

# **Empowering Development**



**AIFO Annual Report 2008**



**AIFO**

*dal 1961 con gli ultimi*

AIFO Annual Report 2008  
Prepared by Scientific & Medical Support Department  
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Cover picture by Michela di Gennaro. Other pictures in the report are from AIFO archives.

## **From AIFO's President**

A quick look at the AIFO's annual balance shows the impact of financial crisis, that led to a fall in the funds used for projects in 2008. Over the past few years, the persistence of negative balance at the end of the year, has been a problem though slowly it has decreased in absolute terms.

On the other hand, the high quality of work done by our partners in projects supported by AIFO, the continuing recognitions by national and international bodies, as well as, the appreciation for the network of volunteers active at grassroots in Italy and for the network of country coordinators of AIFO, have all been greatly comforting that even in troubled times, we can continue to reach and have a positive impact on the lives of so many persons.

By adhering to our Mission and Vision, inspired by the values and philosophy of Raoul Follereau, AIFO wishes to be an increasingly self-aware agent of change in Italy and in the World. For this, AIFO is strongly committed to permanent pathways of ethical and civil capacity building for building critical consciousness and necessary skills that contribute to a more just and humane society, that respects the rights of persons.

Raoul Follereau had often warned of falling the traps of pessimism and discouragement, and as national body of the Association, we intend to proceed with enthusiasm. In the beginning for Follereau, leprosy was a terrible disease to be eradicated, but later on it was seen a symbol. If leprosy continues in different angles of the world today, it is not just because of the Mycobacterium, but it is because there are so many other leprosy such as hunger, lack of hygiene, wars, extreme poverty.

Follereau had died more than thirty years ago in 1977, but his legacy is still alive. His treasure, let us not forget, was the good that he was unable to do and that he would liked to do, and which we shall continue. A new cycle is beginning, of new relationships between the Board and the National Assembly of AIFO. Let us work together for becoming a small and yet a great instrument of love for those who are the poorest, the most marginalised.

Dr Francesco Colizzi  
AIFO's President

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# Context

## A global Perspective

The year 2008 closed against the notes of a financial crisis that started in the developed world and affected almost all nations, especially impacting on the lives of poor and marginalized population groups, that did not have any idea about the financial markets and the causes of the crisis.

Against this backdrop, the work of AIFO was also affected and most projects supported by AIFO are still feeling the after-shocks of this financial earthquake. Apart from the financial crisis, there were a number of other developments that have direct links to AIFO's work.

**Leprosy situation in the world:** The annual WER bulletins from the World Health Organisation giving information about the leprosy situation at the end of 2008 confirm that after a decrease in the number of new cases of leprosy in the world during 2002-06, especially in India, the number of annual new cases have now stabilised. According to the WHO data, during 2007 there were 258,133 new cases of leprosy in the world, while in 2008, the number of new cases was 249,007. However, the 2008 data is incomplete and full data will be available only around the end of 2009. On the basis of this incomplete data, it seems that highest rate of new cases was in South East Asia with 9.60 new cases per 100,000 population, followed by South America with 4.85 new cases and Africa with 4.37 new cases per 100,000 population.



During 2008, discussions were initiated by Global Leprosy Programme of WHO for defining the new strategy against leprosy for the period 2011-2015. This strategy was approved in April 2009. The new global strategy focuses on early diagnosis and treatment by using the grade II disability as the principle indicator for measuring effectiveness of leprosy programmes. It also advocates for contact surveys and monitoring of resistance against anti-leprosy drugs.

A new study from Mumbai in India, published in *Leprosy Review* in 2009, has reported quite big numbers of undetected leprosy cases, focusing attention on problems of diagnosing and treating leprosy in growing metropolitan cities of the world, where new urban communities and complex issues of health services' organisation and access, make standard leprosy control methods difficult to apply.

Thanks to the genome research, progress has been reported in identification of new antigens that may have the potential to pave the way for new and earlier sero-diagnosis of leprosy.

Slow but steady expansion of organisations of persons affected with leprosy such as IDEA and their efforts to advocate for their human rights, is another positive area that fits in with AIFO's ideal of working together with people at community level in promoting sustainable development that is based on empowerment of the most marginalized population groups.

**Disability, development and human rights:** On 3<sup>rd</sup> May 2008, the U.N. Convention and its Optional Protocol on Rights of Persons with Disabilities (CRPD) came into effect. As we prepare this report, 129 countries have signed the Convention and 71 countries have signed the Optional Protocol.

After signing the Convention at the United Nations, the countries then need to ratify the Convention and the Optional Protocols in their own parliaments. This should be done when the countries have national disability plans into place so that Convention and Optional Protocol can be effectively implemented. Thus the national ratification has been much slower. So far, 25 countries have ratified the Convention and 15 countries have ratified the Optional Protocol.



**Optional Protocol of International Convention on Economic, Social and Cultural Rights (ICESCR):** After almost 19 years of discussion, finally the Optional Protocol of ICESCR will be open for signatures and ratification of countries on 24 September 2009. ICESCR relates to basic human rights including the Right to Health. Once Optional Protocol will become operational, it will mean that United Nations can set up control mechanisms for monitoring if these rights are being respected.

**Progress on CBR Guidelines and World Disability and Rehabilitation report:** Disability and Rehabilitation team of the World Health Organisation (WHO/DAR) made significant progress over the past year in completing the new CBR Guidelines and the World Disability and Rehabilitation report, both invaluable tools for work of organisations active in the field of disability in the developing world. AIFO/Italy continues to work closely with WHO/DAR for these two documents as well as for other activities.

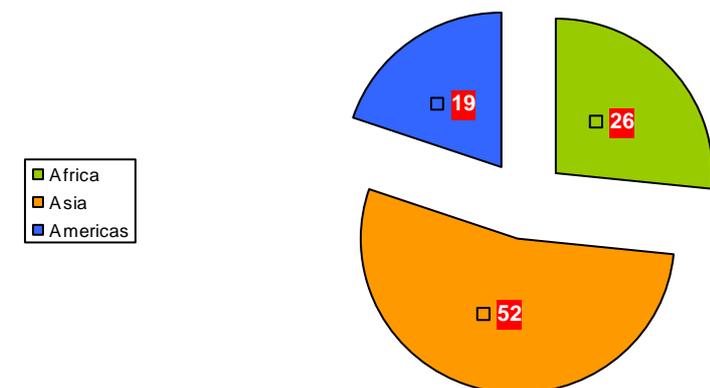
## **An Over-view of Projects**

Gradual implementation of the new project management strategy of AIFO, approved by its Board, started in 2008. This strategy is based on country programmes with the presence of an AIFO coordinator. AIFO continued its focus for the overseas projects in four main areas: (1) leprosy and primary health care (2) community-based rehabilitation (3) Vulnerable children projects, focusing mainly on children with leprosy and/or disabled

children; and (4) the growing sector of emergency support in countries where AIFO is already active.

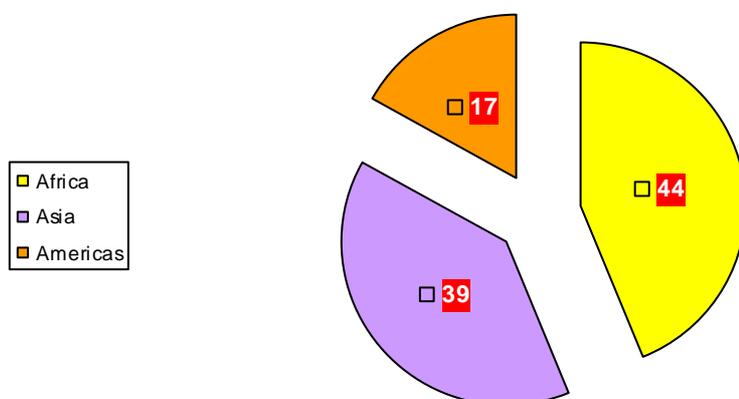
During 2008, AIFO supported 112 projects in 28 countries, among them 97 projects managed directly and 15 projects, through sister organisations of International Anti-Leprosy Federation (ILEP).

**Number of Projects supported by AIFO in 2008 according to geographical areas** (left): While Asia had the largest number of projects supported by AIFO (52 projects) in absolute financial terms, the highest percentage of funds (44%) were channelled to Africa.



The next graph show this variation in

percentage of funds distribution in different geographical regions.



**Percentage of AIFO funds in 2008 according to the geographical areas (above)**

In these 97 projects, 43% were in partnership with local faith-based organisations, 30% were in partnership with local authorities and Governments and 22% were in partnership with national voluntary organisations and movements.

**Co-financing Partners of AIFO**

During 2008, 3 projects managed by AIFO received co-funding from **Development Cooperation of Italian Foreign Ministry** – Yunnan Leprosy project, China (Aid

7870/AIFO/CHN), Vietnam CBR (Aid 7720/AIFO/VTN) and Porto Nacional leprosy & PHC, Brazil (Aid 8735/AIFO/BRA).

In the same year, 1 project managed by AIFO received co-funding from **Europeaid European Union** – Mongolia CBR (ONG-PVD/2007/134995).

In addition, one project in Eritrea was approved for conformity by Italian Foreign Ministry and another joint project managed by Italian NGO, MLAL in Mozambique (Aid 7853) received co-funding.

In 2008, AIFO also received co-funding from **Italian Episcopal Conference (IEC)** for CBR project in Bidar (India) and participated in a joint project with Italian NGO Medicus Mundi in Sudan, also funded by IEC.

Additional 13 projects received co-funding from **municipal, provincial and regional bodies** in Italy.

**Co-funding with ILEP:** During 2008, AIFO supported projects in collaboration with different ILEP members in - Bangladesh (DFB - Belgium), Cameroun (Fairmed - Switzerland), Democratic Republic of Congo (DFB-Belgium), Ethiopia (DAH-W-Germany), India (ALM - USA, DAHW-Germany & Fairmed-Switzerland), Madagascar (FRF-France), Nicaragua (SF-Spain). In addition, AIFO also supported the scientific journal Leprosy Review through LEPROA.

During 2008, AIFO received support from ILEP member associations for - Brazil (DFB-Belgium, SF-Spain, SLC-Canada), Ghana (DAH-W-Germany, DFB-Belgium, Fairmed-Switzerland, FRF-France, FL-Luxembourg), Guinea Bissau (DFB-Belgium, Fairmed-Switzerland, FRF-France, FL-Luxembourg), Mozambique (DAH-W-Germany, DFB-Belgium, Fairmed-Switzerland, FRF-France, FL-Luxembourg, SLC-Canada) and Nepal (SF-Spain)



**Co-funding with IDDC:** With different members of IDDC, AIFO participated in a EU c-funded project "Mainstreaming Disability", under the leadership of Light of the World (Austria).

**International Offices of AIFO:**

During 2008, AIFO had its coordination offices in five countries – Brazil/Goiania, Democratic Republic of Congo/Kinshasa, India/Bangalore, Mongolia/Ulaan Baator and Mozambique/Maputo.

In addition, during 2008, AIFO also had project offices in the following countries/cities: Brazil/Porto Nacional, China/Kunming, Eritrea/Digsa, Guinea Bissau/Bissau and Vietnam/Hanoi.

Except for a small number of expatriate staff, majority of AIFO supported projects are managed entirely by personnel from the same country.

## Building bridges

AIFO networks extensively at international level as well as at national levels in Italy and in the countries where AIFO is supporting projects to promote synergies and collaborations that can maximise the impact of the resources and activities.

Here are some examples of the networks in which AIFO is involved:

### **Disability & Rehabilitation team of World Health Organisation (WHO/DAR):**

At WHO, AIFO collaborates with different departments including neglected diseases, global leprosy programme, Buruli ulcer initiative, mental health department, etc., how ever the collaboration with WHO/DAR is particularly significant. In 2008, we worked together with WHO/DAR for the organisation of three international workshops on the occasion of the first Asia Pacific CBR conference in Bangkok (Thailand). Because of local problems, this workshop was postponed from December 2008 to February 2009.



Another important collaboration with WHO/DAR initiated in 2008 is a multi-disciplinary research project on impact of Community-based Rehabilitation (CBR), involving different partners including universities. Based on CBR matrix, the research has 3 components - quantitative indicators of measuring impact of CBR, impact of CBR seen from the point of view of persons with disabilities based on emancipatory/empowerment paradigm, and participatory evaluation of specific issues related to disability and rehabilitation.

**International Federation of Anti-leprosy Associations (ILEP):** AIFO is a founding member of ILEP and works in a coordinated way in leprosy and primary health care programmes, with other ILEP member organisations. During 2008, together with ILEP member associations, AIFO collaborated with the organisation of International Leprosy Congress. Dr S. Deepak from the Medical Support department of AIFO is a member of the ILEP Technical Commission.

**International Consortium on Disability and Development (IDDC):** AIFO is a founding member of IDDC that brings together organisations involved in disability, rehabilitation and development issues. Through the CBR Task group of IDDC, AIFO participated in the preparation of CBR Guidelines, as well as in the organisation of Internal workshops during the first Asia-Pacific CBR Congress.

**People's Health Movement (PHM):** AIFO has been playing an active role in the People's Health Movement over the past decade. The main activities in 2008 are linked to awareness about People's Health Charter, the campaign for Right to Health and the campaign for the Optional Protocol of International Convention on Economic, Social and Cultural rights.

**Disabled Peoples' International (DPI):** AIFO collaborates regularly with DPI at international, regional as well as at national level. During 2008, the collaboration included organisation of a workshop on "CBR and UN Convention on Rights of Persons with Disabilities".

**International Association for Integration, Dignity and Economic Advancement (IDEA):** IDEA is formed primarily by persons with personal experience of leprosy. AIFO collaborates with the international office as well as with national branches of IDEA. During 2008, AIFO collaborated with IDEA for the organisation of a workshop on stigma during the International Leprosy Congress in India.

**Italian Global Health Watch (OISG):** OISG brings together prominent health professionals, activists and some other concerned persons from all over Italy and produced a biannual report on global health issues. Since its foundation, AIFO hosts the office of OISG.



**Italian Society of Leprologists (SIHAN):** SIHAN brings together health and social professionals in Italy with an interest in leprosy. Annually, SIHAN conducts a national survey on the number of new cases of leprosy in the country (over the past decade, most of new cases of leprosy in Italy are among emigrants). Since its foundation, AIFO hosts the office of SIHAN.

**FOCSIV – Volunteers in the World:** Focsiv is the federation of Italian NGOs of Christian inspiration. AIFO is a member of FOCSIV and collaborates with other NGO members of FOCSIV and other Italian federations.

**Physiotherapists without Borders (FSF):** Over the past decade, AIFO collaborates regularly with FSF, especially for the training of young physiotherapists.

**Italian Society of Medical Students (SISM):** AIFO regularly collaborates with SISM, especially for organising annual study visits to projects and short research programmes for medical students.

These are just a few examples of AIFO's involvement with different networks. AIFO also collaborates with many other partners such as universities for under and post-graduate courses, Nursing organisation (Nursing in Movimento), etc.

## Beneficiaries of AIFO Supported Projects

AIFO does not run or manage projects directly except in some specific instances for limited periods such as EU or Italian Foreign Ministry co-funded projects. In all projects, AIFO looks for partner organisations and communities that are “owners” of the projects, and thus economic, social and cultural sustainability are key issues in project formulation and implementation.

AIFO also prefers to work with a variety of different partners in the same countries, so as to increase the impact of its work. AIFO works with National and sub-national level Governments, non-governmental organisations, faith based organisations, non-formal community based organisations, etc. aiming to reach the poorest and most excluded groups in the communities without any distinction for race, religion, language, ethnic or political considerations.

### Beneficiaries of AIFO supported projects in 2008

Kind of Project	Africa	Latin America	Asia	Total
<b>Leprosy treatment, care &amp; rehabilitation</b>	<b>3,948</b>	<b>14,555</b>	<b>90,518</b>	<b>109,021</b>
Primary Health Care	35,045	-	59,870	94,915
Community-based Rehabilitation	6,999	-	112,442	119,441
Vulnerable children	1,795	606	6,757	9,158
Other Community Development	2,262	2,363	159,338	163,963
<b>Total Beneficiaries</b>	<b>50,049</b>	<b>17,524</b>	<b>428,925</b>	<b>496,498*</b>

\* Due to local problems, a number of projects are missing from this data analysis including projects in Angola, Democratic Republic of Congo and Guyana.

## For a World Without Leprosy

### AIFO's Vision

AIFO's vision is a world without leprosy. This means working for control of leprosy infection by early diagnosis and proper treatment of new cases of leprosy. It means working for prevention of disabilities, as well as care, medical, social and economic rehabilitation of persons with leprosy related complications and disabilities. It also means working for a more just world, to fight against conditions such as poverty, oppression and marginalization of people, all conditions that lead to leprosy.

AIFO's work for persons affected with leprosy is based on ideals of empowerment and right to self-determination of the persons. Promoting inclusive community-based rehabilitation programmes that actively work for inclusion of leprosy affected persons and working with organisations of persons affected with leprosy such as IDEA, Morhan, Handa, etc. are two key approaches adopted by AIFO in this area.



For the control of leprosy infection and ensuring early and effective treatment, AIFO favours Primary Health Care approach and community based health programmes in rural areas and among disadvantaged urban groups.

### **AIFO's Project Partners**

Among the AIFO supported projects dealing with leprosy in 2008, there were national or state or district level programmes in collaboration with national governments in countries like Angola, Brazil, China, Comores, Guinea Bissau, Ghana, India and Mozambique. There were smaller projects, usually dealing with leprosy and primary health care in collaboration with NGOs and faith-based organisations in countries such as Angola, Bangladesh, Brazil, India, Kenya, Mozambique, Myanmar, etc. Finally there were activities aimed at strengthening organisations of persons affected with leprosy in countries like Brazil, China, Guinea Bissau and Kenya.

### **Beneficiaries of Leprosy related Activities**

As far the diagnosis and treatment of new cases of leprosy is concerned in projects that received support from AIFO in 2008, the number of new cases of leprosy was as follows: 2,361 cases in Africa; 6,500 cases in Latin America; and 7,173 cases in Asia.

Among these new cases of leprosy, the overall average percentage of children was around 11%, with Comores island project leading the percentage of new cases of leprosy among children (31% of all new cases).

Other interventions related to care of complications, prevention of disabilities, medical, social and economic rehabilitation activities reached more than 92,000 persons affected with leprosy in 2008.

If we look at the trend of beneficiaries among persons with leprosy, we see a gradual fall in number of new cases of leprosy among the beneficiaries, while the number of beneficiaries with leprosy related disabilities or complications is increasing. This is because, projects can now devote a greater part of their energies and resources to activities dealing with complications and disabilities. However, the needs in this sector are much higher than our capacity to respond to them. For example, many of the AIFO supported projects were unable to provide protective footwear to all the leprosy affected persons who needed them.

Beneficiaries of some of the more specific interventions for persons with leprosy related interventions were as follows:

- Persons with serious disabilities living in old leprosy settlements 1,507
- Persons with eye related complications: 425
- Persons with plantar ulcers: 9,353
- Persons who received protective footwear: 2,358
- Persons with neuritis and reactions: 1,304
- Persons who received orthopaedic appliances 124
- Persons involved in self-help groups 13,789
- Persons attending physiotherapy services 3,619

## Right to health and health for all

As already explained, increasingly, most of the leprosy related services supported by AIFO are integrated in Primary Health Care and Community Health Initiatives. During 2008, 94,915 persons benefited from these activities. Beneficiaries of some of the specific activities were as follows:

- 16,351 persons with dermatological conditions
- 6,263 persons with malaria
- 7,268 persons, especially children with intestinal parasitosis
- 7,214 persons, especially children with malnutrition
- 3,726 persons with tropical diseases such as sleeping sickness, filariasis, leishmaniosis, etc.
- 6,112 persons with diarrhoea
- 1,960 persons with TB
- 2,822 women with anaemia
- 1,021 Siero-positive persons receiving ARV treatment

## Nothing About Us, Without Us



Since late 1980s, AIFO has adopted the community-based rehabilitation (CBR) approach. Initially seen as a strategy for reaching persons due to disabilities leprosy, over the past twenty years, AIFO supported CBR programmes are broad-based dealing with all the different kinds of disabilities including both physical and mental disabilities. Over the past few years, apart from leprosy related disabilities, AIFO is placing greater emphasis on involvement of persons with mental illness, as they are among the most

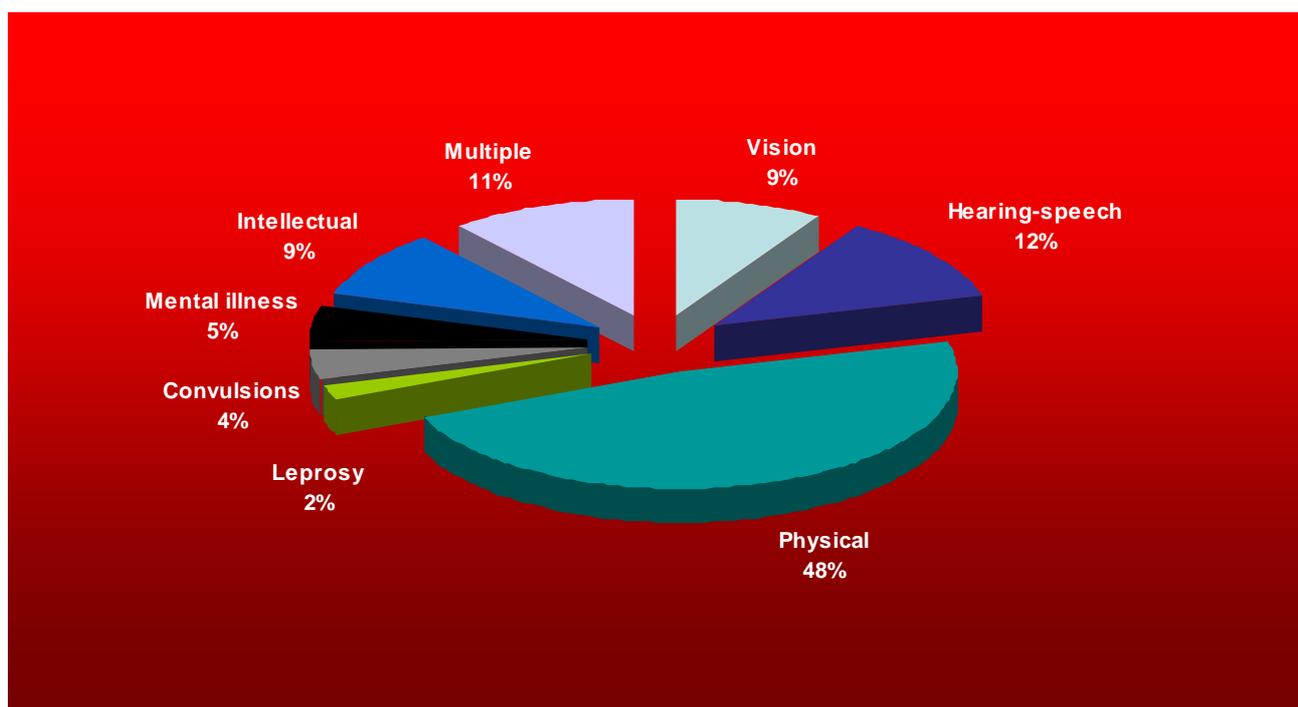
stigmatised and excluded groups of persons in communities.

Initially seen as a service delivery approach in rural and poor communities, over the past decade CBR is seen as an approach to empower persons with disabilities, their families and communities. Thus persons with disabilities and their organisations (DPOs) are seen as key and essential partners in the different CBR programmes supported by AIFO, based on the principle of "Nothing about us, without us".

As for leprosy and primary health care projects, in 2008 AIFO supported CBR programmes work together with governments at national and sub-national levels in countries such as Indonesia, Mongolia, Vietnam and Guyana. At the same, there are other AIFO supported CBR programmes covering more limited geographical areas in collaboration with NGOs and faith-based organisations in countries like Bangladesh, Brazil, Egypt, India, Guyana, Laos, Liberia, Pakistan and Somalia.

**Beneficiaries of CBR projects in 2008:** During 2008, a total of 119,441 persons with physical or mental disabilities benefited from AIFO supported CBR programmes. Of these about 30% were children below 15 years.

The **following graph shows** the percentage of beneficiaries of CBR projects depending on the kind of disability:



Community-based Rehabilitation (CBR) programmes are active in five areas of activities (summed up WHO/DAR in the CBR matrix): health, education, social, cultural and empowerment. The beneficiaries of some of the specific activities were as follows:

- 3.991 persons received technical appliances
- 15.532 persons received support for formal or informal education

- 8.812 persons benefited from loans for income generation and 1.274 persons received support for agricultural activities.
- 20.968 persons received home visits and training for improving autonomy in activities of daily living.

Promoting empowerment is a key aim of the CBR programmes supported by AIFO. In this regard, supporting and strengthening self-help groups and organisations of persons with disabilities (DPOs) are the two major activities. During 2008, there were 2,399 self-help groups in different CBR projects supported by AIFO with a total of 37,465 members. At the same time, there were 233 DPOs with 83,977 persons with disabilities and additional 66,403 family members.

## Little worlds, big hopes

Projects dealing with vulnerable children are just a small part of AIFO's work, legacy of the days when there was no treatment available for leprosy and children of the persons affected with leprosy were kept in orphanages.

Today those orphanages are no more and most of the old leprosariums are gone, yet AIFO continues to support children who are excluded and marginalised through community-based approaches that focus on sustainable development, health, education and nutrition-integration. Most of these children-projects are part of projects dealing with leprosy, primary health care and CBR.

The beneficiaries of children projects in 2008 were as follows:

	Africa	Latin America	Asia
<b>Total assisted children</b>	<b>1.795</b>	<b>606</b>	<b>6.757</b>
<b>Health care</b>	1.112	497	5.647
<b>Education (formal &amp; informal)</b>	3.142	606	5.114
<b>Nutrition integration</b>	1.060	600	2.564

## Emergencies

In countries, where AIFO has country coordination or project offices, in case of any emergencies, AIFO promotes specific actions targeted at persons affected with leprosy, persons with disabilities and other marginalised population groups. Since 2002, AIFO has signed the Framework Partnership agreement with European Commission's Humanitarian Office (ECHO).

During 2008, AIFO's most significant programme of emergency support was in Bangladesh for population groups affected by SIDR cyclone in the Chittagong area, where AIFO is already working with minority groups living in Chittagong hills.

# Changing ourselves for changing the world

AIFO is a grassroots membership organisation with hundreds of volunteers spread all over Italy. Through official and unofficial AIFO groups, supporters and regional coordination bodies, AIFO promotes a large number of activities in Italy, that can be broadly considered as "Development education".



**Institutional activities:** During the AIFO General Assembly held on 7-8 June 2008, a new Board of Directors was elected with Dr Francesco Colizzi as its president. On 31 December 2008, there were 65 official groups with a total of 1,036 registered members and 10 official regional coordinations in Italy.

In June 2008, AIFO director Prof. Antonio Landolfi left AIFO and has gone back to original, Compañia region, where he is an active member of AIFO group. His place in the head-office of AIFO in Bologna was taken by Mr. Maurizio Maldini.

**Educational activities:** School teachers and school children are one of the key areas of work for AIFO in Italy. Many of the AIFO's group members and supporters are school teachers. They organise activities such as meetings, conferences, training courses for school teachers, competitions, exhibitions, inter-active games, etc.

During 2008, different AIFO groups were involved in about 125 meetings and courses in schools including the groups of Bologna, Casagiove, Caserta, Chieti, Guamo, Imperia, Roma, Sanremo, Savona and Vedano al Lambro.

AIFO's Sanremo group organised a competition on the theme "Emigration - yesterday and today" directed at children of high schools. 8 Italian schools were involved in twinning with schools or children related projects in Comores islands, India and Liberia.

Finally AIFO collaborated for the organisation of two refresher training courses for school teachers in Rome and Chieti. In 2009, AIFO received an official recognition from Italian Ministry of Education for conducting these training courses for school teachers, so this activity is expected to be strengthened in the coming years.

**Capacity building of AIFO groups and supporters:** AIFO group members and supporters have opportunities for their capacity building in themes of development education so that they can be agents of change in their own communities. These activities include summer camps, family camps, guided visits to AIFO supported projects in developing countries, etc.

**Working together with other associations and universities:** AIFO also collaborated with different other organisations such as Disabled People's International (Italian branch), Italian medical students association, Italian physiotherapists association, etc. for organisation of capacity building and awareness building initiatives. These included organisation of a seminar on "Human rights for all" in collaboration with Province of Milan.

**Culture, promotion and awareness:** In May 2008 a group of Yoruba dancers from Brazil were invited in Italy and along with their dance shows in different Italian cities, there were different activities to promote debates and discussions on issues related to vulnerable children.



In April 2008, in collaboration with Franciscan congregation in Assisi, AIFO organised an international workshop to remember the eight centenary of conversion of Saint Francis and the role played by persons affected with leprosy in this conversion. Vatican was represented by Cardinal Javier Lozano Barragan in this conference.

**World Leprosy Day:** Every year, the last Sunday of January is a key appointment for thousands of volunteers and supporters of AIFO to meet, to organise activities for raising awareness about leprosy and persons affected with leprosy in the world.

For the last few years, this occasion is marked by sale of "solidarity honey" in the different city squares. In January 2008, 1,007 city squares participated in this initiative with distribution of more than 47,000 bottles of honey. Different associations, voluntary organisations, groups such as scouts, joined AIFO volunteers in this effort.

Some representatives of projects supported by AIFO in Brazil were invited to Italy to share their experiences and inform persons about their work.

Thanks to the involvement of Renzo Ulivieri, head of the Italian football empire association, all the football stadiums and players, displayed a banner asking for "fight against leprosy", that helped in spreading the awareness message of AIFO.

As part of World Leprosy Day initiatives, a number of well known artists donated a work of their art to AIFO for raising funds for AIFO's projects.

## **Scientific Research & Training**

Through the Medical Support and Training & Capacity Building departments, AIFO organises a number of important initiatives under the "Raoul Follereau International School of Learning".

Scientific Research and Training Activities in 2008 include the following:

- Organisation of annual training course on leprosy in collaboration with University of Genoa.
- Collaboration with WHO/DAR for the preparation of the Health chapter of CBR guidelines and for the organisation of different international workshops during the first Asia-Pacific CBR conference.
- Collaboration with ILEP Technical Commission and CBR task group of IDDC
- Preparation of a multi-disciplinary research project on measuring impact of a district level CBR programme in India involving Florence university, University college of London, St John Research Institute Bangalore and Sociology department Thirupathi university.
- Publication of a research on "Poverty and disability" in Nepal.
- Support for archiving and blogging for Leprosy Mailing list.
- Maintaining internet archives of Asia Pacific Disability and Rehabilitation journal.
- Collaboration for the publication of third report of Italian Global Health Watch in English and Italian.

## Conclusions

This report gives a glimpse of the different activities carried out by AIFO in 2008. Lot more information about the activities in Italy are available under the Italian part of AIFO web page (<http://www.aifo.it/>) while information about project related and other international activities of AIFO is available on the English section of AIFO web page (<http://www.aifo.it/english/>).

**Annex:** Summary of the annual balance 2008 approved by auditors **Ernst and Young**.

## AIFO Annual Balance 2008

ACTIVE	2008	2007	PASSIVE	2008	2007
<b>FIXED ASSETS</b>			<b>NET PATRIMONY</b>		
<i>Non Tangible Assets</i>			<i>Free Patrimony</i>		
Concessions, licences, rights	2.218	5.117	Available fund	2.759.483	5.696
<i>Tangible Assets</i>			<i>Bound patrimony</i>		
Land & Building	1.280.000	452.472	Patrimony for projects	1.114.053	2.783.114
Equipment etc.	25.742	37.497	Bound reserve	600.000	834.934
Other assets	17.555	9.864	<b>Total net patrimony</b>	<b>4.473.535</b>	<b>3.623.744</b>
<i>Financial Investments</i>			<b>Risk fund and costs</b>		
Participations	8.566	8.041	Misc. fund	10.000	150.000
Bank titles as guarantee	0	250.000	Risk fund project accounting	47.617	139.940
<b>Total Assets</b>	<b>1.334.082</b>	<b>762.991</b>	<b>Total risk fund and costs</b>	<b>57.617</b>	<b>289.940</b>
<b>CURRENT ASSETS</b>			<b>Staff social fund</b>	<b>413.459</b>	<b>415.188</b>
<i>Final residuals</i>			<b>Debts</b>		
Promotional materials	21.183	39.475	Suppliers	135.994	169.533
<i>Short-term credits projects</i>			Other debts	110.321	757.363
Credits from other associations	560.850	588.033	Debts towards providence inst.	46.850	53.320
Credit from It. Foreign Ministry	799.186	716.597	Tax debts	35.260	47.546
Credit from Intern. Bodies	195.159	64.007	<b>Total debts</b>	<b>328.425</b>	<b>1.027.782</b>
Credit from local bodies	74.928	67.375	<b>Passive carryovers</b>	<b>2.270.337</b>	<b>2.748.097</b>
Credit for contributions through groups	32.016		<b>Total passives</b>	<b>3.069.838</b>	<b>4.481.007</b>
<i>Long term credits projects</i>			<b>TOTAL PASSIVE &amp; NET PATRIMONY</b>	<b>7.543.373</b>	<b>8.104.751</b>
Credits from other associations	58.350	41.350	<b>Order accounts</b>		
Credits from Intern. Bodies	337.391	884.959	Funds to be sent to projects (short)	2.499.766	3.709.715
Credits from EU	413.732	413.732	Funds to be sent to projects (long)	1.059.456	1.430.768
<i>Other credits</i>			Funds for Dev Edu. (short)	41.217	139.774
Credits on donations	99.847	219.658	Titles for bank guarantee	-	250.000
Other credits	24.298	24.408	<b>Total order accounts</b>	<b>3.600.439</b>	<b>5.530.256</b>
<i>Testaments</i>					
Testaments and mat. Donation	1.591.315	1.551.132			
<i>Non fixed financial activities</i>					
Investments	991.782	1.031.293			
<i>Available cash</i>					
Cash box	43.636	28.188			
Bank & post	929.116	1.659.921			
<b>Total circulating income</b>	<b>6.192.789</b>	<b>7.330.123</b>			
<b>Carry overs</b>	<b>16.503</b>	<b>11.637</b>			
<b>TOTAL ACTIVE</b>	<b>7.543.373</b>	<b>8.104.751</b>			

# AIFO's Mission & Vision

