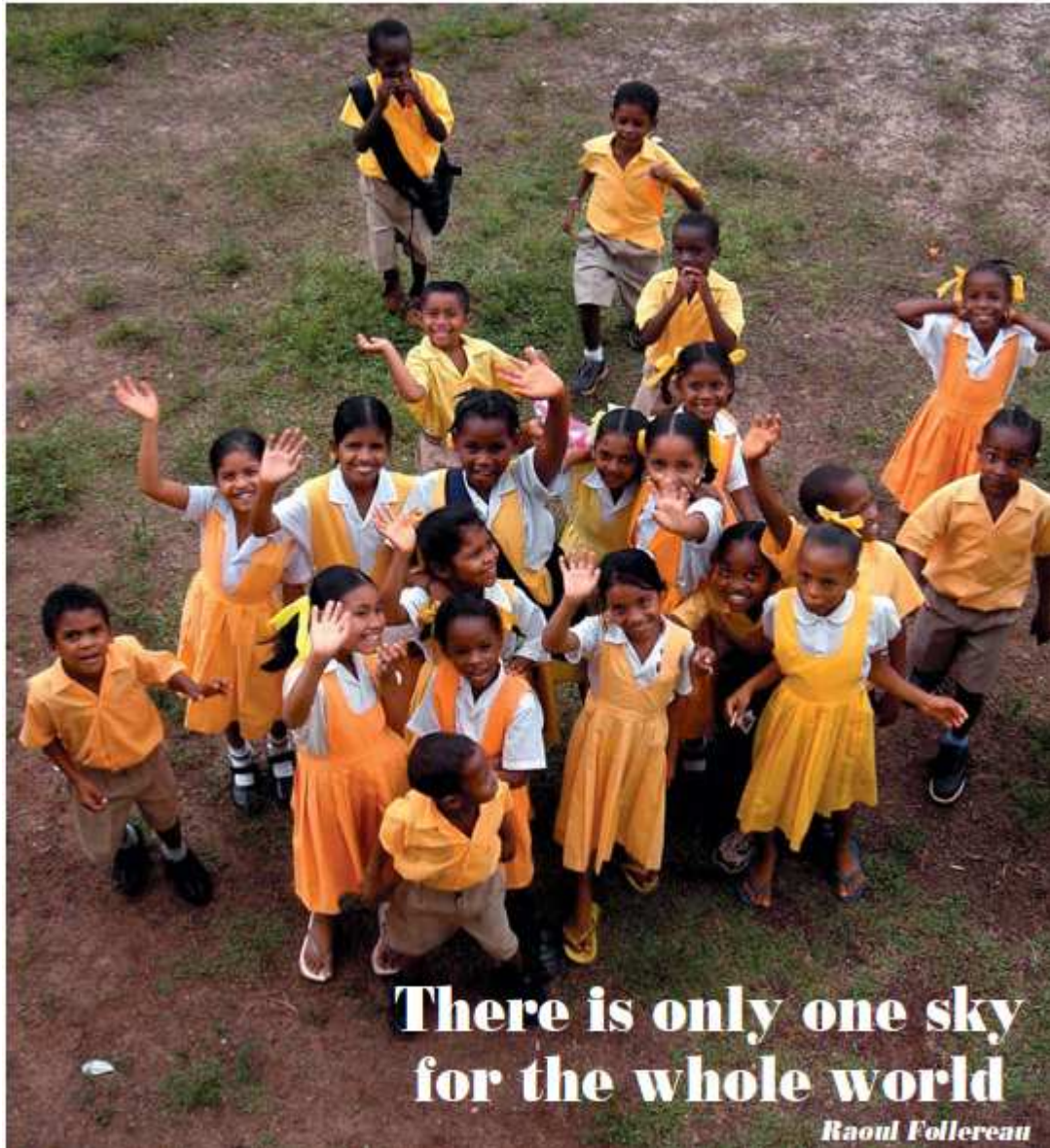


# AIFO Annual Report 2007



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## **CIVILIZATION IS LOVE**

**Dr. Francesco Colizzi, President AIFO**

**The guiding principle of AIFO is the attention towards the poor and marginalised persons.**



Human civilization can be observed from the viewpoint of leprosy. Until very recent times, all the societies that we have, have always isolated persons affected with leprosy. In every corner of the world, leprosy affected persons have been confined to remote and isolated places, chased, avoided and even killed. Tommaso da Celano wrote of a youth from Assisi, the future Saint Francis, who overcame his revulsion to greet leprosy affected persons with a hug and a kiss. At the end of the XIX century, Dr. Armauer

Hansen discovered Mycobacterium Leprae and a Belgian priest, Father Damien, who died of the disease in Molokai, a Hawaiian island that was a leper colony, celebrated a mass and addressing to “we the lepers”.

Later, Raoul Follereau, a young journalist, would discover the leprosy affected persons and become their passionate voice throughout his life. In other words, leprosy has always challenged man, and his questions were not only concerned with cures. These questions were about civilization, not about a specific civilization, but they were questions about the possibility of a universal global civilization, the civilization of love.

“What is civilization?” Is it the index of human development? Is it a high GDP? Does it depend on certain organizational resources of the society? Partly, it is all of these things, but not only. Like the World Bank or the International Monetary Fund, we would run the risk to be hypnotized by figures, to be seduced by statistics or by the advanced technological apparatus of a false civilization.

An example of false civilization is what Follereau defined in his “The civilization of traffic lights”: “Let’s organize an epidemic of goodness! Let’s give power to its chain reactions! And let us despise all that denies, debases and depreciates man. We want Peace in love and through love. Civilization is love”.

It is necessary that the various world civilizations, the Eastern, Southern, Africa and Western recognize each other and promote the interaction between them, in a sort of meeting that does not cancel their differences and that favours their convergence in a civilization of love, the only universal possible convergence.

What can favour the meeting of the civilizations? AIFO makes a clear choice and wants to find a central point for all the main social actors, the religions, the international institutions and the movements; in fact the guiding principle of AIFO is the attention towards the poor and marginalised persons.

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## **Raoul Follereau: A Brief Introduction to the Person Who Inspired AIFO**

AIFO was inspired by the French journalist and philosopher Raoul Follereau. There are many Raoul Follereau organisations inspired by him in Europe, Africa, Asia and Latin America. Born in Nevers (France) in 1903, Raoul Follereau was just 17 years old when he



published his first volume: “The book of love”. Still very young, he started his career of writer & poet, which was to be very successful. In 1936, the director of an Argentine newspaper asked him to go to Sahara region to tread Father de Foucauld’s steps, whose 20th anniversary of death was about to be celebrated. It was during one of these travels that Follereau met the leprosy-affected persons for the first time. In the following ten years he travelled the

world many times, holding 1200 conferences which allowed him to support the building of Adzopé in Ivory Coast, the town of the leprosy affected persons.

But he still felt that some thing more should be done. He wanted them to be free from the segregation imprisoning them, and from the stigma of the disease. So he went to visit them, he embraced them, he became friends with them, to promote the idea that leprosy affected persons are human beings, as for centuries they had been considered just deformed beings to be isolated, by the whole world.

In addition to the support to the leprosy patients and the fight against the stigma he also carried out a strong campaign to inform people about poverty, injustice and indifference, the underlying causes of the disease. His appeals for peace and for a more equal distribution of the planet resources, became very famous. Raoul Follereau was an able communicator and he had a great ability in raising enthusiasm and in stimulating commitment from even, the simplest persons.

## **AIFO GUIDELINES FOR INTERNATIONAL PROJECTS**

New guidelines for international project support of AIFO were approved in 2007. These guidelines will be applied to the existing projects in a gradual way. The main points of these guidelines are as follows:

**Country Programmes:** AIFO will develop its international co-operation activities in Countries under a framework of “Country Programmes”. The presence of an “AIFO’s Country Coordinator” will be promoted where AIFO is operating.

Country Coordinators ensure that:

- project activities are developed according to the priorities identified by AIFO.
- relationships with different partners, including governments, NGOs and faith-based organisations, are consolidated for promoting reciprocal exchange of experiences and learning, aiming for an equilibrium between different kinds of partners.
- project activities are developed harmoniously in relation to priority areas of work for AIFO: leprosy, primary health care, disability & rehabilitation, and vulnerable children.
- feasibility studies and preparation of project proposals for co-financing, are developed ensuring sustainability and beneficiary participation.

**Priorities:** Fight against leprosy in a comprehensive vision of affected persons remains central priority of AIFO. Specific aims to be pursued include promotion of integration of leprosy control into primary health care, joint programmes with other diseases such as tuberculosis, actively supporting referral services, prevention of disabilities and rehabilitation programmes including socio-economic rehabilitation, support to elderly persons with leprosy related disabilities and partnerships with organisations of leprosy affected persons such as IDEA, Morhan, etc.

AIFO gives priority to strengthening of primary health care activities that include leprosy control, specially in isolated and difficult to access areas, with a special focus on issues of vulnerable groups including women and children through activities for mother and child health programmes and fight against forgotten diseases.

As far disability & rehabilitation programmes are concerned, AIFO gives priority to community-based rehabilitation (CBR) approaches that promote inclusive societies and are open to persons with physical and mental disabilities including persons with leprosy related disabilities. Priority will be given to support of Disabled People Organisations and enhancement of empowerment process.

AIFO also gives priority to projects dealing with vulnerable children, especially to children with leprosy, children of leprosy affected persons and children with physical and/or mental disabilities.

Finally, AIFO gives priority to projects promoting innovative approaches.

## **AIFO'S STRUCTURE & ORGANISATION**

AIFO's structure can be organised in two broad parts – (1) AIFO base organised in groups of volunteers spread all over Italy, and (2) operative offices of AIFO.

AIFO groups elect delegates to AIFO's General Assembly that takes strategic decisions of AIFO's work. The General Assembly also elects a Board of Directors of AIFO, every three years. Board of AIFO under the guidance of a President takes all decisions for the organisation. All the AIFO delegates and members of Board work as unpaid volunteers for AIFO. At present Dr Colizzi is President of AIFO and new elections for Board of AIFO are planned in June 2008.



AIFO has two operative offices in Italy – a head-office in Bologna and a smaller, supporting office in Rome. Both the offices work under a director, who ensures that all the decisions of AIFO's Board are implemented. The offices are organised in different services including international projects, administration, communication and fund raising, scientific support, training, information technology, secretariat, project accounting, etc. The paid staff in offices is supported by volunteers and trainees.

International projects service of AIFO is organised under project managers, each of whom is responsible for managing projects in a specific group of countries.

## **Raoul Follereau International School of Learning**

Raoul Follereau International School of Learning (RF School) has the goal of promoting knowledge and skills about the priority areas of activities of AIFO including leprosy, primary health care, community based rehabilitation, vulnerable children and Raoul Follereau. The activities of RF School are directed towards two main target groups:

- (a) persons in Italy, with particular attention towards teachers, students and persons active as volunteers in AIFO groups.
- (b) Persons in developing countries, with particular attention towards persons working in AIFO supported projects and programmes



For carrying out its activities, AIFO collaborates actively with universities, government authorities, World Health Organisation and other UN organisations, international federations such as ILEP and IDDC, national federation of medical students and national federation of physiotherapists, etc.

The English section of AIFO website provides access to many online learning courses, online exhibitions, proceedings of international congresses, archives of Asia Pacific Disability and Rehabilitation Journal, archives of Leprosy Mailing List and books, manuals and reports in English, French and Portuguese.

## **Events, Seminars, Meetings & Training**

In December 2007, AIFO organised an international conference on the provocative theme of “Political Love” that looked at the political dimension of the struggles of civil society organisation aiming for a just world and universal brotherhood where rights and dignities of all human beings are respected.

This was followed by a joint meeting of Disability & Rehabilitation team of WHO (WHO/DAR) and AIFO in collaboration with DPI and IDEA on the “New Paradigm of Medical care for Persons with Disabilities”.

On last Sunday of January 2008 different AIFO groups and thousands of volunteers and scouts took part in World Leprosy Day celebrations and organised sale of “Honey of Solidarity” initiative in city squares. Many project partners of AIFO also celebrated World Leprosy day.

In March 2008, in collaboration with Theological Institute of Assisi (Italy), AIFO organised a meeting about “Saint Francis and Leprosy Affected Persons”.

In May 2008, a group of children from Salvador (Brazil) will be touring Italy with dance shows to promote awareness about AIFO’s work with marginalised and vulnerable children.

In December 2008, AIFO will be collaborating with WHO/DAR for organisation of Asian Pacific conference on community based rehabilitation. A “Training of Trainers” course will also organised in this occasion in collaboration with WHO, ILEP and IDDC.

## **Voices From Some Countries Where AIFO Is Active**

### **D. Tulgamaa, Ulaan Baator, Mongolia – Country Coordinator**

AIFO is active in Mongolia since 1991. Till now, CBR programme “Tegsh Duuren” supported by AIFO was covering 12 provinces in western part of the country and 6 districts in the national capital. Recently, a new project co-funded by European Union has been started that will gradually cover the remaining provinces of the country in the eastern part as well. Since 1992, AIFO is the official partner of Ministry of Health of Mongolia.

Since 2007, we are also the official partner of National Authority for Children for reaching to children with disabilities. AIFO is also working for strengthening of organisations of disabled persons (DPOs) in Mongolia and for setting up of community controlled rotating credit funds for promoting economic independence.

### **M. V. Jose, Bangalore, India – Country Coordinator of India and Bangladesh**

AIFO is active in India in three areas – leprosy, CBR and vulnerable children and collaborates with NGOs as well as with the Government. For the National Leprosy Programme, together with ILEP members, AIFO has been involved in training of general health personnel for integration of leprosy control in general health care. In future, for leprosy, AIFO will be laying greater emphasis on Disability Prevention and Medical Rehabilitation, further strengthen the referral system to handle complications due to leprosy, and continued capacity building of general health system activities.

AIFO also supports projects to carry out CBR programmes to improve the quality of life of people with disabilities. Attention is been taken to integrate people affected with leprosy in the CBR programmes. AIFO strongly supports the Children’s Right to Education and concentrates its operations to children belonging to the vulnerable groups, especially to children with disabilities through inclusive approaches.

### **Victor Francisco Gomes, Bissau, Guinea Bissau – Head of AIFO project**

AIFO is collaborating with the Ministry of Public Health since 1978 and has been instrumental in setting up national leprosy programme in 1980. In 1986, this became combined leprosy-TB control programme. Over the years, AIFO has worked with Franciscan fathers for strengthening national leprosy reference centre in Cumura, with the Government for national tuberculosis services and referral services in different regions.

Even if Guinea Bissau is one of the poorest countries in the world, and is exiting a devastating civil war, yet it is one rare example in West Africa with effective leprosy referral services thanks to a long collaboration between Franciscan fathers and AIFO.

### **Deolinda Bittencourt de Santana, Goiania, Brazil – Country Coordinator**

Brazil is the first country where AIFO started to support projects in 1961. The vision of AIFO, “leprosy and all leprosy” that looks at social determinants of leprosy and its global approach towards the persons and not just the disease, has been its special distinctive feature. In Brazil, AIFO supports 22 projects spread over 9 states. AIFO works with the Government in four states (Acre, Bahia, Goias and Para) supporting comprehensive leprosy control programmes.

AIFO is also working with a number of NGOs and faith based organisations in projects dealing with referral services for leprosy, socio-economic rehabilitation, community based

rehabilitation and vulnerable children. A special partner of AIFO is the association of persons affected by leprosy in Bahia called Morhan.

### **Massimo Tomaselli, Maputo, Mozambique – Country Coordinator**

AIFO has been collaborating with the Ministry of Health in Mozambique since 1980 and has been instrumental in setting up a national leprosy control programme. There is coordination between the Government and different ILEP associations (AIFO, TLMI, LEpra, DFB & NLR) so that synergies are created, resources are used in best possible way without duplications or overlapping activities. As of July 2008 AIFO will relinquish the ILEP Coordination in Mozambique which will be taken over by the British ILEP Association LEpra.

Huge challenges still await us. Nampula and Manica provinces, where AIFO is working with provincial health services for leprosy and tuberculosis programmes, continue to have significant problems, especially Nampula with a very high new case detection rate for leprosy.

### **Freddy Sanduku Okiel, Kinshasa, Democratic Republic of Congo – Country Coordinator**

After a dark period of social misery due to wars, finally D. R. of Congo is showing signs of life. Recently there were elections for a democratic Government. Over the last one years, institutions are working. AIFO is supporting programmes in Kimbau (Kenge), Ituri and Goma. The hydro-electric project in Kimbau has been completed after lot of hardships and was inaugurated and handed over to the country. Over the next year we want to strengthen the health programmes.

### **Lorenzo Pierdomenico, Hanoi, Vietnam and Laos – Country Coordinator**

Community-based rehabilitation programmes in Vietnam and Laos have been developed in collaboration with their respective Ministries of Health. These programmes cover 7 provinces in Vietnam and 1 province in Laos. Programme in Vietnam is being supported by International Development cooperation of Italian Foreign Affairs Ministry. The programmes are based on strong community participation with an active role by persons with disabilities, their family members, friends and general communities.

## **INTERNATIONAL PARTNERS OF AIFO**

### **Priorities for Disability & Rehabilitation Team of World Health Organisation (WHO/DAR)**

Ms. Alana Officer, WHO/DAR Coordinator

The Convention on the rights of persons with disabilities provides the road map for what needs to be done to promote and protect the rights of persons with disabilities. WHO welcomes the Convention and is committed to its implementation. Continued consultation with disabled people's organizations (DPOs) is essential to ensure that persons with disabilities are involved in decision-making on disability matters. The Convention, by framing disability as a rights issue, sends a clear message to the world for a change of attitude and approaches to disability issues.

The World Report on Disability and Rehabilitation is being developed at the request of World Health Assembly Resolution 58.23 (May 2005), and is being jointly produced with the World Bank. The Report spans the universe of disability and rehabilitation, from a world wide data 'portrait' of disability, to health and rehabilitation policies and services and some key areas of participation -- information and communication, the built environment and transport, education, employment, and rights and justice. It is anticipated that the Report, whose recommendations will be in line with the principles of the Convention will set the disability and rehabilitation agenda for many years. The report is expected to be launched in 2009.

A collaborative process that began in 2004 - lead by WHO, ILO and UNESCO, in partnership with leading international nongovernmental organizations, members of the International Disability and Development Consortium and the International Disability Alliance - has now produced a full draft version of the Guidelines for Community-based Rehabilitation (CBR). The Guidelines will be a practical guide for CBR managers and practitioners to further the goals of inclusion and full participation.

The Italian Association Amici di Raoul Follereau (AIFO) has been collaborating with WHO/DAR for almost twenty years now and is in official relationship with WHO. In 2007 in addition to collaboration on the activities mentioned above one of our joint initiative was a multi-country action research initiative "New Paradigm of Medical Care for Persons with Disabilities". During 2007, a new three years joint plan of action was also signed with AIFO. We look forward to continuing collaboration with AIFO.

### **International Federation of Anti-Leprosy Organisations (ILEP)**

ILEP promotes and facilitates co-operation and collaboration between its 14 Members, by coordinating their support to leprosy programmes, representing their common interests and providing technical expertise to the Federation, its Members and other parties. Its vision is of a world where the rights of every person affected by leprosy to receive appropriate treatment and rehabilitation are fulfilled, and where all people affected by leprosy are able to participate as fully as they choose at every level of society.

AIFO is a founder member of ILEP. Other members of ILEP include GLRA, ALES, AFRF, DFB, FL, CIOMAL, TLMI, LEPR, LNR, ALM, SF, SJ and SLC.

ILEP has a technical commission (ITC) that provides information to all member Associations. Dr S. Deepak from AIFO is a member of ITC. ILEP also provides teaching and learning material on leprosy and AIFO coordinates the supply of this training materials for Portuguese speaking countries of Africa.

## **International Disability & Development Consortium (IDDC)**

IDDC is a global consortium of currently 20 non-governmental organisations supporting disability and development work in more than 100 countries around the world. The aim of IDDC is to promote inclusive development internationally, with a special focus on promoting the full and effective enjoyment of human rights by all disabled people living in economically poor communities in lower and middle-income countries.

The main objectives of IDDC include: To promote the inclusion of the disability dimension, as well as appropriate disability-specific approaches, in all development policy and practice; to improve the practice of the member organisations by collaborating and sharing experience about policy and practice; and to support the exchange of information and knowledge about inclusive development, especially between people and organisations in economically poorer countries, by the wide distribution of information.

AIFO is founder member of IDDC. Some other members of IDDC include ADD, CBM, Basic Needs, FIDIDA, NAD, SHIA, LCD, HI, LSN, VSO, etc.

## **IDEA – Promoting the Inherent Dignity of Each Individual**

Anwei Skinses Law, International Coordinator of IDEA

For over 3,000 years and continuing into the 21<sup>st</sup> century, the stigma associated with leprosy has been one of the most persistent and pervasive forms of social injustice that society has forced upon its fellow human beings. Men, women and children of all ages whose lives have been challenged by leprosy have had their most basic human rights denied by virtually every culture and major religion throughout time. Despite the fact that there has been a cure for leprosy for more than 60 years, outdated images and stereotypes persist, resulting in widespread prejudice and discrimination.

In March, 2003, IDEA launched a Global Campaign to Eliminate the Stigma Associated with Leprosy that is characterized by concrete activities shown to have the ability to change the image of leprosy and transform people's lives. These activities include: promoting a positive image; expanding IDEA's international network of support; restoring family ties; providing opportunities for participation, education and self-support; discussing leprosy as a human rights issue; and ensuring that individuals affected by leprosy are afforded their rightful place in history. Through these activities and the spirit of IDEA members, stigma and stereotypes are being replaced with images of Honour, Dignity, Self-Confidence, Respect and Creativity. Social Injustice and Discrimination are being replaced with a concerted global effort aimed at the Restoration of Human Rights.

### **AIFO and IDEA: A Special Partnership**

Over the past decade, AIFO has gradually reinforced support for setting up, capacity building

and strengthening organisations of persons affected with leprosy. AIFO believes that organisations of affected persons can be fundamental for promotion of empowerment. AIFO also believes that persons who have direct experience of leprosy in their lives have a special expertise and can bring new insights to what can be done to fight against stigma, discrimination and to promote socio-economic independence, human rights and living lives with dignity.

For this reason, AIFO has a very special partnership with IDEA as the international federation of the national organisations of persons affected with leprosy. In 2001, AIFO awarded the Raoul Follereau award to IDEA and helped in realization of an IDEA exhibition. Over the past few years, AIFO has promoted and/or supported setting up of IDEA national associations in Angola, Brazil, China, Kenya and Mozambique. In 2008, AIFO is collaborating with IDEA for setting a national IDEA association in Guinea Bissau and to support strengthening of IDEA in Nepal.

AIFO supports the IDEA campaign against stigma associated with leprosy. AIFO is also studying with IDEA the feasibility of a new pilot action research project dealing with promoting the empowerment of persons affected with leprosy, focusing on women.

## **Disabled Peoples International**

Gianpiero Griffo, Executive Council, DPI

Disabled Peoples' International (DPI) is an international NGO working to protect the human rights of disabled people, speaking a unique world language in the 142 countries where it is represented, based on the UN Convention on the rights of persons with disabilities. DPI network is organised in 5 regional council (Europe, North America and Caribbean, South America, Africa, Asia-Pacific), and include national organizations or assemblies of disabled people, established to promote human rights of disabled people through full participation, non discrimination, equalization of opportunity and development.

DPI have a consultative status in all international and regional bodies (UN and his Agencies – WHO, UNESCO, ILO, etc. -, European Union, Council of Europe, etc.). DPI promote the direct participation of persons with disabilities, as experts, in the decisions related to their life and full inclusion, on the base of the principle “Nothing about us without us”. DPI promote and support the empowerment of persons with disabilities and their organizations. DPI provide training course on Human rights, UN Convention and empowerment of DPOs, offer peer counselling activities, support for independent living centre, expert in inclusion, in various fields (employment, education, rehabilitation and habilitation, mobility, universal design, tourism, sport, monitoring, etc).

DPI expresses its appreciation for long and constructive collaboration with AIFO.

Disabled Peoples' International-DPI [www.dpi.org](http://www.dpi.org), Director Mary Ennis: [mary@dpi.org](mailto:mary@dpi.org)  
Chairperson Wilfredo Guzman Jara (Peru)

## People's Health Movement

The **People's Health Movement (PHM)** has its roots deep in the grassroots people's movement and owes its genesis to many health networks and activists who have been concerned by the growing inequities in health over the last 25 years. The PHM calls for a revitalisation of the principles of the Alma-Ata Declaration which promised Health for All by the year 2000 and complete revision of international and domestic policy that has shown to impact negatively on health status and systems. The objectives of PHM include: To promote the Health for All goal through an equitable, participatory and inter-sectoral movement and as a Rights Issue; & to encourage government and other health agencies to ensure universal access to quality health care, education and social services according to people's needs and not people's ability to pay. The People's Health Movement is coordinated by a global secretariat and is supported by a steering group consisting of the representatives of regional focal points. Dr Sunil Deepak from AIFO is the focal point of PHM in Italy.

### **Leprosy Mailing List (LML) and International Leprosy Association (ILA)**

International leprosy congress brings together the maximum experts of leprosy from all over the world to take a critical look at achievements, challenges and future strategies. 17<sup>th</sup> International Congress was held in Hyderabad (India) in February 2008. A general Assembly of International Leprosy Association was held during the Congress. During this Assembly, Dr Marcos Virmond from Brazil was elected as the new president of ILA. Dr Salvatore Noto, an old friend and collaborator of AIFO, working for the Italian Inter-departmental Centre for Leprosy Research (CIRLEP) in Genova University has been elected as Vice-President of ILA for communications.

Dr Salvatore Noto is also noted for his role as moderator of the electronic mailing list on leprosy, the Leprosy Mailing List, that has 600 members from all over the world and brings together all persons interested in leprosy. If you are working with leprosy and have access to email, we strongly recommend that you subscribe to LML for receiving updated information about leprosy. Subscription to LML is free and you only need to send a message to [salavatore.noto@hsanmartino.it](mailto:salavatore.noto@hsanmartino.it)

Old archives of the Leprosy Mailing List are freely available from the English section of AIFO's website, [www.aifo.it/english/](http://www.aifo.it/english/)

ILA also decided that the next International Leprosy Congress will be held in Bruxelles (Belgium) in the beginning of 2013.

## **SOME KEY NATIONAL PARTNERSHIPS OF AIFO**

### **SIHAN – Italian Society of Leprosy**

AIFO has supported Italian Society of Leprosy (SIHAN) since its inception and hosts its office. The society brings together all persons interested in leprosy from medical and social point of view in Italy. Every year, AIFO collaborates with SIHAN for collection of information about new cases of leprosy in Italy, most of whom are emigrants.

### **Italian Global Health Watch (OISG)**

AIFO has supported Italian Global Health Watch since its inception and hosts its office. OISG brings together concerned doctors and other experienced persons who believe in right to health and who wish to reflect and research on themes of global health and create public awareness around these themes. OISG produces a biannual report that is considered as one of the most important independent reports on health issues in Italy. It is also particularly active in promotion of a teaching module on global health among medical and nursing students.

### **FOCSIV – Volunteers in the World**

FOCSIV is the largest national federation of non-governmental organisations (NGOs) in Italy and AIFO is a founding member of this federation.

### **National Committee on Hansen's Disease in Italy**

AIFO is a member of the national committee of Ministry of Health of Italy on leprosy. AIFO also collaborates actively with the national reference centre for leprosy in Italy based at San Martino Hospital and university of Genoa.

## Social Balance: Beneficiaries of AIFO projects in 2007\*

Kind of Activities	Africa	Latin America	Asia	Total
Leprosy – diagnosis & treatment	3.554	9.289	9.296	22.139
Care of Leprosy complications	4.489	1.402	8.897	14.788
Social & economic Rehabilitation	43,475	3,478	21,384	68.337
<b>Sub-Total Beneficiaries in leprosy projects</b>	<b>51.518</b>	<b>14.169</b>	<b>39.577</b>	<b>105.264</b>
Primary health care	168.165	275	65.117	233.557
Community-based Rehabilitation (CBR)	5.717	55	181.198	186.970
Vulnerable children	2.535	1.009	6.958	10.502
Community development	6	11.610	22.388	34.004
<b>Sub-total other beneficiaries</b>	<b>176.423</b>	<b>12.949</b>	<b>275.661</b>	<b>465.033</b>
<b>TOTAL BENEFICIARIES IN 2007</b>	<b>227.941</b>	<b>27.118</b>	<b>315.238</b>	<b>570.297</b>

Note: Data updated till 7 May 2008, therefore final data can be slightly different

During 2007, in AIFO supported projects 22,139 new cases of leprosy were diagnosed: 3,554 in Africa, 9,289 in South America & 9,296 in Asia. If we compare this data with 2006 data, we see that total number of new cases in AIFO supported projects show a decline, especially in Asia. Increasingly, AIFO along with other ILEP members is involved in activities of training, capacity building and national level support so direct contact with new cases of leprosy is less frequent. At the same time, we play a much larger role in prevention of disabilities, medical rehabilitation and socio-economic rehabilitation.

Our data also shows an increase in multibacillary (MB) cases of leprosy. For example, in 2006, in AIFO supported projects in Asia, 36% of new cases were MB while in 2007, they are 62%. Such sudden changes in disease pathology are probably linked to operational factors in programme strategies and need to be closely monitored.

Another common issue that comes out strongly, especially in CBR, children and development projects is that girls and women have less access to services compared to boys and men. These differences are due to a variety of factors including social and cultural situations, especially in Asia and some countries of Africa. Many of our projects are already working with self-help groups of women and they have been able to increase the access to services to girls and women, but much more requires to be done.

**We would like to invite all AIFO partners: Review the situation in your projects and make sure that girls, women and other marginalised groups such as persons with disabilities, minority groups and other oppressed groups get equal access to your services.** We also take this opportunity to thank all partners for helping us regularly with their monitoring reports.

## **AIFO & the Millennium Development Goals**

In September 2000, the largest-ever gathering of Heads of States adopted the Millennium Declaration. The Declaration, endorsed by 189 countries, was then translated into a roadmap setting out 8 Millennium Development Goals (MDGs) to be reached by 2015. AIFO's work also supports the MDGs in the following way:

**Goal 1 Eradicate extreme poverty & hunger:** AIFO focuses its work on the most vulnerable and marginalised sections of population, especially on persons with disabilities, persons affected with leprosy and vulnerable children.

**Goal 2 Achieve universal primary education:** AIFO operates primarily in health sector. Still through its community-based activities and some children projects AIFO supports education for all children, focusing on children with disabilities and children of persons affected with leprosy.

**Goal 3 Promote gender equality and empower women:** In all projects supported by it, AIFO monitors if the activities benefit girls and women. Some projects like WATCH Nepal focus specifically on empowerment of disadvantaged rural women.

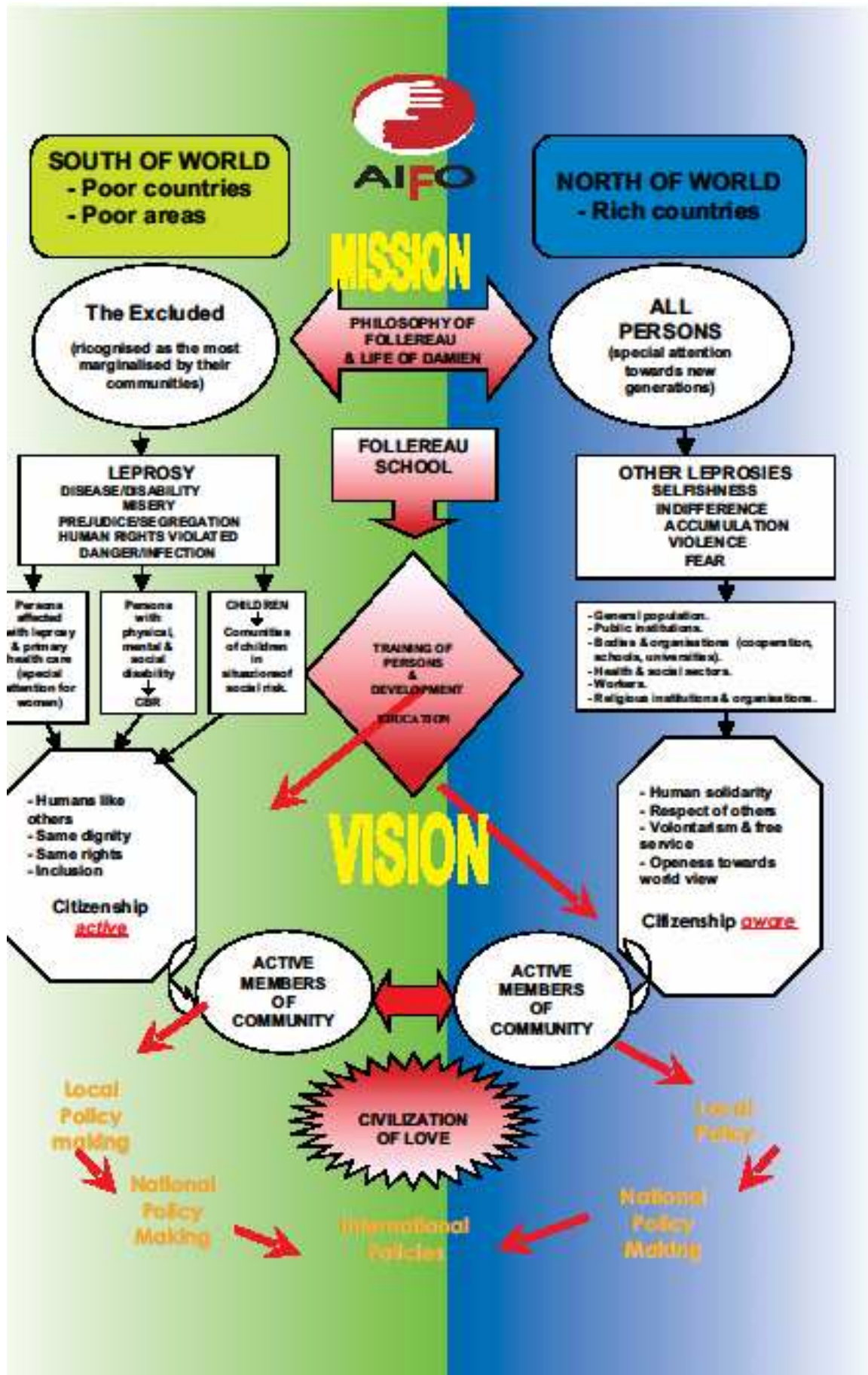
**Goal 4 & 5 Reduce child mortality & Improve maternal health:** AIFO promotes integrated interventions at primary health care and community health approaches in isolated and difficult to access areas.

**Goal 6 Combat HIV/AIDS, Tuberculosis, Malaria & other diseases:** AIFO focuses its work on persons affected with leprosy and persons with disabilities through integrated approaches and primary health care. Thus projects supported by AIFO contribute to fight against neglected diseases in developing countries.

**Goal 7 Ensure environmental sustainability:** AIFO promotes community approaches that are based on sustainable livelihoods and respect for nature. This includes collaboration with traditional medicine systems and protection of traditional knowledge and skills.

**Goal 8 Develop a global partnership in development:** AIFO promotes partnerships with different stakeholders including affected persons, governments, national and international organisations. International networks & movements like People's Health Movement, ILEP, IDDC, DPI are key partners of AIFO. At the same time AIFO is in official relationship with World Health Organisation, recognised by European Commission and Italian Government.

## Mission & Vision of AIFO



### AIFO Annual Balance 2007

ACTIVE	2007	2006	PASSIVE	2007	2006
<b>FIXED ASSETS</b>			<b>NET PATRIMONY</b>		
<i>Non Tangible Assets</i>			<i>Free Patrimony</i>		
Concessions, licences, rights	5.117	8.029	Available fund	5.696	20.518
<i>Tangible Assets</i>			<i>Bound patrimony</i>		
Land & Building	452.472	473.901	Patrimony for projects	2.783.114	2.787.740
Equipment etc.	37.497	44.877	Bound reserve	834.934	1.142.602
Other assets	9.864	12.992			
<i>Financial Investments</i>			<b>Total net patrimony</b>	<b>3.623.744</b>	<b>3.950.860</b>
Participations	8.041	8.041	<b>Risk fund and costs</b>		
Bank titles as guarantee	250.000	492.738	Misc. fund	150.000	233.669
			Risk fund project accounting	139.940	156.854
<b>Total Assets</b>	<b>762.991</b>	<b>1.040.578</b>	<b>Total risk fund and costs</b>	<b>289.940</b>	<b>390.523</b>
<b>CURRENT ASSETS</b>			<b>Staff social fund</b>	<b>415.188</b>	<b>388.606</b>
<i>Final residuals</i>					
Promotional materials	39.475	56.538	<b>Debts</b>		
<i>Short-term credits projects</i>			Suppliers	169.533	166.120
Credits from other associations	588.033	596.710	Other debts	757.363	135.591
Credit from It. Foreign Ministry	716.597	856.827	Debts towards providence inst.	53.320	47.913
Credit from Intern. Bodies	64.007	298.442	Tax debts	47.546	41.331
Credit from local bodies	67.375	69.087	<b>Total debts</b>	<b>1.027.782</b>	<b>390.955</b>
<i>Long term credits projects</i>			<b>Passive carryovers</b>	<b>2.748.097</b>	<b>1.376.292</b>
Credits from other associations	41.350	0	<b>Total passives</b>	<b>4.481.007</b>	<b>2.546.376</b>
Credits from Intern. Bodies	884.959	238.000			
Credits from EU	413.732	0	<b>TOTAL PASSIVE &amp; NET PATRIMONY</b>	<b>8.104.751</b>	<b>6.497.236</b>
<i>Other credits</i>			<b>Order accounts</b>		
Credits on donations	219.658	166.172	Funds to be sent to projects	5.140.980	4.173.165
Other credits	24.408	23.581	Funds for Dev Edu. (short)	139.276	98.400
<i>Testaments</i>			Titles for bank guarantee	250.000	492.738
Testaments and mat. Donation	1.551.132	1.425.583	<b>Total order accounts</b>	<b>5.530.256</b>	<b>4.764.303</b>
<i>Non fixed financial activities</i>					
Investments	1.031.293	1.037.769			
<i>Available cash</i>					
Cash box	28.188	46.502			
Bank & post	1.659.921	636.736			
<b>Total circulating income</b>	<b>7.330.123</b>	<b>5.451.947</b>			
<b>Carry overs</b>	<b>11.637</b>	<b>4.711</b>			
<b>TOTAL ACTIVE</b>	<b>8.104.751</b>	<b>6.497.236</b>			

<b>PROJECTS SUPPORTED BY AIFO IN 2007</b>	
<b>LOCAL PARTNERS OF PROJECTS</b>	
NGO/LOCAL PARTNERS	33
GOVERNMENTS	38
CONGREGATIONS/RELIGIOUS BODIES	53
COUNTRY MANAGEMENT OFFICES	6
<b>TOTAL PROJECTS</b>	<b>130</b>
<b>COFINANCED PROJECTS</b>	
Yunnan (China) / Primary health Care & leprosy control / Government (YNCDC) & Local NGO (HANDA)	Cofunded by Italian Foreign Ministry
Nampula (Mozambique) / Primary Health Care, leprosy & TB control / Government	Cofunded by Italian Foreign Ministry
DIGSA (Eritrea) / Primary Health Care / Local Diocese	Conformation by Italian Foreign Ministry
Pomoni – Anjouan (Unione of Comores) / Primary Health Care / Government	Cofunded by CEI
<b>PROJECTS ACCORDING TO MAIN ACTIVITY</b>	
Leprosy / Primary Health Care	64
Rehabilitation	37
Children	23
Country level Management – Coordination	6
<b>PROJECTS GEOGRAPHICAL DISTRIBUTION</b>	
AFRICA – 33 Projects (39% of funds)	
ASIA – 69 Projects (43% of funds)	
AMERICA – 28 Projects (18% of funds)	

### **Cofunded projects in collaboration with other Italian NGOs**

<b>Project</b>	<b>Cofunding body</b>	<b>Partner Italian NGO</b>	<b>Duration Yrs.</b>	<b>Started in Yr.</b>
Primary Health Care in the area of Diocese of Rumbek, Sudan	CEI	MEDICUS MUNDI	2	2007
Prison reforms in Nampula Mozambique (AID 7853)	D.G.C.S./Italian Foreign Ministry	MLAL	3	2006

### **New Cofunded Projects approved in 2007 (starting in 2008)**

- A community-based rehabilitation (CBR) programme in Vietnam (Duration 3 years, Italian Foreign Ministry, AID 7720).
- A social and health development project in municipality of Porto Nacional in state of Tocantins in Brazil (Duration 3 years, Italian Foreign Ministry, AID 8735).
- A community-based rehabilitation (CBR) programme in eastern provinces of Mongolia (Duration 3 years, Europeaid).

## **Project funding from regional, provincial and commune bodies in Italy in 2007**

During 2007, a number of projects of AIFO received co-funding from regional, provincial and commune level bodies in Italy. These included the following: project Liberia CBR from Trento Province, project Compensa Brazil from commune of Nembro (BG), project Yanomami Brazil from Sanremo commune, project Goma children from province of Brindisi, Pomoni Comores primary health care project from commune of Vedelago (TV), Emergency support for floods in Bangladesh from commune of Rimini, emergency support for vyclone in Bangladesh from Autonomous province of Trento, Alexandria Egypt CBR project from commune of Ceglie Messapica (BR), etc.

### **AIFO PERSONNEL IN PROJECTS IN 2007**

#### **(a) AIFO coordination offices**

- Goiânia (Goiàs), Brazil  
AIFO coordination office in Brazil  
Coordinator: Ms. Deolinda Bitencourt de Santana
- Bangalore (Karnataka), India  
AIFO coordination office in India & Bangladesh.  
Coordinator: Mr. Jose Manikkathan Varghese
- Maputo, Mozambique  
AIFO coordination office in Mozambique  
Coordinator: Mr. Massimo Tomaselli
- Kinshasa, Dem. Rep. of Congo  
AIFO coordination office in Dem. Rep. of Congo.  
Coordinator: Mr. Freddy Sanduku
- Ulaanbaatar, Mongolia.  
AIFO coordination office in Mongolia  
Coordinator: Ms. Tulgamaa Damdinsuren

#### **(b) Head of Projects & other staff**

- Guinea Bissau, national leprosy and tuberculosis programme, head Dr Victor Francisco Gomes
- Nampula province primary health programme in Mozambique (AID 7673/AIFO/MOZ), head Dr Marco Scacchetti, administrator Mr. Nicola Eugenio Zicari
- Yunnan province social and health development programme in China (AID/7870/AIFO/CHN), head Dr Davide Olchini
- Digsu health centre in Eritrea, head Dr Teresa Graceffa, other staff Dr Alba Rienzi, Mr. Francesco Zappalà and Ms. Tiziana Gidoni
- Pomoni-Anjouan district primary health care project and Pomoni children project in Comores islands, head Mr. Severio Grillone
- Ghana national leprosy programme and B.U. project, AIFO head Fr Giorgio Abram