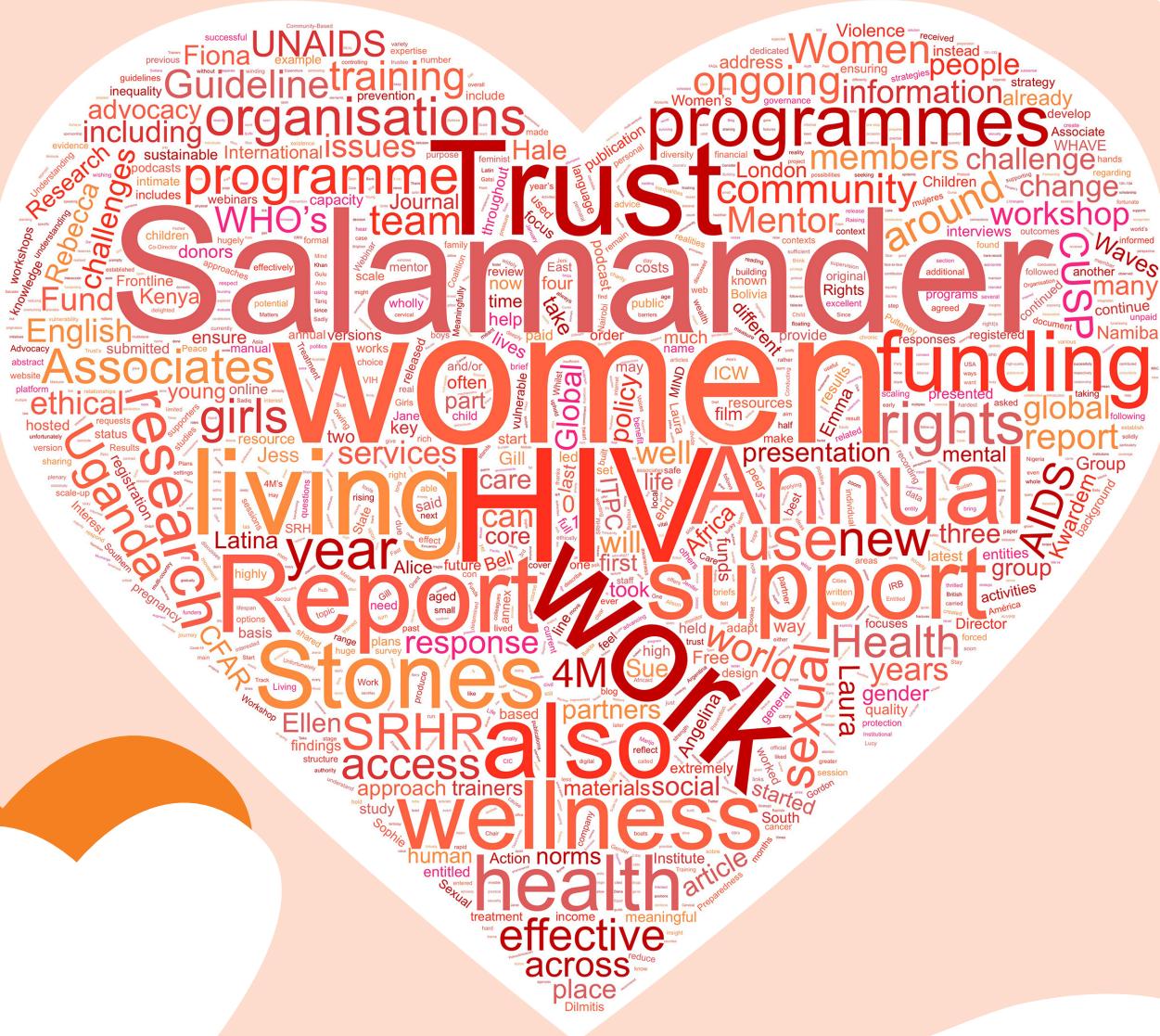


Salamander Trust Annual Report

2019-2020



Salamander Trust

ON THE RIGHT(S) TRACK

The Salamander Trust

A company limited by guarantee, registration number 06734362

Registered charity number: 1143381

ANNUAL REPORT

1 April 2019 – 31 March 2020

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www.salamandertrust.net

www.steppingstonesfeedback.org

Twitter: [@SalamanderTrust](https://twitter.com/SalamanderTrust)

Facebook: [Salamander Trust](https://www.facebook.com/SalamanderTrust)

Vimeo: <https://vimeo.com/salamandertrust/albums>

Our objectives and activities

The charitable company's purposes and aims for public benefit, as set out in the objects contained in its memorandum and articles, which are consistent with the purposes for which the organisation was established, are:

- ◆ The protection and promotion of good health, particularly in those marginalised by societies worldwide as a result of their gender, HIV status or sexual or reproductive health by:
 - a) Conducting research and disseminating the useful results of that research;
 - b) Increasing awareness and understanding amongst health professionals, service providers and the public of:
 - the impact of HIV on the general health of women and children
 - the HIV prevention, treatment, care and support continuum
 - the advantages of multi-sectoral and participatory approaches to HIV, sexual health and development;
 - c) Providing training and developing training tools to strengthen services and support to women living with HIV.
- ◆ The promotion of human rights (as set out in the Universal Declaration of Human Rights and subsequent United Nations Conventions and Declarations) throughout the world by:
 - a) Conducting research into human rights issues and disseminating the useful results of that research
 - b) Raising awareness of human rights issues, in particular where they arise from HIV and AIDS policies
 - c) Promoting public support for human rights.

WELCOME to our latest annual report 2019-2020

Introduction

Summary

This year, as explained in last year's annual report (see below), we have started to wind down the operational side of Salamander Trust as its Director prepares for retirement. We have concurrently also been thrilled to support the establishment of three new entities, which are taking over, building on - and will greatly augment - the work that Salamander has been doing over the past 12 years.

These three new entities are Communicating for Action and Results in Uganda (CFAR-Uganda) trainers' platform, which was registered as a Community-Based Organisation in Uganda in April 2019; the 4M Mentor Mothers Network, which was registered in its own right as a CIC in July 2019; and the Making Waves Network, which is an informal international network of women living with HIV and their allies, also committed to advancing the sexual and reproductive health and rights (SRHR) of women living with HIV around the world. We describe more about the growth of these entities below.

Overview and recap of our approach

Salamander's work this last year can continue to be broken down into three key areas of activity: a gendered, rights-based approach to 1) training (materials development and support), 2) research and 3) advocacy, based on community knowledge, in line with our strapline.

The Salamander Trust strapline is “On the right(s) TRACK”, where TRACK stands for Training, Research, and Advocacy, based on Community Knowledge”

Extract from our 2018-19 report:

“Our Future Plans.....

“Alice Welbourn’s retirement plans are still in place and the work of Salamander Trust is geared towards finishing off workstreams and/or handing over the work, in more formal ways, to the excellent Associates with whom Salamander has had the great privilege to work. These include work to establish the 4M Mentor Mother programme as a separate independent Community Interest Company [company registration took place in July 2019]; and to establish CFAR (Communicating For Action and Results) Uganda as an independent Community-Based Organisation [company registration took place in April 2019]. We will be able to report more fully on these developments in our next annual report.

After this decade, there is a very strong structure in place, with our group of highly gifted and talented Associates at the helm. Our training work, our research and advocacy, all solidly grounded in community knowledge and expertise, will continue, guided by Salamander’s vision and in the safe hands of our Associates’ stewardship in their own new organisations, as described above.

As with all plans, these are taking longer than expected. Whilst we are hugely grateful to all our funders, our main ongoing challenge is sustained funding, especially core funding, which is a huge chronic challenge for the women’s rights movement around the world. We hope and trust that this report offers insight into what has already been achieved – and also into how much more could be achieved in future with sufficient resources.”

Salamander Trust Annual Report, 2018-2019

START FREE STAY FREE AIDS FREE

A SUPER-FAST-TRACK FRAMEWORK FOR ENDING AIDS AMONG CHILDREN, ADOLESCENTS AND YOUNG WOMEN BY 2020



UNAIDS lifecourse approach to an effective global HIV response

Our work happily [complements](#) UNAIDS' "Start Free, Stay Free, AIDS Free" lifecourse [approach](#) through our 4M programme (Start Free), our Stepping Stones & Stepping Stones Plus programme (Stay Free) and our Stepping Stones with Children programme (AIDS Free).

The aim of all these activities is to protect, promote and enhance the health and rights of people, in line with our objectives for the public benefit. All three of these areas are woven throughout our work streams.

All of our work is based on a gendered, rights-based perspective to uphold the sexual and reproductive rights of women especially in all we do. This recognises and promotes the importance of ensuring that the lived experiences of those most affected by an issue are deeply embedded in policies and programmes, so that they can be effective, ethical and sustainable. Our work focuses most on the invisible, intangible issues which are often hardest to see from outside, and hardest to measure or to address with conventional top-down, bio-medical approaches. We focus on ending violence against women and against children, on reducing resulting mental health challenges, and on advancing and promoting quality of life, across the life span, so that whole communities are happier, healthier and safer.

Our discrete work areas

1. Stepping Stones-related work

Our Stepping Stones programmes are known to reduce intimate partner violence, as well as violence against women and girls (and boys) in general. With a reduction in violence comes an improvement in mental health and overall quality of life and capacity to engage in education or work, to take medications, if needed, and to engage more wholly in community life in general. It is now widely recognised that violence against women increases women's vulnerability to HIV by a factor of 1.5. It is still less well known, but equally important, that violence against women also increases upon an HIV diagnosis. Stepping Stones has, on purpose always worked with women and men, girls and boys, to build closer understanding and relationships across genders and across generations, both to prevent HIV and violence against women and girls (VAWG) and boys; and to increase

respect, care and support of those in a community who already have HIV, across the lifespan.

We are glad to report that Stepping Stones is named in two key WHO strategy documents related to violence reduction. WHO's [RESPECT](#) strategy highlights programmes which reduce violence against women. WHO's [INSPIRE](#) strategy highlights programmes which reduce violence against children. Interest in the Stepping Stones programmes has remained at a high and our work has been as busy as ever.

Salamander Associates Ellen Bajenja and Sue Holden led this workstream, with IT and communications support from Laura Pulteney and additional background support from Gill Gordon.

CFAR-Uganda registration and development



The team who have created Communication For Action and Results Uganda (CFAR-Uganda) have a long track-record as highly talented and experienced trainers in the Stepping Stones, Stepping Stones for Peace and Prosperity and Stepping Stones with Children (StStWC) training programmes,

as well as other community participatory methodologies for addressing HIV- and AIDS-related issues, such as access to health treatment and support.

Over the years, with cut-backs to income, trainers have increasingly found

themselves being made redundant and having to turn to self-employed consultancies. This, combined with an ongoing and increasing pressure to cut budgets, sessions, peer groups and training schedules, has unfortunately undermined their capacity to continue to offer high quality training to those wishing to implement *Stepping Stones* to the standard required for its ethical and effective use.

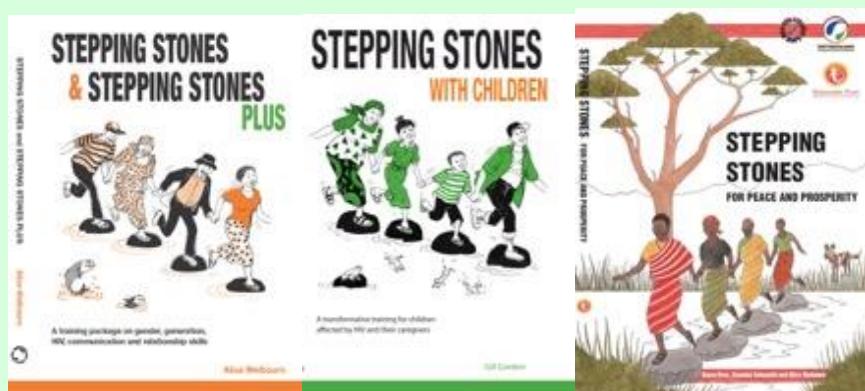
In response, CFAR-Uganda has decided to set up its own trainers' resource and information platform and to take over

the role from Salamander as the go-to global resource hub for *Stepping Stones*-related information sharing, support and advice.

In April 2019, CFAR-Uganda was registered as a community-based organisation in Uganda.

In July 2019, we supported Makerere University to apply to the Mind and Life Institute Peace Grant, to adapt and use *Stepping Stones for Peace and Prosperity* in Gulu, Uganda.

Stepping Stones-specific activities



There has been continued interest in the *Stepping Stones* programme from organisations wishing to use it and wanting to learn more about how to do so. Despite this, we have had ongoing core funding challenges in running the *Stepping Stones* information and resource hub, and in supporting partners to find funds to run the programmes in the way intended.

For instance, in April 2019, we submitted an application for CFAR to use *Stepping Stones with Children* in Uganda to DFID's Community Partnership Grant. This was not successful. When we asked for feedback, we were informed that the reviewer had decided that not enough participants would

benefit from the programme – even though the latest research from the DFID-funded What Works programme highlights the greater effect of in-depth work, such as ours, compared to less comprehensive programmes with more participants. We are often challenged by this Catch-22 of applying for funds to do what works best with the number of participants that the funding ceiling will allow. On the whole, donors want to prioritise results measured by quantity of individuals reached by a programme, rather than the quality of what they learn. Unfortunately, the evidence for what works on a sustainable basis does not justify this approach (see more in the CUSP section below).

We have also been involved in country-specific adaptation processes. For example, in April 2019, CFAR Uganda trainers held a small 2-day meeting to review *Stepping Stones* with Children (StStwC) content in light of the need to adapt it to the Ugandan context. This was followed by subsequent work to revise 5 sessions.

In May 2019, we responded to requests from WHO's INSPIRE team and the ODI's ALIGN platform respectively. We compiled information for them about *Stepping Stones* and how it should best be adapted to make it most effectively and ethically used.

Another challenge of funding is that some organisations receive so many applications that they do not have the capacity to give individual feedback. For example, in September 2019, Salamander submitted an application to ViiV Healthcare's Positive Action for Girls and Women Programme for CFAR to use *Stepping Stones*. This was unsuccessful, and there was no scope for application-specific feedback.

Each funding application is a highly intensive process, demanding many hours of background preparation and high-level English précis-writing skills to fit into minimal word or character counts. Larger organisations have dedicated paid fund-writing teams, who are writing multiple

applications. These are often paid for by their sponsorship programmes, or by reserves built up from interest over the years. Smaller organisations such as ours rarely have these options and instead have to multi-task, draining our much more limited funds and our capacity to work on our core programming.

In October 2019, Salamander supported CFAR to submit an application to Amplify Change to use StStwC and to strengthen CFAR. We were due to hear the outcome of this application in March 2020. However, the outcome has been delayed, because of COVID-19.

In October 2019, Ellen Bajenja presented a paper entitled “*Politics or evidence: whose perspectives count? Key challenges experienced in scaling-up Stepping Stones programmes*” at the 3rd International Workshop on HIV and Adolescence, in Nairobi, Kenya. This paper was presented in a plenary session on the first afternoon of the workshop. It highlights the drawbacks of using our materials in ways which do not reflect the structure or principles of the original programme. These include cutting out sessions, only including girls aged 10-14, or only allowing people who do not (yet) have HIV to take part. To access the presentation, click [here](#).



Image from Ellen Bajenja's presentation at 3rd International Workshop of HIV and Adolescence, Nairobi, 2020 © Salamander Trust 2019

In November 2019: CFAR Uganda trainers held a week-long orientation training workshop to familiarise participants with the use of StStwC. The majority of the participants were young people on purpose. This is a way of ensuring continuity of the *Stepping Stones* methodology in Uganda, as younger participants become trained as facilitators of the process.

Also in November, CFAR submitted an abstract and scholarship application to the Social Behaviour Change and Communication Conference, about the challenges and opportunities facing those seeking to scale up *Stepping Stones*. This was not successful.

In November 2019, Mind and Life Institute informed Makerere University that the application had been successful. We were thrilled to hear this.

In January 2020, we supported Makerere University with co-development of research tools, for submission to Makerere University Institutional Review Board (IRB) for ethical clearance for the programme in Gulu. Ideally, we would have liked to work with community members themselves to develop research questions, in line with our work on participatory approaches to evaluation (see for example our [ALIV\[H\]E framework](#) work). But the formal IRB process often makes this another Catch-22, whereby programmes have to have all the research process authorised by the IRB before funds are released and before [permission](#) is given to start work in a community.

In February 2020, CFAR & Salamander produced two leaflets about *Stepping Stones* for Global Fund advocates in Uganda. The Global Fund for AIDS, TB and Malaria (Global Fund) lists *Stepping Stones*

and SASA! as two potential programmes for use with adolescent girls and young women in different countries and identifies these as a high priority in the Global Fund [technical brief](#) (October 2019). While we appreciate having the potential value of our materials recognised in this way, there is no immediate or straightforward funding available for either programme's originators to support those interested in applying to the Global Fund to use the programmes. This poses an ongoing challenge to us, since countries may be (and already have been) funded to use our materials without being able to access our support in how best to adapt them for effective, ethical and sustainable use in their specific contexts.

In February 2020, Ellen and her CFAR-Uganda colleague, Jude Okaje, conducted a *Stepping Stones* workshop for The Asia Foundation in Timor Leste, as part of the Foundation's plans to adapt the programme for this context.

In February and March 2020, together with *Stepping Stones* colleagues across East and Southern Africa, we worked on an article for the AIDS Care Journal (submitted in May 2020). This highlighted and further explored some of the issues addressed in the Nairobi Workshop presentation last October.

During this time, we also conducted a search for a film producer to make a film about the original community where the first *Stepping Stones* workshop took place in 1994. We successfully identified Zippy Kimundu, an award-winning film-maker from Kenya, in March 2020.

We also sought a substantial funding contribution of \$15,000 for this film from UNAIDS, which is 1/3 of the film's budget (this was granted in May 2020).

Throughout the year, we conducted ongoing monitoring of potential fundraising opportunities for ourselves, and we also shared these with our partners across East and Southern Africa. We conducted numerous zoom calls with various international organisations who were interested in using the materials; and continued to respond to the constant stream of requests for information and technical support.

We also attempted to carry out follow-up research into the health of the child *Stepping Stones* with Children participants who are PASADA clients in Dar es Salaam, Tanzania. Unfortunately, this research resulted in insufficient data for a statistically valid comparison. So we decided to pursue some personal interviews with them instead (to be published later in 2020).

During the course of the year, we also discovered the existence of different versions of *Stepping Stones* in circulation which unfortunately miss out on key elements of the programme, owing to the pressure of cuts, as described above. We have ongoing concerns that these versions will not be effective and may even cause harm to those involved. We have conducted ongoing research to understand how they have been used, to produce comparisons between the different versions, and to clarify our concerns with the relevant organisations (most of whom have been funded by PEPFAR). For more on this, see the CUSP section below. This research resulted in a *Stepping Stones* FAQs document, published later in 2020.

We are very grateful to Virgin Unite for funding some of the CFAR-Uganda training and orientation work in Uganda.

Work with UNICEF and partners on Early Child Marriage

In May 2019, an article was published in the Journal of Adolescent [Health](#). Entitled: "Understanding the Relationships Between HIV and Child Marriage: Conclusions from an Expert Consultation", this is a summary statement from a consultation hosted by UNICEF and Girls Not Brides, who convened global experts from academia, civil society, and bilateral and multilateral institutions for a consultation that aimed to better understand what is and what is not known about this relationship, as well as to identify priorities for policies and programs. Alice took part in this consultation, on the basis of all our experiences with *Stepping Stones*, and was a co-author of the article. The article states: "Meaningfully involving girls and young women throughout policy and program design, implementation, and

evaluation will help ensure that programs, policies, and outcomes are grounded in the realities of girls' lives and are achieved effectively and ethically." The article concluded: "In sum, as the global health and development communities increasingly focus on adolescent girls, we recommend that—whether they aim to stem the HIV epidemic, end child marriage, and/or achieve other positive outcomes for this critical population—they address the underlying, structural inequalities that drive girls' vulnerability, and that they invest in multisectoral, rights-based, gender-transformative policies and programming that respond to the holistic and multifaceted nature of girls' lives."

Community for Understanding Scale-Up



The Community for Understanding Scale Up (CUSP) is a group of nine organizations working across 3 regions with robust experience in scaling social norms change methodologies in various contexts—the Center for Domestic Violence Prevention (CEDOVIP), Intervention with Microfinance for AIDS and Gender Equity (IMAGE), the Institute for Reproductive Health at Georgetown University, Oxfam, Puntos de Encuentro, Raising Voices, Salamander Trust, Sonke Gender Justice, and Tostan.

We have continued to meet together by zoom monthly over the year. Ellen Bajenja and Alice Welbourn either contributed to or took part in the following materials and events:

In May 2019, we had an article in the Journal of Sexual and Reproductive Health Matters (SRHM) published. It discusses the challenges and possibilities around effective and ethical scale-up of gender transformative social norms change programmes, such as ours. The

discussion raises political questions around the current donor landscape, including those positioned to assume leadership to take such methodologies to scale, and the current evaluation paradigm to measure social norms change at scale. Its citation is Goldmann L, Lundgren R, Welbourn A, Gillespie D, Bajenja E, Muvhango L & Michau L (2019) “On the CUSP: the politics and prospects of scaling social norms change programming”, Sexual and Reproductive Health Matters, 27:2, DOI: [10.1080/26410397.2019.1599654](https://doi.org/10.1080/26410397.2019.1599654)

In May 2019, there was a [presentation](#) by other CUSP members at a DFID Conference at Wilton Park, in the UK, on Building a Shared Agenda on Prevention of Violence Against Women and Girls.

In May 2019, the UN Trust Fund for Women hosted an online presentation and discussion with the [CUSP](#) on social norms change initiatives for the prevention of violence against women and lessons for effective, ethical

programming and scale-up for donors and implementing partners. The [recorded webinar](#) is here.

On 25 June 2019, CUSP took part in a webinar with WHO and the Global Fund about effective scale-up of social norms change programmes.

In June 2019, there was a regional workshop, in Spanish, on prevention of violence against women and girls in Latin America and the Caribbean. Other CUSP members presented on CUSP's work at this. To access this presentation, click [here](#).

In June 2019, all CUSP members also published a blog in the SRHM Journal, entitled "The politics and possibilities of [scale](#)". This blog, a follow-on from our article, discusses the challenges we are facing around how 'meaningful impact' is measured in the 'international development' arena. We conclude:

"because politicized, locally rooted feminist organisations are best placed to foster positive change, organizations may need to rethink their strategy to go wide, and instead, go deep."

In October 2019, several CUSP members including Ellen Bajenja attended the SVRI (Sexual Violence Research Institute) Forum, held in Cape Town, South Africa. Our CUSP abstract submitted to this was accepted for a plenary session. Ellen Bajenja co-presented our abstract together with another CUSP member (Tina Musuya of CEDOVIP). This session discussed the opportunities and challenges of effective and ethical scale-up of gendered social norms change programmes, and Ellen shared our Stepping Stones experiences. To access this presentation, click [here](#).

"....few programs adequately prepare the world's estimated 1.8 million children aged younger than 15 years already living with HIV[20] to address issues related to sexuality and marriage. Meaningfully involving girls and young women throughout policy and program design, implementation, and evaluation will help ensure that programs, policies, and outcomes are grounded in the realities of girls' lives and are achieved effectively and ethically[21]. Journal of Adolescent Health, [2019](#). [Reference 21 here is to a CUSP collection of case [studies](#)]

2. 4M Mentor Mothers Work



Overview

The 4M Mentor Mothers team consists of Salamander Associates Longret Kwardem, Rebecca Mbewe and Angelina Namiba (in alphabetical order). 4M stands for My health, My choice, My child, My life. This name reflects the ethos of 4M, which focuses primarily on the sexual and reproductive health and rights (SRHR) of women living with HIV as they go through the pregnancy journey, in line with the WHO 2017 Guideline on this topic. This is in contrast to much global perinatal work, which focuses instead primarily on ‘eliminating Mother-to-Child-Transmission’, often instilling a sense of blame and shame in the women concerned in the process.

The 4M programme grew out of an earlier project, called ‘From Pregnancy to Baby and Beyond’, designed to provide peer mentor mother support to women living with HIV as they go through the pregnancy journey. This was developed to work in London by Angelina Namiba, with support from Positively UK.

In 2016, with support from Salamander Trust, the programme became known as 4M and funding was found for training

workshops to take place across mainland UK, hosted by local HIV organisation partners. In 2017, these were followed up with two extra training workshops each, in Kenya and Uganda, with respective community partners there. Meanwhile in the UK, a national 4M training of trainers workshop was held, and the new 4M Mentor Mothers network was formed.

The UK work developed further and has grown from strength to strength. The registration of 4M as its own Community Interest Company, co-directed by the same three Salamander Associates, has been the logical next step in its growth and establishment as the recognised UK civil society authority on all aspects of perinatal care of women living with HIV. The British HIV Association has recommended peer mentor mother support as part of its pregnancy guidelines, on the basis of 4M’s work; and, while longer-term funding, especially core funding, proves an ongoing challenge, the co-directors are increasingly being called upon to present information about 4M’s work in a variety of different fora.

4M programme activities

1) Workshops

4M Co-Director Rebecca Mbewe conducted a series of 4M workshops, hosted by different HIV organisations. These were as follows:

Manchester - George House Trust	July 2019
London - Africa Advocacy Foundation (AAF)	August 2019
Brighton - Sussex Beacon	January 2020

2) Webinars

4M conducted [webinars](#) 8, 9 and 10 during the year. These were as follows:

4M Webinar no. 8 '**Becoming Trauma Informed**': September 2019. Dean Hall from Greater Manchester Women's Support Alliance and Kate Fraser from Women in Prison presented information on what is trauma, what can cause it, how it can affect women and men

4M Webinar no. 9 November 2019. '**Women's self-inclusion into employment and business**'. Leadership and Development Coach Amina Chitembo led an excellent webinar on this important topic for all the Mentor Mothers. To access this webinar, [click here](#).

differently, and the consequences for women living with HIV. This is so important for all organisations seeking to develop an effective and ethical response to care and support for women living with HIV around the world. To view the webinar, [click here](#).

4M Webinar no. 10 February 2020. "**Women, HIV and the menopause**". 4M steering group member Dr Shema Tariq of University College, London, Institute for Global Health, discussed the finding from the PRIME Study. This webinar recording is available [here](#).

3) Research

In July, 4M Co-Director Longret Kwardem, together with masters' student Kiersten Hay presented a [poster](#) about the 4M group's use of WhatsApp at the AIDS Impact Conference. This was followed by the publication of an article

on the same topic, entitled: ““Support for the supporters”: a qualitative study of the use of WhatsApp by and for mentor mothers with HIV in the UK” in AIDS Care Journal in March 2020.



Kiersten Hay (left) and Longret Kwardem (right) and colleagues by the poster © Salamander Trust 2019

4) Training of Trainers' manual and other written material



4M:
My health,
My choice,
My child,
My life

Developing a national network of Mentor Mothers to support women living with HIV through pregnancy

MENTOR MOTHER TRAINERS' GUIDE

to train other women living with HIV as Mentor Mothers

by Angelina Namiba

Volume 1

4M Network
My health, My choice, My child, My life

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4M:
My health,
My choice,
My child,
My life

Developing a national network of Mentor Mothers to support women living with HIV through pregnancy

by Angelina Namiba

Volume 2

**SECTION E AND F:
RESOURCES
and
USEFUL REFERENCES**

This volume is to be used with Volume 1, which is available for download once you complete this form: <https://tinyurl.com/4mmanualpermissionsform>

All the resources in this section are for your use in your own mentor mother training programme. Most will need to be adapted for your own context. Please always cite this manual (as below) when making use of these materials and/or reporting about them, in accordance with standard international copyright law.

4M Network
My health, My choice, My child, My life

Salamander Trust
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This manual, written by Angelina Namiba, was published in October 2019. It consists of two volumes. Volume 1 contains the full workshop guidance. Volume 2 provides all the resources needed to run the workshop, as well as links to additional reading

materials. Both volumes are freely available to download from the website. The manual has received excellent reviews, which can be read [here](#). It is currently undergoing review for endorsement by UNAIDS.



Angelina Namiba and Rebecca Mbewe en route to a training workshop, © Salamander Trust, 2019

In March 2020, we produced a concertina leaflet, listing key resources regarding mental health for Mentor Mothers and those in their care to access. We also completed an annex to the manual, which contains guidance for a workshop that focuses on mental health. This was written

by Rebecca Mbewe. Awareness of the importance of mental health and the challenges it can raise has been gaining increasing prominence during 4M's workshops and webinars and supervisory work this year, thanks to the funding from MIND.

5) Talks / presentations

In September 2019, 4M Co-Director Rebecca Mbewe introduced the Mayor of London, Sadiq Khan at the launch of Fast Track Cities London.

In March 2020, Rebecca spoke at an event at the House of Commons hosted by the All Party Parliamentary Group on AIDS.



Rebecca Mbewe with Sadiq Khan at the London Fast Track Cities Launch
© Salamander Trust 2019

6) Strategic planning

In November 2019, 4M conducted a strategic planning day. This was led by consultant Elisabeth Crafer, and was attended by

several 4M Steering Group members, as well as 4M core team members and Mentor Mother peer researchers.

7) Ongoing work

The 4M programme team provide ongoing supervision and support to the 4M mentor mothers.

4M Steering Group

We are, as always, very grateful to our 4M Steering Group members, for all their ongoing support for the work.

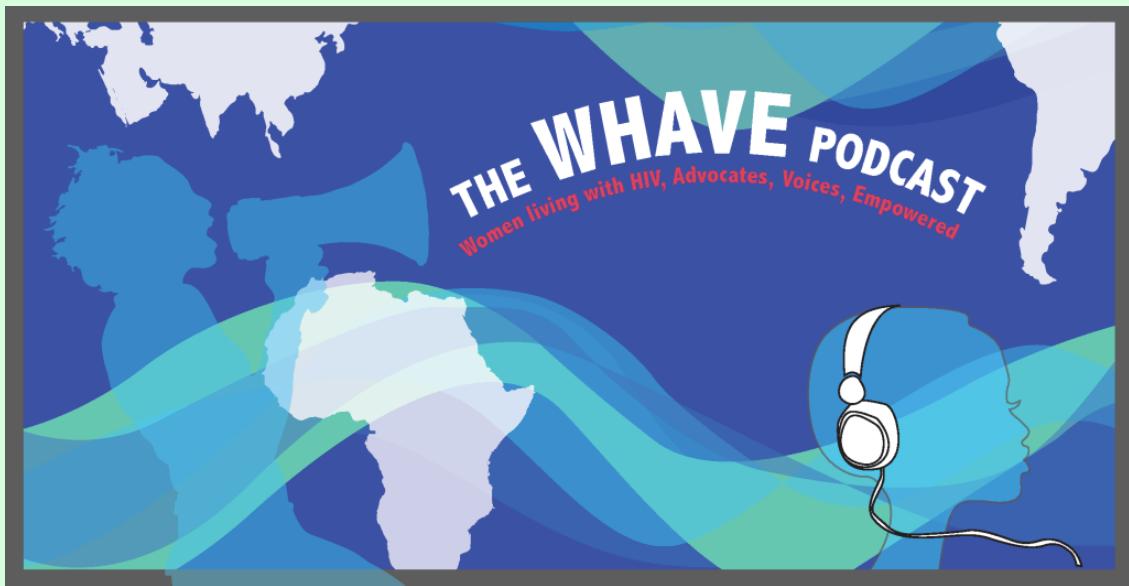
The Steering Group currently includes: Jane Anderson; Susan Bewley; Laura

Byrne; Rageshri Dhairyawan (Chair); Gill Gordon; Fiona Hale; Vicky Johnson; Longret Kwardem; Rebecca Mbewe; Angelina Namiba; Shema Tariq; Pat Tookey; Alice Welbourn; and Alison Wright.

4M donors

We are also very grateful to MAC AIDS Fund and to MIND Charity for funding our work this year.

3. On the WHAVE Podcasts



To access all our podcasts and related briefs, click [here](#).
All are available on spotify, itunes and google.

The following podcasts, feature interviews on a rich variety of themes with dynamic women living with HIV in many different contexts.

They were produced by Salamander Associate Fiona Hale.



#7 (English) Bakita Kasadha, UK. Research with us, not about us: meaningful involvement of people living with HIV.

#8 (English) Bakita Kasadha, UK. Undetectable = Untransmittable: transforming the way we feel about ourselves as women living with HIV.



#9 (English) Lucy Wanjiku Njenga, Kenya. A success story for collective campaigning: overturning the ‘restriction’ on Dolutegravir for women of reproductive age.



#10 (English) Rahayu Rahmat, Malaysia. Women living with HIV, sex workers and women who use drugs: challenges in accessing sexual and reproductive health and rights (SRHR).



#11 (Spanish) Mariana Iacono, Argentina. Women living with HIV in Argentina, our priorities.



#12 (English) Longret Kwardem, UK. Where is the funding?
#13 (English) Longret Kwardem, UK. Peer research and meaningful involvement of women living with HIV, an ongoing challenge.

Drawing on these rich podcasts, Fiona also compiled four podcast briefs.

The first, entitled “Fund what works: fund community-led women’s rights organisations for an effective, ethical and

sustainable response to [HIV](#)”, was also released during this financial year.

We are very grateful to UNAIDS for funding this work.

The WHAVE Podcast Paper #1

Fund what works: fund community-led women's rights organisations for an effective, ethical and sustainable response to HIV

Introduction

The WHAVE is a podcast series by and for women living with HIV around the world, talking about our sexual and reproductive health and rights. This is the 1st of four briefs based on this series.

1. This brief

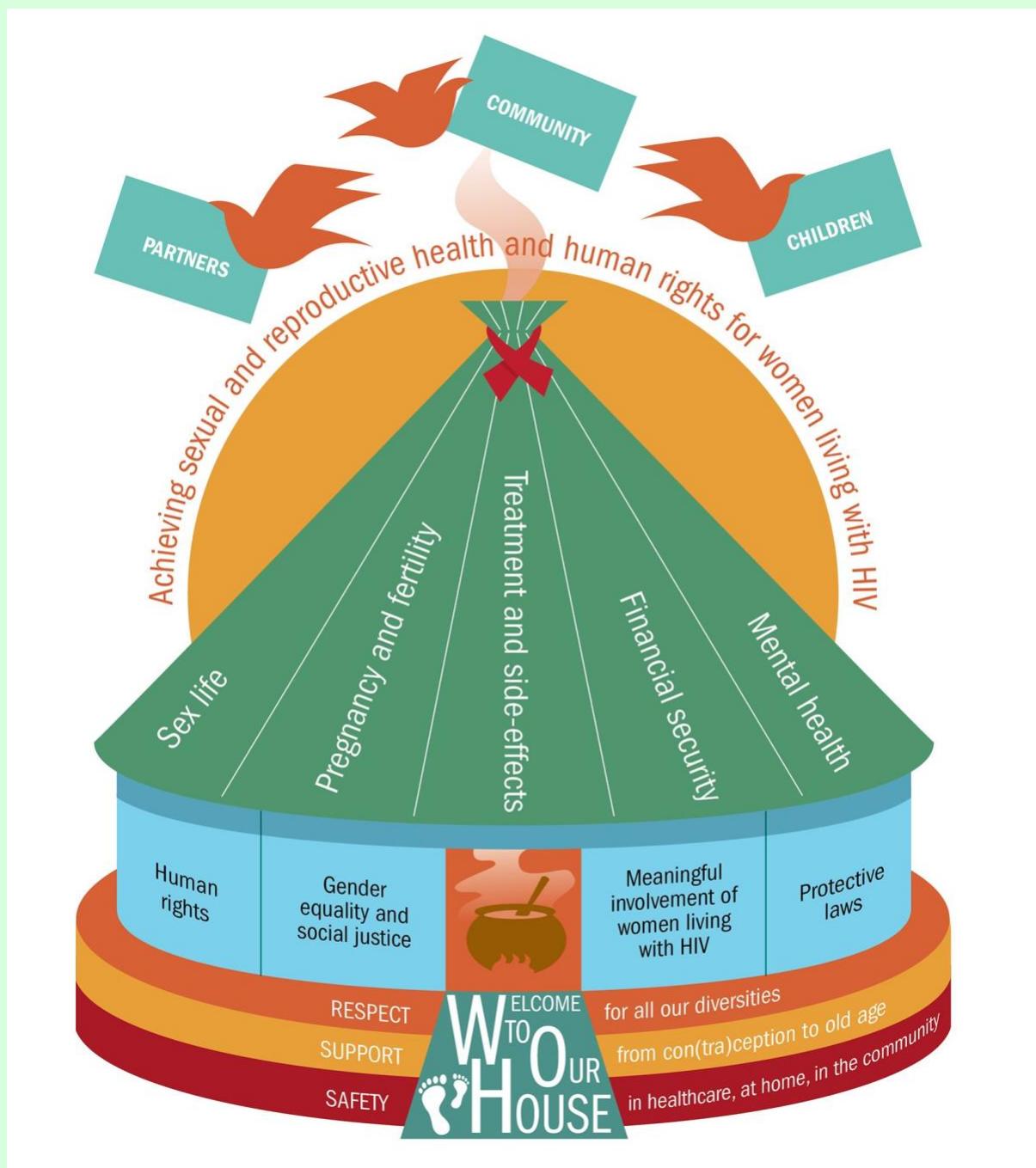
In this brief, we focus on the challenging issue of funding for women's rights organisations. Longret Kwardem of the 4M Mentor Mothers Network features a lot in the quotes in this brief because she decided to speak specifically about it for episode 12 of The WHAVE. However, funding challenges have been reported by the contributors to all episodes, without exception, as a constant and chronic worry and drain on their mental resources. Their experiences reflect the findings of research into funding for women's rights work, including a study for UN Women on financing for equality in the HIV response (Nilo, 2019),¹ the foreword of which captures the issue:

'Although strong United Nations policies and frameworks aimed at gender equality and women's empowerment exist, when it comes to HIV and AIDS response, there is increasing 'lip service' and rhetoric around commitments.' Alessandra Nilo¹.

¹ Financing Women's Organizations & Mobilization for Gender Equality: One of the Keys to Ending AIDS – Nilo, A. Background Paper for the Expert Group Meeting on Financing for Gender Equality in the HIV Response/ UN Women; 2019. (forthcoming)

The WHAVE Podcast Women living with HIV: Advocates, Voices, Empowered © Salamander Trust 2020

4. Work on the WHO 2017 Guideline on the SRHR of women living with HIV - and Follow-Up



This year's work on this theme was led by Salamander Associate Sophie Dilmitis.

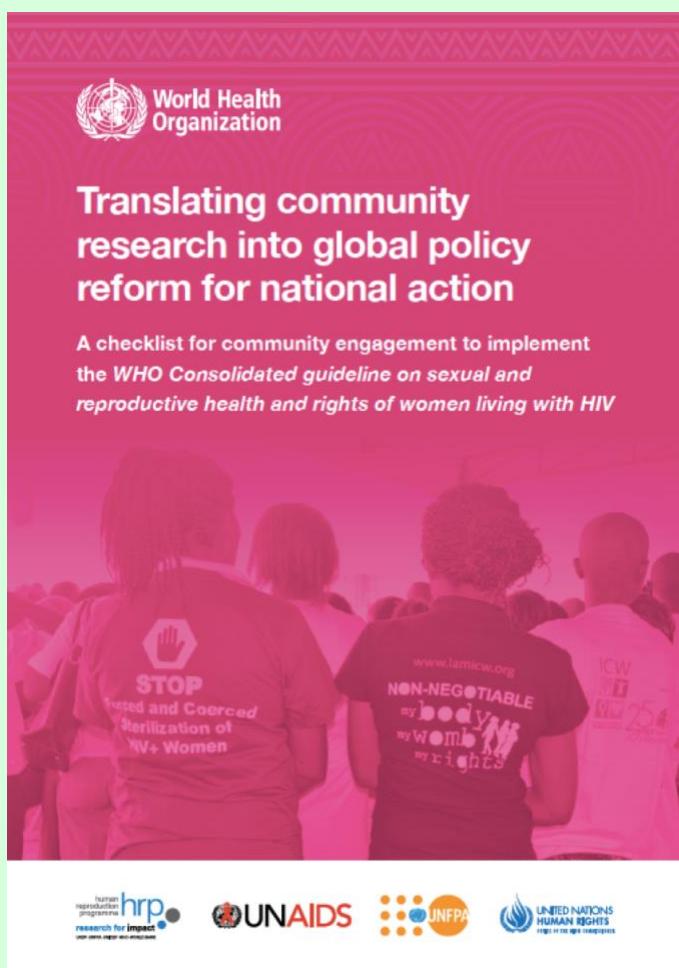
Salamander Trust's work on this started in October 2013 when we entered into an agreement with WHO's Department of Reproductive Health and Research to conduct a global values and preferences

study on the sexual and reproductive health and rights (SRHR) of women living with HIV. This informed the new WHO 2017 [Guideline](#) on SRHR of women living with HIV. However, we soon

realised that the recognition and uptake of this new Guideline, which firmly places the SRHR of women living with HIV at the heart of an effective global response, was not as we would have wished. Therefore, with further WHO funding, we developed an

Implementation [Checklist](#) for in-country use by women living with HIV and their supporters, to ensure its implementation in their own country. We reported on this in last year's report. Below we describe the on-going work on this.

Implementation Checklist



We recognised the need to continue to promote this Guideline through the implementation checklist that we developed, with WHO's support, in the previous financial year.

In July 2019, WHO published our Implementation Checklist, with some very minor amendments, as an official UN [document](#). This document was endorsed by many networks of women living with HIV around the world last year. The [Checklist](#) supports the implementation of WHO's 2017 [Guideline](#) on the SRHR of women living with HIV. This Checklist, now published jointly by WHO, UNAIDS, the Office of the High Commissioner for Human Rights and UNWomen, marked the latest stage of our collective global work on our SRHR, which began in October 2013.

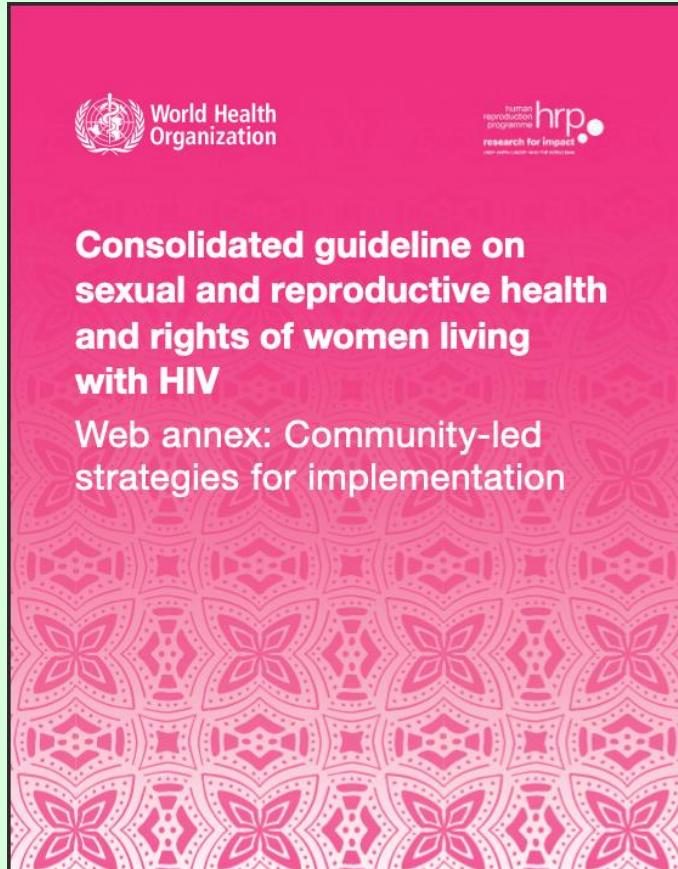
Blog

In July 2019, we also published a blog in [British Medical Journal](#)'s SRH Journal, which describes the process so far, why this Checklist is so important to us, and how we hoped it would be used in future.

Case studies in Guideline web annex

On 10 December, Human Rights Day, WHO published a web annex, which we wrote, to complement its 2017 Consolidated Guideline on the SRHR of women living with HIV and the Implementation Checklist above. WHO's new publication highlights four inspiring women's responses to SRHR in their communities. This annex features the work of Dorothy Onyango and

team in Kenya, Cecilia Chung and team in the USA, Svitlana Moroz and team in Ukraine, and L'Orangelis Thomas and team in Puerto Rico. The report describes how their community-led strategies supported the



implementation of the Guideline and shaped knowledge, understanding, policies and programmes. This publication is also endorsed by networks of women living with HIV and our supporters around the world. This is the latest publication in 6 years of on-going collaboration with WHO's Dept of Reproductive

Health and [Research](#) on the interlinkages between HIV, gender, violence against women, mental health, effective, ethical community-led feminist responses and our sexual and reproductive health and rights.

Launch of the WHO Advisory Group of women living with HIV

One of our requests to WHO's Director General, Dr Tedros, after the launch of the 2017 SRHR Guideline was for WHO to form a standing [advisory](#) group of women living with HIV from around the

world, to inform WHO on how all its work affects our lives. This advisory group was finally established in April 2019. Their first elected Chair is Sophie Dilmitis of Zimbabwe.

We are very grateful to WHO for funding the development of the case studies; and for publishing both these and the Implementation Checklist as official UN documents.

5. Latin America and Caribbean Regional Study on Violence Against Women Living with HIV



In 2018-2019, Salamander Trust Associates Emma Bell, Fiona Hale and Marijo Vázquez had worked together with Development Connections to support ICW Latina to conduct a landmark multi-country study of violence against women living with HIV, with funding from Hivos and additional support from UNAIDS.

In 2019-2020, the findings were widely disseminated through publications, conference presentations, advocacy and ongoing building of momentum to address violence against women living with HIV.

Salamander Trust also disseminated study publications and findings, including through the Salamander [website](#) and social media.

More information about the research and its findings, in Spanish and in English, can be found [here](#):

“Adolescent girls experience very high rates of gender-based and sexual violence in many countries around the world. In about half of all countries with age-disaggregated data available, a greater percentage of adolescent girls (aged 15 to 19 years) had experienced intimate partner violence in the past 12 months compared to adult women overall (41). Their experiences of violence start early in life. For example, one in four women aged 18 to 24 years reported having experienced sexual violence during childhood in Rwanda (24%) and Nigeria (25%), while one in three women reported having experienced sexual violence during childhood in Uganda (35%). Many of them also reported that their first sexual experience was unwanted or forced (131–133). Overall, many young women have experienced sexual violence and abuse during childhood, but few report sexual abuse to the authorities and support services are scarce in most countries (131–134).” UNAIDS [2020](#) [Reference 131 is the article by Luciano et al cited above]

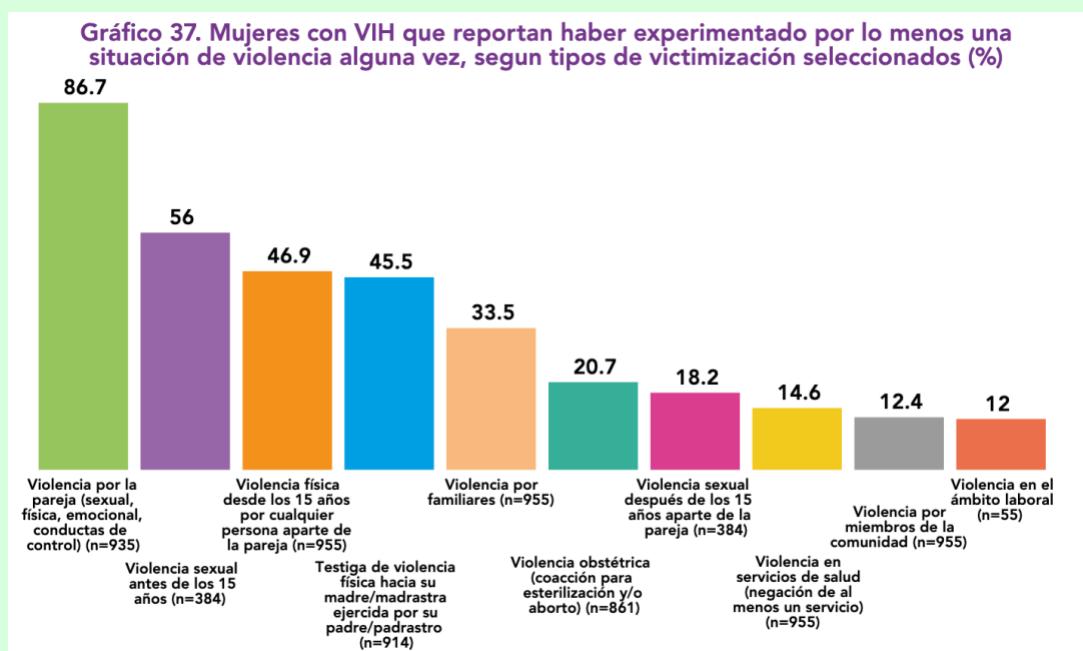
1. Polivictimización, violencias y mujeres con VIH en América Latina (English version [here](#)).

2. Autonomía económica de las mujeres con VIH en América Latina: interacción de múltiples discriminaciones (English version [here](#)).

3. Luciano D, Negrete M, Vázquez M, Hale F, Salas J, Alvárez-Rudín M et al. “Estudio regional sobre violencia y mujeres con VIH en América Latina”. Managua: ICW Latina, HIVOS, Development Connections y Salamander Trust; [2019](#).

4. A 2020 publication by UNAIDS, “We’ve got the power: Women, adolescent girls and the HIV response” included a box summarising the key findings of the multi-country study:

- Levels of violence by intimate partners are high. More than one in three women reported experiencing emotional violence in the previous year, and 75% of the women reported that their partners exhibited controlling behaviours, including controlling their money (30%). The risk of violence tended to be highest for indigenous women and young women. In the Plurinational State of Bolivia, 73% of women reported physical and/or sexual violence at the hands of an intimate partner in their lifetime.
- Violence during childhood and forced first sexual experiences are common. Between 26% (Honduras) and 59% (Plurinational State of Bolivia) of women reported having been sexually abused before their 15th birthday.
- Violence or coercion occurs frequently in health-care settings. More than 20% of women said they had felt coerced to undergo sterilisation and/or an abortion, and 48% said they had been denied cervical cancer or breast cancer services due to their HIV status.
- Institutional violence. An average of 13% of women were forced to move or were unable to rent housing because of their HIV status, and between 4% (Guatemala and Honduras) and 18% (Plurinational State of Bolivia) of women said they had lost their jobs or other income sources for the same reason.
- Health and well-being. One in four women reported having suicidal thoughts in the previous month. Among women who had been pregnant and had been assaulted during pregnancy, up to 28% (Plurinational State of Bolivia) had undergone a miscarriage as a result of the violence.
- Women's coping strategies. Most women survivors of violence have never gone to formal services or people in positions of authority for help. Only 15% sought help from the police, 9% from the prosecutor's office, 5% from child protection agencies and 5% from health services. Less than half of survivors said that a health-care provider had ever asked them about their experiences of violence. (See [UNAIDS p. 35, Box 3](#))



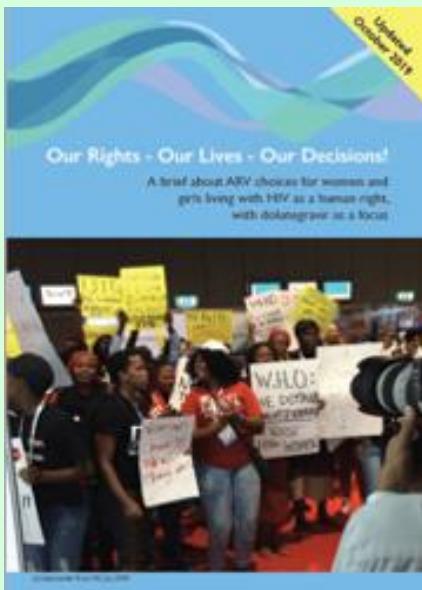
Graph from Luciano et al, [2019](#) showing percentages of women living with HIV with at least one experience of violence

6. Dolutegravir and Cervical Cancer booklet updates

This work was led by Salamander Trust Associate Sophie Dilmitis. Artwork Jenny van Niekerk.

We continued our work on Dolutegravir in the context of the SRHR of women living with [HIV](#). This was in response to WHO's release of its new [guidelines](#) on use of Dolutegravir by *all* women living with HIV in July 2019.

In September 2019, we released our updated version of the policy brief. This



includes a preface which references WHO's updated guidelines. It is now also available in Spanish and French as well as English. To access all three language versions, click [here](#).

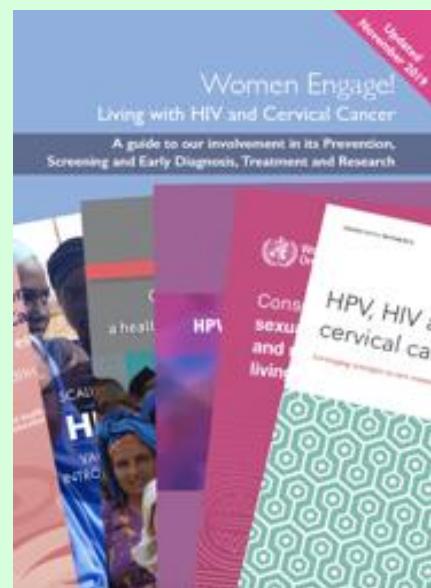
In September 2019, we also released a second WHAVE podcast (no. 9) on Dolutegravir, from Lucy Wanjiku. You can access this by clicking [here](#).

In October 2019, a webinar on Dolutegravir updates took place, co-hosted with the International Treatment Preparedness Coalition (ITPC). It is available as a recording online on our

[vimeo](#) site. To access the introductory and final slides from [Salamander](#) Trust and ITPC, and the individual presentations from the [WHO](#), leaders of the [Tsepamo](#) Study and Jacque Wambui of [AFROCAB](#), click on the relevant links.

In December 2019, we supported ICW Latina with background information, to conduct a webinar about dolutegravir in Spanish, entitled: '*Un seminario web sobre dolutegravir y actualizaciones de las guías de tratamiento.*' Speakers were Mariana Iacono – ICW Latina; Dr Giovanni Ravasi – PAHO; and Dra Alejandra Corao – ONUSIDA Latina. The recording is available [here](#).'

In November 2019, we also updated our booklet on cervical cancer and women living with HIV. This is also now available in Spanish and French. To access all three language versions, click [here](#).



We are very grateful to UNAIDS for funding these updates and webinars.

7. Frontline AIDS consultancy work

In April 2019, a team of Salamander Trust Associates began work on a consultancy for Frontline AIDS to develop a new resource: “[Implementing and scaling up programmes to remove human rights-related barriers to HIV services](#)”.

During 2019-2020, Salamander Trust Associates Jacqui Stevenson, Emma Bell, Jane Shepherd and Fiona Hale worked closely with Frontline AIDS and Global Fund staff to produce a resource providing practical guidance on how to design, implement and monitor programmes aimed at removing human rights-barriers to HIV services, and help implementers of such programmes to:

- Cost, monitor and evaluate programmes
- Effectively combine and implement them
- Use a comprehensive approach
- Achieve the right level of investment
- Increase meaningful local capacity
- Improve community engagement
- Strengthen health and community systems
- Ensure sustainability

Funded by GIZ BACKUP Health, the guide was developed by the consultancy team for Frontline AIDS, with the help of governments, donors and civil-society organisations, and in close collaboration with The Global Fund.

8. International Treatment Preparedness Coalition consultancy work

From December 2019 - February 2020, the International Treatment Preparedness Coalition (ITPC), Salamander Trust Associates (Emma Bell and Fiona Hale), the International Community of Women Living with HIV/AIDS (ICW), and Africaid consulted with 198 women in 28 counties through an online survey (ITPC), interviews (Salamander Trust), and focus group discussions (ICW East Africa and Africaid).

A rapid literature review was also conducted by Salamander Trust. This was to inform a presentation ITPC was invited to give on women, HIV and contraception at the Conference on Retroviruses and Opportunistic Infections (CROI) in March 2020.



ITPC was keen to share the voices of women loud and clear, and to ask for high-quality care and treatment inclusive of sexual and reproductive rights and health, and HIV prevention, testing, care and treatment that are woman-centric – including access to dolutegravir.

The survey was open to women in all countries, and responses were received from: Angola, Australia, Bangladesh, Brazil, Canada, Ecuador, Egypt, El Salvador, Germany, India, Indonesia,

Kazakhstan, Kenya, Kyrgyzstan, Malawi, Namibia, Nepal, Netherlands, Nigeria, Rwanda, South Africa, South Sudan, Switzerland, Tanzania, Uganda, UK, USA, Zambia, and Zimbabwe. The interviews and focus groups included women from Uganda, Kenya, Namibia, South Africa, South Sudan, Zambia, and Zimbabwe.

Salamander Trust Associates Emma Bell and Fiona Hale spoke in depth to women with a diversity of experience and age.

We are grateful to Ade Nunu Diana Alison, Nandi Delliewe Chinowawa, Joyce Amondi Ouma, Janet Tatenda Bhila, Happy Leonard Assan, and Phelister Abdala, as well as other women who

chose to remain anonymous, for their collaboration in this process, and in producing a presentation, summary findings and an advocacy brief (for release in 2020). Thanks also to the ITPC Director Solange Baptiste and staff, especially Wame Jallow and Helen Etyaale.

What women reported in this rapid review process underscores the gap between the realities of their lived experiences and the recommendations regarding how they should be supported, as expressed in the WHO 2017 Guideline on Sexual and Reproductive Health and Rights of Women living with HIV (see above).

“The women who were consulted pointed out that they have made all of the recommendations listed below repeatedly, over decades, in many successive documents produced by women living with HIV. Women commented that if these recommendations had been observed in the first place, many problems could have been averted.”

Rights - Support ethical, effective and sustainable contraceptive policies and programmes which uphold the SRHR of all women, including those living with and vulnerable to HIV. This involves ensuring women have full access to non-judgmental information on contraception, choice over the full range of options, including dual protection, and care, respect and support for the choice a woman makes. It also requires instituting accountability mechanisms across funding, research, policy and programmatic streams, in line with the WHO Guideline and Checklist, Universal Health Care and #leavenoonebehind to ensure that rights are respected.

Inclusion - Support the leadership and meaningful involvement of women living with and vulnerable to HIV in policy development and programme design, implementation, monitoring, and evaluation, to develop and support national strategies that include and reflect their own priorities and rights around HIV and SRHR. This includes funding women living with or vulnerable to HIV to maintain and increase the vital work they are already doing to support SRHR.

Access - Ensure that SRH and HIV services are integrated or linked and are fully stocked with a range of family planning methods and have well trained staff who have the time to explain the full range of options for women. Consider one-stop SRH centres, especially for young people, that provide safe and non-judgemental environments where information, advice and services are tailored to their needs and priorities.

Research - Meaningfully involve women and the organisations they lead in research from the beginning. Examples include: consulting with women regarding their priorities for family planning; linking with women's organisations that can provide SRH services, support and advice to community members; and analysing, validating and disseminating research results. Research results need to be shared promptly with women living with and vulnerable to HIV to support individual, community, local-, national-, regional-, and global-level advocacy for their integration into policy and practice.

Now that these recommendations are also stated clearly in the WHO 2017 SRHR Guideline (see above), as well as the WHO/UNFPA 2018 Call to Action on SRHR-HIV linkages, “Advancing towards universal health *coverage*”, respondents see this as the time for change. They trust that their response to the survey, focus group discussions and in-depth interviews on this latest occasion might finally start to shift global research, policy, programmes and funding towards their much-stated priorities.

9. Making Waves



In early 2020, discussions started about how to take forward the advocacy, networking and communications work carried out as part of The WHAVE podcast project. This was in response to Alice's retirement and the future operational wind-down of Salamander Trust, in order to ensure that the international connections between the women involved could be developed for future collaborative work and mutual support.

This idea of continuing relationships built through The WHAVE podcast (and other projects) inspired the name for a new collective - Making Waves. On March 9, 2020, Salamander Trust Associates, Fiona Hale and Emma Bell registered the Making Waves domain name and started sharing ideas within Salamander Trust for taking it forward. Also in March, we faced the onset of global Covid-19 restrictions and a sudden urgency to address the gendered digital divide with the increased reliance on internet communications. The founding members collaborated - in the name of Making Waves - with Salamander Trust, 4M Mentor Mothers Network, Positive Young Women Voices, and CFAR-Uganda

(2020) to produce “*Women Working Virtually: A Protocol for Digital Communications*”, based on our collective years of experience of the challenges, barriers and benefits of connecting online.

In late March we started sharing ideas for this new collective with women who had been involved in The WHAVE podcast, and others who had been part of Salamander Trust's advocacy work. We gradually started inviting these women to be involved. Not everyone felt they had time to contribute, much as they would have liked to, but by April we had a small international group of women in East and Southern Africa, Asia Pacific and Europe, who had agreed to work together to bring our creativity and lived experiences to addressing policy, evidence and social norms change on HIV and gender equality, through:

- Researching
- Evidencing
- Advocacy
- Living

We want our collective work to be **REAL** – based on real lives, real issues, real questions.

We agreed that Making Waves would not seek operational funding at this stage, as it could mean competing for resources with members' organisations. However, we also agreed that women do more than enough unpaid work already, and it was extremely important that no-one should feel their involvement in Making Waves was another burden.

Furthermore, conscious of the digital divide, we started to think about how we could use an “autonomous feminist funding” approach to support women with occasional small stipends to cover the costs of “data bundles” - ie to buy

time for women to use their phones for calling and for internet access. This cost is a huge challenge for many. To start off, two members in the Global North who work as consultants decided to set aside a percentage of their consultancy fees from work on gender and HIV, which could be used for this purpose, and also committed to ensuring that any consultancy work that involves speaking to women includes funds to cover their costs.

We are excited about moving forward collectively, building on and supporting the legacy and advocacy work of Salamander Trust, and making waves in 2020-2021.

10. Miscellaneous



In July 2019, we produced a Salamander website page about the use of language. The language we choose to use – about the issues we address every day. Language matters. It shapes the way we

feel, think, act and react. It also has a physiological effect on our bodies which, in turn has an effect on all our vital organs. To read more, click [here](#).

New global advocacy briefs, podcasts, webinar, a blog and more!

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**Stepping Stones Feedback Newsletter:
October 2019**

Welcome to our latest newsletter...
We have a lot of updates to share with you....

• • • • • • • • • •

In October 2019, we produced a new Stepping Stones newsletter, which summarised all our current work, including a rich array of policy briefs,

podcasts, webinars, presentations, articles and more since February 2019, across all of Salamander Trust. This can be accessed [here](#).

Salamander Trust Associate Laura Pulteney compiled this newsletter.

In February 2020, our colleague Dr Dominique Chadwick of Social Films kindly created an 8-minute film about **women's community-led responses** to HIV. Entitled: "From surviving to thriving: women's rights and resilience", it highlights the inspiring work of COWLHA in Malawi and the Namibian Women's Health Network in Namibia. Click [here](#) to watch this film which we entered into WHO's 'Health for All' first film festival.



Future Plans

After 12 years of work, Salamander Trust's operational side will be winding down at the end of December 2020. We are delighted that the 3 new entities, CFAR-Uganda, 4M Mentor Mothers Network CIC and Making Waves, are in place, as described above, to carry the work on. Salamander Trust will remain in existence as an entity, in order to continue its consultancy arm, with work carried out by its Associates; and in order to channel any occasional donations that might be received to the appropriate entity.

Of course, the COVID-19 crisis hit us all globally just as the financial year activities described here came to an end and all of us have been

affected, both personally and professionally by its spread.

This meant, for instance that at the very end of March 2020, we had to cancel a two-day face-to-face workshop of 4M Mentor Mothers due to be held in London, just 10 days beforehand. Instead, MIND kindly allowed us to make use of the funds to extend the programme grant by 3 months. This meant that we were able to provide more online supervision and support to the Mentor Mothers, and could hold another webinar with them.

As the UN Secretary General, Antonio Guterres, said in the 2020 [Mandela](#) lecture:

“COVID-19 has been likened to an X-ray, revealing fractures in the fragile skeleton of the societies we have built. It is exposing fallacies and falsehoods everywhere: The lie that free markets can deliver healthcare for all; The fiction that unpaid care work is not work; The delusion that we live in a post-racist world; The myth that we are all in the same boat.

Because while we are all floating on the same sea, it’s clear that some of us are in superyachts while others are clinging to the floating debris. Dear friends, Inequality defines our time. More than 70 per cent of the world’s people are living with rising income and wealth inequality. The 26 richest people in the world hold as much wealth as half the global population.

But income, pay and wealth are not the only measures of inequality. People’s chances in life depend on their gender, family and ethnic background, race, whether or not they have a disability, and other factors. Multiple inequalities intersect and reinforce each other across the generations. The lives and expectations of millions of people are largely determined by their circumstances at birth.

In this way, inequality works against human development – for everyone. We all suffer its consequences. We are sometimes told a rising tide of economic growth lifts all boats.

But in reality, rising inequality sinks all boats.”

These are hard times indeed and we have seen that domestic violence has risen markedly around the world throughout COVID-19 lockdown, that women are on the ‘frontline’ of the response both at home and in healthcare settings; and that funding for women’s rights work is increasingly scarce.

So the issues at the heart of all we do - ending violence to create safety, improving mental health to create well-being, and upholding rights to ensure lifelong quality of life – are as relevant as ever to an effective response to this new challenge.

We feel extremely lucky to know that Salamander is so fortunate to have such dedicated partners who are determined to take all the work forward and expand on it in these new entities. As we stated last year:

“Our training work, our research and advocacy, all solidly grounded in community knowledge and expertise, will continue...in the safe hands of our Associates’ stewardship in their own new organisations, as described above.”

Whilst we are hugely grateful to all our funders, the main ongoing challenge for both 4M and for CFAR-Uganda, continues to be sustained funding, especially core funding, which is a fundamental, chronic, and extremely time-consuming and deeply stressful challenge for all of us involved in the women’s rights movement around the world. We hope and trust that this report offers insight into what has already been achieved – and also into **how much more** could be achieved in future with sufficient resources.

Salamander Trust, September 2020

Salamander Trustees:

All Salamander Trust trustees do this work on a wholly voluntary basis. Sadly, this year Salamander Trustee Jenifer Gatsi had to step down, owing to personal reasons. We thank her hugely for all her commitment to Salamander Trust over the past few years.

The remaining trustees are:

Professor Jill Lewis, Dr Nigel Padfield, Ms Jane Tewson, Alice Welbourn

Since we are soon to wind down our operational work, we have decided not to appoint a new trustee to replace Jenifer.

A note on our trustees and trustee work in general:

We have been extremely fortunate to have a highly talented and dedicated team of trustees across the lifespan of Salamander Trust. We have long thought

hard about issues of diversity and inclusion, wanting especially to have other women living with HIV on the board, apart from Alice, and to reflect

ethnic diversity in the governance structure also. However, we have been challenged by the reality that most women living with HIV who are activists are single, also often with dependents. In the UK it is the norm for charity trustees not to be paid for their services and we believe this is also an important governance principle. We have therefore decided to stick with the existing team of trustees and to bring in the insights and expertise of key women living with HIV from around the world, with whom we have been lucky to work, as paid associates, instead of as unpaid volunteers. When we learned 4 years ago that Jeni Gatsi had plans to retire from her position as Director of the Namibia Women's Health Network, we immediately asked her if she would join our trustees and were delighted when she accepted. Sadly Jeni too has now had to move on, owing to personal

commitments and we are back to our four original trustees. Since we are now winding down our operational work over the next few months, we have made an explicit decision to remain as the original team of four, rather than to find anyone else.

We have recently learnt that some donors ask organisations about their governance structures, explicitly in relation to ethnicity, gender, HIV status and other issues of inclusion. Whilst we wholly support this query in principle, we would also like to alert donors to the possibility that other organisations may be in a similar situation to our own, whereby ***by including people of diverse backgrounds, they may be having to exclude them from paid work with the organisation.*** We don't yet know the solution to this and welcome others' views on it.

Salamander Trust Associates:

Our huge thanks go to all our inspirational Associates, without whom none of this work could have happened.

They are, in alphabetical order:

Ellen Bajenja, Emma Bell, Sophie Dilmitis, Gill Gordon, Fiona Hale, Sue Holden, Longret Kwardem, Rebecca Mbewe, Angelina Namiba, Laura Pulteney, Jane Shepherd, Jacqui Stevenson, Marijo Vazquez

Artwork for 4M reports, for the WHAVE project and for the front and back covers of this report: Jess Nicholson

Translations of the Dolutegravir and Cervical Cancer advocacy briefs: Spanish - Marijo Vazquez; French - Marion Zibelli.

Summarised Accounts:

A note on core costs: The Director and Financial Manager do all their work on a wholly voluntary basis. In addition, all our associates work from their own homes. This enables us to keep our core costs to a minimum.

Funds at start of year (April 1st 2019)	85,914
Unrestricted	62,584
Restricted	23,330
 Income during the year	 122,926
Grants	121,333
Frontline	47,050
ITPC	6,585
MACAIDS	30,000
MIND	15,404
UNAIDS	11,067
WHO	11,227
Donations	571
Bank Interest	1,022
 Expenditure during the year	 141,843
Charitable Activities	129,630
Fund-raising	6,915
Core costs	5,298
 Funds at end of year (March 31st 2020)	 66,997
Unrestricted	41,964
Restricted	25,033

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Thank you for reading our annual report!

If you would like to make a donation to support any of the work described here, we would be extremely grateful.

Please click on the following [link](#)



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