



***Annual  
Report  
2014***

**DOING IT  
BETTER!**

---

# TABLE OF CONTENTS

---

03

## Reflections

- 3 President's Message & Photos from Retreat
- 4 Acting General Manager's Message

07

## Introductions

- 07 About Action For AIDS
- 09 Meet The Team

28

## Help Us. Reach More.

- Donation & Volunteering Details

11-17

## Educate

- 12 Heterosexual Outreach Programme (HSO)
- 14 Men who have Sex with Men Outreach (MSM)
- 16 Outreach HIV Testing Project Round 6

18-22

## Support & Care

- 19 Anonymous HIV Testing & Counselling Service (ATS)
- 21 Mobile Testing & Counselling Service (MTS)
- 22 Coordinated Care

24-27

## Advocate

- 25 Advocacy & Partnerships
- 26 Singapore AIDS Candlelight Memorial
- 27 Endless Love - 25th Anniversary Fund Raising Event

## PRESIDENT'S MESSAGE

Action for AIDS had another busy and productive year in 2015.

In conjunction with Singapore's golden jubilee, we were part of the SG50 Care and Share Programme.

Under its auspices, donations were matched one-for-one by the government. As a result of several large donations and fund raising events, we raised almost one million dollars in 2014. Expenditure that can be matched include that for capability building, capacity building, new as well as expansion and enhancements of existing programmes, and critical existing needs. We are extremely thankful for the generosity of our donors and sponsors, and the hard work of our staff, Board of Trustees and members of the executive committee for this.

Our prevention education activities for men-who-have-sex-with-men continued at full pace. We hired a new manager with experience from similar work in Toronto, Canada, who was successful in reinvigorating the MSM programme. We re-branded it as [gayhealth.sg](http://gayhealth.sg) online as well as on the ground, and started the Pink Carpet Network that has expanded prevention counselling for MSM in the anonymous test site. The HMO programme was also rebranded, as the HSO (heterosexual outreach) programme. The team continued its ground breaking educational programmes in clubs, bars and Getai events.

ATS and MTS services pushed the agenda of early and regular HIV

testing as well as the linkage-to-care of persons diagnosed with HIV and syphilis. We conducted the 7th annual round of the seroprevalence project that brings HIV testing to MSM clients in venues. We also launched an informative in-depth review of many of our activities in the 25th Anniversary Commemorative Edition of the ACT in May 2015 (<http://afa.org.sg/portfolio-item/the-act-issue-46-2014/>)

The number of HIV infections in 2014 notified to the Ministry of Health show a plateauing in the trend of newly diagnosed infections. There were 422 males and 34 females diagnosed in 2014 (total 456), compared to 428 and 26 respectively in 2013 (total 454). The number of persons who contracted HIV infection through homosexual sex diagnosed in 2014 was 220 vs. 247 in 2013, whereas the number of persons (males and females) who contracted HIV infection diagnosed in 2014 was 211 vs 181 in 2013. It appears that our efforts to control the spread of HIV infection in Singapore are gaining traction.

Unfortunately we ended the year on a bad note. We discovered serious lapses in documentation, and accounting of collections from the ATS. The previous General Manager was suspended from service on 10 April 2015, and terminated from service on 22 April 2015. Following detailed and thorough investigations, \$135,428.99 was found to be missing from the accounts, of which \$106,000 has been restituted. A police report has been filed.



PROFESSOR ROY CHAN  
President, AFA Singapore

This matter has had a significant impact on the staff as well as the executive committee. I would like to express my sincere gratitude for your cooperation, cohesiveness, and mutual support in the last 4 months. I feel that we have come through this a stronger and more cohesive organisation.

*“ As a result of several large donations and fund raising events, we raised almost one million dollars in 2014. ”*

## GENERAL MANAGER'S MESSAGE

*“ On a personal note, as I echo our President's call to “Doing it Better”, I wish to complement this in my role as General Manager, by doing it right ”*

FY2014 was a good albeit challenging year for Action for AIDS.

In fundraising, we are pleased to report that we raised over \$1 million, this was then supported by the SG50 Golden Jubilee campaign that aimed to match the monies we raised dollar-for-dollar for approved activities. Details of the fundraising are in the body of the Annual Report.

We also streamlined the processes in the office with the finalisation of our Procedures and Policies (P & P) guidelines. This was achieved with the hard work of our staff and Executive Committee.

We also introduced a centralised Volunteer Management System (VMS). The VMS aims to guide volunteers from induction to training, and emplacement in the various projects and programmes.

The VMS ensures AfA has a constant flow of fresh volunteers to fill the necessary roles in our many programmes. And in July, with much thanks to our long-time volunteer and lawyer, George Hwang, we became an organisation that's fully compliant with Singapore's Personal Data Protection Act.

Our collaboration with external stakeholders was stepped up. We had the opportunity to collaborate with a number of companies as part of their corporate social responsibility endeavours. We worked with Credit Suisse for the Candlelight Memorial,

the Red Ribbon Project and World AIDS Day flag day, and with Kiehls, MAC Cosmetics, ALDO, Kim Choo and HBO for fundraising activities.

On a personal note, there is a saying “change is a constant”, and AfA has seen its fair share of change this year. Some of it was indeed challenging and I believe it has made the team and I more resilient and dedicated to the work we have committed ourselves to.

We are renewed in our dedication to achieving our mission of zero new HIV infections, zero HIV/AIDS related deaths and zero HIV/AIDS related discrimination in Singapore.



MR. ANWAR HASHIM  
General Manager (AG),  
AFA Singapore

*“ ...there is a saying “change is a constant”, and AfA has seen its fair share of change this year. Some of it was indeed challenging and I believe it has made the team and I more resilient and dedicated to the work we have committed ourselves to. ”*

# GETTING TO ZERO

## Zero New Infections through Education

Education is an important pillar of our mission, and these programmes help to raise awareness of HIV/AIDS through targetted outreach activities to at-risk communities.

- HSO : Heterosexual Outreach Programme
- MSM : Men who have sex with men Outreach Programme
- AMPUH : Anak Malayu Islam Melawan Penyakit Unit HIV/AIDS

## Zero Deaths through Care & Support

Anonymous HIV-testing enables early detection and treatment. Financial assistance provides help for those in need. Support groups and counselling help infected and affected individuals cope with HIV infection and close the gap between diagnosis and care.

- ATS : Anonymous Testing Service
- MTS : Mobile Testing Service
- Coordinated Care

## Zero Stigma & Discrimination through Advocacy

Since its inception, AFA has been a visible advocate for the fair treatment of Persons Living with HIV/AIDS. Today, we continue our efforts to advocate access to affordable treatment for all PLHIV.

- SAC : Singapore AIDS Conference
- LOVE : Fund Raising Gala
- SACM : Singapore AIDS Candlelight Memorial
- Advocacy & Partnerships

# INTRODUCTIONS



### Who We Are

Formed in 1988, in response to the global and local spread of HIV infection. AFA is Singapore's leading independent organisation of HIV Experts.



### Our Vision

Zero new infections  
Zero deaths due to HIV/AIDS related illnesses  
Zero discrimination and stigma.



### Our Mission

Prevent HIV transmission through promotion of behavioural and biomedical strategies;  
Reduce the impact of HIV/AIDS on individuals by working towards universal access to treatment and care;  
Advocate for implementation of policies and programmes that will reduce HIV-related stigma and discrimination in Singapore.

# VISION & MISSION



### How We Work

- Apply expertise and deliver results
- Engage communities
- Leverage convening and networking capacity
- Harness information technology
- Synergize local efforts
- Strengthen partnerships
- Drive change and innovation
- Be accountable



### Our Values

- Integrity
- Caring
- Embrace diversity
- Collaboration & Partnership
- Equality & shared responsibilities



### Our Foundation

Reflecting the core strengths and assets of AFA

- Foundation 1**  
Programmes and Policies are Evidence-based
- Foundation 2**  
Programmes and Policies are Rights-based
- Foundation 3**  
Programmes are Efficient and Effective
- Foundation 4**  
Organisation is Responsive and Innovative



## EXECUTIVE COMMITTEE

*President:*  
Prof. Roy Chan

*Vice President:*  
Mr. Thomas Ng

*Honorary Treasurer:*  
Mr. Terence Ng

*Honorary Secretary:*  
Mr. Benedict Thambiah

*Assistant Honorary Secretary:*  
Ms. Dawn Mok

*Committee Members:*  
Ms. Cheryl Yeo  
Mr. David Lye  
A/Prof. Lee Cheng Chuan  
A/Prof. Paul Anantharajah Thambyah  
Mr. Saxone Woon

## AUDITORS

Geetha A & Associates

## BOARD OF TRUSTEES

Mrs. Elen Fu  
Mr. Goh Eck Meng  
Mr. Howie Leong  
Ms. Jacqueline Khoo  
Mr. Lee Yang Soon  
Mr. Nicholas Chan

## SUB COMMITTEES

### *Fund Raising & Public Relations:*

Mr. Saxone Woon (Chair)  
Mr. Benedict Thambiah  
Dr. David Lye  
Ms. Dawn Mok  
Mr. Anwar Hashim  
Mr. Avin Tan

### *Human Resources:*

Dr Lee Cheng Chuan (Chair)  
Ms. Dawn Mok  
Mr. Thomas Ng  
Mr. Anwar Hashim

### *Programmes:*

A/Prof. Paul Anantharajah Tambyah (Chair)  
Prof. Roy Chan  
Mr. Terry Lim  
Mr. Daniel Le

### *Finance & Audit:*

Mr. Terence Ng (Chair)  
Dr. David Lye  
Ms. Cheryl Yeo



Mailing Address:  
9 Kelantan Lane #03-01  
Singapore 208628  
or  
c/o DSC Clinic:  
31 Kelantan Lane #02-16  
Singapore 200031

Tel : (65) 6254 0212  
Fax : (65) 6256 5903  
Email : info@afa.org.sg  
Social Media  
facebook.com/afasingapore  
youtube.com/afaspore

Name of Organisation: Action For  
AIDS (Singapore)  
UEN: S88SS0126A  
IPC No: HEF0006/G  
Date of Charity Registration: 07  
October 1994

## DECLARATIONS

None of our top three highest paid staff receive more than \$100,000 in annual remuneration each.

Board members do not receive remuneration for their board services.

Executive Committee is a voluntary board.

Members, staff and volunteers are expected to avoid actual and perceived conflicts of interest. Where individuals have personal interest in business transactions or contracts that AFA may enter into, or have vested interest in other organisations that AFA has dealings with or is considering to enter into joint ventures with, they are expected to declare such interests and the conflict of interest form is to be signed each year by members of the exco and staff as soon as possible and abstain from discussion and decision-making on the matter. Where such conflicts exist, the Board will evaluate whether any potential conflicts of interest will affect the continuing independence of the person and whether it is appropriate for the individual to continue to remain with the organisation.

## THE TEAM



### ANWAR HASHIM

General Manager (AG)

### NORANI OTHMAN

Senior Manager  
Coordinated Care

### ANWAR HASHIM

Senior Manager  
Organisation Development  
AMPUH (Muslim Community)

### TERRY LIM

Senior Manager  
HIV Education Programmes

### DANIEL LE

Manager  
Men-who-have-sex-with-men  
Outreach Programme (MSM)

### AVIN TAN

Manager  
Advocacy & Partnerships

### LOKMAN HAKEEM MOHDAR

Programme Executive  
Mobile Testing Service

### EDWIN LIM

Executive  
Heterosexual Outreach Programme  
(HSO)

### ALEX TAN

Coordinator  
Men-who-have-sex-with-men  
Outreach Programme (MSM)

### JING LIN

Office Administrator

### MURNI SAB ADI

Coordinator  
Mobile Testing Service  
Volunteer Management

# EDUCATE

An important pillar of our mission, these programmes help raise awareness of HIV/AIDS through direct and provocative outreach activities to communities at risk.

Change of behaviour is only possible through integrative programming and support by venue owners, volunteers and coordinators.

# HETEROSEXUAL OUTREACH PROGRAMME (HSO)

BY TERRY LIM & EDWIN LIM  
AFA.ORG.SG/HSO

*“Opportunity follows struggle. It follows effort. It follows hard work. It doesn't come before.” – Shelby Steele.*

## Opportunity Follows Struggle

2014 marked the fourth year of the Heterosexual Outreach Programme, also known as HSO. And what a year it turned out to be! It was the first time we ran all our programmes without any funding.

We tried our darnedest to adapt to this new reality – it would be an understatement to say that it was an uphill struggle. So struggle we did, because we didn't want to use lack of financial support as a reason for us not to achieve our HSO goals.

Our hands were very much tied without funding and we could only achieve very limited success. Case in point – in 2014 we only managed to run 3 safe sex shows (SSS) as compared to 16 shows each in 2012 and 2013. We also had to reduce our club outreach by more than half as compared to the previous years.

This was a dismal showing compared to our previous high in 2013 when we achieved a record of 800 heterosexual voluntary HIV tests conducted. Far from stopping there, we went full steam with 269 outreach outings to the clubs, 16 SSS, 30 ferry terminal outreach, 9 getais and the Blue Collar Campaign consisting of 5 large scale Getai shows during the Chinese Seventh Month.

In 2014, we should have capitalised on these numbers and this momentum but instead we had to sit back on our haunches and watch those numbers slide. There was a serious consequence to this inaction on our part. In 2013, 20% of those diagnosed with HIV infections were detected as a result of voluntary HIV testing. Out of this, 9% were heterosexual patients. But due to the cut in funding, we were not able to hand out the same number of test cards during our outreach events as we did in 2013.

Hence, the numbers in 2014 were sobering, the percentage of cases diagnosed with late-stage HIV infection increased from 41% in 2013 to 49% in 2014; the percentage for all cases detected through voluntary testing fell from 20% in 2013 to 14% in 2014, and that for heterosexual persons fell from 9% in 2013 to 5% in 2014.

This is a stark reminder that inaction comes at a huge cost. In this case, lives are being destroyed.

That said, we tried our level best to run some of our programmes to mitigate the impact on the community.

Here are some of the events that we carried out in 2014, drawing on the reserves of AfA. (Cont. on next page)



TERRY LIM

Senior Manager  
HIV Education Programmes



EDWIN LIM

Executive  
Heterosexual Outreach Programme (HSO)



Watch



#SomebodyLikeMe  
Ft. ShiGGa Shay,  
The Sam Willows,  
DJ Nicole Chen &  
Celeste Chen



Tuesday's Report  
Coffeshop  
Outreach



## Coffee Shop Outreach



A coffee shop show was organised with our celebrity ambassadors Chen Tian Wen and Ye Shi Pin. With this outreach effort in Geylang, we engaged an estimated 300 blue collar workers with 44 people coming forward for HIV testing. On top of the on-site success, we had extra coverage and mileage garnered from being featured on Mediacorp Channel 8 "Hao Ren Hao Shi", with Avin Tan as our spokesman.

## Safe Sex Show (SSS)



We squeezed out 3 shows in 2014 to keep some form of the momentum going for one of the cornerstones of our programme. After all, this ever-popular programme has had 4 years of hard work behind it, has enabled us to open doors in the nightlife industry. This show has established a strong following amongst both pub owners and patrons through word-of-mouth marketing.

## World AIDS Day



A music concert was organised in conjunction with World AIDS Day together with Durex and a group of students from SIM Buffalo.

The purpose of this event is to raise awareness of HIV among youths through the platforms of social media via music and fashion. For the purpose

of the concert, well-known local music talents, Shigga Shay, The Sam Willows, DJ Nicole Chen and YouTube personality Celeste Chen worked together to compose and perform a song titled #SOMEBODYLIKEME just for World AIDS Day. The video on YouTube reached 158,449 people.

During this concert, Terry Lim, HSO's senior manager, had the opportunity to share about HIV and its prevention. Avin Tan, our spokesperson, lent a human face to the disease and shared his personal experience on the stigma and discrimination he faced after diagnosis.

On top of the awareness that was generated, we also raised a total of S\$2,600.00 for AFA.

## Getai



This is yet another mainstay in our HSO programme, especially during the Chinese Seventh Month. Instead of giving it up totally, we managed to string together 4 shows in 2014 – kudos to our partners for making this happen.

Through these 4 shows, we reached out to 5,000 people and a total of 53 people came forward for HIV testing. We also managed to pull S\$4,500 in funding from the larger scale show done at Hong Lim Park.

## In the Shadow Documentary Series Featuring Avin Tan



MIO TV approached us to do an

episode that focused on developing a better understanding of the work done at AFA and also specifically to spotlight Avin, as a person living with the disease.

## 958 FM Radio Show (Nan Yan Zi Yu)



This has been an ongoing collaboration with the radio station over the last 4 years. This show's main target is a mature audience in their late 40s and above. In 2013, from this campaign alone, we managed to get 255 people to come in for HIV tests.

It seemed a shame that we had to let the momentum that we had going for us in 2013 go down the drain in 2014, due to reasons beyond our control. And yet, not all is lost. It is a long battle yet and while some doors have closed, there remain other doors to discover and to open.

With the necessary support and funding, we live to fight another day. "Opportunity follows struggle. It follows effort. It follows hard work. It doesn't come before." – Shelby Steele

- 1 Spokesperson Mr. Avin Tan being interviewed during the coffeshop outreach
- 2 Engaging both the eye and the brain during our Safe Sex Shows
- 3 World AIDS Day fund raising concert by students from SIM Buffalo and Durex
- 4 Volunteers handing out collaterals during a getai outreach
- 5 Showcasing the MTS during HSO outreach
- 6 Mr. Terry Lim and Dr. Gavin Ong at City 95.8FM interview

# MEN WHO HAVE SEX WITH MEN OUTREACH (MSM)

BY DANIEL LE, ALEX TAN & AVIN TAN  
AFA.ORG.SG/MSM

*"Making Singapore a better place where everyone can live in, bringing the community together definitely means something..."*

Action for AIDS Singapore (Afa) started reaching out to the MSM (Men who have sex with men) community in the 1990s and we would like to take this chance to thank the community, our dedicated volunteers and funders for their support over the years and for helping us do our work better.

AFA's mission remains steadfast and unchanged over the years, and through education, the programme aims to encourage testing and safer sex practices through creative and venue based approaches.

To remain relevant, the programme scaled back its on-ground presence to re-focus and evolve so it can keep up with the changes in dynamics within the MSM community. This resulted in a rebranding exercise and introduction of new services.

The MSM programme was rebranded and repositioned as Gayhealth.sg and also introduced Pink Carpet Network, a tailored service for young MSMs at the Anonymous Test Site. With these new initiatives, we were able to streamline the provision of programmes and services to suit the needs of every individual while enhancing working relationships with stakeholders resulting in seamless through-care for the MSM community.

Being a friend, listening ear and supportive network from the point where they first explore their

sexuality, to the various touch points at venues frequented by MSMs, through to testing and maintaining their sexual health by being involved in the process. We aim to form a closed loop where individuals come in to become peer leaders for a future generation of MSMs.

## Friend to the Community

Understanding the needs of the community has helped us formulate a better approach to promoting safer sex and preventive measures of HIV/STIs. With our team of dedicated volunteers, we have been providing sexual health workshops, conducting outreach activities at various venues including saunas, bars, clubs, etc and on online platforms via apps. We actively work towards growing capacity of stakeholders and community partners to help conduct innovative campaigns, identify sexual health trends and together to foster a stronger community. All of these culminated in the launch of Gayhealth.sg.

Gayhealth.sg is not just a portal but, building on the brand's tagline 'In The Pink', is our approach at redesigning, from the ground up, a way to present safer sex information and news that is pertinent to the gay community. The portal focuses on instilling pride and connecting the community to real people, helping people make new friends, and we hope that they will then go on to form a supportive network.

(Cont. on next page)



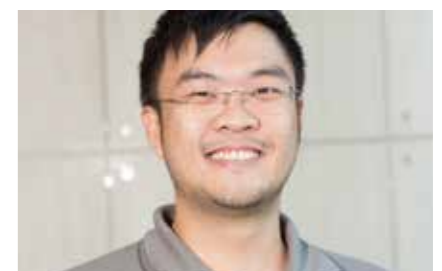
DANIEL LE

Manager  
Men-who-have-sex-with-men  
Outreach Programme (MSM)



ALEX TAN

Coordinator  
Men-who-have-sex-with-men  
Outreach Programme (MSM)



AVIN TAN

Manager  
Advocacy & Partnerships





- 1 Outreach at venues frequented by MSMs
- 2 Mr. Alex Tan conducting a short course to Pink Carpet Counsellors
- 3 Dedicated volunteers before outreach

Since its launch in July 2014, we have published a total of 59 posts garnering a total of over 37,000 unique visitors, viewing our website over 50,000 times, which translates to an average of 273 visitors per day. Our top article titled "Top 10 Qualities of Successful Gay Couples" was read 26,000; this gives us a good indication, what our audience are interested in and will go on to guide future campaigns and workshops.

Following the lead of gayhealth.sg, new workshops, edu-tainment shows and regular outreach were reintroduced and, we were able to reach a total of 4,064 MSMs through 6 workshops, 2 shows, 7 bars and clubs outreach.

For venue based events the focus

remained on safer sex and exploring the different types of relationships that exist within the MSM community. Discussion on 'Love and Relationships' are used to draw people in, giving them a sense of hope and reason to want to practise safer sex. In a bid to lower the number of sex partners the programmes are also designed to help couples in varying stages of relationship work through their differences, and stay together.

### Listening Ear for Those Who Needs It Most

The attendance of self-identified MSM at the AfA Anonymous Testing Site, as in Fig 1, (ATS) have increased from 1281 to 3089 over the last 9 years (2005 - 2013) making up roughly 50% of the ATS' clientele.

In November 2014, Pink Carpet was launched to address MSMs who use ATS services. It is a tailored service by the community for the community. The Pink Carpet Network focuses on providing a new, and more intimate experience at our testing facilities; essentially a service run by gay-identified volunteers and counsellors for the gay community. Our objective is to provide optimum care and support through in-depth discussions about topics that mattered to MSMs and to connect affected MSMs to AfA's care and support networks.

Since its inception, 96 clients have accessed our counselling services and were able to convert 19 clients (19.8%) to join us for our social events, workshops or to join us as a volunteer. This surpassed the 10% conversion rate we had set for ourselves.

Please refer to the Pink Carpet Network for detailed report.

### Connecting Hearts

Our hard work has paid off and has translated into a small drop in new notifications from (248) in 2013 to (224) in 2014 in a report released by the Ministry of Health on 2 Jun 2015.

The global narrative concerning gay men has matured. Even as other countries are progressing towards same-sex marriages, we are still arguing over the repeal of repressive laws that have its roots in our colonial past. While we understand (and remain hopeful) that it will be some time before Singapore witnesses a shift in its thinking towards MSMs, we cannot wait, preventive and health-focused programmes need to be pushed forward and carried out in manner that remains effective and relevant.

In 2015, we hope to build on the success of 2014, and launch a daring and heart warming campaign to increase safer sex negotiation skills.

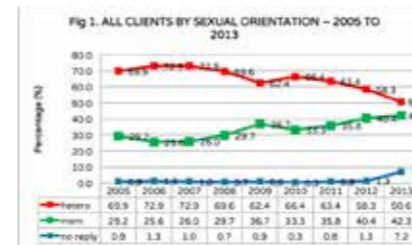
The campaign will build on the need to love and be loved and hopes to educate through social learning by featuring real people in real situations. Through that, the community will be able to find support and real-life role models on how to start, continue, and build a strong and lasting relationships, while exploring how safer sex can play a part in any types of relationship.

# PINK CARPET VENUE BASED TESTING PROJECT (ROUND 7)

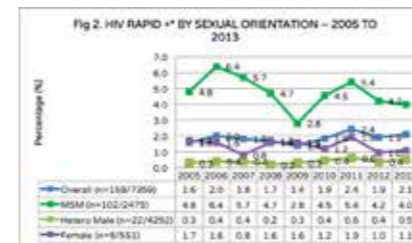
BY ROY CHAN, MARTIN CHIO, AVIN TAN, DANIEL LE, ALEX TAN, JET SIM, AH KHENG & CLEMENT LIM



Through our education and prevention initiatives such as education programmes, workshops and online outreach, the attendance of self-identified MSMs at the AfA Anonymous Testing Site, as in Fig 1, (ATS) have increased from 1281 to 3089 over the last 9 years (2005 - 2013) making up 50% in attendance at the ATS.



Between years 2010 to 2013, MSM clients made up an average of 4.53% of all newly diagnosed cases. As illustrated in Fig 2, more MSM clients are diagnosed HIV positive (4% [MSM] vs. 2.1 [HSO]).



As illustrated in Fig 3., 45% of all

MSM +ve clients are aged 29 and below. Out of these, HIV+ MSM attendees aged 29 and below who had a previous HIV negative result, and tested with the ATS make up 42.7%.



At a growth rate of about 3% year on year, it is projected that the number of MSM clients will grow over 3200 over the next 2 years. A probable consequence of this increase would see to a decrease in the quality of pre and post test counselling.

### Closing the loop

To address the various concerns, the MSM programme was repositioned as gayhealth.sg and took on a whole new persona, which is more intimate and prides itself on human connection. Next, this new personality was also introduced into the Anonymous Test Site (ATS) and that resulted in the launch of Pink Carpet Network in November 2014.

Pink Carpet Network is a new initiative tailored to the needs of the gay community. The network focuses on providing a new, and more intimate experience at our testing facilities. It is staffed by gay identified volunteers and counsellors and our objectives are to provide optimum care and support through in-depth discussions about topics

that matters, it also wants to connect our clients to our care and supportive networks.

The new initiative compliments ATS by riding on its current service provision, such as pre and post counselling, anonymous HIV and Syphilis testing while Pink Carpet focuses on providing a more in-depth counselling and, connecting individuals to AfA's care and support networks.

Regardless of test results, 'Care Volunteers' will provide the necessary bridges to care. Stakeholders and service organisations that can contribute to the MSM community are also identified before the programme commencement.

In just 2 months since its launch, 96 clients have accessed our counselling services and we engaged 19 clients (19.8%) to take part in social events, workshop or join us as a volunteer. This surpasses the 10% conversion rate we set for ourselves.

### Pink Carpet Venue Testing (previously known as Sero Prevalence Round 7)

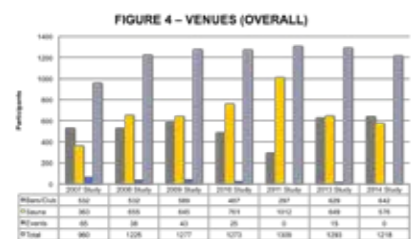
Pink Carpet was so well received, it was decided that the service will be expanded into the community. Sero Prevalence, first started in 2007 and is a community based project to increase anonymous HIV testing amongst MSM aged 18 years and above, using a safe and approved rapid testing kit at venues frequented by MSMs.

(Cont. on next page)



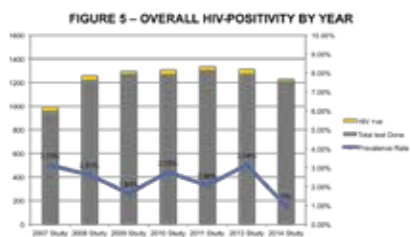
It will utilise a multi-prong approach to educate and encourage the target audience to part take in the research. The strategy addresses the concerns of HIV testing with the target audience and provides support to increase HIV testing. Applying the Pink Carpet method of being a friend first, our hands-on volunteers provided information beyond testing, and took the chance to recruit volunteers and raise the awareness of our new portal, gayhealth.sg.

Through value added and differentiating components, Pink Carpet provides quality counselling and services, beyond anonymous testing.



Bringing the testing to venues that are frequented by MSM would increase the awareness of HIV status, particularly to those who may be unaware of their HIV status or who procrastinate seeking an HIV test. The testing is done anonymously to maximise uptake. The Department of STI Control provided clinical oversight of this testing service.

This is the 7th round of the HIV testing project; the first was conducted in 2007, HIV positivity and number of tests are illustrated in figure 5.



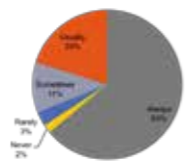
A short survey was used to collect basic demographic information such as, nationality, age group and race, as well as additional data on sexual behavior and practices. The survey questionnaire for round 7 has been updated to reflect some changes and feedback from the committee.

On top of examining the frequency of condom usage with regular (figure 6) and casual sex partners (figure 7), this research would like to know the reasons for failure or inconsistent use of condom when engaging in penetrative anal sex.

Figure 6 - Condom use with regular partner(s) in the last 6 months (N=544)



Figure 7 - Condom use with casual partners in the last 6 months (N=719)



Treatment as Prevention and the use of Pre-exposure Prophylaxis (PrEP) is increasingly becoming an important and promising approach for the prevention of human immunodeficiency virus (HIV) acquisition, yet little data is known about the acceptance level of PrEP & PEP in Singapore. The addition of two questions will allow the research to explore the potential of PrEP implementation in Singapore.

FIGURE 8 - SEQUENCE OF WILLINGNESS TO PAY QUESTION

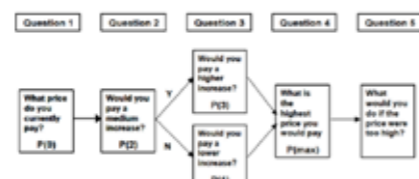


Figure 9 - Price Ranges From Willingness To Pay Questions for PrEP

Price per month	Number	% of 977
Up to \$100	272	27.8%
\$100- \$150	122	12.5%
\$200	249	25.5%
Do not know / no response	334	34.2%

Figure 11 - Price Ranges From Willingness To Pay Questions for PEP

Price for course	number	% of 1223
Up to \$150	129	10.5
\$150-\$200	213	17.4
Up to \$250	306	31.6
Do not know / no response	495	40.5

Additionally, drug use has been cited as a possible cause of a resurgence in HIV infection rates among MSM communities globally. PCTP Round 7 also took this chance to also establish the level of drug use within the MSM community and this information can be used to guide future HIV education and prevention programming.

FIGURE 13 - HAVE YOU USED PARTY DRUGS IN THE LAST YEAR? N = 1223



The aim of the Pink Carpet Network is to hopefully extend beyond the boundaries of AfA, and to other practitioners who are gay identified and/or gay friendly, allowing people an easy yet discreet way to identify health care service providers who will respect and provide customised care to reinforce HIV prevention knowledge and safer sex practices.

This initiative would not have been possible without the support of the MSM advisory team, Prof. Roy Chan, Prof. Ananth, Prof. Lee C.C., Dr. David Lye, the Norani Othman and the senior MSM volunteer team.



## SUPPORT & CARE

*Anonymous HIV-testing promotes wider community awareness and well being.*

*The organisation also provides financial assistance , leads specific support groups and other empowerment workshops to close the gap between diagnosis and care.*

FIGURE 10 - COUNT OF WHAT IS THE HIGHEST PRICE YOU WOULD PAY PER MONTH FOR THIS HIV PREVENTION PILL? (N = 971)

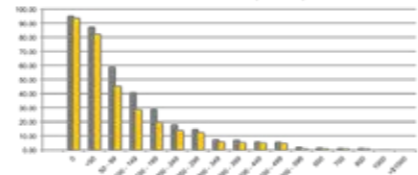
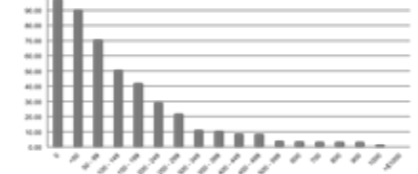


FIGURE 12 - WHAT IS THE HIGHEST PRICE YOU WOULD PAY FOR PEP? (N = 1061)



# ANONYMOUS TESTING SERVICE (ATS)

BY NORANI OTHMAN  
AFA.ORG.SG/ATS

*“ The 20-29 age grouping continued to see the most number of tests done and by the same extension the most number of newly diagnosed clients... ”*

The Anonymous Test Site (ATS) logged a total of 7,101 client visits in 2014, a drop of 3.5% as compared to 2013's attendance of 7,359. Nonetheless testing numbers remain relatively high, averaging 53 tests done per clinic session, with a total of 8,297 individual tests done for the year.

The number of male clients testing continued to outnumber women clients despite efforts such as the Women Friendly Clinic, an area that remained a continued concern. Attendance rates among males who identified themselves as heterosexual also dropped by 7% as compared to 2013. On the other hand, MSM attendances level continues on an upward trend - an 8% increase - with both trend lines crossing for the first time.

ATS also recorded more foreign clients in 2014 as compared to 2013 (36.5% versus 28.7% respectively) with the total number of positive cases recorded for this grouping at only 32 compared to 73 logged for 2013. As foreigners have limited access to local care management facilities, more efforts have been made to engage regional stakeholders so that continuous referral can be made for the affected client.

## Sero-positivity rate

A total of 119 clients were tested positive for HIV in 2014 as compared

to 158 clients in 2013 and 120 in 2012. In spite of the lower attendance numbers, the introduction of 3 more new anonymous test sites in 2014 (bringing the total of anonymous tests sites to 10 currently) and the restrictive numbers of testing coupons circulated during outreach activities, the 119 cases detected suggests that clients' confidence in ATS remains high.

For the first time the 30-39 age group registered the highest number of newly diagnosed clients - an increase of 5.5% (42.8% in 2014 versus 37.3% in 2013) - outflanking the 20-29 age group. Out of the 51 identified cases within this age group, 42 were repeat testers suggesting high voluntary testing take up rate.

Whether this is a new trend going forward has yet to be seen and will be monitored but more needs to be done to ensure that safe sex practices continue to resonate for clients in this age group. It also highlights the importance of program sustainability. Suppressed funding for outreach activities targeting the 20-29 last year where free testing coupons are distributed may have contributed to the appearance of this trend line.

Where ethnic-based results are considered, Malays continue to register the highest sero-positivity, with majority of the positive cases aged above 30 years old. In 2014, 309



NORANI OTHMAN

Senior Manager  
Coordinated Care

clients identified themselves as Malay with 16 testing positive for 2014, 12 of which were repeat testers. This amounted to a seropositivity of 5.17% in comparison to 1.6% for Chinese clientele who form the largest ethnic group profiled at ATS. Efforts to raise awareness and engagement with the Malay community continues to be a challenge.

## Pink Carpet Network

In response to the high prevalence rate of sero-positivity among the 20-29 MSM grouping ATS and the MSM team launched the Pink Carpet Program at the ATS site in late 2014. Manned by peer counsellors who identified themselves as MSM, the program was set up on the premise that more directed and intensive counselling on safe sex practices and relationship advice are needed to curtail the high number of young newly diagnosed MSM. In addition interested clients are also channelled into other MSM supportive programs to further entrench the safe sex practices messages.

## HIV P24 Ag/Ab Test kits

ATS introduced the HIV 4th Generation P24 Ag/Ab test kits in August 2014. The ability to test

two weeks after exposure date meant that earlier detection is now possible and demand for the new tests kits quickly escalated with an average of 500 tests done per month. In preparation of the launch, all volunteers went through an intensive training to update their technical knowledge. A month long campaign was also held on site to announce the launch of the new test kits. Post Exposure Prophylaxis (PEP SOS initiative).

As part of the multi-prong attempt to bring down the number of young newly diagnosed infection, Actions for AIDS in collaboration with DSC Clinic launched the Post Exposure Prophylaxis (PEP) SOS program in November 2014. The aim of the program was to make PEP more accessible and affordable to all. In addition Action for AIDS subsidises up to half of the cost of the treatment for clients below the age of 25. Information regarding the programme has since been aggressively distributed onsite at ATS, particularly for the Pink Carpet clients. Launched in November 2014, the program does not only provide access affordable PEP regimes, clients are also supported throughout the course of their PEP through counselling sessions.

## Linkage to Care

In 2014, 88 out of 119 of the newly diagnosed cases identified themselves as Singaporean and permanent resident. Out of the 88, 66 took the Western Blot test to confirm their sero-status. 7 came back with either an 'indeterminate' or a 'negative' result. Out of the remaining 59, 39 were referred to local hospitals for further treatment - a referral rate of 66%; the rest chose to have treatment overseas. More work needs to be done to assure newly diagnosed Singaporeans that local treatment is the best option to consider and more specifically addressing the fear of what a positive diagnose might be on their career and mobility.

## The ATS Automation Project

Most of ATS date collection has been paper-based and very labour intensive. ATS serves an average of 55 clients per clinic night and with

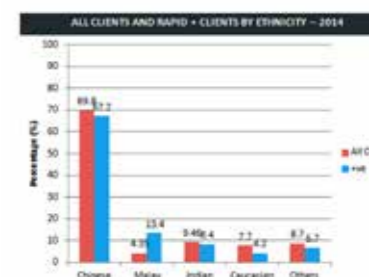
each attendance treated as a unique visit, attempts to embark on any long-term evidence-based study are limited. The need to ensure that no data is lost and that data mining can be maximised for program development purposes is more apparent now as ATS enters into its 24th year of operation.

In 2014 a committee headed by Dr Peter McIsaac and Dr Karen Peachy was set up to map out the technical infrastructure needed to bring ATS up to date in its clinical management. The ground work for the automation project has been completed and will enter into its actual phase of implementation in 2015. The ability to provide a more comprehensive, longitudinal health record enabling closer scrutiny of pertinent data trends and patterns as well as increasing the efficiency of client care delivery and experience will ensure that ATS continues to playing a leading role in the local HIV scene.

## Volunteers

Volunteers are the backbone of ATS and we have been fortunate to have the continuous support of a committed and driven bunch of people who selflessly spend time serving at the clinic. In addition, we continue to attract new volunteers seeking to experience the therapeutic aspect of volunteering at ATS.

ATS' success is a collective partnership; one that has many contributing parties to it. We would like to take this opportunity to acknowledge and thank all who have played a part in shaping ATS into what it is today.





# MOBILE TESTING SERVICE (MTS)

BY LOKMAN HAKEEM MOHDAR,  
PROGRAMME EXECUTIVE

*“MTS has expanded its scope of testing by working closely with various corporate organisations and statutory boards...”*

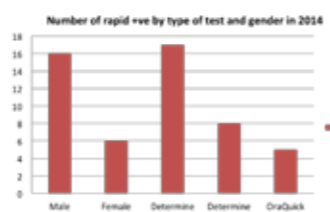
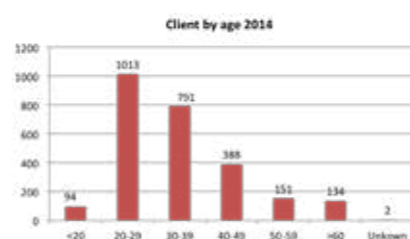
MTS (Mobile Testing Service) has had a very positive and fruitful run for the year 2014. This is rather evident from the increase in number of tests obtained for the year. We managed to successfully conduct 2573 tests- in comparison to 1803 test done in 2013.

This achievement clearly endorses that the program has been accepted by the targeted population. It was a daunting task but nevertheless achievable through the hard work of the team and also the awareness created by the other programs in regards to anonymous testing.

The bulk of testing is clearly evident in the first 3 months of the year. The synergy between the programs and MTS contributed to these high levels of testing. Unfortunately the funded programs ended at the end of March. Nevertheless, we pushed on with our efforts and with 20 sites which we frequently visited, our efforts were not gone to waste.

2014 saw 22 reactive results. This is an increase of 8 from 2013. The increase in number of tests and those newly diagnosed is a testament to the success of MTS. We also saw an increase in the number of women coming for testing as compared to previous years.

With MTS gaining more popularity, we hope to extend our scope to new sites and also look forward to more collaboration with the different in-house programs and organizations with the hope to better our position in line with our corporate mission.



Encouraging trend where patrons are no longer shy about accessing MTS

## What is GIPA?

The Greater Involvement of People Living with HIV (GIPA) is a guiding principle that was formally adopted at the Paris AIDS Summit in 1994. It aims to realize the rights and responsibilities of people living with HIV, including their right to self-determination and participation in decision-making processes that affect their lives. In these efforts, GIPA also aims to enhance the quality and effectiveness of the AIDS response and is critical to progress and sustainability. (UNAIDS, 2007)



ANWAR HASHIM

Senior Manager  
Organisation Development  
AMPUH (Muslim Community)



LOKMAN HAKEEM MOHDAR

Programme Executive  
Mobile Testing Service



MURNI SAB ADI

Coordinator  
Mobile Testing Service  
Volunteer Management

In practice, GIPA involves scaling up the active and meaningful participation of PLHIV in all aspects of the response to HIV from decision making to program conceptualization and delivery by creating an environment that is conducive to such participation.

# COORDINATED CARE

BY NORANI OTHMAN  
AFA.ORG.SG/COORDINATEDCARE

*“The availability of more government support through its funding streams and lowered price of many ART medications have also relieved demands on subsidies...”*

In 2014, a total amount of \$49,553 of direct financial assistance was dispensed to assist people living with HIV (PLHIV) and their family members offset the cost of financing their medication. In addition, the Care for Family Fund continues to receive applications from family members of PLHIV, and dispensed a total of \$2,800.

The bulk of the assistance was dispensed under the Paddy Chew Patient Welfare Fund, which remains the anchor point for all support group activities.

are in need of face-to-face contact in support groups, which may mean that they are better adjusted. The availability of more government support through its funding streams and lowered price of many ART medications have also relieved demands on AfA's medication subsidies. As a result, applications for assistance from support group members has declined. The decreasing amount dispensed over the last 5 years is an opportunity to evaluate how the fund can be expanded to assist in other ways besides medication bills.

Funds type	2011	2012	2013	2014
Paddy Chew Patient Welfare Fund	\$80,000	\$75,000	\$42,900	\$34,900
Prison Medication Fund	\$29,189	\$15,300	\$82.35	NA
HIV+ Pregnant Mothers' Fund	\$2,500	\$1,000	\$9,908.30	\$4,220
Care for Family Fund	\$4,900	\$1,400	\$2,400	\$2,800
Linkage to Care	\$8,982.24	\$8,097.23	\$9,330.22	\$7,633

This year, the Fund gave out a total of \$34,900 to successful support group members' applications. The requirement for the fund hinges on the commitment of members to support group participation and activities. Approximately 850 GIPA hours were clocked by members through support group participation as well as outreach activities.

## Funding Opportunities

Over the past 5 years since the creation of the Positive Living Centre, membership has plateaued. This could indicate that fewer PLWHAs

Over the years we have received applications that cannot be processed under any of the current funding criteria. Although Medisave, Medishield and Medifund exist to help ensure accessibility and affordability, there are pockets of people who currently do not meet any of the funding criteria, and fall through the cracks in the system if they do not meet financial cutoffs.

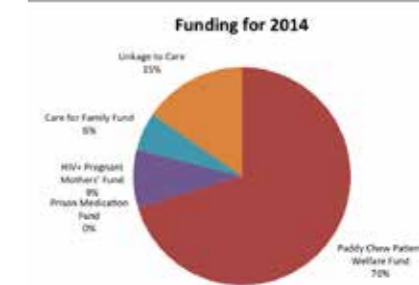
A newly diagnosed young PLHIV just starting his care regime with no source of income will need funding for out of pocket expenses such as



NORANI OTHMAN

Senior Manager  
Coordinated Care

clinic visits, especially if he chooses not to divulge his status to his family members. An HIV+ ex-inmate who has recently been discharged will need financial assistance in terms of an emergency fund to help him find his footing again. These are just some examples of opportunities to expand some of our funding criteria.



## Positive Living Centre

In 2014, the availability of PLC as an activity centre was extended to AfA's partner organisations, such as Youth-out-Here and SG Rainbow. In the last 1 year, these groups have been running their support programs alongside AfA's support groups. Their presence not only ensures that PLC is more fully utilised but also enable expeditious connection and support for clients needing such services.



# ADVOCATE

Since its inception, AFA has been a visible advocate for the fair treatment of Persons Living with HIV/AIDS.

Today, we continue our efforts to seek access to affordable treatment for all PLHIV, and sit on the National HIV/AIDS committee as a CSO (Civil Society Organisation) representative.

# SINGAPORE AIDS CANDLELIGHT MEMORIAL

BY AVIN TAN  
AFA.ORG.SG/SACM

*“We can never judge the lives of others, because each person knows only their own pain and renunciation. It’s one thing to feel that you are on the right path, but it’s another to think that yours is the only path.” Paulo Coelho (Author of the Alchemist).”*

The Singapore AIDS Candlelight Memorial (SACM) has been a focal point for activism in the community of people living with HIV for many years. SACM adopted the theme ‘Let’s keep the light on HIV’ which was announced during World AIDS Day 2013.

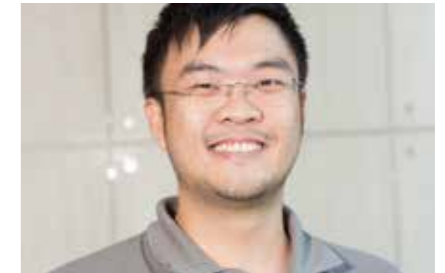
The SACM is linked to the global Candlelight Memorial, which remains one of the largest grassroots mobilisation campaigns for HIV awareness in the world. It started in 1983, and takes place every third Sunday in May. The Global Network of People Living with HIV (GNP+) leads the event and helps coordinate 1,200 community organizations in 115 countries.

In addition, with a post-2015 agenda looming, and the imminent replenishment of the Global Fund, the theme speaks to the urgent need to ensure that HIV and AIDS does not drop off the agenda for

international and local policy makers. This year, together with Tan Tock Seng Hospital, volunteers from Credit Suisse and AFA, Singapore commemorated the memorial at Hong Lim Park on 18th May. The organising committee wanted the event to be positive and forward-looking, thereby reflecting a feeling of solidarity, of people acting together, and of not stigmatising people living with HIV. We also acknowledged that this remains a memorial event for many, and wanted to shine the light on all 1582 individuals who have passed on since 1985, when HIV/AIDS was first discovered in Singapore.

The memorial was graced by our guest of honor, Mr. Phillip Tan, Chairman of Care & Share Steering Committee & Chairman of Community Chest.

It opened with a performance by Cateline & Natasha Nair. Lee Ling, a medical social worker, and Dr.



AVIN TAN

Manager  
Advocacy & Partnerships

Sophia Archuleta from the National University Health System, shared their poignant testimonials about caring for HIV/AIDS patients and the grief they experienced. Michelle Chua and Ian Chionh, who were accompanied by pianist David Lim, concluded the memorial with their soulful rendition of “Unforgettable” by Irving Gordon.



1 (from left) Michelle Chua, Ian Chionh, David Lim & Prof Lee Cheng Chuan

2 Participants lighting and forming a ribbon of hope with 1582 candles

LET'S KEEP THE LIGHT ON HIV

SOME THINGS HAVE STAYED THE SAME  
MANY HAVE CHANGED  
JOIN US AS WE AIM TO LIGHT 1582 CANDLES. 1582 LIVES

SINGAPORE AIDS CANDLELIGHT MEMORIAL  
HONG LIM PARK | 18 MAY 14 | 6PM - 8PM

VISIT WWW.AFA.ORG.SG/CANDLELIGHT TO FIND OUT HOW TO GET YOUR CANDLES

GUEST OF HONOUR : MR. PHILLIP TAN  
CHAIRMAN OF CARE & SHARE STEERING COMMITTEE  
AND CHAIRMAN OF COMMUNITY CHEST

VENUE SPONSOR

CO-ORGANISED BY:

Standard Chartered

SG 50

Community Chest

NUH

Community Chest

# 9TH SINGAPORE AIDS CONFERENCE

AFA.ORG.SG/SAC



The Singapore AIDS Conference (SAC), held every 2 years, is the premier national gathering for those working in the field of HIV, including policy makers, people living with HIV, health care professionals and others committed to ending the pandemic in Singapore.

The 9th SAC was held at Tan Tock Seng, Annex 2 on 29th November 2014. The conference attracted more than 450 registrants, with 337 participants registering for the conference on the actual day. The objective of the conference evaluation is to identify the strengths and weaknesses of the 9th SAC, to assess its impact, and to ultimately ensure that the SAC continues to play a key role in strengthening Singapore's response to HIV and AIDS.

In preparation for the conference, an organising committee comprising of various doctors and professionals in the field was formed. Eight monthly Organising Committee meetings were held between 29th April and the start of the conference.

With the theme, "Seeking Solutions", the 9th SAC emphasised the importance of a community driven approach to gather solutions for two major topic. The first topic is

that of rising HIV infections among men who have sex with men (MSM) in Singapore, and the second, ethical dilemmas in access to medical care in Singapore where patients with HIV face additional hurdles in negotiating our advanced healthcare system.

## SAC objectives include:

1. To bring together HIV/AIDS workers and experts to update one another on advances and expertise in scientific, medical and behavioural research
2. To bring together HIV/AIDS workers and experts to promote and enhance programmatic collaborations that would address and overcome barriers that limit access to prevention, care and services
3. To engage new and existing stakeholders in HIV/AIDS programmes in Singapore, especially reaching out to those most affected by HIV/AIDS, including men who have sex with men, young people, people who use drugs, and people involved in prevention or care programmes
4. To promote accountability among stakeholders engaged at various levels of the response to HIV and AIDS.



A copy of all the speaker's speech, presentation and other related materials are available on our website.

Please visit [afa.org.sg/sac/9th-sac-archive](http://afa.org.sg/sac/9th-sac-archive)

In order to achieve these objectives, the conference programme included sessions that promoted dialogue, e.g. round table or panel discussions allowed for greater interaction between speakers and audience. The organising committee also set out to include first-time speakers at a Singapore AIDS Conference. Emphasis was put on including more young adults, students and young professionals, volunteers and advocates to attend the conference.

The conference comprised of 1 Keynote Speech, 2 Plenary Sessions, 1 Panel Discussion, and 16 presentations from a variety of speakers.

## Conference Feedback Evaluation

### Feedback Survey Methodology

In order to find out attendees' feedback on motivation for attendance, overall marketing and perception of event/ content quality; six days after the conference on the 5th December 2014, a post conference online survey link (comprising of 7 questions) was sent out via email to the 337 registered conference participants. 48 participated in the survey and provided their feedback.



1 Red Ribbon Award Recipients with Senior Minister Dr. Amy Khor

2 Opening Speech by PLHIV, Mr. Avin Tan



2

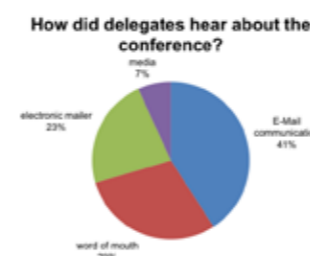


3

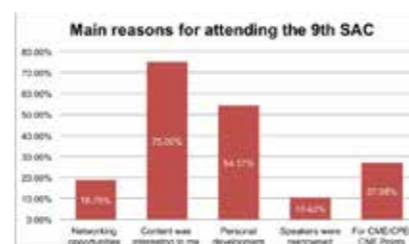
3 Keynote Address by Dr. Anton Pozniak

## Main findings of the evaluation include:

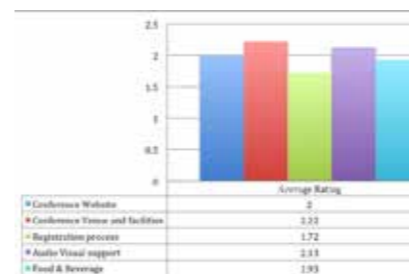
How did delegates hear about the conference?



The reasons for attending the 9th SAC.



What did not work so well and could be improved at the next Singapore AIDS Conference?

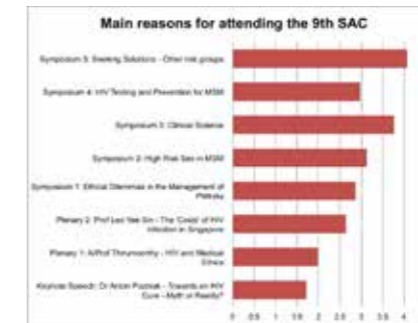


Most recurrent comments related to the technical glitches that marred the conference. Other comments

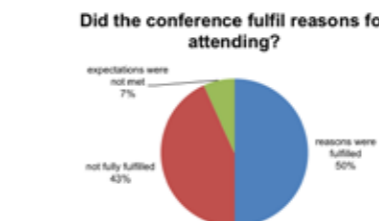
included the layout and setting of the venue, which limited the scale and clarity of the projection, resulting in content being blocked by attendees seated in and around the screens.

The venue itself is not easily located, aggravated by general lack of directions to the conference venue. Future conferences should include more and clearer signs, ushers and traffic marshals to facilitate attendees.

How was the quality of the programme rated?



Did the conference fulfil reasons for attending?



## Media Coverage

There was extensive media coverage of the conference. Pre-conference publicity included 9th SAC posters

featured on the web pages of Tan Tock Seng Hospital, Action for AIDS, Fridae, and Trevvy.

Live interviews on Channel News Asia were also arranged with Prof Leo Yee Sin and the conference's keynote speaker, Dr Anton Pozniak, prior to the conference.

Post event, the conference was featured on Tan Tock Seng Hospital's Facebook page. An exclusive article was also featured in the TODAY paper on 3 December 2014.

## Recommendations

While the venue may have been downsized, the importance of the Singapore AIDS Conference was by no means any less important.

The SAC provided a forum in which research, programmes, clinical practice, lessons learned and gaps in knowledge were addressed. It presented an opportunity to influence policy makers and donors to increase their commitment to HIV and AIDS prevention, care and treatment.

It provided opportunity PWAs, and key affected communities. The SAC provided opportunities to discuss ways to reduce stigmatisation and discrimination of PWAs and those working professionally across the response to HIV and AIDS.

(Cont. on next page)





4 Prof Lee Cheng Chuan responding to questions during panel discussion

5 Interactive component to engage conference participants

6 Dr. Sophia Archuleta reporting back on the 8th SAC

7 One of the many young professionals attending the 9th SAC

It is hoped that we will reach a wider audience through the distribution of conference proceedings and media coverage. Presentations from the conference will soon be available online.

The 9th SAC was well attended, attracted a range of participants and managed to engaged them in dialogue that could potentially lead to new and refined solutions in response to the rising HIV infections among men who have sex with men (MSM) in Singapore. We are hopeful it will spark an ongoing discussion on the ethical dilemmas that are faced by medical professionals and persons living with HIV who access medical care in Singapore.

The programme was well rated overall in terms of quality and usefulness of sessions and activities. The focus on the above issues and the deliberate effort put in to ensure the engagement of new and non-traditional stakeholders are considered to be the main added values of the conference while main benefits gained by delegates continue to be the acquisition of new knowledge and networking opportunities.

Delegates also expressed their satisfaction with the overall organisation, with a majority of attendees (93.18%) indicating that it had either met or partially met their needs with respect to their expectations of the conference. They provided positive feedback on the different types of support received before and during the conference to help them prepare for the conference and participate in a meaningful way.

We are extremely grateful for our sponsors and supporters for making the 9th SAC possible, in particular to Tan Tock Seng Hospital management for providing gratis the use of its conference venue.

Suggestions for improvement include -

1. More efficient registration
2. Clearer signage and directions in the venue
3. Venue that can support better conferencing facilities
4. Better AV technical support
5. If possible, a venue with better accessibility may be preferable

6. Consideration to expand conference to 2 days to allow deeper discussion and broader programme
7. Greater involvement of persons living with HIV/AIDS, and persons from affected communities
8. Offer sessions specially for professionals and individuals who are keen on engagement at higher levels to improve their overall awareness

In conclusion, the extensive and in-depth media coverage and feedback evaluation demonstrated that the SAC continues to be the key forum that attracts hundreds of stakeholders engaged in the response to HIV and AIDS in Singapore. It provides a strategic platform to: share scientific, programmatic and policy knowledge, as well as concrete experiences; raise awareness; advocate for key issues; create and reinforce partnerships and alliances; and increase motivation of those involved in the fight against the epidemic.

The conference also plays an important role in keeping HIV and AIDS on the agenda of key leaders, stakeholders and donors.

# FUNDRAISING EFFORTS

BY ANWAR HASHIM  
AFA.ORG.SG/DONATE

*“It was a particularly significant year for us because of SG50 Care and Share movement, where donations are matched dollar for dollar by the Singapore government.”*



ANWAR HASHIM

Senior Manager  
Organisation Development  
AMPUH (Muslim Community)

This year, we were pleased and fortunate to collaborate with community partners in various industries to help fund AfA's work and causes. It was a particularly significant year for us because of the SG50 Care and Share movement, where donations are matched dollar for dollar by the Singapore government.

From beauty and fashion products to beloved heritage food, our fundraising highlights included Kiehl's "Keep a Child Alive" campaign headlined by Alicia Keys; Aldo's FriendsFight friendship bracelets, and Kim Choo's Peranakan pineapple tarts and cookies. Proceeds from these products totalled more than \$8,000 for AfA.

In the film arts arena, we are thankful to Edgar Tang and HBO respectively for the charity screenings of "I Hugged Berlin Patient" and "Dallas Buyers's Club". The events helped to spread awareness of HIV/AIDS and its hopes and challenges, and helped raise over \$15,000 in total for AfA.

In addition, we are thankful for substantial donations totalling \$230,000 by two kind and generous individuals who wish to remain anonymous.

We applaud the noble efforts of a group of students from ITE West and Dunman Secondary who participated in CITI-YMCA's Youth for Causes to help us to raise funds. They learnt new skills by volunteering with us and raised almost \$4,000 for their efforts.

We are also pleased about our inaugural partnership and collaboration with Credit Suisse to produce red ribbons for a "Wear A Red Ribbon" Flag Day event on Dec 1. It took 5 months of work, starting in June, to produce 10,000 red ribbons. On Dec 1, AfA and Credit Suisse staff and volunteers were at various location island-wide for the all-day event, covering Jurong East Point and Tampines Interchange to the Central Financial District, Orchard Road and Bugis. The total amount collected was just over \$15,000.

Our annual Candlelight Memorial, held at Hong Lim Park, garnered almost \$8,000 from the sale of candles and also from donations.

Our long-time community partner, MAC Cosmetics, contributed \$125,000 to our ongoing MTS programme. We are grateful for their continued support. This year saw our yet another successful

Gala Dinner, Savour LOVE, which was held at the F1 Pit Stop Gallery and raised \$384,212. The exclusive event was made possible with the wonderful support of Savour Events Private Limited and our organising committee consisting of AfA's Board of Trustees. Guests were treated to a sumptuous dinner by Mads Refslund, Executive Chef of the Michelin-starred Restaurant MR in Copenhagen, and co-founder of Noma.



# HELP US. REACH MORE.



## Become an advocate

Volunteers are one of the most important resources for our organisation. They come from all walks of life and are of diverse nationalities.

To learn more about volunteering or to sign up, please visit our website at:

[www.afa.org.sg/getinvolved](http://www.afa.org.sg/getinvolved)

*You are our best answer to slow down the spread of HIV.*



## Donate

Only with your wholehearted support, we are able to continue our aim of achieving the three zeros.

To make a donation via

*Credit/Debit card or SGGives*  
please visit our website at:  
[www.afa.org.sg/donate](http://www.afa.org.sg/donate)

*Cheque donations*

**Kindly issue a crossed cheque payable to "Action for AIDS Singapore", and mail it to our address.**

*Cash Donations*

**If you would like to make a cash donation, please drop by our office.**

*All donations above \$50 are tax deductible, please include your: NRIC/FIN/RVB, number, company or your full name when making a donation.*



## Mailing & Contact Details

9 Kelantan Lane #03-01  
Singapore 208628  
or  
c/o DSC Clinic:  
31 Kelantan Lane #02-16  
Singapore 200031

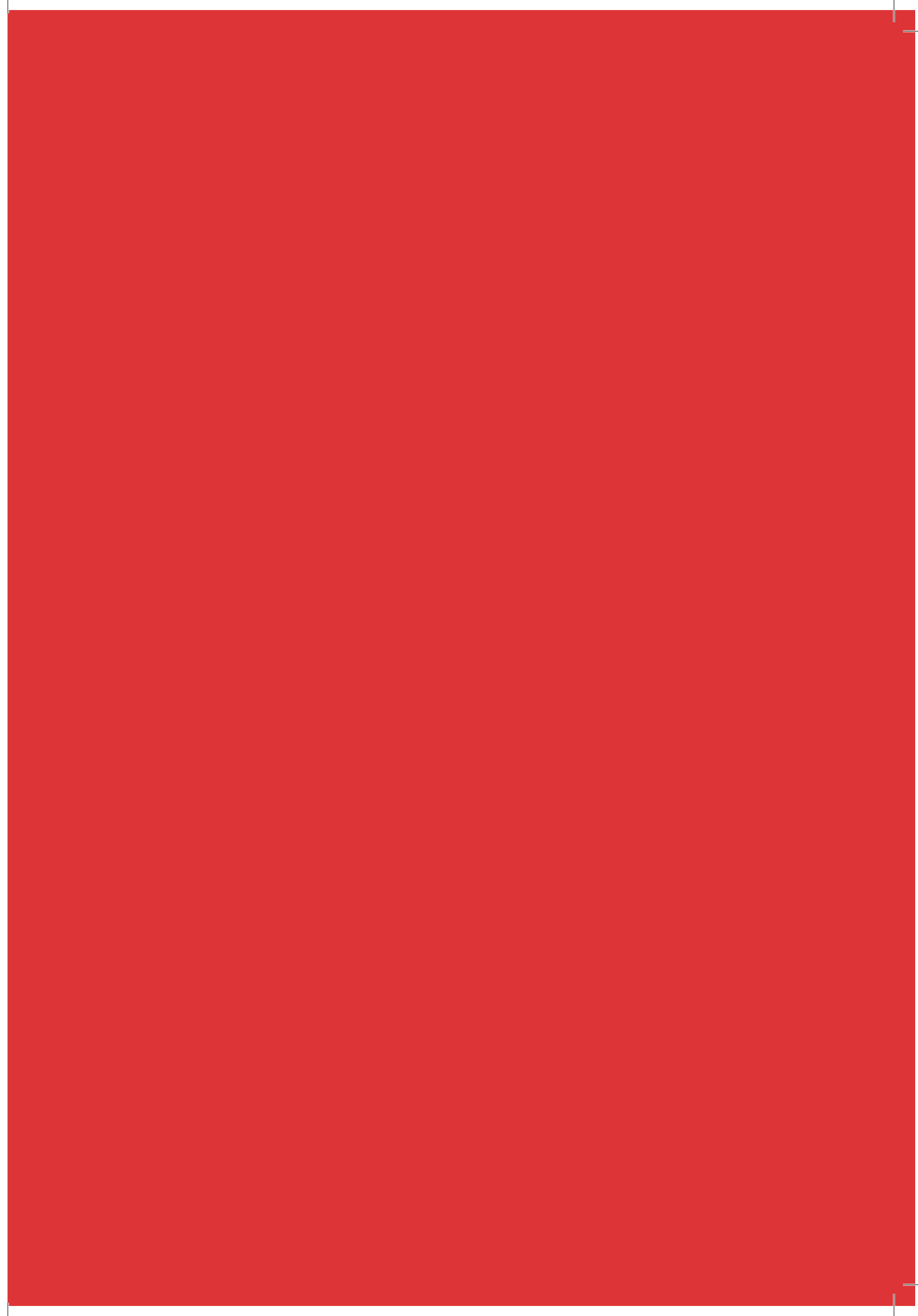
Tel : (65) 6254 0212  
Fax : (65) 6256 5903  
Email : [info@afa.org.sg](mailto:info@afa.org.sg)

*Name of Organisation:* Action For AIDS (Singapore)  
UEN: S88SS0126A  
IPC No: HEF0006/G  
Date of Charity Registration: 07 October 1994

*Admin Office Operating Hours:*  
Mon-Fri : 10am - 5pm

THIS PAGE IS INTENTIONALLY  
LEFT BLANK

DOING IT BETTER



# EDUCATE SUPPORT ADVOCATE



*A movement supported by over 200 voluntary welfare organisations*

