



Annual Report 2020

Editor

**Life4me.plus to fight AIDS,
Hepatitis C and Tuberculosis**

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CONTENT



President's Foreword	3
Overview	4
Motto of the year	5
Core activities	6
News	6
Collage column	7
Social media	8
Website	9
App	10
COVID-19 and HIV	11
COVID-19 lockdown – supporting stranded people	13
Projects & Collaborations	16
VITALapp in Lesotho	17
IDAHOBIT 2020	18
EACS Online Course	19
Conference/forum participations	20
Partners	21
Engagement & Support	22
Finances	24
Appendix	27
Background	28
Goal/Task	29
Activities	29
Partners	30
Duration	31
Achievements	32
Conclusion	38
Outlook	39

President's Foreword

The beginning of the year was filled with optimism, little did we realise the world was about to be hit by a pandemic.

The year started off well for us, following the 2019 campaign fighting stigma and discrimination. Our aim was to strengthen this campaign, continuing to build on the achievements of 2019, then along came the coronavirus. No one expected a pandemic, no one even imagined that countries might begin to close their borders, that we would all be quarantined and isolated, that we would have to learn to live with the new virus and adapt. The virus turned everyone's world upside down.

We have learned lots this year. We learned how to work and provide help online, we discovered problems existed in the system for helping people living with HIV. These problems had previously been hidden from view in everyday life. The virus has provided us with an impetus for many topics of discussion, such as: equality, mental health, e-health, remote (self)testing. We were able to look at human rights from a different angle.

It has been a difficult year, but thankfully we as a community were able to mobilise, show solidarity, and work together. As the pandemic has proved once again, by working together we can defeat any epidemic and we can also defeat HIV ONLY together!

The work of the Life4me.plus would not be possible without the financial support of many donors, but also of the WHO and UNAIDS. I would like to express my sincere thanks to all those who have supported us in this important journey. Your help and support is greatly appreciated. Thank you.

I also want to say a special thank you from more than a thousand people. Despite the very difficult and challenging times, together we were able to help ensure so many people did not quit antiretroviral therapy. That ensured they stayed at an undetectable level of virus, thereby bringing the end of the HIV epidemic much closer.

THANK YOU



Dr. Alex Schneider

President Life4me.plus to fight AIDS,
Hepatitis C and Tuberculosis



01 OVERVIEW

Our organisation was established in 2017, but has its roots date back to 2013. Originating as a group of activists, we started publishing news about HIV on Twitter, and later developed the dedicated website. The group of activists evolved over 4 years into a full-fledged non-profit organisation, providing support around the world. Our main goal is to prevent new cases of HIV, Hepatitis C, other STI's and Tuberculosis, and support people living with HIV, to combat the impact of stigma/discrimination and increase access to treatment <https://life4me.plus/>

The year 2020 was most unusual and will go down as the year of the coronavirus pandemic. The developed pandemic had a huge impact not only on the lives of people, but also on the work of our organization. All our activities had to be translated into an online format. Some projects had to be postponed for now, the focus turning to helping people living with HIV who are in need, due to the coronavirus.

We are proud that we quickly responded to the pandemic, launching a web page about COVID-19 and HIV in March 2020. Here we constantly updated the incoming information after verification. We quickly realised that because of closing borders, people living with HIV would need help with therapy and began to help in this important area. From mid-March, we began to **receive the first requests for help from stranded tourists**, these were later followed by labour migrants stuck outside their countries of jurisdiction.

Requests were received from all over the world. We are delighted that our partners from different countries have joined with us in this essential activity. As a result, together with our partners, we managed to **help over 1'000 people** in continuing their therapy during these difficult conditions.

Looking ahead, the coronavirus pandemic is not yet over, so **we plan to continue to helping people** affected by the pandemic, trying to remove barriers and gaps that have emerged during this time, to ensure we are fully ready for the next global epidemic.

MOTTO OF THE YEAR

Our motto of the year is:

**ENSURE
NO-ONE
IS FORGOTTEN
PROVIDE
ACCESS
TO THERAPY
FOR STRANDED PEOPLE**

03 CORE ACTIVITIES

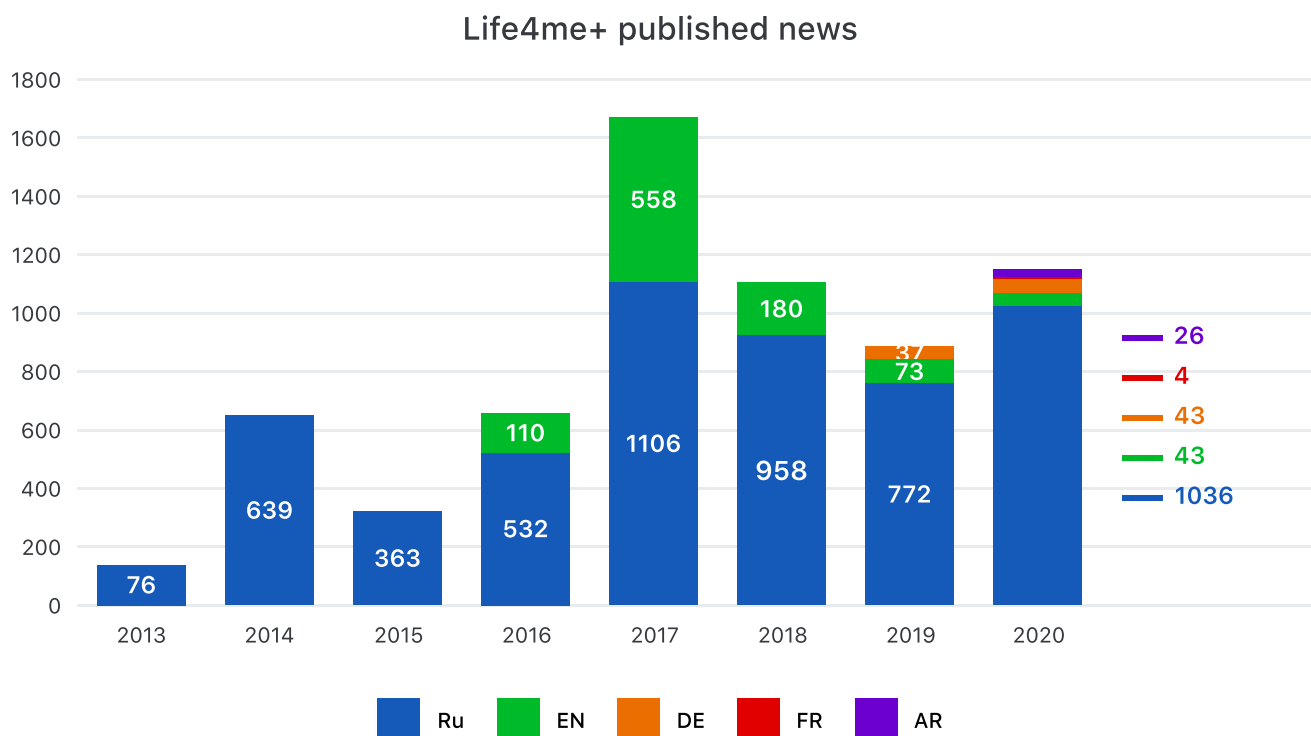
Our Core activities are focused primarily around all types of Media and IT.

News

One of our main activities is to raise awareness across the general population, including activists and specialists, about HIV, viral hepatitis and tuberculosis, as well as about stigmatised and vulnerable groups. We usually do this by publishing the news and articles: scientific advances, changes in policy and legislation, social innovations and more.

This year we published **1'152 news (1'757'631 impressions)**, including 1'036 news articles in Russian (1'604'543 impressions), 43 news articles in English (125,108 impressions), 43 news articles in German (21'982 impressions), 27 news articles in Arabic (5'788 impressions) and 3 news articles in French (210 impressions). The Arabic and French news feeds actually started for the first time in June and December 2020, accordingly.

The chart below summarises the trend of news over the past years.



As news in Russian is the most popular, we have initiated a subscription by email so that you can receive it conveniently, without missing articles. We have **1'038 subscribers** for the news in Russian as at December 31st 2020, which **represents a 24% increase** on the previous year (836 users in 2019).

Collage column

The Collage column was launched in October 2017, in Russian as a **series of interviews** with peer counsellors, living with HIV to provide psychological and informational support to people who have recently found out about their diagnosis. Over time, it began to include interviews with activists, relatives of people living with HIV, specialists who are associated with HIV in other circumstances.



In 2020, Collage published **50 interviews with 47 guests** from different countries across the East European and Central Asia regions with **68'551 impressions**.

Social media

Throughout the year, we have been actively working with social networks such as Facebook and Twitter. In total, **3'629 posts** were published, which reached almost **1.5 million people**.

More details see below in the table:

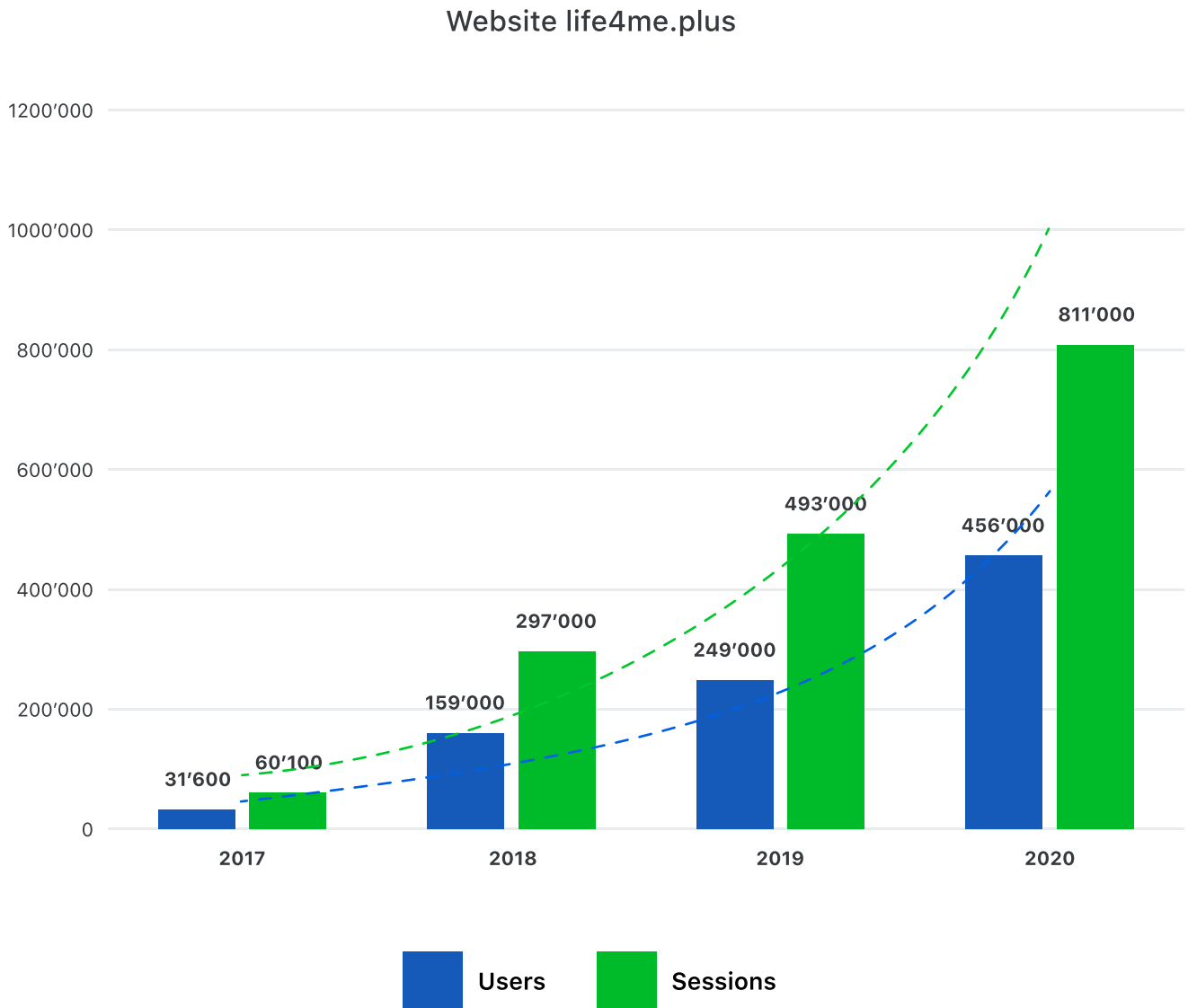
		2020		
		Posts	Engagements	Impressions
Twitter	RU	1'106	3'791	339'400
	EN	72	1'253	167'352
	DE	84	5'679	60'582
	Total	1'262	10'723	567'334
		Posts	Involvement	Reach
Facebook	RU	760	10'208	212'432
	EN	50	1'062	113'341
	DE	46	258	3'782
	Total	856	11'528	329'555
Instagram		388	7'012	516'424
Vkontakte		1'123	5'840	49'789

Since September 2020 we have been actively publishing on **Instagram** (388 posts in 2020 compared to 23 posts in 2019) and the **Telegram channel** (203 followers as at December 31 compared to 97 followers as at September 1) again. The activities in **Vkontakte** were also intensified in 2020 (1'123 posts in 2020 compared to 803 posts in 2019). Activities in **Facebook** and **Twitter** were similar to last year, although there was less reach in Twitter, which was partly covered by higher reach in Facebook. The total reach across all social networks is comparable with that of the previous year.

Website

This year, **456'000 users** visited our website with a total of **811'000 sessions**. Each session was for an average of 55 seconds. Most of the users were from **Russia**, representing 72% of all users, then **Ukraine** (7%) and **Kazakhstan with USA** (each 4%). The share of users from **Belarus, Moldova, Uzbekistan, Kyrgyzstan, Germany, India and Armenia** is between 0.5-1.2% for each country. The rest of the countries are under 0.5%.

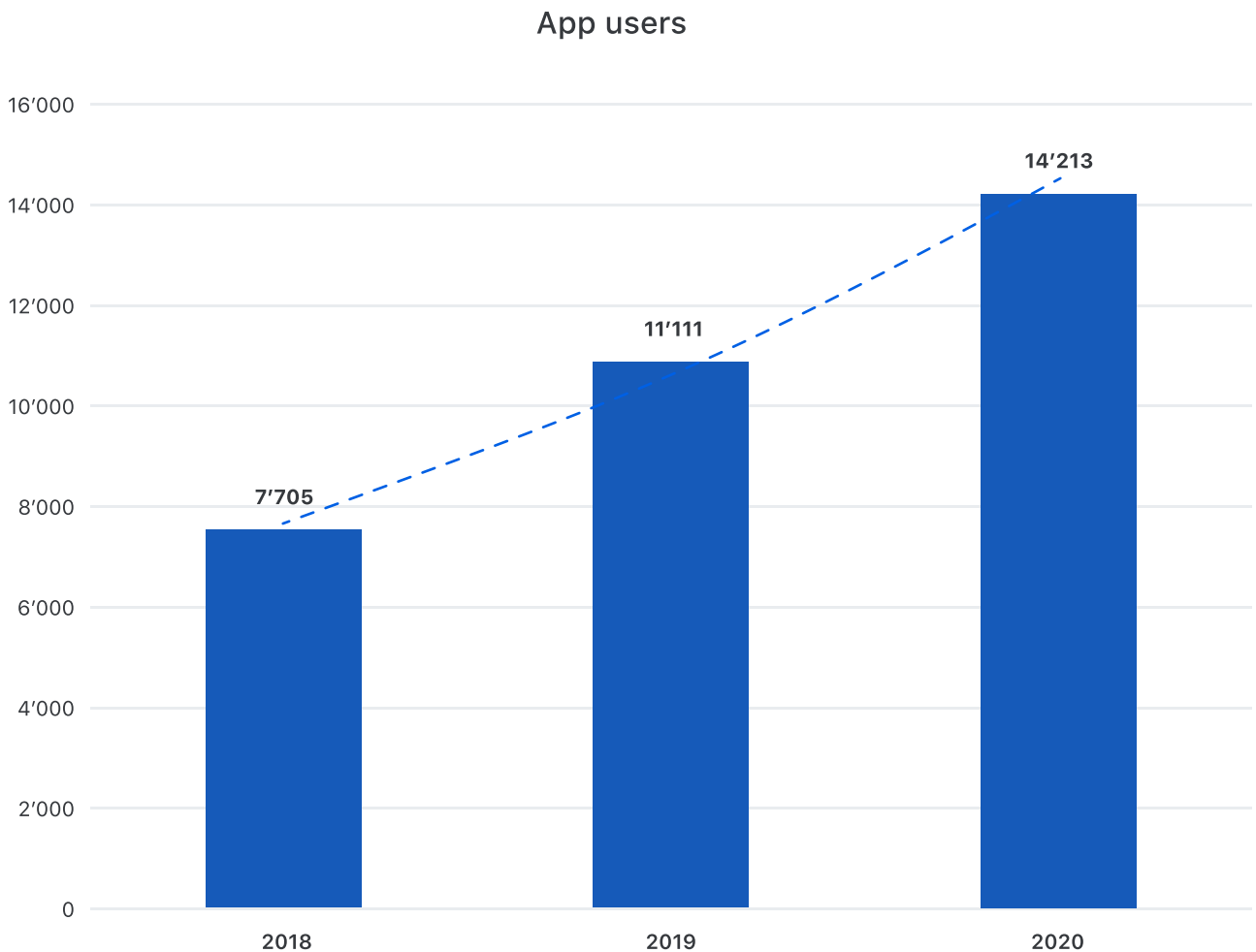
User trends and sessions over the past years can be seen in the chart below.



APP

Every year we improve our application and this year we have released several updates: 8 on **iOS** and 5 on **Android**. Among these updates we also incorporated updates with new language. During the year we have translated our application into Serbian. At the moment we have 15 languages. The number of users grows each year and this year we had **14'213 users** as at December 31st 2020, **28% more** than last year (11'111 users in 2019).

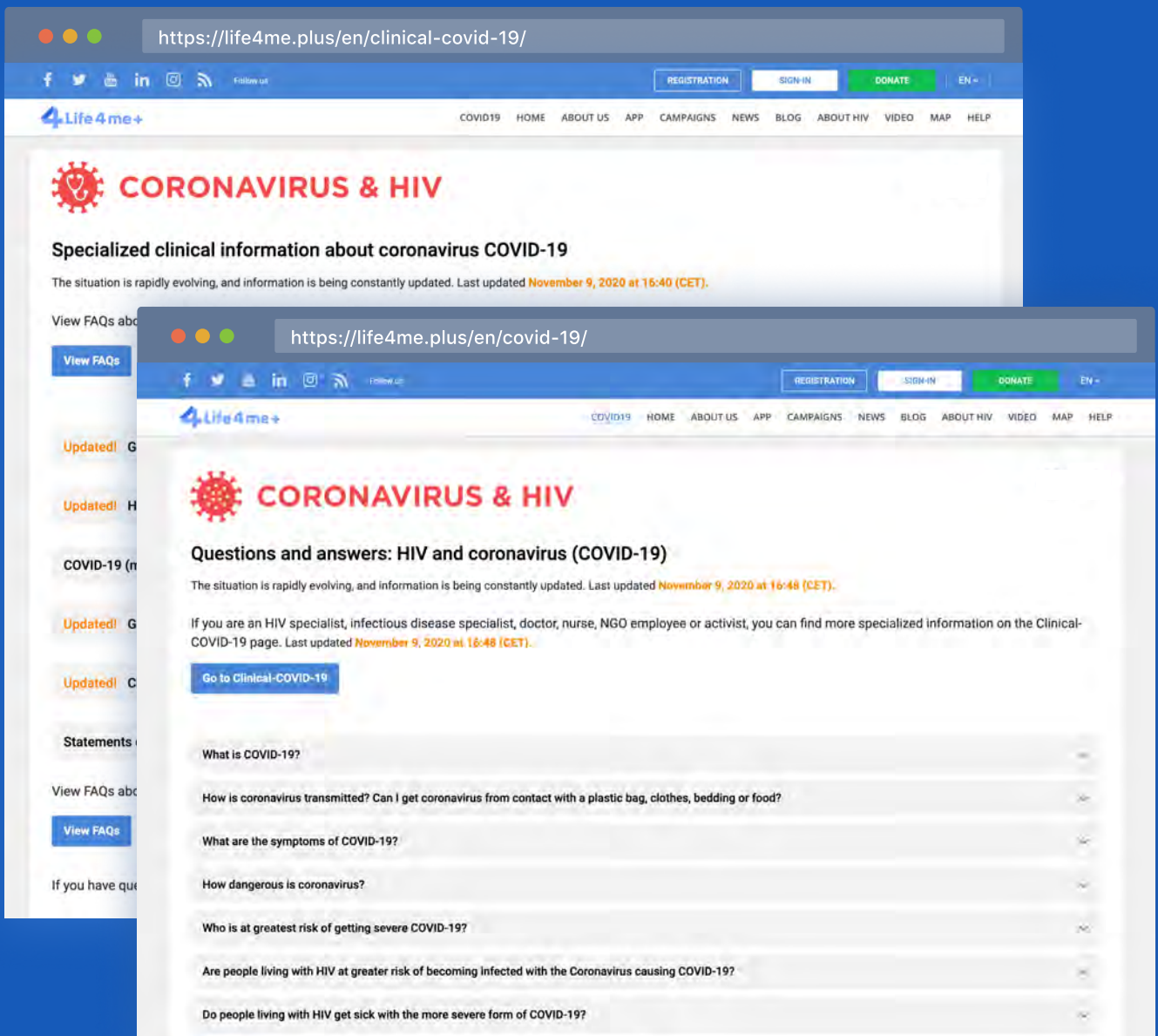
App users' trends over the past years can be seen in the chart below.



04 COVID-19 AND HIV

During the COVID-19 pandemic, people living with HIV needed reliable information about the virus and HIV. They were also worried that they might be more likely to become infected with COVID-19 than people without HIV.

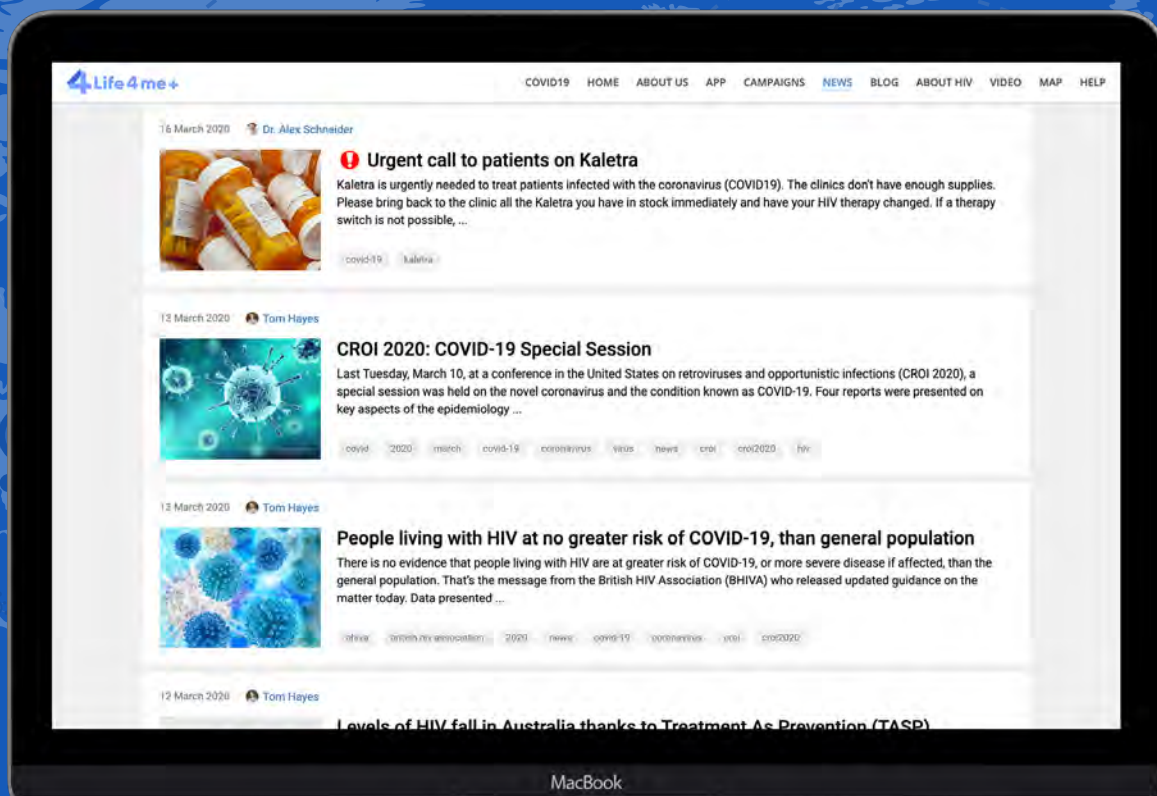
At the beginning of March 2020, we identified the need to create a website (in Russian and English), in the **form of questions and answers**. The aim to answer frequently asked questions **about COVID-19 and HIV**. In addition, we recognised the necessity for professionals (HIV specialist, infectious disease specialist, doctor, nurse, NGO employee or activist) to collect all relevant information about clinical research, recommendations and treatment protocols for COVID-19.



Later in March 2020 we launched our website about coronavirus and HIV in two languages (Russian and English). In the beginning, we updated the information daily, sometimes even several times a day, because more and more new research was done and confirmed or refuted the earlier assumptions made. Our readers had the most up-to-date and updated information.

As at December 31st, the COVID-19 and HIV FAQ website had **42'013 page views**, including **34'758 unique page views**. The average time on the page was **2 min 26 sec**. The clinical website of COVID-19 and HIV had **9'563 page views**, including **6'843 unique page views**. The average time on the page was **1 min 51 sec**.

Additional to the general information about COVID-19 and HIV, we have **published 403 news articles** about new coronavirus, including HIV contest, in Russian, English, German and Arabic. It was **35% of all our news** in 2020.



COVID-19 and HIV news

COVID-19 LOCKDOWN – SUPPORTING STRANDED PEOPLE

During the COVID-19 pandemic, many people living with HIV were stranded abroad, finding their ARV therapy was running out. Our aim was to ensure that people maintained access to treatment. To achieve this, we launched a form for people to report their problems, disseminating this message through social media. The peak number of people asking for help was in during April-May 2020. Later in the year we still continued to receive requests for help, but the rate of inquiries declined.

As at December 31st, we were able to **help 232 people stranded in 47 countries** to continue their therapy. 87% were originally from the EECA region. 70% of all stranded people were migrants, 20% tourists and 10% had local problems in their own country.

We define migrants as all people who live or stay abroad for a long time due to work, family, study or asylum.



HIV medications for stranded people



WHO donation



Collection of the WHO donation

Timely quick help was only possible thanks to our partners. ITPCru, who helped us with everyone stuck in Russia and in parallel they also started a similar campaign to ours. In addition to requests for help, they also received **over 500 additional inquiries** from people who were stranded in Russia.

Other partner organizations, activists and physicians who provided us with support and assistance: **EACS, EATG, Česká společnost AIDS pomoc (Czech Republic), Potent (Serbia), I Foundation (Bulgaria), activists from Malta, Italy etc, physicians from Germany, Romania, Poland, Georgia, Vietnam etc.** UNAIDS could support us with the help in the MENA region and Asian countries. WHO donated tenofovir/emtricitabine and tenofovir/lamivudine to us for stranded people and AFEW funded the delivery costs.



Colleagues from Serbia received HIV medications

Together with partners we **helped over 1'000 people** living with HIV stranded abroad because of COVID-19.



Colleagues from the Czech Republic who helped stranded people

The coronavirus pandemic is still not over, so we continue to receive requests for help.

In 2021, we will continue to help people affected by the pandemic. We will also try to remove barriers and gaps that have emerged during this time, to ensure we are ready for the next global epidemic.

Further details of the people supporting living with HIV stranded abroad can be found in Appendix to this report and under the following links:

- [Deutsche Aidshilfe magazin.hiv \(German\)](#) (Link)
- [WHO Europe \(English\)](#) (Link)



“During the Covid-19 outbreak, I was truly grateful to the United Nations Team in Thailand for working closely with me and my foreign PLHIV friends, who could not return home. ARVs were running out but it is extremely critical for people living with HIV to continue medication or they could become resistant to the drug. The immediate solution was to arrange that local governmental hospitals provide the ARVs, and the community PLHIV leaders coordinate with the hospitals to get the ARVs to those in need.

I wish to also thank my foreign PLHIV friends, who provided information on the ARV-medication that they were on. This was key for the hospitals to get the right prescription for each person.

I wish to add a few issues that could be useful for improving the international ARV delivery system. To enable easy access and uninterrupted HIV treatment for PLHIV, key authorities and agencies need to jointly design a system that will ensure all PLHIV receive ARVs continuously .”

Mr. Apiwat Kwangkeaw

Thai Network of People Living with HIV

06 PROJECTS & COLLABORATIONS

We are continuing to implement projects that were started in 2019 but faded into the background due to COVID-19. This includes supporting further collaboration with MENA region, Germany, Switzerland (MIDATA and Swiss HIV Cohort Study), Public Health England, Eurasian Community for Access to Treatment. There were numerous video conferences and exchanges of information, but no significant achievements to record in the annual report.

COVID-19 and supporting people living with HIV in this unusual extreme new environment has been our priority this year. We were able to do several projects, in addition to providing assistance at the time of the epidemic, namely:

- **VITALapp in Lesotho**
- **IDAHOBIT 2020**
- **EACS Online Course**



VITALapp in Lesotho

Last year we have started a collaboration with the Swiss Tropical and Public Health Institute to develop and implement the VITALapp in Lesotho.

VITAL (Viral Load Triggered ART care in Lesotho) is a differentiated care model taking into account the viral load results, clinical conditions and personal preferences of patients taking ART in Lesotho (18 nurse-led clinics)



<https://www.vital-lesotho.org/>

The VITALapp, used by VITAL records assistants and nurses, aims at improving the clinical management of people living with HIV in Lesotho. The App builds on five main pillars:

1. clinical decision support tool, that issues recommendations for clinical management to nurses;
2. ensuring good documentation and follow-up of laboratory results, i.e. viral load result communication to patients;
3. implementing a differentiated service delivery model by shifting resources from patients who are doing well to patient groups who may need more attention, such as those with treatment failure or medical and psycho-social problems;
4. thereby allowing the health systems and patients to save resources while improving quality of care; and
5. capturing data on medical gaps (including mental health) in Lesotho to fill in the future.



VITAL app for a nurse in Lesotho

The VITALapp was developed for the VITAL clinical trial (Assessment of a viral load result-driven automated differentiated service delivery model for participants taking antiretroviral therapy in Lesotho). The trial was registered on [ClinicalTrials.gov](https://www.clinicaltrials.gov/) on August 27th 2020 under NCT04527874. For more details see www.vital-lesotho.org.

During the year we finished developing the app. We released the alpha version in August. After some adjustments and to fix the bugs, we released the beta version in late autumn. The nurses in Lesotho started to use it and new updates of the app is planned for 2021.

IDAHOBIT 2020

To mark International Day Against Homophobia, Transphobia and Biphobia (IDAHOBIT) on Sunday 17th May 2020 the **European AIDS Clinical Society (EACS)** and **Life4Me+** developed a small anti-discrimination campaign. The result of joint initiative was a video where we interviewed a number of HIV clinicians and activists with the aim of breaking down stigma and discrimination towards people living with HIV in the LGBTQI community.

We asked participants:

Dr. Casper Rokx (Netherlands)

Dr. José Ignacio Bernardino (Spain)

Luca Modesti (Artist Conigli Bianchi)

Dr. Tristan Barber (UK)

Dr. Marta Vasylyev (Ukraine)

Alex Schneider (activist, Switzerland)

Tatyana Khan (ITPCru, Russia)

Jide Macaulay (House of Rainbow CIC, UK)

Bratislav Prokić (activist, Serbia)

the following questions:

1. Do you know what is "queer" and what is "straight"?

2. Are queer people more at risk of contracting HIV?

3. Does gender really matter with HIV?

4. Should people living with HIV disclose their status?

5. What is the stupidest thing you've ever heard about people living with HIV?

6. If you could travel back in time, what would you say to the younger version of yourself?

The video is available on our YouTube channel. <https://youtu.be/DRgmXWv3lo4>



EACS Online Course

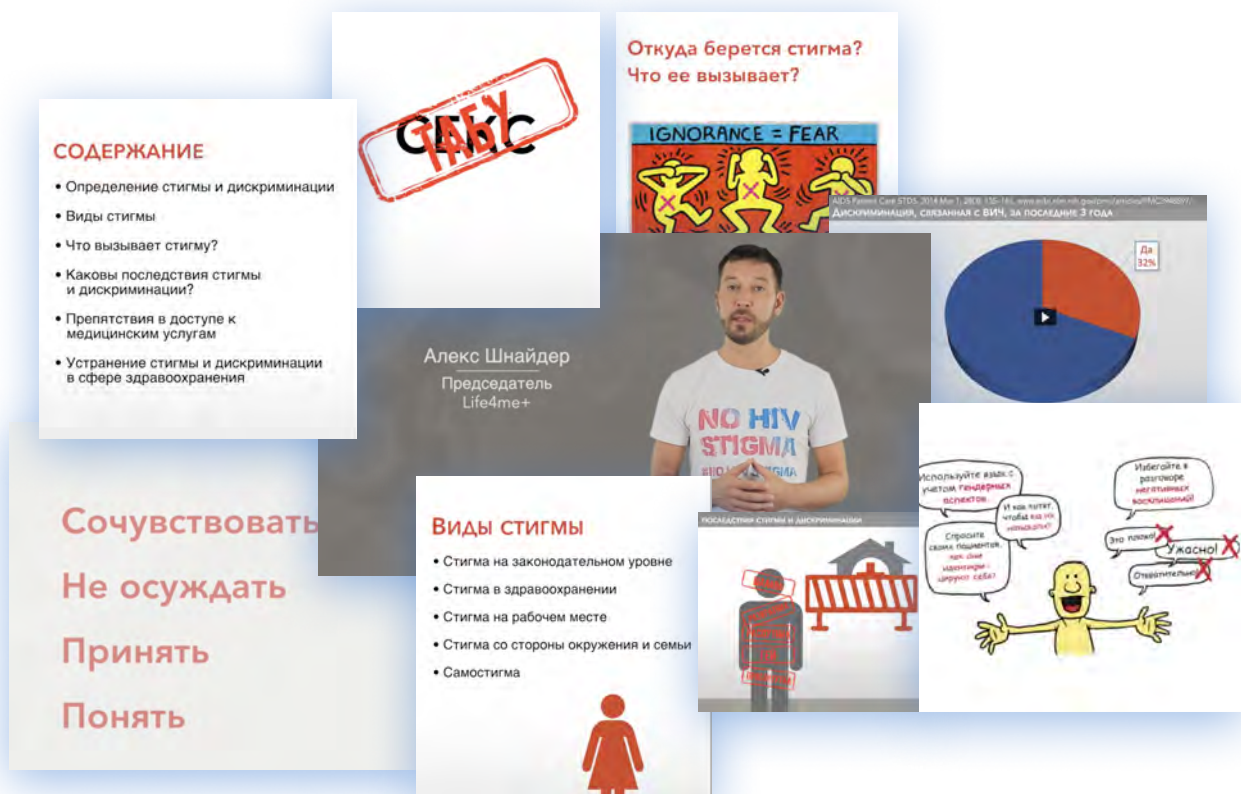
EACS has set up and developed an [Online Course on Management of HIV](#) which is a collaboration between EACS and WHO.

The course is freely accessible worldwide but with a focus on Eastern Europe and capacity building of people working on improving the response to the HIV epidemic on all levels. EACS was planning to restructure and strengthen the public health related themes of the online course. The new Public Health section should include topics on combination prevention, testing, stigma and understanding and monitoring the epidemic. Part of this section is funded by the [INTEGRATE Joint Action](#) and some of the video lectures are outcomes of this EU joint action.

We have been invited to do an online lecture on stigma based on our previous experience in the fighting HIV stigma at all levels, whether government, healthcare, employer, colleagues, community, family or individual. We decided to do this in Russian with English subtitle because the focus is on East Europe and Central Asia region.

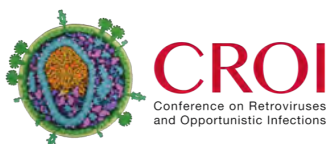
This talk, we started by giving a definition to stigma and discrimination. Then we explained *“what types of stigma exist?”* and clarified *“why stigma occurs?”* and *“What are the effects of stigma and discrimination?”*. We then described in more detail how stigma and discrimination create barriers in access to health-care services, before finally describing strategies for eliminating stigma and discrimination in health care.

The video will be made public during 2021.



07 CONFERENCE/FORUM PARTICIPATIONS

This year we took part in the following conferences and forums:



CROI2020, 27th Conference on Retroviruses and Opportunistic Infections

March 8-11, 2020, Boston, USA (virtual)



Health Innovation Exchange organized by UNAIDS

July 1st-2nd, 2020 (virtual)



AIDS 2020, 23rd International AIDS Conference

July 6-10, 2020 (virtual)



WHO/ECDC meeting on Addressing TB, HIV and viral hepatitis during the COVID-19 pandemic

September 23-24, 2020 (virtual)



- Presentation "Community based differentiated care for PLHIV, including migrants"



Fifth St. Petersburg Forum on HIV

October 1-2, 2019, St. Petersburg, Russia (virtual)

- Presentation "Getting therapy abroad is real! Helping people living with HIV who find themselves abroad during the COVID-19 epidemic"



HIV-Stigma-Discrimination CHUV 2020

December 1st, 2020 (virtual)

- Presentation "Stigma and discrimination against people living with HIV: a community perspective"



Regional meeting on the access and prices of the ARV drugs in South Eastern European countries

December 15, 2020 (virtual)

- Presentation "Use of competition for lowering prices for HIV treatments. Generics: myths and realities."

08 PARTNERS



09 ENGAGEMENT & SUPPORT

The work of the Life4me.plus would not be possible without the voluntary commitment of its members and volunteers. During this year we had 12 paid specialist and more than 20 volunteers.

We would like to thank everyone who helped us:



Thank you from more than a thousand people, whom we all, working together were able to help during these difficult days, to ensure they continued their therapy and thereby support bringing an end to the HIV epidemic even closer.

Leonid Sabina Oleksander Elena
Sergey Alfia David
Francesco Manuel Bogdan
Bosko Vasilij
Novica
Elvis
Jamshed
Kateryna Alexander Sofya Alexey
Charlo
Olena
Anthony Ekaterina
Arda Roman Lee
Nataliya
Alexandra

Natalia Evgeniy
Ruslan Irina
Pavel Alexey
Oleg Vladimir Nikita Ruslan
Dmitriy Yuriy Aleksei Anna Abimbola
Viktoriiia Valera
Katya Antonina
Tatyana Dmitriy
Natalya Pavel
Fabio Lena Olga

Nazokat
Fedor Elena
Timur
Anastasija Ekaterina
Danil Ilmira Pavel
Anzhelika
Valera Dragan
Viacheslav
David Valeria Alesya
Ilya Olga

Atalay Alexander Oxana
Yulia Artem Ahmed
Charlo Oleksii Genri
Daria Shohzhahon
Manuel Anastasiya Timur
Eugen Romas
Alfia Kseniya
Elya Oxana Alena
Sabina Daria Andrey
Vikas Alina Vyachaslav Konstantin
Artem Kennedy
Alina Muhammad
Alexander Elis Abimbola
Diana Shohzhahon
Lee Alexander Kseniya
Yuriy Kristina
Romas Zhanna Sergey
Olga Kateryna Fabio
Ruben Diana
Liliya Natalia Yuliya

Roman Roman
Yuliya Marcelo Aleksel
Valeria Shohzhahon
Roman Anthony
Alla Tatyana Lesya
Denis Viktor Jamshed
Ilya Kirill Alexander
Alena Kroupa Radmir
Marcelo
Ilja Kseniya Alesya
Sofya Fedor Denis
Rudzani
Ligao
Asel Konstantin
Ivan
Ben Ervin
Vladimir Alexander
Elena
Anna Oksana
Vitaliy Nikolay
Leonid
Alesia Antonina Marina

Atalay Alexander Oxana
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Eugen Romas
Alfia Kseniya
Elya Oxana Alena
Sabina Daria Andrey
Vikas Alina Vyachaslav Konstantin
Artem Kennedy
Alina Muhammad
Alexander Elis Abimbola
Diana Shohzhahon
Lee Alexander Kseniya
Yuriy Kristina
Romas Zhanna Sergey
Olga Kateryna Fabio
Ruben Diana
Liliya Natalia Yuliya

Roman Roman
Yuliya Marcelo Aleksel
Valeria Shohzhahon
Roman Anthony
Alla Tatyana Lesya
Denis Viktor Jamshed
Ilya Kirill Alexander
Alena Kroupa Radmir
Marcelo
Ilja Kseniya Alesya
Sofya Fedor Denis
Rudzani
Ligao
Asel Konstantin
Ivan
Ben Ervin
Vladimir Alexander
Elena
Anna Oksana
Vitaliy Nikolay
Leonid
Alesia Antonina Marina

Natalia
Vasiliy Aleksandr
Olga Dmytro
Evgeniy Kirill Valera
Sabina Katya
Muhammad Ben Maria
Igor Kenzo
Irina Dmytro
Vitaliy Aleksandr Lesya
Valentina Bosko
Oxana Elya Ibeh
Bogdan Ahmed
Kirill Tatyana
Nadezhda Ruben
Ahmed Zhanna Vadim

Alexandr Vladimir Ligao
Kristina Viktor Timur Nataliya
Igor Ekaterina Kenzo
Kasymzhan Eugen
Ibeh Ervin Anna
Maxim Oleg
Alexey Alla
Viktor Maria Alesya
Novica Oksana
Antonina Nina
Kennedy
Radmir Anzhelika
Smart Robert Vityay
Liliya Ivan Kroupa
Nikolay Arda
Konstantin Danil
Viktor Valentina

Verein Life4me.plus, 5600 Lenzburg

Balance sheet as at 31.12.2020

Assets	2020		2019	
	CHF		CHF	
Bank	139 068,27	86,77%	17 708,14	42,90%
Liquid assets	139 068,27	86,77%	17 708,14	42,90%
Accrued revenue	11 450,75	7,14%	10 572,56	25,61%
Accrued income	11 450,75	7,14%	10 572,56	25,61%
Current assets	150 519,02	93,92%	28 280,70	68,51%
Software	22 754,16	14,20%	22 754,16	55,12%
Value adjustment on Software	-13 004,16	-8,11%	-9 754,16	-23,63%
Intangible assets	9 750,00	6,08%	13 000,00	31,49%
Fixed assets	9 750,00	6,08%	13 000,00	31,49%
Total assets	160 269,02	100,00%	41 280,70	100,00%
Liabilities				
	2020		2019	
	CHF		CHF	
Other short-term liabilities	0,00	0,00%	0,00	0,00%
Current account participant	8 167,10	5,10%	41 430,00	100,36%
Other short-term liabilities towards participants & organs	8 167,10	5,10%	41 430,00	100,36%
Deferred liabilities	51 077,65	31,87%	3 181,25	7,71%
Deferred liabilities	51 077,65	31,87%	3 181,25	7,71%
Fonds	100 000,00	62,40%	0,00	0,00%
Fonds	100 000,00	62,40%	0,00	0,00%
Dept capital	159 244,75	99,36%	44 611,25	108,07%
Association capital	-3 330,55	-2,08%	17 624,17	42,69%
Annual loss / - profit	4 354,82	2,72%	-20 954,72	-50,76%
Net loss / net profit as at 31.12.	1 024,27	0,64%	-3 330,55	-8,07%
Equity	1 024,27	0,64%	-3 330,55	-8,07%
Total liabilities	160 269,02	100,00%	41 280,70	100,00%

Operating statement from 01. January to 31. December 2020

	01.01. - 31.12.2020		01.01. - 31.12.2019	
	CHF		CHF	
Earmarked Donations	135 532,05	49,38%	109 499,01	78,03%
Donations without earmarking	108 926,20	39,69%	503,99	0,36%
Other incomes	6,95	0,00%	320,04	0,23%
Project revenue	30 000,00	10,93%	30 000,00	21,38%
Total income	274 465,20	100,00%	140 323,04	100,00%
Project costs & costs of development	-99 189,49	-36,14%	-107 667,81	-76,73%
Direct expenses	-99 189,49	-36,14%	-107 667,81	-76,73%
Gross profit	175 275,71	63,86%	32 655,23	23,27%
Total personnel expenses	-48 289,45	-17,59%	-28 967,45	-20,64%
Gross profit 2	126 986,26	46,27%	3 687,78	2,63%
Rental expense	-2 400,00	-0,87%	-2 400,00	-1,71%
Maintenance, repair, replacement	-562,90	-0,21%	-1 651,56	-1,18%
Postage	-1 309,54	-0,48%	-113,11	-0,08%
Fees, donations	-100,00	-0,04%	-100,00	-0,07%
Consulting fees, accounting fees	-3 797,15	-1,38%	-3 848,00	-2,74%
Internet and web Services, Hosting	-1 569,85	-0,57%	-1 595,11	-1,14%
Advertising expenses	-3 025,85	-1,10%	-758,55	-0,54%
Travel- and representation expenses	-6 445,35	-2,35%	-10 535,37	-7,51%
Total operating expenses	-19 210,64	-7,00%	-21 001,70	-14,97%
Operating result before amortisation and adjustments, interests and taxes (EBITDA)	107 775,62	39,27%	-17 313,92	-12,34%
Depreciation	-3 250,00	-1,18%	-3 250,00	-2,32%
Operating result before interests and taxes (EBIT)	104 525,62	38,08%	-20 563,92	-14,65%
Fiancial expenses	-170,80	-0,06%	-390,80	-0,28%
Total financial result	-170,80	-0,06%	-390,80	-0,28%
Operation result before Fund allocation	104 354,82	38,02%	-20 954,72	-14,93%
Fund allocation	-100 000,00	-36,43%	0,00	0,00%
Annual profit / loss	4 354,82	1,59%	-20 954,72	-14,93%



 **UNAIDS**

4Life4me+

 **World Health Organization**

 **EACS**
European
AIDS
Clinical
Society

APPENDIX

ANNUAL REPORT 2020

SUPPORTING PEOPLE LIVING WITH HIV
STRANDED ABROAD

Travelling abroad?

Stranded?

HIV medication running out?

01 BACKGROUND

The new coronavirus pandemic continues to impact upon our normal measured and more predictable lifestyle. Thousands of people have found themselves in a very difficult situation, due to emergency measures which closed borders, to prevent the spread of the new coronavirus COVID-19. Many people were, unable to leave foreign countries and return home.

The March 2020 data revealed major concerns about when regular flights would be resumed to a number of countries. No clear decisions were made by authorities on this issue and no measures were announced. The tense epidemiological situation in most countries, did not allow or make it easy to forecast reliably when restrictions could be lifted, or additional flights organised.

We found there were problems with the supply of medicines due to the closure of the borders. Many people living with HIV are stranded abroad and their medications were running out.



WHO donation

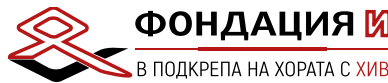
02 GOAL/TASK

Supporting people living with HIV stranded abroad during the pandemic COVID-19, to ensure they continue their therapy

03 ACTIVITIES

- Collecting information from stranded PLWHIV regarding stock outs of HIV medication during the COVID-19 pandemic.
- Monitoring shortages and stock outs of HIV antiretroviral medication, during the COVID-19 pandemic.
- Solving and overcoming problems arising due to shortages and stock outs of HIV antiretroviral medication during the COVID-19 pandemic.
- Co-ordinating with partners, pharmacies and PLWHIV.

04 PARTNERS



DURATION

FROM

MARCH 1

2020

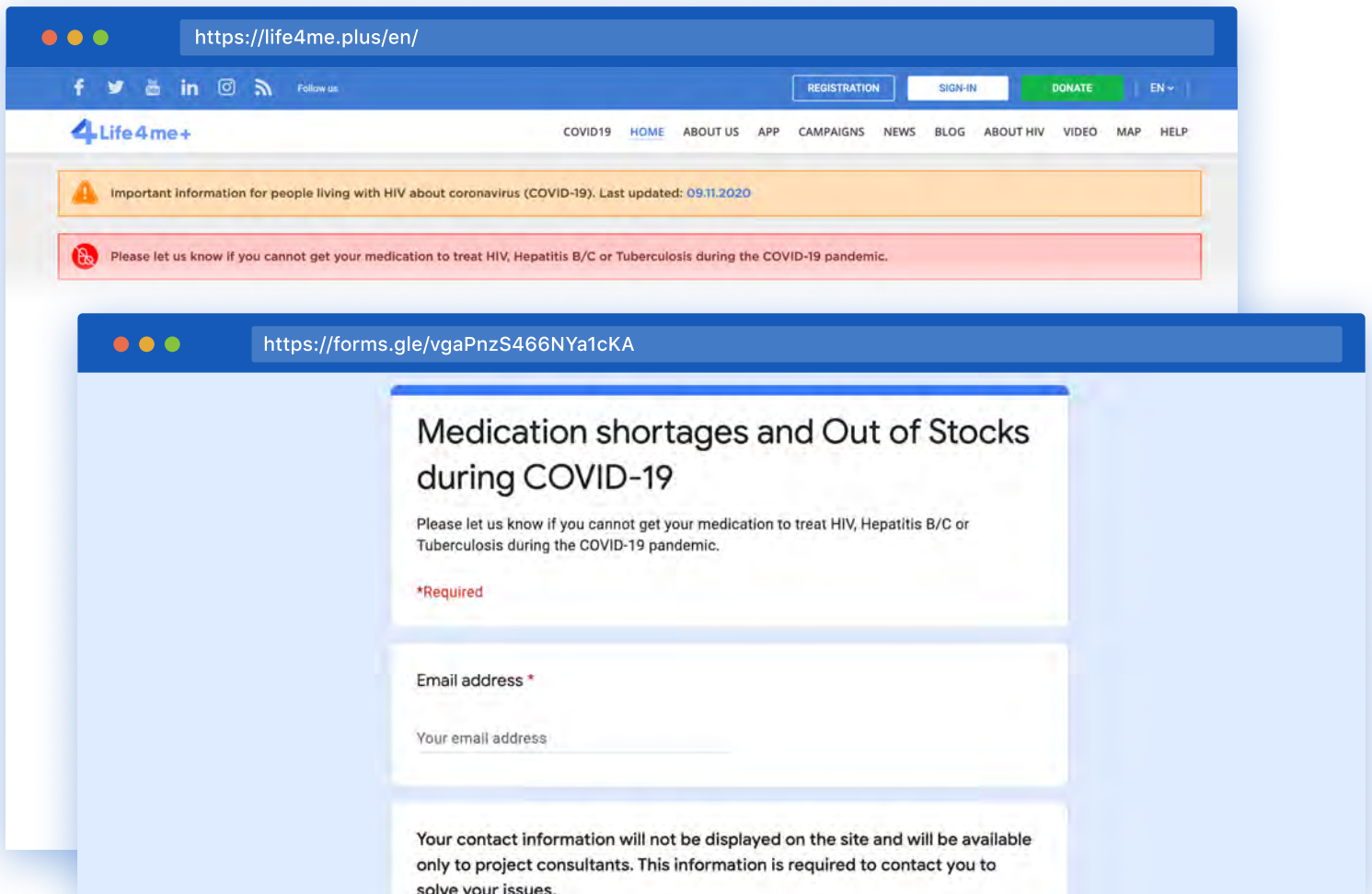
UNTIL

DECEMBER 31

2020

06 ACHIEVEMENTS

We placed a message on our main page reading: "Please let us know if you cannot get your medication to treat HIV, Hepatitis B/C or Tuberculosis during the COVID-19 pandemic." Then a link to a google form, for everyone having problems with HIV medication, enabling them to report to us.



We spread the message: "Please let us know if you cannot get your medication to treat HIV, Hepatitis B/C or Tuberculosis during the COVID-19 pandemic.", through social media and our app.



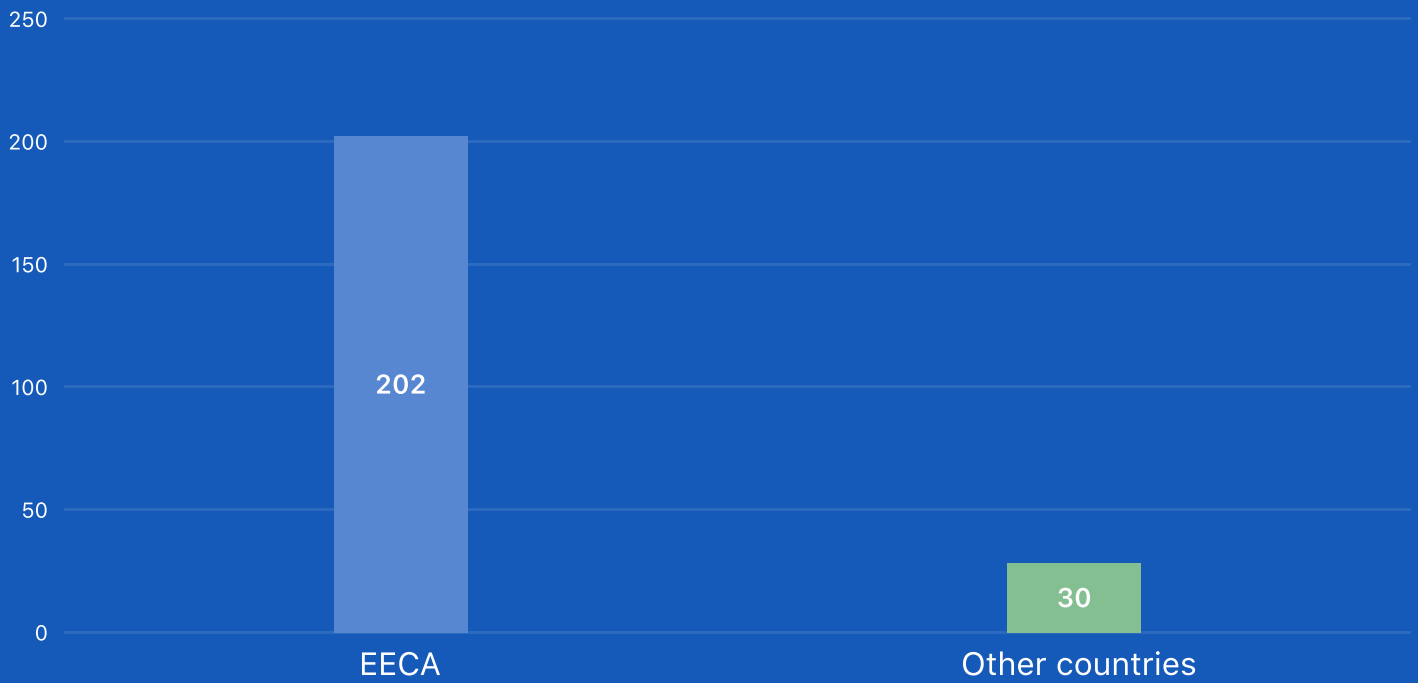
In early March 2020 and the first half of April, we received enquiries from tourists stranded abroad due to closed borders. This is totally understandable, since no one takes medication on vacation which will cover for several months. In mid-April, we began to receive messages from people who work abroad, the so-called labour migrants, who received therapy in their home country. Their stocks were larger than those of tourists, but they were also beginning to run out. They were unable to replenish their supplies at home due to closed borders.

The peak of messages requesting help, fell in April-May. Since June, there have been fewer and fewer messages as borders began to open. The flow of requests for help still remains, since not everyone can visit their home country to replenish medicines. During this time, many have lost their jobs, they could not save enough money to travel home, or have not had enough time to travel during the limited period of time the borders were open (for example, China, North Macedonia we quickly closed). During the autumn, the second wave of coronavirus began and reports of medications stock-outs continued to arrive.

Up until the end of 2020 we were able to help 232 people stranded in 47 countries to continue their therapy. Most people were stranded in Russia (53 cases), Poland (40 cases), German (14 cases) and Thailand (13 cases). More details see below in the table:

Country	Number of cases	Country	Number of cases
Austria	1	Malta	1
Azerbaijan	1	Moldova	1
Belarus	2	Netherlands	5
Belgium	3	Oman	1
Bulgaria	2	Pakistan	1
Cambodia	1	Poland	40
China	2	Portugal	1
Cyprus	2	Russia	53
Czech Republic	7	Serbia	1
Egypt	2	Seychelles	1
Estonia	1	Singapore	1
Finland	1	Slovakia	2
Georgia	3	South Korea	4
Germany	14	Spain	6
Hungary	2	Sri Lanka	3
India	9	Switzerland	5
Indonesia	3	Thailand	13
Israel	2	Turkey	5
Italy	7	Ukraine	5
Jordan	2	United Arab Emirates	1
Democratic Republic of the Congo	1	USA	4
Kyrgyzstan	1	Uzbekistan	2
Latvia	3	Vietnam	2
Lithuania	2	Total	232

202 stranded people (87% of all) were originally from the EECA region (Russia, Ukraine, Moldova, Kazakhstan, Kirgizstan, Uzbekistan, Tadzhikistan) and 30 stranded people (13% of all) were originally from other countries: Serbia, North Macedonia, France, Italy, Czech Republic, Turkey, Nigeria, Ghana, South Africa, Pakistan, Ecuador, Venezuela, Vietnam, China, Canada, USA.



163 people (70% of all) were migrants, 47 tourists (20% of all) and 22 people (10% of all) had local problems in their own country. Migrants are defined as all people who live or stay abroad for a long time due to work, family, study or asylum.

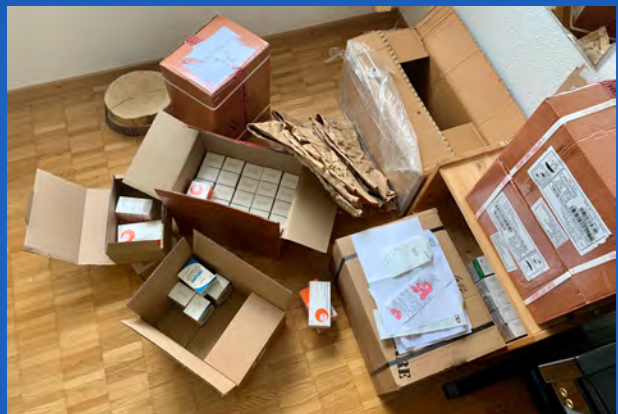


We were able to provide help for all people who asked us. During the first wave of COVID-19, some people asked us to help them on two or three occasions, due to a long lockdown. In many cases we were able to find a clinic or doctor in the country where the person was stranded, and they were able to provide medication for a month. This worked very well for those stranded in Europe, who were mostly tourists. In the case of Asian countries, the Red Cross could help the people we have connected. In the case of labour migrants, most of them have insurance or the right to it, but have never used it. This was because they were unfamiliar with the local health care system, or they feared the migration authority or their employer might get to know their HIV status, which might lead to losing their job or deportation from the country, or stigma around HIV. In all of these cases, after dialogue and consultation, we were able to introduce them to a local clinic. They are all now receiving therapy in the place where they work.

In some cases, we couldn't find a solution to get therapy for the stranded people, so we bought the medication at a pharmacy to send to them. WHO helped us donate TDF/FTC and TDF/3TC medicines, and AFEW helped us fund delivery costs.



WHO donation



Stock of HIV-medicines for stranded people



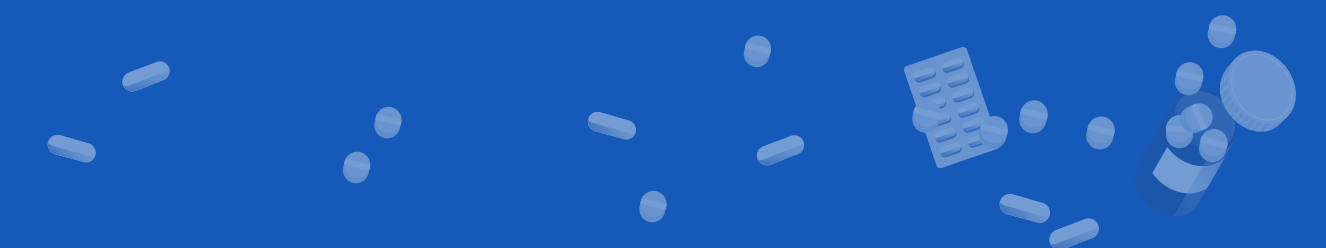
Preparation of HIV medicines for shipment

For all people stranded in Russia, we were able to introduce to our partner organisation ITPCru, who helped them on site. Other partner organisations cooperated with us and support people in need e.g. partners in Czech Republic, Germany, Austria, Ukraine, Uzbekistan, USA. UNAIDS could help us in African and some Asian countries.

Out of 232 people who contacted us, 203 people provided details of their exact therapy, for the other 29, their therapy first used in the clinic or at the doctor with whom we were able to connect them. Of those who told us, most people - 46% (93 of total) received tenofovir-based therapy, followed by 41% (83 of total) dolutegravir-based therapy, followed by 6% (12 of total) lopinavir-based therapy. More details see below in the table:

Therapy	Cases
3TC/AZT/EFV	2
ABC/3TC/ATV	1
ABC/3TC/ATV/r	1
ABC/3TC/DRV/r	1
ABC/3TC/EFV	4
ABC/3TC/ETR	1
ABC/3TC/RAL	1
ATV	1
BIC/FTC/TAF	3
DTG	3
DTG/3TC	4
DTG/ABC/3TC	13
DTG/TDF/3TC	27
DTG/TDF/FTC	25
DTG/TDF/FTC/ETR/ DRV/r	1
EFV	2
ETV/DRV/r/RAL	1
ETV/TDF/FTC	1
EVG/c/TAF/EFV	4
FPV/r/TDF/3TC	1

Therapy	Cases
LPV/r/3TC/AZT/r	2
LPV/r/ABC/3TC	3
LPV/r/RAL	1
LPV/r/TDF/3TC	3
LPV/r/TDF/FTC	3
RAL	1
TAF/FTC/EFV	1
TDF	1
TDF/3TC/ATV	1
TDF/3TC/ATV/r	1
TDF/3TC/DRV/r	1
TDF/3TC/EFV	25
TDF/3TC/elsulfavirin	2
TDF/3TC/NVP	2
TDF/FTC	1
TDF/FTC/DRV/c	1
TDF/FTC/EFV	43
TDF/FTC/NVP	1
TDF/FTC/RAL	1
TDF/FTC/RPV	12
Total	203



07 CONCLUSION

As can be seen, no one was prepared for such a pandemic. We often hear about problems in low- and middle-income countries, for example, about stock-outs of HIV-antiretroviral therapy in Russia, but COVID-19 has covered all countries and even in developed Europe, problems emerged that had been hidden for years. Almost nowhere is there a system of assistance to people without documents, migrants, refugees. The embassy's of countries do not provide proper assistance to their fellow citizens abroad. There is no mutual recognition of insurance and no system to take-on payments for necessary therapy in case of emergency. In many countries, HIV drugs are not considered vital and therefore problems relate to local custom. During the pandemic, a colossal amount of HIV medicines was destroyed by customs, since, according to the law, a private person (for example, a relative who wants to help another relative stuck abroad) cannot send medicine to another private person. And all these medicines were purchased with public funds. For migrant workers, little is invested in their integration and support in the host country.

Community organisations and doctors have played a key role in helping people living with HIV, and have shown incredible activity and solidarity. WHO and UNAIDS were duly involved in their initiatives.



HIV-medications for stranded people



Support of local colleagues in Serbia

08 OUTLOOK

It is imperative for all of us to learn the lesson from this pandemic and prepare properly for other disasters. We can only overcome such problems by working together.



