

2012 annual report



The International AIDS Society

OUR MISSION

Who we are

The International AIDS Society (IAS) is the world's leading independent association of HIV professionals.

Our members include professionals from all disciplines, most notably researchers, clinicians, nurses, laboratory technicians, educators, social service providers, health care providers, advocates, lawyers, media practitioners, and policy and programme planners.

Our Vision

The future we see: a global movement of people working together to end the HIV epidemic, applying scientific evidence and best practice at every level of the HIV response.

WHAT WE DO

We connect. By convening the world's foremost international conferences on HIV and AIDS and specialized meetings, we provide critical platforms for presenting new research, promoting dialogue and building consensus to advance the global fight against HIV.

We promote. By promoting dialogue, education and networking, and providing access to best practice, professional development and skills building, we help build capacity and close gaps in knowledge and expertise at every level of the HIV response.

We mobilize. By advocating for the right to an evidence-informed response to HIV and for a concerted research effort to build that evidence base, we contribute to continuous improvement of the global response to HIV.



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XIX International AIDS Conference
(AIDS 2012); International AIDS Society

Message from the President and the Executive Director

Dear IAS members,
partners and supporters,

2012 was a remarkable year for all of us involved in the HIV and AIDS field. Recent scientific advances, including additional evidence on treatment as prevention and growing momentum for an HIV cure, together with a significant decrease in new HIV infections, an increase in the number of people accessing treatment (up 60% between 2010 and 2012) and progress in scaling up HIV services worldwide, gave us a renewed sense of optimism, similar to what we experienced in the 1990s when the first combined antiretroviral therapy became available.

However, much remains to be done in order to realize an AIDS-free world. Despite the achievements, too many people still do not have access to treatment and those who are most affected by HIV still suffer from exclusion and marginalization. Sixty one countries in the world criminalize HIV transmission and violate the rights of people living with HIV. Forty six countries have some form of travel restrictions based on HIV status, and 20 countries deport individuals once a person's HIV-positive status is discovered. These figures tell us that we still have a long way to go to end AIDS, and that the HIV epidemic involves not only issues related to global health but also issues related to human rights, law and social justice.



Françoise Barré-Sinoussi, President.
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In order to better address these complexities and the new challenges linked to the HIV epidemic, in 2011 the IAS Governing Council added Treatment as Prevention (TasP) and Effectiveness and Efficiency (E²) of National AIDS Programmes to its policy and advocacy priorities for 2012 and 2013. The other priorities are Human Rights, HIV Cure, Social and Political Research, and Key Affected Populations (KAPs). As a result of these developments, in 2012 the IAS further expanded its activities in all six policy and advocacy priorities.

In July 2012, in conjunction with the XIX International AIDS Conference (AIDS 2012) in Washington, D.C., the IAS and its partners launched the *Towards an HIV Cure* Global Scientific Strategy, which is aimed at establishing an international research alliance and expanding the global collaboration of existing consortia. In 2012, the IAS also formed an international TasP Advisory Group of experts from various disciplines who aim to develop a strategy to examine and debate issues related to TasP. A similar approach was also used in the case of the Effectiveness and Efficiency (E²) policy priority, and in April the IAS and its partner organizations convened a multi-stakeholder consultation on E² in Nairobi, Kenya, in order to share recent research findings and best practices; they also began planning additional country consultations which are due to take place in 2013.

In July, some 24,000 participants gathered in Washington, D.C., for the AIDS 2012 conference convened under the theme *Turning the Tide Together*. AIDS 2012 marked a milestone in the history of the HIV epidemic. For the first time, delegates took part in extensive discussions about a cure for HIV, and also for the first time, global agreement was reached on the possibility to end mother-to-child transmission of HIV. The conference will be remembered for the high quality of the science presented, particularly related to basic science, and for the exceptional involvement of political leaders and other high-level speakers. In 2012, the IAS also launched the



Bertrand Audoin, Executive Director.
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Collaborative Initiative for Paediatric HIV Education and Research (CIPHER), a major two-year paediatric research initiative aimed at addressing outstanding research gaps related to clinical management and delivery of services to infants, children and adolescents affected by HIV.

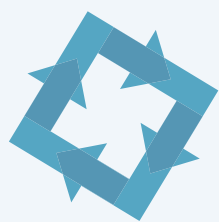
All IAS activities have the ultimate goal to contribute to the response to HIV by promoting evidence-informed policies and human rights for each person, regardless of their economic, social or cultural status. In 2013, the IAS celebrates 25 years of commitment and we thank our growing membership and our donors for their commitment. It is thanks to your support that we have been able to become an influential voice in the HIV field.

Best wishes,

Françoise Barré-Sinoussi
President

Bertrand Audoin
Executive Director

Geneva, June 2013



IAS Strategic Plan 2010–2014

The IAS strategic plan was developed in 2009 at a critical time in the global response to AIDS. Despite the remarkable progress demonstrated as a result of scaling up prevention, treatment, care and support programmes, coupled with the impact that research is having on our understanding of the epidemic, political and financial commitment to AIDS appears to be lagging behind in some countries. At a time when there appears to be growing complacency among many political leaders and communities, the strong voice of the IAS is more important than ever.

This annual report describes IAS activities during the third year of the new strategic plan, showing IAS members, donors and partners how their participation, investment, support and collaboration

have allowed the IAS to deliver on its commitments and strengthen its leadership role in the global response to AIDS. The IAS Strategic Plan 2010–2014 is available at www.iasociety.org.

The scheduled mid-term review of the five-year strategy began in 2011 and concluded in July 2012. In December, at the annual Governing Council (GC) retreat, the GC approved the recommended edits to the IAS Strategic Plan 2010–2014, based on the mid-term review.

It was agreed not to change the strategy, but rather to edit the existing content and use stronger and more unequivocal language. A new strategy, to start in 2015, will be developed in 2013 and 2014, and will be presented for approval at the 2014 GC Retreat.



AIDS Memorial Quilt in Washington, D.C.
Photo: ©IAS/Ryan Rayburn; CommercialImage.net

IAS STRATEGIC PLAN 2010–2014

To achieve our mission and vision, the IAS will pursue three interconnected goals:

Goal 1: Increase knowledge and skills and foster creative solutions to challenges in the response to AIDS through dialogue and debate.

Goal 2: Advocate for the implementation of effective, evidence-based policies and programmes to enhance the global response to AIDS.

Goal 3: Strengthen research capacity, identify research priorities across all disciplines and advocate to address them.

The IAS has three foundations, which reflect the core strength and assets of the organization:

Foundation 1: Our international conferences on HIV and AIDS are effective and efficient.

Foundation 2: Our organization is effective and sustainable.

Foundation 3: Our membership is strong, diverse and experienced.

These foundations will enable us to fulfil the ambitious programme of work described in this strategic plan.

In all its work, the IAS recognizes both the importance and the key role played by the full range of HIV professionals in the global, national and local AIDS responses and their efforts to deliver services, as well as strengthen systems and build knowledge.



Conferences, Professional Development and Partnerships

Twenty five years' experience has demonstrated the critical importance of building and sustaining a highly motivated, informed, well-trained and supported workforce of HIV professionals.

The work of the IAS is strongly focused on this objective, which we endeavour to achieve through our international conferences on HIV and AIDS, through professional development programmes, education and skills-building activities, and through our collaboration with regional conferences and organizations.



Michel Sidibé, UNAIDS Executive Director, with Florence Uche Ignatius and her daughter Ebube Sylvia Taylor at the AIDS 2012 Opening Session.
Photo: ©IAS/Steve Shapiro; CommercialImage.net

XIX INTERNATIONAL AIDS CONFERENCE (AIDS 2012)

The XIX International AIDS Conference (AIDS 2012) held in Washington, D.C., USA, from 22–27 July 2012, and convened under the theme *Turning the Tide Together*, attracted more than 24,000 participants, including 17,066 delegates from 183 countries. Thanks to years of dedicated advocacy to end the United States of America's misguided entry restrictions on people living with HIV, the International AIDS Conference returned to the USA after 22 years, thus marking a huge public health and human rights victory.

Speakers and delegates embraced the theme *Turning the Tide Together* as it represented an urgent call to act on recent scientific advances in HIV treatment and biomedical prevention, the momentum for an HIV cure and vaccine, and continuing evidence of the ability to scale up effective interventions in the most-at-need settings.

There was significant optimism at AIDS 2012 that HIV as an epidemic could be controlled within a generation. Such optimism was simultaneously tempered by the recognition that many years of work remain ahead. The logistical challenges involved in achieving an AIDS-free

generation, coupled with issues surrounding the global financing of HIV research, were the subject of many sessions.

Over 300 presentations on original research were made at the conference in the following five areas:

- Basic Science (Track A)
- Clinical Science (Track B)
- Epidemiology and Prevention Science (Track C)
- Social Science, Human Rights and Behavioural Science (Track D)
- Implementation Science, Health Systems and Economics (Track E)

More than 1,900 media professionals from 79 countries attended AIDS 2012, and some 17,000 articles published in July 2012 directly referred to the conference or covered topics relevant to it.

People living with HIV (PLHIV) spoke at a broad cross-section of sessions, including plenaries.

AIDS 2012 featured the largest Global Village of any previous International AIDS Conference, with over 265 events held in an area comprising over 190,000 square feet (18,000m²). Aimed at linking community, science and good leadership, the Global Village hosted installations, discussions and performances from all over the world. One of the most vibrant and interactive parts of the conference programme, the Global Village was open to the general public as well as conference delegates.

The conference hubs programme facilitated the involvement of more than 6,700 participants from 41 countries. Over 150 hubs were hosted on more than 74 topics ranging from stigma to prevention of mother-to-child-transmissions. Two key hubs in Kiev, Ukraine and Kolkata, India, facilitated the participation of two critical populations – people who use drugs and sex workers – who were unable to attend the conference due to visa restrictions.

AIDS 2012 continued to demonstrate the International AIDS Conference's key role in bringing important new scientific knowledge to bear on our understanding of HIV and how best to shape the response to it.

TOWARDS AN HIV CURE GLOBAL SCIENTIFIC STRATEGY

The two-day pre-conference symposium *Towards an HIV Cure* unveiled a research strategy that focuses on two areas: further characterization of the so-far untreatable HIV reservoirs, and elucidation of the means by which “elite controllers” manage to keep their HIV infections at very low levels, even when not on antiretroviral therapy (ART).

The symposium provided a platform to present state-of-the-art basic science and clinical research on the priority areas, which gave impetus to accelerate research on viral reservoirs and novel strategies towards achieving a cure for HIV infection. It also offered a valuable opportunity for scientists who are working on an HIV cure to share ideas, as well as to debate and network among their peers.



Sharon Lewin, Rowena Johnston, Steven Deeks, Françoise Barré-Sinoussi, Mark Harrington, Michel Sidibé and Bertrand Audoin at the *Towards an HIV Cure* Global Scientific Strategy press conference (Washington, D.C., 19 July 2012).
Photo: ©IAS/Steve Shapiro; CommercialImage.net

HIGH-PROFILE VOICES AT AIDS 2012

AIDS 2012 featured a number of high-profile speakers who inspired delegates and brought energy and new insights to the conference programme. Among those who spoke were: President Bill Clinton; U.S. Secretary of State, Hillary Rodham Clinton; U.S. Secretary of Health and Human Services, Kathleen Sebelius; South African Deputy President Kgalema Motlanthe; Former U.S. First Lady Laura Bush; HRH Mette-Marit, Crown Princess of Norway; World Bank President Jim Yong Kim; UNAIDS Executive Director Michel Sidibé; NIAID Director Anthony Fauci; philanthropists Bill Gates and Elton John and the actresses Whoopi Goldberg and Sharon Stone.

THE WASHINGTON D.C. DECLARATION

In conjunction with AIDS 2012, the IAS, its conference organizing partners and the University of California San Francisco launched the Washington D.C. Declaration, a collective call to action to change the course of the epidemic. The Washington D.C. Declaration recognizes the fact that through new scientific advances and societal, political and human rights gains, it is possible to turn the tide against AIDS and begin to end the epidemic in our lifetimes. Individuals and organizations can sign the Washington, D.C. Declaration at: www.2endaids.org.

“ AIDS 2012 featured the largest Global Village of any previous International AIDS Conference, with over 265 events held in an area comprising over 190,000 square feet (18,000m²). ”



U.S. Secretary of Health and Human Services Kathleen Sebelius addresses the AIDS 2012 Opening Session.
Photo: ©IAS/Steve Shapiro; CommercialImage.net

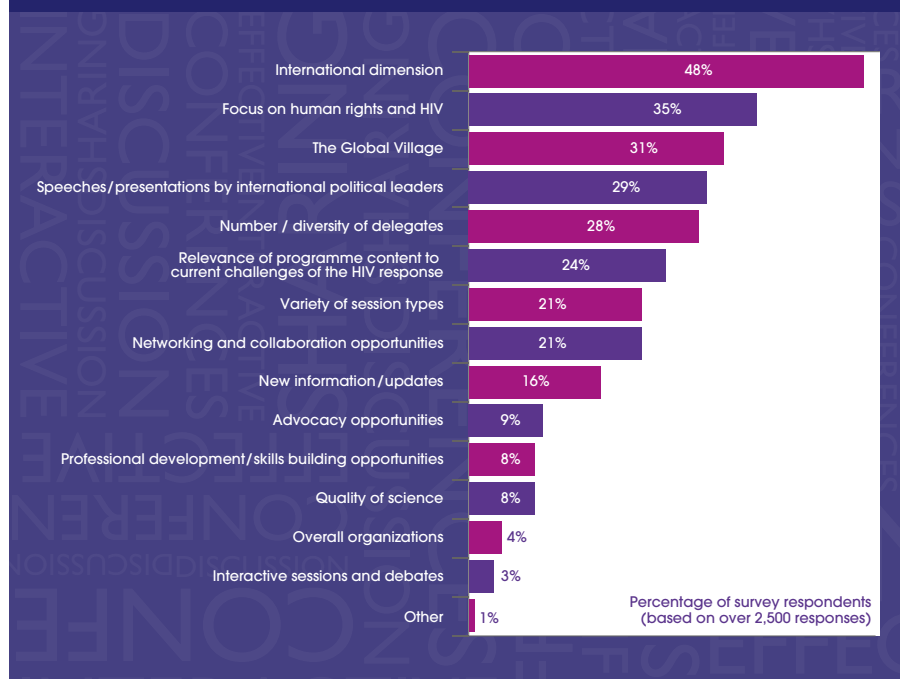
SCIENTIFIC HIGHLIGHTS OF AIDS 2012

AIDS 2012 presented evidence-informed sessions that promoted scientific excellence and inquiry, encouraged individual and collective action, and fostered multi-sectoral dialogue and constructive debate. Sessions focused on the latest issues in HIV science, policy and practice; they also shared key research findings and best practices, and examined knowledge gaps.

Among the highlights of the scientific findings presented at AIDS 2012 were:

- Several studies examining the impact of various interventions on viral reservoirs. The French National Agency for Research on AIDS and Viral Hepatitis (ANRS) presented data on a group of 11 individuals, part of the VISCONTI cohort, who were treated with ART very early after HIV infection and for a limited period. Six years after interruption of treatment, no viral rebound occurred in any of these 11 patients. Interestingly, they possess an extremely low reservoir of HIV in their cells, similar to that of "elite controllers".
- In another presentation, Timothy Heinrich (Harvard Medical School) described the unexpected long-term reduction in peripheral blood HIV-1 reservoirs in four patients with ART-suppressed HIV who had received allogeneic hematopoietic stem cell transplants with HIV-susceptible cells.
- According to research presented by the AIDS Clinical Trials Group, a human papillomavirus (HPV) vaccine designed to protect against four high-risk HPV genotypes had strong activity in a trial of young and middle-aged HIV-positive women in the USA, Brazil and South Africa. Investigators from the Adolescent Medicine Trials Network presented data from a second HPV trial that they believe supports the vaccination of young HIV-positive women.
- Two additional studies presented at AIDS 2012 contained potentially significant treatment implications. Three newer antiretrovirals – the integrase inhibitors Raltegravir and Dolutegravir and the non-nucleoside Etravirine – had good antiviral activity in three studies of children and adolescents taking failing regimens.
- In the HIV Prevention Trials Network (HPTN) 052 study, the first trial that had randomized HIV-positive people to start ART above 350 or below 250 CD4 cells/mm³, earlier ART significantly lowered incidence of AIDS-related diseases and tuberculosis. HPTN 052 investigators proposed that "the combined treatment and prevention benefits of ART support early initiation" of treatment. From a treatment-as-prevention perspective, HPTN 052 established the principle that treating HIV-positive people at a higher CD4 count lowers the risk that they will transmit the virus to steady sex partners. Several reports offered further analysis of HPTN 052, and of related studies of the test-and-treat strategy, which calls for expanded HIV testing and immediate treatment of everyone who tests positive. Some of this research raised questions about how effective test and treat will be in practice, rather than in a carefully controlled trial.
- AIDS 2012 presented results of research on two simple circumcision methods that require less expertise and time than traditional methods, which involve surgical staff and operating room time. Studies on the Shang Ring and PrePex methods offer evidence that circumcision can be completed safely and effectively after brief training of non-physician professionals. These simpler circumcision procedures could help lower HIV incidence in high-prevalence countries which have a shortage of trained physician surgeons.

MAIN ADDED VALUES OF AIDS 2012 COMPARED WITH OTHER HIV-RELATED CONFERENCES



EVALUATING AIDS 2012

The AIDS 2012 evaluation report demonstrates that the International AIDS Conference continues to be a key forum, attracting thousands of stakeholders engaged in the response to HIV and AIDS. The conference offers a strategic platform to share scientific, programmatic and policy knowledge, raise awareness, advocate for key issues, and create and reinforce partnerships and alliances. The report also highlights the potential impact of the conference on delegates and their work, and it indicates the capacity for this influence to extend far beyond those who attended the event.

The evaluation report points out that new knowledge, opportunities for future collaboration, as well as renewed motivation and a sense of purpose were the main benefits gained by AIDS 2012 delegates. Delegates who were surveyed were asked if AIDS 2012 offered something unique, and unavailable at other well-known scientific/health conferences, with the majority (61%) of surveyed delegates replying "yes". As shown on the adjacent chart, the international dimension, the focus on human rights and HIV and the Global Village were considered to be the main added values of AIDS 2012 compared with other scientific/health

conferences (selected by 48%, 33% and 31% of surveyed delegates, respectively).

The evaluation demonstrated that AIDS 2012 yielded important benefits not only for participants but also for non-attendees who followed the conference remotely via the Internet. In Washington, D.C., conference organizers communicated with delegates and non-attendees via the website, a conference blog, as well as via YouTube, Twitter and Facebook. Also, for the first time, the AIDS 2012 Programme was available through a mobile application which was rated "useful" or "very useful" by 75% of the delegates surveyed.

A total of 39 posts were published on the conference website, which was visited by almost 90,000 people during the period of 22 to 27 July. The week of the conference also saw over 85,000 #AIDS2012 tweets (a tenfold increase on AIDS 2010 figures), and 14,475 downloads of the AIDS 2012 mobile app. The AIDS 2012 Facebook page registered a total of 7,060 fans. In addition, 26 conference-related videos were uploaded on YouTube, attracting more than 25,000 views. The complete AIDS 2012 Evaluation Report is available for download on the AIDS 2012 website www.aids2012.org.



Abstracts Poster Area at AIDS 2012.
Photo: ©IAS/Debbie W. Campos; CommercialImage.net

PROFESSIONAL DEVELOPMENT

Abstract Mentoring

The IAS, through the *Journal of the International AIDS Society* (JIAS), offered for the sixth time the Abstract Mentor Programme (AMP), an online mentoring programme for conference abstract submitters. Its aim is to help investigators improve their abstracts before submission. The AMP provides a unique opportunity for young and/or less-experienced abstract submitters to receive feedback from abstract mentors and to improve their draft abstracts before submission to IAS-convened conferences. Mentors comprise experienced researchers who volunteer to support younger investigators. The AMP is independent from the conference abstract review and selection process.

“Workshops at AIDS 2012 proved to be a very popular part of the conference programme and received strong support from participants. Workshops will continue to form a core part of the conference programme for AIDS 2014.”

For the AIDS 2012 AMP, 115 volunteer mentors provided feedback and support to researchers who requested mentoring, helping them to improve their abstracts. The mentors provided input on 582 abstracts, 67% of which were subsequently submitted to the conference. A total of 91 abstracts (23% of submitted abstracts that were mentored) were finally accepted for presentation at the conference through the blind peer review process. The AMP was highly rated by both mentors and abstract submitters.

Abstract Writing e-course

JIAS developed a conference abstract writing e-course in collaboration with the Health[e]Foundation to support the Abstract Mentor Programme and make its learning materials more widely available. The course provides authors with comprehensive guidelines, examples and exercises on scientific writing and publication practices. The course was further updated in time for the AIDS 2012 conference. Authors who intended to submit their draft abstracts to the abstract mentor programme were requested to complete the abstract writing e-course before submission.

Community Abstract Mentoring Program (CAMP)

In order to support participation of communities of colour at AIDS 2012, the National Latino AIDS Action Network (NLAAN), the National Minority AIDS Council and the National Alliance of State & Territorial AIDS Directors launched a focused Community Abstract Mentoring Program (CAMP) based on the IAS Abstract Mentor Programme experience. Following a train the trainers session by JIAS, 34 applicants to the programme were enrolled and trained as mentors to

encourage researchers from US-based communities of colour to submit abstracts to AIDS 2012. JIAS provided support to the programme throughout and also facilitated two webinars on abstract writing, organized by NLAAN and the Black AIDS Institute.

At AIDS 2012, JIAS organized an abstract mentor meeting, bringing together mentors from both the IAS AMP and CAMP, to enable the mentors to share their experience and provide feedback in order to improve the programmes.

Conference Workshops

The AIDS 2012 workshop programme was aimed at increasing the capacity of delegates to implement and advocate for effective, evidence-informed HIV and AIDS policies and interventions in their respective communities and countries.

AIDS 2012 received 576 workshop proposals for consideration, representing a 16% increase in proposals received for AIDS 2010. After intensive review processes, 40 workshop proposals (7%) were accepted for inclusion in the AIDS 2012 programme, which featured a total of 60 workshops.

The AIDS 2012 workshop programme was structured into three broad areas: Scientific Development, Leadership & Accountability Development, and Community Skills Development, and into three levels (Foundation, Intermediate, and Advanced) in order to maximize the potential of the conference platform in sharing experience and increasing the knowledge and expertise of professionals working in HIV-related areas.

Workshops at AIDS 2012 proved to be a very popular part of the conference programme and received strong support from participants. Workshops will continue to form a core part of the conference programme for AIDS 2014.

JOURNAL OF THE INTERNATIONAL AIDS SOCIETY (JIAS) “PUBLISH OR PERISH” AND “MEET THE EDITORS – INSIGHT INTO PUBLISHING HIV RESEARCH” WORKSHOP

As part of the JIAS's mission to encourage the ongoing professional development of younger investigators, during AIDS 2012, JIAS editors provided junior and less-experienced investigators with training opportunities in scientific writing and publishing in peer-reviewed journals.

The “Publish or Perish” workshop provided participants with guidance on the important elements of a scientific manuscript and

on how to draft a research manuscript. In addition, facilitators shared useful advice on how to choose an appropriate journal, as well as insights into the editorial process and examples of common reasons for rejection. This workshop was co-facilitated by the editors of JIAS and *AIDS Care*.

In addition, JIAS organized the “Meet the Editors – Insight into Publishing HIV Research” workshop, which featured

a panel of prominent editors from JIAS, *PLoS Medicine*, *JAIDS*, *Addiction*, *AIDS Care* and *Science*. Editors debated issues in publishing on the topics of open access versus subscription journals, different peer review models, ethical integrity in HIV research and citation measures, including the impact factor. Participants were encouraged to comment and ask questions throughout the session.

PARTNERSHIPS

The IAS believes that establishing and nurturing partnerships within the HIV world is key to achieving a coherent and sustained response. As a result, the IAS focuses on strengthening its existing partnerships and partnering with organizations to achieve common objectives.

Partnerships developed throughout the planning of AIDS 2012 were crucial to the success of the conference. International partners were UNAIDS, the International Community of Women Living with HIV/AIDS (ICW), the International Council of AIDS Service Organizations (ICASO), the Global Network of People Living with HIV (GNP+), the Caribbean Vulnerable Communities Coalition (CVC) and Sidaction. Local partners were the District of Columbia Department of Health, The White House Office of National AIDS Policy (ONAP), The Black AIDS Institute, the U.S. Positive Women's Network, the National Institutes of Health and the HIV Medicine Association of the Infectious Diseases Society of America.

“ The IAS focuses on strengthening its existing partnerships and partnering with organizations to achieve common objectives. ”

As part of the partnership work in 2012, the IAS supported the following conferences:
HIV/AIDS and Sexually Transmitted Infections (FORO 2012)

The VI Latin American and Caribbean Forum on HIV/AIDS and STIs (FORO 2012) took place in Sao Paulo, Brazil from 28–31 August 2012. More than 5,000 delegates, mainly from Brazil and neighbouring countries participated. The conference theme was *Prevention and its Challenges*. IAS collaboration with FORO 2012 included a booth exchange at AIDS 2012, free registrations as well as a session at FORO at which IAS reported on AIDS 2012 and on the Sex Workers' Freedom festival, a conference hub held in Kolkata (www.aids2012.org/WebContent/File/NSWP_Daily%20Bulletin_%206_%2022July_2012.pdf).

The IAS-organized session, “Ecos de Washington e Calcutta: contribuicoes da Conferencia Internacional de 2012” (Echoes from Washington and from Kolkata: contributions from the International AIDS Conference 2012) included a presentation by Carlos Caceres, IAS Governing Council member from Latin America, which summarized all five conference tracks which focused on main outcomes related to prevention.



Demonstration at AIDS 2012.
Photo: ©IAS/Debbie W. Campos; CommercialImage.net



Sex Workers' Freedom Festival, Kolkata, India.
Photo: ©IAS

The 2012 United States Conference on AIDS (USCA 2012)

The IAS-organized seminar "Community and Civil Society perspectives on AIDS 2012" provided an overview of U.S. community involvement in AIDS 2012; reviewing key community-focused activities before, during, and after AIDS 2012; highlighting key next steps for community action and encouraging sustained dialogue among U.S. communities on issues raised at the conference. As a programme partner to USCA, the IAS also assisted in reviewing abstracts and was present at the exhibition.

“The new status enables the IAS to actively engage with ECOSOC and its subsidiary bodies, as well as with the United Nations Secretariat.”

The Eleventh International Congress on Drug Therapy in HIV Infection (HIV11)

At HIV11, the IAS hosted an exhibition booth, which served as a meeting point for IAS members and also provided information on IAS initiatives, membership benefits and upcoming conferences. As part of a new initiative, JIAS published the meeting abstracts, produced the abstracts CD-ROM, and printed the abstracts book for the organizers. JIAS representatives were also in attendance at the exhibition booth to answer questions about the journal and to promote the journal's initiatives on capacity building in scientific writing.

Two thousand twelve also saw the IAS collaborate with the 17th International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA 2013), which

will take place in Cape Town, South Africa from 7–11 December 2013, and the 11th International Congress on AIDS in Asia and the Pacific (ICAAP 2013), which will be held in Bangkok, Thailand from 18–23 November 2013. Involvement in these conferences includes IAS representatives sitting on various committees, as well as IAS staff and Governing Council members providing technical assistance to the organizers.

In addition, the IAS collaborated and shared information with the organizers of the Social Aspects of HIV/AIDS Research Alliance (SAHARA). The 7th SAHARA Conference 2013 (SAHARA 7) will be held in Dakar, Senegal from 7–10 October 2013.

Consultative Status with ECOSOC

In 2012, the IAS was granted special consultative status with the Economic and Social Council (ECOSOC). The new status enables the IAS to actively engage with ECOSOC and its subsidiary bodies, as well as with the United Nations Secretariat, programmes, funds and agencies in a number of ways, including participation at meetings organized by

the council, preparing statements to be presented orally or in written form to the different commissions as well as designating authorized representatives to participate as observers at public meetings of ECOSOC and its subsidiary bodies, General Assembly, Human Rights Council and other United Nations intergovernmental decision-making bodies.



Policy and Advocacy

The policy work of the IAS identifies and addresses issues and mechanisms in the global policy environment that hinder the achievement of its vision, as well as those that advance it. We advocate for the acceptance of positive policies as the norm.

IAS advocacy mobilizes our constituencies to challenge structures of power, practices and attitudes that deprive people of their inherent human dignity by calling for the implementation of rights-based, evidence-informed policies and practices to improve outcomes for people living with or affected by HIV.

The international response to the AIDS epidemic has shown the world how advocacy can mobilize opinion and policy makers to overcome multiple barriers. It has effectively challenged stigma related to HIV and sexual orientation and it has helped mobilize subsequent innovation and effective social transformation for the AIDS response, including dramatically enhancing access to prevention, care and treatment. Despite unprecedented commitments and significant achievements, the contexts are rapidly changing, and the challenges facing researchers, health care providers, policy makers and communities are substantial. The situation demands that HIV professionals gain clarity through informed analysis and committed engagement, so that they can continue working strategically and persist in their efforts to achieve an AIDS-free world.

The IAS continued to actively partner with stakeholders on other policy and advocacy issues in which the IAS was not in a position to play a leading role. In addition, IAS's research promotion work reinforced policy and advocacy work on gender.



Participants of the Sex Workers' Freedom Festival interviewed in Kolkata, India. Photo: ©IAS

IAS policy advocacy work in 2012 covered six priority areas:

- Human Rights – with a focus on HIV professionals
- HIV Cure – with a focus on global scientific strategy
- Social and Political Research – with a focus on deliverables at conferences
- Key Affected Populations (KAPs) – with a focus on evidence-informed action for communities
- Treatment as Prevention (TasP) – with a focus on implementation challenges and opportunities
- Effectiveness and Efficiency (E²) of National AIDS Programmes – with a focus on active involvement of HIV professionals

A large number of IAS policy and advocacy activities were organized at the XIX International AIDS Conference (AIDS 2012) in Washington, D.C., which took place from 22–27 July 2012.

KEY AFFECTED POPULATIONS

In collaboration with the Foundation for AIDS Research (AmfAR), and with support from Open Society Foundations, the IAS co-organized the pre-conference “Twin Epidemics of HIV and Drug Use: Innovative Strategies for Healthy Communities”. The event was attended by 200 professionals from five continents who work in a range of fields related to drug policy; they included parliamentarians, policy makers, people who use drugs, people living with HIV (PLHIV) and representatives of international organizations and civil society organizations. The objectives of the pre-conference were to:

- review progress made on implementing science-based public health approaches designed to address the harms associated with illicit drug use;
- highlight successful national responses and examine barriers that exist among nations which prevent the implementation of these programmes;

- bring together scientists, the affected community and policy makers with members of the legal and criminal justice systems to discuss ways to overcome these barriers and the necessary reforms in drug and legal policies, and
- develop recommendations on how to tackle the barriers and challenges at state, national, regional and global levels.

Participants shared knowledge, discussed the current global situation and concluded that there is an extraordinary body of evidence and practical experience on effective strategies to address HIV among drug users. Additionally, international experience has identified an impressive range of effective programmatic models designed to address prevention of HIV and drug overdose, referrals to drug and HIV treatment, and delivery of antiretroviral therapy in low-, middle- and upper-income countries.

The conclusion was that ending AIDS requires a massive effort in order to scale up access to treatment care and prevention for key affected populations, including people who use drugs. As such, appropriate allocation of funding is needed urgently, especially in regions with concentrated epidemics and, where they exist, barriers to access funding must be removed. Equally important is the implementation of

evidence-informed policy frameworks and community-based programmes.

U.S. entry restrictions on sex workers and people who use drugs limited the participation of these two key populations at AIDS 2012, and served to provide a stark reminder of the barriers and challenges facing these groups. Many presenters and powerful plenary presentations criticized U.S. immigration policy and called for changes; these issues were also the subject of several protests.

Over 200 presentations delivered as part of the official conference programme specifically reflected the concerns of key affected populations; highlighted existing efforts to bridge the gap and scale up access to treatment and care; promoted the importance of implementing tailored services; shared best practices and discussed the way forward.

To ensure the involvement and engagement of sex workers and people who use drugs who were not allowed to enter the country, two hubs were organized. These comprised a pre-conference event and a post-conference event for people who use drugs, which were held in Kiev, Ukraine and attracted approximately 200 participants, and a 500-participant event, which was held in Kolkata, India and brought together sex workers from 41 countries.

HIV TRAVEL RESTRICTIONS

At an AIDS 2012 satellite session presentation, delegates learned about new developments in travel restrictions in the Republic of Korea and delegates took stock of the current global situation on entry, stay and residence restrictions. The announcement by Kim Bong-Hyun, Deputy Minister for Multilateral and Global Affairs, Ministry of Foreign Affairs and Trade of the Republic of Korea, that the Republic of Korea had removed HIV-specific travel restrictions was historic. The momentum to remove remaining restrictions grows, as proved by the number of countries – a total of eight since 2010 – that have changed their policies.

“Concerted efforts around the globe are critical to removing barriers on HIV-related travel restrictions.”

Another key milestone presented at the satellite session was an initiative led by UNAIDS, in partnership with the Global Business Council for Health, and presented by Helga Ying, Senior Director of Worldwide Government Affairs and Public Policy at Levi Strauss & Co. The initiative calls for the removal of entry, stay and residence restrictions, and since AIDS 2012, 24 CEOs have signed a pledge to oppose the restrictions.

Concerted efforts around the globe are critical to removing barriers on HIV-related travel restrictions, and increased knowledge across all levels of society is essential to eliminating restrictions. The IAS in association with UNAIDS and other members of the Travel Task Team, including European AIDS Treatment Group (EATG), Global Network of People Living with HIV (GNP+), and AIDS Deutsche Hilfe, continues to direct its advocacy efforts at the elimination of the restrictions on entry, stay and residence for PLHIV. Such restrictions remain active in approximately 46 countries, territories and areas.



“We can end AIDS” march, Washington, D.C., July 2012.
Photo: ©IAS/Debbie W. Campos; CommercialImage.net

EFFECTIVENESS AND EFFICIENCY (E²) OF NATIONAL AIDS PROGRAMMES

The IAS together with UNAIDS, the Government of Kenya, The World Bank, and The Global Fund to fight AIDS, Tuberculosis and Malaria convened a multi-stakeholder consultation on 19 and 20 April 2012 in Nairobi, Kenya.

Global experts shared recent research findings, best practices and lessons learned in plenary and parallel interactive sessions. Representatives from national AIDS programmes and international stakeholders worked side by side with IAS members and local implementers to establish a roadmap towards enhancing effectiveness, efficiency and social sustainability. This represented a major opportunity for the over 100 HIV stakeholders from all fields and all levels attending the event to engage in the process of charting the way forward in the global and local HIV response.

The multi-stakeholder consultation achieved its objectives to:

- build commitment to advancing and measuring national AIDS programme efficiency and effectiveness at all levels to help ensure sustainable financing through a bottom-up approach informed by the perspectives of those most affected by programmes and most involved in their delivery, so as to more rapidly achieve the targets set out in the Political Declaration of the 2011 UN General Assembly High-Level Meeting on AIDS;
- present and discuss key achievements and efforts made by different stakeholders towards maximizing efficiency and effectiveness and ensuring sustainable financing;
- develop an operations research and advocacy agenda by identifying good practice and additional evidence required to maximize programme effectiveness and efficiency

at national/district/local level with the participation of all stakeholders, including HIV professionals and people living with HIV, and

- place the discussion of E² issues in the context of country ownership, shared responsibility and health systems strengthening.

In keeping with the IAS's commitment to the Global Compact, meeting materials were recycled and locally sourced. On the recommendation of its local partners, the IAS designated the Kibera Integrated Community Self-Help Programme (KICOSHEP) as the local non-governmental organization (NGO) recipient. Delegates were invited to bring donations, purchase handicrafts made by the NGO and network with the NGO representatives present at the meeting. By the time the event had concluded, KICOSHEP had earned 10,000 Kenyan Shillings from sales and it had also succeeded in collecting clothes, shoes, school supplies and training materials.

SOCIAL AND POLITICAL RESEARCH

AIDS has been and still is a profoundly political disease. Early association with stigmatized homosexual behaviour and liberating gay identity activism set the stage for subsequent innovative and highly effective social mobilization for the AIDS response, which included issues related to access to prevention, care and treatment globally. Today's rapidly changing context begets new, and in many ways more challenging, political dynamics. The opportunity to conduct more social research on abuses towards HIV professionals will contribute to enhanced understanding of these politics and renewed political approaches.

Responding to the concern that social and political sciences are not sufficiently reflected and included in IAS conferences or in the HIV response, the IAS has been catalyzing and promoting social and political sciences and research through its conferences, including holding special workshops at AIDS conferences and other key events.

In 2012, in Washington, D.C., an AIDS 2012 pre-conference brought together 60 social and political scientists and researchers to explore the contemporary politics of the AIDS response at global and national levels.

The consultation was conclusive in its recommendation that "thinking politically" is fundamental in moving from treatment to a rights-based approach and holistic response, from humanitarian to sustainable management of the HIV response.

TREATMENT AS PREVENTION: GIVING A VOICE TO DIFFERENT PERSPECTIVES

The IAS is committed to working towards universal access for all who require antiretroviral treatment, and it advocates for the scaling up of treatment and comprehensive HIV services. Building on our successes in evidence sharing and facilitating inter-sectorial dialogue on Treatment as Prevention (TasP), in 2012 the IAS established an International TasP Advisory Group, which was tasked with developing a strategy to examine and debate critical questions related to this approach.

The group comprises experts from various disciplines who are responsible for ensuring that the work carried out by the IAS addresses the pertinent issues on

TasP, while also ensuring that information is disseminated locally and that there is a strong link between the project outputs and the work of international policy makers.

In addition, the IAS launched plans for a series of country consultations, with the aim of giving a voice to country-level perspectives and highlighting the complexities of potential TasP implementation strategies. The first two country consultations in France, organized in partnership with Sidaction and the French National Agency for Research on AIDS and Viral Hepatitis (ANRS), and in Zambia, co-organized with the Ministry of Health and the National AIDS Council, are scheduled for early 2013.



Bill Gates of The Bill and Melinda Gates Foundation and Dr. Jim Kim, President of The World Bank at the AIDS 2012 symposia session: Improving Effectiveness and Efficiency in the HIV Response. Photo: ©IAS/Ryan Rayburn; CommercialImage.net

TOWARDS AN HIV CURE: GLOBAL SCIENTIFIC STRATEGY

In 2012, the IAS, as part of one of its policy priorities, led the development of the *Towards an HIV Cure* Global Scientific Strategy involving a group of internationally recognized scientists and stakeholders, under the direction of IAS President Professor Françoise Barré-Sinoussi. The Scientific Working Group worked towards the establishment of a consensus on the state-of-the-art HIV cure research, which laid the foundation for the Global Scientific Strategy. The aim of the strategy is to contribute to maximizing resources and to securing strategic investment in the most promising directions of HIV cure research, coupled with the establishment of an international research alliance and/or expansion and global collaboration of existing consortia. Within the Global Scientific Strategy, the international group of scientists identified seven priority

research areas, spanning basic science in virology and immunology, pre-clinical science and clinical trials.

The IAS launched the Global Scientific Strategy: *Towards an HIV Cure* at a scientific symposium in Washington, D.C. in July 2012, with the support of the National Institutes of Health (NIH), the French National Agency for Research on HIV and Viral Hepatitis (ANRS), Sidaction, and Treatment Action Group (TAG).

Following the seminal work carried out by the Scientific Working Group, the IAS and the *Towards an HIV Cure* Stakeholders' Advisory Board are fully dedicated to ensuring significant roll-out of the strategy, and they plan to coordinate future developments in collaborations and in advocacy on the benefits of an HIV cure, including through a second *Towards an HIV Cure* scientific symposium

in 2013. Meetings of HIV researchers and advocates, such as these symposia, where novel approaches can be presented and new collaborations established, are a vital factor in the development of an HIV cure. In parallel with and also subsequent to the development of the *Towards an HIV Cure* Global Scientific Strategy, the IAS has facilitated the creation of a number of topic-specific working groups. These working groups bring together leading scientists and community members on relevant topics, including ethics, psychosocial sciences, public health and cost-effectiveness. Moreover, the IAS has also mediated the creation of an Industry Collaboration Group with the aim of bringing together industry partners and cure researchers to facilitate and encourage interactions and collaborations.

COMMUNICATIONS

The ability to communicate effectively with members, donors, partners and a broad global audience is essential to the success of the IAS and its initiatives.

Components of the IAS communications plan include the IAS website; daily news on HIV and AIDS posted online; the *IAS Newsletter*, which is published online three times a year; monthly membership and conference updates; position statements; reports; media outreach, and social media tools such as Facebook, Twitter, a blog, a YouTube channel and, from 2012, a LinkedIn group.

In 2012, the IAS issued 54 media releases and statements as well as a variety of opinion pieces authored by IAS leaders. The IAS Communications Department organized several press conferences both in Geneva and in Washington, D.C. in conjunction with AIDS 2012. In addition, it organized the media launch of the *Towards an HIV Cure* Global Scientific Strategy. The department was also responsible for managing the AIDS 2012 media centre, which was used by over 1,900 media representatives, and it organized a two-day pre-conference media training session attended by almost 100 journalists. AIDS 2012 also marked the launch of a well-received IAS Membership Campaign.

In 2012, the IAS finalized and implemented the new IAS branding and logo livery.



Media at the AIDS 2012 Monday Plenary Session.
Photo: ©IAS/Steve Shapiro; Commercialimage.net

The new branding reflects the four pillars of IAS work: Science, Conferences, Membership and Advocacy, and it integrates the IAS principles of Connecting, Promoting and Mobilizing.

The IAS's online presence helps it to strengthen its communications with members, partners and stakeholders by providing relevant and timely information, easing the coordination of advocacy initiatives and serving as a tool to provide professional development opportunities. Visits to the IAS website reflect its importance as a critical source of information and analysis for HIV professionals. Between 2007 and 2011, visits to the website increased steadily, and this trend continued

in 2012, during which the website registered a total of more than 380,000 visits. Social media showed similar patterns: the IAS registered a steady increase in the number of followers on YouTube, Twitter, and Facebook, which showed the strongest growth, with the number of followers almost doubling between 2011 and 2012. Visits to the YouTube IAS channel and followers on Twitter have also increased.

These efforts are critical in promoting public awareness of HIV, disseminating new research and analysis, and advocating for political leadership to make the financial and policy commitments required for an effective response to the HIV pandemic.



Strengthening Research Capacity

LINKING HIV RESEARCHERS AND STAKEHOLDERS GLOBALLY: THE IAS-INDUSTRY LIAISON FORUM

Founded in 2001 by Joep Lange, IAS Past President, the IAS-Industry Liaison Forum (IAS-ILF) was established as a partnership forum to address complex and inter-related research issues in the HIV field. A unique initiative within the IAS, it brings together industry, academia, international organizations, community and other stakeholders. Its mission is to accelerate scientifically promising, ethical HIV research in resource-limited countries, with a particular focus on the role and responsibilities of industry as sponsors and supporters of research. The IAS-ILF fulfils this mission by identifying research gaps; promoting targeted research; identifying challenges and best practices; analyzing available data and evidence; disseminating information; consulting and convening stakeholders; providing industry expertise, and supporting capacity building for research and health delivery. By convening stakeholders and facilitating dialogue on challenges related to accelerating HIV, the IAS-ILF strives to make a contribution to the HIV response.



Rowena Johnston, Vice President and Director, Research with amfAR, and Shirin Heidari, IAS Senior Manager, Research Promotion, speak at the AIDS 2012 satellite - Gender and Science: Shifting the Paradigm in HIV. Photo: ©IAS/Ryan Rayburn; CommercialImage.net

BUILDING ON THE CONSENSUS STATEMENT AND STRATEGIC PLAN

Building on the recommendations of the Consensus Statement "Asking the Right Questions: Advancing an HIV Research Agenda for Women and Children" in 2010 and the strategic objectives of the Strategic Plan 2012–2014, the IAS-ILF organized a series of successful events in 2012 including an official affiliated event at the 19th Conference on Retroviruses and Opportunistic Infections (CROI 2012) titled "Pharmacology of ARVs: How HIV-1 infection differs in children and women". The first part of the session was devoted to pharmacokinetics and pharmacodynamics of ARVs in neonates, children and adolescents with HIV and or other comorbidities, while the second part of the session focused on ARV pharmacology in women and girls across different age groups. The session, which was well attended and highly rated comprised presentations by leading experts; it concluded with a dynamic panel discussion led by experts from academia, the community and industry.

The IAS-ILF continued to highlight research gaps in relation to women and children by hosting three satellite sessions in collaboration with different partners at the XIX International AIDS Conference (AIDS 2012).

A session titled "Catching children before they fall: Addressing the urgent drug development needs of children living with HIV" was organized in conjunction with the Drugs for Neglected Diseases Initiative (DNDi). A keynote address, presented by Stephen Lewis (co-director, AIDS-Free World), highlighted the urgency of developing appropriate antiretroviral drug formulations for young children living with HIV.

“IAS-ILF has made a significant contribution to the fight against HIV and AIDS by facilitating dialogue on challenges related to accelerating research.”

On behalf of the industry members of the ILF, Merck and ViiV gave a joint presentation on some of the technical challenges associated with developing and manufacturing paediatric formulations and obtaining regulatory approval. A panel of experts and representatives from the community of people living with HIV discussed possible ways to address the specific technical challenges associated with paediatric formulation development, while a second panel discussed ideas to accelerate the entry of improved paediatric HIV therapies.

Another session titled "Prevention of vertical transmission and beyond: How to identify, enrol and retain children in treatment programmes in resource-limited settings" was jointly organized with UNICEF and Management Sciences for Health (MSH).

The session highlighted challenges across the continuum of prevention of vertical transmission programmes, from scale-up of Prevention of Mother-to-Child Transmission (PMTCT) programmes to underlying factors in the failure to identify HIV-exposed infants, and linking infants and their families to care. The session also provided the opportunity for the Interagency Task Team (IATT) on prevention and treatment of HIV infection in pregnant women, mothers and their children to present its optimized list of paediatric ARV formulations; a condensed paediatric ARV formulation list to guide national programmes, procurement agencies, funders and manufacturers, and divided into three categories: optimal, for limited use, and non-essential. Presentations were followed by a dynamic panel discussion moderated by Scott Kellerman (global technical lead for HIV, MSH), where participants tried to answer to the question "From identification to retention: what can we do better?"

A third satellite session entitled "Gender and science: Shifting the paradigm in HIV research", jointly organized by the IAS and the Foundation

for AIDS Research (amfAR), highlighted the importance of sex and gender considerations in different aspects of science and why gender analysis really matters. A fascinating presentation by Professor Londa Schiebinger, Stanford University, and founder of the project EU/US Gendered Innovations in Science, Health & Medicine and Engineering, provided a perspective of an expert from outside the HIV research area, in which she emphasised that sex and gender factors must be considered in all fields. A panel of representatives from industry, the community, medical and scientific journals and funding agencies discussed ideas on how to shift the paradigm and change mindsets in HIV research, in order to increase awareness of sex and gender as important factors to improve the standards of science, encourage better representation of women in HIV clinical trials, and secure better gender-sensitive reporting.

The summary reports of the sessions are available on the IAS-ILF website <http://www.iasociety.org/ilf.aspx>.

At AIDS 2012, the IAS-ILF, in partnership with JIAS, developed the advocacy tool

The Red Card. It was distributed at the conference to encourage conference delegates to raise the card and ask presenting authors about any potential gender differences and similarities that they found in their research, and if results were not disaggregated by sex, why this was the case.



PUBLICATIONS

In 2012, IAS-ILF published a review article titled "Unresolved antiretroviral treatment management issues in HIV-infected children" (Heidari et al., *JAIDS*. 2012), as a follow-up to the comprehensive environmental scan and literature review conducted in 2010. For further information on the IAS-ILF achievements in 2012, please see the 2012 IAS-ILF Annual Report available on www.iasociety.org.

THE JOURNAL OF THE INTERNATIONAL AIDS SOCIETY (JIAS)

The *Journal of the International AIDS Society* (JIAS) is an indexed, peer-reviewed scientific journal that provides a forum for the dissemination of HIV-related research and welcomes submissions from various disciplines; in particular, it encourages submissions from high-prevalence countries. It operates under the editorial leadership of Editors-in-Chief Susan Kippax, Papa Salif Sow and Mark Wainberg, who is the JIAS founding editor. As an open access journal, JIAS articles are freely available online at www.jiasociety.org.

JIAS was previously published by the open access publisher BioMed Central. However, on 4 April 2012, JIAS was transferred to a new publishing platform and it is now published independently by the IAS. Another major milestone for JIAS was the receipt of its first impact factor of 3.256 (2011 Journal Citation Reports® Science Edition – a Thomson Reuters product) in June 2012.

Overall in 2012, JIAS published 51 articles and received 170 manuscript submissions. Just over half of the submissions received were by authors situated in low-and middle-income countries. The JIAS publications reached a wide readership, with over 250,000 article accesses in 2012. The website was visited by over 67,000 individuals from countries all over the world, including India, South Africa and Australia. JIAS also reaches over 6,000 fans through its Facebook page.

Four special issues were also published by JIAS in 2012. In June, *Structural drivers of the HIV epidemic* was published under the editorial leadership of Susan Kippax and guest editor Charlotte Watts. The special issue *Community action to end paediatric HIV infections*, supported by the Coalition for Children Affected

by AIDS, was launched in conjunction with the AIDS 2012 conference. Its editorial content was guided by guest editor Linda Richter and JIAS Executive Editor Shirin Heidari. In addition, JIAS published two abstract supplements from the 11th International Congress on Drug Therapy in HIV Infection and from AIDS 2012, respectively.

“As part of the journal’s mission to encourage the ongoing professional development of investigators working in HIV, JIAS editors provide training to improve junior and less-experienced investigators’ skills in writing for scientific, peer-reviewed journals.”

INTERNATIONAL AND MEDIA SCHOLARSHIP PROGRAMME

The International Scholarship Programme provides full and partial scholarships to highly qualified applicants who would be unable to attend the International AIDS Conferences without receiving financial support. The programme's goal is to bring to the conference individuals who would be most able to transfer newly acquired skills and knowledge to their own organizations and communities upon returning home.

Over 10,000 scholarship applications for AIDS 2012 were received from 181

countries and all areas of the HIV/AIDS field. A total of 851 successful recipients were selected according to recommendations and criteria established by the Conference Coordinating Committee, the Scientific Programme Committee, the Scholarship Review Committee, the Workshop and Programme Activities Working Groups, and the IAS Communications Department. The majority of scholarships were offered to delegates who would directly contribute to the conference programme through

an abstract, a programme activity (Global Village or Youth Programme) or workshop. A small number of media representatives were also funded to attend both the conference and a pre-conference media training course. In addition to these groups, priority was given to women, people living with HIV (PLHIV), people from key affected populations, young people, researchers, community activists and civil society representatives.

AWARDS, FELLOWSHIPS AND GRANTS TO EXPAND HIV RESEARCH

In 2012, the IAS and its partners sponsored a number of scientific prizes and awards to recognize and support promising young and established researchers who are doing outstanding work in HIV research.

IAS-NIDA Fellowship Programme

With support from the U.S. National Institute on Drug Abuse (NIDA), the IAS has established a research fellowship programme which is focused on HIV and drug use, with the goal of contributing to advances in the scientific understanding of drug use and HIV, while fostering multinational research.

The fellowship programme consists of two types of awards: US\$75,000 to be awarded to a junior scientist for 18 months of post-doctoral training; and US\$75,000 to be awarded to a well-established HIV

researcher for eight months of professional development training. Both take place at leading institutes excelling in research in the HIV-related drug use field. Three post-doctoral fellowships and two professional development fellowships were awarded in conjunction with the XIX International AIDS Conference (AIDS 2012) to:

Salequl Islam, Bangladesh, who will study "Mechanisms and implications of injection and inflammation among HIV/HCV-coinfected drug users" in the ALIVE Study under the guidance of Gregory D Kirk, Associate Professor at the Johns Hopkins Bloomberg School of Public Health.

Georgios Nikolopoulos, Greece, who will develop "Measures to study how macro-level economic and social changes may have affected HIV risk in the population of injecting drug-users" under the guidance of Samuel Friedman, Senior Research Fellow in the Institute for AIDS Research at National Development and Research Institutes, Inc. and the Director of the Interdisciplinary Theoretical Synthesis Core in the Center for Drug Use and HIV Research, New York City.

Mehrak Javadi Paydar, Islamic Republic of Iran, who will analyze the "Neuroprotective effects of estrogen/soy isoflavones against development of HIV-induced neurodegeneration in awake, freely moving rats through modulations in dopamine transmission system" under the guidance of Rosemarie Booze, Professor in Behavioural Neuroscience at the University of South Carolina, Department of Psychology Faculty.

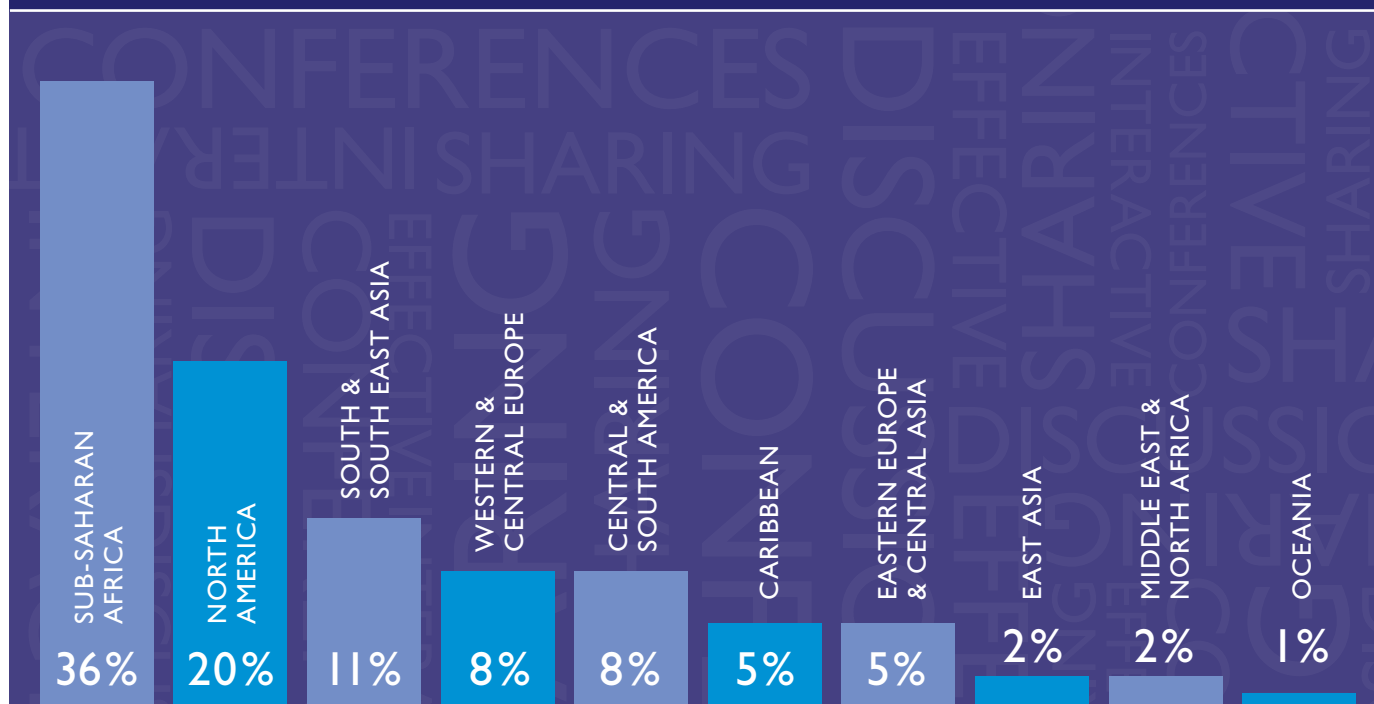
Makhbatsho Bakhromov, Tajikistan, who will examine the linkage between "Temporary labour migration, substance abuse and HIV risk among Tajik male migrants in Moscow" under the guidance of Judith Levy, Associate Professor at the University of Illinois at Chicago, School of Public Health.

Seyed Ramin Radfar, Islamic Republic of Iran, who will analyze "The prevalence of ATS use among those who are under MMT/BMT and its effects on HIV risky related behaviours in Isfahan, Iran" under the guidance of Richard Rawson, Associate Director of UCLA Integrated Substance Abuse Programs and Professor-in-Residence at the UCLA Department of Psychiatry.



AIDS 2012 International and Media Scholarship recipients.
Photo: ©IAS/Steve Shapiro; CommercialImage.net

REGIONS BENEFITTING FROM THE SCHOLARSHIP PROGRAMME



Creative and Novel Ideas in HIV Research (CNIHR) – Encouraging Innovation in HIV Research

With the support of the U.S. National Institutes of Health (NIH) and the Centers for AIDS Research (CFAR), the IAS established the Creative and Novel Ideas in HIV Research (CNIHR) scholarship programme in 2009 to encourage researchers without prior experience in HIV research to attend the 5th IAS Conference on HIV Pathogenesis, Treatment and Prevention (IAS 2009) in Cape Town, South Africa.

Following the scholarship programme, the Creative and Novel Ideas in HIV Research (CNIHR) Grants Programme was established in 2010. The 2010 round provided 10 research grants amounting to US\$3.4 million as well as training and networking opportunities, in conjunction with IAS-convened conferences, to scientists from outside the HIV field. Building on the success of the 2010 round, the NIH Office of AIDS Research, in cooperation with the IAS and the Centers for AIDS Research (CFAR), awarded 12 research grants at AIDS 2012, based on a competitive application process. The programme offers grant funding for up to two years, with support of up to US\$150,000 per year in direct research costs.

The following grantees of the CNIHR Programme were awarded at AIDS 2012 in Washington, D.C.:

Jesse Bloom from the United States will complete a research project titled “The biophysical underpinnings of gp120 evolvability” under the guidance of Julie Overbaugh, Fred Hutchinson Cancer Research Center.

Michael Elliott from the United States will complete a research project titled “Apoptotic cell clearance signalling and HIV-associated inflammation” under the guidance of Stephen Dewhurst, University of Rochester.

Dhiraj Kumar from India will complete a research project titled “Cellular autophagy response on HIV infections and implications on opportunistic Mtb infections” under the guidance of Murali-Krishna Kaja, Emory University, Atlanta.

Wilson Liao from the United States will complete a research project titled “Psoriasis and HIV-1 control” under the guidance of Douglas Nixon, University of California, San Francisco.

Robert Lowe from the United States will complete a research project titled “Role of FoxP3 in blocking transcriptional activation of the HIV-LTR in regulatory T cells” under the guidance of Randy Cron, University of Alabama at Birmingham.

Adam Murphy from the United States will complete a research project titled “Impact of HIV status and race on disparities in prostate cancer treatment and incidence” under the guidance of Mike Saag, University of Alabama at Birmingham, and William Catalona, Northwestern University.

Gretchen Neigh from the United States will complete a research project titled “Effects

of adolescent stress and HIV on the stress response and neuroinflammation” under the guidance of Guido Silvestri and Andrew Miller, Emory University.

Matias Ostrowski from Argentina will complete a research project titled “Characterization of Gag trafficking pathways in HIV-1 infected macrophages and CD4+ T cells” under the guidance of Christopher Aiken, Vanderbilt University, Nashville.

Takayuki Ota from the United States will complete a research project titled “Rapid characterization of NAb in vivo using HoxA10 expanded HSC” under the guidance of Dennis Burton and David Nemazee, The Scripps Research Institute.

Thomas Rice from the United States will complete a research project titled “Obstructive sleep apnea, cardiovascular disease and HIV infection” under the guidance of Robert Kaplan, Albert Einstein College of Medicine, Yeshiva University, New York, and Alison Morris, University of Pittsburgh.

Shomyseh Sanjabi from the United States will complete a research project titled “Developing small animal models of HIV elite controller and rapid progressor immunity” under the guidance of Warner Greene, University of California, San Francisco.

Eroboghene Ubogu from the United States will complete a research project titled “CCR5 mediated trafficking of HIV-infected mononuclear leukocytes at the human blood-nerve barrier in vitro” under the guidance of Jason Kimata, Baylor College of Medicine.

THE COLLABORATIVE INITIATIVE FOR PAEDIATRIC EDUCATION AND RESEARCH (CIPHER)

In 2012, the IAS launched the Collaborative Initiative for Paediatric HIV Education and Research (CIPHER), a major two-year paediatric research initiative aimed at addressing outstanding research gaps related to clinical management and delivery of services to infants, children and adolescents affected by HIV. CIPHER is supported through an unrestricted grant from ViiV Healthcare and is guided by a high-level Scientific and Technical Advisory Committee (STAC) convened by the IAS. The initiative is designed to complement existing global initiatives and create partnerships with other organizations in order to maximize investment in paediatric research and improve paediatric health outcomes.

The key objectives of CIPHER are:

- Promoting and investing in targeted research that addresses knowledge gaps/priority questions that will help optimize service delivery and clinical management of infants and children in resource-limited settings.
- Convening stakeholders and establishing collaboration mechanisms to strengthen communication, knowledge transfer and exchange among paediatric HIV cohorts.

In order to identify outstanding research priorities and ensure that CIPHER complements rather than duplicates other opportunities available to paediatric researchers, the first phase of the initiative was a comprehensive needs assessment. The final report, [Evidence for Action: A Needs Assessment of Paediatric HIV Research Priorities](#), summarizes the current knowledge gaps in paediatric HIV research and lists the research priorities that provided a basis for the CIPHER Grant Programme.

CIPHER AT THE XIX INTERNATIONAL AIDS CONFERENCE (AIDS 2012)

AIDS 2012 was used as an opportunity to convene the first in-person meeting of the CIPHER STAC to meet and review the findings of the needs assessment, define the framework for the CIPHER Grant Programme and discuss challenges and opportunities faced by paediatric cohorts. During the meeting, a Research Grant Working Group was established to provide expert advice and guidance on the grant programme and it was

decided that CIPHER would publish a special issue on perinatally HIV-infected adolescents in the *Journal of the International AIDS Society (JIAS)*.

A consultation with paediatric cohort investigators was also convened at AIDS 2012, as an opportunity to present CIPHER to the investigators and provide a platform for identifying how CIPHER can support addressing some of the challenges and promote better

collaboration. The consultation was well attended, with representation from 15 paediatric cohorts from around the world. The group emphasized the need for a dedicated meeting for paediatric HIV cohorts, to provide a needed forum for data sharing and identifying challenges and opportunities for collaboration. In order to ensure more effective use of resources, the Paediatric European Network for Treatment of AIDS (PENTA) offered to organize this meeting for the IAS in conjunction with PENTA's own meeting in May 2013 in Venice, Italy. Based on feedback from the meeting, the IAS decided to develop an online, searchable paediatric cohort database as a long-term tool to serve cohorts and facilitate collaboration.



Annette Sohn, Vice President and Director, TREAT Asia with amfAR, speaks at an AIDS 2012 session on Paediatric HIV. Photo: ©IAS/Steve Shapiro; Commercialimage.net

“ The consultation was well attended, with representation from 15 paediatric cohorts from around the world. ”



Photo: ©UNAIDS/C. Giray

CIPHER GRANT PROGRAMME

In order to meet the objectives of advancing paediatric HIV research, a CIPHER grant programme was launched at AIDS 2012, targeting young investigators and welcoming applications in priority research areas identified in the needs assessment. By its closing date, the grant programme had received 143 letters of intent (LOI) from around the world, with an even distribution across priority research questions.

The initial screening and scoring of the LOIs was carried out by the STAC Research Grant Working Group, which evaluated each LOI based on the proposal's potential contribution to addressing the identified research question, its overall quality, and the novelty and innovation of the approach, as well as the applicant's experience.

In December 2012, the 24 shortlisted applicants (representing 12 countries), were invited to submit a full proposal in 2013. The grant programme will fund, up to a total of US\$1 million, research projects that have the potential to contribute to the optimization of diagnosis, prevention, treatment and care of infants, children and adolescents affected by HIV. Successful applicants will be notified in



mid-April 2013, and an awards ceremony will be held at the 7th IAS Conference on Pathogenesis, Treatment and Prevention (IAS 2013), 30 June to 3 July 2013, Kuala Lumpur, Malaysia.

In collaboration with the JIAS, production of a special issue titled *Perinatally HIV-infected adolescents*

began in 2012. The special issue will contain 10 articles and will cover such topics as epidemiology, treatment and resistance, cardiac and metabolic complications, neurodevelopment, mental health, disclosure and adherence. The supplement will be officially launched at IAS 2013.

“ In order to meet the objectives of advancing paediatric HIV research, a CIPHER grant programme was launched at AIDS 2012, targeting young investigators and welcoming applications in priority research areas identified in the needs assessment. ”

PRIZES AND AWARDS

In 2012, the IAS and its partners sponsored the following scientific prizes and awards to top-scoring abstracts presented at AIDS 2012 to reward promising young and established researchers doing outstanding work in HIV research.

IAS/ANRS Young Investigator Award

The US\$2,000 IAS/ANRS Young Investigator Award is jointly funded by the IAS and the Agence Nationale de Recherche sur le sida et les hépatites virales (ANRS) to support young researchers who demonstrate innovation, originality, rationale and quality in the field of HIV research. One prize was awarded to the top-scoring abstracts in each of the conference tracks. In addition, an IAS/ANRS Young Investigator Award – Special HIV Cure Prize was awarded at the pre-conference symposium *Towards an HIV Cure*.

Rik Schrijvers, Belgium received the IAS/ANRS Young Investigator Award in Track A for the abstract, "Dissecting HIV-1 integration site selection using a human LEDGF/p75 knockout cell line".

Vikrant Sahasrabudde, United States received the IAS/ANRS Young Investigator Award in Track B for the abstract, "HPV genotype attribution of anal neoplasia in HIV-positive MSM: estimating the preventable fraction and disease misclassification".

Renee Heffron, United States received the IAS/ANRS Young Investigator Award in Track C for the abstract, "Association of injectable contraception and risk of HIV-1 acquisition in women in HIV-1 serodiscordant partnerships: persistence of effect in multiple sensitivity analyses".

Kathleen Deering, Canada received the IAS/ANRS Young Investigator Award in Track D for the abstract, "Mapping spatial barriers and facilitators to HIV testing by work environments among sex workers in Vancouver, Canada".

Caitlin A Matson, United States received the IAS/ANRS Young Investigator Award in Track E for the abstract, "Integration of infant HIV testing at nine month immunisation visit in South Africa: a proposed model of service delivery".

Nitasha Kumar, Australia received the Special HIV Cure Prize for the abstract, "Myeloid dendritic cells and HIV latency in resting T cells".

Women, Girls and HIV Investigator's Prize

The purpose of the Women, Girls and HIV Investigator's Prize is to encourage research in low - or middle-income countries that can benefit women and girls affected by HIV. The US\$2,000 prize is offered by the IAS-Industry Liaison Forum (IAS-ILF) and UNAIDS, and supported by the International Center for Research on Women (ICRW) and the International Community of Women Living with HIV/AIDS (ICW).

Peter Mudioppe, Uganda, received the prize for the abstract, "Partnership of HIV-infected mothers (peers), community lay women/ men (Sengas/Kojas) and village health teams (VHTs) with prevention of mother-to-child HIV transmission (PMTCT) programs, increased male partner support for HIV-infected women in one rural health centre and three urban hospitals in Uganda, July 2009–July 2011".



Winners of the Young Investigator Awards with Elly Katabira, IAS Past-President (far left) and Jean-François Delfraissy, Director, ANRS. Photo: ©IAS/Ray Rayburn; CommercialImage.net

IAS TB/HIV Research Prize

The US\$2,000 IAS TB/HIV Research Prize is an incentive for young and established researchers to investigate pertinent research questions that affect TB/HIV co-infection and operational effectiveness of core TB/HIV collaborative services.

Jonathan Golub, United States, received the prize for the abstract, "The TB/HIV in Rio de Janeiro (THRio) study: a step-wedged cluster randomized trial measuring the impact of tuberculosis (TB) screening and isoniazid preventive therapy (IPT) on incidence of TB and death".

“ the IAS and its partners sponsored scientific prizes and awards to reward promising researchers doing outstanding work in HIV research. ”

IAS/Coalition for Children Affected by AIDS Prize for Excellence in Research Related to the Needs of Children Affected by AIDS

The US\$2,000 prize is jointly offered by the IAS and the Coalition for Children Affected by AIDS. The prize is awarded to an investigator whose abstract demonstrates excellence in research that is likely to lead to improved services for children affected by HIV.

Gabriel Anabwani, Botswana received the prize for the abstract, "The psychosocial impact of HIV on the siblings of infected children".



Elly Katabira, IAS Past-President, and Françoise Barré-Sinoussi, IAS President, present the IAS Presidential Award to Michel Kazatchkine, UN Special Envoy for AIDS in Eastern Europe and Central Asia.
Photo: ©IAS/Ray Rayburn; CommercialImage.net

IAS Presidential Award

The IAS Presidential Awards aim to recognize the achievements of individuals who demonstrate a long history of leadership and excellence as pioneers or advocates at the forefront of the response to HIV. The awards highlight an individual's contribution that results in increased knowledge, skills, creative solutions or evidence-based policies and programmes to enhance the global response to the epidemic.

Michel Kazatchkine, France received the IAS Presidential Award for his impact on the epidemic and his contribution to expand access to antiretroviral treatment.

Elizabeth Taylor Human Rights Award

The new Elizabeth Taylor Human Rights Award is presented by amfAR, The Foundation for AIDS Research and the IAS in honour of amfAR's Founding International Chairman, Dame Elizabeth Taylor, who was a highly visible, vocal and relentless advocate for human rights of all people living with or affected by HIV.

Arash and Kamiar Alaei, Iran received the inaugural Elizabeth Taylor Human Rights Award to honour their efforts to place issues of drug use and HIV on Iran's national health care agenda and their engagement in human rights issues after their release from prison.



Membership

“The membership of the IAS is the foundation on which the organization acts as the independent voice of experts and professionals working in HIV throughout the world.”

A prominent, talented, respected, diverse and actively engaged membership is fundamental to the IAS, and is central to how we achieve our vision and mission.

The substantial growth in membership – from less than 6,000 in 2004 to more than 16,700 in 2012 – presents new

THE IAS HAS OVER 16,700 MEMBERS IN 186 COUNTRIES.

Members by Region	2012	Percentage
Africa	3,566	21%
Asia and the Pacific Islands	1,803	11%
Europe	3,393	20%
Latin America and the Caribbean	1,349	8%
United States and Canada	6,599	40%
Total	16,710	100%

opportunities for the IAS to foster education and other measures to build capacity among our members and others working in HIV.

The IAS is committed to supporting its members in their work, connecting them to one another and engaging them in advancing the implementation of an evidence-informed response.

IAS members are elected to the Governing Council, which provides sound and transparent governance and oversight of the secretariat, and ensures clarity of mission and achievements. These are the key elements for sustaining the IAS membership, ensuring its active engagement and maintaining effective governance.



AIDS 2012 kick-off session.
Photo: ©IAS/Steve Shapiro; Commercialimage.net

IAS MEMBER BENEFITS

IAS member benefits include the opportunity to inform the development of the organization's strategic priorities, programmes and initiatives, as well as:

- access to the Members' Area on the IAS website, where IAS members have the opportunity to search for and contact other members, to find worldwide job vacancies in HIV, to subscribe to *AIDS* – an official journal of the IAS – with a 30–52% discount, and to download and print their membership certificate and card;
- 40–80% discount on Health[e]Foundation's online HIV[e]Education course;
- 15% discount on the publication fee for accepted articles in the *Journal of the International AIDS Society (JIAS)*;
- the electronic IAS newsletter and the IAS Member monthly e-Update, including the latest information on upcoming IAS conferences;
- the opportunity to decide who shall govern the IAS by taking part in the IAS Governing Council elections;
- the right to vote at IAS general members' meetings;
- the opportunity to be involved in IAS working groups, IAS strategic planning and IAS members' surveys;
- the opportunity to post upcoming conferences and meetings in the IAS Events Calendar.

IAS MEMBERSHIP BY REGION

The largest proportion of membership growth in 2012 was in the United States and Canada region, which increased by 95% over the previous year, from 3,377 to 6,599, mainly as a result of the XIX International AIDS Conference (AIDS 2012) being held in Washington, D.C.

2012 MEMBERSHIP ACTIVITIES

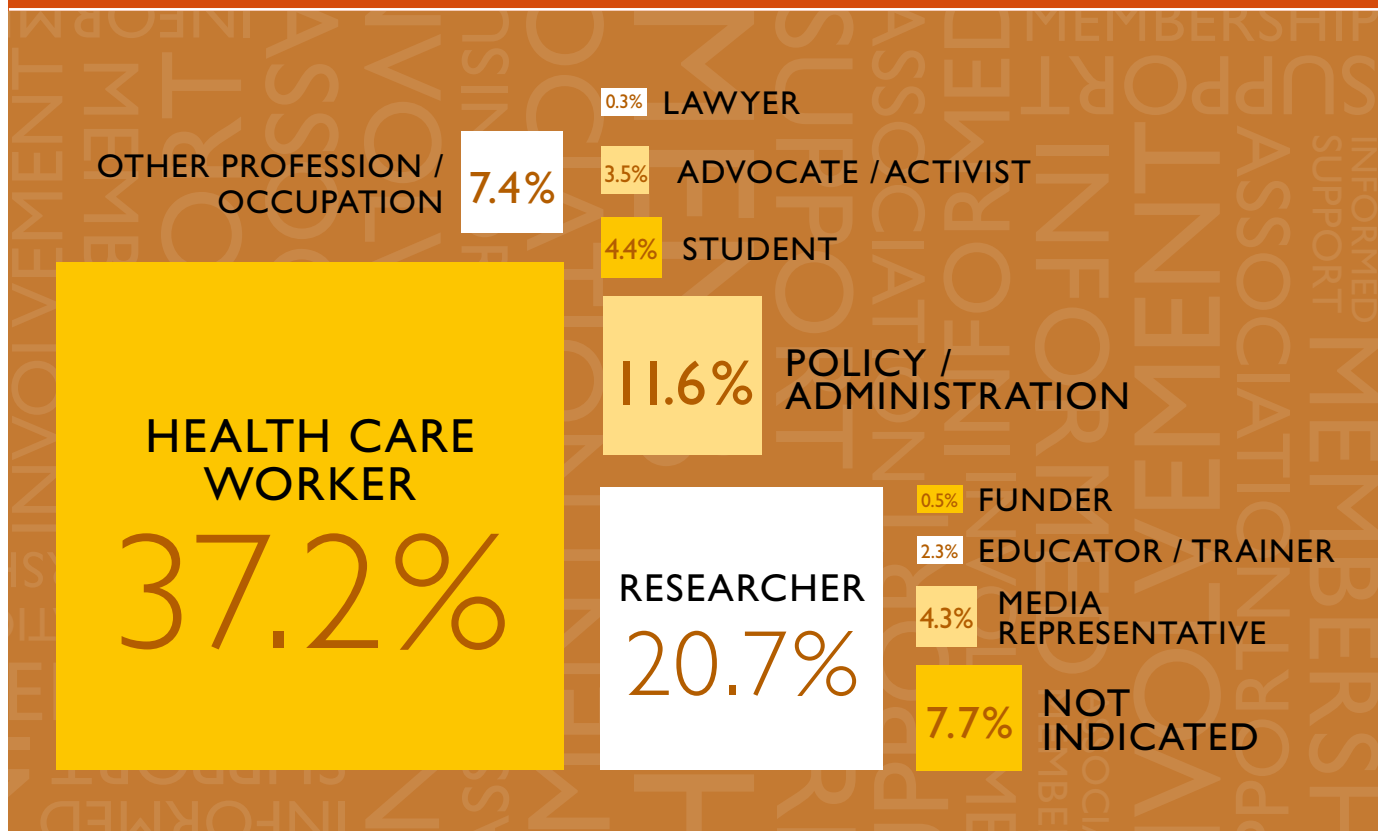
IAS members had opportunities to speak with Governing Council members and secretariat staff at the annual General Members' Meeting; in the IAS exhibition booth at AIDS 2012, and at the following regional conferences:

- The VI Latin American and Caribbean Forum on HIV/AIDS and Sexually Transmitted Infections (FORO), São Paulo, Brazil, 28–31 August 2012
- The 2012 United States Conference on AIDS (USCA 2012), Las Vegas, United States, 30 September to 3 October 2012
- The Eleventh International Congress on Drug Therapy in HIV Infection (HIV11), Glasgow, UK, 11–15 November 2012



The IAS booth at AIDS 2012 where existing and potential members learned more about the IAS's activities
Photo: ©IAS/Steve Shapiro; Commercialimage.net

IAS MEMBERS BY PROFESSION





Governance

The IAS Governing Council includes 25 individuals elected by IAS members from five regions: Africa, Asia and the Pacific Islands, Europe, Latin America and the Caribbean, and United States and Canada. In addition, three members are elected by the council to serve as President, President-Elect and Treasurer.

The Governing Council provides strategic direction for the organization, and acts as a regional communications conduit between the IAS and its membership. The council meets twice a year and communicates regularly between meetings. The Immediate Past President and the Executive Director participate in the council as ex officio members.

The Executive Committee comprises the President, the President-Elect and the Treasurer, plus one representative from each region who is elected by their regional council members. The Executive Committee meets three times a year.

2012 GOVERNANCE ACTIVITIES

In 2012, the Governing Council met in July, in conjunction with the XIX International AIDS Conference (AIDS 2012) in Washington, D.C., and at its annual retreat which took place in Geneva in December. Meetings with the Executive Committee were held at the 19th Conference on Retroviruses and Opportunistic Infections (CROI 2012) in Seattle, Washington, at AIDS 2012, and prior to the Governing Council retreat. Other governance-related committees and working groups – including the Finance Subcommittee, the Governance and Membership Subcommittee, and the

Membership Working Group – also seized the opportunity to meet during the conferences and the retreat.

The IAS is accountable to its members through the biennial elections of its Governing Council. Members serve four-year terms, with terms staggered to maintain institutional memory. The 2012 IAS Governing Council elections were completed in June 2012, with ten new members joining the Governing Council and three members being re-elected by the IAS members in their regions.

“ The Governing Council provides strategic direction for the organization, and acts as a regional communications conduit between the IAS and its membership. ”



IAS Governing Council group photograph.
Photo: ©IAS

IAS GOVERNING COUNCIL: 2012 – 2014

Françoise Barré-Sinoussi,
France, President

Chris Beyrer,
United States,
President-Elect

Anton Pozniak,
United Kingdom,
Treasurer

Elly Katabira,
Uganda, Immediate
Past President (ex officio)

Bertrand Audoin,
Switzerland, Executive
Director (ex officio)

AFRICA

Linda-Gail Bekker,
South Africa – new
Governing Council member

John Idoko,
Nigeria – new
Governing Council member

Alex Muganga Muganzi,
Uganda (Regional
Representative on the
Executive Committee)

Faustine Ndagulile,
Tanzania – re-elected
Governing Council member

Papa Salif Sow, Senegal

ASIA AND THE PACIFIC ISLANDS

Roy Chan, Singapore

Andrew Grulich,
Australia – new
Governing Council member

Aikichi Iwamoto,
Japan

Adeeba Kamarulzaman,
Malaysia – new
Governing Council member

Sai Subhasree Raghavan,
India (Regional Representative
on the Executive Committee)
– re-elected Governing
Council member

EUROPE

Sergii Dvoriak, Ukraine

Jens Lundgren,
Denmark – new
Governing Council member

Peter Reiss,
the Netherlands
(Regional Representative on
the Executive Committee)

Jürgen Rockstroh,
Germany – new
Governing Council member

Stefano Vella, Italy

LATIN AMERICA AND THE CARIBBEAN

Carlos Cáceres, Peru

Celia DC Christie-Samuels,
Jamaica – re-elected
Governing Council member

Ricardo Diaz, Brazil

Horacio Salomon,
Argentina – new
Governing Council member

Luis Soto-Ramirez,
Mexico (Regional Representative on
the Executive Committee) – new
Governing Council member

UNITED STATES AND CANADA

Judith Auerbach,
United States – new
Governing Council member

Joel Gallant, United States

Marina Klein,
Canada – new
Governing Council member

Kenneth Mayer, United States

Cheryl Smith,
United States
(Regional Representative
on the Executive Committee)



Our Donors

As an independent, non-profit organization, the IAS relies on a variety of sources to fund its operations and to ensure the financial stability of the organization. Our members and donors are crucial to sustaining IAS activities, programmes and conferences, and we are grateful for their continued support, especially in these challenging times for the world economy.

The IAS's day-to-day operations in 2012 were supported by dues from its global membership and grants in support of core activities.

- The Office of AIDS Research (OAR) of the U.S. National Institutes of Health (NIH); Sidaction; the French National Agency for Research on AIDS and Viral Hepatitis (ANRS); and the Treatment Action Group (TAG); provided ongoing support for the *Towards an HIV Cure* Global Scientific Strategy and the preparation of the IAS's Pre-Conference Symposium "Towards an HIV Cure", held immediately prior to the XIX International AIDS Conference (AIDS 2012).
- Sidaction and the French National Agency for Research on AIDS and Viral Hepatitis (ANRS) supported the AIDS 2012 Pre-Conference meeting titled "Ensuring a supportive environment for a long term HIV response: social and political challenges".
- The Ford Foundation provided ongoing support for core activities related to the IAS policy priority on HIV Professionals and Human Rights.
- The Foundation Open Society Institute (FOSI) supported the Pre-Conference meeting titled "The Twin Epidemics of HIV and Drug Use: Innovative Strategies for Healthy Communities" that took place immediately prior to AIDS 2012.



Anthony Fauci, Director of the U.S. National Institute of Allergy and Infectious Diseases at the satellite session: HIV/AIDS in the news agenda: Implications for Ending the Epidemic.
Photo: ©IAS/Steve Shapiro; Commercialimage.net

- The M•A•C AIDS Fund provided support for core activities regarding IAS's policy priority on Treatment as Prevention.
- The OAR NIH, in cooperation with the Centers for AIDS Research, partnered with the IAS to fund a research grant programme – Creative and Novel Ideas in HIV Research – to support developmental research projects to bring insight and new ideas from early stage investigators to the HIV/AIDS field of study.
- The National Institute on Drug Abuse (NIDA) at NIH partnered with the IAS to provide support for a research fellowship programme focusing on HIV and drug use, with the goal of contributing to advances in the scientific understanding of drug use and HIV.
- ViiV Healthcare provided ongoing support for the Collaborative Initiative for Paediatric HIV Education and Research (CIPHER).

“As an independent, non-profit organization, IAS relies on a variety of sources to fund its operations and to ensure the financial stability of the organization.”

AIDS 2012

DONORS

- ANRS, the French National Agency for Research on AIDS and Viral Hepatitis
- The Bill & Melinda Gates Foundation
- Canadian International Development Agency
- Destination DC
- Ford Foundation
- The Global Fund to Fight AIDS, Tuberculosis and Malaria
- Health Canada
- Ministry of Foreign Affairs of the Netherlands
- Norwegian Ministry of Foreign Affairs
- OPEC Fund for International Development (OFID)
- Positive Action
- Public Health Canada
- Sidaction
- Swedish International Development Cooperation Agency (SIDA)
- Swedish Ministry for Foreign Affairs
- TD Bank
- UNAIDS
- U.S. Centers for Disease Control and Prevention (CDC)
- U.S. National Institutes of Health – National Institute of Allergy and Infectious Diseases (NIAID)
- World Health Organization (WHO)

MAJOR INDUSTRY SPONSORS

- Abbott
- Bristol-Myers Squibb
- Gilead
- Janssen
- Merck
- ViiV Healthcare

CORPORATE SPONSORS

Key Sponsors

- Chevron
- Kaiser Permanente
- Levi Strauss & Co

Diamond Sponsors

- M•A•C AIDS Fund
- Mylan Labs

Platinum Sponsors

- Broadway Cares/Equity Fights AIDS

Gold Sponsors

- ABT Associates
- Emcure
- United Nations Foundation

Silver Sponsors

- Deloitte
- DIFFA – Design Industries Foundation Fighting AIDS
- AIDS United

Bronze Sponsors

- Tobira Therapeutics

Other Sponsors

- George Washington University – School of Public Health and Health Services
- KPMG

IAS-INDUSTRY LIAISON FORUM GRANTS

- Abbott
- Boehringer Ingelheim
- Gilead
- Janssen
- Merck
- Roche
- ViiV Healthcare



Corporate Social Responsibility

The IAS is strongly committed to Corporate Social Responsibility (CSR) and sustainability, and the IAS secretariat is encouraged to work in a socially, environmentally and economically sustainable way. The CSR working group is always looking for innovative ways to incorporate CSR and environmentally sustainable practices into the IAS secretariat and at IAS conferences.

Based on 'The Four Rs' principle, the conference secretariat takes formal measures to **reduce** the environmental impact of the conferences while enhancing the local economy, **reuse** conference surplus materials, **recycle** conference waste and **raise awareness** of CSR efforts while on site.

At AIDS 2012, the conference secretariat offered delegates the opportunity to offset their flight carbon emissions by ticking a box on the registration form. Thanks to the generous donations of conference delegates and the conference

secretariat's social responsibility initiative, which involves offsetting all staff flights, it has been possible to support three projects combining environmental, economic and social benefits in South Africa, USA and Brazil. In addition, all the excess conference materials (stationery supplies, merchandising items, condoms) were donated to local charities and all leftover untouched food from the conference was donated to DC Central Kitchen, a local charity which delivers food to the homeless throughout the District of Columbia.



The Walter E. Washington Convention Center, venue of AIDS 2012.
Photo: ©IAS/Ray Rayburn; Commercialimage.net



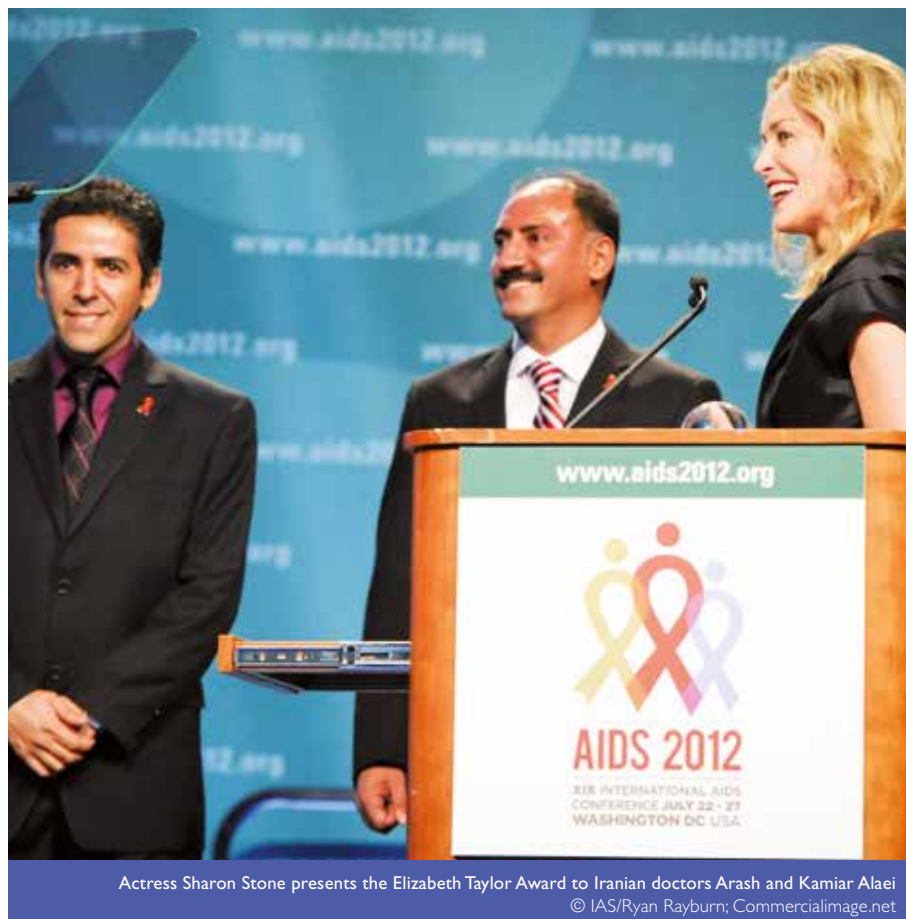
Diane Havlir, AIDS 2012 U.S. Co-Chair.
© IAS/Steve Shapiro; Commercialimage.net



Nitasha Kumar receives the IAS/ANRS
Young Investigator Award.
© IAS/Steve Shapiro; Commercialimage.net



Hip Hop vocalist Jamar Rogers at the AIDS 2012
Global Village Opening Ceremony.
© IAS/Steve Shapiro; Commercialimage.net



Actress Sharon Stone presents the Elizabeth Taylor Award to Iranian doctors Arash and Kamiar Alaei
© IAS/Ryan Rayburn; Commercialimage.net

Report of the Auditor to the Governing Council of the International AIDS Society

XIX International AIDS Conference

WASHINGTON, 22-27 JULY 2012

As auditor, we have been engaged to audit the accompanying statement of income and expenditures of the XIX International AIDS Conference in Washington, 22-27 July 2012, which comprise the income statement and the explanatory notes.

Governing Council's Responsibility

The Governing Council is responsible for the preparation of the statement of income and expenditures in accordance with the requirements of Swiss law. This responsibility includes designing, implementing and maintaining an internal control system relevant to the preparation of statement of income and expenditures that are free from material misstatement, whether due to fraud or error. The Governing Council is further responsible for selecting and applying appropriate accounting policies and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

Our responsibility is to express an opinion on this statement of income and expenditures based on our audit. We conducted our audit in accordance with Swiss law and Swiss Auditing Standards. Those standards require that we plan and perform the audit to obtain reasonable assurance whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the statement of income and expenditures. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the statement of income and expenditures, whether due to fraud or error. In making those risk assessments, the auditor considers the internal control system relevant to the entity's preparation of the statement of income and expenditures in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control system. An audit also includes evaluating the appropriateness of the accounting policies used and the reasonableness of accounting estimates made, as well as evaluating the overall presentation of the statement of income and expenditures. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the statement of income and expenditures in relation with the XIX International AIDS Conference in Washington, 22-27 July 2012 complies with Swiss law, the association's bylaws and is in accordance with the accounting policies described in note 2 to the financial statements of International AIDS Society for the year ended 31 December 2012.

KPMG SA



Pierre Henri Pingeon
Licensed Audit Expert
Auditor in Charge



Philippe Delparte

Geneva, 5 June 2013

Enclosure: Statement of income and expenditures (income statement and explanatory notes)

XIX International AIDS Conference

WASHINGTON D.C. USA, 22-27 JULY 2012

FINAL STATEMENT OF INCOME & EXPENDITURES (Figures are stated in US\$)

NOTES		APPROVED BUDGET	ACTUALS
	INCOME		
2	Sponsors and donors	10,832,000	11,000,024
	Commercial sponsorship	4,637,000	4,754,010
3	Registration fees	10,192,210	10,353,313
4	Other revenues	511,226	477,771
	TOTAL INCOME	26,172,436	26,585,118
	EXPENDITURES		
5	Logistics	4,148,665	4,305,098
	Commercial sponsorship	649,863	711,543
6	Scholarships	2,271,654	2,051,045
	Local secretariat	963,000	906,452
	Programme	2,382,351	2,326,532
	Programme activities	860,245	897,174
8	IAS conference secretariat	4,463,000	4,729,253
	IT	1,375,818	1,383,277
	Communications	1,518,210	1,570,763
	Evaluation + quality assessment	227,837	209,436
	Fundraising	918,391	933,618
10	Governance	631,144	543,936
	Audit/finance	643,375	670,089
11	Various financial costs	1,080,000	1,216,386
12	Start-up costs	255,400	255,402
	Other local costs	1,287,000	1,282,137
	TOTAL EXPENDITURES	23,675,943	23,992,141
9	Allocation to the Revolving fund	-1,000,000	-1,000,000
13	Allocation to AIDS 2014	-1,000,000	-1,000,000
	Allocation to AIDS 2012 follow up	-200,000	-300,000
	SUBTOTAL SURPLUS / (DEFICIT)	(296,493)	292,977

EXPLANATORY NOTES TO THE FINAL STATEMENT OF INCOME AND EXPENDITURES

1 Basis of preparation

The statement of income and expenditure was prepared in accordance with the accounting policies specified in the notes of the International AIDS Society in Geneva. The statement of income is based on the actual information available as of 31 March, 2013. The "approved budget" figures in the left column reflects the last budget accepted by the IAS Governing Council on December 6, 2012.

2 Sponsorship

Sponsorship includes all sponsors and donors. Major sponsors for IAS 2012 included:

- ANRS, the French National Agency for Research on AIDS and Viral Hepatitis
- The Bill & Melinda Gates Foundation
- Canadian International Development Agency
- Destination DC
- Ford Foundation
- The Global Fund to Fight AIDS, Tuberculosis and Malaria
- Health Canada
- Ministry of Foreign Affairs of the Netherlands
- Norwegian Ministry of Foreign Affairs
- OFID – OPEC Fund for International Development
- Positive Action
- Public Health Canada
- Sidaction
- Swedish International Development Cooperation Agency (SIDA)

■ Swedish Ministry for Foreign Affairs	■ Janssen Pharmaceuticals, Inc.
■ TD Bank	■ Merck
■ UNAIDS	■ ViiV Healthcare
■ U.S. Centers for Disease Control and Prevention (CDC)	■ Chevron
■ U.S. National Institutes of Health – National Institute of Allergy and Infectious Diseases (NIAID)	■ Kaiser Permanente
■ World Health Organization (WHO)	■ Levi Strauss & Co
■ Abbott	■ M*A*C AIDS Fund (through The Tides Foundation)
■ Bristol-Myers Squibb	■ Mylan Labs
■ Gilead	■ Broadway Cares / Equity Fights AIDS
	■ ABT Associates
	■ Emcure
	■ United Nations Foundation

A full list can be obtained from the conference secretariat.

3 Registration fees

The income from registration fees is based on the total number of paid registrations of 15,416 (Vienna: 11,396) less the voluntary delegate contributions mentioned hereunder:

Paid Registration:	Washington	Vienna
Fully paying registrations:		
- OECD country delegates	8,169	5,216
- Non-OECD country delegates	4,488	12,657
Students	1,944	4,411
Exhibitors	139	9,627
Accompanying persons and children	676	1,191
Total fully paying registrations:	15,416	11,396
Non-paid registrations:		
Media	1,942	59
Free registrations (including scholarship recipients, volunteers and staff)	7,178	6,113
Voluntary delegate contributions to:		
- Memberships "IAS"		726,000
- Coorganizers		19,275
- Scholarships		233,775

4 Other Revenues

Other sources of revenue include the sale of commercial and NGO satellites, office space and the sale of abstract books.

5 Logistics

The main expenditures incurred for the Logistics are as follows:

	US \$
Facilities (rent, signage, security and set up of venue)	2,117,000
On Site and Logistic Personnel (3,000 staff and volunteers)	543,000
Fees to PCO (Congress, CA) for:	
<i>project management, registration and exhibition handling</i>	559,000
Printed material (Invitation, Final Prog., Abstract Book, etc.)	166,000
Bags and Badges	59,000
Travel, logistic staff	771,000
Refreshment, technical, postage, etc.	90,000

6 Scholarships

These figures include scholarships recipients and speakers as per the main details bringing 851 delegates and 74 speakers to conference mainly from developing countries:

	US \$
Travel	841,000
Accommodation & per diem	445,000
Registration fees (donated but recognized in income & expenditure)	454,000
Handling	305,000
Other	6,000

7 Local Secretariat

The main expenditures incurred as follows

	US \$
Staff	615,000
Travel	37,000
Office costs	187,000
Consulting fees	67,000

8 IAS Conference Secretariat (Geneva)

	US \$
Staff	2,519,000
Office costs	1,585,000
Travel	561,000
Legal services	53,000
Consulting fees	11,000

9 Revolving Fund

In accordance with the distribution policy regarding surplus/deficit at the IAS Conference, the IAS Governing Council has decided to set aside funds for future costs in the event of a cancelled or postponed conference or one with a reduced number of paid registrations. US \$ 1,000,000

10 Governance

This cost includes committee meetings and travel expenses for the elected committee members.

11 Various Financial Costs

The various financial costs include:	US \$
Foreign exchange losses	125,000
Bank & credit cards fees	239,000
VAT & tax	118,000
Insurances	128,000
Carbon emission offset	26,000
Contribution to partners & partners affiliated events	580,000

12 Start-up Costs

These costs include all expenses associated with initial negotiations and pre-planning meetings with the local host and co-organizers, initial promotion and marketing expenses, and all travel and other expenses incurred until the official conference organizing committee meeting, where the first budget was accepted.

13 General IAS Reserve for future Conferences and AIDS2012 follow up

As approved by the EC in March 2013, the surplus generated by the AIDS 2012 conference will be allocated as follows

	US \$
AIDS 2014 Support to Global Village, International Scholarship Fund	200,000
AIDS 2014 Support to maintain lower fee level for I&mi countries	300,000
AIDS 2014 Revolving Fund	500,000
AIDS 2012 follow up by IAS in 2013	200,000
AIDS Pioneers project	100,000

Report on summarized financial statements to the Governing Council of

International AIDS Society, Geneva

We have audited the financial statements of the International AIDS Society for the year ended 31 December 2012 from which the summarized financial statements were derived, in accordance with Swiss Auditing Standards. In our report dated 5 June 2013, we expressed an unqualified opinion on the financial statements from which the summarized financial statements were derived.

In our opinion, the accompanying summarized financial statements are consistent, in all material respects, with the financial statements from which they were derived.

For a better understanding of the organisation's financial position and the results of its operations for the period and of the scope of our audit, the summarized financial statements should be read in conjunction with the financial statements from which the summarized financial statements were derived and our audit report thereon.

KPMG SA



Pierre Henri Pingeon

Licensed Audit Expert
Auditor in Charge

Geneva, 5 June 2013

Enclosure: Summarized financial statements



Philippe Delparte

Financial Report 2012

BALANCE SHEET AS OF DECEMBER 31

(Figures are stated in US\$)

	NOTES	2012	2011
CURRENT ASSETS			
Cash & Cash Equivalents	4	12,236,350	4,618,094
Cash – Leadership		54,135	54,135
Accounts Receivable	5	763,857	475,216
Prepaid Expenses	6	21,674	23,999
		13,076,016	5,171,444
NON-CURRENT ASSETS			
Guarantee	7	102,228	99,204
Equipment		88,984	62,673
TOTAL ASSETS		13,267,228	5,333,321
CURRENT LIABILITIES			
Accounts Payable	8	780,497	749,415
Fund ANRS		14,935	26,936
Accrued Expenses	9	1,382,448	526,931
Deferred Income	10	777,706	579,790
NON-CURRENT LIABILITIES			
Provision	11	27,250	26,500
TOTAL LIABILITIES		2,982,836	1,909,572
FUNDS & RESERVES			
Restricted Funds			
Leadership Fund	12	54,135	54,135
Scholarship Reserve		484,161	236,961
AIDS 2012		-	-2,994,760
IAS 2013		-479,429	-173,504
AIDS 2014 / IAS 2015		-225,658	-20,187
ILF		310,317	256,438
JIAS		89,540	-
CNIHR		44,219	51,978
NIDA		184,985	76,746
CIPHER		1,507,741	-
HIV CURE		244,047	154,140
SPS		8,192	-
TasP		41,358	-
IAC Revolving Fund	13	3,763,000	3,000,000
		6,026,608	641,947
Unrestricted & IAS Designated Funds			
IAS Conference Revolving Fund	14	1,479,000	1,495,000
General IAS Reserve for AIDS 2014	15	1,000,000	-
General IAS Reserve for AIDS 2012 Follow up	15	300,000	-
IAS 2011 Conference Surplus	16	103,577	207,155
AIDS 2012 Conference Surplus	16	292,977	-
General IAS Reserve	17	1,082,230	1,079,648
		4,257,784	2,781,803
TOTAL FUNDS & RESERVES		10,284,392	3,423,749
TOTAL LIABILITIES, FUNDS & RESERVES		13,267,228	5,333,321

INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED DECEMBER 31

(figures are stated in US\$)

	NOTES	UNRESTRICTED		RESTRICTED		TOTAL	
		2012	2011	2012	2011	2012	2011
FUND BALANCE AT JANUARY 1		2,781,803	2,375,433	641,947	2,973,874	3,423,750	5,349,307
Revenues							
Conferences Income		–	–	13,471,071	5,402,100	13,471,071	5,402,100
Membership dues	10	522,808	512,915	–	–	522,808	512,915
Sponsors		–	–	3,817,373	1,944,013	3,817,373	1,944,013
Donors		300,000	270,238	10,575,006	3,951,945	10,875,006	4,222,183
Project management fees		42,214	28,800	–	–	42,214	28,800
Others	18	116,209	159,436	882,441	179,472	998,650	338,908
TOTAL REVENUES		981,231	971,389	28,745,891	11,477,530	29,727,122	12,448,919
EXPENSES							
IAS Staff Salaries & Benefits		161,484	414,248	6,515,916	5,613,557	6,677,400	6,027,805
Legal fees		1,200	10,147	63,895	62,466	65,095	72,613
Consulting & Audit fees		181,886	231,064	6,162,996	676,167	6,344,882	907,231
Office Expenses		35,174	74,048	1,254,734	839,508	1,289,908	913,556
Travel Expenses		76,327	148,500	3,593,471	1,750,324	3,669,798	1,898,824
Governance Retreat, Strategic and Expenditure		168,617	216,717	132,466	120,282	301,083	336,999
Direct Expenses	19	18,536	2,309	2,987,199	3,031,946	3,005,735	3,034,255
Other Expenses		208,799	24,089	332,608	164,620	541,407	188,709
Subgrant		–	–	435,750	920,000	435,750	920,000
Amortization of Capital Expenses		8,055	6,793	72,498	61,135	80,553	67,928
Exchange Loss / -Gain		-21,142	-43,251	123,011	49,809	101,869	6,558
TOTAL EXPENSES		838,936	1,084,664	21,674,544	13,289,815	22,513,480	14,374,479
GROSS SURPLUS (-DEFICIT)		-142,295	-113,275	7,071,347	-1,812,285	7,213,642	-1,925,560
Transfer to Unrestricted & Designated Funds							
- Revolving Fund		–	345,000	–	-345,000	–	–
- Correction prior year	3, 14	-116,000	–	-237,000	–	-353,000	–
- AIDS2014 Reserves & AIDS2012 Follow up		1,300,000	–	-1,300,000	–	–	–
- Conference Surplus	16	292,977	207,155	-292,977	-207,155	–	–
RESULT AFTER TRANSFERS		1,475,981	406,369	5,384,661	-2,331,929	6,860,642	-1,925,560
FUND BALANCE AT DECEMBER 31		4,257,784	2,781,803	6,026,608	641,947	10,284,392	3,423,748

NOTES TO THE FINANCIAL STATEMENTS

1 Organisation

International AIDS Society (the Society) was founded in 1988 and transferred from Stockholm, Sweden to Geneva, Switzerland in June 2004.

With its headquarters in Geneva, and fifty staff members (2011: forty eight), the Society is recognized under Swiss law as an international, nongovernmental, non-profit organization. The Society is exempt from Swiss corporate taxation.

2 Accounting Policies

The significant accounting policies are set out below:

a) Basis of Preparation and Statement of Compliance

The financial statements of the Society have been prepared on a basis consistent with its statutes and that complies with Swiss law and the accounting regulations of the Society. The Society's accounting policies and the format used for the presentation of its financial statements are designed to present accurately the conferences, programmes, and other activities of the Society.

The financial statements are presented in US Dollars (rounded to the nearest dollar), as the majority of the Society's activities are conducted in this currency.

b) Recognition of Income

Conference income, project management fees, sponsors and other restricted income are recognized when paid. Unrestricted revenue from donors is recognized over the contract period. Membership income is recognized in the period to which it relates. Membership income for future periods, which is received in advance, is deferred in the balance sheet.

c) Recognition of Expenditure

Payments to third parties are recognized when the commitment to pay has been made before the end of the year and the payment relates to the current year, and when there is either a legal or a constructive obligation to pay.

d) Foreign Currency

Transactions in currencies other than US Dollars are converted into US Dollars at rates that approximate the actual rates at the transaction date. Realized and unrealized exchange differences are reported in the income and expenditure account.

e) Equipment

Purchases of equipment are capitalized and then depreciated on a straight-line basis over 3 years

3 Correction of prior year

In the 2011 financial statements the total VAT expense was understated by US\$ 353,000. The impact of this correction was recorded in 2012 as a reduction of the IAC Revolving Fund of US\$ 237,000 and a reduction of the IAS Conference Revolving Fund of \$116,000. Awaiting the final results of a 2007-2011 VAT audit by the Swiss Federal Tax authorities, this additional VAT expense is accrued as of 31 December 2012.

4 Cash and Cash equivalents

	2012 US\$	2011 US\$
Petty Cash	11,276	13,382
Bank accounts –		
current accounts	9,366,674	938,712
deposits	2,858,400	3,666,000
Total	12,236,350	4,618,049

The cash includes a guarantee deposit of EUR 120,000 (USD 158,000) for business credit cards.

5 Accounts Receivable

	2012 US\$	2011 US\$
Conference: Various		
Sponsors & Donors	689,167	204,277
Swiss VAT	30,615	29,422
Withholding tax	1,070	3,719
Other	43,005	237,798
Total	763,857	475,216

6 Prepaid Expenses

	2012 US\$	2011 US\$
Other Prepaid	21,674	23,999

7 Guarantee

	2012 US\$	2011 US\$
	102,228	99,204

The guarantee represents a deposit surety for the office rental blocked for S.I. Quadrilatère.

8 Accounts Payable

	2012 US\$	2011 US\$
Payable – Regional Partnership	200,000	200,000
Payable – DC	315,777	-
Payable – Rome	18,873	183,622
Payable – Vienna	12,937	17,681
Other various payable	232,910	348,112
Total	780,497	749,415

9 Accrued Expenses

	2012 US\$	2011 US\$
CH VAT	654,429	9,786
IT VAT	-	9,137
US VAT	23,022	-
Social Expenses	445,188	425,183
Accrued Conferences expenses	207,508	57,825
Other accrued expenses	52,300	25,000
Total	1,382,448	526,931

10 Deferred Income

Current Deferred Income includes membership income US\$ 777,706 (2011: 529,190) received for the next years.

	2012 US\$	2011 US\$
<i>Detail for deferred membership income</i>		
Deferred income beginning period	529,190	735,873
Income received during the year	771,324	306,232
Income deferred to future periods	(777,706)	(529,190)
Recognized as revenue during the year	522,808	512,915
Total	777,706	579,790

11 Provision

	2012 US\$	2011 US\$
	27,250	26,500

Provision for office restoration at end of lease term.

12 Restricted Funds

All figures are in relation to funds received and reserved for specific programmes or projects. Concerning the future Conferences, the negative amounts of US\$ 479,429 (IAS 2013) and US\$ 225,658 (Conferences 2014-2015) reflects expenditures that have yet to be covered by the income from the future conferences. The Kuala Lumpur budget currently shows a deficit of \$498,000 (approved by the EC in March 2013), which is acceptable at this point. Note that the budget is including a revolving fund of US\$ 500,000 that will be reduced to balance the budget if the deficit can not be filled in some other way.

13 IAC Revolving Fund

	2012 US\$	2011 US\$
	3,763,000	3,000,000

In accordance with the distribution policy regarding surplus/deficit at the IAS Conference, the IAS Governing Council has decided to set aside funds for future costs in the event of a cancelled or postponed conference or one with a reduced number of paid registrations. The Washington D.C. Conference result could afford an allocation of US\$ 1M to the Revolving Fund.

As described in Note 3, a correction of the prior year VAT expense of US\$ 237,000 was recorded as a reduction of this Revolving Fund in 2012.

14 IAS Conference Revolving Fund

	2012 US\$	2011 US\$
	1,479,000	1,495,000

Funding from an IAS 2011 donor came after the books were closed. Since the monies were earmarked for the IAS conference the additional US\$ 100,000 was added into the IAS Conference Revolving Fund in 2012 to maintain consistency with the donor's wishes.

As described in Note 3, a correction of the prior year VAT expense of US\$ 116,000 was recorded as a reduction of this Revolving Fund in 2012.

15 General IAS Reserve for future Conferences & AIDS 2012 Follow up

As approved by the EC in March 2013, the surplus generated by the AIDS2012 conference will be allocated as follows

	2012 US\$
AIDS 2014 Support to Global Village, International Scholarship Fund	200,000
AIDS 2014 Support to maintain lower fee level for I&mi countries	300,000
AIDS 2014 Revolving Fund	500,000
AIDS 2012 follow up by IAS in 2013	200,000
AIDS Pioneers project	100,000
Total	1,300,000

16 Conferences Surplus

	2012 US\$	2011 US\$
Half of the Rome Conference Surplus supported the Core expenses in 2012	103,577	207,155
The Washington Conference Surplus supports the Core expenses over the next 2 years	292,977	
Total	396,554	207,155

17 General Reserve

	2012 US\$	2011 US\$
	1,082,230	1,079,648

This General Reserve shows a increase of US\$ 2,582 corresponding to the surplus of IAS Core activities for 2012.

18 Revenues – IAS others

	2012 US\$	2011 US\$
Interest on deposits and current banks accounts	9,941	40,951
Other	106,268	118,485
Total	116,209	159,436

19 Direct expenses

	2012 US\$	2011 US\$
Logistics & Exhibition (rental of venues, signage, build up...)	1,106,642	1,466,123
Scholarships (registrations, per diem...)	444,645	160,958
Local office expenses (Washington)	473,826	362,269
Programme & Programme activities (meeting costs, abstract handling...)	438,839	263,804
Conference secretariat	13,204	55,934
I/T operations	310	164,032
Communications (Media Center, printing, translation...)	117,907	132,206
AV	12,500	260,583
Various financial costs	7,130	30,115
Start up & Other costs	390,731	138,230
Total	3,005,735	3,034,255

20 Credit Agreement

	2012 US\$	2011 US\$
	264,000	259,000

EUR 200,000 is under the guarantee of UBS AG and represents the sum of VAT claimed to our fiscal representative in Italy by the Italian VAT authorities. This guarantee is valid until 30 November 2015.

CHF 100,000 is under the guarantee of UBS AG represents a deposit surety for the office rental blocked for the Fondation des Immeubles pour les Organisations Internationales (FIPOI).

21 Grant awarded

At the end of 2011, the National Institutes of Health awarded a grant to IAS in support of the XIX International AIDS Conference (AIDS 2012) covering expenses up to US\$ 7,010,000. The full grant was spent by the end of 2012.



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