

# Annual Report 2021 / 2022

Photo taken during Connecting with Care Sydney filming. Outreach Manager Drift (right) and Health Education Officer Rose prepare for a night shift which Kirketon Road Centre undertakes in partnership with Wayside Chapel.



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# Who is INHSU

We are the International Network on Health and Hepatitis in Substance Users (INHSU).

Our vision is a world where people who use drugs have equitable access to the evidence-based services, treatment, and support needed to improve health and live well.

We focus on hepatitis C, other infectious diseases, and harms that may occur from drug use.



# What we do

Through evidence-based knowledge exchange, education programs and advocacy projects we aim to improve the health of people who use drugs.









# 2021 - 2022 at a glance

members representing

countries around the world

project committees

242 attendees at

virtual webinars



education workshops delivered in

countries, with

attendees



**553** registrations for INHSU 2021 virtual conference from



more on page 10 🕑

308 abstracts submitted to INHSU 2021, and

150+ virtual sessions across three days

768 new newsletter subscribers

board members - read more on page 19 😥

members of Special Interest Group
INHSU Prisons - read more on page 17



# **Our top moments**

### **INHSU 2021 conference**

After a hiatus due to COVID-19, our annual conference took place virtually in October 2021 welcoming over 800 people from 54 countries. Whilst we missed seeing our colleagues and peers in person, the virtual format proved highly engaging.

# The Jude Byrne Emerging Female **Leader Award**

The late Jude Byrne, INHSU board member and dear friend, was honoured with the launch of the Jude Byrne Emerging Female Leader Award, in partnership with the International Network of People Who Use Drugs (INPUD). This award will foster the next generation of female leaders in the drug user movement.

# Launched our Hepatitis C Intervention Toolkit

Our interactive and searchable digital toolkit features detailed how-to guides of evidence-based interventions that have been shown to increase hepatitis C testing, linkage to care and treatment. The toolkit also features videos and infographics of models of hepatitis C care from around the world.

# **President's report**



I am proud to reflect on INHSU's activities over the last year.

Personal highlights include the successful delivery of our first virtual conference, continuation of our work in South Africa and Kenya, and commencement of a new project focussed on the importance of personal choice when considering drug treatment options.

COVID-19 has brought considerable challenges in the way that we work, collaborate, and connect. I am very proud with the way that INHSU has adapted to these new challenges and feel that we have managed to continue to strengthen our organisation over the past year in the areas of knowledge translation, education delivery, and advocacy.

We are in the second year of our new strategic direction as we seek to increase our impact and broaden our work beyond hepatitis C prevention, treatment, and care to respond to the health issues of people who use drugs more broadly. This expanded

focus was reflected in non-HCV related content throughout the conference and particularly on day one which focused entirely on the broader health and wellbeing of people who use drugs. The INHSU conference has grown to be one of the leading global scientific conferences addressing issues related to the health of people who use drugs, while maintaining a strong focus on hepatitis C infection.

For the first time, we held a series of satellite events alongside the INHSU 2021 conference, that allowed for a deeper dive into key topics of interest on the health and wellbeing of people who use drugs such as drug policy, the health of people who use drugs and universal health coverage, innovations in HCV diagnostics, and the critical role of communityled initiatives. These sessions were delivered in close collaboration with some of our key organisational partners and I sincerely thank them for all their hard work. We value these relationships immensely and

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I am very proud with the way that INHSU has adapted to new challenges and feel that we have managed to continue to strengthen our organisation over the past year.



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it is a joy to work with people and organisations who share our vision.

I am pleased to note that the organisation has once again posted a modest surplus. This provides protection against financial shocks and the capacity to invest in strategic projects.

I thank the board for their commitment, support, and guidance. I particularly welcome our two new board members; Matthew Bonn from the Canadian Association of People Who Use Drugs and Oluwaseun Falade-Nwulia from Johns Hopkins University School of Medicine, who each bring valuable experience to the board and are very welcome

additions. I would like to especially thank Emma Day, our Executive Director, and the amazing team at INHSU who have worked tirelessly in their efforts to continue to drive forward innovation and excellence within the organisation.

Looking forward to 22/23, I hope that INHSU will continue to be a valued resource and network for our members and that we continue to come together, both in-person and virtually, to share ideas and support each other in our efforts to improve the health of people who use drugs.

Best wishes,

Jason Grebely,
INHSU PRESIDENT





# **Director's report**



While COVID-19 restrictions have eased during the second part of the year, we acknowledge that countless continue to be impacted by the pandemic and that the amplification of pre-existing inequalities between countries and communities, particularly the community of people who use drugs, continues.

Many of our network, previously diverted from their core work to respond to the pandemic, have been working hard to refocus efforts on increasing HCV prevention, diagnosis, treatment, and care. While there have been examples of positive shifts in healthcare delivery, the full extent of COVID consequences on HCV elimination targets and on access to care for other health needs of people who use drugs remains to be seen.

With this context in mind, INHSU continues its commitment to being a knowledge hub for ground-breaking research and innovative practices and solutions that improve health and wellbeing. We are two years into our current strategic plan and

are tracking well against key goals including broadening our focus beyond HCV, as evidenced by programmatic work and the increase in non-hepatitis related content at the annual conference.

This year saw the launch of our first entirely virtual conference. While we had hoped to deliver a hybrid event, the move to virtual was smooth and the event a success with more delegates and content than ever before. I acknowledge the flexibility and support of all involved.

We continue to deliver capacity building programs globally. Examples of efforts include continued delivery of HCV education for primary care and drug and alcohol practitioners in Canada, now in its fifth year of delivery, and the launch of a *Storytelling for Advocacy* program in South Africa designed to build storytelling capacity for people with lived experience of drug use and/or HCV.

We have attracted large audiences throughout the year. 835 people

attended the conference, 380+ attended our webinars and workshops, and 768 have signed up to receive our news. While it is hard to measure the impact of this exposure and these connections, I am confident that we have increased the network of those who share our vision and that is a success worth noting.

Internally, I thank Nikitah Habraken,
Director of Programs and
Partnerships, for her management
of the organisation while I was on
parental leave for much of the year.
We have been lucky to include Olivia
Dawson, Program Manager, in our
small but mighty team and thank her
for her efforts.

Financially, INHSU's total income has increased slightly from the previous financial year. We have been making a concerted effort to diversify our funding base and are pleased to be gradually increasing the amount received from non-government organisations and philanthropic grant sources, with a 13% increase on the previous year.



We are immensely grateful for the ongoing commitment of our members; the support of our funders; and the enthusiasm of our wonderful Board, special interest groups, project committees and partners, who give their time so generously.

With warmest regards,



Emma Day,

EXECUTIVE DIRECTOR





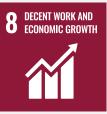
































# **United Nations Sustainable Development Goals**



Our work contributes to the UN Sustainable Development Goals (SDGs), a set of 17 goals and 169 accompanying targets to ensure a sustainable world by 2030. At INHSU, we are committed to doing our part.



# 3. Good Health and Well-being

**Target 3.3:** 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases.

→ We have over a decade of experience bringing together researchers, clinicians, policymakers and community members focussing on combatting hepatitis C and other harms that may occur from drug use.

**Target 3.5:** Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.

→ Educating and advocating for harm reduction principles and the importance of person-centred choice is at the heart of our approach.



# 5. Gender Equality

**Target 5.5:** Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life.

Women who use drugs are highly marginalised, we proactively amplify their voices where we can. Female-identifying stakeholders are often underrepresented and we work hard to ensure even gender representation on education and conference programs, on program steering committees, and project review panels. We are proud to have strong female leadership on our hoard and staff



# 10. Reduced Inequalities

**Target 10.2:** By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.

→ People who use drugs are one of the most marginalised populations globally and our work aims to tackle stigma and discrimination and ensure this community is actively involved in the decisions that impact them.

**Target 10.3:** Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard.

The war on drugs needs to end to meet this target. We are facilitating more work in the global drug policy space, along with our global network of partners.

**Target 10.6:** Ensure enhanced representation and voice for developing countries in decision-making in global international economic and financial institutions in order to deliver more effective, credible, accountable and legitimate institutions.

→ We continually aim to include and enhance the voices of those from low- and middle-income countries, with representation across our board, steering committees and membership.



# 17. Partnerships for the Goals

**Target 17.16:** Enhance the global partnership for sustainable development, complemented by multi-stakeholder partnerships that mobilize and share knowledge, expertise, technology and financial resources, to support the achievement of the sustainable development goals in all countries, in particular developing countries

We regularly collaborate and communicate with our global and in-country partners, sharing knowledge and resources to work towards SDGs and help end hepatitis C and harms that may occur from drug use..



NUAA NSP worker Shawnee Rose talks outside on Kings St, Sydney Australia, with one of the NSP's regular clients.

# In detail... **Knowledge exchange**



We support and facilitate research. scientific exchange. and the dissemination. of knowledge to improve the health of people who use drugs across the world.

In 2021/22 we...

## Increased knowledge dissemination on the INHSU website

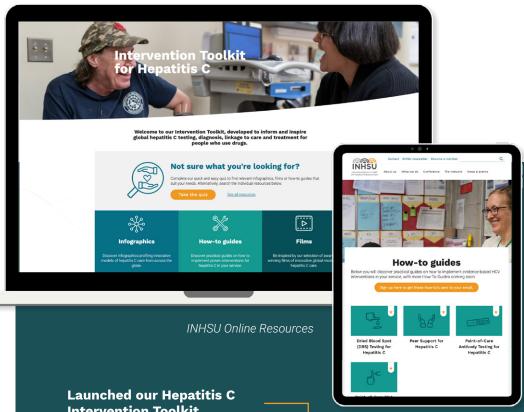
- O 32 articles were published on the INHSU website including detailed recaps from sector events and interviews with harm reduction and hepatology experts
- 200+ abstracts and videos added to the INHSU Conference Archive, an ever-growing archive of all abstracts from INHSU's conferences

## Held a virtual event for **INHSU Prisons**

Special Interest Group INHSU Prisons hosted a virtual event in May 2022, with 104 registrations. The event featured speakers from the highest-ranking papers from the annual INHSU Prisons bibliography.

# Presented at events across the globe

- O 'Community hepatitis C programs during COVID-19', a joint virtual webinar with CATIF and the Canadian Network on Hepatitis C (CanHepC) (July 2021)
- Supporting person-centred choice in determining treatment options for people with opioid dependence', a session at the 5th European Harm Reduction Conference in Prague, Czech Republic (November 2021)
- O Lead a panel session 'Connecting with Care Sydney' at the Australasian Viral Hepatitis Conference (June 2022)



# Intervention Toolkit

Our interactive and searchable digital toolkit features detailed how-to guides of evidence-based interventions that have been shown to increase hepatitis C testing, linkage to care and treatment. The toolkit also features videos and infographics of models of hepatitis C care from around the world and showcases how these interventions work in action. Thank you to all our reviewers and stakeholders involved in making this project reality.

# **Up next:** Hepatitis C **Intervention Symposia**

In the second half of 2022 we will be launching our Hepatitis C Intervention Symposia, a series of events providing practical, local guidance on how to implement the interventions profiled in the Toolkit such as dried blood spot testing and peer support - into services.

# **Annual Conference**

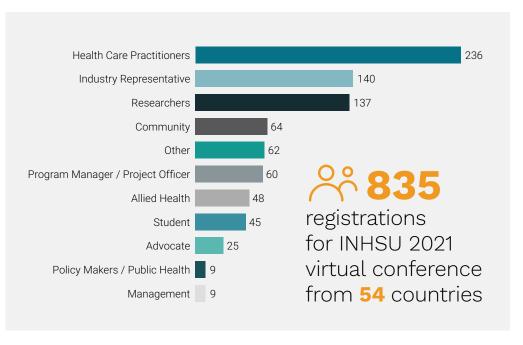




With the 2020 conference cancelled due to COVID-19, INHSU was proud to host the 9th INHSU Conference from 13-15 October 2021, two years after last meeting in 2019 in Montréal

Originally planned to take place in Sydney, Australia the event pivoted to virtual-only due to ongoing travel restrictions and global lockdowns. Despite this last-minute change, the event was a huge success.

- 308 abstracts submitted
- 150+ sessions in total
- 25 invited speakers
- 289 on-demand posters and presentations
- 6 Satellite Sessions, held pre-and post-conference with partners, to deep dive into important topics



- 85 scholarships awarded to academics, practitioners, and community members from countries as diverse as Puerto Rico to Portugal to Zambia to Uganda
- 1 Community Day, held in partnership with the NSW Aids and Users Association (NUAA) with the theme 'Peers as Leaders'
- 790 mentions on twitter and 557 uses of the #INHSU2021 hashtag during conference week
- 30% + open rate on emails (above industry average) including conference daily news, a new addition for 2021
- 1 treat pack delivered to all delegates

Cannot wait to attend again, just hoping it can be in person.

> INHSU 2021 DELEGATE



The best conference I've been to in a long while.

INHSU 2021 DELEGATE



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I thought it ran really well and had a great range of topics. I particularly enjoyed the early-career-researcher sessions. And the Aussie treat pack was a wonderful touch. It made me feel part of the conference even though we were all in different countries. Looking forward to Glasgow 2022.

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INHSU 2021 DELEGATE

# **Annual Conference**



### **Satellite Sessions**

As part of INHSU 2021 we hosted four weeks of satellite sessions:

## Week 1: Funding and Financing

The Health of People Who Use Drugs and Universal Health Coverage (UHC): What are we actually talking about?

# Week 2: Diagnostics and Testing

- Hepatitis C Self-Testing:
   Empowering People who use
   Drugs and Increasing Access to
   HCV Testing and Care
- Innovations in HCV Diagnostics:
   Real-World Implementation

# Week 3: Community-led Initiatives

 Workshop: HCV Testing in Community by the Community

# Week 4: Drug Policy

- CRACKDOWN Podcast Listen
   Party and Panel Discussion: The
   War Against Feeling Alright –
   Decriminalising Pleasure
- Decriminalisation of Drug Use:
   An Interactive Workshop on
   Design Considerations



### The Swiss Hub

On 4 November 2021, INHSU – in partnership with SAMMSU and Infodrog – hosted 'The Swiss Hub', a satellite meeting of INHSU 2021.

Created specifically for attendees based in Switzerland, the half-day in-person and virtual event highlighted key presentations from INHSU 2021 and profiled local research and best practice in health and hepatitis management for people who use drugs.

- O 16 in-person attendees
- 30 virtual attendees

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# In detail... **Education**



We educate healthcare providers, program managers, harm reduction experts, researchers, policymakers, and others to improve their knowledge, confidence and skills around key issues impacting people who use drugs.

# In 2021/22 we...

# Further developed our **HCV** program

The INHSU Hepatitis C in Primary Care and Drug and Alcohol Settings Education Program has been running since 2017, and includes three parts - online learning modules, virtual or in-person workshops, and a hepatitis C capacity building toolkit and resources.

Due to continuing COVID restrictions, our workshops were further adapted for virtual delivery in Germany, Italy and the UK allowing flexible delivery of the program. These virtual workshops will be held in the second half of 2022

It is delivered in partnership with:









# **Delivered hepatitis C** education in Canada



6 online workshops with

118 attendees



"We can start moving forward with Hep C support for clients and know way more about the treatment process and how to support clients from diagnosis to end of treatment." CANADIAN PARTICIPANT

# Were the learning objectives met?



Describe the risk factors for HCV infection enabling effective screening and prevention education.



Demonstrate competence conducting and interpreting test to diagnose HCV.



Recognise risk factors, clinical signs, symptoms and complications of liver disease.



Demonstrate understanding of DAA therapy for the treatment of HCV and competence in selecting appropriate therapy.



Describe recommended ontreatment monitoring and posttreatment follow up protocols.

"This was the final education push I needed to proactively implement HCV treatment in our program."

CANADIAN PARTICIPANT

INHSU ANNUAL REPORT 2021 / 2022

# **Education**



# **Delivered hepatitis education** in France



workshop, piloted online, with

**24** attendees



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I have been made aware to [test] patients at higher risk for HCV more often.

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**FRENCH PARTICIPANT** 



For the first time, INHSU adapted the flagship hepatitis C education program specifically for pharmacists. The new online learning and accompanying workshop was tailored for pharmacists prescribing hepatitis C treatments in Alberta, Canada. 34 people were trained across two workshops.



# **Delivered hepatitis education** in Switzerland

One virtual workshop was held in Switzerland, welcoming 16 registrations. The Swiss education program is delivered in partnership with SAMMSU and Infodrog.

# Spreading the word at international events

Posters on the INHSU education program were included at the Fédération Addiction's 10th Congress (September 2021) and the World Hepatitis Summit (May 2022).

I can now inform. accompany and support people in their care process, in an appropriate way.

**FRENCH PARTICIPANT** 



Yatie Jonet

# In detail... Advocacy



Our advocacy work gives a voice to the community of people who use drugs, providing a safe space to share their stories. By speaking openly about the issues faced by people who use drugs, we can help reduce stigma and tackle discrimination.

Our advocacy work also ensures political leaders, policymakers, and funders globally have access to the best evidence available to make informed decisions about drug user health.

In 2021/2022 we...

# Launched the Jude Byrne Emerging Female Leaders Award

The Jude Byrne Emerging Female Leader Award was developed by INHSU and INPUD (The International Network of People Who Use Drugs) in remembrance of Jude Byrne, a globally recognised, powerful advocate who fought to advance the health and human rights of people who use drugs.

Jude served as an INHSU board member for many years and made countless valuable contributions to our network and community. We are proud to honour Jude's memory via this new award, which aims to help foster expertise and resilience in the next generation of female leaders.

Congratulations to the winners Danielle Russell and Yatie Jonet, who will take part in a nine-month mentorship program with INPUD and present at INHSU 2022.

# Connecting with Care Sydney film launch

Danielle Russel

Our ongoing advocacy program – Connecting with Care – showcases innovative models of hepatitis C care from across the globe via visual storytelling.

# Connecting with Care Sydney

explores how three organisations in Sydney work together to improve the health and wellbeing of people who use drugs, focussing on the treatment and elimination of hepatitis C.

The film features the Medically Supervised Injecting Centre (MSIC), the NSW Users and AIDS Association (NUAA) and Kirketon Road Centre (KRC).



(NUAA) clinic in inner Sydney, nurse Brett Hadlow from KRC conducts a fibre scan on community member Jason.

# **Advocacy**



# Piloted the 'Storytelling for Advocacy' in South Africa

Our new storytelling initiative is a six-month mentoring program for people with lived experience of drug use or viral hepatitis. The program began in May 2022 and will continue into the next financial year.

Local professional storytelling consultants in South Africa worked with people on a 1-2-1 basis to enhance storytelling skills, building the confidence and capacity for people with lived experience to use their personal stories for advocacy.

The program builds on our ongoing work with Kenya and South Africa and is delivered with partners TB HIV Care, South African Network of People Who Use Drugs (SANPUD) and the National AIDS and STIs Control Programme (NASCOP) at the Kenyan Ministry of Health.



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I now understand and see the value and impact our stories are going to make in the lives of those who get the opportunity to read them. These stories are going to be there for a long time. We are very fortunate to be chosen to be the voices of those who couldn't speak for themselves or who never got the opportunity to. Thank you for the opportunity."



A PARTICIPANT IN THE 1-2-1 MENTOR PROGRAM



# Collaborated on a World Health Organization Declaration

INHSU collaborated with the International Network of People Who Use Drugs (INPUD), Médecins du Monde (MDM), and Harm Reduction International (HRI) to create a global declaration to inform development of the World Health Organization (WHO)'s Global Health Sector Strategies for HIV, viral hepatitis and STIs.

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It was a great experience being part of the storytelling workshop. We will definitely carry those skills into the community and train people who use drugs to craft their stories. Such a great advocacy tool!

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PARTICIPANT WHO ATTENDED THE WORKSHOP IN CAPE TOWN INHSU ANNUAL REPORT 2021 / 2022

# **Advocacy**



# **World Hepatitis Day Advocacy** and Training Roundtable

This awareness raising event provided an opportunity to highlight the viral hepatitis burden and need for action in South Africa, and provided information and training on hepatitis B and C virus to a range of stakeholders.



13 speakers and facilitators



# Joined the World Indigenous **Peoples' Conference on Viral Hepatitis**

In June 2022, 'Connecting with Care -Ahtahkakoop' was shown at the World Indigenous Peoples' Conference on Viral Hepatitis, raising awareness of the unique model of HCV care from the remote community of Ahtahkakoop in Canada.

Below: The Know Your Status program run at the Ahtahkakoop Health Centre. Image taken as part of Connecting with Care Canada project by visual storyteller Conor Ashleigh.





Nick is a peer expert at the Canberra Alliance for Harm Minimisation and Advocacy (CAHMA). Nick was a participant in INHSU's My Choice's participatory photography project, exploring OAT and choice. In this photo, he sits and talks with one of his colleagues at CAHMA ahead of a peer worker shift.

# **My Choice Project**

Drug treatment is most effective when the individual needs of an informed population are respected. This project captures the lives and choices of people who use drugs from across Australia through multimedia storytelling.

Films and a photography exhibition reflecting varied experiences of opioid dependence and drug treatment journeys will be launched at the INHSU Conference in Glasgow in October 22

# **Our network**



We believe the most powerful impact is achieved when researchers, clinicians, advocates, and communities of people who use drugs come together to share knowledge, learn from each other, and put those insights into action.



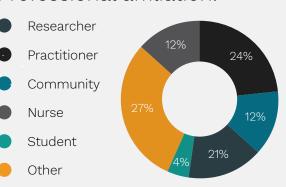
302 members





132
INHSU Prisons
members

# Professional affiliation:







INHSU likely has some of the best resources I've seen globally for working with those who use drugs and co-localizing care; and often they are region-specific. As a member, I have enjoyed meeting people from the same profession from other countries, and INHSU facilities those connections and knowledge exchange.



### MIA BIONDI

Researcher, Toronto Centre for Liver Disease, Toronto General Hospital, Adjunct Research Professor, Western University, Part-Time Teaching Faculty, McMaster University, Nurse Practitioner, Omega Specialty Nurses.



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The best thing about being a member of INHSU is that this is an amazing network of diverse professionals. But INHSU is also a current source of insight into health management for people who use drugs.



NONSO B.C MADUKA, Executive Director at Bensther Development Foundation, Nigeria.



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INHSU brings me into contact with all sorts of people that I wouldn't normally have any academic contact with; social scientists, patient advocates, people who use drugs, the whole gamut of people across all of those groups. If you're interested in trying to make your care pathway more efficient and better, you need to know about all of the potential pathways that you will find at INHSU.



### JOHN DILLON

Professor of Hepatology and Gastroenterology, University of Dundee and Consultant Hepatologist at NHS Tayside.



# **INHSU Prisons Special Interest Group**



2021/2022 saw the INHSU Prisons network, a special interest group focused on hepatitis C and drug user health in correctional settings, continue to grow.

132 members 1 Parallel from 24 countries



**508** 

subscribers to INHSU Prisons news

1 virtual event with **104** registrations

Research Oral Abstract Session at INHSU 2021 - HCV Care in Prisons

session planned for INHSU 2022: Regional spotlights: Harm reduction and hepatitis C in correctional settings

Joint workshop with the Coalition for Global Hepatitis Elimination (CGHE) planned for INHSU 2022



INHSU Prisons has been focussing on keeping the network connected during the pandemic through hosting innovative global virtual events, publishing academic papers, and broadening our Executive Committee membership. We're looking forward to continuing the work of INHSU Prisons with a faceto-face meeting at INHSU 2022 as well as shifting focus towards facilitating advocacy efforts in the prison sector globally.

**INHSU PRISONS EXECUTIVE COMMITTEE** 

# A thank you to our board

Our highly respected and professional board connects us to our community, provides access to global experts and supports ongoing innovation.



**Jason Grebely**PRESIDENT

Head of the Hepatitis C and Drug Use Group at the Kirby Institute, University of New South Wales, Sydney and Senior Editor for the International Journal of Drug Policy.



**Natasha Martin** VICE PRESIDENT

Associate Professor in the Division of Infectious Diseases and Global Public Health in the Department of Medicine at the University of California and Honorary Senior Lecturer at the University of Bristol.



**Matthew Bonn** BOARD MEMBER

Program Coordinator with the Canadian Association of People Who Use Drugs, a National Board member with Canadian Students for Sensible Drug Policy and a freelance journalist.



**Julie Bruneau**BOARD MEMBER

Professor in at Université de Montréal, Adjunct Professor at the Family Medicine Department, McGill University. Head of the Primary Care Department at the Centre Hospitalier de l'Université de Montréal



**Ann Eriksen** BOARD MEMBER

Formerly NHS Tayside's
Executive Lead for sexual health
and blood-borne virus. NHS
Tayside's governance includes
three major hospitals alongside a
number of community hospitals
and 60 GPs.





**Oluwaseun Falade-Nwulia** BOARD MEMBER

Associate Professor of Medicine in the Division of Infectious Diseases at the Johns Hopkins University School of Medicine. Dr. Falade-Nwulia's clinical focus is on care of patients with infectious diseases such as HIV, HCV and substance use.



**Margaret Hellard** BOARD MEMBER

Deputy Director at the Burnet Institute, Head of Hepatitis Services in the Infectious Diseases Unit at The Alfred Hospital, Adjunct Professor of Infectious Diseases Epidemiology at Monash University and University of Melbourne



**Matt Hickman** BOARD MEMBER

Professor in Public Health and Epidemiology, NIHR Senior Investigator, Head of Population Sciences and Deputy Head of Bristol Medical School at University of Bristol.



Andrew Scheibe BOARD MEMBER

Medical doctor working in harm reduction research, technical advisor for TB HIV Care and a researcher at the University of Pretoria. Focuses on the intersections between infectious diseases, determinants of health and rights.



**Tracy Swan**BOARD MEMBER

Consultant and Hepatitis
C activist Swan has been
an outreach worked, run
HIV counselling and testing
programs, designed HCV
education programs and worked
for Treatment Action Group
among others.



# 2021/2022 financial report

# International Network on Hepatitis in Substance Users INHSU, Zürich

BALANCE SHEET AS AT JUNE 30, 202 (with 2021 comparative figures)

INHSU is committed to transparency and accountability. The organisation is funded via annual membership fees, conference sponsorship and delegate income, and project funding.

|                                      | Notes | 30.06.2022<br>EUR | 30.06.2021<br>EUR | 30.06.2022<br>CHF | 30.06.2021<br>CHF |
|--------------------------------------|-------|-------------------|-------------------|-------------------|-------------------|
| ASSETS                               |       |                   |                   |                   |                   |
| Cash and cash equivalents            | 3.1.  | 659'368           | 519'642           | 664'096           | 576'803           |
| Trade receivables                    |       | 28'719            | 332'245           | 28'925            | 368'792           |
| Other receivables                    | 3.2.  | 30'009            | 30'009            | 30'224            | 33'310            |
| Prepaid expenses                     |       | 844               | 554               | 850               | 615               |
| Total current assets                 |       | 718'940           | 882'450           | 724'095           | 979'520           |
| Total assets                         |       | 718'940           | 882'450           | 724'095           | 979'520           |
| LIABILITIES                          |       |                   |                   |                   |                   |
| Trade creditors                      |       | 87'963            | 65'568            | 88'594            | 72'781            |
| Other liabilities                    |       | 28'076            | -                 | 28'277            | -                 |
| Deferred income and accrued expenses | 3.3.  | 249'573           | 506'010           | 251'362           | 561'671           |
| Total current borrowed capital       |       | 365'612           | 571′578           | 368'233           | 634'452           |
| Balance carried forward              |       | 310'872           | 297'939           | 345'068           | 317′543           |
| Currency translation adjustment      |       | -                 | -                 | -                 | 13'373            |
| Profit / (loss) of the period        |       | 42'456            | 12'933            | 10′794            | 14'152            |
| Total net assets                     |       | 353'328           | 310'872           | 355'862           | 345'068           |
| Total liabilities                    |       | 718'940           | 882'450           | 724'095           | 979'520           |

# 2021/2022 financial report

# International Network on Hepatitis in Substance Users INHSU, Zürich

PROFIT AND LOSS ACCOUNT FOR THE PERIOD ENDED JUNE 30, 2022 (with 2021 comparative figures)

|                                    | Notes | From<br>01.07.2021 to<br>30.06.2022<br>EUR | From<br>01.07.2020 to<br>30.06.2021<br>EUR | From<br>01.07.2021 to<br>30.06.2022<br>CHF | From<br>01.07.2020 to<br>30.06.2021<br>CHF |
|------------------------------------|-------|--|--|--|--|
| Conference fees                    |       | 458′755                                    | -  | 489'935                                    | -  |
| Membership fees                    |       | 18'301                                     | 12'945                                     | 19'545                                     | 14'165                                     |
| Management fees                    |       | 47'394                                     | 115'327                                    | 50'615                                     | 126′195                                    |
| Sponsorship fees                   |       | 152'333                                    | 392'486                                    | 162'687                                    | 429'471                                    |
| Other fee income                   |       | -  | 28'005                                     | -  | 30'644                                     |
| Total operating income             |       | 676′783                                    | 548'763                                    | 722'782                                    | 600'475                                    |
| Operating expenses                 |       |  |  |  |  |
| Administration expenses            | 3.4.  | 37'304                                     | 38'750                                     | 39'840                                     | 42'402                                     |
| Other operating expenses           | 3.5.  | 54'168                                     | 267'309                                    | 57'849                                     | 292'498                                    |
| Staff costs                        | 3.6.  | 286'561                                    | 231'079                                    | 306'038                                    | 252'854                                    |
| Conference expenses                |       | 251'306                                    | -  | 268'386                                    | -  |
| Total operating expenses           |       | 629'339                                    | 537'138                                    | 672'113                                    | 587'754                                    |
| Operating profit                   |       | 47'444                                     | 11'625                                     | 50'669                                     | 12'721                                     |
| Financial income / (costs)         |       |  |  |  |  |
| Exchange rate, net (loss) / income |       | (2'814)                                    | 2'210                                      | (3'005)                                    | 2'418                                      |
| Financial costs                    |       | (2'174)                                    | (902)                                      | (2'322)                                    | (987)                                      |
| Total financial income / (costs)   |       | (4'988)                                    | 1'308                                      | (5'327)                                    | 1'431                                      |
| Currency translation adjustment    |       | -  | -  | (34'548)                                   | -  |
| Profit of the period               |       | 42'456                                     | 12'933                                     | 10'794                                     | 14'152                                     |

# 2021/2022 financial report

### International Network on Hepatitis in Substance Users INHSU, Zürich

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2022

### 1. General information

International Network on Hepatitis in Substance Users (INHSU), Zurich is an Association (so called "Verein" under Swiss Code of Obligation) established on October 20, 2010 and registered in the Swiss Register of Commerce on December 17, 2010 with the purpose to improve the knowledge exchange, knowledge translation, and advocacy focused on hepatitis C prevention and care with people who use drugs. In particular the Association aims to support and facilitates scientific exchange and dissemination of knowledge among specialists, strives to educate international health professionals, researchers, community organisations, people who use drugs and policy makers on hepatitis C prevention, screening, linkage to care, and treatment among people who use drugs and seeks to collaborate with other societies, government organisations, professional associations, community members, institutions and individuals to advocate for hepatitis C prevention and care among people who use drugs.

The Association is established in Schutzengasse 31, 8001 Zurich, Switzerland.

### 2. Key accounting and valuation principles

These financial statements have been prepared in accordance with the requirements of Swiss law (Swiss Code of Obligations) and the articles of incorporation.

The main accounting and valuation principles used are described as follows.

Functional currency and conversion of the financial statements

The Association's functional and presentation currency is EUR.

Consequently, as required by Swiss law, these financial statements present also the comparative figures in CHF under the following rules:

- Equity: historical exchange rate;
- Balance sheet: closing exchange rate at June 30, 2022 of EUR/CHF 1.00717 (June 30, 2021: EUR/CHF 1.11);
- Profit and Loss account: average exchange rate of the period July 1, 2021 June 30, 2022 of 1.0680 EUR/CHF (July 1, 2020 June 30, 2021: EURICHF 1.0942).

### Conversions of foreign currency items

Transactions in foreign currencies are converted in EUR at the exchange rate on the day the transaction takes place. Monetary assets and liabilities denominated in foreign currencies are converted into EUR accounts at the exchange rate on the balance sheet date. Any profits or losses resulting from the conversion are recorded in the profit and loss account.

Non-monetary assets and liabilities in foreign currencies are converted at the foreign exchange rate at the time of the transaction. Any foreign exchange profits resulting from the conversion at the exchange rate on the balance sheet date are deferred in the balance sheet whereas exchange losses are recorded in the profit and loss account.

### Cash and cash equivalents

Cash and cash equivalents are recorded at their nominal value.

### Trade receivables and Other receivables

Trade receivables and Other receivables are presented at their nominal value.

If a debtor is considered unlikely to be able to pay the debt, a value adjustment is made.

### Prepaid expenses and accrued income

Prepaid expenses and accrued income are recorded at their nominal value.

# 2021/2022 financial report

## International Network on Hepatitis in Substance Users INHSU, Zürich

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2022

Trade creditors and Other liabilities

Trade creditors and Other liabilities are recorded at their nominal value.

Deferred income and accrued expenses

Accrued expenses are recorded at their nominal value.

Taxes

According to the Swiss tax authorities the Association is tax-exempt.

Revenue recognition

The Association finances its activities through annual membership fees, sponsorship fees and conferences.

### 3. Information relating to items on the balance sheet and profit and loss account

### 3.1. Cash and cash equivalents

The item includes bank account balances for EUR 659'368 equivalent to CHF 664'096 as at June 30, 2022 (June 30, 2021: EUR 519'642 equivalent to CHF 576'803).

### 3.2. Other receivables

The caption, amounting to EUR 30'009 equivalent to CHF 30'224 as at June 30, 2022, relates to receivables for conference seed funding (June 30, 2021: EUR 30'009 equivalent to CHF 33'310).

### 3.3. Deferred income and accrued expenses

This caption can be split as follows:

|  | 30.06.2022<br>EUR | 30.06.2021<br>EUR | 30.06.2022<br>CHF | 30.06.2021<br>CHF |
|--|-------------------|-------------------|-------------------|-------------------|
| Deferred income                            | 249'573           | 502'010           | 251'362           | 557'231           |
| Accrued expenses                           | -                 | 4'000             | -                 | 4'440             |
| Total deferred income and accrued expenses | 249'573           | 506'010           | 251'362           | 561'671           |

# 2021/2022 financial report

# International Network on Hepatitis in Substance Users INHSU, Zürich

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED JUNE 30, 2022

### 3.5. Administration expenses

This caption can be split as follows:

|  | From<br>01.07.2021 to<br>30.06.2022<br>EUR | From<br>01.07.2020 to<br>30.06.2021<br>EUR | From<br>01.07.2021 to<br>30.06.2022<br>CHF | From<br>01.07.2020 to<br>30.06.2021<br>CHF |
|--|--|--|--|--|
| Governance and planning                | -  | 4'101                                      | -  | 4'487                                      |
| Bookkeeping and financial management   | 4'172                                      | 5'767                                      | 4'456                                      | 6'310                                      |
| Website maintenance                    | 1'671                                      | 219  | 1'785                                      | 240  |
| Service provider                       | 1'459                                      | 12'774                                     | 1′558                                      | 13'978                                     |
| Insurance expenses                     | 2'380                                      | 4'367                                      | 2′542                                      | 4'779                                      |
| Consulting & Professional service fees | 17'439                                     | 5′330                                      | 18'624                                     | 5'832                                      |
| Travel and accommodation expenses      | 2'214                                      | 312  | 2'365                                      | 341  |
| Various expenses                       | 7'968                                      | 5′880                                      | 8′511                                      | 6'434                                      |
| Total administration expenses          | 37'304                                     | 38'750                                     | 39'840                                     | 42'402                                     |

### 3.6. Other operating expenses

The caption, amounting to EUR 54'168 equivalent to CHF 57'849 as at June 30. 2022 (June 30, 2021: EUR 267'309 equivalent to CHF 292'498) mainly relates to expenses for the funding of INHSU projects.

### 3.7. Staff costs

ASHM engages 3 full time and 1 part time employees (June 30, 2021: 2 full time and 2 part time) on behalf of INHSU to work on INHSU strategy and operational matters. Whilst the related employment costs have been recorded as Staff Costs in this Financial Report, the employee's contract is with ASHM and is subject to Australian workplace law.

# 2021/2022 financial report

# Independent auditor's report to the members of International Network on Hepatitis in Substance Users (INHSU), Zurich

I have audited the statutory financial statements of INHSU which comprise:

the balance sheet as at June 30, 2022

the profit and loss account for the period ended June 30, 2022

the notes to the financial statements for the year ended June 30, 2022

In my opinion, the statutory financial statements of INHSU:

give a true and fair view of the state of IN HSU's affairs as of June 30, 2022 and of its profit of the period ended June 30, 2022 have been properly prepared in accordance with Swiss GAAP.

Dipl. Oec. Christa Berchtold (auditor)

DE-78239 Rielasingen

Zurich, August 17, 2022

# Thank you



www.inhsu.org