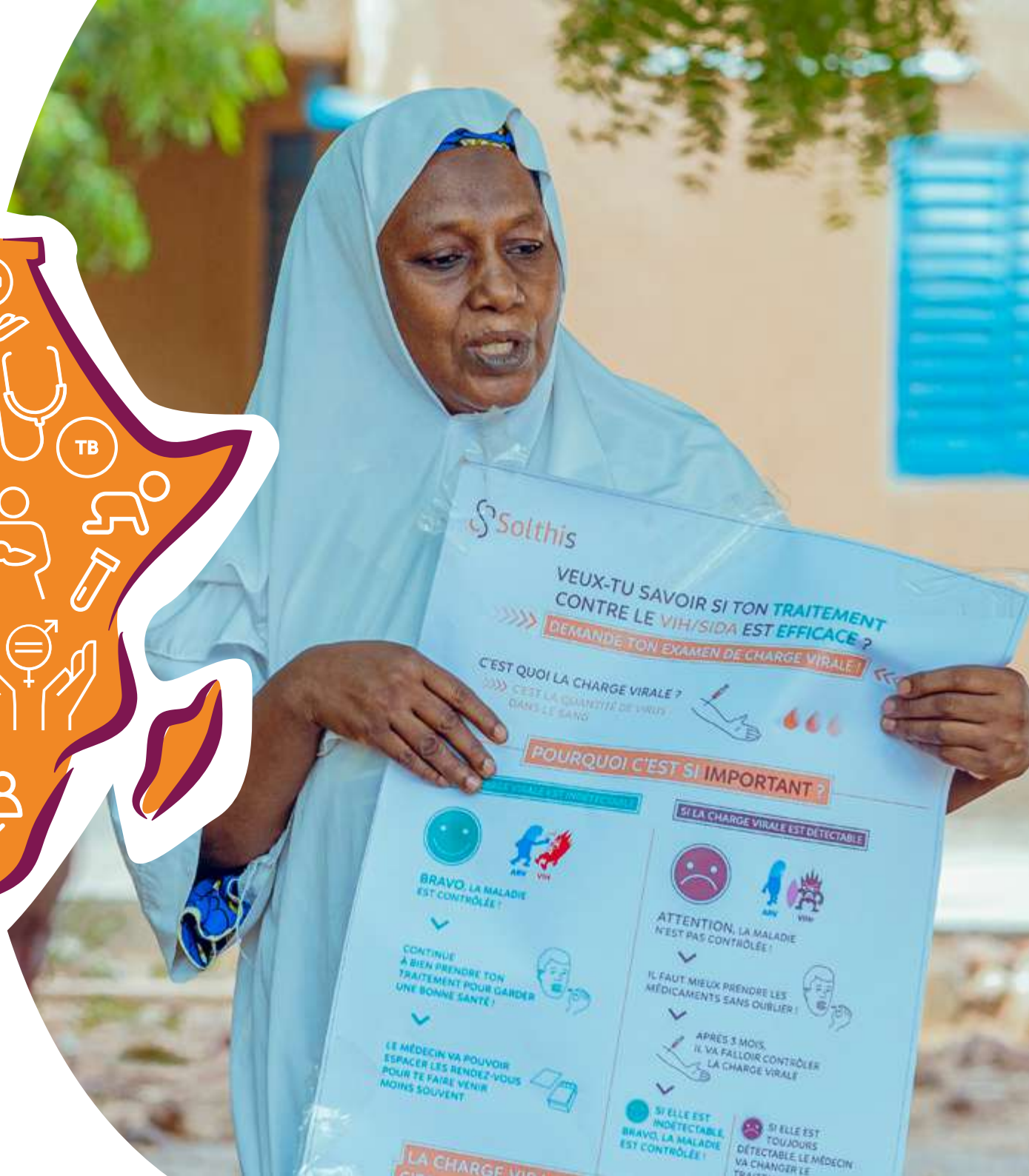


**Health is a right,
equitable access
is vital.**

Solthis
years of commitment
and expertise in health



EDITORIAL

Twenty years ago, a group of French doctors, in collaboration with their colleagues in West Africa, decided to establish Solthis to facilitate access to antiretroviral treatment for people living with HIV. Our organization was founded on the belief that our partners on the ground are best placed to address the HIV/AIDS health emergency and improve the health of populations, with our support. Community-based support, based on exchanging expertise and trust, rather than acting in place of local people. This was initially possible thanks to support from the Bettencourt Schueller Foundation.

Through a modern and visionary approach, Solthis has taken on many challenges: leading innovative projects, supporting national and international institutions and organizations to deliver them in complex and fragile contexts, and integrating an approach to strengthening health systems right down to the community level. Without its founding values always at its core:

working alongside frontline actors and reaching out to the most vulnerable.

The organization has continued to transform and adapt to changes in the world, implementing in six countries and leading technical assistance in many others, it has changed its financing model through controlled growth, while maintaining the quality of interventions as a central objective. By being a recognized actor in global health and having influence at national and international levels.

Solthis has also been faced with multiple crises that have pushed it evolve, committing to infectious diseases and sexual and reproductive health, getting involved in emerging epidemics, while continuing to work on approaches to care, health promotion, and patients' rights.

We are proud of the results achieved so far and our commitment to a world that is united and respectful of the rights of all persons and all partner countries.

In response to disruptions currently impacting global health, we will carry on, thanks to the people engaged in our work who hold these values.

Covering 20 years of history in just 20 pages is not an easy task, but it provides an opportunity to pay tribute to everyone who accompanied Solthis along the way, and to look ahead into the future together.



Dr Roland TUBIANA,
Chair of Solthis

Dr Serge BREYSSE,
Managing Director

Mali
Opening of the country office for decentralized HIV care in the Ségou region.



Niger
1st project to support the national AIDS control program.



Madagascar
1st epidemiological study on HIV.



Guinea
1st HIV/TB care project.



Burundi
1st technical assistance for Solthis on the decentralization of HIV/AIDS care.



Sierra Leone
1st project on HIV care in Freetown.



10 years of Solthis
HIV Forum Paris and conferences in Mali, Niger and Guinea.



2003

2004

2005

2008

2009

2011

2013



OF EXPERTISE AND COMMITMENT

Solthis was established in 2003 by doctors from the Pitié-Salpêtrière University Hospital in Paris to introduce antiretrovirals in West Africa. The organization has been a pioneer in strengthening health systems and quality of care in low-resource countries.

Solthis was initially focused on the fight against HIV/AIDS in Africa and has gradually expanded its interventions to infectious and emerging diseases, to issues related to sexual and reproductive health and rights, and to the health of women and children.

Solthis' original approach, focused on training

health staff, capacity strengthening of health facilities and technical assistance to institutional partners, has been expanded on to include an approach centered on the needs of health system users, by supporting and empowering them.

2003 → 2023

ANNUAL NUMBER OF PROJECTS

1 project in Mali → 15 projects on average



ANNUAL BUDGET

3,5 € millions → 11 € millions



EMPLOYEES

13 → 130



As clinicians, we were outraged that people were silently dying while treatments existed. We fought for access to treatment, the screening of children and viral load testing.

Prof. Christine Katlama, Co-founder of Solthis, Professor of Infectious Diseases at Pitié-Salpêtrière Hospital



Our organization is in line with current developments in international solidarity, aiming to empower people and organizations in the African countries where we operate, through a localized approach to aid, strengthening the role of 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



Guinea & Sierra Leone
Launch of interventions on continuity of care in the Ebola context, and prevention and control of infections in hospitals.



2015

Mali & Niger: 1st program for the promotion of youth SRH, JADES.

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

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



2016

Senegal, Côte d'Ivoire & Mali
Launch of ATLAS, HIV self-testing First project in Senegal and Côte d'Ivoire.



2018

Guinea & Niger
OPP-ERA project close out on HIV viral load testing. Launch of the AIRE project to improve the identification of respiratory distress in children under five.



2019

Mali & Niger
Projects to combat COVID-19, protect caregivers, 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

Côte d'Ivoire
1st SRHR projects, known as POUVOIR and AGIR.



2022

HAVING A SUSTAINABLE IMPACT ON THE HEALTH OF POPULATIONS

Solthis builds on the expertise of its teams and partners to ensure an impact multiplier approach, through projects with integrated and sustainable responses that are aligned with the needs of populations and are developed with the actors concerned.

Solthis' work is embedded in a comprehensive approach to promoting health and strengthening health systems.

“ Since the organization was established, Solthis' focus has been on global strengthening of health systems from central level to the most remote areas. Global health issues are extremely complex. Solthis believes in taking a multidisciplinary approach to address them and believes in the strength of collective action through bringing together civil society actors, researchers and public actors, to bring international solidarity to life.

Louis Pizarro, Executive Director DNDi, former Solthis Chief Executive Officer (2007 – 2019).

Sustaining and scaling up

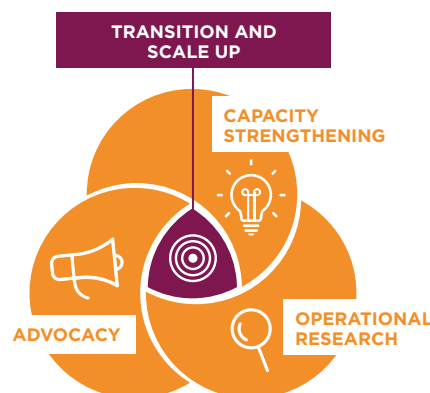
In order to increase the impact of its programs and ensure transition and scale up of interventions, Solthis has developed a methodology with three intervention areas:

> capacity strengthening and empowerment:

Supporting health professionals, facilities and authorities, as well as civil society organizations and communities around strengthening their skills, providing guidance and support for change.

> operational research:

Analyze and understand barriers in accessing care. Lead innovative projects, to identify, test and evaluate sustainable solutions based on field experience.



> advocacy:

Informing the development of public health policies through our medical and scientific expertise and results.

Solthis has successfully carried out projects in this regard, including the CAS-SIS project, strengthening health information systems ; OPP-ERA, access and use of viral load testing ; and ATLAS, which focused on HIV self-testing.

The operational research project on task shifting, TRIDEL, which was conducted in Niger, made it possible to revise the national protocol for the prevention of mother-to-child transmission of HIV (PMTCT) to promote responsibility for treatment prescription being given to midwives for pregnant women, which made it possible to overcome challenges related to shortages of doctors and to strengthen the retention of pregnant women in care. Ten years after the project ended, as a result of the revised protocol and scale up, Niger has increased from eight integrated health centers to over 1,000 PMTCT sites.

“ The ATLAS project was seen as an opportunity. In particular, the project supported us, alongside the World Health Organization (WHO), to develop a national strategy and implement a transition plan for scale up, which will enable access to HIV self-testing in all regions of Senegal.

Prof. Safiatou Thiam,
Executive Secretary of National AIDS Council

Developing a multidisciplinary approach

We mobilize academic expertise that takes into account all dimensions of health issues: epidemiological, medical, sociological, anthropological, economic and political.

Our participatory approach makes it possible to strengthen knowledge sharing and co-create interventions with all groups involved (academics, politicians, the population) in order to improve the quality of our interventions.



OF EFFECTIVE PARTNERSHIPS

Working in partnership, locally, without acting on behalf of people

Solthis' approach is based on the legitimacy of national, institutional and community actors in defining and implementing national health strategies.

We forge close partnerships with many different actors: national institutions, civil society, organizations, academic and research institutes, health facilities and health personnel.

This decentralized and context-based approach makes it possible to enhance the role of actors closest to interventions, by operating in a way that does not attempt to work on their behalf. In this regard, our interventions are aligned with national strategies and policies and support our partners based on the needs they identify.

“Solthis' philosophy is that we design projects together and we implement them together. It's a way of getting us to take ownership of them. Solthis has been a true teacher. It is an educational organization that helps improve the quality of what we are doing in terms of care for patients living with HIV/AIDS.

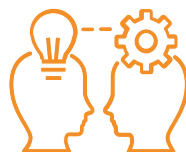
Dr Foromo Guilavogui, Head of the Management Unit at the National AIDS and Hepatitis Control Program, Guinea.



135
partners
institutional, financial,
technical, organizational
and scientific



300
health centers
supported



17,000
health staff trained
and supported



109
projects including
47 technical assistances,
in 19 different countries

OF HEALTH PROMOTION APPROACH

20 years of action for patient-centered health rights

QUALITY CARE THAT TAKES INTO ACCOUNT PATIENT EXPERIENCES

Our approach to health promotion is participatory and inclusive. Solthis works to strengthen health systems, civil society organizations and individuals to enable access to quality, more efficient services, adapted to the needs of users. User experience, adherence and retention in care also require non-medical dimensions to be integrated.



STRENGTHENING CAREGIVER CAPACITY IN THE PROVISION OF PATIENT-CENTERED HIV CARE

The PACTES project in Guinea enabled patient-centred care provision. New models have been tested, in particular through restructuring care provision, a broader range of services including psycho-social care, and a better caregiver/patient relationship. In addition, support to patient associations has enabled strong community mobilization around access to quality care and respect for the rights of users.

“ Thanks to Solthis, I no longer have misconceptions about HIV. My relationship with patients has improved. Solthis has given me knowledge and skills, I can now confidently counsel patients, test them, put them on treatment and ensure proper follow-up.

HIV nurse counsellor, supported by the Empower II project, Sierra Leone.

IMPROVING USERS' RIGHTS

Solthis' approach takes into account all stakeholders to reaffirm the fact that every sick person has fundamental rights in their care pathway.

“ There has been a lot of work to combat stigma and we have made progress in this area. We have made it clear that HIV/AIDS is a disease like any other, as long as patients receive medical and psychosocial care, of course. Now, everything is in place to respect the rights of people living with HIV.

Alhousseini Maiga, President of Renip+, Nigerien Network of People Living with HIV, Niger.

REAFFIRMING PATIENTS' RIGHTS IN HEALTH SERVICES

As part of the Empower project in Sierra Leone, the patients' rights charter, developed by NETHIPS (PLHIV network) with support from Solthis, was disseminated to all stakeholders: community, law enforcement agencies and health workers. This large-scale advocacy intervention helped defend the rights of people living with HIV (PLHIV) and helped reduce discrimination.

20 years of action for the rights to health: supporting individual and collective empowerment

Solthis operates on three levels to strengthen empowerment:

1. **individual level (patients and users; health workers; community and civil society actors; institutional actors),**
2. **organizational level,**
3. **national level.**

Solthis works in particular through strengthening skills and empowerment at both individual and collective levels, but also provides organizational guidance, organizational capacity building, advice to decision-makers, advocacy and technical assistance.



We have been involved for many years in community health approaches and work to strengthen levels of user participation, their technical and also psychosocial skills (self-esteem, self-confidence, ability to manage conflicts and overcome obstacles, etc.). This is so that they can make informed choices for their own health.



STRENGTHENING THE AUTONOMY OF INDIVIDUALS IN LINE WITH THEIR NEEDS

Solthis sets up awareness-raising workshops on social representations, participatory diagnostics and group workshops (awareness-raising, self-help groups, health education, literacy workshops, creation of educational tools, etc.).

“Adolescents and young people are ready for positive sexuality but are held back by the environment, taboos, parents and sometimes health providers. We work to remove these obstacles, by teaching health care providers to engage in dialogue to promote positive sexuality.

SANSAS project partner, Senegal.



PROMOTING THE AUTONOMY OF CIVIL SOCIETY ACTORS

In Sierra Leone, the EMPOWER II project contributed to empowering support groups for people living with HIV to advocate for their rights to health, including through strengthening the NETHIPS

network. Through a participatory assessment, the plan developed made it possible to improve how they were structured and their institutional capacity to take action, adapted in particular to visibility and advocacy activities.

“The project gave us the opportunity to self-assess ourselves as an organization. We now have a roadmap and an action plan. We are becoming a modern, autonomous organization.

Idrissa Songo, Executive Director of NETHIPS,
Network of People Living with HIV in Sierra Leone.



The figure consists of two maps of Africa, labeled '2003' and '2023', illustrating the growth of UN Women's operational and technical assistance presence. A legend indicates that dark red countries represent 'Countries of operation' and orange countries represent 'Technical assistances'.

2003: The map shows four countries in dark red (Senegal, Gambia, Guinea-Bissau, and Guinea) and no orange countries.

2023: The map shows a significant increase. Dark red countries (operational) include Senegal, Gambia, Guinea-Bissau, Guinea, Sierra Leone, Liberia, Ivory Coast, and Chad. Orange countries (technical assistance) include Mauritania, Mali, Burkina Faso, Niger, Nigeria, Cameroon, DRC, Congo, Angola, and Mozambique. Madagascar is also shown in orange.



STOP

“ Solthis’ working approach with the public health system is part of a technical assistance framework with local support. It takes a mentoring approach at all levels of the health system. This has enabled us to make considerable progress in patient recruitment, monitoring, quality of care, prevention of mother-to-child care, data collection and reporting and decentralization with new centres at regional level.

Dr. Oumarou Seybou, Head of the Support Unit
at the Sectoral AIDS Control Unit, Ministry of Public Health, Niger.

“ The Solthis team and the ATLAS project supported the AIDS response in Côte d’Ivoire. They shared a lot with us and strengthened our conviction that we can do more for the population, to make self-testing available.

Prof. Eboi Ehui, Director-Coordinator of the
National AIDS Control
Program, Côte d’Ivoire.

“ Solthis has a huge capacity to adapt both to the needs of populations and to different donors thanks to its coordinated approach. Solthis’ interventions are based on expertise, efficiency and adaptability. Civil society capacity strengthening is carried out by means of a two-pronged approach: supporting public actors and working with civil society organizations.

Nicolas Le Guen, Head of Civil Society
Partnerships, AFD, France.

“ The collaboration between our institution and Solthis has been a game-changing catalyst in terms of prevention and care for people living with HIV. The collaboration has enabled us to be efficient: our dream team is the most sought-after in the region.

Dr. Ahmed Tidian Barry, former Director
General of Boké Regional Hospital, Guinea.

“ The ECOVAM study will enable Mali to develop an adapted field-based approach that has maximum reliability for the detection of COVID-19.

Prof. Daouda Kassoum Minta, Infectious
Diseases Officer, Head of Infectious
Diseases Department at the Point G
University Hospital, Bamako, Mali.





EMERGING INFECTIOUS DISEASES

Since its inception, Solthis has been fighting infectious diseases such as HIV / AIDS and tuberculosis, and now brings its expertise to other emerging diseases.

In West and Central Africa, infectious diseases remain the leading cause of death. Their impact on the health of individuals and on fragile health systems is significant in a region where the consequences of climate change increase disease risk. It is essential to continue our efforts to ensure effective and sustainable access to care for all.


Nearly
400,000
HIV self-tests distributed
in Côte d'Ivoire, Senegal and Mali


85,000
people living with HIV (PLHIV)
assisted in centers supported
by Solthis and its partners


38,000
children screened
for tuberculosis
in Sierra Leone


16,771
patients tested
for COVID-19
in Mali and Niger



Continuing the global response to HIV / AIDS

West and Central Africa accounts for 12% of people living with HIV globally, but 30% of new infections in children and 20% of HIV-related mortality globally.

In the context of the UNAIDS 95-95-95 targets, Solthis is developing global approaches to the fight against AIDS.

IMPROVING ACCESS TO TESTING, WITH A PARTICULAR FOCUS ON SELF-TESTING

Promoting testing and facilitating access to it is at the heart of Solthis' response, in particular through the technological and societal innovation that HIV self-testing represents.



SELF-TESTING - FREEDOM TO KNOW YOUR STATUS

The ATLAS project introduced self-testing in Mali, Côte d'Ivoire and Senegal. This approach, which included 400,000 test kits being distributed by CBOs and peers, resulted in 91% coverage of key populations. This approach increased access to testing for vulnerable populations by 38%.

“ Solthis is an organization that pushes innovative and transformational projects. ATLAS called into question the entire testing system and transformed the health system at its core.

Mach-Houd Kouton,
UNAIDS WCA Advisor, Senegal.

TREATMENT THAT IS ACCESSIBLE AND AVAILABLE

Solthis carries out projects that facilitate people's access to HIV / AIDS treatment. One of the current challenges is access to new molecules and new formulations, which are more effective, affordable, less restrictive and better tolerated, especially for children.

STRENGTHENING THE CAPACITIES OF ACTORS INVOLVED IN PROCUREMENT AND SUPPLY MANAGEMENT

“ Solthis' intervention approach is interesting: it is about getting things done and not about acting in place of others. Today, there is real ownership of the work that has been carried out by Solthis.

Mouslihou Diallo, pharmacist with the National Program
for prevention and care of STIs/HIV/AIDS, Guinea.

SUPPORTING THE INTRODUCTION OF NEW MOLECULES INTO NATIONAL RECOMMENDATIONS

In Madagascar and Niger, Solthis supported the authorities to develop a transition plan to Dolutegravir-based regimens. In addition, Solthis is exploring the introduction of injectable antiretrovirals (ARVs) in Senegal (TIVIH and TIVIH access project) to improve the quality of life of PLHIV.

IMPROVING CARE FOR CHILDREN AND ADOLESCENTS LIVING WITH HIV

In Senegal, we are assessing the impact of transitioning to Dolutegravir in adolescents (IODA project). In Cameroon and Benin, we support national programs to identify difficulties and propose ways to improve care for children and adolescents.

ENSURING VIROLOGICAL MONITORING

Viral load testing is crucial to be able to assess how effective treatment is and to adjust it accordingly, where necessary.



IMPROVING VIRAL LOAD TESTING ACCESS TO TRACK TREATMENT EFFECTIVENESS

The OPP-ERA project increased access to viral load testing and integrated it into the health systems of four countries in West and Central Africa, by establishing 11 molecular biology laboratories, carrying out staff training, ensuring ongoing availability of inputs, structuring sample collection and reporting systems and involving health authorities and users. It has enabled access to viral load testing for more than 230,000 patients.

MANAGING TREATMENT FAILURE

OPP-ERA highlighted difficulties in using viral load results for patients with virological failure. Solthis then developed a caregiver support methodology based on multidisciplinary discussions in Guinea and Niger. The Labo-2S project in Niger has since increased the management of patients with virological failure by 65%.



Responding to tuberculosis and emerging infectious diseases

INTRODUCING RAPID TESTING TO OPTIMIZE THE COVID-19 RESPONSE

Solthis contributed to the introduction of rapid screening tests and the identification of people with suspected COVID-19 in health centers in Niger and Mali, and in the community in Mali.

More than 16,000 people benefited from the identification of clinical signs of COVID, and 3,789 received a diagnostic test.

This project showed how significant the spread of the virus was - it was the reason for more than 20% of consultations in healthcare settings. This approach increased access to diagnosis in health centers by more than 170% and in the community by more than 2,000%, compared to the previous method (PCR).

“With the antigen test, we get the result in 15 minutes. If the test is positive, the patient is treated early, which reduces the spread of the virus within the community and in health centers.

Dr. Issouf Maïga, COVACOM Project Leader, Solthis Mali.

DECENTRALIZING SCREENING TO COMBAT PEDIATRIC TB

The TB-SPEED project was carried out with the University of Bordeaux and has strengthened tuberculosis screening in children under the age of 15. Solthis implemented the project in Sierra Leone, where 38,000 children were screened for clinical signs of TB.

As a result, the number of children receiving TB diagnosis and treatment increased by 250%.



MATERNAL AND CHILD HEALTH

For quality and available maternal and child health services

In Africa, maternal, neonatal and infant mortality remain a significant challenge. The continent has the highest infant mortality rate, with 72 deaths per 1,000 live births (WHO, 2020), which is far from the United Nations target of 25 deaths per 1,000 by 2030.

Yet the majority of these deaths are preventable. The health of women and children is a priority for Solthis. Our interventions are aligned with the Sustainable Development Goals (SDGs) and the ambition to reduce global maternal, newborn and child mortality rates.

TESTING TO IMPROVE DECENTRALIZED CARE FOR CHILDREN

The AIRE project, coordinated by ALIMA and rolled out in Niger by Solthis, improved the identification of respiratory distress in children through the integration of a diagnostic tool - the pulse oximeter - in health centers, as well as the training of community outreach workers and awareness-raising for families. This project reached 10,000 children in Niger, in a decentralized way.

*IMPROVING HIV DIAGNOSIS IN PREGNANT
WOMEN AND THEIR INFANTS TO OPTIMIZE
PREVENTION AND TREATMENT*

In Guinea, Solthis supported the national program to ensure that HIV testing was carried out systematically during childbirth. The DIAVINA project has shown the value of optimizing preventive treatment in newborns according to their transmission risk. The IPOP project is setting up technology that allows for viral load test results in 90 minutes for mothers during delivery and the early diagnosis of newborns in order to optimize the care of mothers and children. In Niger, the Labo-2S project improved access to infant testing by 250% and reduced the time to receive results.

In addition, we support the authorities to improve the prevention of HIV transmission in 26 priority sites in different regions of the country.

*TESTING DRONE EMERGENCY
TRANSPORTATION TO IMPROVE CARE*

In Guinea, traffic in the capital city is a key barrier to access to early HIV diagnosis and treatment for infected children. The AIRPOP project showed that drone transport of blood samples from exposed newborns was a well-accepted solution, and the model was cost effective. We will soon explore operationalization of this solution, in order in the long term to improve the care of 2,500 children exposed to HIV who are born each year in Guinea.





SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

For a comprehensive and integrated approach to sexual and reproductive health and rights

In West and Central Africa, there continues to be multiple barriers to access to sexual and reproductive health and rights (SRHR). Although the main indicators have improved in recent years, developments remain fragile and well below the SDG targets.

In this respect, prevalence of contraceptive use is 22%, compared to 63% globally and it is estimated that each year half of pregnancies are not by deliberate choice. Sexual and reproductive health (SRH) issues account for 17% of adolescent deaths

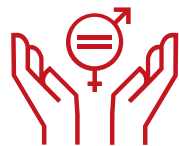
(UNFPA 2022).

In order to meet the needs of the population in terms of SRHR, in particular for young people and adolescents and the most vulnerable (PLHIV, sex workers, LGBT+ people, etc.), Solthis is implementing interventions to improve access to comprehensive and quality SRH services, and to strengthen comprehensive acknowledgement of sexual and reproductive rights.



Over **135,000** people sensitized, trained and had access to SRH services

Of these, 93% were young people and adolescents between the ages of 10 and 24, including:



more than **60,000** reached by awareness-raising, prevention and training on SRH issue since 2016 in Mali, Niger, Senegal, Guinea and Côte d'Ivoire.

Senegal, Guinea and Côte d'Ivoire.



more than **75,000** have had consultations, have been tested for HIV/AIDS, other STIs or have been seen in a mobile health clinic supported by Solthis and their partners since 2016 in Mali, Niger, Senegal, Guinea and Côte d'Ivoire.

Niger, Senegal, Guinea and Côte d'Ivoire.



ENHANCING YOUTH EMPOWERMENT TO DEFEND THEIR RIGHTS

In Niger, in partnership with the NGOs Lafia Matassa and EquiPop, the JADES 2 project aims to build collective leadership among young people in order to challenge the authorities to change public policies to respect their rights and enable access to quality SRH care. The #ZeroViolence campaign led by the Young Leaders for Advocacy reached nearly 200,000 people and challenged the Ministry of Education on sexual and gender-based and violence (SGBV) in schools. Through this campaign, which combined advocacy and communications, the internal regulations for schools were revised to prevent, protect and provide care for victims and witnesses of SGBV.



DEVELOPING A PEER-TO-PEER APPROACH TO ENGAGE YOUNG PEOPLE

As part of the JADES project in Niger, youth outreach by young people has been at the center of the SRH advocacy approach to get their voices heard, help them speak their minds and facilitate their access to SRH services.

“ I raise awareness among my classmates at school, in neighborhoods, communities, health centers. At home, the subject is taboo. A young person who has no information is in the dark and may have unprotected sex. With JADES, things change and we give young people information. We follow them step by step.

Aïssata Sanda, youth peer educator,
Niamey, Niger.



HAVING THE KNOWLEDGE NEEDED TO ASSERT THEIR RIGHTS

In partnership with the NGO RAES, the SANSAS project in Senegal focused on raising awareness among young people and their family and friends through film and debate sessions and broadcasting of a television and radio series called «C'est la vie!» as well as mobilizing young leaders for advocacy with the organization, EquiPop.

EXPANDING AND IMPROVING SRH SERVICE PROVISION FOR YOUNG PEOPLE

With their partner Enda Santé, the SANSAS project in Senegal has set up mobile clinics to provide local services that are adapted and accessible to young people (in terms of timings, locations, etc.). Running until 2025, the project is putting in place, with EquiPop, a monitoring and knowledge transfer plan to ensure results are known about and used by decision-makers and the general public. The project has already carried out more than 16,000 consultations with adolescents and young people and trained 55 young leaders.

PROMOTING CIVIL SOCIETY'S ROLE TO BETTER TAKE INTO ACCOUNT LOCAL REALITIES

With the objective of supporting organizational development, the PAJES project in Guinea supported the Ablogui bloggers' association and the CNOSC-PF network of young ambassadors to work together. They are now developing cross-organizational advocacy and information campaigns for other young people on SRHR, including gender-based violence.



ADOPTING A PARTICIPATORY APPROACH TO IMPROVE THE RIGHTS AND HEALTH OF SEX WORKERS

In Côte d'Ivoire, the POUVOIR project takes a holistic and participatory approach that places sex workers at the center of their care as key stakeholders of their health. The approach includes strengthening peer educators around SRH focusing in particular on self-care (self-gynecology, self-testing for STIs and self-administered contraception) and gender-based violence (GBV).



Facing the challenges of tomorrow together

Major changes in the global context impact the health of populations and reduce progress achieved in recent years. This is why Solthis will continue to support its partners in Africa to improve access to care and respect for the right to health. We will continue our work for health systems that are more resilient, accessible to all, responsive and adapted to the needs of the populations concerned, especially those that are furthest from care. Training and capacity strengthening in terms of human resources will remain at the heart of our interventions. Solthis will support women and minorities to fight to defend their rights to health, and promote the development of new models of care, such as self-care for greater autonomy of people and to reduce inequalities in health.

We will maintain our interventions in the field of HIV, tuberculosis, sexual and reproductive health, maternal, newborn and child health and develop projects to address the risks of pandemic emergence and hepatitis.

Through our expertise, we will continue to provide innovative solutions with our partners.

We will strengthen our interventions in response to cli-

mate change. We remain committed to the One Health concept and want to work in alliance with experts in animal and environmental health, and expand our interventions to the wider impacts of climate on the health of populations and health systems.

Finally, we will support the necessary developments in international aid. We are conscious of the current challenges around the localization of aid and of our intervention contexts. With our partners we will develop intervention methods and collaborative approaches to strengthen the capacity of national actors and civil societies to take action.

Our 20 years of experience, commitment and learning, our knowledge of the diversity of our countries of intervention, our capacity for innovation, our multi-disciplinary and international teams, our relationships of trust with institutions, health facilities, civil society organizations, populations, other development actors, research institutions and donors, enable us to respond to these challenges, while proposing new models of collaboration that are effective and inclusive to ensure enhanced access to quality health for all.

Brochure written by Anne Degroux (consultant) and Solthis. Design and layout: KAO COM. Photo credits: Afroto, ATC Media Services, MAPS Agency, Bruno Demeocq, Jean Claude Frisque, Manon Levet, Planet IDMedia, Rarili, as well as Solthis employees and volunteers, whom we thank.



135

partners

institutional, financial,
technical, organizational
and scientific



38,000

**children screened
for TB.**



Over

135,000

**people who have been sensitized, trained
and have had access to sexual and
reproductive health services.**

Of these, 93% are young people and
adolescents between the ages of 10 and 24.



109

projects

including
47 technical
assurances,
in 19 different
countries.



300

**health centers
supported.**



years

OF ACTIONS

THANK YOU TO OUR PARTNERS

We would like to thank all our national and international, institutional, organizational, technical, academic and scientific partners for their support in the design and implementation of projects that we have implemented together for 20 years.

We also thank our financial partners. Thanks to the Bettencourt Schueller Foundation who supported us until 2016.

Special thanks to the AFD Group (AFD, Expertise France / L'Initiative), the ANRS, the Global Fund, Unitaïd and the City of Paris, for their ongoing support over several years.

Thank you to all our other institutional and private donors. Thank you also to our sponsors.

Finally, thank you to all our teams who deliver Solthis' work on a daily basis, to the consultants who lead our technical assistance and to all those who have been part of Solthis and who are always by our side.

Without all of you, we could not have made this impact.

You can find a list of our partners on our website and in our activity reports.



85,000

**people living
with HIV assisted**

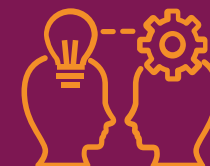
in centers supported
by Solthis and their partners.



Nearly

400,000

HIV self-tests distributed in
Côte d'Ivoire, Senegal and Mali.



17,000

**health staff trained
and supported.**



SOLTHIS

14-34 avenue Jean Jaurès 75019 Paris
www.solthis.org

 /Solthis

 /solthis.org

 /ngosolthis

 /Solthis