

# EUROPEAN COALITION OF POSITIVE PEOPLE

## annual report 2005



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VAT reg. number GB 749 1042 35. Charity number 1090117

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## WE WOULD LIKE TO ACKNOWLEDGE OUR SUPPORTERS:

Abbott Laboratories	Merck Sharp & Dohme (MSD)
British Council	Pfizer
Bristol-Myers Squibb (BMS)	Pfizer Foundation
Comic Relief	World Health Organisation (WHO)
EFPIA	Nyewood Infant School, Bognor Regis
Elton John AIDS Foundation	Cheselbourne First School, Dorset
European Commission	Pagham Church Ladies Club
European Parliament	St Thomas A Becket Church, Bognor Regis
F Hoffman-La Roche	and all the individual donors
F Hoffman-La Roche Employees	
GlaxoSmithKline (GSK)	

Hello and welcome to my contribution to this year's Annual Report. It has been another interesting year for all of us at ECPP.

In Europe we continued to attend Think Tank meetings in Brussels, and to be actively involved with the European Patients' Forum. This included attending and contributing to the second EPF conference in June on the theme of health education and its value in improving health care facilities and compliance to medicines/treatments. The Information To Patients' website was launched at this conference and is now accessible through the internet.

There was continued activity in both Ukraine and Russia, with a number of visits by members of ECPP. Sadly a number of planned visits to Ukraine had to be rearranged at short notice due to poor health of assessors, but much of the work in Ukraine was nearing completion and fair progress was made. In Russia having a full-time Director helped with the Network's activities and some progress was made with outreach work. I was pleased to be able to visit Moscow and meet with the Director, as well as participate in the Café Scientifique seminars with the British Council there.

Our work in Malawi continued apace, and there were a number of visits by various members of ECPP throughout the year. This year saw another visit of Roche top fundraisers in June, and I was delighted to be able to visit the projects there in October.

Staff visits to Uganda were made on needs assessment and feasibility work. Some progress has been achieved though not as much as we had hoped. The office, now registered, is manned by our project manager and we hope that there will be more activity to report in 2006.

Towards the end of 2005 we said good bye to Terry White, a long-term volunteer and trustee with us, who decided that it was time for him to pursue his own interests. We also had to say goodbye to our Receptionist Katherine Yentumi, who needed more time to pursue her studies. We wish them both well.

Overall 2005 was a year of progress in most areas of our work.

Dr Ruth Webb,  
Chairman



*Ruth Webb  
Chairman*

2005 was another extremely hectic year, with many trials and tribulations, but with a large degree of success, and therefore gratification in as many areas!

There was a lot of work carried out in the EU in 2005. Much of this was carried out under the umbrella of the EPF (European Patients' Forum)

We also launched the Information to Patients Website, which is now up and running.

The whole issue of Information to Patients has started to hot up again, and as usual ECPP is in the thick of the debate.

We are committed to the idea that patients should have freedom of choice regarding their treatment, and that can only come about by more freedom of information, not only on their respective medication, but also their whole care package.

Ukraine continued to be a major activity on our part, with regular visits from ECPP.

This project is now drawing to a close, and we consider it to be one of ECPP's major successes! The Ukrainian Network is now a force to be reckoned with on the international stage.

Russia now has an ECPP sponsored director in post. The work both in and around Moscow, and farther a field within the Russian Federation is on going. I was pleased to visit their offices at the latter part of the year.

We now have an office and staff in Uganda, where we are in the process of getting ECPP established. We hope to be involved in a major project in 2006.

Malawi still forges ahead. The orphan centre programme construction is going to plan, although the centre in Mozambique has problems in the construction phase. This is mainly down to cross border problems.

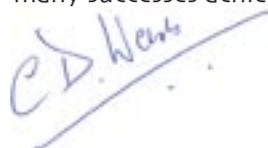
The Roche employees visit in April went extremely well, and I am sure that some very positive memories were taken back with the fundraisers when they returned to their respective countries.

We are now getting to grips with the children feeding programme.

Towards the end of the year we sadly had to say goodbye to Terry White, who has been with ECPP from the start, he has left to pursue work that he has been involved with for some time. He will be sadly missed both as a colleague and friend!

We said goodbye also to Katherine Yentumi, who has been our very happy and chirpy receptionist. She has taken time out to go back to college.

2005 was a year of different challenges, and extremely pleasing with the many successes achieved.



Colin Webb,  
Executive Director



*Colin Webb*  
*Executive Director*

## TRUSTEES

Dr Ruth Webb, Colin Webb, Terry White (resigned 18.09.05)

## ACCOUNTANTS/AUDITORS

Elan & Co, Chartered Certified Accountants  
Unit 3 Cedar Court, 1 Royal Oak Yard, London SE1 3GA

## BANKERS

National Westminster Bank, Paddington Branch  
PO Box 2795, 26 Spring Street, London W2 1WE

## SOLICITORS

Dobsons Solicitors  
4 Northgate, Chichester, West Sussex PO19 1BB

## REGISTERED OFFICE

2 Whitehorse Mews  
37 Westminster Bridge Road  
London SE1 7QD

## CHARITY REGISTRATION NUMBER

1090117

## COMPANY REGISTRATION NUMBER

3850575 (a not for profit company)

## VAT NUMBER

GB 749 1042 35

## STAFF

Joan D'Souza, Director of Operations  
Valentina Grecchi, Web Developer & IT Manager  
Musharraf Khan, Bookkeeper  
Katherine Yentumi, Receptionist

The European Coalition of Positive People (ECPP) is a coalition of people living with HIV and Hepatitis infection in the European Union (EU). We are a Patient Group<sup>1</sup>, and meet the European Union definitions of an NGO<sup>2</sup>, representing people living with HIV in the EU.

We have been greatly involved in issues such as Biotechnology, Standards of Care, HIV & Human Rights, Harmonisation of the Pharmaceutical Regulation between member states, Equity of Access in the EU, Rational Prescribing, Clinical Trials and Access to Medicines both in the EU, the Applicant States to the EU, the Newly Independent States (NIS) and the developing world.

In 2005 we have continued to expand our networking capacity both within the European Union, the Applicant States and the NIS.

ECPP works in Europe, Ukraine and Russia promoting patient involvement in the development of public policy, delivery and monitoring of services. Where appropriate, building networks of People Living with HIV and AIDS.

In Europe we have been actively participating in the *Information To Patients* debate. At the beginning of the summer we launched a website to that effect.

This has enabled us to assess the different political legislative and regulatory frameworks in the different countries that impinge on patients both directly and indirectly.

In Malawi and Mozambique, ECPP promotes community participation in project development & implementation, supports orphan care projects within the home-based care programmes whilst maintaining co-operation with all key players in the fight against HIV/AIDS.

In Uganda we wish to start up a treatment programme for people living with HIV as well as a youth programme involving skills training and empowerment.

<sup>1</sup> *A Patient Group is defined as genuinely representing the needs of patients as consumers of healthcare. Patients Groups are run by patients, for patients and are represented by patients. (International Alliance of Patients' Organisations)*

<sup>2</sup> *Comprehensive Report, European Forum Social Policy 98, Brussels 24-26 June 1998; European Commission*

## Network Partners

We have many crossover links with other organisations these include: European Public Health Alliance, European Patients' Forum, European Federation of Neurological Associations, TB Network Association, International Alliance of Patients' Organisation, European AIDS Treatment Group, All-Ukrainian Network of People Living with HIV and AIDS, GAMIAN, Multiple Sclerosis Europe, Euro-Ataxia, Community of People Living with HIV and AIDS Moscow, Association with AIDES Fédération Nationale France, ABRACO Portugal, UK Coalition, THT-Lighthouse UK, Lila Cadius Italy, Federation Estatal de Escuelas de Prevencion de Sida Spain, Centre for Inspirational Living Greece, HIV Vereniging Nederland, Project Hope, Imperial College, Royal Free Hospital, London School of Hygiene and Tropical Medicine, British Council (UK), the British Council (Ukraine), MANASO (Malawi), CONGOMA, MASAF (Malawi Social Fund), NUSAF (Northern Ugandan Social Action Fund) and the Ministry of Gender and Social Development in Uganda.

We believe that patients should be central to the relevant debates about health and social policy. We are seeking to establish a democratic and accountable patient voice at a national and international level, promoting patient involvement in the development of public policy and the planning, delivery and monitoring of services.

### VALUES

Our ethos is one of self-help. We believe that patients should be central to the relevant debates about health and social policy. Patients who have the right information, backup and role models, can deal effectively with the world on their own or with each other's support.

### ORGANISATIONAL AIMS

To establish such projects as may be deemed necessary to relieve the suffering of people living with HIV and AIDS.  
The protection and preservation of health.

### ORGANISATIONAL OBJECTIVES

To work with other stakeholders to influence governmental policy in such areas as human, civil and disability rights, immigration and migration, access to health care and treatments, standards of care and social policy.

To influence the regulatory authorities, the pharmaceutical industry and the medical treatment system on such issues as biotechnology, drug trials, drug development, drugs access, pricing, animal testing etc.

To promote user involvement in the development of public policy and the planning, delivery and monitoring of services.

To encourage and assist in the development of local, national and international groups of patients.

To further establish and strengthen the European Coalition and secure its resource base.

## EUROPEAN UNION

In Europe our work has concentrated around the *Access to Medicines, Animal Testing, Stem Cells & Biotechnology* and *Information to Patients* debates. We continue to work with the Patient Pharmaceutical Industry Think Tank, the European Patients' Forum (EPF), European Federation of Pharmaceutical Industries and Associations (EFPIA), European Public Health Alliance (EPHA) and the Association of the British Pharmaceutical Industry (ABPI). Additionally, we were involved in the drug resistance and salvage therapy campaign.

### ACCESS TO MEDICINES

In the Access to Medicines debate we are carrying on our work in the following main areas: the EU member states (on regulatory systems), the Newly Independent States (NIS) and Sub-Saharan Africa.

In the EU member states, ECPP is involved in the salvage therapy campaign as recent studies show that prevalence of HIV infection is on the rise in Europe and increasingly individuals are infected with HIV drug resistant strains. This is challenging the successful management of HIV infected patients. It decreases the effectiveness of treatment often leading to treatment failure. This is why we continue to need new drugs to fight HIV infection.

### ANIMAL TESTING

In the Testing on Animals debate we contributed to the discussions on the Safeguarding Quality Biomedical Research in Europe with its implications on health, science, jobs and ethics.

### INFORMATION TO PATIENTS

We have continued our close involvement in the *Information to Patients Debate*. From our perspective EU patients/citizens need factually accurate, reliable and easily understandable information to be able to make informed decisions. Access to information on all available treatments plays a crucial role if citizens' health is to be at the heart of Europe.

Having registered a domain to create a website to do just this. At the European Patients' Forum's conference on Health Literacy in June ECPP launched the debate-side of the website. This section of the website took advantage of the momentum of the debate with a view of encouraging and taking the debate further. Initially the site has rolled out in English and over time it will be translated into main European languages.

### EUROPEAN PATIENTS' FORUM

ECPP continues to be on the executive board of the European Patients' Forum (EPF).

### OTHER

Through EPHA we contributed in the Open Health Forum on the HIV & AIDS in Prisons debate. Furthermore we attended a workshop for Central & Eastern European (CEE) journalists explaining the implications and impact of enlargement on health.

## UKRAINE

The All Ukrainian Network (AUKN) has continued to grow and make its mark in the Ukraine and beyond. It continues to be a recognised NGO by the government, other NGOs and media.



Over the year the AUKN has been putting its efforts in developing its capacity so as to be able to reach further and expand its network of services.

The Network has established successful paths of communication with its Regional Representatives via daily phone calls, email and its website. Various bulletins and newsletters are also distributed.

The network of registered regional affiliates has continued to grow.

24 members went on a modular course for social workers. This course is recognised by universities.

Training for staff/regional representatives covered areas such as work with

mass media, project design, alternative information and leadership & team building.

Still within the remit of training members of the AUKN came to London on a study tour visiting different NGOs, self-help groups, needle exchanges and HIV testing centres. This gave them a flavour of how things are run here and how they have developed.

AUKN is looking into new & innovative projects that can have a positive impact on the lives of PWAs at a marginal cost. These include: research conducted into the services for men having sex with men. This area has been difficult because there is a high level of stigma attached and local communities have not made things easy. The network is looking for ways of providing services safely and efficiently to this group of the population.



Starting from May the Network was implementing the project "Open your heart" supported by UNICEF. It's main goal is to form tolerant attitude of personnel in children's institutions and the population at large towards HIV-positive children.

The Network continues to bring together the regional PWAs to exchange ideas and experiences. One of the most successful examples is the Conference in Yalta, which is now a yearly event.

## RUSSIA

After the major re-organisation of last year, the beginning of the year saw a new Director in place to see the network through its restructurisation and to development. Part of this process was the re-naming of the organisation from RNPWA (Russian Network People Living with AIDS) to RNPLH (Russian Network of People Living with HIV) reflecting linguistic trends in the HIV/AIDS field.

Over the year the RNPLH has continued to strengthen its recognition as key partner by UN bodies, NGOs and the Russian Ministry of Health & Social Development.

The Network has strengthened its Moscow office. It has hired an Executive Director with a financial background who overlooked and implemented the organisation's financial system. There has been a

general restructuring of the directorate which has been brought about by the then Chairman's resignation. At the same time the organisation's charter was revised in line with Russian law indicating the changes in management.



In the first quarter of 2005 the Network had to relocate its offices. This, as can be expected, caused the odd technical hitch but was soon rectified once the network settled in its new surroundings. The premises are relatively close to the centre of Moscow.



The RNPLH opened Regional offices in Chelyabinsk and Samara/Rostov. Their outreach work extended to ten cities expanding the network further. As part of the outreach programme the network held a forum of people living with HIV of the Central Okrug.

All the Okrugs are involved in advocacy work concentrating in particular on all aspects of human rights. The network has been involved in discussion to start an initiative for legal reform

in the field of clinical research as Russia has fast become the dumping ground for unethical research as currently neither the law nor the infrastructure can maintain internationally recognised ethical standards.

Another area that has grown is information management. The numbers of subscribers to the network's list server have grown at a steady rate. It has been recognised by other organisations including UNAIDS as one of the key Russian language news sources for activists.

During the course of the year a forum of people living with HIV of the central Okrug was held.

Towards the end of the year ECPP conducted a Monitoring and Evaluation visit of the project.

## MALAWI

This year, work focused on opening the centres, registering children and starting life skills training. A nurse is in place to monitor the children's health and provide healthcare education at the centres. The ECPP office in Malawi continues to support and monitor the smooth-running of all projects and centres.

Work has been completed at the following centres: Chambe, Chiuta, St Theresa, Tithandizane and Tipewe.

### CHAMBE CHILDREN'S OASIS

The construction of Chambe Children's Oasis was completed in the first quarter of 2005. At the end of the year the centre was looking after 350 children. The children have a nursery which looks after 55 toddlers. The 350 children are provided with one meal a day. The Oasis offers the following life skills: tailoring, broom-making, pottery, music & drama, gardening and sports.



### CHIUTA CHILDREN'S OASIS

The construction of Chiuta Children's Oasis was also completed in early 2005. This centre looks after 288 orphaned children. The building has been equipped to provide the children with one meal a day. Life skills activities run here are: tailoring, knitting, music & drama, arts & crafts and sports.

### ST THERESA UNDER FIVES CHILDREN'S OASIS

St Theresa's Under Fives Children's Oasis continues to be used as a day nursery equipped with toys and books. 110 children are now cared for and fed there.



### TITHANDIZANE CHILDREN'S OASIS

ECPP started life skills activities at Tithandizane Children's Oasis. The bore hole and latrines were completed and the centre was equipped with sewing machines & stools, cutting tables and benches. It is providing 950 children with sewing and carpentry skills. The centre aims to provide services for 1,500 children in the future.

### MILANJE CHILDREN'S OASIS

The overdue construction of Milanje Children's Oasis in Mozambique has also been started and this includes two latrines. The centre will accom-

modate 250 children from seven villages. The activities planned are tailoring, carpentry, music, piggery and community garden as they have sufficient land.

### TIPEWE CHILDREN'S OASIS

The construction of Tipewe Children's Oasis has begun and includes a kitchen, two latrines and a borehole to provide water. The centre will start to accommodate a capacity of 250 children to be increased to 450 from seven villages and the activities that will be carried out are, tailoring, music and drama, art and crafts, carpentry and feeding. It is important that the children learn some farming skills therefore a vegetable garden and piggery will be started as there is ample land.

All in all, the development phase has been very successful and ECPP is looking forward to taking the projects into the next phase.

## UGANDA

Ongoing conflicts in northern and eastern Uganda have resulted in limited access to basic healthcare, with unqualified health personnel serving the vast majority of the population.

Signs of social breakdown in the camps include high levels of promiscuity, girls opting for early marriages, and an increase in the number of child mothers. With no schooling and no income-generating activities to occupy them, youths in the camps have become idle, left to self-destructive practices like drinking, unprotected sex, and early marriages.



According to UN estimates, some 8,400 children have been registered as abducted during LRA (Lord's Resistance Army) raids between June 2002 and June 2003. This represents a sharp increase in the level of abductions, and brings to over 20,000 the total number of registered child abductions since 1990. Fewer than 100 children were reported to be abducted during 2001, a period when hopes were high that the conflict was slowly dying out.

In Gulu town, for example, the phenomenon of 'child night commuters' involves large numbers of children walking several kilometres from their home villages to

crowd into empty buildings, and to seek refuge on verandas, in the bus park, on church grounds and in local factories before returning home each morning.

ECPP works in partnership with local communities and faith based organisations that work with orphans. It is essential that this project recognises the importance of community based HIV initiatives already working in the area by trying to work with them as we have similar overall goals. They will be involved at all stages of the project.

ECPP is the main implementor of the programme with input from all the stakeholders.

Information gathering and sharing is one way of working together and capacity building through training enables us to achieve our objectives.

Local government health services will be involved in health information dissemination.

Due to the ongoing insecurity in the region it has been difficult for any intervention to be fully implemented and sustained hence leaving gaps in service provision and access. The mostly affected group has been the youth. Care and support for the orphans and vulnerable children has tended to focus on meeting material rather than social and psychological needs. More effort is required to provide counselling to the traumatised youth in addition to empowerment through education and skills training.

### Proposed Solution

ECPP wishes to initially set up two pilot centres in Gulu and Nebbi, where a total target number of 400 youths between the ages of 10-19 will be registered for care and support.

ECPP has developed a strategy for working with identified partners these include the local community based organisations (CBOs) already working with children/youths in the districts in identifying the vulnerable youths and ensuring non-duplication of services and efficient use of limited resources.

We are working in close consultation with NUSAF, the Ministries of Gender, Labour and Social Development, Health, Education, faith-based organisations and local district councils.

The European Coalition of Positive People  
(Company Limited by Guarantee)

Financial Statements

for the year ended  
31 December 2005

Charity no: 1090117

Company no: 3850575

Trustees and Directors

Dr Ruth Webb  
Colin Webb

Secretary

Joan D'Souza

Registration

Company No. 3850575  
Charity No. 1090117

Registered Office

2 Whitehorse Mews  
37 Westminster Bridge Road  
London  
SE1 7QD

Auditors

Elan & CO Consulting LLP  
Unit 3 Cedar Court  
1 Royal Oak Yard  
London  
SE1 3GA

The trustees, who are also directors of the charity for the purposes of the Companies Act, submit their annual report and audited financial statements for the year ended 31 December 2005. The trustees have adopted the provisions of the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" issued in October 2000 in preparing the annual report and financial statements of the charity.

The organisation is a charitable company limited by guarantee and was set up on 29 September 1999 (and registered as a charity on 16 January 2002). It is governed by a memorandum and articles of association. Its objectives are to "relieve the suffering of people living with HIV & AIDS and related illnesses.

#### Current projects are:

Russia	Ongoing work in respect of Capacity Development.
Ukraine	Ongoing work in respect of Capacity Development.
Malawi	Ongoing work in respect of orphan care
Uganda	Access to medicine

#### Members of the Management Committee

Chairman	Ruth Webb	
Members	Colin Webb	
	Terry White	resigned September 18. 2005

#### Results for the year

Net incoming resources for the year amounted to £9,340 and of this £822 is in respect of restricted projects and unrestricted projects of £8,518.00

It is the intention of the trustees to establish sufficient funds to enable the charity to continue its current activities for a period of two months should there be a significant drop in funding.

#### Responsibilities of the Trustees

Company Law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of the company and of the financial activities for that year. In preparing those financial statements the trustees are required to

- select suitable accounting policies and then apply them consistently
- make judgements and estimates that are reasonable and prudent
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue on that basis

The trustees are responsible for maintaining proper accounting records which disclose with reasonable accuracy at any time the financial position of the charitable company and to enable them to ensure that the financial statements comply with the Companies Act 1985. The trustees are also responsible for safeguarding the assets of the charitable company and hence taking reasonable steps for the prevention and detection of fraud and other irregularities.

#### Auditors

A resolution proposing that Elan & CO Consulting LLP be re-appointed as auditors of the charity will be put to the Annual General meeting.

This report has been prepared in accordance with the special provisions of Part VII of the Companies Act 1985 relating to small companies.

#### On behalf of the Management Committee

Joan D'Souza  
Company Secretary  
Date 29/06/06

We have audited the financial statements of The European Coalition of Positive People for the year ended 31 December 2005 on pages 16 to 21. These financial statements have been prepared in accordance with the Financial Reporting Standards for Smaller Entities (effective June 2002), the Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" published in October 2000, under the historical cost convention and the accounting policies set out therein.

#### Respective Responsibilities of trustees and auditors

As described on page 14, the trustees are responsible for the preparation of financial statements in accordance with applicable law and United Kingdom Auditing Standards.

Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and United Kingdom Auditing Standards.

We report to you our opinion as to whether the financial statements give a true and fair view and are properly prepared in accordance with the Companies Act 1985. We also report to you if, in our opinion, the report of the Trustees is not consistent with the financial statements.

If the company has not kept proper accounting records, if we have not received all the information and explanations we require for our audit, or if information specified by law regarding trustees remuneration and transactions with the company is not disclosed.

We read the report of the Trustees and consider the implications for our report if we become aware of any apparent misstatements.

#### Basis of audit opinion

We conducted our audit in accordance with United Kingdom Auditing Standards issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgments made by the trustees in the preparation of the financial statements, and of whether the accounting policies are appropriate to the company's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of the information in the financial statements.

#### Opinion

In our opinion the financial statements give a true and fair view of the state of the company's affairs at 31 December 2005 and of its result for the year then ended and have been properly prepared in accordance with the Companies Act 1985.

*Elan & CO Consulting LLP*

Elan & CO Consulting LLP  
Unit 3 Cedar Court  
1 Royal Oak Yard  
London  
SE1 3GA

Date 29/09/06

	Notes	Unrestricted Funds	Restricted Funds	Total	Funds
		£	£	2005	2004
				£	£
<b>Incoming resources</b>					
Grants / Donations	2	247,790	403,164	650,954	527,959
Consultancy		-	-	-	2,011
Miscellaneous		33	-	33	1,135
Interest	4	1,670	-	1,670	1,559
<b>Total incoming resources</b>		<b>249,493</b>	<b>403,164</b>	<b>652,657</b>	<b>532,664</b>
<b>Resources expended</b>					
Direct expenditure		96,695	361,220	457,915	221,634
Staff		64,578	40,940	105,518	93,138
Travel		1,330	-	1,330	28,349
Premises		30,183	-	30,183	23,699
Communications		4,108	-	4,108	7,584
Legal and professional		2,294	-	2,294	6,786
Volunteer expenses		2,379	118	2,497	5,479
Depreciation		5,126	-	5,126	8,129
Computer		20,950	-	20,950	9,831
Office		8,427	64	8,491	14,818
Donation		4,176	-	4,176	512
Advertising and promotion		-	-	-	5,411
Bank charges/Exchange movement		729	-	729	5,201
Research and training		-	-	-	11,584
<b>Total resources expended</b>		<b>240,975</b>	<b>402,342</b>	<b>643,317</b>	<b>431,753</b>
<b>Net incoming resources</b>	3	<b>8,518</b>	<b>822</b>	<b>9,340</b>	<b>100,911</b>
<b>Taxation</b>	5	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Net resources for the year</b>		<b>8,518</b>	<b>822</b>	<b>9,340</b>	<b>100,911</b>

	Notes	2005	2004
		£	£
Income		650,987	531,105
Direct Project Expenditure		402,342	217,034
		<u>248,645</u>	<u>314,071</u>
Administrative expenses		240,975	214,719
Surplus for the year		7,670	99,352
Interest Receivable	4	1,670	1,559
Surplus on Ordinary Activities before Taxation		9,340	100,911
Tax on Ordinary Activities	5	-	-
Surplus on Ordinary Activities after Taxation and carried forward to reserves		<u>9,340</u>	<u>100,911</u>

There were no other gains or losses other than those dealt with in the Income and Expenditure Account. The notes form part of these financial statements.

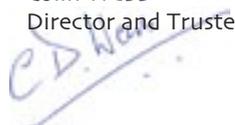
# Balance Sheet - 31/12/05

	Notes	2005	2004
		£	£
<b>Fixed Assets</b>			
Tangible Assets	7	6,121	11,247
<b>Current Assets</b>			
Debtors	8	47,023	24,451
Cash at bank and in hand		211,836	184,551
		258,859	209,002
Creditors: amounts falling due within one year	9	121,879	86,488
Net current assets		136,980	122,514
Net Assets		143,101	133,761
<b>Unrestricted funds</b>			
General funds	10	44,002	35,484
Restricted funds	10	99,099	98,277
<b>Total Funds</b>		<b>143,101</b>	<b>133,761</b>

These financial statements have been prepared in accordance with the special provisions of Part VII of the Companies Act 1985 relating to small companies and with the Financial Reporting Standard for Smaller Entities (effective June 2002).

Approved on behalf of the trustees:

Colin Webb  
Director and Trustee



Dated 29/09/06

The notes form part of these financial statements

## 1. ACCOUNTING POLICIES

## a. Accounting Convention

The financial statements have been prepared under the historical cost convention and in accordance with the Financial Reporting Standard for Smaller Entities (effective March 2000) and Statement of Recommended Practice (SORP) "Accounting and Reporting by Charities" published in October 2002 and applicable accounting standards.

## b. Company Status

The charity is a company limited by guarantee. The members of the company are the trustees named on page 13. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

## c. Income

Grant income received in respect of unrestricted activities is included in the statement of financial activities for the period in which the grant has been made. Any amount for the period after the date of the Financial Statements has been carried forward as deferred income.

Grant income in respect of restricted activities is accounted for when received.

The value of services provided by volunteers has not been included.

## d. Resources expended

Resources expended in respect of unrestricted activities are included in the Statement of Financial Activities on an accruals basis.

Costs directly associated to any restricted project are accounted for when paid. No apportionment of general overhead costs has been made to any restricted project.

VAT not recoverable, where applicable, is included with the resource expenditure.

## e. Tangible fixed assets

Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Office equipment                      33% on cost

## f. Foreign Currencies

Assets and liabilities in foreign currencies are translated into sterling at the rates ruling at the Balance Sheet date.

Transactions during the year are translated at the date of the transaction. Any exchange differences have been taken into account when arriving at the operating result.

	Unrestricted	2005 Restricted	Total	2004 Total
	£	£	£	£
<b>2. INCOME</b>				
Grants Received				
Positive Action	-	-	-	51,444
Elton John Aids Foundation	-	114,071	114,071	115,119
F Hoffman La Roche	51,081	-	152,380	112,409
F Hoffman La Roche Employees	-	287,855	186,556	141,540
Pfizer Europe	95,224	-	95,224	16,444
GlaxoSmithKline	76,667	-	76,667	52,024
Merck Sharp & Dohme	41,845	-	41,845	78,642
NOVIB	-	-	-	2,193
Comic Relief	-	-	-	18,400
AIDES	-	-	-	3,743
Other	7,329	1,238	8,567	1,513
Deferred Income	24,356	-	24,356	65,512
	<u>247,790</u>	<u>403,164</u>	<u>650,954</u>	<u>527,959</u>

	2005	2004
	£	£
<b>3. NET INCOMING RESOURCES</b>		
This is stated after charging:		
Depreciation	5,126	8,129
Auditors remuneration/Reporting Accountant		
For report	1,000	1,000
For Other Services	-	-
	<u>          </u>	<u>          </u>
<b>4. INTEREST RECEIVABLE</b>		
Bank and other interest receivable	1,670	1,559
	<u>          </u>	<u>          </u>
<b>5. TAXATION</b>		
The company was registered as a charity on 16 January 2002 and is exempt from corporation tax on its charitable activities.		
<b>6. TRUSTEES' REMUNERATION AND EXPENSES</b>	£	£
The Trustees do not receive any remuneration from the company other than reimbursement of travelling and subsistence costs when travelling on behalf of the company	22,134	22,134
Cost of attending Trustee Meetings	4,176	512
	<u>          </u>	<u>          </u>
	26,310	22,646
	<u>          </u>	<u>          </u>
<b>7. TANGIBLE FIXED ASSETS</b>	£	£
Office Equipment		
Cost		
At 1 January 2005	15,532	19,195
Additions in the year	19,195	15,532
At 31 December 2005	<u>34,727</u>	<u>34,727</u>
Depreciation		
At 1 January 2005	23,480	15,351
Charge for the year	5,126	8,129
At 31 December 2005	<u>28,606</u>	<u>23,480</u>
Net Book Value		
At 31 December 2005	<u>6,121</u>	<u>11,247</u>
At 31 December 2004	<u>7,948</u>	<u>3,844</u>

	2005	2004			
	£	£			
<b>8. DEBTORS</b>					
Contract income receivable	-	8,313			
Social security and other taxes	9,114	655			
Other debtors and prepayments	37,909	15,483			
	<u>47,023</u>	<u>24,451</u>			
<b>9. CREDITORS : Amounts falling due within one year</b>					
Social security and other taxes	1,427	-			
Deferred income	24,356	79,593			
Other creditors	96,096	6,895			
	<u>121,879</u>	<u>86,488</u>			
<b>10. MOVEMENTS IN FUNDS</b>					
	1 January 2004	Incoming Resources	Outgoing Resources	Transfers	31 December 2005
	£	£	£	£	£
Restricted funds	98,277	403,164	402,342	-	99,099
Unrestricted funds	35,484	249,493	240,975	-	44,002
	<u>133,761</u>	<u>652,657</u>	<u>643,317</u>	-	<u>143,101</u>