teams and helps ensure the link with academic, institutional and associative partners.



FINANCIAL TRANSPARENCY

Certification of 2016 accounts by PricewaterhouseCoopers

Auditors were approved during the Solthis AGM, 26th June 2017 and certified by the PricewaterhouseCoopers Auditors audit and accountancy office.



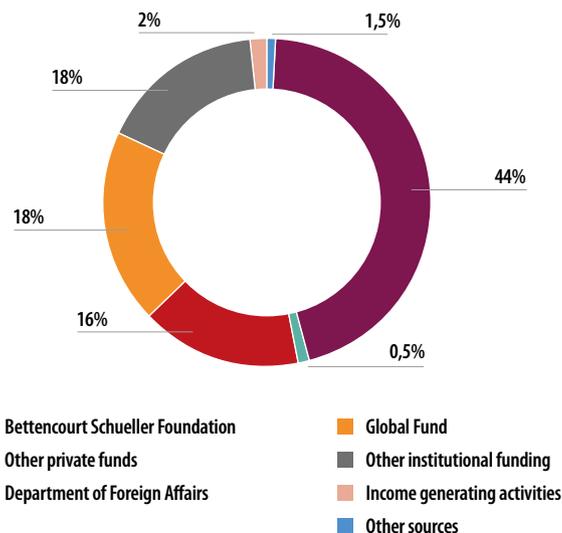
IDEAS LABEL: Recognition of the quality of governance, financial management and monitoring of the effectiveness of Solthis' work

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 REVENUES

Solthis assumed the leadership of the OPP-ERA project's second phase for access to viral load testing in four Western and Central African countries.

In Sierra Leone, Solthis started the implementation of its first project "Empower" co-funded by AFD. In Mali and Niger, Solthis launched JADES, a project promoting sexual and reproductive rights among adolescents, funded by 5% Initiative-Channel 2. Solthis also provided technical assistance to ULSS in Niger and to CSLS in Mali, activities funded by the Global Fund's HIV grants. Thanks to the co-funding from ANRS and Paris City, the operational research project DIAVINA was launched in Guinea. Solthis was also selected in Guinea as the sub-recipient of the Global Fund-NFM Government and Non-Government Sections. Lastly, Solthis provided Chad technical assistance, an activity funded by 5% Initiative-Channel 1.



EXPENDITURE STATEMENT

EXPENDITURE	
1. Social Mission	3,147
1.1 Social Mission France	34
1.2 Social Mission Abroad	3,113
<i>Operating expenses</i>	2,275
<i>Support to operations</i>	838
2. Fundraising expenses	211
3. Operating Expenses	469
I. Total expenditure for the financial year	3,828
II. Allocations to provisions	-
III. Allocated funds carried forward	415
IV. Surplus income for the financial year	53
V. Overall total	4,296

REVENUE	
1. Resources soit Resources raised from the public	-
2. Other private funds	1,686
3. Grants and other public subsidies	2,043
4. Other Revenue	145
I. Total revenue for the financial year	3,874
II. Reversals of provisions	-
III. Retained designated funds from previous years	422
IV. Variation of use of designated resources raised from the public	-
V. Deficit for the financial year	-
VI. Overall total	4,296

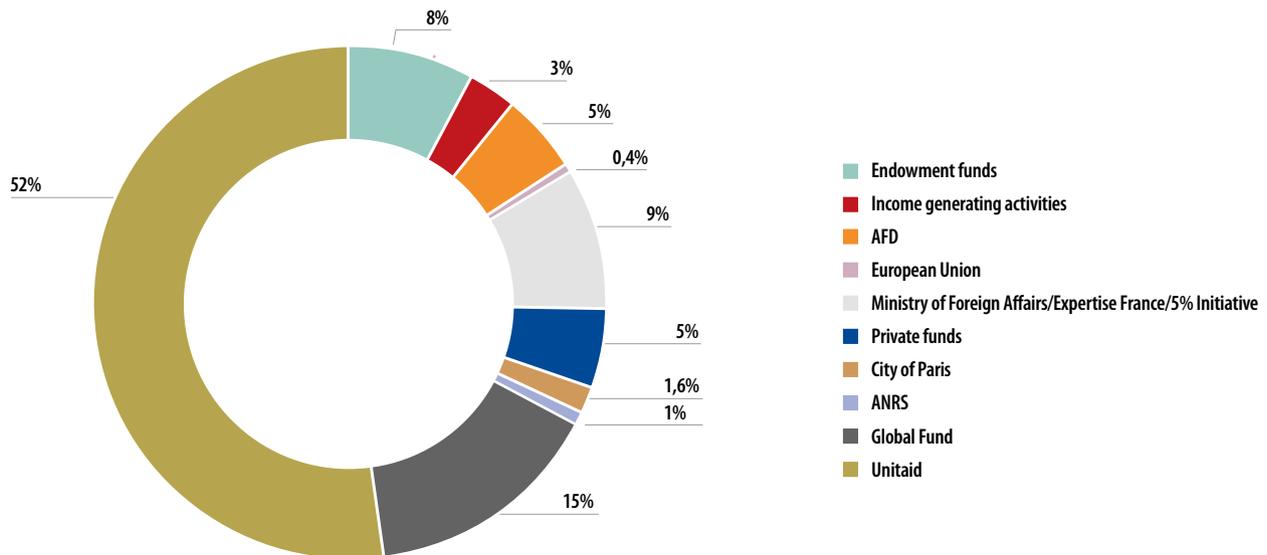
OUTLOOK 2017

The 2017 budget approved by the Board of Directors amounted to 8.9 million Euros. In effect, some of the work undertaken in 2016 in the search for new funding resulted in opportunities for 2017:

- AFD has agreed to co-fund the project to improve living conditions of prisoners in Niger.
- Solthis became a partner of the consortium led by the University of Bordeaux for the project "TB Speed", a research project pre-selected by Unitaïd to improve children early diagnosis of tuberculosis. If the project is approved by Unitaïd, Solthis will be in charge of its implementation in Sierra Leone.

→ Solthis is a member of the RIPOST project consortium led by AMP (Agence de Médecine Préventive). This project aims to improve public health capacities in French-speaking country members of the Economic Community of West African States (ECOWAS) with funding from AFD allocated to the Western African Health Organization. Solthis will be in charge of the project implementation in Guinea.

→ Solthis was selected by 5% Initiative-Channel 1 for the implementation of a technical- assistance project in Niger, which aims to strengthen ULSS capacities in monitoring and evaluating health-care management activities for PLWHIV.



Our financial partners

IN 2016, THE FOLLOWING PARTNERS SUPPORTED SOLTHIS FINANCIALLY:



Solthis received grants from AFD for the project “Empowerment of users for quality HIV care in Sierra Leone (2016-2018)” through the NGOs partnership section of AFD.



ANRS co-funds the operational research project ANRS 12344-Diavina in Guinea and granted Solthis an additional funding for the project OPP-ERA.



Expertise France is France’s official agency for international technical expertise, created to address the ever-growing needs of developing and emerging countries in the matter of public policy assistance. As part of the implementation of the second phase of the Twin2H project (Twinning for Hygiene in Hospitals), Solthis is funded by Expertise France to carry out activities to improve hospital hygiene at the Guéckédou prefectural hospital and the Nzérékoré regional hospital in Guinea.



Since its inception in 2003, the Bettencourt Schueller Foundation has given support to Solthis. In 2016, the Foundation’s financial support has enabled us to co-fund mainly two projects on:

- Improvement of the living conditions of prisoners in Niger
- Empowerment of users for a quality HIV care management in Sierra Leone



The Global Fund to fight AIDS, Tuberculosis and Malaria

Since late 2015, Solthis has been the sub-recipient of CNLS (National Committee for the fight against AIDS) under the Global Fund New Funding Mechanism (2015-2017) – Governmental Section in Guinea. In this context, Solthis carried out activities in the fields of study and research, training and capacity-building of HIV care stakeholders, development of health information systems, pharmacies and laboratories.

Under the Global Fund New Funding Mechanism, Solthis also became a sub-recipient of the international NGO PSI (Population Services International), main recipient of the Global Fund non-governmental section in Guinea, to implement activities to improve the preventive services and access to healthcare for the key populations, to fight discrimination and stigmatization these people suffer and whose rights are regularly trampled upon.

In addition, Solthis is a sub-recipient of UNDP in Mali under the HIV New funding mechanism for the implementation of a 2-year technical assistance programme to the Health Ministry for the training and follow-up evaluation of its healthcare workforce.

Lastly, Solthis was requested in Niger by the CISLS (Office for Intersectoral Coordination of the Fight against STIs/HIV/AIDS), main recipient of the VIH FM-NFM, to ULSS through capacity building: training of healthcare personnel, patient education and psychosocial support.

Our financial partners



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 2016 on two technical assistance missions funded by 5% initiative – channel 1, to:

- Support the improvement of the DPHL information system for logistics and pharmaceutical management in Niger
- Support the updating of the number of HIV-positive patients under ARV treatment in Chad
- In 2016, Solthis received funding from the 5% Initiative Channel 2 to implement the JADES project in Mali and Niger (2016-2018), a pilot intervention to promote sexual health among adolescents in order to reduce HIV/AIDS-related new infections and mortality rate.

In addition, 5% Initiative also funds the CASSIS (2013-2016) starting 2013, a project which aims to improve access to healthcare and the information systems of HIV/AIDS programs funded by the Global Fund in Niger and Guinea.

Lastly, Solthis is a member of the RAFAScreen Project's executive consortium of which the lead partner is the Benin National Program against Tuberculosis (PNT). Funded by 5% Initiative, this project aims to improve tuberculosis diagnosis among HIV-positive patients and diabetics in Benin, Guinea and Senegal.

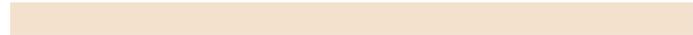


The City of Paris co-funds two projects: "Empowerment of users for quality HIV care in Sierra Leone" and project "Diavina" (HIV Virological Diagnosis and Initiation at Birth) in Guinea.



National HIV/AIDS Secretariat

NACP requested Solthis for its technical assistance in PMTCT and HIV paediatric care training under the project: "Empowerment of users for quality HIV care in Sierra Leone". NACP is a co-sponsor of this project.



Under the implementation of the Sidaction programme to strengthen community-based healthcare services and support the populations dubbed "key populations" in 5 West Sub-Saharan countries (Burundi, Mali, Cameroon, Ivory Coast, Burkina Faso), Solthis was requested by Sidaction for its technical assistance to strengthen associative pharmacies' capacities, the ones who are supported in this programme in the following 3 countries: Ivory Coast, Cameroon and Burkina Faso.



Through the EU Directorate-General for International Cooperation and Development (DG DEVCO) and the call for project of the European Instrument for Democracy and Human Rights (EIDHR) launched by the EU Delegation in the Republic of Niger, the European Union co-funds Solthis' project "Improving health and living conditions of prisoners in Niger".

Our financial partners



Since 2013, the global initiative for health Unitaid has been funding the OPP-ERA project which aims to improve PLHIV monitoring by opening up the viral load technology market to new suppliers through promotion of the Open Polyvalent Platforms (OPP) model.

The second phase of the project was officially launched for a 3-year period (2016-2019) on September 1st 2016. This project is implemented in 4 countries (Burundi, Ivory Coast, Guinea and Cameroon) by a consortium of partners led by Solthis and comprising ANRS, Sidaction and Expertise France.

We would also like to thank:

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

Devenson: skill-based sponsorship to support Solthis' headquarters in implementing the Sales Force software

PerMondo: voluntary translation of web documents for our website

Translation Without Borders: voluntary translation of various documents throughout the year

Webassoc: volunteer web professionals support for our digital communication

WE DEEPLY THANK ALL OUR PARTNERS!

Let's take action together



HEALTH IS A RIGHT FOR ALL !

Your donation is essential to our action.

TAKE ACTION WITH US!

The countries where we operate have sanitary and geopolitical contexts which might change rapidly as demonstrated by the Ebola outbreak. Dealing with these situations, especially to address the needs of patients and care professionals, requires great adaptability and responsiveness as well as rapid mobilization of resources, which could only be achieved through increasingly diversifying our sources of funding.

That is why we need your support to ensure the sustainability of our flexible and independent operation model, but also to meet the co-funding requirements of donors in order to extend and strengthen our activities as well as develop innovative pilot projects.

You are an individual?

You can support us by making an income-tax-deductible donation or by donating to the Solthis Foundation, which is also deductible from your solidarity tax on wealth. The Solthis Foundation is a foundation under the auspices of the Caritas France Foundation.



On November 22nd 2016, the Dixtet Company performed at Adyar Theater in Paris to raise funds for our project in Sierra Leone.

You are a corporation or a foundation?

You can support us in different ways by choosing in the list below the one that suits you!

A direct donation: by funding all or part of a Solthis project. Your donation is deductible from your corporation tax.

An activity to mobilize your employees: a sport challenge, a playful fundraising at an exhibition stand and/or on-line nice tools to enhance the internal cohesion of your company, these actions may be of different types.

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

Skill-based and in-kind sponsorship: equipment, information and communication technology, vehicles.

We are at your disposal if you wish to devise a personalized partnership with us.

For more information on how to support our projects and to learn more about our action:

solthis.org/en/how-to-act-together

You can also make a donation on

www.solthis.org

GLOSSARY

AD	Advocacy	PLWHA	People Living with HIV/AIDS
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



**Health is a right for all
Take action with us !**



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