

2024 ANNUAL REPORT

Health is a right.
Having access to it is vital.
LET'S ACT TOGETHER



 **Solthis**
Committed expertise in health



Acknowledgements

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Prof. Yazdan YAZDANPANA, Head of the Department of Infectious and Tropical Diseases at Bichat Hospital in Paris, Director of ANRS-Emergent Infectious Diseases

Two General Assembly meetings were held, on 19 June and 18 December 2024.

Two meetings of the Board of Trustees were held, on 19 June and 18 December 2024.

[Learn more about our governance](#)



EDITO

This report is being published following a fruitful year in 2024 for Solthis, despite upheavals in global health and global challenges around international solidarity.

The significant and irreplaceable US aid cuts come following other major cuts in official development assistance in Europe, including in France, which has seen a decrease of nearly 40% in 2025. As humanitarian and longer-term needs continue to grow as a result of socio-economic, climate and health crises and the multiplier effect of conflicts, this reduction in funding is accompanied by worrying discourse and standpoints on the importance of international solidarity.

The impact is terrifying and immediate: it is estimated that 100 million people are being deprived of access to basic care, resulting in millions of preventable deaths. The fact that millions of women will no longer have access to family planning services will lead to millions of unintended pregnancies and maternal and child deaths. In the field of HIV and AIDS, we risk seeing a resurgence in the epidemic as a result of prevention interventions being stopped and we fear millions of deaths as a result of care and treatment being discontinued.

In the countries where Solthis works, many partners are struggling to maintain their activities, after losing all their financial support suddenly overnight.

This is why Solthis is more committed than ever to supporting its national partners, ministries, frontline health workers, communities and patients, to find new solutions together to cope with the situation.

We are motivated to continue to take action, as we did successfully in 2024, through our commitment to health topics that are key for West Africa and new to Solthis: cervical cancer, triple elimination of HIV, hepatitis B and syphilis, as well as strengthening our interventions around climate-related health issues. This report sets out these interventions, in addition to our expert support to national partners to help them to consolidate and strengthen their work.

We are also mobilising our support across the world, in the search for new global health solutions, which are crucial at this time to defend our values - solidarity, humanity and commitment to serving communities as a whole. We also committed to political mobilisation, because we must push our governments to respect their commitments and recognise the importance of international solidarity in an interdependent world. Finally, we are committed to financial mobilisation, because we will have to find new ways to continue our work alongside our partners to serve populations most affected by the current crisis.

At this time of turmoil, each individual has and will have a role to play, through supporting our messages and interventions, among other things. Your support and your interest make a difference and enable us to continue our work for a more just and equitable world.

Dr. Roland TUBIANA,
Chair of Solthis



Dr. Serge BREYSSE,
Chief Executive Officer

- TRIBUTES -

On 21 December 2024 and 30 March 2025, Solthis mourned the death of two key figures in our organisation's history. They each in their own way represent the soul of Solthis and played a part in its development and evolution. We would like to pay tribute to their careers, their commitment and their generosity.

Their families, their loved ones and those from the international solidarity community who had chance to work with them are all in our thoughts.



Etienne Guillard,
former health services and
systems strengthening focal point

Etienne worked at Solthis for 16 years. It was part of his soul. He embodied the spirit of our NGO.

Etienne was a pharmacist by training and joined Solthis in 2007. He was very open-minded and curious, and he initiated and developed many different topics. Treatment education and care provider-client relationships were particularly dear to him, and he worked to put patients back at the heart of care provision. He was passionate about environmental issues and steered Solthis towards its work on health and climate and One health.

He joined MSF in 2023 as focal point for patient treatment education, and in parallel was writing a thesis on involving peer helpers and patient-experts in humanitarian contexts.

Étienne was bright, generous and always quick to help. We will continue to take forward the topics that were so close to his heart.



Dr. Sanata Diallo,
former Senegal Country Director, who was appointed
to the Board of Directors in June 2024

Sanata worked at the organisation for 17 years and was the backbone of Solthis. Sanata was a clinical dermatologist and a pioneer in the HIV and AIDS response. She created the NGO "Mieux Vivre avec le SIDA" in Niger, then led the National AIDS Programme for several years before joining UNFPA. She also initiated the «husband school» with the aim of involving men in the prevention of mother-to-child transmission of HIV.

In 2008, she joined Solthis in Niger as a medical coordinator. She held several positions both at the head office as Head of Health Services, and in Senegal as Head of Mission, during which time the ATLAS HIV self-testing project started up.

When she retired, she continued her commitment to Solthis by becoming a board member. We owe a lot to Sanata.



CLOSURE OF SOLTHIS MALI



In 2024, Solthis was forced to stop its projects in Mali. The office closure was a difficult decision because Solthis began its work in 2003 with a project in Mali to support access to HIV and AIDS treatment and care in Segou, which supported health personnel in hospitals and health centres in the region and organisations of patients living with HIV.

Solthis continued to work with its partners until 2024 on decentralisation and access to HIV testing and care for all, with support since 2019 to implement the Global Fund grant, through for example cascade coaching of more than 400 care providers throughout the country, and also through the ATLAS HIV self-testing project between 2018 and 2022.

Solthis also worked to respond to COVID-19 through the introduction of antigen testing at community level, and in health centres for symptomatic patients. Finally, Solthis rolled out its first project to promote the sexual and reproductive health of young people and adolescents in both Mali and Niger. The JADES project focused on preventing early pregnancies and the transmission of HIV and STIs.

We would like to thank all our partners: the Ministry of Health, the National HIV Programme, the Sector Coordination for AIDS, Tuberculosis and Hepatitis B, the Miseli social science research laboratory and the organisations ASDAP, AKS, AMPRODE Sahel, ARCAD Santé Plus, Danaya So and Soutoura.

We would like to thank all the health professionals, community workers, district staff, organisation members, communities and individuals we have had the chance to work with over 20 years, on ensuring more equitable access to quality care, combatting infectious and pandemic diseases and fighting for the right to health, especially for women and young people. We would like to thank everyone who has been part of our teams and those who have engaged with us.

KEY DATA 2024

18 projects

21 technical
assurances in
14 countries

5 intervention
countries with
permanent teams



129 employees

85%

of our teams
are based at
country level and
represent
15 nationalities



11M€
expenditure

EMERGING AND INFECTIOUS DISEASES

3 HIV self-tests

(2 finger-prick blood, 1 oral swab)
pre-qualified in Côte d'Ivoire as part
of national HIV self-testing transition
plan implementation.

128,790

pregnant women monitored as
part of the differentiated HIV service
delivery strategy scale up in Niger.

296

mentoring and coaching sessions
across all 35 health facilities as part
of the NFM3 project in Sierra Leone.

SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

4,552

awareness-raising outreach
sessions reaching 12,670
adolescents and young
people as part of the AGIR
project in Côte d'Ivoire.

9,000+

adolescents and
young people sensitised
about unintended
pregnancies, family
planning, STIs, HIV and
gender-based violence in
Guinea (PAJES project).

163

survivors of
gender-based violence
(146 women and 17 men)
provided with holistic care as
part of the SANSAS project
in Senegal.

87%

of female sex workers
who participated in self-
gynaecology workshops
run by the POUVOIR project
(Côte d'Ivoire) feel more
empowered.

MATERNAL AND INFANT HEALTH

Less than 1 day

turnaround for HIV viral load test results for newborns,
ensuring access to appropriate treatment and
significantly reducing HIV infections in newborns.

HEALTH AND CLIMATE



40

health professionals trained
on the risks associated with anti-
microbials, pesticides and their impact
on human, animal and environmental
health (THIELLAL project, Senegal).

ACADEMIC AND SCIENTIFIC WORK



16 publications in
scientific journals.



9

oral presentations, 5 posters,
1 symposium and 1 workshop at
3 international conferences.

KEY INTERVENTIONS 2024



Study on unintentional pregnancies in Guinea

One component of the PAJES project, which ended in 2024, was a study on unintended pregnancies (UP) in school settings in Guinea. The study showed that gender-based violence (GBV) is a key factor that contributes to UPs. Of the 678 female students surveyed, 21% had been pregnant between 2021 and 2023. 73% of these pregnancies were unintended. The study highlighted that different forms of violence were the cause, such as sexual violence imposed by partners (19% of female students surveyed), including spouses for young married women. In such cases, sexual violence is linked to reproductive coercion, meaning behaviours of control or force that interfere with a woman's decision-making around reproductive health. 77% of the students surveyed either were pregnant or had been pregnant by their husbands.

This unprecedented study in Guinea demonstrated that GBV and UPs are intrinsically linked. The study results were presented at the AFRA-VIH conference in Yaoundé, Cameroon, in April. The results demonstrate areas for reflection to identify effective responses to combat these issues at national level.



Working together on SRHR

In September, Solthis and partner teams met in Conakry, Guinea, for a seminar on sexual and reproductive health and rights (SRHR). This week-long experience sharing event focused on service provision and our community interventions, enabling us to build on our approaches and the evolution of this thematic area within Solthis. Gender, menstrual health and combatting gynaecological and obstetric violence were central to the discussions. We had graphic facilitator, Mathieu Letellier, at the event capturing what speakers were saying about the different themes. The output of his work will be used in 2025 to develop a brochure and a motion design on Solthis' SRHR Niger commitments.

Mali
Country office opens to provide decentralised HIV care and support in the Segou region.



Niger
1st project to support the National AIDS Control Programme.



Burundi
1st Solthis technical assistance on the decentralisation of HIV and AIDS care.



Guinea & Sierra Leone
Launch of interventions on the continuity of care in the context of Ebola, prevention and infection control in hospital settings.



Mali & Niger
1st programme to promote youth SRH, JADES.

Sierra Leone
Launch of Empower, first project to strengthen NETHIPS (network of PLHIV).

Guinea
Start-up of DIAVINA, ANRS-funded research project on PMTCT.

2003

2004

2009

2015

2016



Solthis4Health, a record-breaking fundraiser

A record first in Solthis' history! On 18 November, we held our first fundraising event for Solthis4Health, at the mayor's office in the fifth arrondissement of Paris.

Over 120 guests were present at this moving and hope-filled evening. It was led by Mahi Traoré, with speakers presenting our interventions and impact - Dr. Sanata Diallo and Henri Balbaud (board members), Dr. Odé Kanku Kabemba (Director of Solthis Guinea), Dr. Guillaume Breton (technical focal point), and from Solthis head office Dr. Roland Tubiana (Chair), Dr. Serge Breyse (CEO) and Rachel Domenach (Director of Communication and Fundraising). The two-time silver medallist in fencing at the Olympics in Paris, Auriane Mallo-Breton, and academic and writer, Jean-Christophe Rufin, were in attendance at the event, which raised over €50,000.



Recognised expertise in HIV self-testing

HIV self-testing is a major innovation in terms of patient empowerment as it allows people to choose when, where and with whom they find out their HIV status. Solthis began introducing self-testing in West Africa in 2018 through the ATLAS project, funded by Unitaid, which has distributed 400,000 self-test kits in Côte d'Ivoire, Mali and Senegal. The research component, which was carried out by IRD as part of the project, demonstrated the relevance of self-testing as a complementary testing tool. The two most recent articles, published in 2024 in the [Lancet HIV](#) and the [Journal of the International AIDS Society](#), demonstrate the epidemiological impact and cost-effectiveness of this testing approach. In light of our experience, Solthis was asked to provide technical assistance, funded by Expertise France - L'Initiative, to support the national programmes in [Guinea](#), [Niger](#) and [Chad](#) to introduce self-testing strategies. In 2025, we are supporting Côte d'Ivoire's national AIDS programme to roll out a scale-up plan, aimed at making self-testing available in private pharmacies, with funding from the Fund for Innovation in Development.

Senegal, Côte d'Ivoire & Mali

Launch of ATLAS HIV self-testing Project. 1st project in Senegal and Côte d'Ivoire.



2018

Mali & Niger

Projects to combat COVID-19, protect health care staff, ensure continuity of care and facilitate rapid testing.



2020

Sénégal

1st One Health project in partnership with AVSF and launch of the SANSAS project on youth SRHR.



2021

Celebrating 20 years of Solthis in Paris and the six countries we work in.



2023

Guinea

Launch of TRIO, our first project focused on triple elimination: HIV / syphilis / hepatitis B.



2024



GLOBAL HEALTH NGO



OUR IDENTITY

As a global health expert, the NGO Solthis was born out of the commitment of doctors at la Pitié Salpêtrière hospital **to promote access to care and, in particular, treatment for HIV and AIDS.** Now with **20 years of experience**, Solthis is involved in major health issues and advocates for the respect of the right to health and access to health for all.



OUR GUIDING PRINCIPLES

To take action without compromising the autonomy of national partners and long-term sustainability in complementarity with existing health programmes.



OUR VALUES AND COMMITMENTS

- **PROFESSIONALISM AND ACCOUNTABILITY**
- **SOLIDARITY AND COMMITMENT**
- **EQUITY AND INCLUSION**



Gender is mainstreamed in a cross-cutting way in all our projects, in our human resources and anti-harassment and anti-discrimination policies.



[Learn more about Solthis's
2022-2025 strategy](#)



OUR HEALTH PRIORITIES

Solthis currently focuses on responding to two health priorities:

- **infectious and emerging diseases**, in particular HIV/AIDS, tuberculosis and emerging diseases such as coronavirus disease 2019 (COVID-19) and hepatitis B;
- **sexual and reproductive health and rights** and child health; encompassing gender issues, reproductive, maternal, infant and child health;
- **exploring the operationalization of the “One Health” concept**, which links human, animal and environmental health.



1 EMERGING AND INFECTIOUS DISEASES

HIV, tuberculosis, COVID-19, hepatitis B.

2 SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS, AND CHILD HEALTH

3 ONE HEALTH



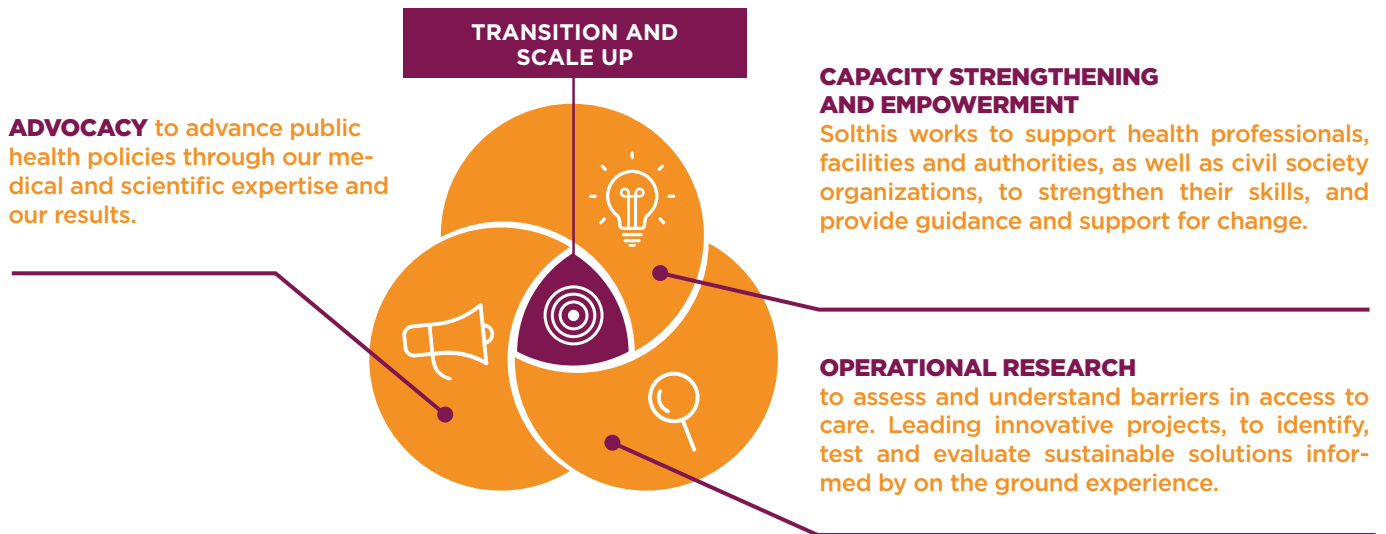
Our organization is part of current developments in international solidarity focused on the autonomy of people and organizations in the African countries where we operate, through a localised approach to aid, strengthening the role of national actors and taking into account the changing determinants of health and the combined impact of health, socio-economic, political and environmental crises.

Dr. Serge BREYSSE, Chief Executive Officer



HOW WE WORK

In order to respond to our intervention priorities, Solthis takes a high-impact intervention approach focused on three priority areas:



1. AN IMPACT MULTIPLIER APPROACH

By combining these three intervention methods, Solthis has developed an approach that has a multiplier effect, sustains the impact of its programmes and ensures transition to partners and scale up of their interventions.





2. A PARTNERSHIP APPROACH AT THE HEART OF OUR PROJECTS



«As local as possible, as international as necessary» - we embed our interventions in national strategies and policies and support our partners based on needs that they express, remaining faithful to our principle of not taking action on behalf of others.

3. A HEALTH PROMOTION APPROACH TO STRENGTHEN HEALTH SYSTEMS AND COMMUNITY HEALTH

Our approach to health promotion is participatory and inclusive. Solthis works to both strengthen health systems and civil society organisations and individuals, to ensure access to more efficient quality services.



IMPROVING HEALTH
SERVICES AT ALL LEVELS TO
PROVIDE QUALITY CARE

PROMOTING HEALTH AND
MOBILIZING COMMUNITIES TO
ENABLE USERS TO DEFINE THEIR
OWN NEEDS AND DEFEND THEIR
RIGHT TO QUALITY HEALTH CARE

OUR PROJECTS IN 2024

SENEGAL

- ☑ **SANSAS:** Sexual and Reproductive Health of Adolescents and Youth in Senegal
- ☑ **C'EST LA VIE ! Phase 2:** Sexual and Reproductive Health of Adolescents and Young People in West Africa
- ☑ **THIELLAL:** «Health for all» Contributing to better human, animal and environmental health

GUINEA

- ☑ **IPOP:** Introduction of Point of care to optimize postnatal prophylaxis for HIV-exposed newborns
- ☑ **IMPULSE:** Empowering Healthcare Systems by Involving Users
- ☑ **PAJES:** Empowering organisations and young people committed to sexual health
- ☑ **TRIO:** Pilot project to operationalize triple elimination of HIV, HBV and syphilis in Guinea
- ☑ **SUCCESS II:** Scale Up Cervical Cancer Elimination with Secondary Prevention Strategy

SIERRA LEONE

- ☑ **SHARE:** Sharing HIV interventions, results and experiences to support decision making
- ☑ **NFM3:** Building the capacity of health workers to accelerate the response to HIV in Sierra Leone
- ☑ **PROSSAN 2:** Health systems and service strengthening programmes
- ☑ **IMPAACT4HIV:** Improving access to advanced HIV care and treatment

In 2024, Solthis also provided technical assistances in the following countries: Benin, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, Gabon, Guinea, Morocco, Niger, Rwanda, Senegal, Sierra Leone and Togo.

CÔTE D'IVOIRE

- ☑ **POUVOIR:** Improving sexual and reproductive health and rights for SWs
- ☑ **AGIR:** Empowering young people and adolescents around SRHR
- ☑ **C'EST LA VIE! Phase 2:** Sexual and Reproductive Health of Adolescents and Young People in West Africa
- ☑ **TPE ADVIH:** HIV self-testing in Côte d'Ivoire: nationwide roll-out of an innovative tool to improve access to testing for most-at-risk populations
- ☑ **IMPAACT4HIV:** Improving access to advanced HIV care and treatment

NIGER

- ☑ **TA on PMTCT:** Support for strengthening PMTCT/Triple Elimination activities in Niger
- ☑ **LAHIYATA:** Improving Access to Sexual and Reproductive Health and Rights in Niger
- ☑ **C'EST LA VIE! Phase 2:** Sexual and Reproductive Health of Adolescents and Young People in West Africa
- ☑ **AZANTCHI:** Support for a national tutoring system in sexual and reproductive health and HIV

OUR IMPLEMENTING PARTNERS

GUINEA

- ABLOGUI: Guinea Bloggers Association
- AGBEF: Guinean Association for Family Welfare
- AGUICAN: Guinean Association for the Fight against Cancer
- CEA-PCMT: African Centre of Excellence for Prevention and Control of Communicable Diseases
- CNOSC-PF: National coalition of Guinean civil society organisations committed to repositioning family planning
- CIP 'PROD: Cross-organisational collective for advocacy and the promotion of patients' rights
- National Directorate of Community Health and Traditional Medicine
- FEG: Espoir Guinea Foundation
- FMG: Medical fraternity Guinea
- Ignace Deen Hospital
- Ministry of Public Health and Hygiene
 - Expanded Programme on Immunization
 - National cancer control programme
 - National AIDS and Hepatitis Control Programme
- RAES: African Network for Education, Health and Citizenship
- UGANC: Gamal Abdel Nasser University of Conakry

SIERRA LEONE

- Action Against Hunger
- DHMT: District health management team
- Ministry of Health:
 - National HIV/AIDS Control Programme (NACP)
 - NETHIPS: Network of HIV Positives in Sierra Leone

NIGER

- ENSP / DZ: National school of public health
- LAFIA MATASSA: Non-governmental organization for youth and adolescent health
- Ministry of National Education
- Ministry of Public Health, Population and Social Affairs, which includes the Ministry for the Advancement of Women and Child Protection, and the following entities:
 - National HIV/AIDS and Hepatitis Control Programme
 - Regional Public Health Directorates of Niamey and Maradi
 - Department of Mother and Child Health
- RENIP+: Nigerien network of people living with HIV

SENEGAL

- AVSF: Agronomists and Veterinarians Without Borders (NGO)
- CASADES: Committee to aid and support the economic and social development of the Ziguinchor and Kolda regions
- ENDA SANTE
- EQUIPOP
- High National Health Security Council
- «One Health»
- LARTES: Research Laboratory on Economic and Social Transformation
- Ministry of Health and Social Action
- RAES: African Network for Education and Health

CÔTE D'IVOIRE

- Alliance-CI and Health Alliance
- Arc en Ciel +
- ASAPSU: Association for urban health self promotion
- Covie: Consciousness and life (NGO)
- Espace Confiance
- Doctors of the World
- MESSI (NGO)
- Ministry of Health, Public Hygiene and Universal Health Coverage
 - National Cancer Control Programme
 - National AIDS Programme
 - National Mental Health Programme
 - National Maternal and Child Health Programme
 - National School and University Health Programme – adolescent and youth health
- PAC-CI research programme
- Youth Ambassadors Network SR/FP
- RIP +
- SWAG



HEALTH ISSUES

SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

2024 marked the 30th anniversary of the International Conference on Population and Development in Cairo. Over the past 30 years, we have witnessed significant developments in sexual and reproductive health and rights (SRHR), driven by feminist movements, and as part of international commitments, such as the Sustainable Development Goals.

As a result, since the year 2000, the global maternal mortality rate has decreased by 34%, the rate of unintended pregnancies has decreased by 19% and the number of women using modern contraception has doubled¹.

Yet, despite these major advances, **significant challenges remain, and the rise of conservatism and pro-life movements** puts the right of people to be free to make choices about their own bodies at risk more than ever.

In West Africa, key SRHR indicators remain extremely fragile and people, especially the most marginalised, continue to face multiple barriers to having full access to their rights and to comprehensive, quality services tailored to their needs.

In response to this situation, Solthis continues to make SRHR one of its priority intervention areas, focusing on fighting for human rights and gender and health equity.

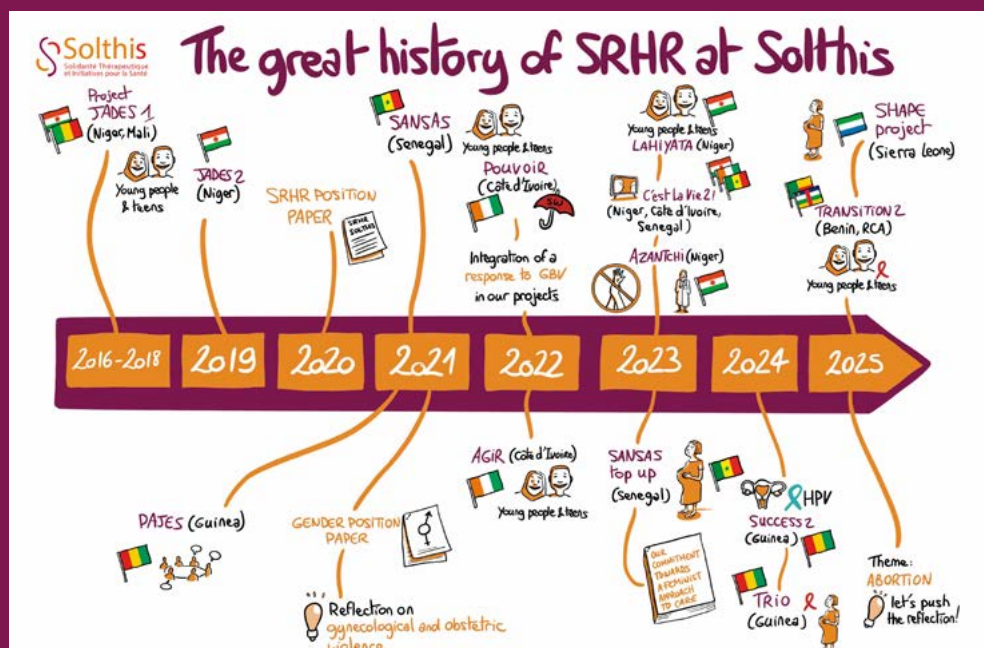


-34%
maternal mortality rate
globally since the
year 2000.



+100%
modern contraceptive
use since 2000.

1 - SWP Report 2024: Celebrating 30 Years of Progress | United Nations Population Fund



PROJECT SANSAS

Sexual and Reproductive Health of Adolescents and Youth in Senegal

HEALTH ISSUES SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Senegal



The SANSAS project aims to improve access to adolescent and youth reproductive health rights in Senegal, especially for vulnerable girls, young women and young people. The project's key interventions and results in 2024 were:

► **Improving the quality of care and integration of family planning services in close connection with the Directorate of Maternal and Infant Health at the Ministry of Health and Social Action:**

- 91 health providers and 62 community stakeholders were trained on the integration of maternal, newborn and child health - family planning - nutrition services at the 30 service delivery points;
- strengthening post-training monitoring and mentoring at project intervention sites;
- improving quality scores of supported sites (from 44% to 80% in Sédhiou and 49% to 72% in Mbour).

► **Combating gender-based violence (GBV):**

- 163 (146 female and 17 male) GBV survivors treated holistically;
- 44 talks, 5 social mobilisations and 21 radio programmes organised to raise awareness about GBV and promote access to care;
- 10 «secret champion» committees composed of women and men from the communities who have been mobilised around GBV prevention and response interventions.

Engaging and involving local authorities in the implementation of advocacy plans and development of two policy papers targeting the Directorate of Maternal and Infant Health.

“*Young people raise questions about crucial topics, such as pregnancies in school settings and sexual exploitation. This role in advocacy enables them to assert themselves as agents of change and pushes us, as decision-makers, to take concrete action.*

Mbour local authority, after a meeting with youth leaders



Timeframe

February 2021 - October 2025



Funding: AFD, Bill and Melinda Gates Foundation through AFD, L'Oréal Fund for Women, Bank of Africa Foundation



Partners: Enda Santé, RAES, Equipop, LARTES



[Find out more](#)



40,814

adolescents and young people attending sexual health consultations at partner health facilities



461

mobile outings reaching 12,069 people



91

healthcare providers trained on service integration

542 life lessons through «C'est la vie» toolkits, reaching 11,868 students

PROJECT SUCCESS 2

Scale Up Cervical Cancer Elimination with Secondary Prevention Strategy

HEALTH ISSUES
SEXUAL AND
REPRODUCTIVE
HEALTH AND
RIGHTS



Cervical cancer (CC) is the deadliest form of cancer among women in Guinea (45.4% of cancer deaths). The SUCCESS 2 project is part of global efforts to eliminate CC through screening, treatment and combatting inequalities. Some of the key achievements in 2024:

- ▶ **CC Technical Working Group meeting** to facilitate the integration of project activities by involving all stakeholders;
- ▶ **training of trainers:** the workshop took place in two phases (technical and education-focused), enabling a pool of national trainers to be established on HPV testing, IVA (Visual Inspection with Acetic Acid) and thermocoagulation;
- ▶ **training of providers** through a five-day workshop combining theory and using a practice dummy.

“As a result of the SUCCESS project, Guinea is taking concrete action towards eliminating cervical cancer, putting women at the heart of prevention and care.
Dr. Fatoumata Sitan Keita, Deputy Coordinator of the National cancer control programme”



Timeframe

March 2024 – April 2026



Funding: Unitaïd, Expertise France, L'Initiative



Partners: AGUICAN, AGBEF, FMG, National cancer control programme and National AIDS and Hepatitis Control Programme, PNLSH



[Find out more](#)



12 trainers trained
(8 women and 4 men)



8 laboratory technicians trained, including one woman



25 healthcare providers trained (9 doctors, 14 midwives and 2 nurses)

PROJECT POUVOIR

Improving the sexual and reproductive health and rights of cisgender and trans sex workers in Côte d'Ivoire through an empowerment approach

HEALTH ISSUES

SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS



Côte
d'Ivoire

The POUVOIR project, implemented since 2022, focusing on removing SRH service access barriers for cisgender and trans sex workers (SWs) and contributing to improving care provision for these groups.

During 2024, several activities were carried out with a view to achieving this objective:

► **5 self-gynaecology workshops conducted to strengthen the SRH capacity of 50 SWs**, in particular improving knowledge of their anatomy and of risky practices;

► **implementation of cervical cancer self-screening activities** in partnership with Doctors of the World. **10 peer educators (PE) were trained** who sensitised 400 SWs, 333 of whom carried out self-screening for human papillomavirus (HPV), of which 88 were HPV-positive. 66 of them carried out an IVA and 26 had a positive result - they were all treated using thermocoagulation;

► **16 reflection sessions between health providers and SWs were organised**, to contribute to improving care provision relationships. These sessions brought together 85 health care providers and 49 SWs;

► **12 outreach awareness-raising and consultation sessions organised at sex worker sites** reaching 259 SWs, 84 of whom were put on contraception;

► **feminist self-defence workshops organised in collaboration with the Sex Workers Action Group (SWAG) collective**. 65 SWs participants (59 CIS and 6 trans);

► **contributing to the implementation of advocacy interventions to improve the SRHR social and political environment**, which led to significant progress, including the revision of the Penal Code relating to abortion and access to free contraceptive products.

“ Before I was not well informed about many things. I gained a lot of knowledge. I learned how to calculate my menstrual cycle and how to protect myself during menstruation. I learned how often sanitary towels should be changed. I also learned that menstruation is not dirty...

Healthcare provider participating in the Values Clarification workshop

KEY INFOS



Timeframe:

April 2022 - June 2025



Funding:

L'Initiative - Expertise France, Paris City Hall, L'Oréal Fund for Women



Partners :

Covie (NGOs), Arc-En-Ciel +, Espace Con fiance, PACCI, National Programme for Mother and Child Health, National AIDS Control Programme, SWAG, PNSM, PNLCa



Find out more



1,968 SWs
sensitised on SRHR



87%

of SWs who participated in self-gynaecology workshops have improved their ability to take action.



8

health facilities have improved their quality score from 52% to 89%

PROJECT

PHASE 2

C'EST LA VIE!

Sexual and Reproductive Health of Adolescents and Young People in West Africa

HEALTH ISSUES
SEXUAL AND
REPRODUCTIVE
HEALTH AND
RIGHTS



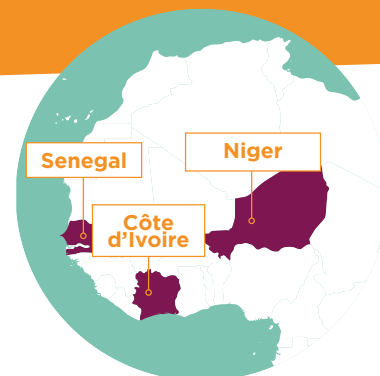
The C'est la Vie 2 project aims to support the adoption of safer and more respectful SRHR and gender-related behaviours among adolescents and young people, by strengthening their capacity to make choices and take action. In 2024, Solthis, as member of the consortium, implemented:

- ▶ ongoing capacity strengthening of health professionals in **Côte d'Ivoire** has significantly improved the quality of service provision for young people and adolescents in all health facilities;
- ▶ training and supporting 17 coaches in **Niger** to contribute to setting up and sustaining the mentoring and coaching system for health professionals;
- ▶ capacity strengthening sessions for stakeholders in Senegal on good procurement and supply management (PSM) practices;
- ▶ Reflection sessions in all three countries to provide a framework for discussions between health professionals and young people and adolescents, allowing them to contribute to strengthening the capacity of care providers.



I particularly enjoyed this activity because it helps us as providers to be aware of our behaviour and question ourselves.

Health professional in Senegal after a reflection session



KEY INFOS



Timeframe:

February 2023 – June 2026



Funding: AFD



Partners: RAES (lead), Equipop, OSC du Ratanga Club, Alliance Droit et Santé, UCPO



[Find out more](#)



14 reflections sessions:
280 young people and 40 health providers reached (Niger)



2 types of positive behaviour in care provision for adolescents and young women
observed in 100% of SRH consultations (compared to 70%) (3 countries)



89% compared to 57% change in quality score health centres (Côte d'Ivoire)

PROJECT AGIR

Empowering young people and adolescents around SRHR

HEALTH ISSUES
SEXUAL AND
REPRODUCTIVE
HEALTH AND
RIGHTS



To help improve care and overcome SRH service access barriers, the AGIR project worked to strengthen the empowerment of adolescents and young people and the health system:

- **development and distribution of awareness-raising tools** (image box, anatomical model, Oh Woman® educational game!);
- **4,552 awareness outreach sessions organised**, reaching 12,670 adolescents and young people (8,407 girls and 4,263 boys) on SRHR themes;
- **empowerment workshops organised with 96 adolescents and young people**, which strengthened their capacity to make informed decisions related to their SRH. These adolescents and young people are SRHR ambassadors to their peers;
- **14 cine-debates organised** showing RAES C'est la Vie! series, reaching 1,463 adolescents and young people (935 girls and 528 boys);
- **capacity strengthening of 26 health care providers on the medical management of gender-based violence and 24 community workers** (18 peer educators and 6 psychosocial support workers) on monitoring adolescents and young people using self-injectable contraceptives;
- **2 joint coaching/mentoring visits organised that strengthened the capacity of 63 health care providers;**
- **2,664 adolescents and young people started on contraception** in the **11 project health centres;**
- **implementation of the advocacy plan to promote a social and political environment favourable to adolescent and youth SRHR**, with the NGO Messi and the Youth Ambassadors Network.

“ This experience provided me with a different understanding of contraception with my guy, because before I wasn't protecting myself. I thought condoms were just a 'trick'. Now I know the different contraceptive methods. I do the injections and this experience taught me to calculate my period because I did not know that before.

Young female beneficiary

Côte
d'Ivoire

KEY INFOS



Timeframe:

March 2022 - February 2025



Funding: AFD, Bank of Africa Foundation, Paris City Hall



Partners: ASAPSU, Espace Con fiance, NACP, PNSME, PNS SU-SAJ, NGO MESSI, Youth Ambassadors Network SR/FP, PNSM



Find out more



88%

of adolescents and young people who participated in empowerment workshops strengthened their ability to take action



89% vs 51%

service quality score of the 11 health facilities

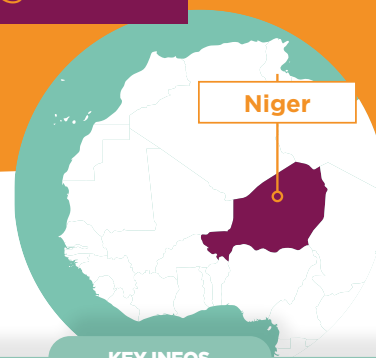


1 decree approving free family planning as a result of advocacy work

PROJECT LAHIYATA

Improving access to sexual and reproductive health and rights in Niger

HEALTH ISSUES
SEXUAL AND
REPRODUCTIVE
HEALTH AND
RIGHTS



KEY INFO



Timeframe:

February 2023 - March 2026



Funding: Expertise France



Partners: Lafia Matassa, Ministry of Public Health, Population and Social Affairs, Ministry of National Education, Ministry of Youth, Sport, Culture and Arts, National AIDS and Hepatitis Control Programme.



[Find out more](#)



The focus in 2024 was on implementing activities in line with the expected project outcomes. The project aims to improve access to sexual and reproductive health and rights for adolescents and young people in Niger and to contribute to the reduction of HIV infections and combatting gender-based violence. These include:

► safe spaces:

20 awareness-raising sessions informed 150 girls in safe spaces about the consequences of drug and alcohol abuse, the importance of vaccinations, personal hygiene, attending health centres if you are sick. Support with income-generating activities for girls in safe spaces (bead making, henna tattoos, soap making) ensured that young girls attended regularly.

► training on clarifying values:

14 professionals from integrated health centres and school infirmaries, including 11 women from Niamey and Maradi, and 18 members of RAES, benefited from training on the clarification of values: representations, norms and attitudes in relation to SRHR.

“ I never imagined that trainings like this existed, that can help with our engagement with students.

A school nurse talking about the values clarification training



62 health professionals
from 16 facilities supported



20 school and
extracurricular entities
supported



40 community
leaders trained



5 integrated health
centres and 5 school
infirmaries provided
with medical technical
equipment

PROJECT AZANTCHI

Support for a national tutoring
system in sexual and reproductive
health and HIV

HEALTH ISSUES
SEXUAL AND
REPRODUCTIVE
HEALTH AND
RIGHTS



2024 saw the completion of several activities linked to the project's expected outcomes. These include:

- ▶ **a launch workshop on 24 July 2024, with 50 participants from the Niamey and Maradi regions;**
- ▶ **carrying out a participatory assessment of mentoring / coaching among beneficiaries:** to ensure the set up and sustainability of a health mentoring system on reproductive health / HIV adapted to the needs of health professionals in the country. The assessment was carried out, as was an inventory of existing tools at the DAQ in Niamey and Maradi. Data collection was carried out during the March to May 2024 period in the two intervention areas and a data presentation workshop was carried out in July 2024. A workshop was also conducted with technical and financial partners in June 2024, to gather information on their experiences and the materials used for mentoring;
- ▶ development of SRH service quality assessment tools (service quality score) and project management tools, followed by a validation workshop carried out jointly with the Lahiyata project, under the leadership of the Directorate of Mother-Child Health/ Adolescents and Youth, in September 2024;
- ▶ mapping community stakeholders in the two project regions was also conducted to update the national reproductive health mentoring document.



KEY INFOS



Timeframe:
2023 - 2026



Funding: AFD



Partners: Ministry of Public Health, Population and Social Affairs, Lafia Matassa and RENIP+



Find out more



50 health professionals
from target facilities,
supported on reproductive
health during field visits



33 members OF
COGES/COSAN/
community outreach
workers sensitised on
SRHR and reproductive
health mentoring during
community mapping



22 partner institutions
supported as part of
strengthening reproductive
health mentoring



We strongly believe in the importance of mentoring to support care providers. AZANTCHI represents a genuine opportunity to strengthen health workers around reproductive health mentoring.

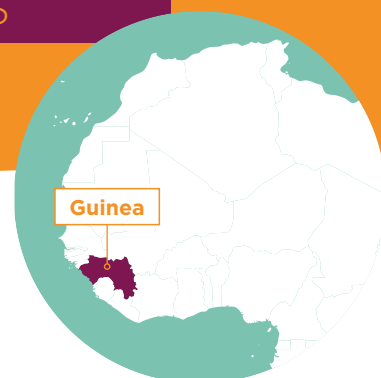
**Representative of the General Directorate
of Reproductive Health at the project launch workshop**



PROJECT PAJES

Empowering organisations and young people committed to promoting sexual health

HEALTH ISSUES
SEXUAL AND
REPRODUCTIVE
HEALTH AND
RIGHTS



In 2024, the PAJES project came to an end. **A total of 17 capacity strengthening sessions were organised on various themes, such as project management, monitoring and evaluation, and advocacy techniques.**

Trainings on using the Oh Woman! game have been implemented in Conakry and in the 7 regions of Guinea. This game was introduced in West Africa by Oh Woman!® and Solthis in 2023. It is now **an essential educational tool for our sexual and reproductive rights and health (SRHR)** projects, and is used in Côte d'Ivoire, Niger and Senegal.

The «Génération qui Ose» (the generation that dares) app, which provides information on SRHR, an alert system for gender-based violence (GBV) and mapping of care facilities for medical and/or psychosocial care, counselling and facilities providing guidance and signposting on SRH and GBV, and judicial/legal assistance services, was developed and launched as part of the project.

A study on unintentional pregnancies in school settings was carried out. The results were disseminated to partners and presented at the AFRAVIH conference, in Yaoundé, Cameroon (see page 8).

Finally, **a most significant change study was carried out throughout the year.** The main results were improvements in individual empowerment, brought about by the training system and the context which is conducive to collaboration between the various PAJES project partners.



KEY INFOS



Timeframe:
2021 - 2024



Funding: Expertise France,
Orange Foundation Guinea,
Paris City Hall



Partners: Coalition OSC/PF ;
Ablogui ; PNLSH ; DNSFN



[Find out more](#)



9,000+
adolescents and young
people sensitised
on unintended
pregnancies, family
planning, STIs
and HIV and GBV



37,000+
people provided with
information
via the GquiOse platform
and more than
1,000 app downloads



1 advocacy plan
developed on free
contraceptives and
the rights of vulnerable
persons



I have benefited from several capacity strengthening sessions, but the training on facilitation, awareness-raising and gender-based violence management techniques had the biggest impact on me.

Fatimatou Diallo, CNOSC/PF member





HIV

HEALTH ISSUES EMERGING AND INFECTIOUS DISEASES

Despite significant progress, the HIV context remains concerning in West and Central Africa. Many countries with fragile health systems are affected by conflict, humanitarian crises and climate change.

In 2023, the numbers were stagnating - an estimated 81% of adults living with HIV were aware of their status, 76% were accessing ARV treatment, and 70% had an undetectable viral load.

The situation for children and adolescents living with HIV remains catastrophic - 40% know their status and 35% are accessing ARV treatment.

In 2023, there were 190,000 new infections in the region, which represented 14% of new infections globally. Although the number of new infections has fallen by 46% since 2010, the decline has been much faster among men (49%) than among women (38%). **Women and girls account for 43% of new infections and poor sexual and reproductive health services contribute to the disproportionate burden the epidemic places on them.**

Coverage of HIV vertical transmission prevention programmes increased from 29% in 2010 to 53% in 2022 but has stagnated since 2016. **The region is home to 20% of pregnant women living with HIV worldwide, but accounts for 52% of all pregnant women living with HIV who are not on treatment.**

In addition, key populations, together with their partners, represent 34% of new infections and contribute to new infections due to difficulties they face accessing care as a result of stigma and, in some countries, criminalisation.



40%

of children and adolescents living with HIV know their status and 35% are accessing ARV treatment in West and Central Africa.



34%

of new infections are among key populations and their partners, in West and Central Africa

(Source: UNAIDS)

PROJECT NFM 3

Building the capacity of health workers to
accelerate the response to HIV in Sierra Leone

HEALTH ISSUES
EMERGING AND
INFECTIOUS
DISEASES



KEY INFOS



Timeframe:

July 2022 - June 2024



Funding:

Global Fund



Partners:

National Aids Control Program (NACP)



[Find out more](#)

Solthis supported **35 health centres** with various activities, such as **capacity strengthening for health workers** (5 classroom-based trainings, 35 ongoing training sessions, 812 coaching sessions and 28 health workers doing work shadow placements in other facilities through peer learning), **ongoing support for health districts and health centres on optimal health product management** (training, last mile delivery, stock management, monitoring) and **data collection for the health information system (HIS)**.

As part of project implementation, **296 mentoring and coaching sessions were carried out in all 35 health facilities**. Three trainings took place with a focus on, in particular, the revised national HIV tools and the consolidated HIV treatment guidelines. Finally, **formative supervision was provided to all 35 health facilities**.



5,773

beneficiaries supported in the
35 health centres



40,678

people tested for HIV



2,860

people testing positive initiated
on ARV treatment
(92.2%)



There have been changes to strengthen my capacity and help me to provide quality services to communities. This helped me to improve my knowledge around HIV. Another advantage of learning these tools is that I will be able to pass them on to others.

Health worker in Port Loko



PROJECT SHARE

Sharing interventions, results and experience on HIV to support decision making

HEALTH ISSUES
EMERGING AND
INFECTIOUS
DISEASES



The SHARE project aimed to contribute to improving the health of populations and people infected and affected by HIV and AIDS in particular, through documenting and disseminating knowledge based on the previous experience and practices of Solthis and its partner NETHIPS in two areas:

- **capacity strengthening for service delivery;**
- **community engagement.**

They looked at experience under Empower (2016-2021), technical assistance to the National AIDS Control Programme (NACP) in the context of the Global Fund NFM3 grant (2022-2024) and PROSSAN 1 and 2 (2019-2024). All components of HIV service delivery in health centres, from a technical perspective (testing, treatment, PMTCT, differentiated care, STIs, etc.), procurement, laboratories, health information systems or related to community engagement (link to support groups), were covered by capacity strengthening activities.

Through twenty-five focus groups with health professionals, patients and health authorities, qualitative data (quality score, analysis of health centre performance) was gathered, that went beyond purely quantitative data.

Improved knowledge and ability to provide quality services, including better communication with patients and greater self-confidence, were cited by the majority of participants interviewed as a positive individual impact of Solthis' capacity strengthening activities.



Under EMPOWER 1 and 2, then PROSSAN 1 and 2, and NFM3, the trainings organised for the centres Solthis supports helped the programme to support other centres that do not have partner support. This has had a huge impact in terms of strengthening the capacity of health workers.

District HIV Supervisor



KEY INFOS



Timeframe:

July 2023 to June 2025



Funding: AFD



Partners: NETHIPS, Ministry of Health and Public Hygiene



[Find out more](#)



3 capitalization papers produced



2 policy briefs validated with the Ministry of Health and Public Hygiene



1 capitalization video



2 national knowledge-sharing workshops (around 50 participants)

PROJECT TPE-ADVIH

**HIV self-testing in Côte d'Ivoire:
nationwide roll-out of an innovative tool to improve
access to testing for most-at-risk populations**

HEALTH ISSUES
EMERGING AND
INFECTIOUS
DISEASES



Technical assistance provided to the National AIDS Control Programme (NACP) enabled the development, validation and implementation of the national HIV self-testing transition plan. This plan outlines the NACP's ambitions to diversify target populations, distribution channels and geographic coverage of provision.

In terms of performance, HIV self-testing distribution doubled between 2023 and 2024. Despite the overall objectives not being met (70% expected performance), this demonstrates a positive dynamic and the growing role of self-testing in national testing strategies.

Formative supervision was one of many activities the project carried out, in 13 health districts with 19 community facilities and 10 public facilities. This enabled 100 people to receive coaching at the various sites to improve service access and quality.

Through the development of public/private partnerships, **70 dispensing pharmacists were trained in the regions of Abidjan 1 and 2, which was coupled with a national campaign to promote self-testing** (TV, radio) to make it accessible to the general public.



KEY INFOS



Timeframe:

October 2023 - September 2025



Funding:

Fund for Innovation in Development (FID)



Partners:

National AIDS Control Programme (NACP)



[Find out more](#)



1 scale up plan
validated at
national level



3 pre-qualified self-
tests (2 finger-prick
blood, 1 oral swab)

145,470
self-test kits distributed



70 private sector
pharmacists trained



The TPE-ADVIH project enabled the NACP to improve coordination of interventions related to HIV self-testing through meetings with all stakeholders (public sector, private and community sector) to overcome any scale-up bottlenecks.
Head of Testing Department, NACP



PROJECT TRIO

Pilot project to operationalize triple elimination of HIV, HBV and syphilis in Guinea

HEALTH ISSUES
EMERGING AND
INFECTIOUS
DISEASES



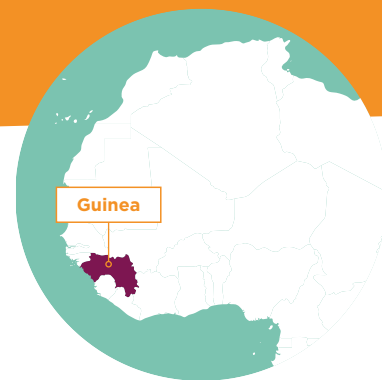
In Boké prefecture, combined syphilis-HIV screening coverage was 98% in 2023 (data collected during an appraisal at PMTCT sites) and HBV vaccination at birth is not yet integrated into the national strategy.

Against this backdrop, the TRIO project, whose objective is **to contribute to reducing mother-to-child transmission of HBV, syphilis and HIV**, began interventions in 2024. Key interventions:

- ▶ **12 members of the cross-organisational collective attended a workshop to prioritise their needs;**
- ▶ **the research protocol developed jointly by CEA-PCMT and Solthis submitted to the National Committee for Ethics in Health Research.** This research has 5 components:
 1. a knowledge, attitudes and practices survey with care providers;
 2. a survey on barriers to triple elimination, expanded to include a situational analysis of home births;
 3. an acceptability study for this intervention;
 4. a feasibility and effectiveness study for this intervention;
 5. a cost effectiveness study and cost effectiveness modelling.
- ▶ **project launched in Boké with 66 participants;**
- ▶ **the Technical Advisory Group on Vaccination in Guinea approved the introduction of HBV vaccine at birth through the TRIO project.**

“Through this triple elimination strategy, our vaccine provision will improve by introducing the HBV vaccine from birth.

Expanded Programme on Immunisation health worker



KEY INFOS



Timeframe:

April 2024 - March 2028



Funding: L'Initiative - Expertise France, FOG



Partners: PNLISH, ENP, NGOs RAES, DNSCMT, ECA-PCMT and the Cross-Organisational Collective



[Find out more](#)

The appraisal highlighted:

98% of women in ante-natal consultations received the **Syphilis HIV DUO test**, (1.33% of results HIV positive and 0.2% syphilis positivity rate)

95% of pregnant women living with HIV were receiving ARV treatment

83% of pregnant women with a positive syphilis test were referred for treatment

4% of HIV-exposed newborns received early HIV diagnosis results

97% of HIV-exposed newborns received preventive treatment

PROJET PROSSAN II

PHASE 2

Programme for strengthening health systems and services

HEALTH ISSUES
EMERGING AND
INFECTIOUS
DISEASES



The project objective was to strengthen the quality of and access to health services and to ensure the active participation of communities, especially women and young people.

At the end of the project, the 10 health centres supported obtained a quality-of-care score in terms of access to antiretroviral therapy, screening and care for mothers and children of more than 80%, and improvements were observed for 11 of the 13 indicators evaluated. **The overall quality of care score increased from 68% to 85%.**

Quality scores for screening and mother/child care improved in 9 of the 10 centres supported. **Overall scores improved, increasing from 47% to 78%.**



KEY INFOS



Timframe:
May 2022 - July 2024



Funding: AFD



Partners: Action Against Hunger, Community Action for the Welfare of Children (CaWeC), Ministry of Health and Public Hygiene



[Find out more](#)



10
health facilities
supported



374
health professionals
engaged



1,416
patients provided
with care



I think that all capacity strengthening activities complement each other in order to provide quality services to patients.

Health Assistant in the Western Rural Area



PROJECT IMPULSE

Empowering healthcare
systems by involving users

HEALTH ISSUES
EMERGING AND
INFECTIOUS
DISEASES



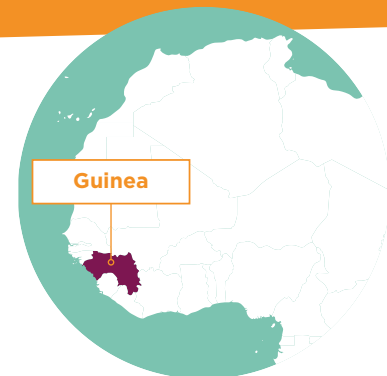
The IMPULSE project aims to strengthen health services and systems and to have a greater focus on users and their rights. In this first year of intervention, the main focus was on:

- ▶ **conducting a collective participatory assessment of HIV care and developing a roadmap** for improving the quality of the 6 project partner sites;
- ▶ **co-creation of tools for psychosocial support workers**, taking into account the needs of women and the rights of patients living with HIV;
- ▶ **conducting a study on legal barriers** to promoting the rights of users and PLHIV.

In addition, the various project activities enabled:

- ▶ **30 psychosocial support workers** to be trained on implementing innovative patient support services, including 15 mentors;
- ▶ **14 awareness-raising sessions (i.e., 56 meetings)** on patient rights, which helped to strengthen the skills of 903 patients on their rights;
- ▶ **32 professional practice analysis groups** to strengthen the capacity of 80 care providers on care provider / patient relationships;
- ▶ **training and support for 12 CSO members** on implementing advocacy interventions.

“Through awareness-raising activities on patient rights, I have gained a lot of knowledge that means I can now defend my choices with care providers. It was this knowledge that led me to join the organisation FEG, where I campaign for my peers to know and claim their rights.”
FEG member



KEY INFOS



Timeframe:

July 2023 - June 2027



Funding: AFD



Partners: CIP'PROD, FEG,

Cross-Organisational Collective, Gamal Abdel Nasser University of Conakry (UGANC), Ministry of Health and Public Hygiene, Ignace Deen university hospital sites



[Find out more](#)



903

patients (F 603 / M 300) have strengthened their skills around their rights



80

care providers assessed their professional practices and strengthened the care provider / client relationship

PROJECT IMPAACT4HIV

Improving access to treatment
and care for advanced HIV

HEALTH ISSUES
EMERGING AND
INFECTIOUS
DISEASES



Despite significant progress in access to antiretroviral treatment, **the number of HIV and AIDS related deaths remains well above the targets set.** Advanced HIV disease (AHD), which is associated with a large number of opportunistic infections, is a leading cause of HIV and AIDS related deaths. It is therefore a major challenge in the global fight against HIV, especially in sub-Saharan Africa. In Côte d'Ivoire and Sierra Leone, Solthis is implementing the Impaact4HIV project, which is also implemented in four other countries as part of a consortium led by Aurum.

In 2024, the project began by:

- ▶ **developing a dedicated implementation strategy for each country to pilot a model to decentralise AHD care,** in conjunction with the national programmes and networks of people living with HIV;
- ▶ **identifying pilot sites** (15 in Côte d'Ivoire's South Comoé region and 8 in Sierra Leone's Western Rural and Urban Areas) following an appraisal process;
- ▶ **adapting training and monitoring tools.**

In parallel, support has been provided to national AIDS programmes to update national guidelines, recommendations and tools related to the management of AHD to align with WHO guiding recommendations.



KEY INFOS



Timeframe:

January 2024 – June 2027



Funding: UNITAID



Partners:

Côte d'Ivoire: National AIDS Control Programme, RIP+
Sierra Leone: NACP, NETHIPS



[Find out more](#)

Project objectives



23

sites included
in the project



Total cohort of

13,000

people living
with HIV



26

health facilities to
benefit from the
project



Data analysis shows that a large proportion of patients who present late to health facilities already have opportunistic infections due to social barriers, especially stigma. Despite ARV treatment being available and the benefits being proven.

Dr. Kouadjalé Mathurin, Deputy Director Coordinator of the NACP

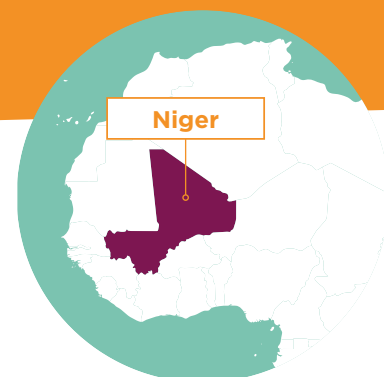


PROJECT TA PMTCT

PHASE 2

Support for strengthening
PMTCT/Triple Elimination activities in Niger

HEALTH ISSUES
EMERGING AND
INFECTIOUS
DISEASES



As part of the scale up of the differentiated HIV service delivery strategy, Solthis is working in collaboration with the Ministry of Public Health, Population and Social Affairs in 75 integrated health centres, including 42 new ones added in 2024. To support the triple elimination of HIV / syphilis / HBV among pregnant women in health facilities, ARVs were administered to HIV-positive pregnant women and early diagnosis activities were carried out throughout the year:

- ▶ **24 focal points and 44 service providers identified and trained in the selected sites;**
- ▶ **simplified roadmap developed and validated, serving as a support tool and guide for mentors;**
- ▶ **health information gathered from national registries to inform roadmaps;**
- ▶ **data on exposed newborns followed up telephone calls to integrated health centres and districts involved,** to fill gaps in indicators related to: the number of cases, initiation of ARV prophylaxis (oral suspension), administration of cotrimoxazole, performance of PCR tests and sharing of results;
- ▶ **quarterly performance reviews organised at regional level,** resulting in personalised recommendations and adjustments.

These activities have made it possible to:

- ▶ put 95% of pregnant women tested positive for HIV on ARV treatment in the 33 old sites and 92% in the 42 new sites;
- ▶ provide treatment to 87% of pregnant women with syphilis;
- ▶ provide tenofovir disoproxil fumarate (TDF) treatment to 45% of pregnant women with HBsAg;
- ▶ screen 71% of newborns exposed to HIV;
- ▶ put 100% of newborns exposed to HIV on ARVs and 75% on cotrimoxazole at the 33 old sites;
- ▶ put 92% of HIV-exposed newborns on ARVs and 93% on cotrimoxazole in the 42 new sites.



Triple elimination testing for me and HIV testing done early for my baby, are a priority and this project met my expectations.
Project beneficiary mother



KEY INFOS



Timeframe:

March 2024 - March 2025



Funding: Global Fund



Partners: Ministry of Public Health, Population and Social Affairs (National AIDS and Hepatitis Control Programme)



[Find out more](#)



128,790
pregnant women
reached



75 sites
in 33 districts
of 5 the regions
supported



HEALTH ISSUES

MATERNAL AND CHILD HEALTH

Improving maternal and child health in West Africa remains a major challenge, despite efforts to date. Around 70% of maternal deaths occur in sub-Saharan Africa. Although maternal deaths have decreased by 40% since the 2000s, they remain unacceptably high (WHO 2023). Yet the majority of maternal deaths are preventable. **Multiple barriers remain, with the lack of skilled health workers and adequate infrastructure being major factors, and only 65% of births in the region being assisted - the lowest rate in the world. Inequalities in access to care, exacerbated by socio-economic and geographic factors,** also contribute to the situation. **West Africa also continues to have some of the highest infant mortality rates in the world,** with 92 deaths per 1,000 live births in 2021, or one child dying every 17 seconds in the region (WHO, 2021). The main causes of these deaths include **malnutrition, acute respiratory infections, premature births, diarrhoea and asphyxia at birth.**

Global experts are now less optimistic about achieving the Sustainable Development Goals on maternal and child mortality by 2030. In light of this, it is essential to promote and roll out new approaches and to support strong political commitments to achieve the agreed targets. In addition to the importance of ensuring access to quality services during pregnancy, childbirth and the postnatal period, it is necessary to take action from a comprehensive health perspective, **expanding access to a continuum of care and preventing underlying health problems, such as anaemia, malaria and non-communicable diseases that increase the risk of complications** in women and their unborn children.



**13,400
children**

and

**786
women
died**

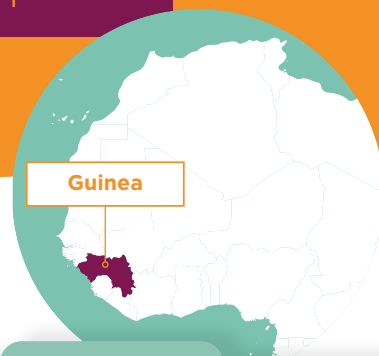
**in the world every day of
preventable or curable causes.**
(WHO 2024 and 2020)

**70% of these deaths occur in
sub-Saharan Africa.**

PROJECT IPOP

Introducing points of care to optimise postnatal prophylaxis for HIV-exposed newborns

HEALTH ISSUES
MATERNAL
AND CHILD
HEALTH



KEY INFOS



Timeframe:

February 2021 - February 2024



Funding: ANRS-MIE, Foundation Rotary Guinea, Paris City Hall



Partners: National AIDS and Hepatitis Control Programme, Ignace Deen Hospital, Fédération Espoir Guinée (FEG)



[Find out more](#)

March 2024 marked the end of the inclusion of mother-baby pairs, following this process:

- ▶ 6,556 women gave birth at Ignace Deen Hospital in Conakry;
- ▶ 6,045 women were tested for HIV;
- ▶ 93 HIV-infected women were identified (1.5% prevalence);
- ▶ 78 women were invited to participate in the IPOP project (the others left the maternity ward before it was proposed, or they died);
- ▶ 70 women agreed to participate in the IPOP project.

140 women and newborns were therefore able to benefit from the project.

Of these, only 1 child was diagnosed with HIV at birth, the other 69 newborns received the appropriate preventive treatment and to date none of them are infected.

These results were presented at the AFRAVIH international conference in Yaoundé, Cameroon in April 2024.

In addition to the 140 women and babies put on treatment, this project has led to major advances in terms of public health in Guinea where 1,400 newborns are infected with HIV each year.

This is the first time in Guinea that viral load testing can be carried out immediately by care providers for mothers and from birth for children, without going through a laboratory. This means newborns can benefit from the appropriate treatment, there is better retention in care and ultimately a considerable reduction in HIV infections among newborns.

“ We are very happy to have the machine on site. We do the test and in 1.5 hour, we get the child's results. It's part of our daily lives and it's a huge achievement because we used to wait 2 to 3 months. Now we can improve the child's chances of survival.

Dr. Yalikathou Camara, Pediatrician ”



89%

(compared to 41%)
of newborns have
access to EID
at 6 weeks



84%

(compared to 27%)
retention in care at
9 months



Less than 1 day
(compared to 47
days) average result
delivery time

HEALTH ISSUES

HEALTH AND CLIMATE

Many regions of the world face security, socio-economic and population displacement challenges, but are also particularly affected by climate change (droughts, floods, etc.), due to their location and the pressure humans are putting on ecosystems (extensive agriculture, bushfires, sustained deforestation, etc.).

Climate change is currently one of the biggest health threats. It significantly impacts the fundamental determinants of health. The impact can already be seen across the world: **change in severity or emergence of certain infectious diseases, major climatic disasters, antimicrobial resistance**, but also an **increase in chronic diseases, deterioration of mental health and food insecurity** significantly disrupting the functioning of health systems.

The significance of these issues highlights the need for a proactive, sustainable and integrated approach. **It is important to adopt intervention methods based on multidisciplinary collaboration** that enable the link between human, animal and environmental health (One Health), and on context-based and locally focused projects, based on communities across the country, which include monitoring and operational research components.

In this sense, climate invites us **to adapt new forms of health cooperation** at both international level and within communities **to improve monitoring and documentation of health risks, to support mitigation and adaptation strategies.** And as a result, contribute to identifying and implementing **relevant interventions that allow communities and health systems to adapt to climate change**, and to promote them to stakeholders, at the local, national and international levels.



60 %

of pathogens that cause human disease come from domestic or wild animals.

Human activity has profoundly changed 75% of terrestrial and 66% of marine ecosystems.

(Source: World Organisation for Animal Health)

PROJECT THIELLAL

Contributing to better human,
animal and environmental health

HEALTH ISSUES
HEALTH AND
CLIMATE

Senegal

2024 was essentially a year of learning and sharing for the Thiellal project, with three key interventions:

- **learning and sharing workshop** with operational partners and actors in three key areas: antimicrobial resistance, agroecology and One Health governance.

Key results:

1. reduction in the use of informal drug acquisition channels;
 2. adoption of biopesticides and better management of chemical waste by farmers;
 3. institutionalization of One Health consultation frameworks with legal recognition and local involvement.
- **production and dissemination of learning and sharing tools** on agroecological practices and antimicrobial resistance to ensure the knowledge sharing;
 - **integration of project learning into national and local governance.** The Thiellal project contributed to a cross-cutting learning exercise with another One Health project funded by AFD, in Guinea. Through sharing key recommendations, it was possible to document and share lessons from the project to inform reflections at national and local levels around One Health in Senegal.

Other key project activities in 2024:

- **4 communal consultation frameworks** have been set up to structure local governance taking a One Health approach. These frameworks have mobilised 178 members (20% of whom are women), through advocacy, awareness-raising and epidemiological surveillance activities;
- **training more than 40 health professionals** (animal, human, and environmental) on the risks related to antimicrobials, pesticides and their impact on human, animal, and environmental health;
- **64 Dimitra Clubs in 15 villages established to promote collective learning and the adoption of sustainable practices.** Training of 1,548 members (64% women) on agroecological alternatives and waste management.

KEY INFOS



Timeframe:
2021 - 2024



Funding: AFD (FISONG)



Partners: AVSF (lead), CASADES



[Find out more](#)



More than **40**
professionals trained
on the **3** health areas



1,548
people (of which 64%
were women) trained
on agroecological al-
ternatives and waste
management



Through the trainings, we became aware of the risks related to the overuse of antibiotics. Now we can explain better to patients why it's important to follow the prescription and not buy over-the-counter medications.

Head Nurse, Vélingara



HEALTH ISSUES

TECHNICAL AND SOLIDARITY ASSISTANCES

In 2024, we further increased our technical assistance (TA) activities, with **21 TAs implemented working with 42 consultants**, 45% of whom are from the global South and 35% identify as female. We had financial support from Expertise France's L'Initiative mechanism, through the Canal Expertise.

This year, we focused our efforts on three priority themes that have made it possible to sustainably strengthen our impact in the countries where we operate in Africa:

> CIVIL SOCIETY STRENGTHENING

We supported **21 civil society organizations** (CSOs) to strengthen their institutional capacities, their involvement in public health policies, and to advocate for patient rights.

> STRENGTHENING HUMAN RESOURCES FOR HEALTH (HRH)

Consolidating HHR is one of the cornerstones of our intervention approach in TAs. We support all levels of the health pyramid: peer educators, mediators, community health workers, health providers in health centres and hospitals, district doctors, as well as ministry staff. The aim is to ensure better access to care and more efficient management at all levels of the health system.

> PREVENTION AND ACCESS TO INNOVATIVE HEALTH PRODUCTS.

We continued with our efforts to improve access to innovative health products, in particular Pre-Exposure Prophylaxis (PrEP) and HIV self-testing to ensure equity and accessibility, particularly for populations furthest from care.

We provide **tailor-made TA, of varying lengths, to support countries to develop their health system** and ensure they have the capacity to be autonomous and efficient in the delivery of essential public health functions, including the provision of health care and services.

The technical expertise and organisational support provided aims to support the transfer of «best practices» not only North-South, but South-South support too, in particular by promoting knowledge sharing between neighbouring countries.

This approach is also part of our commitment to decolonise public development assistance, by valuing local knowledge, strengthening the capacity of national actors and facilitating their autonomy in the implementation of public health programmes.



Find out more about all our technical support



We would like to express our deep appreciation to the consultants, with whom we work closely. Their commitment to our solidarity consultancy model is an essential component of our interventions, providing expertise and innovation to provide support that has a positive impact.

STRENGTHENING THE CAPACITY OF CIVIL SOCIETY TO TAKE ACTION

HEALTH ISSUES
TECHNICAL
AND SOLIDARITY
ASSISTANCES

In 2024, Solthis **actively supported 21 CSOs** in several countries in West and Central Africa (WCA). These CSOs work with different target groups: PL-HIV and their families in the general population, identity groups focused on LGBTQI+ or sex worker rights. Some initiatives focus specifically on young people and adolescents, who are a key target group to ensure inclusive and responsive access to care.

We take an organisational **empowerment approach** that seeks to avoid top-down approaches, which are often disconnected from the real needs of people and organisations. Our work consistently involves people in the definition and implementation of interventions that best meet their needs.

Our support takes an integrated and personalised approach, which includes:

- **Organisational assessments:** identifying the strengths and areas for improvement for each organisation, while taking into account their specific context.
- **Developing capacity strengthening plans:** designing tailored approaches to strengthen an organisation's internal structure, their governance and their ability to fulfil their missions.
- **Resource mobilisation:** support to identify local and international funding, whilst promoting financial empowerment for CSOs.
- **Project management:** training on project planning, monitoring, evaluation and learning implemented by CSOs.
- **Training of trainers:** developing instructive skills to promote the dissemination of good practices within each organisation.
- **Putting in place administrative and financial procedures:** creating or improving management functions to ensure transparency and accountability.
- **Technical strengthening of teams:** technical support on specific thematic topics related to their areas of intervention to improve the quality of the services provided.

Solthis' work in this area aims to significantly strengthen the capacities of partner CSOs so that they can play a key role in improving access to health care and in defending the rights of the populations they serve. We emphasise the sustainability of these initiatives through skills transfer and support around empowerment.



Organisations supported by Solthis

Senegal

Alliance Nationale des Communautés pour la Santé (ANCS), National Network of People Living with HIV (RNP+)

Niger

Nigerian Network of People Living with HIV (RENIP+), Mieux Vivre avec le Sida (MVS)

Togo

Réseau des enfants, adolescent·e·s et jeunes vivant avec le VIH (REAJIR+)

Tchad

Association Djenandoum Naasson (ADN)

Sierra Leone

Consortium for the Advancement of the Rights of Key Affected Populations (CARKAP)

Côte d'Ivoire

Espace Confiance, Aprosam, Association de Soutien à l'Auto Promotion Sanitaire Urbaine (Asapsu), Enda Santé

Cameroun

MotoAction Cameroun (MAC), Association des Femmes Actives et Solidaires (AFASO)

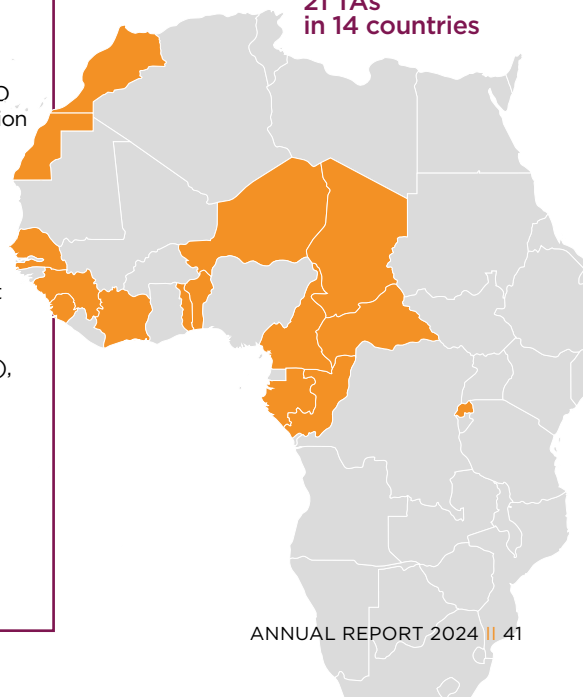
Bénin

ASSOPIIL (Association pour la promotion des Initiatives Locales), NGO ICON 360 et Association Solidarité

Congo

Centre de Ressources et de Compétences pour le Développement Communautaire (CRC), Association des Jeunes Positifs du Congo (AJP), Association Bomoï, Association Serment Universel (ASU), Avenir positif

21 TAs
in 14 countries



STRUCTURING & SUPPORTING HUMAN RESOURCES FOR HEALTH

HEALTH ISSUES
TECHNICAL
AND SOLIDARITY
ASSISTANCES

In 2024, Solthis continued its commitment to strengthening health human resources (HRH) through a series of strategic interventions aimed at improving the skills and practices of health professionals, strengthening the organisational capacities of community actors and fostering better integration of health services at the national level. These interventions are part of an overall approach aimed at strengthening the resilience of health systems in WCA.

Strengthening the skills of health professionals

In Togo an **in-depth assessment was carried out to identify human resources for health needs**, which made it possible to propose strategies adapted to local realities to the Ministry of Health and Public Hygiene.

In Niger Solthis supported the National AIDS and Hepatitis Control Programme **to improve prevention of mother-to-child transmission (PMTCT)** interventions and contribute to the triple elimination of HIV, syphilis and hepatitis B.

During our HRH assessment visit in Togo, gender mainstreaming emerged as a priority, which responded to significant expectations from the ministry Gender equality and combatting GBV must now be at the heart of how central interventions and health facilities operate. This requires a comprehensive approach that includes increasing student awareness of the range of trainings available, concrete action plans for each training centre, and meaningful consideration of the specific needs of students who are women and young girls, particularly in terms of housing and transport. Training must also systematically integrate gender and GBV issues, both in terms of care provision to identify GBV among patients and combatting violence experienced by care providers in the workplace.

Valérie Vallin, HRH consultant

Supporting the development and implementation of integrated national strategies

In Sénégal Solthis supported the **implementation of the strategy included in the Integrated National Strategic Plan 2023-2030**, by strengthening the capacity of community organisations involved in disease control, in particular on HIV, tuberculosis, hepatitis and STI integration.

In Gabon Solthis also provided technical support to the National Malaria Control Programme (NMCP) **to develop a comprehensive project to improve malaria management** in children under five through an integrated community approach.

Promoting innovation in community care provision

Solthis technical assistance also aims to promote innovative approaches to improve accessibility to care. For example, **as part of developing a national strategy to demedicalise HIV services in Guinea**, Solthis worked on defining models to allow community actors to be more involved in screening and care.

Finally, in partnership with the Moroccan local authorities and civil society working with PLHIV, Solthis **has developed a national psychosocial support guide including a specific training module** to strengthen the skills of health professionals and community workers on psychosocial support for PLHIV and their families in **Morocco**.



Since 2018, Solthis has provided significant technical support on the roll out of HIV prevention and testing tools, including HIV self-testing and Pre-Exposure Prophylaxis (PrEP). These interventions aim to strengthen access for the most at-risk populations, in particular men who have sex with men (MSM) and sex workers (SW) to innovative and differentiated approaches. This TA aims to develop approaches adapted to low HIV prevalence contexts, while ensuring access to key populations groups, among whom HIV prevalence remains high.

HIV self-testing

Solthis' commitment to promoting HIV self-testing began in 2018 with the ATLAS project, which made it possible to test innovative approaches and institutionalise this complementary testing approach, therefore increasing the number of priority populations and their networks who know their status in WCA. In 2024, Solthis provided technical assistance to Chad and Niger for the roll out of HIV self-testing pilots. The evaluation of these pilots will take place in 2025.

Pre-exposure prophylaxis

Since 2022, Solthis has initiated targeted interventions to support the introduction of PrEP provision. In 2024, Solthis provided technical support to Chad and Niger for the roll out of PrEP pilot initiatives. In addition, Solthis is currently supporting the launch of PrEP in Guinea and operationalisation in 6 pilot regions in 2025. The feasibility and acceptability analysis carried out in 2024 confirmed the feasibility of rolling out PrEP. Support to develop standards and procedures, training standards and operationalisation plans have made it possible to manage the supply of PrEP in the country.

Solthis' approach places particular emphasis on:

- Adapting interventions to the specific needs of key populations.
- strengthening the capacity of community ac-

tors and health professionals involved in rolling out PrEP and self-testing.

- Coordination with national authorities to integrate these approaches into public health policies.
- Strengthening the capacity of local civil society actors to operationalise and ensure the sustainability of service provision.

Significant efforts have been made to accelerate the implementation of these innovative approaches. The result of these efforts include:

- Training 118 people (health workers and peer educators) on distributing HIV self-tests in 3 pilot regions.
- Providing nearly 4,000 HIV self-test kits between October and December 2024.
- Training 66 peer educators and 35 health workers in the regions of Niamey and Zinder on providing PrEP.
- Including 62 PrEP users in the CEDAV centre in the Niamey region.

Anthony Vautier, Differentiated Services Consultant for the TA on HIV self-testing & PrEP in Niger

Integrating PrEP into the existing community response provides an opportunity to expand care beyond PrEP. By taking into account the existing service package, PrEP users can, as part of their follow-up, benefit from other services related to PrEP. For example, integrating hepatitis B testing, systematic and regular monitoring of STIs, regular HIV testing, distributing condoms and self-tests (for users and their partners) are all services that can be combined without having to develop a dedicated technical platform within health centres and without generating significant additional costs.

Dr. Antoine Sandouno, national Consultant differentiated services for PrEP TA, Guinea

OUR ACADEMIC AND SCIENTIFIC INTERVENTIONS

Solthis was established by university doctors and is supported by scientific group of experts in health and development, therefore we have many different partnerships: research institutes, university hospitals, universities, African networks and humanitarian organisations. Since its inception, Solthis has actively participated in major international public health conferences.

AFRAVIH 2024

Yaoundé, Cameroon (16-19 April)

At the Francophone conference on HIV, hepatitis, sexual health and emerging infections, Solthis had a strong presence, with a booth, a symposium and several interventions. The SANSAS symposium brought together more than 150 people on the topic of the sexual and reproductive health (SRH) of young people, with an inspiring testimony from youth leader, Abdourahmane Niang.

Five oral presentations shared the progress of IPOP, PAJES (on unintentional pregnancies in schools in Guinea) and technical assistance projects in Cameroon and Niger. Posters highlighted the POUVOIR (photo) and COVACOM projects and two technical assistance projects carried out in Cameroon. The SUCCESS II project was launched at a symposium, led by Expertise France, the lead organisation of the consortium.



ACSHR 2024

Rabat, Morocco (26 February - 2 March)

At the Africa Conference on Sexual Health and Rights, Solthis stepped up its work on these issues. In partnership with Médecins du Monde Burkina, RAES Senegal and Equipop Guinea, we conducted a session to highlight our empowerment workshops in Côte d'Ivoire. We presented three oral communications, a poster and at our booth the OhWoman!© game generated a great deal of interest.

Our teams also participated in the **25th International AIDS Conference (AIDS 2024)** in Munich, Germany (22-26 July) and the **7th EVA Regional Seminar on Paediatric HIV in N'Djamena**, Chad (28 February -1 March).

Scientific publications

We carry out research related to our projects, some of which is published after they have closed out.

In 2024, the **ATLAS** project (completed in 2022) produced [eight publications on HIV self-testing](#) in West Africa. The **TB-Speed** project produced two articles on childhood TB: one on [cost/effectiveness](#), the other [on operational outcomes](#). Publications from the [AIRE](#), [AIRPOP](#) and [COVACOM](#) projects have also been produced. Finally, our experts contributed articles on projects in [Guinea](#), [Senegal](#) and [Sierra Leone](#).



Find out more about our academic and scientific partners

OUR ADVOCACY WORK

Through our projects in West Africa, our scientific roots and links with French and international institutions, Solthis' advocacy work is developed based on evaluations of project work and results from research.

Our advocacy work has a two-pronged objective:

- **scaling up projects that have shown promise;**
- **sharing our experience, and that of partners, with the international community to improve health policies and the functioning of international initiatives.**

Advocacy that has a multiplier effect: strengthening teams and partners

Building on the tangible outcomes of our projects and knowledge produced with national partners, institutions and civil society, we want to bring about concrete changes in the policies and approaches of health actors and strengthen patients' rights and health systems.

Advocacy on SRHR and combating gender-based violence

In 2024, the PAJES project in Guinea ended after 3 years. The project trained 9,000 young people and raised the awareness of more than 37,000 people via our partner Ablogui's Génération qui Ose digital platform. A study on unintentional pregnancies and sexual violence in school settings has broken taboos. An advocacy plan on free contraceptives was led by the Coalition, another Solthis partner for PAJES.

On the occasion of the International Day for the Elimination of Violence Against Women, [three reports were broadcast on France.tv.afrique, RFI and ARTE](#) (in French) on the SRHR projects Pouvoir and Agir in Côte d'Ivoire.

Advocacy around One health: antimicrobial resistance and challenges in the fight against malnutrition

In 2024, the Thiellal project - One Health - also ended. Building on the [One Health approach](#), three policy briefs were published on antimicrobial and antibiotic resistance and the parallel medicines market.

At the One Sustainable Health Forum at the end of October, Solthis and its partners co-authored a [forum, published in Wathi, the West African citizen think tank](#), outlining that malnutrition issues must be at the heart of the One Health approach.

Global interventions to improve global health

Solthis influences the global health agenda by participating in conferences, coordinating bodies, and in coalition with its partners to request funding and policies adapted to global health priorities, that are favourable to the most vulnerable countries and populations.

Solthis challenges the French public authorities and international institutions on their role in health. Our presence on the National Council for Development and International Solidarity (CNDSI), as a civil society representative, on the CSUD, the Initiative Group and the Global Health Collective (CSM) enables us to put forward our requests and those of our partners.

Solthis is also a member of the international initiative to prevent future pandemics (PREZODE), the One Sustainable Health Forum, the Global Alliance to End AIDS in Children by 2030 launched by WHO, UNICEF and UNAIDS, and in countries where we have permanent teams, we participate in the coordination bodies of health and development partners.

We also work in coalition to ensure that the major multilateral mechanisms (Global Fund, UNITAID, Gavi, etc.) and donors respond as closely as possible to the concrete needs of the most vulnerable populations.

International solidarity and global public health under threat

This activity report is being published in June 2025 and the threat to international solidarity is extreme. France cut more than 40% of its official development assistance in 2025.

US President Trump has signed the end of US aid, led by USAID and PEPFAR (HIV/ AIDS programme), with dramatic consequences for our partners.



Some reading (in French):

- [*Côte d'Ivoire: the end of US aid in Transversal*](#)
- [*Interview with our Chief Executive Officer in Challenges - Budget cuts to development assistance : an inconsistent stop-and-go*](#)



FINANCIAL REPORT 2024

2024 in numbers

In 2024, we saw a sharp increase in the organisation's expenditure (+20%), from €9 million to €11 million. This increase is mainly driven by the effective start-up in 2024 of projects financed through the Multiannual Partnership Agreement (MPA), signed in mid-2023 with AFD, as well as the SANSAS project in Senegal and the start-up of two new large-scale projects in Guinea - SUCCESS and TRIO.

At the end of the 2024 financial year we had a surplus of over €421K, thanks to the volume of projects implemented during the year, the ongoing increase in technical assistance and the organisational structuring support provided by AFD through the Programme Agreement and the MPA. The organisation's foreign exchange and financial income, which were highly profitable this year, which also strengthened the outcome for the year.

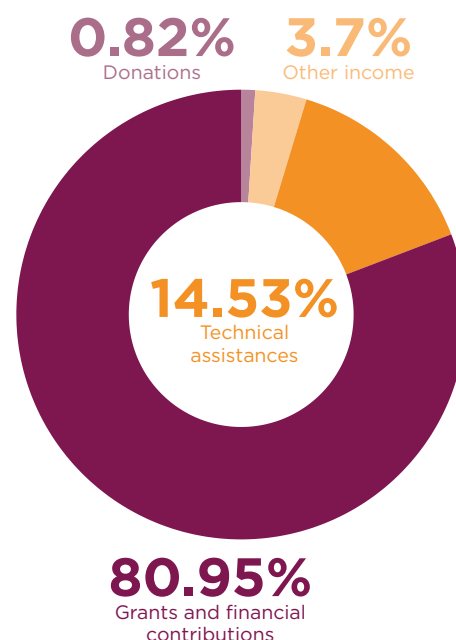
This surplus, and that for 2023, has enabled Solthis to replenish its reserves, which is necessary to partially absorb the impact of the decrease in official development assistance. The situation in France and at international level further accentuates the challenges of diversifying funding and building new partnerships, which is a priority for the organization in 2025 to ensure our finances balance.



11M€
expenditure
in 2024

Sources of income

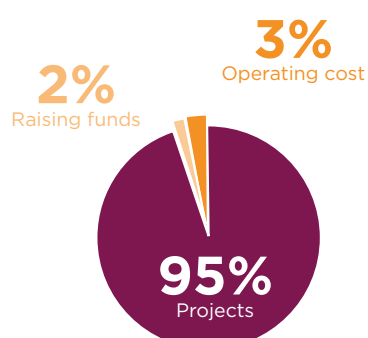
Solthis' income in 2024 came from grants and financial contributions from **our public and private partners (80.95%)**, **technical assistance (14.53%)**, **other income (including foreign exchange and financial income: 3.70%)** and **income collected from the general public (0.82%)**. Solthis continues to work to diversify its income sources by strengthening and developing new financial partnerships, which are essential for project dynamics and strengthening our financial model. In 2024, we initiated a partnership with the Aurum Institute in South Africa as part of the IMPAAC-T4HIV project in Côte d'Ivoire and Sierra Leone (see page 33) and launched a multi-year partnership with the Orange Foundation in Guinea to support projects in the country.



Expenditure

Breakdown of 2024 expenditure:

95 of every 100 Euros spent related to carrying out our social mission, 3 Euros to organisational running costs and 2 Euros to raising funds.

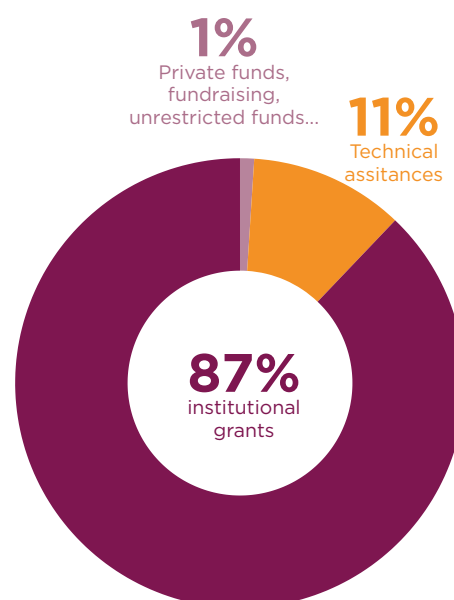


- **Fulfilling our social mission:** expenses incurred for operational activities related to strengthening health systems and services, operational research and advocacy, and operational support costs.
- **Raising funds:** expenses incurred to undertake public and private fundraising activities.
- **Operating costs:** primarily expenses incurred by the organisation's head office, which oversees the operational activities of country teams, internal controls and the effective use of resources. The head office also oversees links with our academic, institutional and organisational partners.

Outlook for 2025

The 2025 budget approved by the Board of Trustees in December 2024 amounts to €13.2 million, with the following breakdown of funding sources (see diagram).

The 2025 budget has a significant focus on Senegal and Guinea, where projects represent respectively 26% and 16% of our budget in 2025. Technical assistance should represent 11% of our projected 2025 income, with a view to maintaining the current volume and margin.



Financial transparency

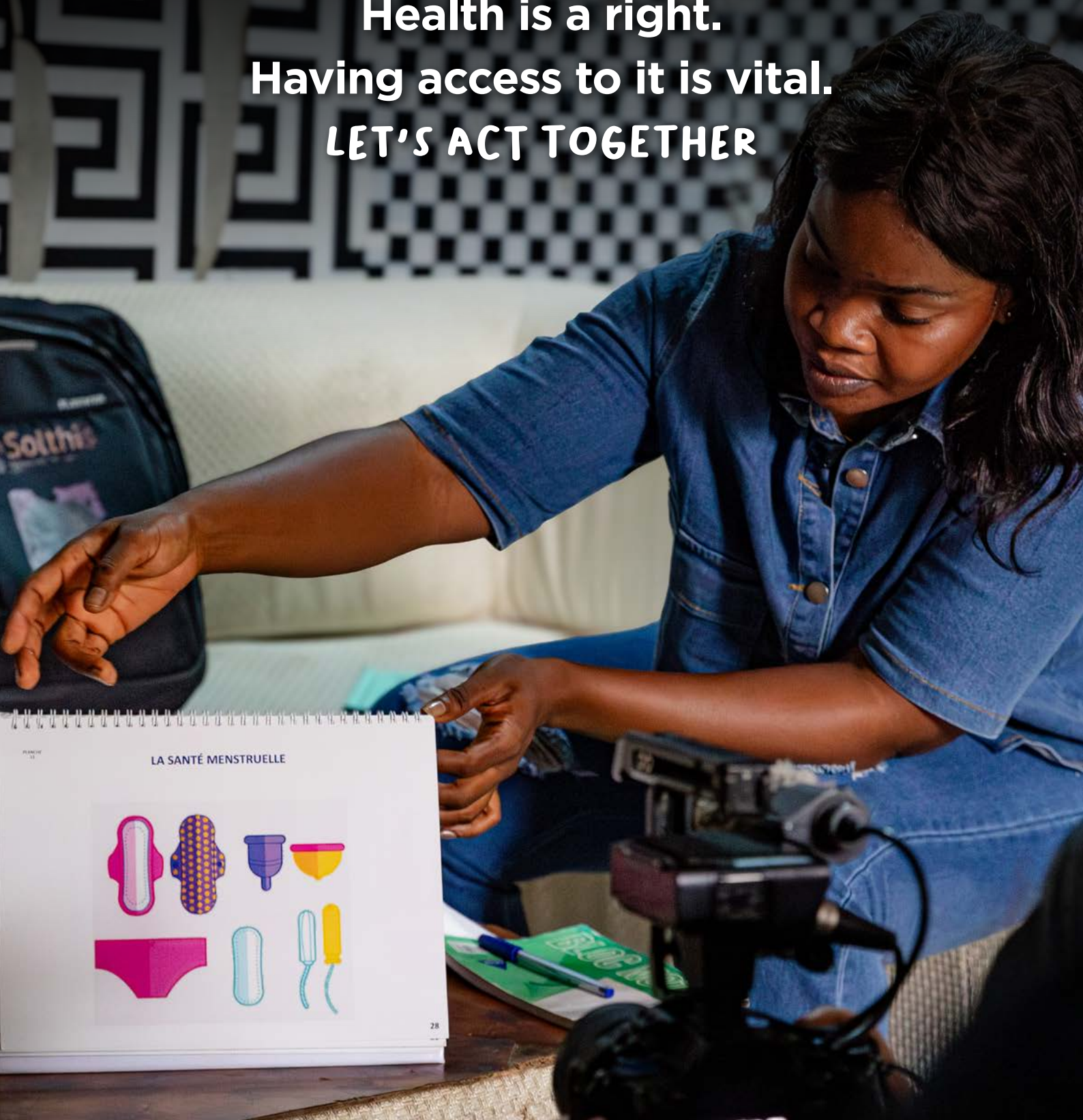
Certification of 2024 accounts by FORVIS MAZARS

The accounts were approved at the Solthis board meeting in June 2025 and have been certified by MAZARS. Our accounts and audit report are [available here](#).

Thank you to all our partners



Health is a right.
Having access to it is vital.
LET'S ACT TOGETHER



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