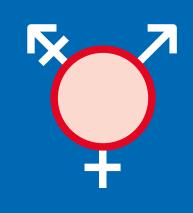




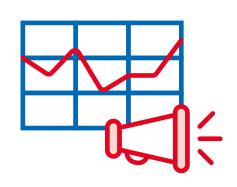
# **ANNUAL REPORT 2019**



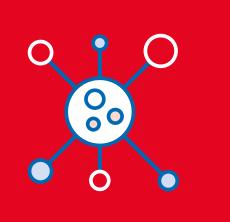




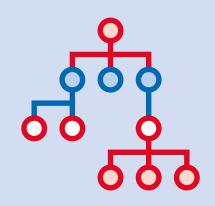












# **Foreword**

The foreword to an annual report is often a summary of all the great results that have been achieved in the past year. In writing this foreword, however, we find ourselves in a very exceptional situation. The world is in the grip of COVID-19. This also has a direct impact on our work, with the greatest concern now being the potentially devastating effects in developing countries. Again, people living with HIV, and the most marginalised in society, are at risk of being hit the hardest. We cannot yet oversee the magnitude of all this. One thing is certain: we are doing everything we can to be there for them. All our knowledge and experience, including what we have learned and achieved in 2019, will be put to use.

The Netherlands has always been at the forefront of the national and international STI and HIV response. By continuing to research, by continuing to help, and by not being afraid of innovations – but rather by deploying them quickly and broadly – to reduce the prevalence of HIV and other STIs as quickly as possible. And above all: by sharing knowledge and skills, experiences and results with each other. Aidsfonds

– Soa Aids Nederland plays a connecting in this, as the strength lies in close cooperation.

"The strength lies in close cooperation."

As a result of these efforts, in the Netherlands, the number of HIV infections is at its lowest since the peak of the epidemic. Worldwide, the number of AIDS-related deaths continues to fall every year and the number of people who are receiving HIV

treatment continues to increase. Furthermore, progress is being made in the search for a cure for HIV and the number of people with an STI in the Netherlands is falling.

However, we are not there yet. In some parts of the world, the number of HIV infections is increasing at an alarming rate, high levels of HIV-related stigma persist to this day, condom use among young people is decreasing, and sex education in schools leaves much to be desired. And although we can accelerate the search for a cure and reduce the number of new HIV infections to 0 in the Netherlands, there is often still a lack of insights at the local level and not all parties involved are able to easily connect with each other. These factors stand in the way of reaching our goal of a world without AIDS and STIs in which everyone has easy access to prevention, treatment, care and support. In 2019, Aidsfonds – Soa Aids Nederland took crucial steps to change this. Together with communities, partners, professionals and thanks to our donors! In this annual report, we present our activities in 2019.

Mark Vermeulen executive director

Eric van der Burg chair supervisory board

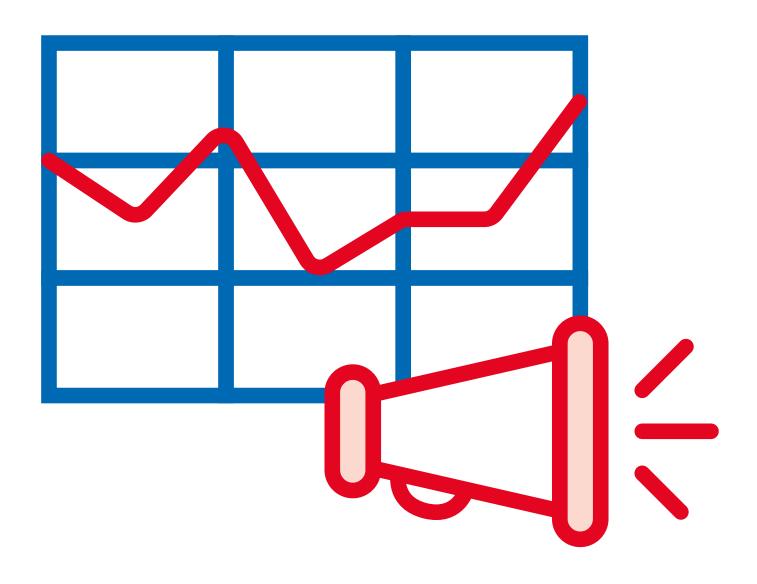
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# A. MANAGEMENT REPORT





# 1. Activities and results

Aidsfonds – Soa Aids Nederland has a vision: a world without AIDS and STIs. To achieve this, we are working on easy access to prevention, treatment, care and support for everyone affected by HIV and/or other STIs. In order to achieve this, we put together our strategic multi-year plan for the period 2018-2021 titled 'No time to lose: focus, accelerate and increase momentum'. The year 2019 was the second year where funds were spent in line with the objectives outlined in this multi-year plan. An interim evaluation will be carried out in 2020.

# 1.1. Expenditures for objectives

To achieve our goals, we collaborate with government institutions and natural or legal persons in the Netherlands and abroad. We have been doing this since 1914, the year in which our oldest legal predecessor was founded. In the 1960s, the end of infectious diseases - including STIs - seemed imminent. Nothing proved further from the truth. The sexual revolution and the new sexual freedom that followed led to a sharp increase in STIs in the late 1970s. The arrival of HIV and AIDS in 1981 posed new, major challenges. Four decades later, we have gained a wealth of knowledge and experience regarding HIV. This has also had a major impact on the STI response. In our history we have come a long way in developing a comprehensive view of what works, what is (or is not) needed and what does (or does not) work. This knowledge forms the basis for our future-oriented work. Every four years we draw up a new strategic multi-year plan, focused on the objectives to be achieved in the next four-year period.

The five main goals of the strategic multiyear plan 2018-2021 'No time to lose: focus, accelerate and increase momentum' are:

- Drastic reduction in the prevalence of the five most frequently occurring STIs and zero new HIV infections in the Netherlands.
- 2. Worldwide less than 200,000 new HIV infections.
- 3. Worldwide all people living with HIV receive treatment.
- 4. A cure for HIV.
- 5. Awareness, support and full financing of the AIDS and STI response.

In the coming years, in order to achieve our five main goals, we will:

- finance, launch and develop innovative approaches and programmes;
- strengthen civil society, with a special focus on vulnerable groups and the protection and improvement of their human rights;
- develop and implement national programmes to combat HIV and other STIs and promote the sexual health of people in the Netherlands;

- advocate among governments and multilateral agencies – for continued political and financial investment in putting an end to AIDS and enabling universal access to prevention, treatment, care and support;
- mobilise communities, the general public and the private sector to support us in realising our vision.

Working towards achieving these goals will allow us to play a decisive role in further containing the HIV and STI epidemics, both internationally and in the Netherlands. In our work we focus on countries where we can make the biggest impact with our activities; these are the Netherlands as well as Ethiopia, Indonesia, Kenya, Malawi, Mozambique, Nigeria, Uganda, Ukraine, Russia, Tanzania, Zambia, Zimbabwe and South Africa. Our strategic multi-year plan 'No time to lose: focus, accelerate and increase momentum' emphasises the urgency to utilise the tipping point of the HIV epidemic and underlines the need to actively control HIV and other STIs.

In 2019, we spent € 49.9 million on our objectives. Of this amount, € 12.3 million was disbursed to our consortium partners to provide financial contributions for projects to local organisations and € 20.2 million was awarded to local partners as financial contributions. Through open calls for applications, we allocated € 3.8 million to innovative projects and scientific research.

# 1.1.1. Objective 1: Drastic reduction in the 'big 5' STIs and zero new HIV infections

An estimated 140,000 Dutch people are diagnosed with an STI every year. STIs that are not treated (on time) lead to health damage on an individual level, including shame, stigma and psychological complaints. As this concerns infectious diseases, STIs also pose a threat to public health: faster detection and treatment prevents transmission and thus further damage to individuals and to the population as a whole. Fortunately, the number of people who have themselves tested for STIs is increasing, both at Centres for Sexual Health/Municipal Health Service of Amsterdam (GGD Amsterdam) and at doctors'

offices. A cure for HIV, zero new HIV infections and zero new HIV infections in the Netherlands are no longer empty words, but have become attainable. This does, however, require increased momentum. Too many people are still getting infected with HIV. Furthermore, it is estimated that more than 2,000 already-existing HIV infections have not yet been detected, and nearly half of people living with HIV start treatment too late. Economic, cultural and other factors lead to differences in health literacy skills. As a result, a proportion of people living with HIV are not yet (promptly) being reached.

In the Netherlands, we aim to achieve our goal of zero new HIV infections. We are also working to significantly reduce the five most prevalent STIs – alongside HIV – that have serious consequences. Specifically, we have set the following objectives:

- Zero new HIV infections in the Netherlands.
- Halving the number of new syphilis infections.
- Halving the number of gonorrhoea infections.
- Zero new acute hepatitis B and C infections.
- Halving the number of women who become infertile due to chlamydia.
- HPV vaccination for all risk groups (currently only for girls).

For the national work, we have linked our goals to the objectives of the 'National Action Plan STIs, HIV and Sexual Health 2017-2022'. This translates into the following four practical goals:

- 1. Zero new HIV infections in the Netherlands.
- 2. Drastic reduction in STIs.
- 3. Sex education as a basis for prevention.
- 4. Well-designed and properly functioning infrastructure.

Soa Aids Nederland, with the institutional funding of the National Institute for Public Health and the Environment (RIVM), is responsible for the implementation of the pillars HIV and STIs, and – together with Rutgers (international centre of expertise on Sexual and Reproductive Health and Rights) – the pillar sex education of the National Action Plan on STIs, HIV and Sexual Health 2017-2022.

Aidsfonds, with private funds, is the main driver behind the ambition 'The Netherlands towards zero new HIV infections' through targeted open calls for applications and lobbying activities.

In 2019, Aidsfonds – Soa Aids Nederland contributed  $\in$  6.5 million to the objective 'Drastic reduction in the 'big 5' STIs and zero new HIV infections in the Netherlands', of which  $\in$  3.5 million was received from the National Institute for Public Health and the Environment and  $\in$  3.0 million from donors and third parties. These expenditures are  $\in$  1.2 million higher than budgeted. This increase is attributed to extra funding for scientific research.

#### Zero new HIV infections in the Netherlands

We are convinced that the Netherlands can be the first country to have zero new HIV infections. Aidsfonds – Soa Aids Nederland has therefore initiated the movement 'The Netherlands towards zero new HIV infections' to enable us to achieve this goal as soon as possible. The movement was launched at the National Congress STI\*HIV\*Sex in November 2019. In April 2019, Aidsfonds – Soa Aids Nederland organised a first successful countrywide meeting with the Municipal Health Services (MHSs or GGDs). This makes it easier for MHSs to determine what an appropriate form of integrated care is for their region, where tailor-made solutions are needed and

Financial contributions towards the goal 'The Netherlands towards zero new HIV infections'	Ongoing projects	Awarded to new projects	Closed projects
Aidsfonds private funds	19	31	2

These financial contributions made to third parties for this objective enable us to liaise with over 60 organisations that are working on the same objective in the Netherlands. In 2019, Aidsfonds made 31 financial contributions to innovative, national projects for this purpose. A total of 19 subsidised projects were ongoing and 2 projects were successfully completed.

We promote the exchange of knowledge between our national and international work. Among other things, this has resulted in a project in Kenya and a project in South Africa. These projects focus on supporting our African partners in adapting and implementing the 'stepped care' approach, which offers comprehensive information and services related to sexual health – ranging from online services to consultation offices – in a coherent way. The 'Turning the Tide' project was successfully completed in 2019. This project was aimed at men who have sex with men (MSM) and sex workers in Kyrgyzstan, Ukraine and Russia, where Aidsfonds coordinated the project and Soa Aids Netherlands provided practical support to partners in Russia and Ukraine.

how they can implement their ideas more actively. Aidsfonds encourages this by awarding four financial contributions for regional projects through an open call for applications. In order to detect new, acute HIV infections as quickly as possible, the campaign www.hebikhiv.nl was rolled out nationwide by Soa Aids Nederland in November. We work closely with communities on this campaign.

Aidsfonds invests in the movement 'The Netherlands towards zero new HIV infections' through proposals for regional projects, but also by organising calls for proposals for innovative projects and scientific research. This resulted in the financing of three innovative projects, four research projects and eleven so-called 'small grants'. Aidsfonds itself also developed a number of activities in this field.

After persistent lobbying together with numerous other organisations, the five-year pilot focusing on PrEP provision to MSM via MHSs has started. Together with MHS Gelderland-Zuid, we initiated the coordination of the national implementation. This proved to be a very useful move, given the difficult

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start of the project. Healthcare professionals in the Netherlands were ready for the introduction of PrEP, thanks to funding made available for the action plan 'We are PrEPARED' by Aidsfonds. We also see this in the increased interest in the PrEP workshop during the Digital Learning Weeks, the online learning platform of Soa Aids Nederland. MSM, being the target group with the highest HIV and STI risk, were informed about PrEP through various channels and in collaboration with communities. PrEP also received growing attention. As a new feature, support is now provided through the online application EZI-PrEP.

Together with Maastricht University, an application has been submitted for a study into faster access to HIV and STI testing for male sex workers.

Since 2012, Aidsfonds – Soa Aids Nederland has been funding an endowed chair in First-line Treatment for HIV and STIs at the Department of General Practice (Amsterdam UMC), held by Professor Dr Jan van Bergen. Ten publications were published in 2019, half of which were published in international peer-reviewed journals. Training concentrated on trainee general practitioners and on enhancing expertise among practicing general practitioners. In 2019, research was conducted into the long-term consequences of chlamydia infections (external PhD candidate in collaboration with the National Institute for Public Health and the Environment and VU University Amsterdam). Research is also being carried out into promoting effective STI diagnostics by general practitioners through Diagnostic Test Consultation (Consultation Diagnostische Toets).

# Drastische reductie van soa's Drastic reduction in STIs

E-health and online applications make an important contribution to our efforts to drastically reduce the number of HIV and STI infections. The Soa Aids Nederland website was completely redesigned in 2019. This led to a 13% growth to 2,719,273 website visits last year and an increase in the number of referrals to more target group-specific websites, such as Man tot Man, Sense en Advies.chat¹. Those websites were also further developed. HIV and STI

tests can now be ordered online through reliable providers. The number of people who made use of the 'Testlab' services offered through MHSs has risen sharply. A new version is being developed that allows clients to manage the tests themselves. We are also seeing an increase in the use of our digital tools <a href="https://www.partnerwaarschuwing.nl">www.partnerwaarschuwing.nl</a> (also renewed) and <a href="https://www.advies.chat">www.advies.chat</a>. This is partly because many MHSs and GPs refer to these tools.

Soa Aids Nederland advocated using a multivalent vaccine for HPV vaccination and also vaccinating boys. Subsequently, in 2019, the Health Council of the Netherlands advised that the HPV vaccination should be introduced for boys as well. The state secretary largely adopted this advice by introducing HPV vaccination from the age of 9 for both girls and boys, and a possibility for young people up to the age of 26 to get vaccinated at a later age. We remain committed to the use of a multivalent vaccine, as it also protects against genital warts. Through an extensive campaign among young people up to the age of 26, we also aim to raise awareness of the possibility of getting vaccinated at a later age.

To address hepatitis B infections, priorities and targets for the MSM target group have been redefined on the basis of the latest insights. For sex workers, new animated films about free hepatitis B vaccination have been launched, which are communicated through various channels.

The successful International Chlamydia Summit that Soa Aids Nederland organised in 2019, together with the National Institute for Public Health and the Environment following the IUSTI-Europe Congress in Tallinn, provides building blocks for the new strategy. This strategy focuses more on treatment in cases where the chlamydia infection leads to illness than on preventing – the transmission of – all chlamydia trachomatis infections as such.

In 2019, the European Union-funded SHIFT project started, in which Soa Aids Netherlands participates. The project is aimed at people over 45 years of age with an increased risk of HIV and STIs.

<sup>1</sup> Man tot Man, Sense, Advies.chat

#### Sex education

Sex education is the foundation that enables young people and adults to make responsible choices about sexuality and relationships. At the same time, it is crucial for impactful STI and HIV prevention and care. This is why Soa Aids Nederland promotes the quality of sex education. We know that young people are most receptive to sex education when they are reached before they have their first sexual experiences and if this is done in a comprehensive, positive and evidence-based manner. Through co-creation we develop teaching materials, as well as relevant information and messages for the general public, young people and people with a higher risk of contracting STIs/HIV. In doing so, we have an eye for diversity according to sexual orientation, education, age and background, and we use the latest e-health insights that help to encourage healthy choices. In the action plan 'Sex under the age of 25', published in 2018, priorities were set for the coming years together with Rutgers and parties such as the MHS. In 2019, the 'Special Secondary Education (VSO) plus' action plan was adopted and a module of the 'Long Live Love' curriculum became available for students with learning difficulties.

Sex education can count on a lot of media attention. We see this every year during 'The Week of Love' ('De Week van de Liefde'), which we organise together with Rutgers. This is also reflected in the number of requests for information. One million young people visited the sense.info website in 2019, bringing the total number of visitors to three million since its launch. By setting up an evening consultation hour, the accessibility of the Sense Info Line has increased. Young people with a migration background are increasingly being reached by means of positive role models through a Snapchat campaign.

After Soa Aids Nederland placed the condom at the centre of attention in 2018, the first successful step was taken in 2019 through government funds that were made available for a condom campaign. After the discontinuation of the national lifestyle campaigns by the national government, including those for safe sex, the state secretary of the Ministry of Health, Welfare and Sport (VWS) made funds available again in 2019 for a Safe Sex campaign aimed

at young people from the age of 9. This campaign will be rolled out by the ministry in 2020 in close consultation with parties in the field and supported by an advertising agency.

Since 2018, with the support of the Nederlandse Loterij (Dutch Lottery), Aidsfonds and the other members of the Association of Collaborating Health Foundations, we have been investing in the health of future generations through the Healthy Generation 2040 programme. The shared ambition is that by 2040, Dutch youth will be the healthiest in the world. Finally, we map new developments; in 2019, research has mapped the burden of disease of genital warts among young people. A context analysis of sexual health among students was also carried out.

## Well-designed and working infrastructure

We contribute to building and maintaining a wellfunctioning 'stepped care' approach in HIV and STI prevention and care, nationally and locally. We make sure that soaaids.nl, Sense, the Sense Infolijn, Advies. chat, and Man tot Man<sup>2</sup> offer the right information and approach to connect with 'end users'. We do this in close collaboration with communities. In addition, we stimulate outreach, carry out internet outreach ourselves, and we connect forms of informal care to formal care. In 2019, we started research into the improved effectiveness and quality of the care chain. The healthcare chain 'Sexy Side of the Netherlands', which focuses on sexual health of MSM refugees, organised three meetings in Amsterdam, one in Maastricht, and contributed to meetings in The Hague and Eindhoven; during these meetings, people can get tested for HIV and receive HBV vaccination. NoMoreC, the community-based hepatitis C healthcare chain in Amsterdam, receives international attention and appreciation, including at the 3rd European Chemsex Forum in Paris.

As a knowledge institute, our relationships with professional groups such as doctor's assistants, general practitioners, HIV care providers and MHS professionals are essential. They form a network for the implementation of innovations in the HIV and STI response. We encourage professional learning

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<sup>2</sup> soaaids.nl, Man tot Man, Sense

offline and online and work closely together with communities of professionals. We do this to ensure that they are well-informed during their contacts with end users and that HIV and STIs remain on their agenda. Our customer-oriented E-newsletter responds to demands from the field and aims to strengthen contacts.

The Digital Learning Weeks for the further training of professionals were once again successful in 2019. The module 'Update Basic Knowledge STI' has been improved and is being followed by more and more professionals. The support of general practitioners forms the backbone and in March 2019 we commemorated the 25th anniversary of 'seksHAG', an expert group on STIs, HIV and sexuality set up by the Dutch College of General Practitioners (NHG). In addition, doctor's assistants are becoming increasingly involved, for example through the course 'Consultation Hour Sexual Health in the General Practice' and by encouraging participation in the National Congress STI\*HIV\*Sex. Soa Aids Nederland and the NVDA Academy (Dutch Association of Doctor's Assistants) are intensifying their cooperation, and in 2020 Soa Aids Nederland will share its knowledge with the NVDA Academy. In 2019, we also intensified our collaboration with the Netherlands School of Public and Occupational Health (NSPOH).

Healthcare professionals have received advice regarding the field of sex work by e-mail. Nurses can now use the WHO's e-learning module 'Sex worker Implementation Toolkit' (SWIT), adapted for the Dutch context. It will be further rolled out among MHSs in 2020.

The more 'traditional' forms of knowledge transfer also remain important. The annual National Congress STI\*HIV\*Sex on 29 November, an important source of information and inspiration, was attended by more than 500 professionals. In 2019, a day with the theme 'Male sex workers' was organised for professionals from the MHSs and other organisations in the field of sex work, focusing on outreach, cooperation and diversity of the target group. In a panel, five male sex workers shared their experiences during the annual Meet & Greet of MHSs that are involved in providing care to sex workers.

Ten scientific articles were published in 2019. The case study 'HIV among migrants' and several articles based on data from the MSM survey conducted in 2018, the H-TEAM project and the 'NoMoreC' project were submitted for publication.

The internet is a powerful tool for providing information and ensuring safety in the sex industry. In 2019, our website www.prostitutie.nl was visited almost 280,000 times. Sex work is legal in the Netherlands. Soa Aids Nederland and the Ministry of Social Affairs and Employment work together on the website www.prostitutiegoedgeregeld.nl with 28,000 visitors annually. Through so-called 'outposts', sex workers and their customers receive information about HIV, STIs and meeting up safely. The 'Peer to Peer' outreach module involves collaboration between different regions, using regional 'Peer experts'. In 2019, a start was made on the development of the community platform 'Ugly Mugs', which aims to reduce violence against sex workers and increase access to care for hard-to-reach sex workers.

The Regulation on Sex Work (WRS) has led to strong opposition and lobbying. The Ministry of Justice and Security is now working on an advisory report in which the care for sex workers is given a more prominent role. Soa Aids Nederland supports PROUD, the Dutch Union for Sex workers, through capacity building. Finally, we strive to reduce stigma and raise awareness about sex work.

# 1.1.2. Objective 2: Worldwide less than 200,000 new HIV infections

Despite the availability of a wide range of effective HIV prevention tools and methods, and a substantial scale-up of HIV treatments in recent years, new infections in adults have not decreased sufficiently. According to the latest UNAIDS figures, the world – with 1.7 million new HIV infections in 2018 – is still a long way from the goal of less than 500,000 new infections by 2020.

To address this, we focus on the key factors of this huge prevention gap:

- Lack of political commitment and, as a result, insufficient investment in HIV 'combination prevention' and a lack of commitment to remove socio-economic and legal barriers to access prevention tools.
- Unwillingness to address sensitive issues related to the sexual and reproductive health and rights of young people, young women and vulnerable groups (including harm reduction and gender inequality).

In 2019, Aidsfonds spent € 18.6 million on the strategic goal of 'Worldwide less than 200,000 new HIV infections'.

Aidsfonds provides financial support to over 300 partner organisations in the countries that are most affected by the epidemic. In many cases, we supplement these financial contributions with other forms of support that help partners strengthen their organisation and increase the impact and scale of their work. These financial contributions made to third parties for this objective enable us to maintain contact with over 300 organisations that are working on the same objective in our focus countries. In 2019, Aidsfonds made 63 new financial contributions totalling  $\in$  6.2 million, in addition to 165 ongoing contributions, and 33 financial contributions aimed at achieving this objective were successfully completed.

affected by HIV and AIDS and face the most obstacles in accessing prevention, treatment and care (sex workers, MSM and people who use drugs). Our work focuses on removing the barriers that make access to HIV prevention and treatment more difficult. To this end, we work with the most affected communities, and we ensure that human rights are at the heart of our collaborations and interventions.

In our various roles, we fund and support partners, programmes and projects directly at national, regional and global levels; we are the lead agency of the strategic partnerships Bridging the Gaps and PITCH; we are part of GUSO (Get Up Speak Out alliance); we are the fund manager agent for the Robert Carr Fund, we engage in national and international advocacy, we plead to keep HIV high on (international) agendas, and we advocate that governments continue to sufficiently invest in the HIV and AIDS response. We always work together with partners from our focus countries in order to bring relevant experiences from those countries to the attention of the relevant policymakers.

The 'stepped care' approach, which has already been adopted in the Netherlands, and which offers comprehensive information and services related to sexual health – mainly online or remotely (e.g. through call centres) – in a coherent way, has been adapted by Aidsfonds together with African partners and governments for implementation in South Africa

Financial contributions made towards the goal 'Worldwide less than 200,000 new HIV infections'	Ongoing projects	Awarded to new projects	Closed projects
Aidsfonds private funds	71	49	30
Aidsfonds government funding	94	14	3

Aidsfonds focuses on the target groups described in our multi-year strategic plan 'No time to lose': children, adolescent girls and young women, and vulnerable groups. They represent the groups most and Kenya. The ambition is to reach all young people in those countries with high-quality information and services.

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In 2019, the online training platform 'Trainers Lab' was launched in collaboration with Women Deliver, enabling local trainers in the field of sexual and reproductive health to further develop their knowledge and offer their expertise.

Young people (15-24 years) who use drugs, sell sex services and/or identify as LGBT I+ from vulnerable groups experience additional barriers in accessing prevention, treatment and care services. Epidemiological studies show that young people who use drugs, sell sex services and/or identify as LGBTI+ carry a disproportionate burden of new infections. Our monitoring and evaluation data shows that 30 percent of people who receive prevention, treatment and care through our projects are under 24 years of age. Based on existing good practices in different countries, we want to reach more young people, with better and appropriate medical care and other services. With the support of the Minister for Foreign Trade and Development Cooperation, we are able to better reach young populations (15-24 years) with prevention, treatment and care.

In many countries, service providers are hindered by laws and regulations that prevent them from providing services to young people. Accessible services for young people are also often unavailable, because service providers do not have sufficient knowledge of the specific needs of young people from vulnerable groups and because young people from those groups are insufficiently aware of health risks, support networks and communities.

All this also demonstrates the need to increase our reach among hard-to-reach young people from vulnerable groups. In 2019, with the support of the Minister for Foreign Trade and Development Cooperation, a two-year initiative 'Young, Wild... and Free?' started in Kenya, South Africa, Russia, Ukraine, and Vietnam, with the aim of involving these groups in the development and upscaling of tailormade services, and adapting existing services for prevention, treatment and care.

Research shows that tackling violence against sex workers can prevent 25% of new HIV infections. The Hands Off! programme focuses on training police officers, conducting lawsuits and strengthening selforganisation among sex workers. The evaluation of the 2019 project shows that this strategy to reduce violence is effective. In total, nearly 180,000 sex workers were reached. After years of lobbying by our local partners Pathfinder and Tiyane Vavaste in Mozambique, sex workers and police officers now work together directly. This is important because the police are often the aggressors against sex workers. In 2019 we also worked together with the South African police, who signed up for the training 'Dignity, diversity and policing'. The South African police decided to finance the training of 153,000 officers themselves. Local sex work organisations are involved in the implementation. Aidsfonds and partners were introduced at the regional Interpol office in Harare (Zimbabwe) to roll out this training among police forces in other countries in the region.

As a committed funder, we support innovative projects, provide core funding, facilitate the link with learning, and support the organisations and networks run by young people, by women, by sex workers, by men who have sex with men and by drug users. In 2019, a flexible investment by the Minister for Foreign Trade and Development Cooperation funded creative solutions, such as the 'TackleAfrica' project, which provides information, distributes condoms and offers HIV testing at football tournaments. With the Healthy Entrepreneurs' HIV self-testing pilot project in Kenya, we successfully piloted the distribution of HIV selftest kits in Kenya by the community entrepreneurs of the Healthy Entrepreneurs. In addition to relevant HIV information, 300 entrepreneurs offer HIV self-test kits to residents of remote areas. The demand for this appears to be high.

This has led to the dissemination of relevant information about HIV to a considerable number of people. In 2020, the project will be scaled up in Kenya and extended to Uganda, where we have already started working with Healthy Entrepreneurs in 2019. This includes the distribution of injectable contraceptives by young entrepreneurs. After police officers in Mozambique were trained on the rights and needs of sex workers in 2018, they received additional training in 2019 to better protect the rights of adolescent girls and young women.

# 1.1.3. Objective 3: Worldwide all people living with HIV receive treatment

The most recent figures are from 2018 and show the following picture: at the end of 2018, nearly 23.3 million people received antiretroviral therapy (ART). Of all 37.9 million people living with HIV, only 47% had a virally suppressed HIV infection in 2018. The biggest challenge remains in the target regarding the first '90': in 2018, 79% of people living with HIV were aware of their status. It is therefore particularly important to increase the number of people who are aware of their status.

The risk of contracting HIV is unevenly distributed around the world, both geographically and among different subpopulations. Our work focuses mainly on eastern and southern Africa, areas with 47% of all HIV infections worldwide and 54% of people living with HIV. However, a growing concern is Eastern Europe and Central Asia, especially the Russian Federation with over 30% more new HIV infections since 2010, particularly among vulnerable groups and their sexual partners. These groups have poor access to important and essential (prevention) interventions, for example as a result of: legislation that prohibits the promotion of homosexuality, a lack of good sex education in schools, and the limited availability of HIV inhibitors and PrEP.

Worldwide, more than half of new HIV infections occur among so-called vulnerable groups and their sexual partners. Discrimination by healthcare

providers, law enforcement officers, family members or members of the community prevents young people and vulnerable groups from accessing appropriate health services for HIV, sexuality and contraception. In addition, more than 900 young women between the ages of 15 and 24 become infected with HIV every day, AIDS-related diseases are the number 1 cause of death among young women worldwide and the number 1 cause of death among young people in Africa. Inequality, lack of empowerment and violence against women fuel this trend. Children (aged 0-14 years) are lagging behind in HIV care. In 2018 alone, 160,000 children became infected with HIV. Worldwide, 1.7 million children live with HIV, 46% are not treated. Without treatment, 50% of children born with HIV die before the age of two. In 2018, 100,000 children (ages 0-14 years) died as result of AIDS. 40% of children being treated use medication for adults.

Aidsfonds spent € 14.5 million on the strategic objective 'Worldwide all people living with HIV on treatment' in 2019.

The financial contributions made to third parties for this objective enable us to maintain contact with over 300 organisations that are working on the same objective in our focus countries. We awarded a total of € 3.8 million for 62 new international projects. In addition, Aidsfonds provided funding for 172 ongoing projects and 31 international projects aimed at achieving this objective were successfully completed.

Financial contributions to the goal: 'Worldwide all people living with HIV on treatment'	Ongoing Projects	Newly awarded projects	Closed projects
Aidsfonds private funds	78	49	28
Aidsfonds government funding	94	13	3

A number of new activities were initiated at the 2018 International AIDS Conference and further developed in 2019. The emergency fund for Eastern Europe and Central Asia was started together with the Elton John AIDS Foundation. This is in line with the ongoing collaboration project 'Turning the Tide' aimed at this region. An important study was completed in 2019 regarding the effective contribution of regional organisations to tackling HIV and sexual and reproductive rights in this region. Furthermore, Aidsfonds started the 'Kids to Care' programme 2018-2021 in Uganda, Kenya, Mozambique, Nigeria, Zimbabwe and South Africa to close the large gap in paediatric HIV care. Although fewer children now contract HIV through mother to child transmission, testing and treating children remains a challenge. Testing facilities for children are scarce and more than half of the children who are on treatment are not receiving the correct medication. As a result, the medication is less effective, difficult to take, or causes side effects. The Kenyan programme started in 2019 and an initial 150 children started receiving care. Through the programmes GUSO (Get Up Speak Out alliance) and PITCH, we also support partners in helping young people in sticking to their treatment, for example through peer support groups or stigma reduction. Through lobbying, our partners succeeded in lowering the minimum age at which young people can take an HIV test without the consent of their parents or guardian. This greatly lowers the barrier for testing.

We strive for a high-quality range of comprehensive prevention and treatment programmes. We offer our partners thematic and technical support and use relevant country experiences for global advocacy activities. With the transition to the universal health coverage system, the financing of HIV activities is under pressure. In addition, donors are withdrawing from middle-income countries, increasing the burden on national health budgets in those countries. Our advocacy focuses on maintaining specific attention, resources and participation for the most affected communities in the more general strategy of the universal health coverage agenda, within the United Nations (UN) and at country level.

In 2019, we enabled our partners to improve access to – and quality of – health services for vulnerable groups in all 13 focus countries. Innovative services have been developed to reach the most hard-to-reach communities in their own locations, through community-based mobile clinics for example. These mobile clinics were used for, among other things, testing for HIV and case management for HIV treatment. In 2019, an estimated 400,000 people from the most vulnerable groups, including sex workers, people who use drugs and LGBTI+ people, have used prevention, treatment and care services through our programmes.

We supported our partners with research to demonstrate the success of these services in scaling them up or integrating them into the national health package. The number of local partners supported by the Global Fund to fight AIDS, Tuberculosis and Malaria increased again in 2019. In Dar Es Salaam, Tanzania, local authorities scaled up the needle and syringe exchange programme implemented by our partners. In Pakistan, two innovative pilots have been recognised as effective interventions in terms of harm reduction, HIV testing and HIV treatment. It is important that through collaboration with clinics and the training of health care providers, national health services are also made available to vulnerable, discriminated against and often criminalised groups, through our collaboration with clinics, training institutes or health care providers. Partner organisations formed by these groups are increasingly monitoring services provided by the government, for example through the 'mystery client' method and the establishment of community monitoring systems integrated into the standard processes healthcare clinics.

Aidsfonds supported local partners in their struggle for better treatment. In Uganda, the medication Dolutegravir (DTG) has now also become available to young women of reproductive age, which provides them with a better treatment option. In Papua New Guinea, our partners successfully campaigned against the ill-fated government plan to use stem cell therapy for people living with HIV instead of providing them with regular HIV treatment.

In our role of kick-starter, we develop comprehensive and affordable HIV prevention and therapy models with possible upscaling at the national level. We strive to scale up models that are self-sustaining. In 2019, an ART Adherence tool ('Thandizo') for HIV compliance support developed by our partner in Malawi was rolled out.

In Kenya, HIV prevalence is the highest among sex workers, but their access to prevention and care is limited. This is partly due to the fact that in Kenya, sex work and sex with people of the same sex is punishable by up to 14 years in prison. Despite this, since 2015, our partner HOYMAS in Nairobi runs a community-based clinic, recognised by the government, that reaches 2,000 sex workers every year. A second clinic was opened in 2019. The clinic offers a wide range of services tailored to male sex workers.

In Asia, a large proportion of new HIV infections are associated with vulnerable groups and their partners. Accounting for 18% of new HIV infections and 23% of AIDS-related deaths in the region, Indonesia remains a priority country in this part of the world. In contrast to the global trend (globally, the number of AIDS-related deaths has decreased by 36% since 2010), the number of AIDS-related deaths in Indonesia has grown by as much as 58% since 2010. Half of the new infections occur among young people, and a quarter of gay men and transgender people live with HIV. Growing religious conservatism with an increasing influence on politics, plays an important role. In September 2019, the introduction of a new code of law that would criminalise sex education, the provision of condoms and all sex outside marriage was postponed at the last minute. Our Indonesian partners have joined forces in an alliance to permanently prevent the new code from going ahead. Aidsfonds supported the alliance in their lobby directed towards parliamentarians, in developing campaigns and organising protests. Our priority is to counteract the negative consequences on access to health care, especially HIV prevention, treatment and care. Our partners create 'friendly clinics' where everyone - including young people, unmarried women and LGBTI+ people - receive help. This is done by training medical staff and partnering with clinics.

Violations of human rights and denial of care are counteracted by a newly developed reporting system and cooperation with legal aid organisations.

# 1.1.4. Objective 4: A cure for HIV

In addition to prevention and treatment, finding a cure for HIV is the third crucial step in putting an end to AIDS. The scientific progress in recent years offers hope that, provided that investments are made now, major steps can be taken. In order to accelerate the search for a cure, Aidsfonds wants to make an additional € 10 million available in the coming years for research into a cure for HIV. Aidsfonds has also brought together all parties that play an important role in the search for a cure in the Netherlands in a unique collaboration: NL4Cure.

#### € 7.5 million mobilised

Finding a cure for HIV is the dream of millions of people living with HIV. But in order to find a cure, a lot of scientific research is needed. That is why we set up a special fund in 2019: the 'Countdown to a Cure for AIDS' fund. In the past two years, we have managed to get many people on board with our dream of finding cure for HIV. Nearly € 7.5 million has been raised for valuable research thanks to organisations such as Health Holland, ZonMw (The Netherlands Organisation for Health Research and Development) and many donors. With this amount, we were able to support 16 new research projects, 11 of which were awarded in 2019.

## Research

Over the past year, Aidsfonds has financed a number of projects that focus on the development of a cure. These initiatives are in line with the research agenda drawn up jointly by those involved. For example, it provides more insight into where the virus hides in the body and which strategies can be effective in clearing up HIV. In addition, it is also important to research the influence that a cure will have on people with HIV and on their environment. The studies funded in 2019 therefore also focus on the social aspects of a cure. Finding a cure is not an easy process. The development and implementation of a cure requires long-term commitment and investment.

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In addition to financial resources, it is important to ensure that there are sufficient researchers with the knowledge to develop a cure for HIV. That is why Aidsfonds invests in the research conducted by a new generation of talents: Maartje Basten, Steven de Taeye, Shringar Rao and Casper Rokx.

Genezing is er niet zomaar. De ontwikkeling en implementatie van genezing vraagt om langdurige betrokkenheid en investering. Naast financiële middelen is het belangrijk dat er voldoende onderzoekers zijn met de kennis om hiv-genezing te ontwikkelen. Daarom investeert Aidsfonds in het onderzoek van een nieuwe generatie talenten: Maartje Basten, Steven de Taeye, Shringar Rao en Casper Rokx.

# NL4Cure: working together towards a breakthrough

Dutch HIV research plays an important role in the global arena. Due to the combination of quality care, meaningful involvement of people with HIV and successful Dutch scientists, we have the opportunity to be at the forefront of research into a cure. In order to make the largest possible contribution in the Netherlands to finding a cure for HIV, all parties that play an important role in achieving this goal have been brought together through NL4Cure. Representatives of people living with HIV, researchers from a number of Dutch universities, HIV practitioners, HIV nurses, Stichting HIV Monitoring and Aidsfonds work together within NL4Cure to accelerate the search for a cure. An important result of the collaboration in 2019 is a joint research agenda3. This sets out what research needs to be done in the coming years to bring us closer to finding a cure, and how we can ensure that people with HIV can benefit from the research results as quickly as possible. The collaboration and the research agenda were presented at an inspiring meeting at Amsterdam UMC (location AMC). In order to ensure that a potential cure for HIV can be widely used, it will have to meet the following criteria: effective (but also sustainable, i.e. effective in the long term), safe, simple, affordable, acceptable, scalable and accessible. In 2016, the Cure working group of the International

AIDS Society carried out a study into which themes are important in order to find a cure for HIV. The strategies that are being researched worldwide can be divided into six different approaches, some focusing on the virus, others on the immune system.

In 2019 NL4Cure put a glimmer of hope on the horizon. With NL4Cure, Aidsfonds wants to encourage a breakthrough in scientific research with the aim of finding a cure for HIV and ensuring that a potential cure is in line with what people living with HIV consider important. The Netherlands is ideally suited to play a role in this aspect and Aidsfonds has a key role to play; Aidsfonds wants to accelerate the search for a cure for HIV by mobilising € 10 million for ground-breaking scientific research until 2021. NL4Cure has drawn up a research agenda that states what needs to be done to find a cure for HIV more quickly. In addition, the website www.hivgenezing.nl was launched and the 'A Cure for AIDS' fund was established.

For more information: see <a href="https://www.hivgenezing.nl">www.hivgenezing.nl</a>. Since the start of NL4Cure in 2018 until the end of 2019, thanks to Aidsfonds, sixteen research projects were initiated. These projects were co-funded by other parties such as Health Holland and ZonMw, totalling nearly € 7.5 million, of which € 2.1 million was contributed by our donors.

# 1.1.5. Objective 5: Awareness, support in society and full funding of the AIDS and STI response

All our work contributes to the Sustainable
Development Goals (SDGs) of the United Nations
(UN). Particularly to SDG 3 'Healthy living', one of the
sub-goals being: put an end to AIDS before 2030. In
2018, the international AIDS conference in Amsterdam
showed that AIDS is anything but a thing of the
past. In about 50 countries, the number of new HIV
infections is rising and the number of AIDS-related
deaths is not falling fast enough. Especially now that
global funding for the HIV response is decreasing and
the budget for STI care in the Netherlands has been
frozen, political will, public support and additional
investments are crucial. Our current donors, such

<sup>3</sup> https://aidsfonds.nl/genezing/onderzoeksagenda-hiv-genezing/

as the Minister for Foreign Trade and Development Cooperation, the National Institute for Public Health and the Environment, the National Postcode Lottery, and 134,000 donors, make our work possible. They are important partners in our joint mission. That is why we also pay special attention to the relationship with our donors and private persons. Through campaigns and advocacy, we ensure that HIV and other STIs remain high on the political and social agenda. Not only in The Hague, but also in international political centres such as Brussels, Geneva, Washington and Addis Ababa. In addition to the Netherlands, we call on other countries to commit to an effective and fully funded HIV response. We are also trying to increase funding for the HIV response in the countries where we work.

In 2019, Aidsfonds spent € 8.2 million on goal 5: 'Awareness, support in society and full funding of the AIDS and STI response'. Aidsfonds hosts the Robert Carr Fund, an international funding instrument designed to provide core funding to global and regional networks of civil society organisations focusing on the HIV response by and for vulnerable groups.

# Awareness and support in society

Public support in the Netherlands for a world without AIDS and STIs is crucial for our work. Not only in order to raise sufficient funds, but also to facilitate political change and combat stigma. Through campaigns, we stimulate awareness among the Dutch public.

The biggest challenge we face is that many people in the Netherlands think that AIDS is a thing of the past. This means that we must be increasingly inventive in conveying our message in a convincing way. This is why we placed a sculpture on the Damrak in Amsterdam around World Aids Day. The sculpture shed a tear every 40 seconds, because every 40 seconds somewhere in the world someone dies of AIDS. To this day. The image received a lot of attention, both online and in the media. In addition, 1 million people watched an impressive special broadcast of Beau 5 Days Inside, where Beau van Erven Dorens visited an Aidsfonds project for male sex workers in Kenya. In December, 800,000 people watched a special 'Tijd voor Max' broadcast, in which

we drew attention to the fact that children are forgotten in the HIV response. Half of the children living with HIV do not receive life-saving treatment. We were also active online. With the Universal Declaration of Love, we asked people to speak out against the increasing conservatism in various countries around the world, which in turn increases HIV prevalence in those countries. The Aidsfonds.nl website received almost 600,000 visitors and we also managed to reach more people via social media.

In the Netherlands, we draw attention to STI prevention through our online channels. With <u>soaaids.nl</u>, <u>Man tot Man</u> and <u>Sense</u>, we are able to reach millions of people. An important development is that we are increasingly able to zoom in on the questions of visitors and are basing the information and website layout on this data.

Media attention is essential in increasing awareness and support. In 2019, we continued to put all our efforts into this. A number of topics with which we managed to reach the media are: the crying statue, World AIDS Day, the search for a cure for HIV, follow-up funding for the Global Fund, developments surrounding the HIV prevention pill PrEP, the new STI figures, and the results of the research into sex education among young people.

2019 was also the year of research: who are our target groups, what motivates them, what works and what does not in terms of communication, and how can we engage them with the cause? Extra efforts were made to improve quality of content and to reach our English-speaking audience (more website visits, followers on social media channels and more engagement with messaging). The international campaign '16 days of activism' against violence against sex workers targeted influencers on the social media channels of Aidsfonds and UNAIDS, and aimed to increase social presence on Twitter, LinkedIn and Facebook.

#### Full funding for the AIDS and STI response

Globally, the trend is shifting from diseasespecific financing to a focus on Universal Health Coverage. However, there is still a need for targeted international funding for HIV control and treatment. According to the UNAIDS Investment Framework, a fully funded HIV response in low- and middle-income countries will require an annual investment of US\$ 26.2 billion from 2020 onwards. To achieve this, an additional US\$ 1.5 billion needs to be invested each year worldwide. In recent years, however, donor countries have allocated less money for the HIV response in low- and middle-income countries. The gap between the need for and the availability of resources is therefore widening. For the first time, there was a significant drop in funds available globally for the HIV response; down nearly \$1 billion. In 2018, US\$ 19 billion was available for the HIV response, which means US\$ 7.2 billion less than the estimated US\$ 26.2 billion needed in 2020. With strong support for STI and AIDS control, we are able to raise funds for our organisational goals. In addition, our lobbying activities will continue to focus on freeing up more funds from the Netherlands and the European Union for international AIDS relief, for example for the Global Fund to fight AIDS, Tuberculosis and Malaria.

Given the above context, the refinancing for the Global Fund to fight AIDS, Tuberculosis and Malaria in 2019 can be considered a success. Aidsfonds coordinated the international lobby directed at the EU in Brussels. The EU contribution increased by 16% to € 550 million. The Dutch contribution remained the same at € 156 million, but still represents a significant contribution. In total, € 14 billion became available worldwide for the next three years, the largest amount ever mobilised for a health initiative.

In 2019, the Dutch government decided to reinvest in good proposals for partnerships for sexual and reproductive health, HIV/AIDS, and strengthening civil society. The Minister for Foreign Trade and Development Cooperation will make € 315 million available through the SRHR Partnership Fund for the years 2021 through to 2024. In addition, the minister made € 6 million available for the extension of the Hands Off! Programme to combat violence against

sex workers in Botswana, Mozambique, Zambia, Zimbabwe and South Africa for the period 2019-2025.

Local funding for vulnerable groups and community activities is very limited, however. That is why in 2019 Aidsfonds paid attention to local funding and Universal Health Coverage at different levels. Aidsfonds' research into this – together with the London School of Hygiene and Tropical Medicine – provided our partners in Indonesia, Kenya, Uganda and Ukraine, among others, with tools to draft policies. The research was also used to train 40 African partners from 22 countries in advocacy regarding Universal Health Coverage.

In 2019, Aidsfonds and its partners made efforts to ensure the sustainability of the results achieved. We have developed an 'exit checklist' to guide partners towards the end of the current programming period at the end of 2020. This includes looking at organisational needs. A plan has been developed with each partner to address key needs in 2020. These include technical support and training, as well as organisational strengthening, linking and learning, and building and strengthening movements. Research among our partners showed that a lot of importance is attributed to developing fundraising and lobbying for more and improved funding for HIV programmes. An important tool in this regard is the report 'Where is the funding for vulnerable groups in the HIV response?', which was put together in 2019 and will be published in 2020.

### **Funding of the STI response**

The National Institute for Public Health and the Environment's Supplementary Sexual Health Scheme (ASG) forms an important basis for STI prevention and care. We advocate for the continuation and preferably expansion of this national ASG scheme. Together with other health funds, we are working on the shared ambition that by 2040, Dutch youth will be the healthiest in the world. We finance prevention activities and encourage the government to invest more in prevention.

# **Fundraising**

In 2019 we received the fantastic amount of € 52.8 million for the HIV response, which is

€ 0.6 million more than budgeted. Just over € 13.6 million was received from our donors, sponsors, estates and the participants of Charity Lotteries. We are incredibly happy with their unwavering enthusiasm, confidence and financial support! In 2019 we welcomed 12,372 new donors. At the end of 2019, 134,000 donors were structurally supporting Aidsfonds or had made a donation in the past 27 months.

The objective of the Marketing programme for 2019 was to raise € 14 million in revenue for the HIV response. We do this through authentic, passionate marketing, on matters that are close to the heart of our supporters, with the urgency of the HIV response at the core. We have also looked for new sources of income and fundraising channels, and we continue to find ways to put our donors at the heart of everything we do.

We received € 10.0 million from our donors through donations, gifts and inheritances. We keep our donors informed of the difference we can make with these contributions through magazines, e-news, social media and direct contact. To show our donors how important they are to Aidsfonds, we organised a "Thank-A-Ton". Aidsfonds employees called donors to thank them for their support.

We also try to connect with new donors and supporters in various ways. We do this through street fundraising, via direct mail, online and at events, such as the Pride Canal Parade. In December, we made a special broadcast of the programme 'Time for Max', after which 1,250 new donors signed up.

Special partners in our fundraising are lotteries and the AmsterdamDiner. In 2019 we received almost € 5.5 million from lotteries. Thanks to the participants of the National Postcode Lottery, we received € 2.25 million this year. We received a contribution of almost € 800,000 from the Friends Lottery and nearly € 400,000 from the Lotto and Krasloterij. This year we also received a fantastic surprise in the form of an extra contribution of € 2.1 million for our programme 'Brave Fight Against AIDS' (Dappere Strijd Tegen Aids). This project will be implemented and reported on in the coming years.

In 2019, the AmsterdamDiner once again brought together a large number of people from the business community, politics and civil society organisations. The dinner raises awareness about the fact that AIDS is not yet over. In 2019, the Diner raised € 540,000 for various Aidsfonds projects.

### **Institutional fundraising**

Because of its many years of expertise in the field of financing projects for and by people living with HIV, MSM, sex workers and people who use drugs, Aidsfonds is often an interesting party for institutional funders, such as governments and private donors.

An important source of income is the subsidies from the Minister for Foreign Trade and Development Cooperation for part of our international activities (€ 23.1 million) and from the National Institute for Public Health and the Environment for the government-related tasks performed by Soa Aids Nederland in line with the statutory tasks of the Centre for Infectious Disease Control of the National Institute for Public Health and the Environment (€ 3.5 million).

From the Elton John AIDS Foundation we received a contribution to the Emergency Support Fund for projects in Russia and Eastern Europe (€ 0.4 million). We also received a contribution of € 0.2 million from the Amsterdam Institute for Global Health and Development (AIGHD) for various Soa Aids Nederland projects.

#### **Robert Carr Fund**

Aidsfonds is home to the Robert Carr Fund, which bundles various international money flows to provide global financing for networks of vulnerable groups. We receive funding for the Robert Carr Fund from the British Department for International Development (DFID) (€ 1.7 million), the Norwegian Agency for Development Cooperation (NORAD) (€ 1.6 million), the US government (US President's Emergency Plan for AIDS Relief, PEPFAR) through UNAIDS (€ 4.1 million), the Bill and Melinda Gates Foundation (€ 0.2 million) and the Dutch government (€ 1.7 million).

In 2019, the Robert Carr Fund financed 36 new projects, involving € 35.6 million. There were still 37 ongoing projects, while 18 projects were closed. Of this amount, 10 percent was allocated to the goal 'Awareness, support and full financing of the AIDS and STI response' and 45 percent to each of the goals 'Worldwide less than 200,000 new HIV infections' and 'Worldwide all people living with HIV on treatment'.

# 1.2. Managing our stakeholders

Aidsfonds – Soa Aids Nederland has a coordinating function in the network of stakeholders. Stakeholders enable us to do our work and thus achieve our goals. On the one hand, we receive funding from donors, sponsors, lotteries, governments and others who feel closely involved in our work, and, on the other hand, our cooperation partners, networks and others who receive financial contributions ensure that the necessary work is actually carried out. We also work with a range of organisations and participate in various umbrella organisations. Various factors shape the way in which we interact with our stakeholders.

We pay a lot of attention to listening to and involving our supporters in the HIV response. We have a donor panel to ensure that donors can participate structurally in our activities and communications. We invited donors to our office to help brainstorm about the creation of the 'A Cure for AIDS' fund. We have also carried out various studies to measure, for example, the level of appreciation for our new donor magazine, the effect of our campaigns and the loyalty of our supporters.

Financial contributions to the goal: 'Awareness, support in society and full funding of the AIDS and STI response'	Ongoing projects	Awarded to new projects	Completed projects
Aidsfonds private funds	26	23	21
Funding from governments, lotteries and third parties	50	12	2
Robert Carr Fund	37	36	17

There is also the possibility to inform us of wishes, questions or complaints via the website, social media, by telephone or by email. We also have a complaints procedure in place. We attach great importance to transparency. We do this by means of example projects that provide a clear picture of how funds

are spent; and by communicating about bottlenecks, activities, results and milestones. Of course, the public is informed about the annual work plan and the expenditures via our website.

The multi-year plan 'No time to lose: focus, accelerate and increase momentum' for the period 2018-2022 was drawn up in a strategy development process involving various stakeholder groups in different ways.

## 1.2.1. Codes of conduct

We work according to the codes of conduct of the following associations: 'Samenwerkende Brancheorganisaties Filantropie', 'Genootschap voor Fondsenwervers', the 'Dutch Dialogue Marketing Association' (DDMA) and the sector association 'Goede Doelen Nederland'. In addition, we are a member of the association 'Samenwerkende Gezondheidsfondsen' (SGF), the sector association 'Partos' and 'Landelijk Overleg Thema-instituten'. We were awarded the gold label of the DDMA Privacy Seal that, which guarantees that our marketing activities comply with all applicable privacy rules. The organisations that have been awarded the DDMA Privacy Seal are checked annually for compliance with legislation and self-regulation.

# 1.2.2. Privacy and data security

The organisation is continuously working on privacy and data security. The most important parts of the organisation comply with European privacy legislation (General Data Protection Regulation) that came into effect on 25 May 2018. The parts of the organisation that work with privacy-sensitive data (such as donor data, e-health and online information) have been reviewed by an external agency and adjusted where needed. The classification of personal data in day-to-day work was completed in 2019. The security measures that were taken relate to technical security, system design and internal processes, as well as user awareness and culture. The organisation has a processing register.

# 1.2.3. Meaningful involvement of people living with HIV

Our organisation endorses the principle of fully involving people living with HIV in policy-making and implementation at all levels, the so-called MIPA principle (Meaningful Involvement of People living with HIV). Our director is openly living with HIV. There is a statutory seat on the supervisory board for a person who has support from organisations and networks of people with HIV. Employees living with HIV are deliberately involved in developing programmes and activities related to living with HIV and to the HIV and STI response.

# 1.2.4. National Congress STI\*HIV\*Sex

Every year, Aidsfonds – Soa Aids Nederland organises the National Congress STI\*HIV\*Sex in close collaboration with key partners and professionals. Due to its interactive nature, this congress not only offers a platform for the exchange of knowledge and experiences, but it also presents an excellent opportunity for public debate between stakeholders on important topics related to the STI/HIV response and sexual health.

# 1.2.5. Corporate partnerships

Our organisation is committed to sponsoring our products and activities. Not only do additional resources allow us to carry out extra activities, they also present an opportunity to involve the business community more closely in the HIV and STI response. The organisation takes the view that sponsors cannot exercise any substantive influence and also specifies this as a resolutive condition in the sponsorship contracts. The organisation has 'Guidelines for partnerships with companies' that apply to all forms of cooperation with companies. These are made available on our websites.

# 1.2.6. Accountability

We report annually by means of an annual report in accordance with the Reporting Guideline Fundraising Institutions (Guideline 650) of the Dutch Accounting Standards Board. The organisation attaches value to being able to account to society in a broader historical perspective; we have therefore concluded an agreement with the National Archives of the Netherlands for the transfer and preservation of our archives.

# 1.2.7. CBF recognition

Aidsfonds is recognised as a charity by the Netherlands Fundraising Regulator (CBF). This means that we have been positively assessed by the CBF in the areas of management, policy, fundraising, spending and reporting. Continuous improvement of the effectiveness and efficiency of spending, as well as the optimisation of the interaction with volunteers form part of the assessment. The reassessment in 2017 once again led to a positive opinion without comments or deviations. The interim assessments were passed with flying colours. The next reassessment will take place in 2020.

# 1.2.8. Complaints, appeals and objections

The foundation has a general complaints procedure. For Aidsfonds, there is also an appeal procedure with regard to the granting of financial contributions and an objection procedure for individual assistance. Complaints, objections and appeals that lead to a structural adjustment of the working method will be evaluated in the following year.

## **Complaints procedure**

The complaints procedure is a powerful tool in the quality system of the organisation. The threshold has been deliberately kept very low, so that stakeholders can easily express their complaints – by telephone, via the internet, by email or via post. This does lead to a higher number of complaints, but often of a less serious nature. In principle, the complaint is resolved where it arose. The number of complaints in 2019 was 470 (in 2018: 422).

With the exception of two complaints, in 2019 these were all related to fundraising activities. Through regular consultations, the findings are used to improve our fundraising. Complaints are taken into account in the design of follow-up actions, using the wishes of the donor as a starting point.

The number of complaints about fundraising fell considerably since the Aids Fonds and STOP AIDS NOW! brands were merged in 2016 to form the Aidsfonds: from 1,207 in 2015 to 422 in 2018. In 2019 there was an increase to 468. Most fundraising-related complaints (83%) were linked to the fundraising method that was used. Due to the fact that we carry out fewer fundraising activities and by continuously managing the fundraising agencies, the number of complaints about the information provided by the recruiters has decreased in recent years. The number of complaints about not being able to provide a one-time payment authorisation has fallen sharply from 67% to 3% of the complaints.

## Objections regarding individual assistance

Aidsfonds has an objection procedure in place regarding decisions about applications in the context of individual financial contributions. In 2019, the executive board did not receive any objections to a decision regarding an application for individual financial contributions.

## **Appeal procedure**

Aidsfonds has an appeal procedure in place regarding board decisions about financial contributions and an independent appeals committee. The appeals committee handles the appeals. Any revoked appeals are also submitted for review afterwards. No appeals were received in 2019. Petitioners are always given the opportunity to discuss their appeal with the executive board before it is reviewed.

# 1.3. Plans for the future

We are halfway through the timeline of our strategy 'No time to lose: focus, accelerate and increase momentum' for 2018-2021. In the coming years, we will focus on the parts of our work that have the biggest impact.

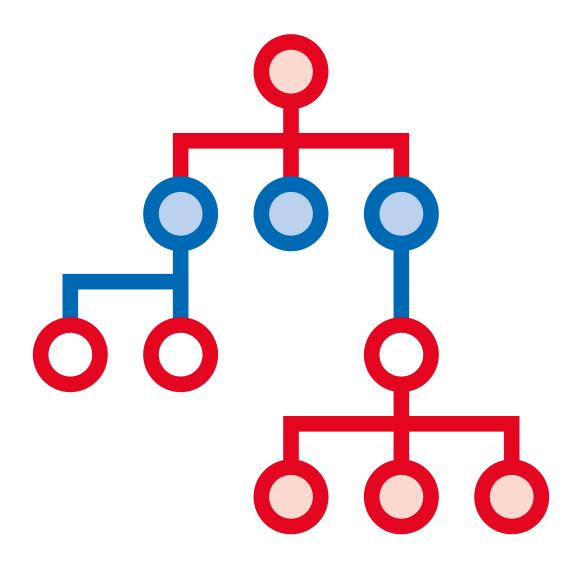
Nationally we are at a turning point. PrEP has finally become available in the Netherlands, which gives an extra stimulus to the movement 'The Netherlands towards zero new HIV infections'. In order to achieve this goal, we will give a targeted and effective boost to this movement in the coming year. If it were up to us, the Netherlands would become the first country in the world with zero new HIV infections. In relation to STIs, we have formulated the building blocks for a new strategy with the latest insights on chlamydia.

For our international work, 2020 will determine our activities up to and including 2025, with the submission of proposals for new multi-year strategic partnerships to the Minister for Foreign Trade and Development Cooperation. We will also complete a number of major programmes next year. Together with our partners, we will focus on a sustainable implementation and handover of the work at the end sof this financing period.

Finding a cure for HIV is a dream goal that has gained increasing momentum in recent years. We have already reached a number of important milestones. In 2020 we want to explore how we can further expand our unique role in the world in this regard. We remain committed to increasing awareness, support and funding as crucial building blocks to put an end to AIDS and to drastically reduce STI prevalence. Internationally, Universal Health Coverage is becoming the theme on which health policy focuses. This has major consequences for our advocacy. Nationally we are entering a new phase. With the expected decline in the number of new HIV infections, it will become increasingly difficult to retain the attention and support needed to enable the final push. In addition to these important activities, we have identified a number of crosscutting topics: gender, sustainability and impact. We believe it is important to work structurally on

these topics within all the work we do, as they make an indispensable contribution to the implementation of our strategy. Our internal organisation is constantly evolving to ensure that we continue to respond to what is needed and required of us. In 2020, for example, we will start a new development team. The mission of this team is to build a forward-looking organisation with solid funding and an entrepreneurial mindset.

The budget for 2020 is included in the 2019 financial statements under Annex 2. Total expenditure will increase to € 58.1 million compared to € 54.1 million in 2019.



# 2. Organisation and board

# 2.1. Personnel and organisation

Under the heading 'strategic HR', the holding of four annual meetings with the managers was initiated, which started the development of a more unified leadership. Leadership will be an important theme for 2020 in order to further professionalise and be ready for future developments.

In addition, work has been done to renew the travel safety policy. All employees who travel internationally will follow a travel safety training.

The introduction of new employees, also referred to as 'on boarding', was redesigned in 2019. Two meetings for new employees are held twice a year.

Work has also been done to further organise the HR administration. The physical personnel files were digitised in 2019. HR staff will focus on personnel administration, the further digitisation of HR work processes and HR administration, and on answering questions from colleagues. We are proud of the first digitisation steps we have taken. The HR ambition is: 100% digital. Employees can report changes and submit requests digitally and have access to their own digital personnel file. Further digitisation makes it easier for managers to access personnel information. The purpose of the available reports from the HR system is to further develop the department.

# **Staff composition**

In 2019, we employed an average of 167.5 employees (2018: 167.5). Converted to full-time employment, the average was 129.1 FTEs (2018: 128.6 FTEs).

On 31 December 2019, our workforce consisted of 68% women (2018: 64%) and 32% men. Of all employees,

27% had a full-time position of 36 hours per week (2018: 32%) and 73% worked part-time.

The average duration of employment on 31 December 2019 was 9 years (2018: 8) and the average age remained the same: 45 years (2018: 45). In 2019, 8 employees moved on to a different or modified position (2018: 13).

Absenteeism fell sharply in 2019 to 2.77% (2018: 7.05%). This is partly due to the attention that was paid to this topic in the managers' meetings, and also to more effective cooperation with the company doctor and the health and safety service (arbodienst).

Staff turnover in 2019 was 11% (2018: 16.7%) of the average number of employees.

## **Terms of employment**

For the salaries we follow the salary scales of the national government. As of 1 July 2019, the salaries of civil servants increased by 2 percent and this increase has been applied. Other employment conditions are derived from the collective labour agreement of Nursing & Residential homes & Care. This collective labour agreement changed in 2018 (duration 1 April 2018 to 30 June 2019). Where applicable, these changes have been translated into our terms of employment and implemented with effect from 1 January 2019 with the consent of the Works Council.

For education and training, a budget of 2 percent of the total wage bill is available. This budget is spent on individual and collective education, training and coaching.

#### **Volunteers**

Aidsfonds is delighted that there are volunteers who invest their time in helping to achieve our goals. We have a volunteering policy in which the rights and duties of volunteers are clearly described. Last year, volunteers were involved in the boat collections during the Pride Canal Parade and a number of summer festivals. On World AIDS Day, a large group of Begging Babes gathered during the Transformer party in Paradiso. And the casts of various theatre productions collected donations in the period around World AIDS Day after their performances. In total, around one hundred and fifty volunteers worked in our office and at events in the Netherlands in 2019.

### **Quality and learning**

Our organisation is ISO 9001-Partos certified and thus meets the international quality standard with the sector-specific application of ISO 9001 developed by industry association Partos. The ISO standard pays attention to current quality elements such as context analysis, managing opportunities and risks, applying relevant laws and regulations and knowledge management. Our organisation has been certified against the new requirements since 2017.

In April 2019, our certifier Lloyds carried out a periodic interim audit, while the annual internal audit round took place in October. No deviations were found during the audits.

We continue to actively invest in the learning capacity of our organisation. We do this by continuously stimulating the exchange of relevant knowledge and experiences between employees and with external parties. Lessons learned from the past are integrated into our daily work in order to contribute to quality improvement and increase the impact of our work. At the end of each year, reflection sessions are organised in which results and brilliant failures are shared. We strive to be and remain competent. This enables us to continuously improve and innovate our work, now and in the future.

#### **Integrity policy**

Aidsfonds – Soa Aids Nederland has a code of conduct in place for the management and all employees: 'Integrity Policy, Codes of Conduct and Procedures

for Good Employment and Employment'. This policy contains a number of preventive as well as corrective rules of conduct. To strengthen the understanding of the concepts of integrity and moral judgment among employees, the training 'Moral Judgment' is offered. This training was given several times. About 90 employees have now followed the training. We also have an external confidential adviser and a whistle-blower policy, so that employees are able to report any abuses among colleagues. No reports of abuse were received in 2019.

#### **Confidential advisor**

For situations in which an employee is unable or unwilling to discuss a matter with a colleague, a manager or with human resources, there is the option of talking to the external confidential adviser. Conversations with the confidential adviser take place outside the organisation, on neutral ground. The content of the conversation is not fed back to the organisation. The confidential adviser was consulted once in 2019 (in 2018 it was 4 times).

#### Change approach to organisational development

The strategic multi-year plan 'No time to lose: focus, accelerate and increase momentum, 2018 – 2021' requires a strong organisation. To achieve this, change teams have been formed around the themes 'Objectives to action', 'Solid base', 'Relocation' and 'Management and effectiveness'. The teams inventoried a large number of ideas and made proposals. These form the basis for the further elaboration and adaptation of the organisation. As a result, the following departments are now active: National, International, Marketing & Communication and Management & Services.

# Corporate social responsibility/relocation

The social entrepreneurship of the organisation focuses on the following focus areas: minimising the environmental impact and energy costs of buildings; transport and organisational processes; choosing partners and suppliers who deal with people and the environment in a responsible manner; and ensuring the well-being of our employees.

After a thorough exploration of the market for office buildings, it was decided to move to a new location,

close to Sloterdijk station. We moved into our office on Monday 30 September. The building has energy label A, which allows for significant environmental and energy savings. We have been working on this relocation since 2018. In the run-up to the move, we cleared out the Documentation Centre collection, and the static archives will be transferred to the National Archives after processing by an external party. During the move, we continued our usual daily activities. Daily work and all events continued without interruption. A new ICT environment was implemented around the time of the move.

The new accommodation is conducive to better cooperation and transparency, as we now work in a spacious, well-organised office and no longer in separate rooms and different buildings. We now literally meet each other more often. This should lead to better results in working towards our objectives.

The use of public transport is encouraged by providing all employees with an NS Business Card from 2019, which allows staff to commute by train and all other forms of public transport, including the use of an OV bicycle (OV-fiets), for home, work and business travel.

# 2.2. Management and supervision

In the articles of association of the foundation, the roles 'supervision', 'management' and 'implementation' are clearly separated. The foundation is managed by the executive board. The supervisory board supervises the executive board and closely monitors the organisation and its results, and ensures that plans are developed or approved. The supervisory board is supported by its audit committee and its remuneration & nomination committee. The works council makes its contribution in relation to employee participation.

The relationship between the executive board, the supervisory board, the audit committee and the remuneration & nomination committee is stipulated in the articles of association and in the 'Regulations of the supervisory board – executive board'. It also sets out the responsibilities and tasks. The works council has its own regulations.

The supervisory board and the executive board adhere to the three principles of good governance for charities. These are: the division of functions between implementation, management and supervision; the continuous improvement of effectiveness and efficiency in achieving its objectives; and optimising relations with stakeholders.

# 2.2.1. Supervisory board

The supervisory board fulfils the statutory task of supervisor. They closely monitor the foundation and its results and must approve plans and accounts. The supervisory board appoints the external auditor, who reports to the supervisory board and the executive board. Once every four years, the supervisory board and the executive board assess the performance of the external auditor.

## **Profile**

The profile of the supervisory board is the starting point for its composition. Due to new insights into management and supervision, the supervisory board decided to reduce its size to a minimum of five and

a maximum of seven members with effect from 1 January 2019. In view of the foundation's objective, the following portfolios were created: scientific research, development cooperation, demonstrable support from organisations of people living with HIV (stipulated in the articles of association), international business, finance/chair of the audit committee and political or public administration.

#### Monitoring

The supervisory board met eight times in 2019, six times in a meeting, once via teleconference and once for a so-called 'on boarding' meeting.

The executive board attended the meetings of the supervisory board. Fixed items on the agenda are the monthly newsletters from the executive board to the supervisory board. At the meeting, the audit committee reports on its supervision of financial affairs.

The supervisory board held an additional meeting on 29 January 2019 to discuss the proposed decision to change the structure of the organisation. The structural change is the result of the process initiated in 2017 to enable the organisation to achieve its strategic goals more effectively through increased monitoring and effectiveness. The supervisory board responded positively to the plans, and as from 1 April 2019 the organisation has been working with the 'National' and 'International' departments.

On 22 February 2019, the supervisory board, on the advice of the remuneration & nomination committee and the positive advice of the executive board and the works council, decided to appoint Mr Eric van der Burg as chair of the supervisory board.

The annual report with the 2018 financial statements was approved at the meeting of 24 April 2019. The supervisory board also discussed the audit report with PWC's accountants.

On 7 July 2019, the supervisory board discussed its composition and functioning. Following the positive recommendation of the works council and the board of directors, it was decided to make a seat available with a 'media and communication' profile. Together

with the supervisory board, the executive board discussed its plans for talent development in the organisation. The composition of the newly elected works council was presented. An introductory meeting would follow later. Based on the advice of the executive board, the supervisory board approved the intended decision to sell the property on Keizersgracht 394. The executive board discussed its plans for talent development with the supervisory board.

The meeting that took place on 14 October 2019 focused on the development of the new strategic partnerships with the Minister for Development Cooperation and Foreign Trade. The current partnerships will end in 2021 and new proposals for 2021-2025 can be submitted in 2020. The supervisory board also noted that the process of administrative renewal has been completed and that the supervisory board has reached its desired size and composition. The costs and benefits of the relocation were discussed. The profit was lower than expected at the time of the 2019 budget. The profit will be added to the reserves and allocated to our objectives. The supervisory board concluded that it is still too early to evaluate performance in its current composition. The assessment cycle will therefore start in June 2020, alternating between an internal and an external evaluation each year. An internal evaluation will start in 2020. The supervisory board expressed its wish to use its advisory function to contribute more actively to important strategic questions regarding the organisation. Two substantive topics will be on the agenda from now on.

On 9 December 2019, the supervisory board approved the work plan and the budget for 2020. It also considered the multitude of activities on World Aids Day. The agenda included two substantive topics. First, the plans for the new strategic partnerships aimed at strengthening civil society were presented and discussed with the Minister for Development Cooperation and Foreign Trade. We are the lead party for a consortium focused on vulnerable groups and we participate in a consortium focused on the sexual and reproductive health of girls and young women. The second substantive topic was about applying the 'stepped care' approach used in the Netherlands

together with local organisations adapted for use in South Africa.

Finally, an 'on boarding' meeting was held on 22 December 2019, during which the four departments introduced themselves. In addition, the three biggest strategic challenges for each department were discussed with the supervisory board.

Cooperation between the supervisory board and the board of directors

The supervisory board's overall assessment of the executive board is positive. The meetings are well prepared and the members of the supervisory board feel well informed, for example through the newsletter. There is confidence in the organisation. The executive board and the supervisory board have agreed that four steps will be taken with regard to the interaction between the two boards. These have been described by Johann Olav Koss for his Right to Play Foundation. Each quarter has one step: 1. the performance review; 2. the talent management plan; 3. the 360-degree review including stakeholders and direct reports; and 4. the goals for the coming year. This is in response to the mutual desire to discuss the director's real concerns in plenary sessions.

#### **Audit committee**

The audit committee of the supervisory board, chaired by the financial portfolio holder of the supervisory board, supervises the financial state of affairs within the foundation and assesses the functioning of the internal control of the administrative organisation, in particular that of the payment organisation. Fixed parts of the meeting are the management reports and the reporting within the framework of the policy on corruption, fraud and mismanagement.

Until 25 April 2019, the audit committee consisted of Yvonne Wilders (chair) and Frank Miedema (member), then of Lucas Vos (chair) and Henry de Vries (member). In preparation for the succession of both members of the committee in connection with the end of their second term on 1 July 2019, Henry de Vries attended the meetings of the audit committee

from the second half of 2018. The board of directors attended all meetings of the audit committee.

In its meeting of 9 April 2019, the audit committee presented the 2018 auditor's report, the 2018 financial statements and the 2018 management report in the presence of the external auditor. In August 2019, the audit committee discussed the costs and income of the relocation, including the proceeds from the sale of the building on Keizersgracht 394. The meeting of 18 November 2019 was devoted to the 2020 budget and the financial management report for the third quarter. The external auditor was present during the discussion regarding the interim audit report 2019.

#### **Remuneration & nomination committee**

The remuneration & nomination committee deals with personnel matters relating to the executive board and the supervisory board. An important part is the employer's role with respect to the executive board, including the remuneration and the remuneration policy, the annual assessment, the approval of expense claims, and the use of credit cards. Since 1 July 2018, the committee has consisted of Yvonne Wilders (chair) and Yolanda Weldring (member). In March 2019, Yvonne Wilders was succeeded by Eric van der Burg.

The main activities of the remuneration & nomination committee in 2019 were the completion of the recruitment procedure for a chair of the supervisory board, and the recruitment and selection of two members of the supervisory board: one for the portfolio of the chair of the audit committee and one for the media and communication portfolio. When recruiting a member for the media and communication portfolio, Henry de Vries was brought onboard as a member of the remuneration & nomination committee. The vacancies were published in the national newspapers during the recruitment processes. Ebbinge and Colourful People supported the committee during this process.

## Composition of the supervisory board

Eric van der Burg was appointed chair of the supervisory board on 5 March 2019. He succeeds Femke Halsema, who stepped down on 1 July 2018 because of her appointment as mayor of

Amsterdam. The board is grateful to Yvonne Wilders for her renewed willingness to fulfil the position of chair ad interim of the supervisory board. She previously fulfilled that role when a vacancy for the chairmanship had arisen in 2015.

The articles of association provide that the supervisory board shall draw up a retirement schedule. Members of the supervisory board are appointed for a consecutive period of four years, ending on the following 1st of July. After that, a member may be reappointed once for a period of four years. If a vacancy arises, the supervisory board shall seek advice from the works council and the

executive board on how to fill it. The council shall appoint and reappoint after the works council and the executive board have been given the opportunity to give their advice regarding the candidate.

In 2019, Yvonne Wilders and Frank Miedema stepped down after a second term as members of the supervisory board. The organisation is very grateful to both for their eight-year contribution to the supervisory board. On 24 April 2019, Lucas Vos was appointed chair of the audit committee. With the appointment of Leonard Bukenya on 17 September 2019, the supervisory board successfully concluded the process of managerial renewal.

## Composition of the supervisory board as from 31/12/2019

Name	Profile of the position	Date of taking office	Term	End of term
Eric van der Burg	Chair Chair remuneration & nominatio committee	05-03-2019 n	1	01-07-2023
Yolanda Weldring	Development cooperation Member of the remuneration & nomination committee	15-10-2013	2	01-07-2022
Lucas Vos	Trade and industry Chair audit committee	24-04-2019	1	01-07-2023
Henry de Vries	National STI control, scientific research, member of the audit committee	01-07-2014	2	01-07-2022
Leonard Bukenya	Communication and marketing	17-09-2019	1	01-07-2024
Anna Zakowicz	Support of (organisations of) people living with HIV	21-10-2015	1	01-07-2020

There is a balanced distribution of seats between men and women in the Supervisory Board: 67% men and 33% women, which is above the minimum target of 30% women.

#### **Advancement of expertise**

Based on our quality policy, we invest in the learning ability of the organisation. Members of the board have the opportunity to make use of expertise enhancement in the field of supervision. This allows the council to promote independent, professional and innovative supervision. Supervision that contains these elements has a stimulating effect and therefore makes a positive contribution to good governance and the sustainable future of the organisation.

The members of the supervisory board have access to a Charity Monitoring Toolkit (in Dutch: Toolkit Toezicht Goede Doelen), a publication of the National Register of Commissioners and Supervisors. This toolkit is intended for supervisors of fundraising institutions and equity funds, and consists of checklists and practical examples from the charity sector. The members of the supervisory board can also make use of a number of workshops offered to supervisors of the National Register of National Register of Commissioners and Supervisors.

#### **Reimbursement policy**

The members of the supervisory board perform their activities without remuneration, with the possibility of a fair compensation for costs incurred and work carried out. In addition, in line with the requirements of the Central Bureau for Fundraising (CBF), members are entitled to non-excessive attendance fees. In the 2019 financial year, no expenses were declared and no attendance fees were paid.

### Main and ancillary positions 2019

Eric van der Burg is a senator for the People's Party for Freedom and Democracy (VVD). He has ancillary positions as chair of Social Work Netherlands, chair of the Netherlands Commission for Environmental Assessment, chair of the Athletics Union, member of the board of the Resistance Museum Amsterdam, chair of the supervisory board of Veilig Thuis Rotterdam Rijnmond, chair of the supervisory board of Floriade Almere 2022 BV, member of the board of Yvonne van Gennip Talent Fonds, chair of the board of trustees of Regio College (until July 2019), treasurer of Stichting Life Goals (until October 2019), chair of the VVD in Amsterdam's city council (until May 2019).

**Leonard Bukenya** is a partner at Aimforthemoon. He has no further ancillary positions.

Lucas Vos is president of Stolt Tanker Trading BV.

As ancillary positions, he was a member of the

Amsterdam Economic Board (until 1 March 2019),

member of the supervisory board of the Jeroen Bosch

Hospital, chair of the supervisory board of Royal

Coster Diamonds (until 1 December 2019), member of
the election programme committee of the VVD and

member of the supervisory board of Royal Wagenborg.

Henry de Vries is professor of skin infections at the University of Amsterdam and leads the outpatient clinic for skin infections at the AMC's Department of Dermatology. He is also a trainer of dermatologists at the STI outpatient clinic of the MHS Amsterdam. His ancillary positions are: committee member of Vriendenfonds of the AMC's Art Collection, representative on behalf of the Netherlands at the International Union against Sexually Transmitted Infections (IUSTI) Europe, chair of the multidisciplinary national working group 'Leprosy in the Netherlands', chair of the International Society for STD Research (ISSTDR), chair of SKMS multidisciplinary medical specialist committee to develop a national STI guideline for specialist care, member of Gastmann-Wichers Stichting for combating leprosy in the Netherlands, member committee for HPV vaccination of the Health Council, board member of Bethesda Stichting and board member of the Centre for Visual Arts Southeast.

**Yolanda Weldring** is Associate Europe Director at Oxford HR and has no additional positions.

**Anna Zakowicz** is Deputy Bureau Chief and Director of Programs at AIDS Healthcare Foundation, European Bureau, member WHO Treatment Reference Group (TRG) in Europe, board member Together Against HIV (Estonia).

Members who stepped down in 2019

Yvonne Wilders is chair of the executive board of Alrijne Zorggroep. She has the following ancillary positions: member of the supervisory board and member of the audit committee of the Housing corporation Eigen Haard.

Frank Miedema is a professor at the University Medical Center Utrecht. Until the 1st of March, he was vice-chair of the executive board and dean of the University Medical Center Utrecht. His ancillary positions are: secretary of Stichting Dondersfonds, board member of the Talma Eijckman Foundation, member of the supervisory board of UMC Utrecht Exploitatie BV, board member of Stichting DTL, member of the supervisory board RegMed XB, member of the board supervisory board of USP, EBU Boardmember, member of the board of the CPCT, member of the board of 'Beeld & Techniek', member of the board of trustees of Utrecht Science Park and member council of SURF.

#### 2.2.2. Executive board

The executive board manages the foundation and is accountable to the supervisory board. Its core tasks are: strategic policy, overall coordination and external representation. The executive board is also responsible for substantive and financial-administrative quality control and personnel policy.

### The Management Team (MT)

The MT, consisting of the executive board and the managers, is responsible for steering the organisation, both in terms of content and processes as well as finances. The MT meets every three weeks to discuss this. The decisions are recorded in reports and a list of decisions. The MT informs the organisation of the most important discussions and decisions through the MT flash on the intranet. At the end of 2019, the MT decided to hold more transparent meetings in 2020; the agenda with MT documents is made available on the intranet and one employee at the time can attend the MT meeting as an observer.

In 2019, the vacancies for Manager International and Manager Finances & Services were filled in September. As of 1 September 2019, the MT consists of:

- Mark Vermeulen Executive board
- Mirjam Krijnen Manager International
- Febe Deug Manager National
- Stefanie van Bruggen Manager Marketing & Communication
- Koos Boering Manager Finance & Services

There is a balanced distribution of seats between men and women in the MT: 40% men and 60% women, which is above the minimum target of 30% women.

#### Composition of the executive board

As of 1 December 2018, the executive board comprises of Mark Vermeulen. He is responsible for strategic policy and external representation.

#### **Evaluation**

The remuneration & nomination committee evaluates and assesses the executive board annually. This is done in accordance with the system adopted by the supervisory board in 2010. The basis for this discussion is a self-evaluation regarding the state of affairs and the results of the previous period. In addition, the committee uses a 360° evaluation based on a brief questionnaire. Due to the change of directors, no evaluation was carried out in 2018.

#### **Ancillary positions 2019**

The ancillary position of Mr. Mark Vermeulen is a board member of Stichting Loterijacties Volksgezondheid and a board member of Funders Concerned About AIDS (FCAA).

# Remuneration paid to the members of the executive board

Following the advice of the remuneration committee, the supervisory board has put together a remuneration policy, and determined the level of the executive remuneration and the level of other remuneration components. The policy is updated periodically. The last evaluation took place in May 2016.

In putting together the remuneration policy and determining the remuneration policy, we follow the 'Regulations for the remuneration of directors of charities for the benefit of management and supervisory boards'.

The regulation provides a maximum standard for annual income based on weighting criteria. The function was weighted by Leeuwendaal using the ODRP job rating system. This resulted in a so-called BSD score of 465 points with a maximum annual income of € 138,020 (1 FTE / 12 months).

Prior to the assessment, in accordance with the applicable maximum, the actual annual income for Mark Vermeulen's function as director, was  $\in$  97,943 (1 FTE). This remuneration remained within the applicable maximum of  $\in$  138,020 per year. The annual income, taxed allowances/accumulations, employer's pension contribution, pension compensation and other long-term benefits remained within the maximum amount of  $\in$  194,000 for Mark Vermeulen, with an amount of  $\in$  120,762 per year.

their role and remain a critical discussion partner in the matters that concern our organisation, and our colleagues in particular. The council are proud of being able to make a positive contribution to a healthy and pleasant workplace for all colleagues.

## 2.2.3 Works council

The works council represents the interests of employees. The works council consists of Haitske van Asten (chair), Dieuwke Bosmans, Sjoerd van Elsen, Bert Herberigs (secretary), Salim Issa, Naroesha Jagessar, Jan Perdaems. Michaël Kensenhuis was a member of the works council until September 2019. He left the organisation. Naroesha Jagessar was next on the list of elected representatives and she therefore joined the works council on 1 September 2019 to replace Michaël.

The works council had a full and dynamic year in which a number of fundamental changes have taken place within our organisation. The works council has devoted a great deal of attention to the development of the strategic personnel policy, the relocation process and the structural change that led to the creation of the new national and international departments. These topics are still in development and will continue to require a great deal of attention in 2020.

The works council is pleased that in 2019 we managed to put topics on the agenda that are important to us as an organisation – with positive outcomes. For example, the council took the initiative in drawing up an ongoing social plan, the renewal of the Risk Inventory & Evaluation (RI&E) and they urged the executive board to draw up a strategic personnel policy.

The council appreciates the constructive cooperation with the executive board, which means that processes often run smoothly. However, they are aware of



## 3. Finances, risks and implementation

# 3.1. Effectiveness and efficiency

The foundation works with subsequent strategic multi-year policy plans. These plans specify for what purpose the fundraising funds are intended, how much money is needed for each goal and how the resources are used.

Every year, a work plan including a budget is drawn up, setting out the intended results for each objective. The organisation determines the cost percentages for expenditures under each objective, for fundraising activities and for management and administration. The outcomes are visualised in the quarterly reports, annual reports and ultimately published in the annual report.

The primary goal of the organisation is to achieve its objectives in the best possible way and to recruit the necessary resources for this purpose. Naturally, a reserve must be built up to guarantee the continuity of the organisation, in accordance with 'Guidelines for the Reserve of Charities' outlined by 'Goede Doelen Nederland'. The organisation manages its funds in a non-risky manner; no investments are used.

The organisation continuously works on an optimal use of resources, so that effective and efficient work is done to achieve its objectives. A project management system ensures systematic monitoring and evaluation. A management information system is used to compose quarterly and annual reports. We have been contributing to IATI (International Aid Transparency Initiative) since 2016. This has made it even easier to access, understand and use the available data.

The organisation has performed a risk analysis, which has allowed us to determine that the resources reserved for the continuity of the organisation (continuity reserve and other reserves) are sufficient. The organisation remains alert to risks in order to be able to respond adequately. In addition, risk analyses are made for all subsidy relationships and an organisation-wide risk management system has been implemented.

## 3.2. Finances

## 3.2.1. Income

In 2019, the total income amounted to  $\leqslant$  52.8 million. This is  $\leqslant$  8.9 million more than the total income in 2018 and  $\leqslant$  0.6 million more than budgeted. The increase is mainly due to higher spending within the PITCH programme and the Robert Carr Fund (RCF), see below. As a result of the higher spending, we were also able to book a higher amount of related subsidy income.

Income from private donations fell from  $\in$  10.9 million in 2018 to  $\in$  10.1 million in 2019, which was slightly higher than budgeted. Inheritance income in particular decreased: from  $\in$  2.3 million in 2018 to  $\in$  1.6 million in 2019, but remained  $\in$  0.5 million higher than budgeted. The total income from donations and gifts amounted to  $\in$  0.2 million less than in 2018 and  $\in$  0.5 million less than budgeted. From a multiyear perspective, income from inheritances shows a slight upward trend, income from donations shows a slight downward trend. However, the income from inheritances is unpredictable and can therefore vary considerably from year to year.

Income from other non-profit organisations rose from € 0.9 million in 2018 to € 1.5 million in 2019. We received donations from the Elton John AIDS Foundation, Bill and Melinda Gates Foundation and the AmsterdamDiner, among others.

## 3.2.2. Spending on objectives

We spent € 49.9 million on our objectives in 2019, which is € 8.9 million more than in 2018 and € 1.0 million less than budgeted. The underspending is largely due to RCF. This concerns a shift between years of the multi-year budget.

The delay in the start-up of new strategic partnerships with the Minister of Foreign Trade and Development Affairs in 2016 started to decrease in 2017 and 2018, but also led to an adjusted schedule for the entire five-year period. Within the PITCH programme, an adjusted budget for the years 2018-2020 and a corresponding adjusted liquidity planning was formally approved in 2018. As a result, approximately € 3.8 million in expenditure (out of a total multi-year budget of € 41 million), which was originally planned for the years 2016-2018, have been postponed to 2019-2020. This mainly concerns transfers to partners that were already booked in 2017, but had not yet been fully spent by them. As a result, € 9.1 million more was paid in 2019 than in 2018, which amounts to € 1.0 million less than budgeted.

The expenditure of the RCF programme amounted to € 0.7 million lower than budgeted. In 2018, the existing RCF donors announced their new commitments for the years 2019-2021. The three-year budget will increase by approximately 30% (compared to the previous period) to € 34 million (US \$ 38.5 million).

Spending on objective 1 'Drastic reduction in the 'big 5' STIs and zero new HIV infections in the Netherlands' was € 1.2 million higher than budgeted and increased from the budgeted € 5.3 million to € 6.5 million. The excess is caused by extra funding for scientific research.

Objectives 2 'Worldwide less than 200,000 new HIV infections' and 3 'Worldwide all people living with HIV on treatment' are often seen in conjunction within our international programmes. Expenditure in these areas was lower than budgeted: € 19.3 million budgeted versus € 18.6 million spent (objective 2) and € 15.6 million budgeted versus € 14.5 million spent (objective 3). The main reasons for this are the shifts between the years within the PITCH and RCF programmes, as explained above.

For objective 4 'A cure for HIV', the budget was € 2.2 million and the expenditure was € 2.1 million.

For objective 5 'Awareness, support in society and full funding of the AIDS and STI response', the budget was € 8.6 million and the expenditure was € 8.2 million.

## 3.2.3. Other expenditures

In 2019 we managed our fundraising expenditures very carefully and realised a saving of  $\in$  0.1 million: we spent  $\in$  2.8 million while we had budgeted  $\in$  2.9 million. Where we had insufficient confidence in the available funding for certain campaigns, we decided to do things differently or to not do them at all. For the long term, we assume that the benefits will remain under pressure, and that fundraising methods that yielded sufficient funds in the past may not do so in the future.

The costs for management and administration remained virtually unchanged from the budget, and amounted to € 1.4 million. Due to the growth in the number of programmes and increasing requirements in the areas of compliance, project management and financial control, the organisation has been strengthened in these areas. Compared to 2018, the percentage of costs for management and administration fell from 3.1% to 2.6%. The percentage is at the lower end of the desired bandwidth of 3 to 6%.

## 3.2.4. Financial result and reserves

The financial result amounted to a loss of € 1.3 million, while a loss of € 3.0 million was budgeted. The difference is mainly due to the sale of the property on Keizersgracht. The sale of the property yielded € 2.6 million, a net income of € 1.6 million after deducting the book value. On the other hand, government subsidies were € 1.5 million lower on balance. The overall positive balance was € 1.7 million.

Every year, we create earmarked reserves and earmarked funds for revenues that are specifically labelled and that have not yet, or partially been spent. Spending these funds in subsequent years will lead to a negative result, which will in turn be covered by these designated reserves and designated funds. This was also the case in 2019. After all agreed additions and withdrawals, a balance of € 1.2 million will be withdrawn from the designated reserves, € 0.3 million will be withdrawn from the designated funds and € 0.2 million will be added to the other reserve. The total equity decreased with the negative result of € 1.3 million from € 11.7 million at the end of 2018 to € 10.4 million at the end of 2019.

## 3.2.5. Key figures

We spent 92.3% of the total expenses directly on the objectives. The percentage of expenditure in relation to the total income was 94.6%.

The ratio cost percentage of our own fundraising activities has lapsed since 2017 due to the new income classification and the new planning for fundraising costs. Instead, the ratio for fundraising costs is reported as a percentage of the total income raised. This was 5.2% in 2019 and 5.9% in 2018.

The cost percentage of management and administration is 2.6% and was 3.1% in 2018. The organisation uses 3 to 6% of the total costs of management and administration as standard. This percentage is relatively low compared to that of its peers.

The solvency ratio as of 31 December 2019 amounts to 4.5 (31 December 2018: 3.7) and the liquidity ratio remains unchanged and amounts to 1.4 as of 31 December 2019.

## 3.2.6. The future

The budget for 2020 is included in the 2019 financial statements under Annex 2. The total income for 2020 is budgeted at € 54.5 million, an increase of € 2.2 million compared to the 2019 budget.

Expenditure under the objectives will increase to € 53.8 million against € 49.9 million spent in 2019.

The growth is largely due to the developments in the PITCH and RCF programmes, as explained above.

Especially objectives 2 'Worldwide less than 200,000 new HIV infections' and 3 'Worldwide all people living with HIV on treatment' will show an increase in spending compared to 2019.

For 2020, we have made a cautious estimate based on 2019 revenue from inheritances (which was higher than expected). As a result, the budget for 2020 will be lower than the financial result in 2019. Our awareness-raising activities are mainly aimed at getting HIV/AIDS back on the agenda and making people aware of the urgency. As long as the general public experiences AIDS as the umpteenth chronic illness that only prevails somewhere far away, fundraising will remain difficult.

Our strategic partnerships with the Minister for Foreign Trade and Development Cooperation (PITCH and Bridging the Gaps) represent a substantial part of our expenditure. In 2020, these programmes will enter their final year and the final results will become visible. We are now fully committed to ensuring a good fundraising strategy for our organisation after 2020. The new government policy in the field of international cooperation was published in 2019 and this has provided clarity about new subsidy options for the years after 2020.

We will continue our role as fund manager for RCF, the Robert Carr Fund, and in 2019 we started the third three-year financing round.

The budgeted costs for management and administration are almost equal to the realisation in 2019. We want to recalibrate our entire cost allocation system in 2020. This could possibly lead to a different allocation of personnel and organisational costs to the various programmes and to management and administration.

The organisation will change in 2020: it is the final year of the PITCH and Bridging the Gaps programmes. Halfway through 2020, it will become clear which programmes can be implemented from 2021 onwards, and how costs will be allocated between the programmes. In 2021, the activities related to the PITCH and Bridging the Gaps programmes will be concluded.

As explained under 'Continuity reserve' and in the notes under Subsequent events' in the financial statements, the COVID-19 outbreak – and the measures taken by various governments in response to contain the virus – have not had material consequences for our organisation in the first 4 months of 2020.

We are in close contact with our subsidy providers/ donors about the consequences of the outbreak that may arise on our side and theirs. We also guide our collaboration partners as best we can in the situations they are facing and we are looking to see if and how measures taken in their countries will have an impact on our results.

Aidsfonds has a multi-year subsidy relationship with the Ministry of Foreign Affairs regarding the financing of the strategic partnerships 2016-2020. The amounts for 2020 have already been obtained through the extension of the grant agreement. Aidsfonds also received funding for the period 2020 through an extension of the grant agreement by the National Institute for Public Health and the Environment.

In 2020, we are not seeing more cancellations among private donors than usual. At the same time, we do not see any decline in income from inheritances. Aidsfonds is a long-term beneficiary of the National Postcode Lottery (NPL). On the basis of a multi-

year agreement, Aidsfonds will receive a fixed contribution until 2020. There is no reason for the NPL not to pay this contribution.

The organisational costs and long-term obligations are mainly the rent commitments and the staff costs. The staff costs primarily consist of permanent staff based on the projects carried out by Aidsfonds. We do not expect any problems with regard to our liquidity position in 2020.

In the first quarter of 2020, an advance payment to finance the programmes was also received, bringing the liquidity position to a total of over € 30 million at the end of March.

We are aware of the fact that our income and operating profit might continue to fall in the remaining months of 2020 due to the COVID-19 outbreak. The extent of the impact will depend on how long the areas in which we operate will be exposed to COVID-19 and to what extent government measures will be extended, intensified or lifted. However, if the COVID-19 pandemic persists for an extended period of time, this may need to be reassessed and could have profound consequences.

## 3.3. Risk management

No organisation works without facing risks. However, we strive to minimise the risk of failing to achieve our objectives. In 2019, our risk appetite was better defined. As a result, employees now have clearer tools to manage risks. We have identified our risks, identified preventive and corrective measures and (partially) implemented them, both at the organisational level and within our programmes. Our aim is to take strategic risks and reduce unnecessary risks.

## The possible consequences of COVID-19 for our organisation

As explained under 'Continuity reserve' and in the notes under 'Subsequent events' in the financial statements, the COVID-19 outbreak – and the measures taken by various governments in response to contain the virus – have not yet had material consequences for our organisation in the first 4 months of 2020. In addition to the effects already known, macro-economic uncertainty leads to disruption of economic activity and it is unknown what the possible longer-term consequences will be for our activities. The scale and duration of this pandemic remain uncertain, but are expected to have significant consequences for our activities.

The main risks arising from the current uncertain situation regarding COVID-19 are:

- Realising and accounting for the contributions and hours for the subsidy providers in 2020;
- Lock down in the areas where our partners operate, as a result of which the agreed activities cannot be carried out.
- Reduced income from private donors due to the deteriorating economic outlook;
- The availability of subsidies for the 2021-2025 programmes.

## 3.3.1. Our assets

We are always faced with the risk of receiving less funds than anticipated, or receiving them later than expected. This is monitored closely. We only transfer money to partners once it has been received by us. Furthermore, we are constantly exploring new options for the set up and financing of our organisation and our projects.

## 3.3.2. Our employees

In addition to our financial resources, employees are the capital of the organisation. We aim for a good match between tasks and talents, to help employees realise their full potential. We pay a lot of attention to internal communication and to properly informing our employees. We discuss vacancies at MT level and look for the best (internal or external) solution. We invest in training and development, and set priorities that are in the interest of the organisation and of the individual employees. We will continue to develop leadership in 2020. We pay a great deal of attention to working in a healthy way.

## 3.3.3. Our strategy

With our strategic plan for the years 2018-2021 'No time to lose: focus, accelerate and increase momentum', we have determined how we want to achieve our objectives. Our 2020 annual plan is fully in line with this plan. We are constantly looking for new developments that require a rethink of our strategy. In addition, we use scientific and evaluation research to assess whether our strategy is being implemented correctly and is having the desired effect.

## 3.3.4. Soa Aids Nederland

The National Institute for Public Health and the Environment, which provides us with institutional subsidy, is in the process of conducting a government support investigation, in which all activities subsidised by them are examined. It has become clear that the 'Long Live Love' curriculum can no longer be subsidised by the National Institute for Public Health and the Environment. We are in close consultation with the National Institute for Public Health and the Environment and VWS about other possible risk areas.

External consultations have positively assessed us as the knowledge and expertise centre in the field of STIs and HIV. They have also expressed appreciation for our innovative communication and intervention strategies, our extensive network, our access to both professionals and communities, and our lobbying capacity. At the same time, stakeholders asked for more coherence in our approach in the field, and for impact. We have achieved this by focusing on two key themes in HIV and STI prevention: e-health and people with fewer health literacy skills.

We have also focused our work on our new strategic goals, which largely coincide with the National Action Plan on STIs, HIV and sexual health. The entire field has participated in this action plan, which reinforces the realisation of these goals. An annual agenda has been drawn up with MHSs, including regional visits with workshops and tailor-made theme meetings. As the leader of the movement 'The Netherlands towards zero new HIV infections', we want to be the first country in the world to achieve zero new HIV infections.

## 3.3.5. Our partners

We carefully select the organisations that we subsidise. We choose to support groups or networks of groups that are vulnerable to HIV and STIs. This is the most effective way to reduce HIV and STI prevalence and to safeguard sexual and reproductive rights. In many countries it is precisely these groups that are often discriminated against and marginalised, and are therefore hindered in their organisational development. These organisations are not always mature or strong, which makes working with them risky.

With our many years of experience in the field of providing financial contributions and programme support, we have a great deal of knowledge and experience in identifying and tackling mismanagement and fraud as early as possible. In close cooperation with the partner in question, and, in the case of serious fraud signals, we call in an independent auditor so that we can determine whether fraud or mismanagement has actually occurred.

Sometimes the financial administration turns out to be correct, but the organisation's financial capacity is very weak and the financial system used is inadequate. In those cases, we help organisations to improve their financial administration.

In the exceptional case where fraud or mismanagement occurs in an organisation that we support, we can reclaim the money and, if relevant, file a report.

## 3.3.6. Integrity violations

The organisation has a 'Integrity Violations Policy' in place, which relates to our external relationships. We also have codes of conduct in place regarding human trafficking and child exploitation. Employees are trained to make effective use of these tools. A large group of colleagues also received further training in the field of moral judgment in 2019.

In recent years, we have not discovered any cases or received any reports of exploitation or sexual misconduct. However, there have been some incidents of a financial nature. There has been a fraud case involving a partner, and we are still investigating how we can recover the damage from former employees who were employed by this partner.

## 3.3.7. Our target groups

We work a lot with groups that are vulnerable and at risk, such as gay men in countries where homosexuality is a crime, or people who work in the sex industry, which is a criminal offense in many countries. This means that we must protect the identity of our target groups and partners. At the same time, we want to be transparent. A difficult balance. From 2016 onwards, we have been publishing all our activities on the internet according to the IATI standard. To protect vulnerable people, we work with guidelines that determine what information may and may not be disclosed.

## 3.3.8. Our organisation

We are ISO 9001 2015-Partos certified (version 2018) and work according to internally agreed upon ISO procedures to guarantee the quality of our work and to mitigate risks.

## 3.3.9. Laws and regulations

The organisation complies with the General Data Protection Regulation and has processing registers for each organisational unit where personal data is used. Given the nature of our work, this sometimes involves so-called sensitive personal data. An external party has carried out analyses and plans of action for those areas that involve the greatest risks. This work will be continued in 2020. The organisation has processing agreements, a cookie policy and privacy statements that comply with the General Data Protection Regulation. No cases involving breach of data were reported to the Dutch Data Protection Authority in 2019.

## **Continuity reserve**

Effective and efficient use of resources is key to our financial policy. In addition, it is necessary to maintain a strong capital base to ensure the continuity of the organisation. This concerns both the obligations with regard to personnel and organisation, and the need to continue the financial contributions to third parties.

For the Aidsfonds brand, the size of the reserve will again be determined on the basis of a risk inventory on the basis of developments in 2020. The continuity reserve for 2019 will remain unchanged from the position at the beginning of 2019 and amounts to € 2,893,000 at the end of 2019. The continuity reserve for the Soa Aids Nederland brand consists of the equalisation reserve of a maximum of 10 percent of the annual costs permitted by the subsidy provider, the National Institute for Public Health and the Environment. In 2019, a withdrawal of € 88,000 was made, and the reserve amounted to € 139,000.

The continuity reserve may – in accordance with 'Guidelines Financial Management of Charities' outlined by 'Goede Doelen Nederland' and included in the CBF regulations – amount to a maximum of 1.5 times the operational costs of the organisation: € 22.0 million. The current continuity reserve falls well within this maximum. The income of Aidsfonds comes from multiple sources; Aidsfonds receives substantial income from various forms of fundraising. In addition, the brands receive funds from Dutch and foreign governments and from private funds, including lotteries. Due to this distribution of income sources, the risk that all income is lost at the same time is limited.

## **Subsequent events**

The overall impact of the coronavirus outbreak on our long-term objectives is unclear. Developments are being monitored closely and mitigating measures are being taken for the resulting risks. It is not expected that in the short-term, our income will be significantly lower as a result of this outbreak. Continuity is guaranteed. In the long run, this development could have an impact on funding from private individuals and available government subsidies.



## 4. Statutory and other information

## **Legal form**

Stichting Aidsfonds – Soa Aids Nederland has its seat in the municipality of Amsterdam. The foundation works from one shared vision, mission and strategy and propagates this through the Aidsfonds and Soa Aids Nederland brands

## **Statutory objectives**

The statutory objectives of the foundation are:

- stimulating and increasing the size and quality of the Dutch contribution to:
- 1. the national and international response to HIV/ AIDS and other STIs
- support and care for people living with HIV/AIDS or other STIs;
- the continuation and further development of the objectives of the foundations from which the foundation originated: Stichting Aids Fonds – Soa Aids Nederland, Stichting STOP AIDS NOW! and Stichting Aidsfonds – Soa Aids Nederland (formerly Stichting Aids Fonds – STOP AIDS NOW! – Soa Aids Nederland);
- and, furthermore, all that is directly or indirectly related to this or that may be conducive to it.

The foundation tries to achieve its objectives through, among other things:

- advocacy: further developing and stimulating the implementation of national and international AIDS and STI policies;
- fundraising: developing and implementing fundraising activities to finance concrete activities in the field of the national and international response to HIV/AIDS and other STIs;
- use of funds: providing financial support for the activities of organisations in the field of HIV/AIDS and/or STI-related care, prevention and research;

- information: promoting the engagement of Dutch society with people who live with HIV/AIDS and other sexually transmitted diseases and related policies, e.g. through training, counselling and through organising meetings;
- implementation: developing and executing programmes aimed at the public, or specific groups within them, professionals and governments.

## **Registration Chamber of Commerce**

Stichting Aidsfonds – Soa Aids Nederland is registered with the Chamber of Commerce of Amsterdam under number 41207989.

## **Inheritance Act 1956**

Stichting Aidsfonds – Soa Aids Nederland has been designated a Public Benefit Organisation (ANBI) by the Inspector of the Tax and Customs Administration, as referred to in Article 24 (4) of the Inheritance Act 1956 (RSIN 008649273).

## **Contact**

Stichting Aidsfonds – Soa Aids Nederland Condensatorweg 54 1014 AX AMSTERDAM 020-626 26 69

# **B. FINANCIAL STATEMENTS**



# Balance sheet as at 31 December 2019 (after appropriation of result)

(in euros x 1,000)	Notes	31 December 2019	31 December 2018
Assets			
Fixed assets			
Intangible fixed assets	1	362	347
Tangible fixed assets	2	924	1.187
		1,286	1,534
Current assets			
Accounts receivable	3	12,558	7,603
Cash and cash equivalents	4	33,425	33,794
		45,983	41,396
Total assets		47,269	42,930
Liabilities			
Reserves and funds			
Reserves			
Continuity reserve	5	2,893	2,893
Earmarked reserves	6	4,023	5,217
Other reserves	7	2,213	2,007
		9,129	10,117
Funds			
Earmarked funds	8	1,286	1,606
		10,416	11,722
Debts			
Non-current liabilities	9	5,006	680
Current liabilities	10	31,847	30,528
		36,853	31,208

## **Statement of income and expenditure for 2019**

(in euros x 1,000)		Act	ual 2019	Bu	dget 2019		Actual 2018
Income							
Income from private individuals	11		10,110		10,050		10,931
Income from companies	12		17		0		g
Income from lottery organisations	13		3,453		3,450		3,486
Subsidies from governments	14		36,019		37,509		28,410
Income from other non-profit organisations	15		1,490		1,008	_	949
Total income raised			51,089		52,017		43,785
Income in return for the supply of products and/or services	16		107		243		166
Other income	17		1,618		0	_	C
Total income			52,814		52,260		43,950
Expenditures							
Spent on objectives							
Objective 1: Drastic reduction of HIV and other STIs in the Netherlands	18	6,521		5,331		6,203	
Objective 2: Worldwide less than 200,000 new HIV infections	19	18,605		19,339		12,484	
Objective 3: Worldwide all people living with HIV on treatment	20	14,529		15,589		14,075	
Objective 4: A cure for HIV	21	2,089		2,167		1,451	
Objective 5: Awareness, support in society and full funding of the AIDS and STI response	22	8,193		8,551		6,810	
			49,938		50,977		41,022
Cost of fundraising	23		2,764		2,918		2,603
Management and administration costs	24		1,428		1,350		1,406
Total expenditures			54,129		55,245		45,031
Balance of financial income and expenses			-1,316		-2,985		-1,080
Net financial income and expenses	25		9		0		13
Balance of income and expenditure		_	-1,307	_	-2,985	-	-1,068
Appropriation of result							
Addition to/withdrawal from:							
- continuity reserve			0		0		88
- earmarked reserves			-1,194		-2,985		-2,105
- other reserves			206		0		1,161
- earmarked funds		<u> </u>	-319	_	0		-212
			-1,307		-2,985		-1,068

## Cash flow statement for 2019

(in euros x 1,000)		2019	2018
Cash flow from operational activities			
Balance of income and expenses		-1,307	-1,068
Adjustments for:			
- Depreciation	1	269	246
- Movement in reserves and funds		0	-112
- Movements in long-term projects	9	4,326	-1,492
Movements in working capital:			
- Movements in receivables and update in the residual cash flow statement	3	-4,955	-1,767
- Movements in other liabilities, accruals and deferred income	10	1,320	5,773
Total		-347	1,581
Cash flow from investment activities			
Adjustments for:			
Changes in tangible assets	2	118	-24
Changes in intangible assets	1 _	-140	-255
Total		-22	-279
Cash flow from financing activities		0	C
Movements in cash and cash equivalents	- -	-369	1,302
Position cash and cash equivalents 01-01	4	33,794	32,492
Position cash and cash equivalents 31-12	4	33,425	33,794
	_	-369	1,302

The cash flow statement is determined using the indirect method.

The investing activities relate to tangible and intangible fixed assets.

The numbering refers to the notes to the balance sheet as at 31 December 2019.

## **Explanation accounting principles**

## **Translation**

This is a translated version of the Dutch annual accounts. In case of inconsistencies between the Dutch and the English version the Dutch version prevails.

## **Registered address**

Sichting Aidsfonds – Soa Aids Netherland is located at Condensatorweg 54 in Amsterdam. The foundation is listed in the trade register under Chamber of Commerce number 41207989.

#### **Activities**

A multi-year strategic plan has been put together for the period 2018-2021: 'No time to lose – focus, accelerate and increase momentum'. Since 2018, we have been working on the following strategic goals:

Objective 1: Drastic reduction in the 'big 5' STIs and zero new HIV infections in the Netherlands

Objective 2: Worldwide less than 200,000 new HIV infections

Objective 3: Worldwide all people living with HIV on treatment

Objective 4: A cure for HIV

Objective 5: Awareness, support in society and full funding of the AIDS and STI response

The expenditure on the objectives is divided over these five strategic objectives.

## General

The financial statements have been prepared in accordance with Guideline 650 Fundraising Institutions.

The principles applied for the valuation of assets and liabilities and the determination of the result are based on historical costs (acquisition or manufacturing cost). The balance sheet is drawn up after appropriation of the result. References are included in the balance sheet, the statement of income and expenditure and the cash flow statement. These references refer to the explanatory notes.

## Comparison with previous year

The accounting principles used for valuation and determination of results have remained unchanged compared to the previous year.

## Use of estimates

The preparation of the financial statements requires the executive board to make judgments – as well as estimates and assumptions – that affect the application of accounting policies and the reported value of assets and liabilities, and income and expenses. Actual results may differ from these estimates. The estimates and underlying assumptions are continuously assessed. Revisions to estimates are accounted for in the period in which the estimate is revised and in future periods affected by the revision.

## Currency

The annual accounts are drawn up in euros; this is both the functional and the presentation currency of Aidsfonds – Soa Aids Nederland. Transactions in foreign currency during the reporting period are included in the financial statements at the exchange rate on the transaction date. The transactions of the Robert Carr Fund in USD are processed at an average annual exchange rate.

Monetary assets and liabilities in foreign currency are converted into the functional currency at the exchange rate on the balance sheet date. The exchange differences resulting from processing and conversion are credited or debited to the statement of income and expenditure. There are no non-monetary assets in foreign currency.

## Continuity

These financial statements have been prepared on the assumption of going concern.

## Covid-19

There is no material uncertainty about the company's ability to continue its operations, although the impact of Covid-19 is expected to be significant, albeit uncertain. For example, with regard to future performance, the activities of our organisation and the performance of our partners abroad.

The management has taken measures to deal with the COVID-19 events and uncertainties, by making it possible to work from home.

The current liquidity available to the company is sufficient to meet its obligations and to finance its ongoing activities.

See further notes on Events after the balance sheet date.

## Principles for the valuation of assets and liabilities

Unless otherwise stated, assets and liabilities are included at purchase price. Corporate buildings and other fixed assets are valued at purchase value, minus linear depreciation based on the estimated economic life of the asset.

## Impairment losses of fixed assets

The Foundation assesses at each balance sheet date whether there are indications that a fixed asset may be subject to an impairment. If such indications exist, the realisable value of the asset is determined. If it is not possible to determine the recoverable amount of the individual asset, the recoverable amount of the cashgenerating unit to which the asset belongs is determined.

An impairment loss applies if the book value of an asset is higher than the realisable value; the recoverable amount is the higher of its net realisable value and its value in use. An impairment loss is accounted for directly as an expense in the statement of income and expense, while simultaneously reducing the carrying amount of the asset concerned.

## Valuation of inheritances

Inheritance income is recognised in the financial year in which the amount can be reliably determined.

## **Financial instruments**

Aidsfonds – Soa Aids Nederland does not use complex financial instruments. Financial instruments only include receivables, cash and cash equivalents, creditors and other payables. They are processed at fair value upon initial recording. After the initial recording, financial instruments are valued in the manner described below. The fair value approximates the book value.

The interest and cash flow risks are extremely limited. The foundation has no interest-bearing long-term debt.

The credit risks are also extremely limited. All cash and cash equivalents are managed at so-called systemic banks in the Netherlands.

Upon initial recording, receivables are assessed at the fair value of the service/assests received.

Cash and cash equivalents consist of cash and bank balances with a term of less than twelve months. Cash and cash equivalents are valued at nominal value.

## Policy continuity reserve and equalisation reserve

Effective and efficient use of resources is central to financial policy. In addition, it is necessary to maintain capital in order to guarantee the continuity of the organisation. This concerns both the obligations towards personnel and operations and the need to continue the financial contributions to third parties.

Based on developments in 2020, the size of the reserve will once again be determined for the Aidsfonds brand on the basis of a risk assessment. For 2019, the continuity reserve is unchanged from the position at the beginning of 2019 and totals € 2,893,000 at the end of 2019.

The continuity reserve may – in accordance with 'Guidelines Financial Management of Charities' outlined by 'Goede Doelen Nederland' and included in the CBF regulations – amount to a maximum of 1.5 times the operating costs of the organisation: € 22.0 million. The current continuity reserve falls well within this maximum.

For the brand Soa Aids Nederland an equalisation reserve of a maximum of 10 percent of the annual costs is allowed by the subsidy provider, the RIVM. This is included as an earmarked fund. In 2019, a withdrawal of € 88,000 was made, bringing the equalisation to € 139,000.

The income of Aidsfonds comes from multiple sources; Aidsfonds receives substantial income from various forms of fundraising. In addition, the brands receive funds from Dutch and foreign governments and from private funds, including lotteries. Due to this distribution of income sources, the risk that all income is lost at the same time is limited.

#### Reserves and funds

The limited possibility to use the earmarked reserves has been determined by the executive board and does not constitute an obligation, the executive board may lift this restriction.

Earmarked funds relate to funds obtained with a specific purpose indicated by third parties.

## **Provisions**

Provisions are formed for legally enforceable or constructive obligations that exist at the balance sheet date, where it is probable that an outflow of resources is necessary and the size of which can be reliably estimated. Provisions are valued at the best estimate of the amounts needed to settle the liabilities on the balance sheet date. Provisions are stated at the nominal value of the expenditures expected to be necessary to settle the liabilities, unless stated otherwise.

## **Debts**

Non-current liabilities are valued at fair value upon initial processing. Current liabilities are valued at face value on initial processing.

Transaction costs that are directly attributable to the acquisition of the debts are included in the valuation at initial processing. If necessary, debts are valued after initial processing at amortised cost, i.e. the amount received taking into account premium or discount and after deduction of transaction costs. The difference between the determined book value and the final redemption value is accounted for as interest expense in the statement of income and expenses on the basis of the effective interest during the estimated term of the debts.

## Principles for determining the result

#### General

The result is determined as the difference between the realisable value of the services provided and the costs and other charges for the year. The proceeds from transactions are recognised in the year in which they were realised. The foundation does not generate long-term structural own income. Government grants are always awarded for a period of several years, and in this sense can be considered structural. The fixed contributions from lottery organisations are also always awarded for a period of several years; the foundation also receives incidental additional contributions. Income from private individuals is partly structural, based on long-term debt collection commitments. Other income from private individuals, including income from inheritances, and from non-profit companies and organisations are largely incidental in nature.

## **Subsidies received**

Subsidies received are accounted for as income in the statement of income and expenditure in the year in which the subsidised costs were incurred.

## **Subsidies granted**

Aidsfonds – Soa Aids Nederland grants subsidies with funds received from donors (fundraising proceeds) and from lottery organisations. Grants awarded are included as costs in the statement of income and expenditure at the time the subsidy obligation is entered into, provided that the Foundation has actually received the funds intended for this purpose from donors, lotteries and other financiers.

In practice, this means that subsidy obligations are only entered into if there is sufficient certainty that the necessary funds will be received from donors and lotteries.

In its role as fund manager of the Robert Carr Civil Society Network Fund (RCF), Aidsfonds – Soa Aids Nederland makes financial contributions to international networks. On the basis of financial commitments from the funders (donors) of RCF, the Foundation enters into provisional obligations with grantees (subsidy recipients), subject to the actual receipt of the funds from the funders. The commitments entered into towards the grantees are therefore only recorded as costs when the financial resources of the RCF funders have been received.

## Financial transfers from government-funded international programmes

Aidsfonds – Soa Aids Nederland carries out a number of multi-year international programmes that are fully or largely financed by governments, including strategic partnerships with the Ministry of Foreign Affairs. To this end, long-term agreements regarding objectives and financing have been made between Aidsfonds – Soa Aids Nederland and the relevant governments.

For the implementation of these programmes, the Foundation concludes multi-year contracts with cooperation partners, including agreements regarding financial transfers from Aidsfonds – Soa Aids Nederland to these partners. These financial transfers are included as costs in the statement of income and expenditure at the moment that actual advances are made from Aidsfonds – Soa Aids Nederland to the partner organisations and the advance has been made by the relevant government to Aidsfonds – Soa Aids Nederland.

#### Cost allocation

Costs are allocated to the objective, fundraising income, and management and administration costs based on the following measures:

- directly attributable costs are allocated directly;
- the execution costs of our own organisation are allocated by means of the time sheet linked to an integral hourly rate.

## Indirect costs of our own organisation

Indirect costs of our own organisation include personnel costs, housing costs, office and general costs, including depreciation. The distribution of the indirect costs of our own organisation among the programmes and projects takes place on the basis of the actual written hours on the relevant programmes and projects.

## **Employee benefits**

Employee benefits (wages, social security charges, etc.) do not constitute a separate line in the statement of income and expenditure. These costs are included in other parts of the statement of income and expenditure. Wages, salaries and social security contributions are processed in the statement of income and expenditure on the grounds of the terms of employment insofar as they are payable to employees or the tax authority.

The pension scheme of Aidsfonds – Soa Aids Nederland is administered by Pensioenfonds Zorg en Welzijn. The contributions are accounted for as personnel costs as soon as they are due. Prepaid contributions are accounted for as prepayments if this leads to a refund or a reduction in future payments. Contributions that have not yet been paid are included in the balance sheet as a liability. Apart from the premium payments, there are no other liabilities.

## Management and administration costs

Management and administration costs are the costs incurred by the organisation within the framework of the (internal) management and administration and which are not allocated to the objective or the acquisition of income. Goede Doelen Nederland has drawn up recommendations for the allocation of these costs. Aidsfonds Soa Aids Netherland follows these recommendations and has included the following components in the item management and administration costs:

- Management: execution costs of the directors and managers, in so far as they have not been implemented directly within the framework of the objective, in accordance with the timesheets.
- Operational management: execution costs of the Services team (facility management, events organisation), insofar as they were not carried out directly as part of the objective, in accordance with the timesheets,
- Finances / controlling, in accordance with the timesheets.

The organisation strives to limit the cost of management and administration to between 3% and 6% of the total costs.

The indirect costs of the Human Resources, Automation, Documentation and Quality & Learning departments are allocated to the objective, to the acquisition of income and to management and administration, in proportion to the staffing of each department.

## Rental and/or lease contracts

Rental and/or lease contracts may exist where a large part of the advantaged and disadvantages associated with ownership do not lie with the organisation. These contracts are accounted for as rental or operational leasing. Rental and lease payments, taking into account reimbursements received from the lessor, are accounted for on a linear basis in the statement of income and expenses over the term of the contract.

## Financial income and expenditures

## Interest income and interest expense

Interest income and interest expense are accounted for on a accrual basis, taking into account the effective interest rate of the assets and liabilities concerned.

## **Exchange rate differences**

Exchange differences that occur when settling or converting monetary items are accounted for in the statement of income and expenditure in the period that they arise. Funds are also managed and administered in US dollars for the Robert Carr Fund. The assets and liabilities are valued in euros at the rate on the balance sheet date, the income and expenses are valued at the average rate for the year. The (un)realised exchange rate result is included in the statement of income and expenditure.

## Fundraising costs and costs for awareness

For Aidsfonds – Soa Aids Nederland, social knowledge about AIDS and the realisation of social involvement are important conditions for achieving the objective. For this reason, fundraising activities pay attention to this. When formulating the 2018-2021 strategy and drawing up the 2019 budget, the Awareness Objective has become part of the new strategic objective 'Awareness, support and full funding for the AIDS and STI response'. The approach to our fundraising has also changed. When drawing up the strategy, the allocation percentage for the 2018 budget has therefore been re-evaluated by the executive board and 31% percent of the costs involved in private fundraising are classified as costs under the objective. This percentage has remained unchanged in the 2019 budget and the 2019 financial statements.

## Notes to the cash flow statement

The cash flow statement has been prepared using the indirect method. The funds in the cash flow statement consists of the cash and cash equivalents. Cash flows in foreign currency have been converted at an estimated average exchange rate. Interest income and expenditure are included under cash flow from operating activities.

## Notes to the balance sheet as at 31 December 2019

(in euros x 1,000)

1	intangible	пхеа	assets
	Mutations	in the	intangih

Mutations in the intangible fixed assets can be shown as follows:

	Value 1 Jan.	Investment	Depreciation	Divestment	Value 31 Dec.
Software					
2019	347	140	-125	0	362
2018	196	255	-103	0	347

## Tangible fixed assets

Mutations in the tangible fixed assets can be shown as follows:

	Value 1 Jan.	Investment	Depreciation	Divestment	Value 31 Dec.
Buildings	977	0	-21	-955	0
Interior design	135	848	-69	-106	809
Inventory	36	1	-13	-25	0
Hardware	39	119	-42	0	116
2019	1,187	969	-145	-1,086	925
2018	1,305	24	-143	0	1,187

## **Depreciation periods**

Hardware Buildings Interior design Software 50 years and inventory 5 years 3 years

7 years

The tangible and intangible fixed assets exclusively concern assets intended for business operations. The buildings were part of the resources of the Aidsfonds - Soa Aids Netherland and were sold in 2019; in 2019, the Aidsfonds - Soa Aids Nederkand moved to a rented property on Condensatorweg. The renovation and furnishing of the new rental property have been capitalised as an investment. At each balance sheet date, the foundation assesses whether there are indications that a fixed asset may be subject to impairment. If such indications are present, the realisable value of the asset is determined. The foundation has established that there are no impairments on the balance sheet date.

## Accounts receivable

	31-12-2019	31-12-2018
Lottery organisations	2,510	2,542
Inheritances and legacies	1,931	1,807
Receivables on project grants	1,227	1,888
Interest receivable	1	101
Account receivables	121	422
Prepaid expenses	6,655	607
Pension contributions	98	93
Other	16	143
	12,558	7,603

The receivables have a term of less than a year.

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# 4 Cash and cash equivalents 31-12-2019 31-12-2018 ING accounts (incl. US dollar account Robert Carr Fund) 11,708 5,536 ING savings accounts 1,324 7,952 ABN AMRO savings accounts 20,384 20,280

The management of financial resources is risk-averse. Minimising risk means that when saving and/or investing, the principal amount must be kept to a minimum and the risks must be spread. The financial resources are not invested in equities, corporate bonds, government bonds and real estate. Only bank accounts, savings accounts and deposits are used. For reasons of risk-spreading, the funds are placed with at least two banks. When choosing a bank, we weigh up the returns, risks and responsible banking.

The balance of the Robert Carr Fund in US dollars has been converted to euro at the exchange rate on the balance sheet date. All cash and cash equivalents are at the organisation's free disposal.

Collection money in safe and cash

Reserves				
	Balance as at 1 January	Additions	Withdrawals	Balance as at 31 December
Continuity reserve	2,893	0	0	2,893
Earmarked reserves	5,217	3,249	-4,443	4,023
Other reserves	2,007	206	0	2,213
2019	10,117	3,455	-4,443	9,129
2018	10,972	3,236	-4,092	10,117
Continuity reserve				
	Balance as at 1 January	Additions	Withdrawals	Balance as at 31 December
2019	2,893	0	0	2,893
2018	2,805	88	0	2,893

Effective and efficient use of resources is central to financial policy. In addition, it is necessary to maintain capital to ensure the continuity of the organisation. This concerns both the obligations with regard to personnel and operations and the need to continue contributions to third parties.

Based on developments in 2020, the size of the reserve will once again be determined for the Aidsfonds brand on the basis of a risk assessment. The continuity reserve for 2019 is unchanged from the position at the beginning of 2019 and amounts to  $\in$  2,893,000 at the end of 2019. For the Soa Aids Nederland brand, an equalisation reserve of up to 10 percent of the annual costs is permitted by the subsidiser, the RIVM. This is included as an earmarked fund. In 2019, there was a withdrawal of  $\in$  88,000, bringing the reserve to  $\in$  139,000.

The continuity reserve may not exceed 1.5 times the costs of the work organisation (execution costs + acquisitions and acquisitions for fundraising), in accordance with the Guideline 'Financial Management of Charities' of Goede Doelen Nederland, included in the CBF regulations: € 22.0 million. The current continuity reserve falls well within this maximum.

27

33,794

33,425

#### Earmarked reserves Balance as at Additions/ Withdrawals Balance as at 31 December 1 January amount released Information material 31 0 -31 Provision of financial contributions and grants -2.504 3,720 2,988 3,236 Big Data project ZOOM 91 0 -75 16 Awarded projects STOP AIDS NOW! within the framework of the Investment Fund -840 287 1,114 13 Reserve financing for business operations 993 -993 0 0 2019 5,217 2,256 -3,450 4,023 2018 7,322 1,896 -4,001 5,217

There is no obligation on the above designated reserves. The limited spending option has been implemented by the board.

## Information material

This reserve has been used for the production of information material (reprint and digital).

## Provision of financial contributions and subsidies

The board has formed this earmarked reserve for various spending purposes for a total amount of  $\in$  3.7 million. Of this,  $\in$  3.5 million is earmarked for the five objectives and  $\in$  200,000 for a long-term marketing strategy.

#### Big Data project ZOOM

This reserve has been created for the Big Data Project ZOOM.

## Investment fund STOP AIDS NOW! and awarded projects

When the brands Aidsfonds and STOP AIDS NOW! were merged into Aidsfonds, the Investment Fund STOP AIDS NOW! was converted into earmarked reserves for projects aimed at young people and young women in developing countries. A total of € 1.7 million was allocated to the following projects: TAFU (Uganda – now TAFU2), FTT4000 (Zimbabwe – was TAFZ) and HE Kenya (was Victoria Lake project). The Linking & Learning project was added in 2019 (a project linking all children's projects in the various countries). As of 31 December 2019, the total available balance for these projects is still € 287,000.

## Reserve financing for business operations

This reserve has been formed in connection with the office building owned by the foundation. After sale in 2019, the reserve was reduced to 0.

7	Other reserves				
		Balance as at 1 January	Amount V	Vithdrawals Ba 31	alance as at December
	2019	2,007	206	0	2,213
	2018	845	1 252	-91	2 007

The addition to the other reserve concerns the balance of freely disposable resources that have not yet been earmarked.

## 8 Earmarked funds

	Balance as at 1 January	Amount released	Withdrawals	Balance as at 31 December
Equalisation reserver VWS/RIVM	199	28	-87	139
HIV response in developing countries	13	0	-13	0
MaxART II (Early Access to ART for All)	39	0	-39	0
HIV alert phase in Eastern Europe and Central Asia	152	0	-146	6
Bill & Melinda Gates Foundation Strengthen and sustain Dutch engagement ODA for Health	63	167	-160	70
Robert Carr Fund	1,042	0	0	1,042
Brave Fight Against AIDS (Dappere strijd tegen Aids) (NPL)	0	5	-5	0
Project to be completed in consultation	0	4	0	4
A Cure for HIV fund (HIV Genezing Fonds) / Next Generation	0	25	0	25
AmsterdamDiner 2012 (HIV & Livelyhoods)	5	0	-5	0
AmsterdamDiner 2018	92	0	-92	0
Plonsfonds	1	0	-1	0
2019	1,606	229	-548	1,286
2018	1,817	1,516	-1,728	1,606

The limited spending capacity of the funds has been indicated by third parties.

## Equalisation reserve VWS/RIVM

The equalisation reserve concerns funds from the institutional subsidy for the programmes of Soa Aids Nederland that have not yet been spent. This is intended to compensate for differences between actual costs incurred and subsidy amounts. The equalisation reserve is a buffer, with which deficits in one year can be made up with surpluses in the other year.

#### HIV response in developing countries

The funds from this fund from earmarked donations from donors of STOP AIDS NOW! were used in 2019 for project ART for children in Uganda.

## MaxART II (Early Access to ART for All)

The National Postcode Lottery has allocated € 2.0 million to the MaxArt II project, Early Access to ART for All. This project started on 1 July 2014 and ended in 2018. The remaining balance was transferred to funds for the HIV Self test in 2019 in consultation with the National Postcode Lottery.

## HIV alert phase in Eastern Europe and Central Asia

The National Postcode Lottery has allocated more than  $\in$  1.0 million to the HIV Alert Phase project in Eastern Europe and Central Asia. After spending  $\in$  146,000 in 2019,  $\in$  6,000 remains in this fund as at 31 December 2019.

## Project Bill & Melinda Gates Foundation

The Bill and Melinda Gates Foundation made  $\in$  167,000 available in 2019 for the Strengthen and sustain Dutch engagement ODA for Health project, and  $\in$  160,000 was spent in 2019. It is a multi-year project that started in 2018.

## Robert Carr Fund

A designated fund has been created to transfer the balance of the 2016-2018 phase for the next 2019-2021 phase. Expenditure will take place in the 2019-2021 phase.

## Brave fight against AIDS

This fund was set up with a financial contribution from the National Postcode Lottery for the long-term response to the AIDS epidemic in Russia.

## Project to be completed in consultation

This earmarked fund consists of an earmarked gift, whereby the expenditure is still to be determined in consultation with the donor.

## A Cure for HIV fund (HIV Genezing Fonds) / Next Generation

This earmarked fund is created from an earmarked donation for research into a cure for HIV.

## AmsterdamDiner 2012

The proceeds from the AmsterdamDiner 2012 will go to an HIV & Livelihoods project in Ethiopia. This project has ended. The remaining balance has been added to the earmarked reserve for HIV Self Testing & Quality.

## AmsterdamDiner 2018

A earmarked fund has been created for the amount that had not yet been spent in 2018. Expenditure took place in 2019. The proceeds from the Amsterdam Diner 2018 were intended for Proud Partner contributions, Healthy Entrepreneurs, Emergency Support Fund (in collaboration with Elton John AIDS Foundation), High Risk High Gain Research and further scientific research.

# Non-current liabilities 31-12-2019 31-12-2018 Committed financial contributions 2-5 years 3,491 680 Grants received in advance for 2-5 years 1,515 0 Committed financial contributions > 5 years 0 0 5,006 680

Non-current liabilities include liabilities for longer than a year.

No obligations have been entered into for a period longer than 5 years. There are no significant contractual provisions that affect the amount, timing, or degree of certainty of future cash flows.

The financial contribution commitments relate to multi-year projects, in particular (scientific) research.

10	Current liabilities		
		31-12-2019	31-12-2018
	Committed financial contributions and grants	4,951	7,834
	Subsidies received in advance	23,760	18,515
	Creditors	1,199	1,144
	Personnel expenses	604	714
	Taxes – Wage tax	582	635
	Taxes – VAT	84	61
	Other current liabilities and accruals and deferred income	667	1,625
		31,847	30,528

Current liabilities include liabilities with a term of less than one year.

The increase in current liabilities is mainly due to more subsidies received in advance, invoices still to be received for project costs and the creditor balance.

Personnel expenses include all related liabilities, including social security charges, reserves for holiday pay and days off.

Subsi	aies	recei	vea i	ın aav	/ance

PITCH-Project	4,755	5,214
BTGII-Project	9,973	5,206
GUSO-Project	158	366
Robert Carr Fund	7,362	7,269
Hands Off!-Project	584	192
Brave fight against AIDS (Dappere strijd tegen Aids) (NPL) short term	529	0
Other projects	400	269
	23,760	18,515

In 2019, the Ministry of Foreign Trade and Development Cooperation received subsidies in advance for Bridging the Gaps II, PITCH, GUSO, Hands Off! and Robert Carr Fund. For the latter, grants have also been received in advance from Department for International Development (DFID), NORAD, WHO and the Bill & Melinda Gates Foundation. These subsidies will be spent in 2020. The National Postcode Lottery has received a financial contribution for the Dappere Strijd Tegen Aids programme; of the € 2,050,000 received, € 5,000 was spent and reported as income, the remaining € 2,045,000 is a subsidy received in advance.

## Off-balance sheet commitments

	Total	< 1 year	2-5 years	> 5 years
Rent real estate (business operations)	1,740	409	1,331	0
Rental of printers/copiers	61	13	48	0
Multi-year financial obligations	1,801	422	1,379	0
Financial contributions granted subject to change	0	0	0	0
Contingent liabilities	0	0	0	0
As per 31 December 2019	1,801	422	1,379	0

The foundation moved in 2019. The rent for three office buildings on the Keizers- and Prinsengracht (Keizersgracht 390-392 and Prinsengracht 515) has been cancelled as of November 30, 2019, the current office building at Condensatorweg 54 in Amsterdam will be rented as of 1 April 1 2019. The lease for the office on Condensatorweg runs for 5 years until 31 March 2024. After this 5-year period, the lease can be extended for successive periods of 5 years each. The rental price (including advance payment of service costs) is € 102,341 per quarter. A bank guarantee has been issued for the rent on Condensatorweg for this quarterly amount of € 102,341. As of September 25, 2019, the foundation has a new lease with a supplier of printers and copiers with a term of 5 years.

During the year under review, the profit and loss account included:

Total	€ 569.990
Rental of printers/copiers (incl. overlapping period during relocation)	€ 62,503
Rental of real estate (incl. overlapping period during relocation)	€ 507,487

#### **Subsequent events**

The COVID-19 outbreak has developed increadibly rapidly in 2020. Measures taken by various governments to curtail the virus have had negative effects on economic activity. We have taken a number of measures to monitor and prevent the effects of COVID-19, such as safety and health measures for our employees (such as limiting social contacts and working from home). At this stage, the implications for our operations and our results are limited. We are in close contact with our subsidisers/donors about the consequences that the Coronavirus may have on our side and on their side. We also guide our partners in the best possible way regarding what they are facing and we are looking into what measures are being taken in their countries, and what impact this has on our results. In any case, we will continue to follow the policies and advice of the various national institutions, while at the same time doing our utmost to continue our activities in the best and safest way possible without endangering the health of our employees and our partners.

## Impact on the programmes funded by the Ministry of Foreign Affairs and RIVM

We are in close contact with our subsidy providers/donors about the consequences of the outbreak that may arise on both our side and theirs. We also guide our collaboration partners as best we can in the situations they are facing and we are looking to see if and how measures taken in their countries will have an impact on our results.

- Aidsfonds has a multi-year subsidy relationship with the Ministry of Foreign Affairs regarding the financing of the strategic partnerships 2016 2020. The amounts for 2020 have already been obtained through the grant decision. A grant decision has also been received from the RIVM for the period 2020. An important addition to this is that these subsidies will not be settled until after the end of the 2020 fiscal year. The actual costs of the relevant projects will be financed. An amount of € 35.0 million is available for 2020.
- A grant decision of € 3.4 million was received from the RIVM for the period 2020.

## Impact on the income from private donors

We will not see more cancellations from donors than usual in 2020. In 2020, we are not seeing more cancellations among private donors than usual. At the same time, we do not see any decline in income from inheritances. We therefore expect that the income from private donors will amount to  $\in$  10.0 million.

## Impact on income from lotteries

Aidsfonds is a long-term beneficiary of the National Postcode Lottery (NPL). On the basis of a multi-year agreement, Aidsfonds will receive a fixed contribution of € 2.3 million up to and including 2020. There is no reason for the NPL not to pay this contribution.

## Impact on costs

The organisational costs and long-term obligations are mainly the rent commitments and the staff costs. The staff costs primarily consist of permanent staff based on the projects carried out by Aidsfonds. Funding for partners is provisional on the condition that Aidsfonds also receives funding for the relevant programmes.

## Impact on the financial position and liquidity

We do not expect any problems with regard to our liquidity position in 2020.

In the first quarter of 2020, an advance payment to finance the programmes was also received, bringing the liquidity position to a total of over € 30 million at the end of March.

## Notes to the statement of income and expenditure for 2019

(in euros x 1,000)

For the distinction between the Aidsfonds and Soa Aids Nederland brands, see Annex 1

		Actual 2019	Budget 2019	Actual 2018
11	Income from private individuals	<del></del>		
	Donations and gifts	8,484	8,950	8,658
	Inheritances	1,626	1,100	2,272
	Totaal	10,110	10,050	10,931
	The income of private individuals relates mainly to donations from donors. The incoin which the amount can be reliably determined.	ome from inheritances i	s taken in the fina	ncial year
	Earmarked income from private individuals:			
	Objective 1: Drastic reduction in the 'big 5' STIs and zero new HIV infections in the Netherlands	12		41
	Objective 2: Worldwide less than 200,000 new HIV infections	146		583
	Objective 3: Worldwide all people living with HIV on treatment	0		75
	Objective 4: A cure for HIV	65		243
	Objective 5: Awareness, support in society and full funding of the AIDS and STI response	0		0
		223		942
12	Income from companies			
	Sponsors	17	0	9
	Earmarked income companies for projects Soa Aids Nederland			
	Diverse projecten Soa Aids Nederland	17	0	9
	The earmarked income are spent as earmarked in 2019.			
13	Income from lottery organisations			
	VriendenLoterij earmarked Aidsfonds	792	900	893
	VriendenLoterij Vriendenfonds Aidsfonds	2	0	0
	Subtotal VriendenLoterij	794	900	893
	National Postcode Lottery Aidsfonds	2,250	2,250	2,250
	National Postcode Lottery Aidsfonds (projects)	15	0	0
	Subtotal Nationale Postcode Loterij	2,265	2,250	2,250
	Stichting Loterijacties Volksgezondheid (SLV)	394	300	297
	SLV (Fonds Bijzondere Uitkering)	0	0	46
	Subtotal SLV	394	300	343

The regular contribution from the National Postcode Lottery is  $\in$  2,250,000 and a small contribution 'De Kluis' of  $\in$  10,000. Of the additional National Postcode Lottery contribution for the 'Brave fight against AIDs' project for  $\in$  2,050,000,  $\in$  5,000 was used in 2019, the remaining  $\in$  2,045,000 will be used after 2019 and is accounted for under income received in advance.

	Actual 2019	Budget 2019	Actual 2018
Subsidies from governments			
RIVM institutional subsidy	3,519	3,157	3,251
Ministry of Foreign Affairs	21,933	23,258	19,675
Robert Carr civil society Networks Fund	10,338	10,505	4,134
DREAMS Innovation Challenge	0	0	269
Other government subsidies	230	589	1,082
	36,019	37,509	28,410
The Robert Carr Fund (RCF) is funded by the following governments:			
Norwegian Agency for Development Cooperation (NORAD)	1,645		623
Department for International Development (DFID)	1,690		1,127
Development cooperation (Ontwikkelingssamenwerking)	1,750		0
UNAIDS / PEPFAR	4,126		2,384
Received in 2019	9,211	10,505	4,134
Of which received in advance:	-7,362		
Revenue received in 2019 and accounted for in 2019:	1,849		

The difference between the amounts received from RCF (€ 9.2 million) and the income for RCF (€ 10.3 million) as included in the note above is due to the fact that the income is on an accrual basis while the presentation here is on a cash basis. has been prepared. The RCF's revenue from the above governments is as follows: NORAD \$ 1,845,000, DFID \$ 1,896,000, WHO UN AIDS \$ 4,630,000, and MBH&O € 1,750,000. This concerns receipts for multi-annual programmes, part of which is booked as income received in advance.

Income from other non-profit organisations			
Appropriated income of other non-profit organisations relates to:			
Elton John AIDS Foundation	425	0	61
Bill & Melinda Gates Foundation – ODA for Health – Aidsfonds	167	0	0
Amsterdam Dinner Foundation – Aidsfonds	540	500	459
New Venture Fund	66	0	31
Stichting Life Science Health	29	0	115
AIGHD – SANL	241	0	171
Terrence Higgins Trust	0	0	18
Other income from various organisations	22	508	94
Total income from organisations	1,490	1,008	949

The earmarked income from the Bill and Melinda Gates Foundation will be spent in the period 2019 to 2020.

The contribution from the Elton John aids Foundation concerns the Emergency Support Fund and will be spent in 2019.

In 2019, the contribution of the Amsterdam Diner Foundation was used for Scientific Research, Healthy Entrepreneurs Kenya and the Proud Partners project.

The contribution of the Life Science Health Foundation concerns the ZOOM project. This project already ended in 2018, but a (budget neutral) extension had been granted until mid-2019.

The contributions of AIGHD concern various projects of the brand Soa Aids Nederland and were spent in 2019.

The other earmarked income of various organisations was spent in 2019.

16	Income in return for the supply of products and/or services			
	Information material	34	0	42
	Training, workshops, congress and miscellaneous	73	243	123
		107	243	166

The income from information materials mainly concerns activities of the SANL programme. The benefits for training, workshops and congresses mainly concern national activities of various programmes, including reimbursements for workshops during the annual National Congress on STI\*HIV\*sex.

		Actual 2019	Budget 2019	Actual 2018
17	Other income			
	Sale of property - Sales value 2,573			
	- Minus: balance sheet value after depreciation up to and including Q3 -955			
	Net result on sale of property	1,618		
	The other income results from the sale of the property on Keizersgracht.			
18	Objective 1: Drastic reduction of HIV and STIs in the Netherlands			
	Financial contributions to third parties	1,957	1,060	1,479
	Direct costs	1,186	1,175	1,314
	Execution costs of our organisation	3,378	3,096	3,410
	- -	6,521	5,331	6,203
	The costs and financial contributions within the goal 'Drastic reduction of HIV and STIs i programmes SANL, Policy and Subsidies National (Beleid en Subsidies Nationaal) and Yo		relate to the nati	onal
19	Objective 2: Worldwide less than 200,000 new HIV infections	14 700	15 152	0.003
	Financial contributions to third parties	14,700	15,152	8,983
	Direct costs	1,805	2,173	1,168
	Execution costs for our own organisation	2,101 18,606	2,014 <b>19,339</b>	2,333 <b>12,484</b>
	The costs and financial contributions incurred to achieve this objective relate to all inte	rnational programr	mes of the Aidsfo	nds brand.
20	Objective 3: Worldwide all people living with HIV on treatment  Financial contributions to third parties	11.834	12.161	10.046
20	Financial contributions to third parties	11,834 677	12,161	10,046 1,483
20	Financial contributions to third parties  Direct costs	677	1,369	1,483
20	Financial contributions to third parties	•	·	1,483 2,545
20	Financial contributions to third parties  Direct costs	677 2,018 <b>14,529</b>	1,369 2,059 <b>15,589</b>	1,483 2,545 <b>14,075</b>
20	Financial contributions to third parties  Direct costs  Execution costs for our own organisation	677 2,018 <b>14,529</b>	1,369 2,059 <b>15,589</b>	1,483 2,545 <b>14,075</b>
	Financial contributions to third parties  Direct costs  Execution costs for our own organisation   The costs and financial contributions incurred to achieve this objective relate to all inte	677 2,018 <b>14,529</b>	1,369 2,059 <b>15,589</b>	1,483 2,545 <b>14,075</b>
	Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all inte	677 2,018 <b>14,529</b> rnational programn	1,369 2,059 <b>15,589</b> nes of the Aidsfo	1,483 2,545 <b>14,075</b> nds brand.
	Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all inte	677 2,018 <b>14,529</b> rnational programn	1,369 2,059 <b>15,589</b> nes of the Aidsfo	1,483 2,545 <b>14,075</b> nds brand.
	Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all inte  Objective 4: A cure for HIV  Financial contributions to third parties  Direct costs	677 2,018 <b>14,529</b> rnational programs 1,698 2	1,369 2,059 15,589 mes of the Aidsfo 1,701 60	1,483 2,545 <b>14,075</b> nds brand. 1,131 148 172
	Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all inte  Objective 4: A cure for HIV  Financial contributions to third parties  Direct costs	1,698 2,089	1,369 2,059 15,589 nes of the Aidsfo 1,701 60 406 2,167	1,483 2,545 <b>14,075</b> nds brand. 1,131 148 172 <b>1,451</b>
	Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all inte  Objective 4: A cure for HIV  Financial contributions to third parties  Direct costs  Execution costs for our own organisation	2,018 14,529  rnational programm 1,698 2 389 2,089	1,369 2,059 15,589 nes of the Aidsfo 1,701 60 406 2,167	1,483 2,545 <b>14,075</b> nds brand. 1,131 148 172 <b>1,451</b>
21	Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all inte  Objective 4: A cure for HIV  Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all inter  The costs and financial contributions incurred to achieve this objective relate to all inter	2,018 14,529  rnational programm 1,698 2 389 2,089	1,369 2,059 15,589 nes of the Aidsfo 1,701 60 406 2,167	1,483 2,545 <b>14,075</b> nds brand. 1,131 148 172 <b>1,451</b>
21	Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all interest of the costs and financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all interest objective 5: Awareness, support in society and full funding of the AIDS and STI responses.	677 2,018 14,529  rnational programm 1,698 2 389 2,089  rnational programm	1,369 2,059 15,589 nes of the Aidsfo 1,701 60 406 2,167 nes of the Aidsfor	1,483 2,545 <b>14,075</b> nds brand. 1,131 148 172 <b>1,451</b> nds brand.
21	Financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all interest of the costs and financial contributions to third parties  Direct costs  Execution costs for our own organisation  The costs and financial contributions incurred to achieve this objective relate to all interest objective 5: Awareness, support in society and full funding of the AIDS and STI resp. Financial contributions to third parties	2,018 14,529  rnational programm 1,698 2 389 2,089  rnational programm	1,369 2,059 15,589 nes of the Aidsfo 1,701 60 406 2,167 nes of the Aidsfor	1,483 2,545 14,075 nds brand. 1,131 148 172 1,451 nds brand.

The costs and financial contributions incurred to achieve this objective relate to all international programmes of the Aidsfonds brand.

		Actual 2019	Budget 2019	Actua 2018
Cost	t of fundraising			
Direc	ect costs	1,994	2,024	1,836
Exec	cution costs for own organization	770	894	767
		2,764	2,918	2,603
	concerns marketing activities aimed at fundraising. The costs are nscious choice in the use of certain fundraising methods.	considerably lower than budgeted, c	ue to tight cost c	ontrol and
Belo	ow is the ratio of the fundraising costs in relation to the benefits fro	om fundraising raised:		
Total	al benefits from fundraising	52,814	52,260	43,950
Fund	draising costs	2,764	2,918	2,603
Ratio	o of recruitment costs	5,2%	5,6%	5,9%
Mana	nagement and administration costs			
	nagement and administration costs rect costs for our own organisation	1,428	1,350	1,406
Indire		1,428	1,350	1,406
Indire Ratio	rect costs for our own organisation	,	1,350	1,406
Indire Ratio	rect costs for our own organisation  o management and administration	,	1,350 55,245	1,406 45,031
Ratio The r	rect costs for our own organisation  o management and administration ratio of cost management and administration in relation to total e	xpenses is shown below:	·	·

Financial income and expenses relate to realised foreign exchange differences and interest income. Interest income arises because cash is placed in savings accounts at market-related interest rates. No cash is invested. The net result of financial income and expenses over the past 5 years is:

	2019	2018	2017	2016	2015			
	9	13	583	-44	351			
Expenditure ratio								
The ratio of expenditure to the objective in relation to the total income is shown as a percentage below:								
Total income			52,814	52,260	43,950			
Total expenditures on the objective			49,938	50,977	41,022			
Expenditures ratio			94,6%	97,5%	93,3%			
The ratio of expenditure to the objective in relation to	o the total income	is shown as a pe	ercentage below.	:				
Total expenses			54,129	55,245	45,031			
Total expenditures on the objective			49,938	50,977	41,022			
Expenditures ratio			92,3%	92,3%	91,1%			

25 Net financial income and expenses

Realised foreign currency result

Unrealised foreign exchange result

Interest

-135

## **Notes cost allocation**

(in euros x 1,000)

## Specification and distribution of costs by goal

	reduction	200,000 new HIV infec-	3. Worldwide all people living with HIV on treatment	4. A cure for HIV	5. Awareness, support in society and full funding of the AIDS and STI response	Cost of fundraising	Manage- ment and Administra- tion	Total 2019	Budget 2019	Total 2018
Subsidies and contributions	1,957	14,700	11,834	1,698	2,278	0	0	32,467	33,439	23,351
Purchases and acquisitions	1,187	1,805	677	2	3,304	1,993	0	8,968	9,417	9,136
Personnel costs 1)	2,976	1,850	1,777	342	2,300	678	1,258	11,183	10,914	11,078
Housing costs	106	66	63	12	82	24	45	397	402	316
Office and general expenses	239	149	143	28	185	55	101	899	858	904
Depreciation and interest	57	36	34	7	44	13	24	215	260	246
Total	6,521	18,606	14,528	2,089	8,193	2,763	1,428	54,129	55,290	45,031
Execution costs	3,378	2,101	2,017	389	2,611	770	1,428	12,694	12,434	12,544

The execution costs of our own organisation are 2% higher than budgeted. In addition to salary costs, the personnel costs item includes training costs, hiring non-salaried staff and costs for recruiting new employees.

Operating costs increased by 1 percent compared to 2018, mainly due to higher personnel costs. The workforce increased by 0.5 FTE to 134.3 FTEs compared to 2018, due to the increased number of projects. A salary increase was also implemented in 2019 in line with the salary developments set by the central government.

The pension scheme is a career-average pension scheme. Pension benefits were not indexed in 2019. The policy coverage ratio for December 2019 is 96.5%. This is the status of the average current funding ratio over the past 12 months.

The total audit fees for 2019 amount to € 105,855. The full amount relates to PricewaterhouseCoopers Accountants N.V.; no other independent auditor was engaged during 2019. The audit costs have been allocated to the financial year to which the audit relates.

Auditor's fees PwC	2019	2018
Audit of the financial statements	74,096	67,915
Other audit work	31,759	42,743
Other non-audit services	-	847
	105,855	111,505

1) Personnel costs	reduction	2. Worldwide less than 200,000 new HIV infec- tions	3. Worldwide all people living with HIV on treatment	4. A cure for HIV	5. Awareness, support in society and full funding of the AIDS and STI response	Cost of fundraising	Manage- ment and Administra- tion	Total 2019	Budget 2019	Total 2018
Wages and salaries	2,113	1,314	1,262	243	1,633	482	893	7,941	8,043	8,171
Employee insurance	340	211	203	39	262	77	144	1,276	1,206	1,151
Pension insurance	230	143	137	26	178	52	97	864	885	871
Other personnel costs	293	182	175	34	227	67	124	1,102	780	885
Total personnel costs	2,976	1,850	1,777	342	2,300	678	1,258	11,183	10,914	11,078
Workforce (FTEs)	average number of employees									
in 2019	34,5	20,5	19,3	3,8	22,5	11,6	22,1	134,3		133,8
in 2018	32,2	21,5	21,3	2,0	21,2	12,9	22,7	133,8		

In 2019, two employees working outside the Netherlands were employed by the Aidsfonds. In addition, one employee worked through a hosting agreement in Washington and one in Geneva. A consultant has also been working in Ethiopia since 2019.

## **Remuneration executive board**

Mark Vermeulen

Name	Mark vermeulen
Title	Raad van Bestuur
Employment	
Type of agreement (term)	01-12-2018
	31-12-2019
Hours per week	36
Part-time percentage	100%
Remuneration 2019 (euro)	
Annual income	
Gross wage/salary	84,113
Holiday pay	6,250
End-of-year bonus	7,580
Variable annual income	0
Total annual income	97,943
SV charges (wg part)	10,610
Taxable reimbursements/additions	0
Pension costs (wg part)	12,208
Pension compensation	0
Other long-term benefits	0
Employment termination benefits	0
Total remuneration 2019	120,761
Total remuneration board of directors	

Name

2018

Stichting Aidsfonds – Soa Aids Nederland has a one-man executive board; in 2019 Mark Vermeulen is the director. The annual income remains within the maximum of € 138,020 (1 FTE/12 months) in accordance with the 'Regulations for the remuneration of directors of charities for the benefit of management and supervisory boards'.

133,338

The annual income, the taxed reimbursements/additions, the pension costs, and the other long-term benefits combined also remain within the maximum of € 194,000 per year outlined in the regulation.

For an explanation of the policy and principles for the executive board remuneration, please refer to chapter 2.2 of the annual report. No loans, advances or guarantees have been granted to the director.

The members of the executive board have not received any remuneration or expense allowances.

## Amsterdam, 20 April 2020

Stichting Aidsfonds – Soa Aids Nederland

Original signed by M. Vermeulen

M. Vermeulen, executive board

## **Additional information**

Adoption and approval of annual accounts.

The supervisory board of Stichting Aidsfonds – Soa Aids Nederland approved the 2019 financial statements at the meeting of 20 April 2020.

**Appropriation of result**The result is divided according to the appropriation of result included in the Statement of income and expenditure for 2019 under Result appropriation.

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# C. AUDITOR'S REPORT





## Independent auditor's report

To: management and the supervisory board of Stichting Aidsfonds - Soa Aids Nederland

## Report on the financial statements 2019

## Our opinion

In our opinion, the financial statements of Stichting Aidsfonds - Soa Aids Nederland ('the foundation') give a true and fair view of the financial position of the foundation as at 31 December 2019, and of its result for the year then ended in accordance with the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board.

## What we have audited

We have audited the accompanying financial statements 2019 of Stichting Aidsfonds - Soa Aids Nederland, Amsterdam.

The financial statements comprise:

- the balance sheet as at 31 December 2019;
- the statement of income and expenditure for the year then ended; and
- the notes, comprising the accounting policies and other explanatory information.

The financial reporting framework applied in the preparation of the financial statements is the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board.

## The basis for our opinion

We conducted our audit in accordance with Dutch law, including the Dutch Standards on Auditing. We have further described our responsibilities under those standards in the section 'Our responsibilities for the audit of the financial statements' of our report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## *Independence*

We are independent of Stichting Aidsfonds - Soa Aids Nederland in accordance with the 'Verordening inzake de onafhankelijkheid van accountants bij assuranceopdrachten' (ViO, Code of Ethics for Professional Accountants, a regulation with respect to independence) and other relevant independence requirements in the Netherlands. Furthermore, we have complied with the 'Verordening gedrags- en beroepsregels accountants' (VGBA, Dutch Code of Ethics).

## C6J7DVQ26QHE-242121515-45

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PwC' is the brand under which PricewaterhouseCoopers Accountants N.V. (Chamber of Commerce 34180285), PricewaterhouseCoopers Belastingadviseurs N.V. (Chamber of Commerce 34180287), PricewaterhouseCoopers Compliance Services B.V. (Chamber of Commerce 542180287), PricewaterhouseCoopers Compliance Services B.V. (Chamber of Commerce 514114406), PricewaterhouseCoopers Pensions, Actuarial & Insurance Services B.V. (Chamber of Commerce 54226368), PricewaterhouseCoopers B.V. (Chamber of Commerce 34180289) and other companies operate and provide services. These services are governed by General Terms and Conditions ('algemene voorwaarden'), which include provisions regarding our liability. Purchases by these companies are governed by General Terms and Conditions of Purchase ('algemene inkoopvoorwaarden'). At www.pwc.nl more detailed information on these companies is available, including these General Terms and Conditions and the General Terms and Conditions of Purchase, which have also been filed at the Amsterdam Chamber of Commerce.



## Emphasis of matter - uncertainty related to the effects of the coronavirus (COVID-19)

We draw attention to the subsequent events disclosure in the financial statements, in which management has described the possible impact and consequences of the coronavirus (COVID-19) on the foundation and the environment in which the foundation operates, as well as the measures taken and planned to deal with these events or circumstances. This note also indicates that uncertainties remain and that currently it is not reasonably possible to estimate the future impact. Our opinion is not modified in respect of this matter.

## Report on the other information included in the annual report

In addition to the financial statements and our auditor's report thereon, the annual report contains other information that consists of:

- the management report;
- annex 1 Operating results by brand;
- annex 2 Budget 2020;
- other information.

Based on the procedures performed as set out below, we conclude that the other information:

- is consistent with the financial statements and does not contain material misstatements;
- contains the information that is required by the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board.

We have read the other information. Based on our knowledge and understanding obtained in our audit of the financial statements or otherwise, we have considered whether the other information contains material misstatements.

By performing our procedures, we comply with the requirements of the Dutch Standard 720. The scope of such procedures was substantially less than the scope of those performed in our audit of the financial statements.

Management is responsible for the preparation of the other information, including the directors' report pursuant to the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board.

## Responsibilities for the financial statements and the audit

## Responsibilities of management and the supervisory board for the financial statements

Management is responsible for:

- the preparation and fair presentation of the financial statements in accordance with the Guideline for annual reporting 650 'Charity organisations' of the Dutch Accounting Standards Board; and for
- such internal control as management determines is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud or error.

Stichting Aidsfonds - Soa Aids Nederland - C6J7DVQ26QHE-242121515-45

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As part of the preparation of the financial statements, management is responsible for assessing the foundation's ability to continue as a going concern. Based on the financial reporting framework mentioned, management should prepare the financial statements using the going-concern basis of accounting unless management either intends to liquidate the foundation or to cease operations, or has no realistic alternative but to do so. Management should disclose events and circumstances that may cast significant doubt on the foundation's ability to continue as a going concern in the financial statements.

The supervisory board is responsible for overseeing the foundation's financial reporting process.

## Our responsibilities for the audit of the financial statements

Our responsibility is to plan and perform an audit engagement in a manner that allows us to obtain sufficient and appropriate audit evidence to provide a basis for our opinion. Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error and to issue an auditor's report that includes our opinion. Reasonable assurance is a high but not absolute level of assurance, which makes it possible that we may not detect all material misstatements. Misstatements may arise due to fraud or error. They are considered to be material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

Materiality affects the nature, timing and extent of our audit procedures and the evaluation of the effect of identified misstatements on our opinion.

A more detailed description of our responsibilities is set out in the appendix to our report.

Amsterdam, 23 April 2020 PricewaterhouseCoopers Accountants N.V.

Original Dutch version has been signed by M. van Dijk RA

Stichting Aidsfonds - Soa Aids Nederland - C6J7DVQ26QHE-242121515-45



## Appendix to our auditor's report on the financial statements 2019 of Stichting Aidsfonds - Soa Aids Nederland

In addition to what is included in our auditor's report, we have further set out in this appendix our responsibilities for the audit of the financial statements and explained what an audit involves.

## The auditor's responsibilities for the audit of the financial statements

We have exercised professional judgement and have maintained professional scepticism throughout the audit in accordance with Dutch Standards on Auditing, ethical requirements and independence requirements. Our audit consisted, among other things of the following:

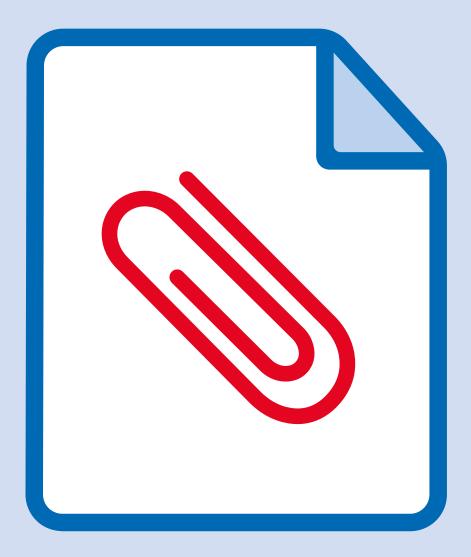
- Identifying and assessing the risks of material misstatement of the financial statements, whether due to fraud or error, designing and performing audit procedures responsive to those risks, and obtaining audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the intentional override of internal control.
- Obtaining an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the foundation's internal control.
- Evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Concluding on the appropriateness of management's use of the going-concern basis of accounting, and based on the audit evidence obtained, concluding whether a material uncertainty exists related to events and/or conditions that may cast significant doubt on the foundation's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report and are made in the context of our opinion on the financial statements as a whole. However, future events or conditions may cause the foundation to cease to continue as a going concern.
- Evaluating the overall presentation, structure and content of the financial statements, including the disclosures, and evaluating whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the supervisory board regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Stichting Aidsfonds - Soa Aids Nederland - C6J7DVQ26QHE-242121515-45

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# D. ANNEXES



## Annex 1 Operating results by brand

(in euros x 1,000)

	Aidsfonds			Soa Aids Nederland			
	Actual	Budget	Actual	Actual	Budget	Actual	
	2019	2019	2018	2019	2019	2018	
Income:							
Income from private individuals	10,107	10,050	10,931	4	0	0	
Income from organisations	0	0	0	17		9	
Income from lottery organisations	3,453	3,450	3,486	0	0	0	
Subsidies from governments	31,780	32,923	24,088	4,237	4,586	4,322	
Income from other non-profit organisations	1,241	1,008	685	249	0	264	
Total income raised	46,580	47,431	39,190	4,507	4,586	4,595	
Income from other sources	1,627	243	45	98	0	120	
Total income	48,207	47,674	39,235	4,605	4,586	4,715	
Expenditures			<del></del>				
Objective 1: Drastic reduction of HIV and other STIs in the Netherlands	2,053	1,114	1,763	4,467	4,217	4,440	
Objective 2: Worldwide less than 200,000 new HIV infections	18,606	19,339	12,484	0	0	0	
Objective 3: Worldwide all people living with HIV on treatment	14,529	15,589	14,075	0	0	0	
Objective 4: A cure for HIV	2,090	2,167	1,435	0	0	16	
Objective 5: Awareness, support in society and full funding of the AIDS and STI	,	ŕ	ŕ				
response	8,193	8,551	6,665	0	0	145	
Total expenditures	45,470	46,760	36,421	4,467	4,217	4,601	
Cost of fundraising	2,763	2,918	2,603	0	0	0	
Subtotal expenditures	48,234	49,678	39,024	4,467	4,217	4,601	
Management & administration costs	1,014	981	1,015	414	369	391	
Total expenditures	49,248	50,659	40,038	4,881	4,586	4,992	
Balance before financial income and expenses	-1,041	-2,985	-803	-276	0	-277	
Net financial income and expenses	9	0	13	0	0	0	
Net income	-1,032	-2,985	-791	-276	0	-277	
Appropriation of result							
Addition/withdrawal from:							
Continuity reserve	0	0	88	0		0	
Earmarked reserves	-1,152	-2,985	-2,049	-40		-56	
Other reserves	381	0	1,319	-176		-158	
Earmarked funds	-261	0	-149	-60		-63	
	-1,031	-2,985	-791	-276	0	-277	

## Annex 2 Budget 2020

(in euros x 1,000)

	Budget 2020	Actual 2019	Actual 2018
Income:			
Income from private individuals	10,020	10,110	10,931
Income from organisations	40	17	9
Income from lottery organisations	3,810	3,453	3,486
Subsidies from governments	38,461	36,019	28,410
Income from affiliated non-profit organisations	0	0	0
Income from other non-profit organisations	1,705	1,490	949
Total income raised	54,036	51,089	43,785
Income in return for the supply of products and/or services	0	107	166
Income from other sources	426	1,618	0
Total income	54,462	52,814	43,950
Spent on objectives			
Objectives from 2019 onwards			
Objective 1: Drastic reduction of HIV and other STIs in the Netherlands	5,680	6,521	6,203
Objective 2: Worldwide less than 200,000 new HIV infections	18,436	18,605	12,484
Objective 3: Worldwide all people living with HIV on treatment	18,436	14,529	14,075
Objective 4: A cure for HIV	1,649	2,089	1,451
Objective 5: Awareness, support in society and full funding of the AIDS and STI response	9,593	8,193	6,810
	53,794	49,938	41,022
Cost of fundraising	2,840	2,764	2,603
Management and administration costs	1,471	1,428	1,406
Total expenditures	58,105	54,129	45,031
Balance of financial income and expenditures	-3,643	-1,316	-1,080
Balance of financial income and expenditures	15	9	13
Balance of income and expenses	-3,628	-1,307	-1,068
Ratio of management & administration (of total expenditures)	2,5%	2,6%	3,1%
Spent on goal (of total income)	98,8%	94,6%	93,3%
Spent on goal (of total income)	92,6%	92,3%	91,1%