Tomorrow will be as we shall make it
Dear readers,

Welcome to the new issue of AIFO in the World.

During the past year, a long lasting and aggressive economic crisis has widened the impact of poverty in different Countries of the world. This means more famines, less education for children, more untreated illnesses, more pain and solitude, and more early deaths.

The economic crisis has also been tough for us in Italy, where many families have been touched by greater difficulties, loss of many jobs and greater job insecurity. Last year there was also an earthquake in Abruzzo region of Italy, for which people donated widely and generously. It was an year of emergencies, of our combined dreams jolted by recurrent common nightmares.

It was also an year of struggles for our fund raising in support of projects, perhaps because our project support work is not related to emergencies. Our project support is planned thinking of medium and long term impact, and has a low emotional impact on the public.

We have initiated our discussions with all partners and stakeholders on our Strategic Programme plan for the period 2011-2015. Next year, in 2011, we are going to celebrate 50 year of AIFO.

Our aim is to renew our commitment for a world without leprosy and to continue our fight against “all leprosies of the world” as inspired by Raoul Follereau. To accomplish this task we need everyone to join us, the new and old members, our volunteers and our future friends, in our work. All are important and essential for taking AIFO in new directions and strengths.

I look forward to continuing partnerships with you, for helping “new dawns” to break the circle of darkness, as Follereau used to say, for and together with the most marginalised persons.
AIFO’s new Guidelines for Promoting and Managing AIFO’s Initiatives Abroad were approved by the AIFO Board in May 2009. The new Guidelines express technical and operational choices for development of projects supported by AIFO, in a flexible way. According to these Guidelines, AIFO will support projects in four areas:

- leprosy and health care
- rehabilitation of the persons with physical and mental disability
- children who are marginalized and at high social risk
- emergency actions.

Fight against leprosy remains the key priority for AIFO. Thus, projects promoting early detection, diagnosis & treatment of leprosy along with disability and rehabilitation activities including disability prevention, physical and social rehabilitation and creating public awareness are a priority. AIFO supports fight against leprosy integrated with primary health care and rehabilitation programmes, with a special focus on more vulnerable groups such as women and children.

AIFO supports implementation of Community Based Rehabilitation (CBR) approach based on the CBR Matrix proposed by World Health Organisation (WHO). In its disability and rehabilitation projects, AIFO places special emphasis on activities related to health sector and those promoting empowerment of persons with disabilities. AIFO places special attention towards persons with leprosy related disabilities and disabling conditions linked with social exclusion and stigma.

For its work with marginalized and high social risk children, AIFO considers as a priority, the projects working with children affected by leprosy, children of persons affected by leprosy and disabled children.

AIFO implements emergency actions (post emergency and reconstruction) only in countries where it is already working and has consolidated national partnerships.

Apart from these four groups of project support, AIFO can also support particularly innovative initiatives.

AIFO manages project-initiatives on the basis of “Country Programmes” and on the basis of “Action Plans”, agreed with local partners, usually for three years. In key countries AIFO Country Coordinators are present. Their role is to ensure correct development of activities, facilitate monitoring and evaluation processes, consolidate local partnerships, identify new priority actions and to balance the actions in terms of typologies and beneficiaries.

During 2009, AIFO supported projects in 26 countries – 13 countries in Africa, 3 countries in Latin America and 10 countries in Asia.
Fighting leprosy and its causes is a priority for AIFO. Leprosy control activities are preferably integrated in Primary Health Care (PHC) Services. These projects are coordinated with International Federation of Anti-Leprosy Associations (ILEP). During 2009, AIFO supported 63 interventions of leprosy control and PHC.

Leprosy diagnosis and treatment

During 2009, a total of 33,143 new cases of leprosy were diagnosed in projects receiving supported from AIFO.

AIFO promotes inclusion of persons affected with leprosy in the CBR programmes. AIFO also supports specific rehabilitation actions including ulcers treatment, physiotherapy, rehabilitative surgery, procurement of material and orthopaedic equipment. In 2009, more than 38 thousand persons with complications due to leprosy benefited from these activities.

AIFO and Organisations of Persons Affected With Leprosy

Promoting the setting up of organizations of Persons Affected with Leprosy and strengthening them for public awareness and advocacy for human rights, is an important goal for AIFO. During 2009, the canonization of Belgian priest, Fr Damien in the Vatican city, gave an opportunity for AIFO together with persons affected with leprosy coming from different countries, IDEA International, and ILEP, to raise awareness about leprosy.

In leprosy endemic countries many local associations of persons affected with leprosy have been constituted. They are the key partners of AIFO in promoting advocacy against stigma and discrimination and for respect of their human rights. In 2009, AIFO collaborated with 4 associations of persons affected with leprosy.

In addition, in 2009 more than 24 thousand persons and their families have benefited from socio economic rehabilitation activities in AIFO supported projects.

Integration of leprosy control in Primary Health Care

In most endemic countries, leprosy programs are part of Primary Health Care (PHC). Often, AIFO supported projects are located in isolated and poor areas where general health services are limited or missing. For this reason, AIFO supports...
leprosy control projects as part of PHC services, including mother and child programmes, malnutrition, other diseases due to poverty including neglected diseases such as, filariosis, African sleeping sickness, yellow fever, leishmaniosis. Community mobilization and awareness for disease prevention and health promotion are important components of AIFO’s work in Primary Health Care.

AIFO’s believes that Right to Health is a part of basic human rights and works in close collaboration with different national and international organizations and networks involved in People’s Health Movement (PHM). In 2009, AIFO supported Primary Health Care activities reached more than 156 thousand persons.

Ensuring quality of services for leprosy control

The past few years have seen significant changes in the world situation of leprosy. The number of new cases of leprosy is now a little less than 250,000 per year. At the same time, the number of new cases of leprosy with significant disabilities in AIFO supported projects is increasing. This means that in these projects, new cases are being diagnosed late. In some countries, referral services for leprosy are not functioning properly.

Integration of leprosy control in Primary Health Care (PHC) services is an important opportunity to ensure that persons affected with leprosy can receive care and services nearer to their homes and in time. However, this requires that PHC staff is trained and has the possibility to work properly. AIFO recognizes the importance of training PHC staff.

AIFO and International Federation of Anti-Leprosy Organisations (ILEP)

AIFO is a founding member of ILEP, composed of 14 international anti-leprosy organizations, that work in close collaboration with Global Leprosy Programme of the World Health Organisation. ILEP plays a fundamental role in ensuring quality and cost effective interventions of leprosy control in a coordinated manner. The Technical Commission of ILEP provides scientific support, especially for training and learning materials and monitoring of global trends of leprosy.

Recently the Technical Commission of International Anti-Leprosy Federation (ILEP) has prepared a document that provides information about minimum activities for ensuring quality of leprosy control services. This document is available from the ILEP website at: http://www.ilep.org.uk/

During 2009, AIFO’s collaborations with ILEP organizations included co-fundings for different projects with AFRF/France, DAHW/Germany, DFB/Belgium, Fairmed/Switzerland, FL/Luxembourg, Fontilles/Spain and SLC/Canada.
Disability and Rehabilitation is a key area of AIFO’s work. In this area, AIFO promotes community-based, multi-sectoral actions of rehabilitation of persons with disabilities, in collaboration with World Health Organization and organizations of IDDC (International Disability and Development Consortium). During 2009, AIFO supported 24 interventions of rehabilitation of persons with disabilities.

AIFO privileges Community Based rehabilitation (CBR) strategy, based on principles of participation, dignity and inclusion, involving all the groups of persons with disabilities and promoting actions in five sectors as explained in the CBR Matrix – health, education, occupation, social, empowerment. AIFO has a special interest in health sector and for persons with disabilities due to leprosy and other marginalising conditions.

In 2009, more than 135 thousand persons with disabilities, among them about 29% children, have benefited from AIFO supported Community Based Rehabilitation initiatives.

AIFO is a founding member of IDDC, that brings together international organizations working in the field of disability and cooperation. During 2009, there were different collaborations with IDDC (International Disability & Development Consortium) including participation in CBR Task group, emergency task group and EU task groups. Through the CBR Task Group, AIFO has played an active role in the preparation of the New CBR Guidelines that will come out in 2010, as a joint WHO, ILO, UNESCO and IDDC publication. More information about IDDC’s work is available on its website http://www.iddcconsortium.net/

In 2010, a new IDDC project “Making Development Inclusive” has been initiated, in which AIFO is also collaborating. This initiative will provide different training materials such as practical manual on how to include persons with disabilities in project cycle management.
In 2009, AIFO supported 13 initiatives related to marginalized children. Together these projects provided activities for health care, education and food-supplements, and reached around 31 thousand children.

AIFO has signed the Framework Partnership Agreement with Humanitarian Office of European Commission (ECHO) for the period 2008-2012.

During 2009, the most important emergency support projects managed by AIFO were in Goma/Democratic Republic of Congo (civil war) and northern part of Vietnam (following the Kam-muri cyclone).
Co-financing of projects
WITH OTHER PARTNERS

In 2009, 3 projects of AIFO received co-financing from Italian Foreign Ministry: Tocantins/Brazil, six provinces of Vietnam and Yunnan/China.

One AIFO project in Mongolia received co-funding from European Union. Additional three projects (2 in India and 1 in Kenya) received co-funding from Italian Bishops’ Conference.

Ten AIFO projects in different countries including Bangladesh, China, Egypt, India, Kenya, Liberia, Mozambique & Nepal, received co-funding from regional, provincial and local Governments in Italy. Other co-financing through ILEP member organizations and IDDC members have been already mentioned.

Collaboration with other non-governmental organizations included Disabled Peoples International (DPI/Italy), Educaid/Italy, Solidarietà e Servizio/Italy and Mãos Unidas/Portugal.
Training and capacity building

In February 2009, AIFO coordinated the organization of 3 International training workshops on leprosy, mental health and Convention for the Rights of Persons with Disabilities (CRPD), during the First CBR Congress held in Bangkok. People from 30 countries participated at these workshops. Reports of these workshops are available on the AIFO website: http://www.aifo.it/english/resources/online/books/cbr/cbr.htm

During 2009, AIFO participated in the WHO meeting on new Global Strategy for Leprosy Control for the period 2011-2015, and collaborated with Global Leprosy Programme of WHO through the ILEP Technical Commission.

AIFO continues to support the International Leprosy Mailing List, managed by Dr. Salvatore Noto. The archives of this electronic mailing list are available on AIFO website http://www.aifo.it/english/ and through a blog: http://leprosymailinglist.blogspot.com/

AIFO also hosts Asia Pacific Disability and Rehabilitation Journal on its website at http://www.aifo.it/english/resources/online/apdrj/journal.htm

AIFO’s collaboration with the World Health Organisation (WHO)

AIFO has a long tradition of collaboration with the World Health Organisation (WHO). Since, 1998 AIFO is in Official Relationship with WHO. At present, AIFO is discussing a Joint Plan of Work for the 2010-2015 period with Disability and Rehabilitation team of WHO (WHO/DAR). This Joint Plan of Work, includes the following areas of collaboration:

- Support for the promotion, dissemination and implementation of the World Report on Disability.
- Support for promotion, dissemination and implementation of the new Community-based rehabilitation guidelines.
- Support for the organization of the first World CBR Congress in 2011-12.
- Continue and complete the multi-disciplinary and multi-approach centered CBR research project in Karnataka (India).

AIFO is exploring collaboration with Department of Mental Health and Substance Abuse (MHS) of WHO on human rights of persons with mental illness and CBR. AIFO is also collaborating for the presentation of a new report by WHO/MHS and Mental Health and Poverty Project called “Mental Health and Development”.

Aifo in the world
AIFO’s Research Activities

AIFO’s research support is geared towards field research, especially in terms of action research that improve impact of AIFO’s work.

In 2009, AIFO initiated an important research initiative looking at the impact of Community-based Rehabilitation (CBR) in Mandya district in India, called S-PARK/CBR Research. This initiative involves different partners including WHO/DAR, different universities, international experts and DPI. This research is expected to conclude in 2012 and is geared towards improving our understanding of implementation and challenges of community-based rehabilitation. A key component of this project is Emancipatory Research, where persons with disabilities are playing key role in evaluating impact of CBR programme on their lives.

New researches are also being planned in Mongolia and Liberia CBR projects. More information about the CBR related research and learning resources are also available through a blog: http://aifo-cbr.blogspot.com/.

AIFO In Italy

In 2009, In Italy AIFO had 66 official groups with 1,083 delegates. Important achievements in 2009 included official recognition of AIFO from Ministry of Education for training of Italian school teachers on issues of inter-culture and development cooperation.

AIFO has many other activities aimed at the AIFO groups, delegates, collaborators and general public in Italy such as organization of summer camps, seminars and conferences, training courses, organization of study visits from Italy to AIFO supported projects in Mongolia and India. AIFO’s biannual national conference was also organised in 2009.

COUNTRY OFFICES OF AIFO

During 2009, there were five country coordinator offices of AIFO based in Bangalore/India, Goiania/Brazil, Kinshasa/Democratic Rep. of Congo, Ulaan Baatar/Mongolia and Hanoi/Vietnam.

In addition, there were other country offices of AIFO with staff for project management in Bissau/Guinea Bissau, Beijing/People’s Republic of China, Nairobi/Kenya and Tocantins/Brazil.
# Annual Balance 2008 and 2009

## ACTIVE

### FIXED ASSETS

**Non Tangible Assets**
- Concessions, licences, rights: 19,957 2,218

**Tangible Assets**
- Land & Building: 951,904 1,280,000
- Equipment etc.: 16,346 25,742
- Other assets: 11,514 17,555

### Financial Investments
- Participations: 9,984 8,566
- Bank titles as guarantee: 0 0

### Total Assets
- 1,009,705 1,334,082

## CURRENT ASSETS

### Final residuals
- Promotional materials: 12,340 21,183

### Short-term credits projects
- Credits from other associations: 519,679 560,850
- Credit from lt. Foreign Ministry: 495,547 799,186
- Credit from Intern. Bodies: 146,873 195,159
- Credit from local bodies: 91,827 74,928
- Credit for contributions through groups: 40,366 32,016

### Long term credits projects
- Credits from other associations: 216,850 58,350
- Credits from Italian For. Min.: 337,391 337,391
- Credits from Inter. Bodies: 223,264 413,732
- Credits from local bodies: 0 20,000
- Other credits: 1,695 2,552
- Other credits: 120,160 121,592

### Testaments
- Testaments and mat. Donation: 914,801 1,591,315

### Non fixed financial activities
- Investments: 1,304,997 991,782

### Available cash
- Cash box: 37,831 43,636
- Bank & post: 1,457,689 929,116

### Total circulating income
- 5,921,110 6,192,789

### Carry overs
- 20,660 16,503

### TOTAL ACTIVE
- 6,951,476 7,543,373

## PASSIVE

### NET PATRIMONY

**Free Patrimony**
- Available fund: 1,041,340 2,759,483
- Re-evaluation reserve: 848,958 848,958
- Advance/loss of management: 196,500 833

**Bound patrimony**
- Patrimony for projects: 1,983,237 1,114,053
- Bound reserve: 600,000 600,000

### Total net patrimony
- 4,670,036 4,473,535

### Risk fund and costs
- Misc. fund: - 10,000
- Risk fund project accounting: 39,027 47,617

### Total risk fund and costs
- 39,027 57,617

### Staff social fund
- 430,263 413,459

### Debts
- Suppliers: 122,739 135,994
- Other debts: 126,503 110,321
- Debts towards providence inst.: 47,985 46,850
- Tax debts: 44,797 35,260

### Total debts
- 342,024 328,425

### Passive carryovers
- 1,470,125 2,270,337

### Total passives
- 2,281,440 3,069,838

### TOTAL PASSIVE & NET PATRIMONY
- 6,951,476 7,543,373

## Order accounts
- Funds to be sent to projects (short): 3,017,837 2,499,766
- Funds to be sent to projects (long): 591,496 1,059,456
- Funds for Dev Edu. (short): 48,376 41,217

### Total commitments for projects
- 3,657,708 3,600,439

### Guarantees given
- Titles as bank guarantees: - -

### Guarantees received
- Received from third parties: 166,574
- Total guarantees received: 166,574
### Beneficiaries of AIFO Supported Projects (2009)

<table>
<thead>
<tr>
<th>Kind of Activities</th>
<th>Africa</th>
<th>Latin America</th>
<th>Asia</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leprosy related activities</td>
<td>2,454</td>
<td>28,918</td>
<td>64,248</td>
<td>95,620</td>
</tr>
<tr>
<td>Primary Health Care</td>
<td>32,877</td>
<td>-</td>
<td>123,686</td>
<td>156,553</td>
</tr>
<tr>
<td>Community-based Rehabilitation</td>
<td>6,394</td>
<td>314</td>
<td>128,620</td>
<td>135,328</td>
</tr>
<tr>
<td>Community development</td>
<td>897</td>
<td>-</td>
<td>21,783</td>
<td>22,680</td>
</tr>
<tr>
<td>Marginalized children</td>
<td>2,170</td>
<td>200</td>
<td>28,894</td>
<td>31,264</td>
</tr>
<tr>
<td><strong>BENEFICIARIES 2009</strong></td>
<td><strong>44,782</strong></td>
<td><strong>29,432</strong></td>
<td><strong>367,231</strong></td>
<td><strong>441,445</strong></td>
</tr>
</tbody>
</table>

#### Expenditure according to type of project

- **Leprosy related activities**
- **Primary Health Care**
- **Community-based Rehabilitation**
- **Community development**
- **Marginalized children**
- **Other**

#### Expenditure according to geographical areas

- **Africa**
- **Latin America**
- **Asia**
- **Italy**
- **Multi-country**
- **Other**

### Expenditure for kind of activities

- **Leprosy**
- **Rehabilitation**
- **Children**
- **Emergency**
- **Other**