# Table of contents

**Intro President**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Updating AIM Statutes</td>
<td>5</td>
</tr>
<tr>
<td>4. A brand new Strategy</td>
<td>5</td>
</tr>
<tr>
<td>5. Solidarity under the Spotlight</td>
<td>7</td>
</tr>
</tbody>
</table>

**The new face of AIM**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Updating AIM Statutes</td>
<td>5</td>
</tr>
<tr>
<td>2. A brand new Strategy</td>
<td>5</td>
</tr>
<tr>
<td>3. Solidarity under the Spotlight</td>
<td>7</td>
</tr>
</tbody>
</table>

**Highlights from the working groups**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. European Affairs</td>
<td>8</td>
</tr>
<tr>
<td>The European Health Data Space</td>
<td>8</td>
</tr>
<tr>
<td>The Artificial Intelligence Act</td>
<td>9</td>
</tr>
<tr>
<td>2. Mutuals</td>
<td>10</td>
</tr>
<tr>
<td>Social Economy high on the Agenda</td>
<td>10</td>
</tr>
<tr>
<td>3. Pharmaceuticals</td>
<td>12</td>
</tr>
<tr>
<td>Fair Pricing for Medicines</td>
<td>12</td>
</tr>
<tr>
<td>The Pharmaceuticals Legislation</td>
<td>13</td>
</tr>
<tr>
<td>4. Prevention</td>
<td>14</td>
</tr>
<tr>
<td>The EU’s Beating Cancer Plan</td>
<td>14</td>
</tr>
<tr>
<td>AIM Series of Factsheets</td>
<td>15</td>
</tr>
<tr>
<td>5. Long-term Care</td>
<td>16</td>
</tr>
<tr>
<td>The EU Care Strategy</td>
<td>16</td>
</tr>
</tbody>
</table>

**6. Fight against Fraud**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaboration with EHFCN</td>
<td>18</td>
</tr>
</tbody>
</table>

**7. Study visits**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
</table>

**8. International**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Dakar Conference</td>
<td>21</td>
</tr>
<tr>
<td>Mutualist Pledge for the Greater Involvement of Youth in the Mutualist Movement</td>
<td>22</td>
</tr>
<tr>
<td>Mutualism and Gender</td>
<td>23</td>
</tr>
</tbody>
</table>

**Communication**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
</table>

**Our Presidium**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
</table>

**The Team**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
</table>

**Finances**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
</table>

**Photo Album**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
</table>

2
Introduction from the President

When the current presidency took office in 2020, the world was in the midst of the COVID pandemic. It posed great challenges not only to healthcare but also to the functioning of society in almost all countries around the world. From one day to the next, hospitals became overcrowded, and society went on lockdown: meeting each other in person became difficult, contact was possible only via computer, strict rules applied and face masks were meant to bring protection. Around the world, millions of people, especially older people and the most vulnerable, died as a result of COVID.

In February 2022, a crisis of a very different order added up: Russia invaded Ukraine, the first time a European country is invaded since World War II. A war that claimed untold casualties, displaced large numbers of people from their homes, caused an energy and food crisis worldwide and fuelled inflation.

A small but not insignificant bright spot in these crises is that the importance of solidarity has once again been underlined. And that - by trial and error - the world has shown that together we are able to give true meaning to that solidarity, not always optimal and undoubtedly still insufficient according to many. Yet, countries understood that in the event of a pandemic, it is ultimately better for everyone to work together than to go after one’s own interests. And even in supporting Ukraine, countries are showing solidarity, offering support, and accepting the consequences for their own people.

AIM is just a very small cog in this big world. But a cog that - in its own field and in its own way - also works hard for solidarity. For a world in which all people have access to good and affordable healthcare. This is only possible if the rich show solidarity with the poor, the young with the older and the healthy with the sick. AIM’s members put this into practice day by day in their own countries. And AIM supports them in doing so, by campaigning in Brussels for fair drug prices and for ‘Health in all policies’; by working with our African members on the availability of good healthcare in Africa and the Middle-East; by helping to strengthen the position of mutuals around the world, including in Latin America by focusing on the position of young people and women, who are, after all, badly needed for a healthy future for mutuals.

An overview of how AIM and its members have been working towards this in recent years can be found in this report. And of course, in all this, we are also focusing on a healthy future for our own Association. With amended statutes and a new strategy, we have laid the foundations for a future in which we can hopefully continue to work with even more members towards our focus: to protect the health of all people and to develop and defend sustainable universal access to high-quality affordable healthcare along with social protection based on solidarity and democracy.

Due to the COVID pandemic, there has unfortunately been too little space for face-to-face meetings in recent years. We hope that that time is now behind us and that we can continue to meet each other not only through the screen (however convenient it may sometimes be), but regularly in person.

The Presidium thanks all member representatives and AIM staff for their great commitment, even and often in difficult circumstances. We sincerely hope we can count on your commitment and involvement in the years to come, because only together can we make a difference.

On behalf of the Presidium,

Loek Caubo
Dear members and partners,

The AIM ship is navigating, since 2020, through multiple crises. While the pandemic seems to have come to an end, we are faced with a new crisis caused by the attack of Russia on Ukraine, which lead to millions of people having to flee their homes and seek shelter in neighbouring countries. The health systems in those countries were put under yet another stress. Climate change becomes more than ever undeniable, also for European countries. Floods have destroyed whole swathes of land in Europe as well as in other parts of the world and have led to endless human suffering. Heat waves impact the most vulnerable all over the world while worsening food crises.

What we see at political level in these troubled times is that health remains a priority for the European Commission, but also at international level. Countless legislative projects and activities bear witness to this new place that health and social security occupy. AIM has reinforced its pro-active lobby to set the scene with regard to digitalisation of health, with our input to the European Health Data space, more affordable and accessible medicine, with our works on the Fair Pricing Calculator, as well as our input to the European care strategy and our works on cancer screening to name a few highlights of the last couple of years.

What is more, we see that social economy actors such as mutuals are getting more and more attention as they fulfil many of the sustainable development goals. More recently, the European Commission has published an Action Plan for Social Economy, the ILO has published a resolution on the topic and the OECD has also come up with recommendations. We are surfing on this wave to influence this positive development as much as we can, thus supporting our members near and far in their endeavour to put into practice our values: solidarity, democracy and not for profit.

AIM’s team is dedicated to have a strong voice of its own, but also in alliance with partners at European and international level to advocate for our members and for these values, but also to provide a platform for our members to exchange and learn together, giving everyone the opportunity to think outside the box.

Sibylle Reichert
1. Updating AIM Statutes

**Why did we decide to change our statutes?**

The Belgian legislation required a change in our statutes as a new law applying to not for profit associations came into force. With the help of the lawyer of Solidaris, we managed to change the statutes adapting them to the current rules. At the same time, we used this occasion to ensure their alignment with our ambitions, i.e. finding new members and simplifying our governance as well as some of our internal processes. The objective was to make our association future proof while continuing to promote and defend our values: solidarity, not-for-profitability and democracy.

**What is the impact on our work?**

With these new statutes, adopted unanimously during the General Assembly of June 2022, we are now able to accept members that are not mutuals while subscribing to our values. At the same time, we streamlined our governance and went from a three-tier governance to a two-tier governance. In this new structure, the Presidium has taken over some of the tasks of the Board of Directors, while the important strategic and political decisions continue to be taken by the members of the General Assembly. In line with the new statutes, we updated our Internal Rules a, simplifying processes, clarifying responsibilities and the functioning of our association.

2. A brand new Strategy

**Why a new strategy?**

AIM is an association that exists since 1950. While our values are more than ever important for the future of a more social Europe and world, we face challenges due to the multiple crises that humanity and our planet are going through. The pandemic catapulted health to a No.1 priority on the political agenda worldwide. Climate change has reached a tipping point affecting the very basis of our living conditions and the health of all humans. Wars ravaging in different parts of the world lead to migration, hunger and social distress, with a major impact on our solidarity-based health and social care systems. More than ever, those systems need to be defended and our values promoted across the world. What is more, we need to secure our financial future and foster the cooperation between and among our members.
What will be our focus and main strategic priorities in the future?

The focus of AIM in the future will be the following:

Our focus is to protect the health of all people and to develop and defend sustainable universal access to high-quality, affordable healthcare along with social protection based on solidarity, not for profit and democracy.

This translates into two main strategic priorities that we would like to achieve:

• Strong advocacy at European and international level with primary focus on solidarity-based health and social care and social economy;

• Platform for cooperation and exchanging innovation, knowledge and best practices.

We aim to achieve these priorities while developing towards a member-driven association, a strong and professional organisation, appreciated by members and respected and recognised by external partners as well as a healthy financial situation.

What will be the next steps?

The strategy, prepared with the help of our members was presented during our General Assembly meeting in November 2022 following a process of discussion with our members during the whole year 2022. It has been adopted by our members. The AIM Team started to work on its implementation, including a further prioritisation of AIM’s activities. We agreed to focus on the following proactive lobby objectives at European level: pharmaceuticals; healthcare and digitalisation; solidarity and mutual model; and health in all policies.

At international level, we continue to promote solidarity based mutual models in Africa/Middle East and Latin America and to develop and defend sustainable universal access to high-quality, affordable health and social care in cooperation with international institutions such as ILO, WHO.

The new strategy also implies that we increase the involvement of members, rethink our current working group structure and find new members on the one hand. On the other hand, we would like to become more visible, strengthen our network, pro-actively communicate and permanently improve the skills of our team. To achieve a healthy financial situation for the future, we strive to find new (EU) resources, control our expenses and recruit new members (to name but a few).

All these activities are supposed to make AIM future proof, attractive for current and new members and become a sought-after interlocutor for European and international institutions.
Solidarity under the Spotlight

Solidarity a core value for mutual health and social insurance funds

Solidarity is one of our core values. It is a value that people remember mostly in times of crises, yet it is the cement of our societies. ‘Without solidarity there is no society’ as said by our President, Loek Caubo during our General Assembly in 2021. Solidarity is the basis of our health and social care systems as well as health and social mutuals. However, solidarity is under pressure: there is an erosion of social cohesion; market driven policy outweighs solidarity-based policy; people do not see the necessity to share the wealth between the different groups of society; we live in an ageing society and with increasingly scarce resources; technological developments lead to rocketing costs and on the insured and in times of crises, the word solidarity is used in an inflationary way.

On the discovery of a new definition for solidarity

Based on our analysis of the threats on solidarity, we decided to dig deeper into the concept, working with a small number of experts from our members. We also made it a major theme during our General Assembly meeting in November 2021. We invited the Commissioner for Social Affairs and Equality as well as a researcher on solidarity and discussed in small groups in order to find out what solidarity really means for our members and the future of the world that we would like to live, and how to re-define solidarity for the future of health and social policy at global level.

Where do we stand now?

We have developed a concept for the future of solidarity that we will continue to further elaborate. This concept note includes commitments for AIM and its members with regard to our lobby activities (solidarity in all policies), establishing coalitions with like-minded organisations, increasing the visibility of solidarity-based organisations such as ours, stimulating research on solidarity, and working on the reputation of mutuals and the positive aspects of this social economic model. We have deployed some of these commitments in our activities. Much more needs to be done and we have the intention to relaunch our works when implementing AIM’s new strategy.
1. European Affairs

1. The European Health Data Space

On 3 May 2022, the European Commission launched the proposal for its long-awaited European Health Data Space. The regulation is supposed to be one of the central building blocks for a strong European Health Union. The objective of the proposal is to empower people to control and to use their health data in their home country or in another Member State. The Commission plans to foster a single market for digital health services and products. It will also offer a trustworthy framework to use health data for research, innovation, policy-making and regulatory activities, while ensuring full compliance with the European data protection standards.

What did AIM do?

AIM published a position paper "Improvement of healthcare through exchange of health data – but how?" on 26 April 2021 long before the Commission proposal was published and had several meetings with high level officials from the European Commission. AIM answered several consultations from the European Commission, one to the roadmap of the European Commission for a European Health Data Space, and another consultation on "Digital health data and services – the European health data space". When the proposal was finally launched, AIM published a first reaction in form of a press release. AIM main requests were to put better health at the centre of the attention and that health insurance funds and health mutuals should be as key stakeholders, included in the discussions. AIM also emphasized that the permit process for the secondary use of health data should be organized effectively, to avoid situations like the process related to the Medical Devices, where the Medical Devices Regulation has led to an overload of certification requests. AIM was also invited to speak at events, where it presented its position on the exchange of health data, emphasizing that the collection of health data must serve public interest purposes and should not be only used for commercial use. AIM was also invited to join the European Health Union Network, organised by MEP István Ujhelyi, S&D, Hungary and the European Doctors (CPME), supported by AIM, the patients (EPF) and the hospitals (HOPE). An event on the European Health Data Space was organised on 11 January, where AIM could present its position and discuss it with 8 Members of European Parliament.

What was achieved?

Some of the AIM requests are reflected in the Commission proposal for a European Health Data Space. AIM members plead for a precise legal framework and a legal mandate for the re-use of data, a clear overarching governance framework for the use of health data, clear rules to guarantee the quality of data and incentives to share the data. Through the European Health Union Network, AIM managed to present its position to several Members of European Parliament to which it will send its amendments, as well to influence the European Parliament's position.
CEO seminar on the European Health Data Space

On 19 September 2022, AIM organised a CEO seminar on the European Health Data Space, in which AIM presented its first feedback and concerns on the Commission draft proposal to the European Commission. Members also had an exchange with a representative from Finland, a country that already has a health data space at national level. It was concluded that trust is very important. This can be earned by including all stakeholders in the process from the beginning on. It is important to look at the benefits and how a European Health Data Space can improve healthcare in Europe. The most important is to be patient as the establishment of a Health Data Space doesn’t come over night.

2. The Artificial Intelligence (AI) Act

In April 2021, the European Commission presented its proposal on for a regulation laying down harmonised rules on AI (AI Act) and the relevant Impact assessment. It is the first law on AI proposed by a major regulator anywhere. It establishes three risk categories for AI applications: Applications and systems that create an unacceptable risk and are banned; high-risk applications, that are subject to specific legal requirements; and lastly applications that are not explicitly banned or listed as high-risk and are largely left unregulated. During the legislative process at European level, the Council of the European Union classified AI systems to be used for risk assessment in relation to natural persons and pricing of insurance products that include life and health insurance as a high-risk AI.

What did AIM do?

AIM drafted a statement addressing the European Council and Parliament. AIM explained that its members understand that the classification mentioned above has the objective to avoid that AI in insurance activities targets groups of people with similar characteristics based on anonymized data (e.g., ex-cancer patients, people with chronic diseases, …) with the purpose of modifying contracts or contributions. Yet, in some countries, risk assessment and pricing are key for the not-for-profit insurance sector. Even so, they do not discriminate between individuals as they apply a model based on solidarity for contracting their insured. Mutual health insurers as well as health insurance funds rely on AI to improve their health and prevention services as well as their quality. The classifications of AI applications as high-risk would limit not-for-profit health insurers to develop such services, when health systems are in crying need of it. AIM therefore requested not-for-profit health insurers to be excluded from this provision.

What was achieved?

AIM raised interest of permanent representations in Brussels. AIM contacted several MEPs at the European Parliament, among them the two rapporteurs on the file. AIM managed to establish valuable contacts, which will be key in its future advocacy on the topic.
2. **Mutuals**

**Social Economy, higher than ever on the EU and international Agenda**

**The EU Social Economy Action Plan**

On 9 December 2021, the European Commission launched its long-awaited Social Economy Action Plan. Building on the Commission's 2011 Social Business Initiative, the Action Plan is the result of an extensive consultation process with citizens and stakeholders. AIM has constantly participated in all these consultations. The Action Plan proposes a definition for the social economy and addresses three main areas: Adapting policy and legal frameworks to the needs of the Social Economy, opening up opportunities for the Social Economy by improving access to funding and to enhance recognition of the Social Economy and thus deploying its potential.

**International Coalition of the Social and Solidarity Economy (ICSSE)**

AIM has joined the International Coalition of the Social and Solidarity Economy (ICSSE), together with the International Alliance of cooperatives (coop), the Global Social Economy Forum (GSEF), ICMIF and ESS-SEE Forum International. The Coalition was launched in September 2022 with the aim to promote Social Economy at international level. In May 2022, AIM and the other members of the coalition have signed the charter of the International Coalition of the Social and Solidarity Economy (ICSSE) in Strasbourg at the conference ‘Social Economy, the future of Europe’. The coalition has also prepared a position paper on Social Economy to present it to the UN and ILO. The initiative was fruitful: in June 2022, the International Labour Organisation (ILO) and the Organisation for Economic Co-operation and Development (OECD) approved two important international documents on social economy, the "Conclusions on decent work and the social and solidarity economy adopted at the 110th International Labour Conference (ILO)" and the "OECD Recommendation of the Council on the Social and Solidarity Economy and Social Innovation".

**Initiative reports of the Social Economy Action Plan and a Statute for European Cross-border Associations and NPOs**

On 6 July, the European Parliament had adopted a legislative initiative report (non-binding) on the European Social Economy Action Plan. AIM had sent amendments to the Spanish rapporteur MEP Jordi CAÑAS (Renew Europe), focussing on a better recognition of mutuals. Those were integrated and adopted by the European Parliament. Amongst others, the report on the Social Economy Action Plan included the call for an "enhanced cooperation", a request made by AIM already for a long time.

Another legislative initiative report was adopted in the European Parliament on Wednesday 16 February 2022. The report is about a Statute for European cross-border associations and nonprofit organisations (NPOs), which belong to the Social Economy. AIM has also actively lobbied the European Parliament in relation to that report.
Milestone events

During this mandate, AIM had the opportunity to organise and attend a series of events, which contributed to improving the visibility of mutuals and the social economy in general:

- **Strasbourg - AIM joint workshop at Social Economy Forum**

  During the Strasbourg Social Economy Forum, AIM, in collaboration with AMICE, ICMIF, FNMF and AAM, organised a workshop on the topic of mutuals’ role in overcoming the challenges related to the green and digital transitions.

- **Mont-Blanc Encounters**

  On 18 and 19 October 2021, AIM and some of its members took part to the Mont-Blanc Encounters, in Cartagena de Indias (Colombia). The meetings brought together leaders, entrepreneurs and actors of the social and solidarity economy (SSE) with representatives of institutions and governments from different continents. The objective was to analyse the most important and urgent social, environmental and social challenges facing populations in our changing world and to co-develop courses of action to intensify and broaden the contribution that the social economy can make to their resolution. The meetings were truly enriching and culminated in the publication of the Cartagena declaration.
3. Pharmaceuticals

1. Fair Pricing for Medicines

In December 2019, AIM launched, at the European Parliament, a proposal on a fair European maximum price calculation model for pharmaceuticals in the European Union. The proposal aims at counter-balancing the current state of play regarding medicinal products' pricing by the pharmaceutical industry that is dominated by so-called “value-driven” pricing methods and puts a burden on solidarity based not-for-profit health care system due to ever-increasing medicinal product prices.

What did AIM do? What was achieved?

In the aftermath of the launch of the fair pricing model, AIM developed its fair pricing calculator. AIM’s initiative was also presented at the April 2021 Fair Pricing Forum, organised by the World Health Organization. At the same time, a group of Dutch researchers issued an academic journal article based on AIM’s fair pricing model of a repurposed medicine that was priced higher in the country. The outcome of the article was used later that year by the Dutch Health Minister to officially challenge the price of the medicine in question.

The fair pricing calculator was officially launched during the June 2021 AIM General Assembly.

During the first half of 2021 AIM also drafted an article for the German health insurer AOK’s scientific institute (AOK WiDo), specifically on the calculator and the fair pricing model. The final article was published in October 2021, as part of a book which was presented at a press conference in Berlin.

The German health insurer Techniker Krankenkassen was inspired by AIM’s calculator and initiative and decided to use the calculator on a basket of medicines. The outcome of TK’s assessment was that the calculator would yield a €13 billion savings per year if it were used in the country. These results were presented at the seminar of the November AIM General Assembly in Berlin.

In 2022, AIM became a partner in the Horizon Europe project ASCERTAIN. ASCERTAIN will, among other things, develop new ways to calculate how to price new and expensive medicinal products, such as for instance gene and cell therapy.

AIM’s Working Group on Pharmaceuticals and Medical Devices also decided to replicate TK’s study in a number of countries.

The ASCERTAIN project is funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or the European Health and Digital Executive Agency (HaDEA). Neither the European Union nor the granting authority can be held responsible for them. Grant Agreement 101094938.
2. The review of the EU pharmaceutical and orphan and paediatric medicines legislation

In the second quarter of 2023, the European Commission released its legislative proposal to reform the so-called basic pharmaceutical legislation. It published, at the same time, the revised orphan and paediatric medicinal products legislation. According to the Commission, the review is an opportunity to correct the shortcomings of the pharmaceuticals markets, especially high prices, unequal access and lack of innovation in underserved therapeutic areas. It should also allow to introduce more flexibility in regulatory processes. With its orphan and paediatric legislation, the EC will address similar concerns, as many patients still do not have access to treatment, due to unaffordability or to the inexistence of treatments.

What did AIM do? What was achieved?

AIM has been advocating for years for a reform of the basic pharmaceutical legislation to improve patient access to quality and effective medicinal products as well as affordability. However, activities intensified in 2021, after the European Commission presented its Pharmaceutical Strategy for Europe. When the Commission published its strategy, AIM had already expressed its expectations: 1) Ensuring access to affordable medicines for all – including the principle of fair prices; 2) Ensure the supply of medicines for patients across Europe; 3) Getting on the market the therapies that health systems need; 4) Harnessing the challenge of real-world data for better pharmaceuticals. AIM has from this moment on been consistently engaging with the European Commission, at the various successive steps of the preparation of the plans to reform the EU pharmaceutical markets. AIM published a press release on the day the Pharmaceutical strategy was published, but also provided input into the various consultations on the pharmaceutical legislation reform: input into the European Commission's preliminary assessment of issues and possible solutions in April 2021; input into the European Commission's public consultation on the revision of the pharmaceutical legislation in December 2021. AIM was also an active participant in the various workshops and interviews organised in the frame of the preparation of the new legislation.

In terms of more proactive activities, AIM has published along with a number of other Brussels-based healthcare organisations a joint statement on the revision of the legislation. The joint statement was picked-up by the Brussels press.

In addition, AIM continued organising meetings to present the fair pricing model (see above), AIM's proposal to address the issue of affordability, one of the key concerns of the European Commission.
4. Prevention

1. The EU’s Beating Cancer Plan

On 4 February 2020, the European Commission launched the first phase of its long-awaited Cancer Plan, with the publication of a roadmap. A year later, on 3 February, the Plan was published. It set out a new EU approach to cancer prevention, treatment and care. It is intended to tackle the entire disease pathway, from prevention to quality of life of cancer patients and survivors, focusing on actions where the EU can add the most value. To turn that ambitious plan into a reality, the European Commission also established a stakeholder group, which AIM joined. Several thematic sub-groups on different issues were created.

The Plan also included a proposal to update the Council Recommendations on Cancer Screening. The new version of the recommendations was adopted on 9 December.

What did AIM do?

AIM provided input from the very beginning of the process, mostly calling for a health in all policies approach. AIM reacted to the publication of the roadmap, and, together with other stakeholders, published a joint statement calling for prevention to be a key pillar of the plan.

Once the plan was published, AIM met the European Commission and answered several consultations on many of the files included in the plan concerning risk factors (alcohol, nutrition, air quality, tobacco, chemicals, etc.). Achieving healthy nutrition through stricter food legislation is one of the objectives of the Plan. AIM also actively advocated, with a group of healthcare NGOs, for an EU legislative initiative on the marketing of unhealthy food to children. A blueprint Directive was proposed, a parliamentary question was submitted, and an event organised at the European Parliament, at which MEPs from the different political parties showed support for the initiative.

In parallel, AIM lobbied the European Parliament BECA Committee (the Special Committee on Beating Cancer of the European Parliament) on its report on the EU’s Beating Cancer Plan. The whole AIM team proposed amendments and key contacts were established with several MEPs, including the rapporteur.

In 2022, AIM was very busy advocating for the Cancer Screening Recommendations to be based on science, worried that Member States will agree to include prostate and lung cancer screening in the recommendations. AIM decided, long before the European Commission (EC) proposal came out, to set a Task Force of experts which would contribute to the development of an AIM position based on the latest science and health concerns. The conclusion of those experts was very clear, science is not robust enough for the implementation of mass screening programmes for lung cancer and when it comes to prostate cancer, screening does not diminish specific mortality and can do more harm than good. AIM therefore actively advocated for member states to ensure that the final version of the Cancer Screening Recommendations reflects robust Science.
**What was achieved?**

Together with other stakeholders, AIM had advocated for a health in all policies approach and for prevention to be a central aspect in the plan. The European Commission did deliver with a strong prevention pillar, that covers, as recommended by AIM, all risk factors.

**BECA report**

Some AIM amendments were submitted as such by MEPs. Others were integrated in joint amendments by the shadow rapporteurs of political groups, notably regarding digital literacy, e-cigarettes taxation, the marketing of unhealthy food, and hazard classes in the CLP (Classification, Labelling and Packaging Regulations). Those were also reflected in the final version of the report, adopted by the EP.

**Cancer Screening Recommendations**

Regarding the Cancer Screening Recommendations, the initial proposal of the European Commission, published on 20 September, included new cancer types testing in the recommendation: prostate, lung and gastric cancer, which was something AIM was not in favour, at least not in the wording used by the EC. A heated debate took place among Member States but also among civil society organisations. While most health organisations did not share AIM’s cautious approach, AIM managed to raise awareness, doubts and concerns on prostate and lung cancer screening among some health attachés (representatives of Member States in the debate) and in the press. On 9 December, Member States adopted a text which take into account AIM’s concerns and follows the needed cautious approach to lung and prostate cancer screening (see our Press Release).

2. **AIM Factsheets**

The Prevention working group continued to develop its series of factsheets on areas for action related to health promotion and disease prevention in order to provide, on the one hand, facts and figures related to the issue, and on the other, a series of recommendations to decision-makers. The documents consist of a factsheet and a more detailed document attached to it and describing those recommendations in more depth. A section containing best practices from AIM members was also included. Those best practices were then be used to make “twitter cards” published on social media around the (carefully chosen) date of publication. The factsheets published during this mandate cover the following issues: Sexual health, Cancer, Sleep, Vaccination, Tobacco, Air Quality and Medication Use.

**What is their purpose?**

The Factsheets allowed members to exchange views on timely issues of interest and to proactively develop a common position. The document developed is then used to provide written or oral input to European Institutions when initiatives in the relevant fields are being discussed and proposed.

In addition, the process of development of the paper allows members to share experiences and best practices on the different topics, highlighting common challenges and potential solution. It also enables to establish contacts with other key actors upstream, and to start a collaboration.

Members also used the fact sheet in their national newsletters on specific areas.

The factsheets also allow AIM to achieve a greater visibility in the healthcare sector, amongst EU and International Institutions and stakeholders.

All Factsheets can be found here.
5. Long-term Care

The EU Care Strategy

On 7 September 2022, the European Commission presented its Care Strategy, which aims to “ensure quality, affordable and accessible care services across the European Union and improve the situation for both care receivers and the people caring for them, professionally or informally. The Strategy was accompanied by two Recommendations for Member States on the revision of the Barcelona targets on early childhood education and care, and on access to affordable high-quality long-term care”. Under that very ambitious overall objective, the document included a series of recommendations to Member States on ensuring the access, quality and sustainability of LTC services. It notably recommended the adoption of national action plans to ensure access to timely, comprehensive, and affordable care, to increase the offer and mix of professional LTC services, to ensure high-quality criteria and standards for LTC providers, to support informal carers and to mobilise adequate and sustainable funding. The Strategy stemmed out of the Green Paper on Ageing, published by the EC beginning 2021.

What did AIM do?

AIM was proactively lobbying the European Commission on its Green Paper on Ageing since the beginning of 2020. A series of recommendations were published and meetings were organised with the cabinet of Vice-President Dubravka Šuica and the responsible officials at DG Employment. AIM also reacted to the publication of the European Commission Roadmap on the Green Paper and answered the consultation. Once the Green Paper was published, AIM welcomed the document and started lobbying for the European Care Strategy, initiative that the European Commission proposed as a follow-up to the consultation on the Green Paper on Ageing and on the Pillar of Social Rights. AIM released a position paper underlying its primary concerns and proposals for the future Strategy. The paper included a comprehensive annex which highlights the added value of mutuals for long-term care. In parallel, AIM developed recommendations specifically on long-term care (LTC), as well as a reflexion paper on outcome measurement and quality assurance in the sector. Those were presented to the European Commission and regular contacts were established with the Unit for Social Protection, at DG EMPL. AIM also took part to several stakeholder dialogues organised by the European Commission with the objective of gathering the feedback of stakeholders.

In addition, contacts were maintained with the cabinet of Vice-President Šuica, also on the issue of medical deserts and the topic of access to care and specifically LTC in those areas. Following those contacts, AIM became part of the Rural Pact, a framework for cooperation among authorities and stakeholders at the European, national, regional and local level and spoke at the launch conference of the pact, presenting its members activities as best practices.

AIM also lobbied the European Parliament on their report on the Care Strategy. A joint event was organised in collaboration with AEIP and MEP Sirpa Pietikäinen, rapporteur on the file.
What was achieved?

AIM managed to have its key concerns reflected in the Strategy. The document adopted puts solidarity, rights and dignity at its core. Most importantly, it recognised that long-term care services are a public good, an opinion that AIM shares and defended. The role of social economy actors and mutuals in particular was brought to the fore and recognised in the document with the text clearly stating that those actors “bring an added value to the provision of high-quality care services due to their person-centred approach and the reinvestment of profits into their mission and in local communities”.

The proposal of Council Recommendations on LTC, published together with the Strategy, followed the list of principles which were defended by AIM in its recommendations (principles from the WeDo project) and included all challenges highlighted in AIM’s position.
6. **Fight against Fraud**

**Joint event between AIM and EHFCN**

On 18 January 2023, AIM and its partner the European Healthcare Fraud and Corruption Network (EHFCN) organised a joint event on "Harnessing Artificial Intelligence (AI) to fight fraud in healthcare - European Vision & National Cases". The event was organised online and gather around 50 participants.

Every year, a substantial part of the healthcare resources is lost to fraud, as well as corruption and waste, which cause significant damage to healthcare systems and patients.

In this context, the deployment of AI in healthcare systems in Europe, with the corresponding EU legislation, is a chance to make the fight against fraud much more effective. The interest of anti-fraud organisations for AI is thus rightly raising.

The joint AIM-EHFCN event gathered various perspectives. Some interesting and promising initiatives were presented: the use of machine-learning to improve the detection of potentially fraudulent behaviour, a pilot project on how to use AI to ensure compliance and reduce fraud encountered by the administration. Experts also shared their concerns about the upcoming EU AI legislation (AI Act), which imposes inappropriate obligations on not-for-profit healthcare insurers, to the extent that they are prevented from conducting their activities.

During the last part of the meeting, the European Commission spoke about the European Health Data Space Regulation, the Artificial Intelligence Act, as well as the Product Liability Directive. The state of play on the AI Act in the European Parliament was also presented. Participants had the opportunity to voice their concerns regarding the impact of the future AI legislation on AIM and EHFCN members’ activities.
AIM organised a study trip to Stockholm (Sweden) from 30 March to 1 April 2022 together with the French embassy in Stockholm and its French member Mutualité Française (FNMF). The main focus of this study trip was prevention. During the two days, participants met with the Association of Swedish Municipalities and Regions, the Stockholm Gerontological Research Centre and the Public Health Agency. AIM members also visited a nursing home for the elderly managed by the ATTENDO company. The highlight of the first day was a visit to the French embassy, where AIM members were welcomed by the French ambassador. On the second day, AIM visited a swimming pool in one of the suburbs of Stockholm, which offered physical activities for seniors. AIM members also met with representatives from the National Board of Health and Welfare (Socialstyrelsen) and Swedish mutuals.

What were the takeaways from this study trip?

Sweden is a country with a predominantly government-funded, decentralised health system where all residents have access to public health services, although private healthcare services also exist. The health care system in Sweden is financed primarily through taxes levied by county councils and municipalities. A total of 21 councils are in charge with primary and hospital care within the country. The Swedish health system is effective but there are some problems within the system, e.g., access to primary care and care coordination between counties and municipalities. AIM members were impressed by the prevention services, offered by Swedish municipalities to their residents. Due to the decentralised system, municipalities are closer to their residents, being able to offer tailored services to their elderly.

AIM members were surprised by the Swedish use of health data to improve prevention services, despite the limitations they experience under the European General Data Protection Regulation (GDPR), which was one key takeaway of the study visit.

AIM Study Trip to Denmark

In February 2023, AIM members visited Denmark to learn more about the Danish healthcare system, digitalisation, health data, and prevention. They were introduced to the Danish health data infrastructure by MedCom, the national health portal by sundhed.dk, and data and digitalisation in prevention of chronic diseases by Syddansk Sundhedsinnovation.

Participants also learned about the Danish digital health strategy and visited the WHO Regional Office for Europe in UN City Copenhagen. The programme ended with an introduction to healthcare education and information in Denmark by the Danish Committee for Health Education.

7. Study visits

AIM Study Trip to Sweden

AIM Study Trip to Denmark
**AIM Morroccan members’ study trip to Berlin and Brussels**

AIM organised a study trip to Berlin and Brussels for the Presidents of the Moroccan member mutuals in March 2023 thanks to our Belgian and German members. The Moroccan members wanted to organise this visit in the context of the entry into force of the reform of the Compulsory Health Insurance in the Kingdom of Morocco, which brings with it its share of questions on the possibilities of safeguard the role of mutuals in a changing legislative context. During this trip, the Moroccan mutuals were welcomed by the German and Belgian mutuals, members of AIM. The first two days in Berlin provided an opportunity to explore the German health system. After a series of presentations by vdek and ikk, the delegation met with the German Ministry of Health who guided them through the efforts to digitise the health system. On the second day, the members exchanged views with the Charité Institute in Berlin on regenerative therapies and with the health insurance company ikk classic and BIG Gesundheit on digitalisation at the level of health insurance companies more specifically.

In Brussels, the delegation was welcomed at the Espace Malibran, a mutual health centre managed by the Mutualité Chrétienne. Moroccan members learned about the Belgian health system and the role of mutuals. The afternoon was dedicated to the presentation of social and solidarity economy initiatives which develop services close to vulnerable populations. The morning of the second day took place at the National Intermutualist Council and was dedicated to digitalization. The Belgian National Health Insurance Fund INAMI welcomed the delegation for the afternoon presentation that closed the mission.

*What came out of the study trip?*

The Moroccan members were very interested in digitalisation and the question of coordination structures of German and Belgian mutuals. In view of the legislative changes that prevent mutuals from directly owning health centres, the Belgian part of the visit was full of insights about how mutuals in Morocco could create structures that could provide services that they are no longer able to offer to their members.

---

**AIM visits its Latin-American Members**

On the occasion of AIM participation to the Mont Blanc Meetings, representatives of the AIM secretariat and members of the region had the opportunity to learn about the activities of the Social Security Companies (EPS) in Colombia: Mutual Ser and Coosalud presented their important work with the communities. AIM continued its journey by travelling to Argentina and more precisely to the province of Cordoba (San Francisco, Morteros, Devoto) to learn about the work of mutuals in the region in favour of local and regional development, allowing communities to flourish, based on an inclusive and sustainable economic model. Together with an Argentinian delegation the staff crossed the Rio Plata and were welcomed in Montevideo by the directors of the Unión de la Mutualidad de Uruguay (UMU) and Darwin Cerizola. They accompanied them to visit the “Asociación Española”. The AIM also visited the headquarters of “CUTCSA Seguros” (also a member of UMU), and the ‘Hogar Español’, a home for the older people.

A more detailed description of the visit can be found in the [fourth issue](#) of the AIM Newsletter for the Region.
8. **International**

1. **The Dakar Conference**

AIM organised on 15 and 16 March 2022 its latest mutualistic international conference, titled "Dakar Conference - Achieving universal health coverage in Africa through mutuals: articulating new partnerships between social movements, economic actors and public authorities". The event was held under the High Patronage of the Ministry of Community Development and Social and Territorial Equity of Senegal and the Universal Healthcare Coverage Agency of Senegal.

**What did AIM do?**

AIM and its steering committee - COPIL (the Fédération Nationale de la Mutualité Française, Solidaris, the Mutualités Chrétiennes, the Mutualités Libres gathered in the MASMUT programme, as well as the PASS programme based in Abidjan) - organised an international mutualist conference.

The organisation of the Dakar conference stemmed from the commitments made by the mutualist movement within the Lomé Platform, but also from the persistent challenges to achieving universal health coverage in Africa. The conference was also followed by the organisation of two preliminary workshops, respectively "What role for mutuals in national strategies for universal health coverage?" on 7 December 2021 and on "What is the position of international organisations on the role of mutuality in the context of the Universal Healthcare Coverage?" on 25 January 2022.

The event was organised in a hybrid format. The sponsorship of the Ministry of Community Development and Social and Territorial Equity of Senegal allowed to benefit from their premises for the face-to-face part of the event, which brought together some forty participants from the Senegalese, African and international mutualist movement. Ministerial representatives and the Senegalese Agency for Universal Health Coverage were also present.

The speakers at the event included European and African political and technical decision-makers. The Ivorian Minister in charge of Social Protection, the Secretary General of Solidaris, high-level representatives of the International Labour Organisation, and regulatory authorities of African mutuals also took part to the event, as well as the Secretary General of the Mutualité Française and the President of Emmaus International, who made a vibrant plea for the reduction of inequalities.

The conference enjoyed a very good coverage in terms of written and online media, as well as on the radio. The Senegalese and international mutualist movement was really under the spotlight during these two days.
The Dakar Declaration

The event led to the adoption of a Declaration: “Achieving universal health coverage for all - For a common vision between mutuals, social movements, public authorities and economic actors”. The Declaration starts from the premise that formal support from the States to mutuals is not enough and that it must be transformed into a deep partnership between the State and mutuals, but also into a common commitment between mutuals, social movements, public authorities and economic actors so that everyone has access to universal health coverage.

The Declaration therefore calls for the sustainable financing of universal health coverage based on the principles of solidarity, equity and non-profitability; an inclusive and participatory governance to achieve social justice; to refocus on the demands of the Lomé Platform; achieving a common vision for access to UHC for all taking into account the commitments of the mutualist movement.

The Declaration is signed by mutualist and mutualist-related organisations in Africa and Europe.

2. Mutualist Pledge for the Greater Involvement of Youth in the Mutualist Movement

In December 2021, AIM Latin-American members adopted the "Mutualist Pledge for the Greater Involvement of Youth in the Movement". The document testified of the strong will and commitment on the part of all mutual organisations to include young people and make them feel that they are the protagonists of the movement. It put forward a series of commitments, which were based on some of the recommendations made by speakers at the seminar on mutualism and youth, organised on 15 November:

1. Work hand in hand with the communities and creating a favourable environment for associativism through education.
2. Break stereotypes about youth and promoting intergenerational solidarity.
3. Use the current youth activism in all parts of the region to engage them to build back better while promoting mutuals
4. Respond to youth’s constant need for change and challenge.
5. Support the empowerment of young people.
6. Make the most of innovation and communication technologies.

How was the Pledge implemented?

A matrix was created, in which all AIM members made proposals for implementation activities for some of the concrete commitments included in the Pledge. Each and every member made a series of concrete proposals. Some examples are presented below.

Our first main commitment was to work hand in hand with the communities and create an enabling environment for partnership through education. In Uruguay, UMU organised training meetings for young people in the mutualist field in partnership with social and solidarity economy enterprises. They also established links with INACCOP (National Institute of Cooperativism) to work in coordination with the Education and Solidarity Network (of which AIM is a member) on a project to promote education and support for mutualism. In the CA workshops were held with young people in the localities where the mutuals adhere to the proposal, with the objectives of carrying out a diagnosis of the situation regarding the needs of young people and to see ways of action and shared solutions. There is also a plan to set a path of school mutuality with the University UICE.

Another key element highlighted
the Pledge is the need to respond to young people's constant need for change and challenge. In Colombia, Gestarsalud identified the needs for change expressed by young people. They found out what issues of interest to them could be addressed to strengthen their individual and collective leadership and influence decisions, with an emphasis on health issues. They carry out sports and cultural activities, as well as health prevention activities. They also set up training activities for members and staff with an emphasis on mutual principles and leadership, in order to create leadership opportunities for young people in the mutual entities and to give them, if they wish, more responsibilities within the mutual entities.

Another commitment of the Pledge is to break down stereotypes about youth and promote intergenerational solidarity and, specifically, to develop awareness campaigns against age discrimination, in collaboration with other actors such as trade unions and educational institutions. In Argentina, FeNAMMF held training talks and exchange forums, which discussed the labour problems faced by young people today. In these training and discussion sessions, they invited experienced leaders to participate and share their knowledge. They also developed strategies to engage young people and listen to them.

At the end of 2022, AIM organised a seminar on the topic: “Strengthening the solidary Base of social Protection through a better and stronger Involvement of Youth”, which allowed to share the experience and lessons learned in the implementation of the Pledge in the region.

3. Mutualism and gender

Gender was another of the top priorities of the AIM Latin-American region. AIM members of the region had the opportunity to exchange in several regional meetings and share best practices on the topic of mutual services with a gender perspective. They notably discussed how a greater representation and involvement of women in the governance of member organisations can be achieved. A key objective was also to establish international links between networks of women active in the social economy. A first step in that endeavour materialised in the organisation of a global seminar, in collaboration with the Programme d’Appui aux Stratégies Sociales (PASS) and the Latin-American Network of Women of the Social and Solidary Economy.

Building bridges between existing networks, an international seminar

On Thursday 21 October, the Association Internationale de la Mutualité (AIM), the Programme d’Appui aux Stratégies Sociales (PASS), and the Latin American Network of Women in the Social and Solidarity Economy, organised their international seminar entitled “Women as protagonists of the mutualist movement”. The debates highlighted the activities of the various networks for greater mobilisation of women, their training, and for gender equality. The seminar aimed to build bridges between women's mutualist networks around the world, to discuss the main subjects of interest but also the added value of these networks for their members.
The speakers notably highlighted the avenues to be explored to connect all the networks at international level: working towards a better integration of women in the movement; guaranteeing the integration of women in the movement; ensuring their mobilisation and training; facilitating sharing in and extend the networks so as to go beyond borders in the sharing of experiences.

The event was a great success, with more than 200 people registered and more than 80 people connected live on the day of the seminar. Participants came from 3 continents and more than 15 countries. In Europe: from Portugal, France, Belgium, Germany; in Latin America from Uruguay, Colombia, Argentina and Mexico; and in Africa from Morocco, Mali, Ivory Coast, Guinea, Burkina Faso, Togo, Benin, Cameroon and Senegal.

*International Day of the Mutualist Woman*

On 10 March 2022, the PASS, with the support of the Vyv group and FNMF, organised the third edition of the International Day of Mutualist Women (JIFM for its French abbreviation). The theme of the event was: "Health crisis and gender inequalities". It brought together over 150 women, including 20 Ivorian participants, who actually met face-to-face at the headquarters of the Programme d’Appui aux Stratégies Sociales (PASS) on behalf of all the women in the network. The 130 other participants connected remotely from various countries in Europe, Latin America and Africa.

The JIFM 2022 was an intense event of reunion and exchange around a dynamic that has allowed women mutualist leaders from Africa and Europe to meet around the same platform. It allowed to reaffirm the links between the different networks as well as their commitment to collaborate.

In 2023, AIM had the opportunity to participate in the 4th edition of the JIFM, on the topic “Gender equality and UHC for more resilient and equitable health system”.

Since the beginning of her mandate, Vice-President Marion von Wartenberg has worked towards achieving a considerable boost in AIM communications. The objective was to make AIM more visible to the outside, by publishing more and better, but also to ensure a proper internal communication, with and among members themselves. To that end, AIM focussed on the activities and tools described below.

**Webpage**

The AIM webpage was revamped to make it more user friendly. Clear menus and categories were added, as well as a search option, to enable visitors to navigate the site more easily. Pages were also added to give more visibility to the AIM calculator for fair prices of medicines.

**Twitter**

The AIM twitter account is a key lobby tool for AIM. It is also a way to increase the organisation's visibility. It is a tool to help spread AIM's messages. Twitter is at the moment the most successful AIM communication tool. The number of followers has been increasing since the creation of the account at the average pace of 10 followers a month and now amounts to 2,029.

**Newsletters**

The AIM newsletter contains all news published on the website a given month. Members, partners and all people subscribed receive it automatically in their mailbox. Statistics show that the number of subscribers has remained stable since it was launched. Some new subscribers joined the list but no one unsubscribed. 490 people currently receive the AIM Newsletter.

AIM also publishes a special newsletter for the Latin-American region, twice a year. It is shared by email and published online. The document is nurtured by articles from CAM, Gestarsalud and UMU. They cover the latest news regarding mutuals and social economy in Argentina, Colombia and Uruguay. Members can also publish it on its website and on social media.

**Special briefings**

Special briefings were published twice a year, after each AIM statutory meeting. Those were shared by email and made public online on AIM website and on social media. The Briefing is also integrated in the Newsletter.

**LinkedIn**

LinkedIn is a tool AIM recently started using. All Staff members are active on LinkedIn and the organisation has its own account too. The platform is used to share news on publications and key events. The number of subscribers amounts to 323.
**CEO Briefs**

The CEO Brief is another publication launched during this mandate. It is published three times a year. It is a newsletter specifically targeted at the CEOs of AIM members. The document contains information on what AIM does, the Brussels agenda and its impact on AIM member organisations. Its objective is to raise awareness on EU policies and their impact at national level and to inform members of the work carried out by AIM regarding those policies.

**AIM brochure**

A very plain AIM Brochure was made on the occasion of FNMF Forum in Marseille, where AIM held a stand.

**A new Strategy**

In view of supporting the achievement of the goals of the new AIM overarching strategy, AIM has developed a communication strategy, the objectives of which are to: improve the "reputation" of mutuals and promoting solidarity; improve AIM’s visibility and achieve recognition as THE organisation of healthcare payers at European and international levels; translate Brussels and International policy-making to members; engage members in communications; and set a new digital platform for exchange among members.

AIM has already started to work on the implementation of that strategy, more precisely on the establishment of a new digital platform of exchange among members. The Private Area of the website enables members to find documents related to upcoming or past meetings. It is however not active at the moment and does not fulfil the needs of AIM members and the staff. AIM aims at setting a real digital platform on which members could exchange online and work together on different issues.
“AIM represents your interests in Brussels and internationally. But we cannot do that alone! We can only fulfil this role effectively and credibly in cooperation with you, our members. Your input and expertise are needed to build a strong position in Brussels and elsewhere in the world. Therefore, in our new strategy we talk about a member-driven association. To take a strong position as AIM, we need the input of the members and especially the expertise of the specialists among our members. Together with your representatives in the working groups, the AIM staff is looking for ways to efficiently involve more specialists from the members in our work. I hope we can count on all your support in this endeavour!”

Loek Caubo
AIM President

“Recent years have shown us the importance of international cooperation. The only way to tackle the challenges we face, be it the growing threat of pandemics, climate change, increasing health inequalities or antimicrobial resistance (to name but a few), is to do so together. I am proud of the way AIM is contributing to the achievement of universal health coverage in Africa, to the strengthening of the role of mutuals and their recognition in all regions, and to making access to health care a reality for all across all continents. It was a pleasure to contribute to this endeavour.”

Matthias Savignac
AIM Vice-President for International Cooperation

“The past years were strongly marked by the Covid pandemic. This has shown us how important cross-border cooperation in health and social care is in Europe. The AIM team with their working groups has been actively involved in shaping the future of our health and social care system at all EU levels. For this I thank our competent AIM team and our members.”

Verena Nold
AIM Vice-President for the European Region

“During this triennium, the finances of our association but also of our members have been severely tested. In order to continue to offer quality services that meet the needs of our members, we have taken numerous measures to reduce our operating expenses, we have reviewed all contracts with external service providers, we have optimised the management of our accounts but unfortunately, we have had to let go of one of our assistants. At the same time, our new strategic plan leads us to invest more in the development of our organisation, new members, new partnerships. We can now look forward to a promising future for our organisation.”

Alain Coheur
AIM Treasurer
“The term of this presidium has highlighted the growing importance of international cooperation. Joint international action has been one of the key factors for the successful handling of the COVID-pandemic. With members from four continents AIM is able to contribute greatly to this.

Since 2020 AIM has strengthened the bonds with its members. AIM is trying to win organizations from countries that have no AIM representation as jet. The German AIM members strongly support this process.

We have improved our communication tools. The website has been updated. We are using new channels of social media communication. Part of the new AIM strategy is a stronger focus on including our members’ contributions in AIMs activities. To support this we want to create a new technical platform. Preparations have started already.

AIM is an important voice for its German members in the European Health Policy sphere. It represents the interests of the social health insurance in important fields of debate like the proposal of a European Health Data Space and the upcoming reform of EU Pharma legislation.

The current financial and economic challenges also have an effect on our health insurances. It is all the more important for AIM to concentrate its priorities and to focus the activities well. This way we will continue to bring our efforts to the greatest effect.”

Marion von Wartenberg
AIM Vice-President in charge of Communication

“This last mandate of AIM’s Presidium will always be remembered for bad and good reasons.

It started in the very heart of Covid Pandemic... no physical meetings, only working from the distance, tremendous new challenges for mutuals, together with the need to find new solutions to face some structural challenges...

But the result of a strong commitment of AIM members and staff is there: new statutes, new internal rules, new strategy, new financial purposes, some new technical challenges overcome, representing the necessary tools to face future in good faith and trust. Whatever may come, one thing won’t be forgotten: AIM is a mutual association representing and pleading for mutual principles and values.

One of those principles, for me the main one, is solidarity. What AIM achieved was possible only because that principle was present, everyday, in our work helping each other and pleading for AIM’s and its members interests...in solidarity!”

Pedro Bleck da Silva
Special Advisor to the Presidium on Mutuals and Social Economy
“It has been a real pleasure to be part of the Presidium, despite the difficult times we have experienced and continue to experience. Pandemics, climate change, the changing geopolitical landscape... the challenges we face are a global threat that particularly affect the most vulnerable populations. As mutuals, it is our responsibility to fight for the reduction of growing inequalities in our societies and for the well-being of our communities. This is why, today more than ever, our work together in AIM is essential. In the Latin American region, we have been able to make progress on two crucial issues for the future of the mutualist movement: youth and gender. It has been an honour to be able to contribute to our common goals and I look forward with determination to the road ahead.”

Alejandro Russo
AIM Vice-President for the Latin-American Region

“I am very proud to have been part of the AIM Presidium during the last mandate. Everyone remembers that we took office during a period of great uncertainty. We had to innovate within AIM in order to keep our bodies functioning despite the limitations imposed by the pandemic. Less than three years later, however, I am pleased with the work we have done. We have a new strategy for our association, a new African Mutualist Declaration and health is finally enjoying the importance it should at the global level. What a long way we have come!”

Fouad Bajilali
AIM Vice-President for the Africa and Middle-East Region
Staff News

In order to reinforce the secretariat and the office management, we had hired two people:

Phuong (Patty) Truong

Phuong (Patty) Truong, Office Manager and a chartered accountant by training, started to work for AIM on September 17th 2019 to replace Cristina Vallina during her absence. Patty stayed first full time and then reduced her working time to three and then to two days per week. She stayed with us until May 31st, 2021. Patty supported the team in digitalising the accounting and streamlining the internal processes. She also was responsible for organising the logistics of AIM’s events including the switch to virtual meetings during the pandemic.

AIM thanks Patty for her professionalism, team spirit as well as the innovative ideas she brought to the secretariat and office management.

Stefania Magrini

Stefania Magrini, Secretary/Assistant, started to work for AIM on July 5th, 2021 via an interim agency to support the Office Management as well as the Director and the team in all administrative, financial and logistical matters. We hired her for a yearly contract on January 1st until December 31st 2022 and then unfortunately had to say goodbye to her due to financial constraints.

AIM thanks Stefania for her dedication, openness and support of the team during her time at AIM.
As expected, the results of AIM from 2020 to 2023 started to decline as of 2021.

In 2020, we had a positive result of € 65,195.16. This was because AIM was still in a pandemic modus and we had hardly any physical meetings. As a consequence, half of the interpretation fees, as well as a third of mission expenses were saved. Instead of an expected loss of € 86,420.00, we ended 2020 with a positive result of € 65,195.16.

For the first time in many years, we had a negative result in 2021. It was -€ 34,961. The budgeted loss was even higher with -€ 59,300. The loss was due to physical meetings taking up again and as a consequence the expenses in meeting costs, interpretations costs as well as higher personnel costs as we had hired an additional secretary to support the office management.

In 2022, the negative trend for AIM continued. The loss was € -58,670. The loss was € 100,000 less then expected. 2022 was an almost fully operational year. Physical meetings as well as business trips took place. Also, we had to digest an increase of the salaries due to inflation and we had to lament the loss of members and the difficulty of some members to pay the membership fees.

Internal Audit Committee

From 2020 to 2023, the AIM Internal Audit Committee was chaired by Jürgen Hohnl, Director of IKK. The Committee was composed by the following people:

- Loek Caubo, President
- Alain Coheur, Treasurer
- Arielle Garcia, FNMF
- Christian Horemans, Mutualité Libre
- Sibylle Reichert, AIM

The Internal Audit Committee met as usual twice per year. The objective of the meetings was to get oversight over the financial situation of AIM taking into account the past result and working on the respective future budget for the year to come. The Internal Audit Committee has proposed to raise the membership fee by 2% in 2023 and by another 2% in 2024. In addition, the Internal Audit Committee was informed by the Secretariat about the works on the statutes and AIM’s new strategy to come to a sustainable financial future of AIM.
### Balance Sheet

<table>
<thead>
<tr>
<th>Assets</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed assets</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible</td>
<td>8 810</td>
<td>9 650</td>
<td>8 668</td>
</tr>
<tr>
<td>Intangible</td>
<td>2 251</td>
<td>8 184</td>
<td>4 333</td>
</tr>
<tr>
<td>Financial</td>
<td>30 163</td>
<td>30 188</td>
<td>26 903</td>
</tr>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Short term account receivable</td>
<td>13 579</td>
<td>15 486</td>
<td>16 831</td>
</tr>
<tr>
<td>Disposable assets</td>
<td>1 392 838</td>
<td>1 344 677</td>
<td>1 288 186</td>
</tr>
<tr>
<td>Accruals and Deferrals</td>
<td>23 076</td>
<td>32 879</td>
<td>49 954</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1 470 717</td>
<td>1 441 065</td>
<td>1 394 875</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Equity</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Associative funds</td>
<td>239 707</td>
<td>239 707</td>
<td>239 707</td>
</tr>
<tr>
<td>Allocated funds</td>
<td>46 941</td>
<td>46 941</td>
<td>46 941</td>
</tr>
<tr>
<td>Results brought forward</td>
<td>1 045 752</td>
<td>1 010 791</td>
<td>952 122</td>
</tr>
<tr>
<td><strong>Debts</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable</td>
<td>15 865</td>
<td>40 359</td>
<td>38 740</td>
</tr>
<tr>
<td>Tax, salary and social security debts</td>
<td>100 820</td>
<td>84 639</td>
<td>106 697</td>
</tr>
<tr>
<td>Accruals and Deferrals</td>
<td>21 632</td>
<td>18 628</td>
<td>10 669</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1 470 717</td>
<td>1 441 065</td>
<td>1 394 875</td>
</tr>
</tbody>
</table>

### Profit & Loss

<table>
<thead>
<tr>
<th>EXPENSES</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>RENT, SERVICES, MISSIONS, GOODS,MEETING COSTS, ETC.</td>
<td>210 508</td>
<td>302 829</td>
<td>311 773</td>
</tr>
<tr>
<td>SALARIES AND SOCIAL SECURITY</td>
<td>533 088</td>
<td>517 418</td>
<td>574 064</td>
</tr>
<tr>
<td>DEPRECIATION</td>
<td>4 974</td>
<td>26 653</td>
<td>- 10 715</td>
</tr>
<tr>
<td>OPERATING &amp; FINANCIAL COSTS</td>
<td>8 595</td>
<td>9 313</td>
<td>25 285</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>757 165</td>
<td>858 213</td>
<td>900 406</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INCOME</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTRIBUTIONS</td>
<td>819 076</td>
<td>818 590</td>
<td>836 292</td>
</tr>
<tr>
<td>OTHER OPERATING INCOME</td>
<td>2 479</td>
<td>2 661</td>
<td>5 445</td>
</tr>
<tr>
<td><strong>TOTAL INCOME</strong></td>
<td>822 360</td>
<td>821 252</td>
<td>841 737</td>
</tr>
</tbody>
</table>

| RESULT                         | 65 195 | -34 961 | -58 670 |
Photo Album