

THE FIRST ANNUAL GATHERING OF
Funders Concerned About AIDS 
Investing in Change: Using Dollars and Sense to End the Pandemic

September 16-18, 2009
Washington Plaza Hotel
Washington DC

CONFERENCE REPORT

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ABOUT FCAA

Mission Statement

Funders Concerned About AIDS (FCAA) mobilizes leadership, ideas and resources of U.S.-based funders to eradicate the HIV/AIDS pandemic – domestically and internationally – and to address its social and economic consequences.



History and Vision

Founded in 1987, Funders Concerned About AIDS (FCAA) is the only U.S.-based organization comprised of and for private philanthropic institutions concerned about, engaged in or potentially active in the fight against HIV/AIDS. An affinity group recognized by the Council of Foundations, FCAA's vision to create a philanthropic sector that works collaboratively, informedly and urgently to ensure that the HIV/AIDS epidemic is halted, and that the communities already affected by it receive the resources they need.

FCAA regularly provides ideas, products and services to over 1,500 philanthropic institutions. These foundations and corporations in turn support thousands of diverse organizations in the United States and across the globe that are engaged in critical HIV/AIDS research, prevention, care, social service, civil rights/social justice, and public policy/advocacy activities. FCAA's constituency also includes hundreds of key decision-makers and opinion shapers in government and multi-lateral agencies, HIV/AIDS organizations and the media who rely on FCAA's work to learn more about and partner with U.S.-based philanthropic institutions.

ABOUT FCAA CONNECT

By providing the space – whether online or in-person – for critical funder dialogue, FCAA will be able to mobilize and support our constituency, expand our understanding of their needs and goals, and ultimately, use those experiences to better inform our programming.

To ensure that the connections and relationships made among funders through FCAA programming are maintained and mobilized throughout the year, we launched our funder-only networking intranet, *FCAA Connect*, in October 2008. This site enables funders to search a comprehensive database to easily find colleagues with similar interests or strengths, and engage in peer-learning, networking, and potentially, collaboration.

As a member of *FCAA Connect*, you will have exclusive access to our online space where you can share best practices, discuss pressing issues, and mobilize to address HIV/AIDS funding gaps. Through *FCAA Connect*, you will be connected to over 700 organizations and more than 1,000 philanthropic professionals who continue to fight AIDS, locally, nationally, and internationally.

Sign up today: <http://groups.fcaaid.org>

EXECUTIVE SUMMARY

From September 16-18, 2009, balancing the hope and opportunity presented by new leadership in the fight against AIDS with unparalleled global economic challenges, Funders Concerned About AIDS (FCAA) convened its first annual gathering of more than 120 domestic and international AIDS grantmakers – the largest gathering in FCAA’s 22-year history. Additional attendees included advocates, People Living With HIV/AIDS, key U.S. federal administration officials, newly appointed leaders of international efforts focused on HIV/AIDS, and other distinguished thought leaders and innovators from many sectors. Key to the gathering was also the outreach to and attendance of stalwart leaders from the field of private philanthropy, particularly other affinity groups whose members’ work intersects with the myriad issues surrounding HIV and AIDS.



Over the course of three intensive days, participants heard from all corners of the globe about innovative approaches to HIV/AIDS grantmaking, as well as advances and setbacks on the full range of substantive HIV issues: prevention, social services and care provision, and human rights protections for people with or at high risk of HIV/AIDS. Those in attendance also discussed the actual, likely or feared impact of the new economic paradigm in which we all live and work; learned about the future of U.S. policy and funding for HIV/AIDS at home and abroad; discovered innovative and exciting uses being made of media and technology in AIDS work; reviewed the current landscape of reproductive rights of women with HIV and AIDS; explored new collaborative possibilities between funders and among funders, the public sector and NGOs; and identified important priority areas for FCAA moving forward.

Several significant themes emerged during the event concerning the role of private philanthropy in contributing to the end of the pandemic including:

- Advocacy
- U.S. National HIV/AIDS Strategy
- Collaboration
- Building the capacity of grassroots organizations

The Board, staff and Annual Gathering Planning Committee express our profound gratitude to everyone who participated and gave so freely of their time, talent and expertise. The spirit of openness and generosity shared at this event will resonate for a long time to come and, ultimately, translate into grantmaking strategies, philanthropic leadership and services, and public policies that will help slow the transmission of this disease, and better the lives of people everywhere living with HIV and AIDS.

Advocacy

“We need to think of advocacy as a structural intervention that leads to organizational development.”
- Jonathan Cohen, Director of the Law and Health Initiative, Open Society Institute

Both domestic and international experts in attendance were equally adamant about the value of advocacy and the need for private philanthropy to fund it. The issue of greater need for well-funded, focused and effective advocacy was raised at every session and keynote address throughout the gathering. Some of the key points made on this topic include:

- Advocacy capacity and readiness is a prime determinant in an organization's ability to respond nimbly and effectively to changes in policies of governments and multilateral agencies that affect funding streams and impact the architecture of AIDS services. One example discussed was the current healthcare reform debate and the inability of many AIDS organizations to participate in the process and influence decisions because they do not have established advocacy and communications departments, nor do they have the capacity to establish and sustain relationships with key policy makers and legislators.
- Advocacy, in both the domestic and international arenas, is essential to keeping governments accountable for their promises, and to sustain funding for HIV/AIDS programs.
- Because advocacy is not, and cannot be, funded through government programs, support for advocacy is a key role for private philanthropy. Steve Gunderson pointed out that most advocacy funding is heavily led by family foundations. David Munar, AIDS Foundation of Chicago said, "Advocacy presents us all with an enormous investment opportunity that can leverage real change. It is where the need is, but not where the money is going."
- Grantmakers were encouraged to think differently about funding advocacy. Francoise Girard of OSI counseled patience because advocacy is an ongoing process rather than a program with outcomes than can be measured on a quarterly or annual basis. Chris Collins of amfAR suggested several metrics¹ by which grantmakers and their grantees can jointly measure impact and encouraged them to allocate a portion of every advocacy grant to evaluation.
- Lisa Bohmer of Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) also suggested connecting grantees with other advocacy groups and supporting their collaboration.
- In addition to funding the traditional work of advocates, advocacy funding can envelope leadership training, policy research, media campaigns and technology that allows an organization to effectively and quickly mobilize its constituents.

National HIV/AIDS Strategy

"The development of a National HIV/AIDS Strategy (NHAS) heralds a new era of transparency and collaboration, with each partner taking the role best suited to their capacity."

- Jeffrey Crowley, Director of the Office of National AIDS Policy and Senior Advisor on Disability Policy, White House

The topic of developing and implementing a NHAS was part of an ongoing conversation throughout the gathering and there was consensus among the participants on the value and need of such an approach.

Jeffrey Crowley indicated that the NHAS will be straightforward, accessible and achievable. It will have three planks;

- Reduce HIV incidence,
- Increase access to care,
- Address and reduce HIV-related health disparities.

Mr. Crowley cautioned funders that a comprehensive strategy that addresses every issue is not possible. He also recognized that there may be some HIV program activities that may not be suitable for federal agencies to address. This point demonstrated once again the critical role that private funders must continue to play in identifying key gaps in services and programs that merit support.

¹ See page 31 for further details.

Many thoughts expressed throughout the gathering about the key role of private philanthropy in the development of this strategy were encapsulated by remarks made by Kandy Ferree, President and CEO of National AIDS Fund, who encouraged all grantmakers to participate in the upcoming 14 “community discussions” mentioned by Mr. Crowley by taking on a convening role in their home communities and supporting their grantees’ participation in these discussions. Ms. Ferree also reminded participants that it was advocates, funded largely through private philanthropy, who had driven the conversation about a NHAS to this point.

Collaboration

"If we keep AIDS in isolation from other global movements for health, human rights, women and development, we will fail to link HIV to the broader international health and development agenda. Promoting a comprehensive approach and leveraging those partnerships will be essential to sustain and accelerate progress in the next phase of the global response to AIDS."

- Michel Sidibé, Executive Director, UNAIDS

During the gathering several targeted discussions focused on finding collaborative solutions to new and long-standing issues. These conversations were imbued with a hopeful energy as grantmakers and experts with a broad range of experiences and expertise came together, some for the very first time. In fact, Jen Kates, Vice President and Director, HIV Policy, The Henry J. Kaiser Family Foundation, noted that this was the first time that the leaders of U.S. Domestic AIDS policy and leaders of U.S. International AIDS policy had ever shared a public panel.

There was also a sense that this gathering was itself a form of effective collaboration, as grantmakers freely shared information about their challenges and successes and discussed the merits and challenges of a wide range of potential partnerships including:

- Public/Private Partnerships (as demonstrated by the philanthropic and public health sectors in Washington DC);
- Inter-affinity working groups focused on the reproductive rights of women with HIV/AIDS and other issue intersections;
- Multi-funder working groups exploring a human rights approach to funding for HIV/AIDS – both domestically and internationally; and
- Multi-sector collaborations funding media campaigns, advocacy efforts and other joint ventures.

There was consensus that successful collaborations pool technical expertise, human resources, technology and other non-financial resources, as well as money, and that collaborations require both time to succeed and funding for dedicated staff.

Finally, there was a collective understanding that the key to all successful collaborations is in the development of authentic and durable relationships amongst leaders in the field; and that gatherings such as this, that maximize opportunities for participants to share their collective wisdom, are critical to development and growth of those relationships.

Building Capacity

“Investing in the capacity of grassroots organizations, especially in this economic climate, is key to sustaining progress in serving populations most impacted by HIV/AIDS.”

- John L. Barnes, Executive Director, FCAA

Building the capacity of grassroots organizations, particularly those serving marginalized populations, was another key theme that emerged in many discussions. These organizations are suffering more than most in the economic downturn, which may result in already underserved populations falling further behind in terms of gaps in prevention interventions, social services, care and treatment. Further, recent data on philanthropic sector’s response to HIV/AIDS revealed that among the top private funders in the U.S., less than 6% of disbursements² went towards capacity building, and often, these dollars were classified within the “Other” category of intended use (also including general operating support, technical assistance, salaries, creating organizational alliances, etc.).

Leadership development, advocacy capacity and access to technology were all seen as key structural elements, without which, grassroots organizations cannot effectively respond to the ever-evolving landscape in which they operate. Leadership development – or ‘deepening the bench’ – was singled out as a priority for the movement.

Administration officials, nonprofit leaders and capacity building experts also encouraged grantmakers to support organizations with programs of demonstrated effectiveness that are too controversial for governments to fund such as services for men who have sex with men (MSM), sex workers and IV drug users. Many advocated for increased general operating support, and a new kind of relationship with grantees built on trust.

As with collaborations, participants agreed that capacity building was not just a matter of providing dollars but also sharing expertise in finance, human resources, board development, strategic planning, technology, and other areas where private and corporate philanthropy have greater expertise and nimbleness than government funders.

² Funders Concerned About AIDS. *U.S. Philanthropic Support to Address HIV/AIDS in 2008*. November 2009. Available at <http://fcaids.org/publications/FCAART2009.pdf>.

OPENING INSTITUTES

REPRODUCTIVE RIGHTS OF WOMEN WITH HIV AND AIDS

“People are finally realizing that AIDS is a gender-based disease”

-Stephen Lewis, Co-Director, AIDS-Free World

The genesis of this institute was a pre-gathering survey (see Appendix I) distributed to all FCAA stakeholders to identify issues they would like to see addressed at the gathering. The reproductive rights of women living with HIV/AIDS was by far the topic that generated the most interest and was tagged by the planning committee (see Appendix II) as an issue to explore in depth.

The institute brought together nearly 50 representatives of grantmaking institutions and affinity groups that touch on this issue as well as leading service providers, activists and women living with HIV/AIDS to explore, in-depth, the many intersections of HIV/AIDS and reproductive rights.

It was our intention to acknowledge, and attempt to move past, some of the traditional tensions between the HIV/AIDS and the Reproductive Health communities by developing a deeper understanding of our mutual interests, and finding ways to move forward in common cause. We also chose to invite both domestic and international funders to see what learning could be shared and to position the issue as truly global in impact and essence.

Moderated by Desiree Flores, Program Officer, Health, Ms. Foundation for Women, the panelists included:

- Brian Ackerman International Policy Manager, Advocates for Youth;
- Dazon Dixon Diallo Founder & CEO, SisterLove;
- Terry McGovern Program Officer, Ford Foundation; and
- Serra Sippel President, Center for Health and Gender Equity(CHANGE)

Aspects of the issue discussed during this three-hour session included:

- Including positive women in every discussion;
- Integrating HIV/AIDS prevention messages into sexual & reproductive health services for women everywhere;
- Challenges, and ultimate ineffectiveness, of operating from a siloed approach;
- Addressing the social justice issues such as criminalization, human rights, immigration, etc. – both domestic and international – that impact the reproductive rights of women with HIV/AIDS;
- Sharing strategies and support for impacting key advocacy and policy issues;
- Establishing sustainable partnerships with government agencies everywhere, despite the barriers of differing ideologies and cultural norms;
- Working with men and women’s male partners;
- Choosing between supporting AIDS-only programs and those that address HIV/AIDS in a broader context;
- Bringing women’s reproductive rights to the development of the National HIV/AIDS Strategy in a meaningful way that will result in money on-the-ground;
- Understanding that it will take time for both funders and grantees to make the shift into an integrated approach;
- Developing better data and evaluation;
- Identifying ways that funders can strategically impact and support international work and the next PEPFAR reauthorization;
- Ensuring that groups without access can get in the door with policymakers.

- Addressing the pressure to be more rather than less focused due to the recent decline in assets and the current economic crisis; and
- Collaborating in more skillful and strategic ways.

Examples of existing and nascent efforts among funders included:

- Funders Network works with foundations to broaden their definitions of reproductive rights and to increase their understanding of reproductive health to include HIV prevention and treatment. They convene The Catalyst Fund,³ a women of color working group that deals with reproductive justice, including HIV, and share case studies on their website;
- Ford Foundation will work with its US HIV/AIDS grantees to develop policies that will integrate HIV, STI, and reproductive health;
- The Consumer Health Foundation and Grantmakers in Health recently convened a meeting on social determinants for women’s health that will include HIV/AIDS;⁴ and
- Washington Area Women’s Foundation is researching the intersection of economic security and health and will include the impact of HIV/AIDS in their report.

Examples of existing and effective programs included:

- National AIDS Fund grantee, the Memphis Center for Reproductive Health⁵, has successfully integrated an HIV prevention intervention within a reproductive health clinic;
- SisterLove has developed a replicable program that integrates work with domestic violence, substance abuse, and HIV service providers;
- Partners in Health created a declaration of right to health at their recent Stony Point Conference⁶;
- Family Care International and CHANGE convened other like-minded groups to advocate together; and
- The Men Engage Alliance⁷ is global network focused on engaging men for men’s and women’s health and rights.

Key recommendations for funders arrived at by group consensus include:

- Fund advocacy and work closely with groups to build their capacity to do advocacy;
- Model integration approach by funding integration programs and sharing information about successful grantees;
- Engage youth in meaningful ways;
- Ensure that treatment and prevention are complementary, not competitive;
- Encourage funders to utilize the FCAA network and *FCAA Connect* to proactively disseminate information about innovative and effective programs;
- Establish a funding collaborative along the lines of The Catalyst Fund; and
- Convene a working group to continue the conversation.

³ The Catalyst Fund offers funders the opportunity to support women of color-led reproductive justice organizations and projects through a fund that will match their contributions, dollar for dollar, and increase the strategic impact of their grantmaking. Created by the Women of Color Working Group of the Funders Network on Population, Reproductive Health and Rights and seeded by the Ford and Public Welfare Foundations, Catalyst supports a sector of women that has the greatest reproductive health needs but receives the least amount of funding support. Learn more at: <http://www.tidesfoundation.org/catalyst>.

⁴ As a follow up to this convening, Grantmakers in Health recently published “*Taking a Social Determinant of Health Approach to Addressing HIV/AIDS among Women of Color.*” Read it at: <http://www.gih.org/>

⁵ <http://www.mcrh-tn.org/>

⁶ http://www.pih.org/inforesources/IHSJ_Stony_Point_Conference_2009.html

⁷ http://www.menengage.org/intro_en.asp

FCAA and the Funders Network have begun planning to initiate a funder working group on the intersections between reproductive rights and HIV/AIDS in early 2010. For more information about the work group and participation, contact Sarah Hamilton at sarah@fcaids.org. See the Appendix for a list of resource shared during the institute.

AIDS, MEDIA AND TECHNOLOGY

“Repurpose! Repurpose! Repurpose!”
- Miguel Gomez, Director, AIDS.gov

This institute was also the result of much pre-conference research and the understanding that, whatever the size, type or scope of a foundation or grantee, the proper and innovative use of media and technology could further its goals significantly. As we developed the session, we realized the topic was both vast and deep. In order to cover as much ground as possible we dedicated three hours to the discussion and divided the institute into three distinct sections:

- Using Media & Technology to Support Advocacy and Impact Policy
- Innovative Uses of Media & Technology
- Examples, Challenges and Best Practices of Media Collaborations

Moderated by Sean Strub, President & CEO, Cable Positive and Founder of POZ Magazine. The panel included:

Sam Graham-Felsen	Director of Outreach & Content for Blue State Digital,
Miguel Gomez	Director, AIDS.gov
Oriol Gutierrez	Deputy Editor, POZ Magazine
Catherine Hanssens	Executive Director and Founder, Center for HIV Law and Policy
Brittany Hume	Program Officer, Johnson & Johnson Corporate Contributions
Alyce Myatt	Executive Director, Grantmakers in Film & Electronic Media
Todd Murray	Executive Director, Hope's Voice International
Tim Rosta	Board Member, Staying Alive Foundation (MTV) Founder of Lifebeat

The goal of this session was to explore how funders and their grantees can make effective and innovative use of media and technology to:

- Battle stigma, discrimination and criminalization;
- Share prevention messages;
- Raise awareness;
- Empower youth;
- Engage public and political support; and
- Help leverage resources in lean times.

The institute brought together over 35 representatives of grantmaking institutions and affinity groups who wanted to learn more about the innovative and effective use of media and technology.

Aspects of the topic discussed during this three-hour session included:

- The cost-effectiveness and multi-purpose nature of new media, i.e. a blog can be read as a podcast, posted as a video and used in other communication outlets;
- A single pithy message can be repurposed endlessly;
- Technology is so accessible today that some of the most vital, instructive work is being done by organizations without in-house media skills or public education staff;

- Technology can reach millions more people with consistent messages than ever before;
- Metrics for success are sometime challenging in a field as new and rapidly changing as media and technology, but the Obama campaign's use of social media was presented as an example of potential impact;
- Technology can bridge silos;
- Media campaigns offer excellent opportunities for collaboration among funders, government agencies, NGOs and service providers;
- Some of the most effective messaging is done by putting technology in the hands of consumers, particularly youth infected and affected by HIV/AIDS;
- Ever increasing number of Americans access health information online; and
- Technology can leap ideological barriers and other obstacles such as poverty.

Examples of existing media and technology efforts among funders included:

- Grantmakers in Film & Electronic Media provides a searchable database⁸ of media projects-in-progress that funders can join or support;
- The Global Media AIDS Initiative, a partnership with the Henry J. Kaiser Family Foundation, UNAIDS, Ford Foundation, and the Bill & Melinda Gates Foundation. The initiative encompasses the “African Broadcast Against HIV/AIDS”, “Caribbean Broadcast”, and “Asia Pacific Media AIDS Initiative” among others.
- Johnson & Johnson’s “Imagine Africa”, a pan-African reality show that promotes the vision of an HIV-free generation and engages young Africans in combating HIV/AIDS. The show was an outgrowth of their partnership on the African Broadcast Against HIV/AIDS Initiative.
- M•A•C AIDS Fund “Global Youth Prevention Initiative”;
- Henry J. Kaiser Family Foundation’s “PAUSE Campaign” (a partnership with Fox) and “Greater Than AIDS” (a multi-faceted national campaign to mobilize Black Americans). <http://www.kff.org> provides links to HIV/AIDS-related media partnerships worldwide; and
- The Staying Alive Foundation (MTV)⁹ which provides small grants and in-kind support (including condoms, film cameras, Staying Alive campaign materials) to promising youth around the world to help document their organizations and help educate their communities about HIV/AIDS.

Examples of existing and effective programs included:

- UNAIDS social media outreach via Twitter (@UNAIDS) and Facebook;
- AIDS.gov website and outreach;
- Center for HIV Law & Policy (CHLP) resource bank¹⁰;
- CHLP electronic survey of 375 Southern state service providers;
- POZ.com and AIDSMeds.com offer comprehensive treatment news for consumers online with links to Twitter, Facebook, MySpace and You tube and disseminates information and prevention messages via social media such as personals, blogs, videos, and internet forums; and
- Hope’s Voice International Emmy Award winning “Does HIV Look Like Me?”¹¹ campaign that seeks to empower young people living with HIV and AIDS to use their story to combat stigma and raise awareness.

Key recommendations for funders arrived at by group consensus include:

⁸ <http://media.gfem.org/>

⁹ <http://foundation.staying-alive.org/en>

¹⁰ <http://www.hivlawandpolicy.org/resourceCategories/>

¹¹ http://hopesvoice.org/?page_id=160

- Think of online communications activities and email list-building as developing ongoing ambassadors for your work, rather than the means to one particular goal such as a one-time fundraising pitch or media;
- Educate grantees to use their websites as a portal for emails that captures all correspondents to build their list of constituents and supporters;
- Make the “donate” button on a website highly visible and red;
- Send mass emails from a name rather than an organization or email address;
- Measure success of online communications by implementing free tools like Google Analytics to monitor online traffic;
- Develop a central resource to assist underfunded but vital voices to connect with major policymakers through press releases, op ed articles, and other media;
- Fund infrastructure projects such as websites for non-profits and other capacity building technologies to support advocacy and services delivery;
- Empower youth by providing them with technology; and
- Take chances. This is a new and ever-evolving field.

KEYNOTE SPEAKERS



“You have it in your hands to make a tremendous contribution toward ending the sadness, tragedy and injustice of HIV and AIDS.”

- Stephen Lewis, Co-Director, AIDS-Free World

Mr. Lewis was introduced by Patricia Nalls, Founder and Executive Director of The Women’s Collective. Ms Nalls brought home the challenges of living with HIV/AIDS by sharing that she was unaware of being HIV-positive until the death of her husband and 3-year old daughter from AIDS. She talked about her evolution as an activist and how the support group she began in her living room for other women with HIV has grown into a vital organization with 27 employees, international reach and a documented, replicable model.

Mr. Lewis began by encouraging funders to consider the “profoundly crucial” need to fund advocacy. He made the case that it is advocacy that breaks through previously intractable areas of the pandemic and advocacy that defines, in advance, the debate about which programs and services are needed to fight the pandemic.

Several examples of effective advocacy given by Mr. Lewis included:

- The expected rescinding of the travel ban in the United States (since come to pass);
- The “3 by 5” initiative - provide 3 million people with treatment by 2005 - resulted in the G8 summit at Glen Eagles and determination to provide Universal Access;
- The efforts to halt vertical transmission in the “grossly underserved” southern hemisphere;
- The role that advocacy plays in breaking through “the intractable stigma and discrimination that causes so much pain, suffering and death” particularly in concentrated epidemics among MSM, sex workers, prisoners and IDUs; and,
- The Treatment Action Campaign in South Africa.

Mr. Lewis hailed the courageous efforts of advocates like Global Fund Executive Director Michel Kazatchkine and Michel Sidibé at UNAIDS, particularly citing Mr. Sidibé’s embrace of the tie between human rights and the pandemic. Speaking particularly about the need to decriminalize homosexuality, Mr. Lewis said, “Unless you confront bigotry and ignorance in the political establishment, you consign whole populations to lives of suffering, struggle and dismay.”

Gender equality was another theme of Mr. Lewis’s address saying, “ The battle to achieve gender equality is the most important struggle on this planet.” He held out particular hope and praise for the new United Nations International Agency of Women¹² and reminded the audience that this new initiative is the result of tireless advocacy on the part of thousands all over the world. Mr. Lewis encouraged all funders and activist to continue the effort and to make sure that the new initiative is adequately funded and capable of programmatic impact on the ground.

Another major theme of Mr. Lewis’s address was the need to support the capacity of grassroots organizations. “If you want to turn the tide on the pandemic, then you must address the issues at a

¹² U.N. Approves Long-Awaited New Women's Agency. Thalif Deen, IPS News, Sep. 14, 2009. <http://ipsnews.net/news.asp?idnews=48439>

grass roots level.” He spoke compellingly about the “tremendous resilience, indomitability and generosity of spirit” of people working on the ground, particularly the women of Africa.

Mr. Lewis reminded the audience that the role of private philanthropy is particularly suited to fund the capacity of these grassroots organizations. While this critical component helps organizations on the ground actualize their programming and impact, it is often not a part of what is funded by the various bi-and multi-lateral donors that remain indispensable to addressing issues at a macro level. One challenge is the often heard concern about the accountability of small organizations, but Mr. Lewis found this to be a flawed assumption and spoke from personal experience about the efforts of Firelight Foundation, American Jewish World Service and other groups that have proven effective at working with grassroots organizations. Mr. Lewis also spoke about the idea of Universal Access and reminded participants that “care” is the third component of Universal Access, along with treatment and prevention, and that access to care is what happens on the ground.

Mr. Lewis addressed the impact of the economy on the philanthropic sector. He acknowledged the difficult decisions being made by foundations but encouraged grantmakers and activists to keep the pressure up on G8 nations to fulfill the promises of Glen Eagles – and to not be swayed by arguments that the economy now makes that impossible. In fact, Mr. Lewis went so far as to say that the G8 nations were defaulting on their promises before the current economic crisis and that trillions were found “over night” to bail out banks and fund stimulus packages while very little is being used to address global health issues that will not go away.

Finally, Mr. Lewis acknowledged the power of private philanthropy to keep the conversation about AIDS treatment and prevention, and the needs of people living with HIV and AIDS, alive. He encouraged activists to keep enmeshing AIDS with other global health issues without diminishing the focus on AIDS. He spoke of “tenacity and unrelenting, constant pressure” as the key to success.



“In 2010 and beyond, our efforts will be dedicated, advocating for funders to support our common goal to maintain the energy, commitment, and results that we need to reverse this epidemic.”
- Michel Sidibé, Executive Director, UNAIDS

Robin Gorna, Executive Director of the International AIDS Society (IAS), introduced Mr. Sidibé. This gathering was Ms. Gorna’s first official travel in her new role as leader of IAS, which has 15,000 members in 188 countries. Ms Gorna hailed the gathering as *“a remarkable opportunity for funders to develop real strategies for global impact.”* She introduced Mr. Sidibé as *“the strongest and most courageous voice among U.N. leaders, letting the world know what it needs to hear,”* particularly citing his efforts to decriminalize homosexuality. Ms. Gorna referenced her long working relationship with Mr. Sidibé and praised his deeply practical approach to developing real programs that impact real people.

Mr. Sidibé began by thanking those present for their continued commitment to fighting AIDS and hailed the particular role that private philanthropy plays worldwide. He then set the context for future UNAIDS activities and policies by discussing the challenges of inequity and the ever-widening global gap between those who have and those who do not. Brutality against women and girls and the criminalization of homosexuality were cited as evidence of increasing discrimination, stigmatization and marginalization, and how this disparity feeds the AIDS pandemic.

Universal Access was also a key theme in Mr. Sidibé’s address and he encouraged everyone to expand the definition and understanding of Universal Access to include access to improved health delivery systems, economic opportunities and social justice.

Mr. Sidibé quoted some staggering statistics including:

- 2 million people die from AIDS every year;
- 1.7 million deaths occurred in Africa;
- 1.9 million deaths occurred in developing countries;
- 1.7 million deaths were among the potentially productive work force;
- 350,000 babies are born each year with HIV; and
- Less than 1% of newborns with HIV occur in northern developed countries.

The democratization of solutions was another key theme. Mr. Sidibé cited the key role of private philanthropy in expanding the capacity of grassroots organizations thus making it possible for those working on the ground and those living with the disease to participate in larger more global policy discussions. He also discussed private philanthropy’s contribution of expertise and the opportunity for philanthropy to foster connections and collaborations – among each other, their grantees, and with government and multilateral efforts.

Mr. Sidibé closed with an open question and answer forum in which he spoke of moving from an emergency response to a long-term response with prevention being central to the UNAIDS agenda going forward. He emphasized that even with 4 million people currently receiving treatment, there are 7 million more without treatment and 2 million new infections each year. Treatment alone cannot amply respond to the crisis.

Finally Mr. Sidibé thanked everyone for their commitment to transform the fight against HIV and AIDS and encouraged everyone to see AIDS is an opportunity to work together to “leverage the results of the AIDS responses across economic, social and political spheres,” and restore dignity to millions of people worldwide.



THE FUTURE OF FUNDING FOR HIV AND AIDS

“Never before, have we had such a dedicated group with so great an understanding of the value of philanthropy and unique role that philanthropy can play in partnership with the public sector at every level.”

- Steve Gunderson, President and CEO, Council on Foundations

A key component of effective programming for private philanthropy is an understanding of

what can be expected from the public sector. To that end, FCAA convened a two-part, comprehensive look at the domestic and international HIV/AIDS funding environment over the next three-five years.

Part 1 convened a panel of top administration officials and experts to discuss U.S. policy and funding for HIV/AIDS. Part 2 convened a panel of thought leaders from the field of private philanthropy to discuss the implications of projected public sector funding for HIV/AIDS and identify some of the challenges and opportunities for private philanthropy.

Part I – The Future of Funding for HIV/AIDS in the Public Sector - U.S. HIV/AIDS Policy and Funding

Jen Kates, Vice President and Director, HIV Policy, Henry J. Kaiser Family Foundation, who moderated the panel on public sector funding, noted that this was the first time that the leaders of U.S. domestic and international AIDS policy had ever shared a public panel. This was seen as an indication of President Obama’s commitment to a new, holistic approach that breaks with the previous siloed approach to policy and funding for AIDS and other issues.

While the impact of the global economic crisis cannot be underestimated, there were indications of a willingness on the part of the White House to work collaboratively, both among government agencies as well as in public/private partnership to initiate or continue efforts that impact the domestic and international HIV epidemic.

Jeffrey Crowley, Director of the Office of National AIDS Policy and Senior Advisor on Disability Policy, White House, spoke about the development of a National HIV/AIDS Strategy (NHAS)¹³. He cautioned funders that a comprehensive strategy that addresses every issue is not possible. However, he added that the President believes that policy should be informed by science and the Strategy will encompass activities that will impact the epidemic. Mr. Crowley also recognized that there may be some HIV program activities that may not be suitable for federal agencies to address and he suggested that these may be areas where private philanthropy can make a significant difference.

Other key points made by Mr. Crowley include:

- The NHAS will be straightforward, accessible and achievable. It will have three planks:
 - Reduce HIV incidence
 - Increase access to care and optimizing health outcomes

¹³ <http://www.whitehouse.gov/administration/eop/onap/nhas>

- Address and reduce HIV-related health disparities
- The NHAS is not a panacea. PLWHA will still need the Ryan White CARE Act and other programs.
- The White House is convening an interagency working group to help develop the strategy. This approach seeks to create a broad federal government involvement, and ultimately ownership, of the strategy and new policies as they develop.
- The President's Advisory Council on HIV and AIDS (PACHA) will be reconstituted with Dr. Helene Gayle at its head.
- The NHAS and other AIDS- and health-related policies will be evidence-based.
- The White House will host a series of forums to focus attention on a wide range of issues, including women and HIV, youth and HIV and HIV stigma.
- It is essential for private philanthropy to fund advocates who can work with the government to accomplish mutually shared goals.
- Private philanthropy, with its ability to make smaller and more flexible grants, need to build the capacity of grassroots organizations, particularly in communities of color.

Michele Moloney-Kitts, Assistant U.S. Global AIDS Coordinator, Office of the U.S. Global AIDS Coordinator, U. S. Department of State, spoke about U.S. policy for HIV/AIDS from an international perspective. She emphasized President Obama's commitment to keeping and building on The U.S. President's Emergency Plan for AIDS Relief (PEPFAR), and further, that as the largest international donor, HIV and AIDS are central issues in the new administration's foreign policy. Ms. Moloney-Kitts also highlighted funder nimbleness and expertise in areas such as finance and human resources as essential resources that can and should be leveraged in building the capacity of international HIV/AIDS organizations, and noted that there is a greater need for the development and use of new technologies.

Other key points made by Ms Moloney-Kitts' include:

- New directions in HIV/AIDS policy will be determined by the evolution of the disease itself and by evidence-based information. U.S. policy will seek to address HIV and AIDS in a comprehensive manner as typified for President Obama's Global Health Initiative¹⁴.
- The U.S. will work with other countries to support true-costed national strategies that promote country ownership, have a strong, robust multi-sector approach, and integrate and support systems strengthening.
- PEPFAR will take a holistic approach to issues, i.e., addressing the needs of women with HIV from an economic, social and health perspective.
- PEPFAR will use a partnership framework, a new format that outlines shared visions and goals, holds countries accountable and seeks to achieve results together.
- Both the public and private sectors must all address structural issues that allow the disease to grow.
- Philanthropy impacts the prevention of new HIV infection by supporting primary education that helps girls stay in school. (Ms Moloney-Kitts cited a South African study¹⁵ demonstrating significantly lower rates of infection in girls ages 15-16 who stayed in school).
- Foster North/South and South/South alliances and mentoring among grantees.

Julie Scofield, Executive Director, National Alliance of State and Territorial AIDS Directors (NASTAD), spoke about the existing and upcoming cuts in state HIV and AIDS funding as a result of the current economy. She reported overall state deficits in FY2009 of \$113.2 billion and anticipated

¹⁴ http://www.whitehouse.gov/the_press_office/Statement-by-the-President-on-Global-Health-Initiative/

¹⁵ "UNC study to examine whether paying girls to attend school reduces HIV risk," August 27, 2009. University of North Carolina at Chapel Hill, Press Release. <http://uncnews.unc.edu/content/view/2818/107/>

shortages in FY2010 totaling \$142 billion. Consequent program cuts for HIV and viral hepatitis will present significant programmatic challenges for state, county and local health departments, as well as the communities they serve. Ms. Scofield also cautioned that attention must be paid to the impact of budget cuts on state and local governmental public health workforce, capacity and infrastructure. While it is diminishing, state and local funding plays an important role in providing services, in particular of programs – such as needle exchange – that cannot yet be funded with federal dollars.

Other key points made by Ms. Scofield include:

- Increases in federal funding are urgently needed and greater advocacy for funding is needed at all levels;
- In 2007 more than one-third of HIV prevention funding (\$205 million) administered by health departments in the U.S. came from state and local governments;
- States also contributed 21% (\$328 million) of the national funding for AIDS Drug Assistance Programs in 2008;
- Prevention funding is lagging far behind care and is getting hit harder at the state and local levels;
- Healthcare reform needs to include the creation of a public health and prevention investment fund with a dedicated funding stream to shore up the public health system in the nation, and provide comprehensive community-based prevention services along with clinical prevention services and other essential health care services for PLWHA and viral hepatitis; and
- We have not seen the end of state and local cuts, which will continue as States struggle to deal with decreased revenue and rolling budget cuts.

Part 2 - The Future of Funding for HIV/AIDS in Private Philanthropy – Thought Leaders’ Commentary and Participant Discussion



“Because of their independence and relative freedom, foundations are uniquely situated to take advantage of several strategic opportunities at this time that have the potential to have a major impact on the epidemic in the coming years.”

-Thomas Coates, Michael and Sue Steinberg Professor of Global AIDS Research, Division of Infectious Diseases, UCLA David Geffen School of Medicine

Immediately following the Public Sector presentation, FCAA convened a panel of thought leaders from the field of private philanthropy to discuss the implications of projected public sector funding for HIV/AIDS, and to identify some of the challenges and opportunities for private philanthropy, by filling in gaps and partnering with government to broaden and deepen the impact of both sectors.

Moderated by Steve Gunderson, President of the Council on Foundations, the panelists included:

Thomas J. Coates	Michael and Sue Steinberg Professor of Global AIDS Research, Division of Infectious Diseases, Department of Medicine, UCLA David Geffen School of Medicine
Kandy Ferree	President & CEO National AIDS Fund
Kim Frawley	Director, Worldwide Philanthropy, Pfizer, Inc.
Nancy Mahon, Esq.	Executive Director, M•A•C AIDS Fund
Todd Summers	Senior Program Officer for Global Health Policy & Advocacy, Bill & Melinda Gates Foundation

Steve Gunderson began by pointing out that the new administration, beginning with the President and First Lady, has extensive experience in philanthropy and appreciates the value it brings to comprehensive solutions to social issues. Mr. Gunderson also spoke about the need to build the philanthropic sector’s future leadership, citing the Council on Foundation’s Next Generation Task¹⁶ Force made up of 17 philanthropic trustees and professionals, all under age 40, representing family, community, corporate, independent, and international foundations. He also spoke about the vital role that small foundations can play is supporting issues not funded by others. This point was echoed by Mark Ishaug, Executive Director of AIDS Foundation Chicago (AFC), who noted that the only group he could get to fund AFC’s advocacy boot camp was a small family foundation. Although local, this support allows AFC to mobilize their constituents and participate in national level discussions about AIDS policy.

The panel discussion was broad with each panelist bringing the perspective of a different segment within domestic and international private philanthropy. The state of the economy was ever-present and created the context in which this discussion took place. The commentary segment also involved

¹⁶ <http://www.cof.org/files/Bamboo/whoweserve/nextgentaskforcemembers.pdf>

extensive Q&A time and was followed by a series of roundtable discussions to allow for maximum participation by attendees.

Thomas Coates summarized points from his white paper “*Key Philanthropic Investment Opportunities in HIV/AIDS: What to Do to Make a Difference by 2015.*”¹⁷ Sponsored by the Ford Foundation; the Diana, Princess of Wales Memorial Fund; and Roll International Corporation, the report was released in May of 2009. The report’s findings and key recommendations harmonized clearly with other significant themes that emerged during the gathering. Mr. Coates’ recommended that foundations can have the greatest impact if they focus on supporting:

- Advocacy and accountability efforts that have a long-term orientation;
- HIV prevention strategies that include harm-reduction approaches and focus on the most marginalized groups;
- Human rights and its intersection with HIV/AIDS, including gender inequity and stigma and discrimination; and
- Movement building that can increase the capacity of organizations and individuals to respond effectively to the epidemic in their communities and globally.

Kandy Ferree suggested that funders can use their power, separately and collectively, to forward priorities that include:

- Convene grantees to provide input into the development of the National HIV/AIDS Strategy;
- Fund evaluation of innovative and evidence-based community-based programs;
- Help grantees document their replicable programs and help bring those programs to scale by collaborating with other funders or by introducing grantees to government agencies (i.e. Centers for Disease Control); and
- Challenge grantees and other agencies to come together to improve their efficiencies and capacity, but “*We must fund the process!*”

Kim Frawley discussed various ways that funders can support grantees by establishing long-term investment strategies with grantees and partnerships that bring technical and capacity-building expertise as well as funds. Ms Frawley described in some detail the Pfizer Global Health Fellows program that has proven beneficial for both the funder and the grantee by:

- Developing a level of capacity and effectiveness among grantees that position them to be leaders in their own communities and attractive to other funders;
- Bringing grantees, otherwise unaffordable, expert financial advice and IT support;
- Creating significantly higher job satisfaction experiences; and
- Increasing job retention rates among those Pfizer employees who get involved as expertise providers.

Nancy Mahon identified several trends within the MAC AIDS Fund and other funders in direct response to the economy. For MAC, their strategy involves:

- Maintaining the number of smaller grants for community organizations in underserved geographic region while cutting the larger grants of organizations better placed to weather the economic storm;
- Funding successful programs longer than in the past in light of the lack of government funds to replace private dollars despite proven efficacy;
- Accelerating and communicating exit strategies; and
- Funding local groups directly, rather than using re-grantors;

¹⁷ For a full copy of the white paper go to *FCAA connect*.

Other trends noted by Ms Mahon include:

- Grantors are now sharing more information and open to collaborating with each other;
- Now, more than ever, philanthropy is being seen as a “corporate business expense” rather than an option because consumers (most notably women) are increasingly drawn to products and companies with a corporate giving program; and
- There is an increase in companies enacting employee volunteer programs (i.e. the MAC AIDS Fund is one of the top three reasons employees cite for working at MAC Cosmetics).

Todd Summers spoke about the effectiveness of public/private partnerships and agility of foundations and their unique and vital role in funding organizations that address issues and services too controversial for governments and some larger NGOs to support, such as the Syringe Access Fund¹⁸ a program of the Tides Foundation. Mr. Summers also recommended that foundations consider:

- Funding advocacy;
- Supporting innovation;
- Increasing and funding collaboration; and
- Identifying and developing workable metrics that measure the success of prevention efforts.

¹⁸ <http://www.tidesfoundation.org/services-strategies/collective-giving/syringe-access-fund/index.html>



ROUND TABLE DISCUSSIONS

The two panel discussions about the future of funding for HIV and AIDS culminated with all attendees participating in facilitated round table discussions. Here they brainstormed with colleagues at tables that were tagged with topics of interest identified by the attendees when they registered.

The charge to participants was twofold:

- Identify critical gaps in funding for HIV/AIDS and potential areas of collaboration amongst private philanthropists and in public/private partnerships that can address those gaps.
- Identify the unique role that FCAA can assume in facilitating and fostering collaborations.

Facilitated by FCAA Board members and other attendees, the table topics included:

- Prevention
- Policy & Advocacy
- Partnerships
- Leadership development
- Treatment & Care
- Youth
- Stigma & discrimination
- Coates white paper¹⁹

The small groups reported back to the larger body with recommendations for funding, potential collaborations and ideas for FCAA's future programming. Highlights of the discussions include:

Policy & Advocacy (Table Leader: Daniel Lee, Levi Strauss Foundation)

- Host conference calls on emerging issues;
- Track advocacy funding with a comprehensive report on top policy issues being funded;
- Develop more universal metrics for evaluating advocacy; and
- Establish best practices in funding advocacy.

Leadership Development (Table Leader: LaTida Smith, St. Luke's Foundation)

- Proactively develop more minority representation in philanthropy and nonprofit leadership;
- Recognize non-traditional leaders and models of leadership;
- Share models and results of effective leadership development programs;
- Bridge ASOs and Executive Management Programs;
- Identify a class of emerging leaders annually to develop and provide support;
- Facilitate mentoring one-on-one between established and new leaders;
- Invest in organizational development to stabilize environment of "shining star" leaders; and
- Replicate programs developed by leadership programs in other philanthropic sectors.

¹⁹ Key Philanthropic Investment Opportunities in HIV/AIDS: What to do to Make a Difference by 2015, Coates et al. May 2009.

Youth (Table Leader: Paula Toynton, New Jersey AIDS Partnership)

- Strengthen youth health referral networks;
- Fund rights-based comprehensive sexuality/sexual health education with a focus on girl empowerment and participation;
- Provide advocacy training to youth programs;
- Fund peer leadership programs; and
- Develop youth-culturally-competent programs and messages utilizing technology.

Coates White Paper (Table Leader: Jonathan Cohen, Open Society Institute)

- FCAA to provide support to sub-group on human rights for information-sharing, collaboration, etc.; and
- FCAA to provide resources to foundations on how to use non-grantmaking powers (advocacy, media, etc) to advance goals.

Treatment & Care (Table Leader: Elizabeth Merola, US Fund for UNICEF)

- Provide advocacy training for PLWHAs using a rights-based approach;
- Fund capacity building of healthcare systems and build scalable models;
- Enhance visibility of capacity needs and issues among the philanthropic community and the public at large;
- Increase public/media awareness of care and treatment options to increase demand;
- Develop innovative partnerships for point-of-care diagnostics/testing in resource-poor settings for adults & children; and
- Link HIV and pregnant women to care and treatment and assure retention in care by addressing:
 - Reproductive health needs of HIV positive women
 - Psychosocial support
 - Community linkages
 - Training/mentoring
 - Access to technology as a means for follow-up care.

Prevention (Table Leader: Anu Gupta, Johnson & Johnson)

- Make prevention a high priority in National HIV/AIDS Strategy;
- Document best practices in communities effective at HIV prevention, especially those that are “home-grown”;
- Sustainability of prevention efforts (as we think of treatment & care);
- Fund programs that change societal norms re: gender, sexuality and education;
- Proactively engage funders in prevention issues (explore new funders among family foundations);
- Identify and support successful advocacy examples with long-term commitments;
- Identify intersections of global and national priorities;
- Bring international lessons learned in prevention to U.S. (i.e. micro-financing);
- Support value-of-behavior based prevention interventions vs. funding advocacy to address criminalization; and
- Convene groups of like-minded funders to discuss synergies, share information about what works/what doesn't, and identify potential collaborations.

Stigma & Discrimination (Table Leader: Lauren Tews Harbert, AIDS Funding Collaborative)

- Commit more funding to efforts that address decriminalization of felonious assault laws that criminalize HIV+ people if they don't disclose to sexual partners and anti-homosexuality statutes;
- Address cultural mores that continue to view HIV as a punishment;
- Address stigma among those who work in HIV (e.g. people who work with children living with AIDS may hold negative views of MSM);
- Establish gender inequity as a primary issue to be addressed; and
- Explore ways to reduce competition among HIV subpopulations (MSM vs. women vs. transgender).

Partnerships (Table Leader: Jeffrey Richardson, Abbott Fund)

- Develop collaborations characterized by integrating and merging shared strengths and advantages;
- Establish public-private partnerships that leverage expertise from multiple sectors to improve access to integrated services;
- Explore collaborations between business, foundation and nonprofits;
- Look to successful and effective collaborations for models and best practices i.e.,
 - Global Business Coalition's Impact Initiative - Home-Based HIV Testing Initiative in Western Kenya To Reach 2 Million People²⁰ with partners across multiple sectors including Pharma, beverage industry, banking, private donors with matching funds from PEPFAR and local/national governments.
 - FACE AIDS²¹ partnership with Partners in Health that matches student fundraising proceeds with matching grants from private donors to support comprehensive healthcare for pin-makers and their communities in Rwanda.

²⁰ <http://www.gbcimpact.org/health-at-home-kenya>

²¹ <http://www.faceaids.org/>

AIDS GRANTMAKING IN THE NEW ECONOMY

“You never let a serious crisis go to waste. And what I mean is that it's an opportunity to do things you think you could not do before.”

-Rahm Emanuel, White House Chief of Staff (quoted by Daniel Lee)

An awareness of the current global economic crisis was ever-present throughout the planning and convening of this gathering. The goal of this session was threefold:

- Explore the impact of the economy on domestic and international AIDS service providers and AIDS grantmakers;
- Look at innovative responses to the current crisis and programs that have proven effective in both boom times and hard times, particularly those that are replicable and/or involve successful collaboration; and
- Identify strategic responses that can help funders and grantees weather the current economic storm.

Moderated by Daniel Lee, Executive Director, Levi Strauss Foundation, the panelists included:

Lisa Bohmer	Director of Global Partnerships & Program Resource Management, Elizabeth Glaser Pediatric AIDS Foundation
Jonathan Cohen	Director of the Law and Health Initiative, Public Health Program, Open Society Institute
Chris Collins	Vice President and Director of Public Policy, amfAR
David Munar	Vice President, Policy & Communications, AIDS Foundation of Chicago
Phill Wilson	Executive Director, Black AIDS Institute

Quoting the recent UNAIDS and World Bank report “*The Global Economic Crisis and HIV Prevention and Treatment Programmes: Vulnerabilities and Impact*”²² that analyzes the impact of the global economic crisis on HIV prevention and treatment programs, moderator Daniel Lee set the context for the discussion with some recent statistics about how the economic crisis is impacting AIDS issues including:

Treatment – 71 countries surveyed

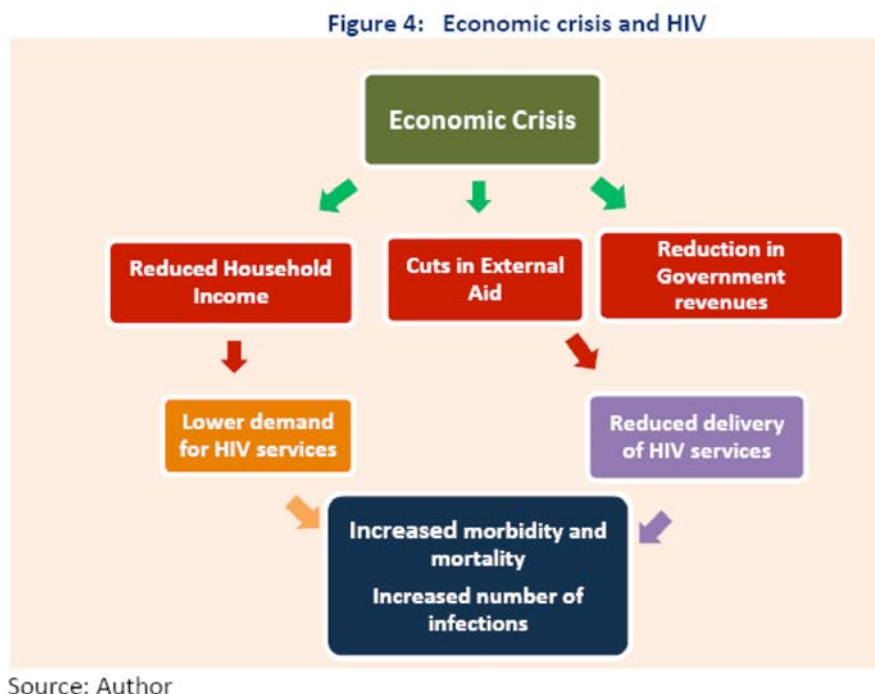
- Crisis already affecting ARV programs (11% of countries)
- ARV scale-up expected to stall (31% of countries)
- Considerable uncertainty about impact (30% of countries)
- Sub-Saharan Africa, Eastern/Central Europe and Caribbean more vulnerable than N. Africa, Middle East, Latin Am, Asia

Prevention – 34 countries (containing 75% of people living with HIV/AIDS) surveyed

- Higher rates of infection, particularly among marginalized populations such as sex workers, MSM and drug users because of:
 - increase in economic migration;
 - increased alcohol use and violence against women and girls;
 - increased recreational drug use;
 - loss of jobs and income, increasing likelihood of risky behavior; and
 - unprotected sex more frequent with deliberate choice to gain more money

²² http://data.unaids.org/pub/Report/2009/jc1734_econ_crisis_hiv_response_en.pdf

Mr. Lee also illustrated the negative effect, and consequent impact, of reduced funding.



The key themes that emerged from this session echoed, and further explored, issues discussed in other sessions including the need to fund advocacy and the need to develop the capacity of grassroots grantees.

Aspects of the topic discussed during this session included:

- Nonprofits with strong leadership are much more likely to weather economic and political storm than those without;
- Nonprofits with diversified funding bases are more nimble and better able to survive market fluctuations;
- Organizations with well-staffed long-term advocacy departments are better able to influence policies that impact funding and programs, and are more likely to participate in local, state and national debates;
- Funders and grantees that participate in genuine collaborations are more likely to survive in difficult times;
- The need to enmesh AIDS with other health, gender, political and social justice issues without losing the focus on AIDS;
- How funders can use ‘non-grantmaking’ support such as advocacy, convening, research, leadership development and media/communications support;
- The role of philanthropy in influencing national and international policy; and
- The need for funders to continually question and redefine their objectives and processes.

Examples of existing and effective advocacy programs/tools included:

- AIDS Foundation Chicago Advocacy Tool Kit - originally developed for encouraging grantees, partners and constituents to participate in the debate on healthcare this tool kit has applications for any advocacy effort including:
 - Petition to Congress;
 - Comprehensive slide presentation;
 - Eye-catching signage and a web banner ad;
 - Talking points on the issue; and
 - Tips for getting family, friends, co-workers and clients involved.

- amfAR's metrics for use in measuring effectiveness and progress of advocacy efforts including:
 - Visits with administration/agency/elected officials;
 - Media coverage;
 - Actual policy change;
 - Community meetings;
 - Statements by elected officials or other policy makers;
 - Publications produced;
 - Attention from multilateral orgs or outside advocates;
 - Preparation of fact sheets/communications for use by advocates;
 - Invitations to join coalitions;
 - Convening a coalition; and
 - Invitations to write legislation

Echoing the previous day's discussion on the future of private philanthropy, the panel discussed strategies for funders with diminished capacity and resources (funds, staff) to continue to have an impact including:

- More collaboration amongst funders;
- Convening grantees to share expertise amongst themselves;
- Contributing non-monetary support such as trainings from staff at foundations and corporations on issues like finance, human resources, technology, communications/media/leadership trainings, etc.
- Identify innovative programs and share information with other funders;
- Help grantees document their innovation and replicable programs;
- Rethink internal processes, such as level of detail in reporting required from established grantees, to save time and accommodate staff shortages at foundations; and
- Engage more actively in public/private partnerships

Key recommendations for funders arrived at by group consensus include:

- Strategically enmesh AIDS with other key priorities in national / global health without diminishing focus on AIDS;
- Develop best practices for
 - Funding advocacy;
 - Collaboration – amongst funders and amongst nonprofits;
 - Public/private partnerships; and
- Fund leadership development; advocacy; and capacity building.

COLLABORATIONS

“What is the crux of vulnerability, and are we putting money into it?”

- Dazon Dixon Diallo, Founder and CEO, SisterLove, Inc. (quoted by Faith Mitchell)

A key theme and consistent message throughout the gathering was collaboration – among funders, between grantees and across multi-sectoral silos.

As an affinity group, FCAA understands the value to be had in establishing a nexus where grantmakers concerned about the same issue can network, share information, support each other and find partners. And, realizing that collaboration is a key to survival and continued impact in this new economic environment, FCAA invited other affinity groups to discuss intersections with HIV/AIDS in the issues they represent and to learn about existing collaborations that work efficiently and effectively.

FCAA hosted an informal networking breakfast with leaders of other affinity groups and presented the final session titled **“Exploring New Horizons.”**

Moderated by Paul Di Donato, Trustee, Broadway Cares-Equity Fights AIDS & Philanthropic Consultant, the panel included:

Astrid Bonfield	Chief Executive, Diana, Princess of Wales Memorial Fund; Chair, European HIV/AIDS Funders Group
Laureen Tews Harbert	Director, AIDS Funding Collaborative
Ben Francisco Maulbeck	U.S. Programs Director, Hispanics in Philanthropy
Faith Mitchell	Vice President for Program & Strategy, Grantmakers in Health
Niamani Mutima	Executive Director, Africa Grantmakers Affinity Group
Denise Shannon	Executive Director, Funders Network

The goals of the session were to:

- Find opportunities to work together across funding portfolios;
- Hear from experts about the best practices of successful collaborations;
- Learn from other affinity groups where HIV/AIDS arises in their work;
- Discuss what’s working in the field and what’s not; and
- Identify gaps in research and program needs to be implemented.

Aspects of the issues discussed during this session included:

- Importance of using collaborative structures specifically to support advocacy both through relevant funding of grantees, but also more directly, for example, by bringing funders together for the purpose of shaping and even driving government and policy changes;
- The reality that collaborations do not occur over night. It sometimes takes years to build the transparency, trust and relationships needed to make them effective, suggesting that planning for such effort in advance of launching a collaborative is essential and patience is required to sustain a collaborative effort until it bears fruit;
- Evaluating the social determinants of health, and the need to look upstream at funding needs and determining how to innovatively approach as funders; and
- Rethinking funding priorities to ensure continuity of services by funding organizations with the capacity to survive in this economic environment vs. continuing to fund organizations without that capacity, just because there is a history of support.

Examples of existing and nascent collaborative efforts among funders:

- The Catalyst Fund²³, a project of the Tides Foundation,²⁴ offers funders the opportunity to support women of color-led reproductive justice organizations and projects through a fund that will match their contributions, dollar for dollar, and increase the strategic impact of their grantmaking. Created by the Women of Color Working Group of the Funders Network and seeded by the Ford and Public Welfare Foundations, Catalyst supports a sector of women that has the greatest reproductive health needs but receives the least amount of funding support.
- The Funders' Collaborative for Strong Latino Communities²⁵ is a project of Hispanics in Philanthropy (HIP) designed to strengthen the Latino civil sector. The Collaborative is a funder-driven initiative that pools dollars from foundation, corporate, government, and individual donors to support capacity building among Latino-led nonprofits in the U.S. and Latin America. The Collaborative responds to the ongoing inequities in philanthropic funding of Latino organizations, and grows from a theory of change that building stronger Latino-led nonprofit organizations will build stronger Latino communities.
- Inter-American Development Fund²⁶, a non-governmental, not-for-profit organization that develops educational, health, recreational, cultural, and sports infrastructure in Latin American countries. The Fund manages funds dedicated to infrastructure projects in various countries of Latin America, which allow their projects to be self-sustainable and to generate resources for this, and future generations. The Fund was highlighted as a successful model by HIP as they recently increased their giving of general operating support;
- AIDS Funding Collaborative (AFC)²⁷, Cleveland, OH. Established as a public-private partnership in 1994 from the National AIDS Fund, AFC funds the evaluation component of the K-12 Responsible Sexual Behavior (RSB) Initiative which provides comprehensive sexuality education to all students within the Cleveland Metropolitan School District (CMSD). At its inception, the RSB Initiative was one of the only, if not the only, such programs in a large urban school district in the United States;
- The Partnership Initiative²⁸, a project of The Diana, Princess of Wales Memorial Fund. Working with selected partners, the Initiative seeks to create sustainable systemic change in the UK and internationally in areas in which the Fund has already made significant investments; and
- The Bomme Isago Association, jointly supported by the International Women's Health Coalition, Open Society Institute (OSI), and the OSI for South Africa, is the only network of women living with HIV and AIDS in Botswana.²⁹ This strategic collaboration developed between the three partners as an approach to leverage resources towards the formation of this new organization and leadership in Botswana. The Association is sighted by the World Bank as a best practice of integrating gender into the design of HIV/AIDS programs.³⁰

²³ <http://www.tidesfoundation.org/catalyst>

²⁴ Denise Shannon participated in Wednesday's opening institute on Reproductive Rights of Women Living with HIV and AIDS. For more information, please read page 10 of this report.

²⁵ <http://www.hiponline.org/home/Funders+Collaborative/>

²⁶ http://www.fondointeramericano.org/english/index.php?option=com_content&view=frontpage&Itemid=1

²⁷ http://www.communitysolutions.com/projects/displayProject.asp?project_id=16

²⁸ <http://www.theworkcontinues.org/landing.asp?id=5>

²⁹ <http://www.africagrantmakers.org/index.asp?pageURL=12&NOticia=10#N10>

³⁰ <http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTGENDER/0,,contentMDK:21425374~isCURL:Y~menuPK:336874~pagePK:148956~piPK:216618~theSitePK:336868,00.html>

Key recommendations for funders arrived at by group consensus include:

- Funders must determine the strengths of each partner coming into a new collaboration; and in addition, partners must consider and address how the model will effect grantees (in terms of additional workload and/or reporting requirements);
- Structuring a collaboration requires flexibility and open communication between all partners. It is important to be flexible in the structuring of the collaboration in terms of roles, disbursement of funds, timelines, and reporting if that will benefit the work of the grantee;
- Large and small foundations need to partner in providing general operating support to community-based organizations;
- Grantmakers have a responsibility to build connections between communities for the grantees and to encourage their own collaborations and community building;
- Support mergers and alliances in addition to partnerships;
- It is important to not just provide money, but also time, expertise, dialogue, guidance; and
- For affinity groups and collaborative funding models, general operating support helps support staffing, a critical component of implementing and managing collaborations/working groups.

Rounding out the session were remarks from Robin Gorna about the International AIDS Conference (IAC) in Vienna (July 18-23, 2010). Ms. Gorna also previewed that if the then-pending legislation regarding the 22-year-old travel ban on HIV-positive foreigners was approved, that IAC 2012 would be held in Washington, D.C. Ms. Gorna discussed her hopes to partner closely with private philanthropy in the development and implementation of that conference. Just over a month later, President Obama publicly announced that the ban would be lifted, and on World AIDS Day 2009, Secretary of State Hillary Rodham Clinton officially announced that IAS had indeed selected Washington, D.C., to host the 2012 IAC.

ROLLING BACK THE EPIDEMIC: A Local Response with Global Applications

“The District of Columbia has become a center and a role model for collaborations and innovative public-private partnerships.”

- J. Channing Wickham, Executive Director, Washington AIDS Partnership

Washington, D.C. has the highest rate of adult HIV infections among all U.S. cities (2007 NY Times), rivaling some countries in sub-Saharan Africa. It also has a robust response to the epidemic with excellent examples of funder-catalyzed change, effective public/private partnerships and innovative and replicable programs developed by a dynamic nonprofit community.

Convening the gathering in Washington, D.C. offered the opportunity to examine the AIDS pandemic in microcosm; hear from the funders, public officials and community leaders who are working together to bring about systemic change; and explore solutions that reflected the theme of the gathering – “Investing in Change – Using Dollars and Sense to End the Pandemic.”

This session is part of the FCAA *Spotlight*³¹ series that regularly focuses on select issues or geographic areas of particular interest and importance to AIDS Funders.

Moderated by J. Channing Wickham, Executive Director, Washington AIDS Partnership, panelists included:

Dr Shannon Lee Hader	Director, The HIV/AIDS, Hepatitis, STD and TB Administration (HAHSTA), D.C. Department of Health
Walter Smith	Executive Director, D.C. Appleseed
Ron Simmons	President & CEO, Us Helping Us
Catalina Sol	Chief Programs Officer, La Clinica del Pueblo
Adam Tenner	Executive Director, Metro TeenAIDS (MTA)

The goals of the session included:

- Explore innovative ideas and solutions to the problems;
- Hear from people who are making a difference;
- Discuss lessons learned from domestic and international efforts that can be applied to any community facing similar issues.

Dr. Hader established a context for the discussion with a presentation that outlined the current state of AIDS in D.C. and the response of the DC Department of Health (DC DOH). She illustrated the scope of public/private partnerships engaged in the city’s response that, includes partnerships between DC leadership and:

- Federal dollars and technical assistance;
- Private philanthropy – dollars and expertise;
- DC Department of Health;
- DC Planning Council;
- Media;

³¹ In effort to re-focus grantmaker attention on the domestic epidemic, FCAA spotlights critical geographies and populations at-risk in the United States. The inaugural year of *Spotlight* Series Presented a multi-layered portrait of HIV/AIDS in Alabama, the past philanthropic response, and key opportunities for funders. Learn more in the report *Spotlight: Alabama* <http://www.fcaaid.org/publications/documents/FCAAALSpotlight.pdf>. Stay tuned for more information on Spotlight: D.C. The 2010 *Spotlight* will focus on HIV/AIDS in Oakland, CA. FCAA thanks the M•A•C AIDS Fund for their generous support of 2008-2009 *Spotlight* Programming.

- Healthcare providers;
- Epidemiologists;
- DC Department of Education;
- Social networks – families and individuals;
- Community-based organizations;
- Faith-based organizations;
- Academia; and
- Private businesses

Together these many partners comprise the most comprehensive, well-coordinated and effective responses in the world.

Aspects of the issues discussed included:

- Best practices for government programs and public/private partnerships;
- The use of social marketing and new technology in prevention, treatment and public awareness campaigns;
- The role of private philanthropy in driving and impacting public policy;
- Core components of replicable programs;
- Special needs and cultural barriers of immigrant communities;
- Best practices for youth-focused programs and work in schools;
- Innovative prevention work among African Americans, particularly with MSM issues;
- The key role of leadership at every intersection of collaborations;
- How tight economic parameters can sometimes spark innovative thinking and action;

Examples of existing and nascent efforts among funders included:

- Washington AIDS Partnership, a collaborative initiative of the Washington Regional Association of Grantmakers with nearly 40 funders involved;
- Global Business Coalition, Pfizer and District of Columbia DOH direct marketing campaign to consumers and physicians;
- M•A•C AIDS Fund, CVS, Female Health Company and the DC DOH condom access and use program;

Examples of existing and effective programs included:

- D.C. Appleseed Center for Law and Justice, annual “Report Card”;
- School-based STD testing;
- MTA’s comprehensive STD education and awareness program in DC schools, a partnership with DC DOH and DC Department of Education. In December 2007, MTA and it's coalition partners helped in the creation and passage of new "Health Learning Standards" for all DC youth. Now two years later, the DC Public Schools have finalized a new curriculum and are moving forward to ensure high quality instruction; and
- DC NEX – collaborative needle exchange program with partners that include: DC DOH, Prevention Works!, Bread for the City, and HIPS.

NETWORKING EVENTS



"Time and space are needed to have the conversations and build the relationships that enable communication and change to happen."

- LaTida Smith, Senior Program Officer, Saint Luke's Foundation / Chair, FCAA Board of Directors

In addition to the various institutes, panels, presentations, commentaries and facilitated discussions, FCAA provided several informal opportunities for participants to network, share information, brainstorm and develop or deepen

relationships with colleagues.

These events include:

- Wednesday's "New Leaders, Fresh Vision" opening reception where new leaders in the field were greeted by FCAA and identified to all the participants. Attendees included Robin Gorna, Dr. Eric Goosby and Mr. Stephen Lewis.
- Networking breakfasts where special interest groups (i.e., affinity groups) were encouraged to meet over breakfast.
- During Thursday's box lunch (provided by a local AIDS nutrition organization) participants were sorted by the type of Foundation they represented including community-based, private, international, and corporate. A pre-designated host facilitated introductions amongst the participants and invited general conversation.
- Thursday's closing cocktail reception allowed participants to mingle and relax.



A "Funders Marketplace" was also available throughout the gathering where funders could share publications, brochures, and other informational materials about their foundation and grantees.

NEXT STEPS FOR FCAA

The net result of the gathering for FCAA is a richness of ideas on short-term and long-term opportunities to continue to fulfill our mission and further hone our approach to *Informing, Convening and Collaborating*.

Information from a series of roundtable discussions that focused on issues of particular interest identified by participants also yielded a great many ideas on what FCAA can do moving forward to be of further targeted assistance to grantmakers working on HIV/AIDS. Some of those ideas, and ideas generated at other sessions, include:

- Convene and facilitate an inter-affinity working group focused on the reproductive rights of women with HIV and AIDS;
- Convene and facilitate a working group to identify opportunities for cross-funder support of critical advocacy efforts;
- Convene an exploration of a human rights approach to funding for HIV/AIDS – both domestically and internationally;
- Expand FCAA’s 2010 resource tracking to include an analysis of top funded policy issues by grantmaker and by grantee;
- Support the participation of the philanthropic sector in the development of a U.S. National HIV/AIDS Strategy;
- Host funder-only conference calls on emerging issues, i.e., evaluating advocacy, Ryan White reauthorization, PEPFAR initiatives, CDC revisions, healthcare reform, lifting of federal travel ban for people living with HIV/AIDS, etc.
- Convene region-specific issue briefings, i.e., funding for HIV/AIDS-related nonprofits in California;
- Collect and disseminate best practices in public/private partnerships;
- Support leadership development efforts of grantmakers by sharing effective models, particularly those that promote minority representation in philanthropy & nonprofits;
- Host a series of educational forums on advocacy, leadership development, rights-based comprehensive sexuality/sexual health education, battling stigma, social marketing and other issues that grantmakers want to learn more about;
- Provide resources to foundations on how to use non-grant-making powers (advocacy, media, convenings, etc.) to advance philanthropic goals;
- Identify emerging areas of HIV/AIDS funding needs; and
- Identify intersections of global and domestic priorities for U.S.-based philanthropy.

APPENDIX

- I Pre-gathering Survey
- II Planning Committee
- III Attendee List
- IV Comments from Participants
- V FCAA Board of Directors
- VI Resource list – *FCAA Connect*

Appendix I: Pre-Gathering Survey

1.) What is your name, title and organization?

2.) What Gathering Activities will you attend? Please select all that apply.

- Wednesday Opening Institute: Reproductive Rights of Women with HIV/AIDS- 2:00-5:00 pm
- Wednesday Opening Institute: AIDS, Media & Technology - 2:00-5:00 pm
- Wednesday Networking Cocktail Reception - 5:30 - 7:00 pm
- Thursday breakfast 8:00 - 8:45 am
- Thursday plenary luncheon - 12:00 - 1:15 pm
- Thursday Networking Cocktail Reception - 5:30 - 7:00 pm
- Friday breakfast - 8:00 - 8:45 am
- Friday half-day session - 9:00 am - 12:30 pm

3.) What type of grantmaking institution is your organization?

- Community
- Corporate
- Family
- Private
- Other (please specify)

4.) Does your institution currently fund HIV/AIDS programs?

- Domestic
- International
- Both
- Neither

5.) What type of HIV/AIDS programs/services do you fund? Please select all that apply.

- Advocacy &/or Policy
- Capacity building
- Housing
- Legal aid/assistance
- Nutrition
- Prevention
- Research
- Social services
- Treatment
- Other (please specify)

6.) In addition to your grantmaking priorities, which of these issues would you be interested in learning more about?

- Advocacy &/or Policy
- Capacity building
- Housing
- Legal aid/assistance
- Nutrition
- Prevention
- Research
- Social services
- Treatment
- Other (please specify)

7.) What are the target populations of your funding? Please select all that apply.

- | | |
|--|--|
| <input type="checkbox"/> African Americans | <input type="checkbox"/> MSM who have sex with men |
| <input type="checkbox"/> Asians/Pacific Islanders | <input type="checkbox"/> Native Americans |
| <input type="checkbox"/> Health Care Workers (HCW) | <input type="checkbox"/> Orphans/vulnerable Children |
| <input type="checkbox"/> Incarcerated People | <input type="checkbox"/> PLWHA |
| <input type="checkbox"/> Injecting Drug Users | <input type="checkbox"/> Sex Workers |
| <input type="checkbox"/> Latinos | <input type="checkbox"/> Women/Girls |
| <input type="checkbox"/> LGBT Communities | <input type="checkbox"/> Youth |
| <input type="checkbox"/> Migrant Populations | <input type="checkbox"/> Other (please specify) |

8.) As part of the agenda, we will be hosting a facilitated discussion on the future of HIV/AIDS funding. What small-group discussion topic(s) would you be most interested in? Please select all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Effective Grassroots Advocacy | <input type="checkbox"/> Leadership Development |
| <input type="checkbox"/> Health Care Reform | <input type="checkbox"/> Reaching Marginalized |
| <input type="checkbox"/> Innovative Prevention | <input type="checkbox"/> Other (please specify) |

9.) Are you currently - or have you ever been - involved in any collaborative funding initiatives? If yes, please describe.

10.) How is your grantmaking being impacted by the economic crisis? Please select all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Increased grantmaking activity (dollars, grantees) | <input type="checkbox"/> Reduced program activities |
| <input type="checkbox"/> Maintained grantmaking activity (dollars, grantees) | <input type="checkbox"/> Reduced staff & administrative budgets |
| <input type="checkbox"/> Reduced grantmaking activity (dollars, grantees) | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Change in granting restrictions (type and/or size of support, grantee requirements) | |

11.) How is the funding for HIV/AIDS programs faring in comparison to other programs at your organization?

- | | |
|-------------------------------------|---------------------------------|
| <input type="checkbox"/> Greater | <input type="checkbox"/> Lesser |
| <input type="checkbox"/> Comparable | <input type="checkbox"/> N/A |

12.) Have you reached out to other funders on behalf of any grantees who will now receive less (or no) support from your organization?

- | | |
|------------------------------|------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |
| <input type="checkbox"/> No | |

13.) What can Funders Concerned About AIDS do to help you during this time?

14.) What are you hearing from your grantees in terms of the impact of the economic crisis?

15.) May we use the name of your foundation in our report of these survey findings?

- Yes No, I prefer it to remain confidential

16.) How did you hear about the Inaugural FCAA Annual Gathering?

17.) FCAA will be highlighting examples of innovation throughout the gathering. Below, please describe in brief any examples of innovative grantmaking methods and/or programs that you are involved in or supporting. We will follow up with you for greater detail.

18.) FCAA will be providing space at the Annual Gathering for you and your colleagues to share information about your organizations and funding initiatives. Would you like to submit materials for the "Marketplace"?

- Yes No

19.) Are you interested in becoming more involved in FCAA? Please check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Funder briefings/gatherings | <input type="checkbox"/> Publications |
| <input type="checkbox"/> Issue-focused funder working groups | <input type="checkbox"/> Periodic e-newsletter |
| <input type="checkbox"/> Annual resource tracking survey & publication | <input type="checkbox"/> Fundraising/Membership |
| <input type="checkbox"/> FCAA Connect - our funder-only networking intranet | <input type="checkbox"/> Other |

Appendix II: Planning Committee

We owe a special debt of gratitude to the following people who gave very generously of their time and talents to ensure that our inaugural Annual Conference would be a great success.

Chair, **Melanie Havelin**, Executive Director, John M. Lloyd Foundation

Frank Abdale

Abdale Consulting
Annual Gathering Consultant

David Barr

Director, Collaborative Fund for HIV Treatment
Preparedness, Tides Foundation

Bob Bronzo

Former Program Manager
Fundors Concerned About AIDS

Scott Campbell

Executive Director
Elton John AIDS Foundation

Gregory W. Edwards

Executive Director
Flowers Heritage Foundation

Kandy S. Ferree

President & CEO
National AIDS Fund

Desiree Flores

Program Officer
Ms. Foundation for Women

Anthony Flynn

Head of Resource Development
International AIDS Society

Anu Gupta

Director, Corporate Contributions
Johnson & Johnson

Thomas Henning

Chief Operating Officer
Cable Positive

Brittany Hume

Program Officer, Corporate Contributions
Johnson & Johnson

Mark Ishaug

President & CEO
AIDS Foundation of Chicago

Jennifer Kates

Vice President; Director, HIV Policy
The Henry J. Kaiser Family Foundation

Tamara Kreinin

Executive Director of Women and Population
United Nations Foundation

Peter Laugharn

Executive Director
Firelight Foundation

Ron MacInnis

Director of Policy & Programmes
International AIDS Society

LaTida Smith

Senior Program Officer
St. Luke's Foundation of Cleveland, Ohio

Jasmine Thomas

Program Officer for Community Revitalization
Surdna Foundation

Betty Wilson

Executive Director and CEO
Health Foundation of Greater Indianapolis, Inc.

Zonibel Woods

Program Manager
Ford Foundation

Extra special thanks to our AmeriCorps volunteers from the Washington AIDS Partnership, and our volunteers from The Women's Collective: Phronie Jackson, Angela O'Brien, Eva Pesch, Maxine Robinson, Kimberly Shrader. We are so grateful for your time and help this week in D.C. We couldn't have done this without you!

Appendix III: 2009 Gathering Attendees

Frank Abdale
Principal
Abdale Consulting

Brian Ackerman
International Policy Manager
Advocates for Youth

Makfire Alija
EFG Network Coordinator
EFC European HIV/AIDS Funders Group

Maureen Baehr
Principial
Baehr Consulting

John L. Barnes
Interim Executive Director
Funders Concerned About AIDS

Victor Barnes
Vice President of External Affairs
National AIDS Fund

Paurvi Bhatt
Consultant

Elizabeth Blowers-Nyman
Senior Director, Health Policy
Merck & Co., Inc.

Lisa Bohmer
Director of Global Partnerships & Program
Resource Management
Elizabeth Glaser Pediatric AIDS Foundation

Dr. Astrid Bonfield
Chief Executive
The Diana, Princess of Wales Memorial
Fund

Rosemary Browne
Director of Programs
AIDS Fund of South Central Pennsylvania

Stuart Burden
Philanthropy Advisor

Thomas J. Coates
Michael and Sue Steinberg Professor of
Global AIDS Research, Division of Infectious
Diseases, Department of Medicine
UCLA David Geffen School of Medicine

Jonathan Cohen
Director of the Law and Health Initiative, Public Health
Open Society Institute

Chris Collins
Vice President and Director of Public Policy
amfAR

Jeffrey Crowley
Director, Office of National AIDS Policy and
Senior Advisor on Disability Policy
Office of National AIDS Policy

Ray T. Daniels
Communications Officer
National AIDS Fund

Paul Di Donato
Trustee /Philanthropic Consultant
Broadway Cares-Equity Fights AIDS

Aissatou Diajhate
Director of Programmes
Stephen Lewis Foundation

Paul Dien
Director, Strategic Partnerships
Staying Alive Foundation at MTV Networks International

Dazon Dixon Diallo
Founder & CEO
SisterLove, Inc.

Paula Donovan
Co-Director
AIDS-Free World

Adisa Douglas
Senior Advisor
Funders Network on Population, Reproductive Health &
Rights

Diana Echevarria
Executive Director, NA Programs
M•A•C AIDS Fund

Gregory (Greg) W. Edwards
Executive Director
Flowers Heritage Foundation

Maria Ellis
Board Chair
Women's Collective

Melissa Federman
Program Coordinator
AIDS Funding Collaborative

Kandy S. Ferree
President and CEO
National AIDS Fund

Desiree Flores
Program Officer
Ms. Foundation for Women

Anthony Flynn
Head of Resource Development
International AIDS Society

Andrea Flynn
Executive Director, International
M•A•C AIDS Fund

Kim Frawley
Director, Worldwide Philanthropy
Pfizer, Inc.

Françoise Girard
Director, Public Health Programs
Open Society Institute

Tierney Gleason
Philanthropic Associate
Tides Foundation

Benjamin Gobet
Global Flows Technical Officer
UNAIDS

Miguel Gomez
Director
AIDS.gov

Eric Goosby
Ambassador at Large and U.S. Global AIDS
Coordinator
U.S. President's Emergency Plan for AIDS
Relief (PEPFAR)

Steve Gunderson
President & CEO
Council on Foundations

Vineeta Gupta
Program Officer for South Asia
The Global Fund for Children

Rebecca Haag
President & CEO
AIDS Action Committee Massachusetts

Nora Hanna
Executive Director
Until There's A Cure Foundation

Melanie Havelin
Executive Director
John M. Lloyd Foundation

Brittany Hume
Corporate Contributions
Johnson & Johnson

Krista Johnson
Assistant Professor
Howard University

Jennifer Jue
Program Manager
Washington AIDS Partnership

Rihanna Kola
Director, Global HIV/AIDS Program
Merck & Co., Inc.

Stephen Lewis
Co-Director
AIDS-Free World

Nancy Mahon
Executive Director
M•A•C AIDS Fund

Jill Mathis
Director of New Business Development
Elizabeth Glaser Pediatric AIDS Foundation

Robin Gorna
Executive Director
International AIDS Society

Sarah Gunther
Program Officer, East Africa
American Jewish World Service

Lydia Guterman
Program Coordinator, Public Health
Open Society Institute

Shannon Lee Hader, MD MPH
Director of the HIV/AIDS Administration
D.C. Department of Health

Catherine Hanssens, J.D.
Executive Director and Founder
Center for HIV Law and Policy

Helen Hicks
CEO
Michigan AIDS Coalition

Mark Ishaug
President/CEO
AIDS Foundation of Chicago

Vincent Jones
Senior Program Officer
Liberty Hill Foundation

Jennifer Kates
Vice President and Director, HIV Policy
The Henry J. Kaiser Family Foundation

Peter Laugharn
Executive Director
Firelight Foundation

Diane Lewis
Executive Vice President
ALTA Consulting Group, Inc./Consumer Health Foundation
Trustee

Ann E. Maldonado
Administrative Coordinator
Fundors Concerned About AIDS

Ben Francisco Maulbeck
U.S. Programs Director
Hispanics in Philanthropy - Northeast Region

Sam Graham-Felsen
Director of Content and Research
Blue State Digital

Anu Gupta
Director Corporate Contributions
Johnson & Johnson

Oriol R. Gutierrez, Jr.
Deputy Editor, POZ and Real Health
POZ Magazine, Smart + Strong

Sarah Hamilton
Development & Communications Manager
Fundors Concerned About AIDS

Laureen Tews Harbert
Director
AIDS Funding Collaborative

Susan (Sue) Hoechstetter
Senior Advisor, Foundation Advocacy
Initiative and Advocacy Planning &
Evaluation
Alliance for Justice

Eno Isong
Senior Program Officer
The Henry J. Kaiser Family Foundation

James Jones
Senior Program Associate
The DC Appleseed Center for Law and
Justice, Inc.

Suzanne Kinsky
Program Officer
National AIDS Fund

Daniel Jae-Won Lee
Executive Director
Levi Strauss Foundation

Ron MacInnis
Director of Policy & Programmes
International AIDS Society

Ellen Marshall
Consultant, U.S. Foreign Policy
International Women's Health Coalition

Terry McGovern
Program Officer, HIV/AIDS
Ford Foundation

Elizabeth Merola
Deputy Director
U.S. Fund for UNICEF

Mardell Moffett
Senior Program Officer
Morris & Gwendolyn Cafritz Foundation

Todd Murray
Executive Director
Hope's Voice International

Patricia Nalls
Founder and Executive Director
The Womens Collective

Nandini Oomman
Director, HIV/AIDS Monitor
Center for Global Development

Lee-Lee Prina
Senior Editor
GrantWatch

Jeffrey Richardson
Vice President
Abbott Fund

Jessica Riviere
Associate Director, Advocacy and Policy
Bristol Myers Squibb

Asia Russell
Health GAP

Natasha Sakolsky
US Director
International HIV/AIDS Alliance

Julie Scofield
Executive Director
National Association of State and Territorial
AIDS Directors (NASTAD)

Michel Sidibé
Executive Director
UNAIDS

Serra Sippel
President
Center for Health and Gender Equity
(CHANGE)

Helen Miramontes
Board Member
Until There's A Cure Foundation

Michele Moloney-Kitts
Assistant U.S. Global AIDS Coordinator
U.S. President's Emergency Plan for AIDS Relief (PEPFAR)

Niamani Mutima
Executive Director
Africa Grantmakers Affinity Group

Jacqueline Nolley Echegaray
Associate for International Programs
The Moriah Fund

John Oshima
Program Officer (Health)
The ELMA Philanthropies Services

Kathleen Quirk
Program Officer
National AIDS Fund

Daniella Rivera
Fellow
AIDS.gov

Tim Rosta
Board Member
Staying Alive Foundation at MTV Networks International

Owen Ryan
Associate Program Officer, Global Health, Policy and
Advocacy
Bill & Melinda Gates Foundation

Shira Saperstein
Deputy Director
The Moriah Fund

Denise Shannon
Executive Director
Fundors Network on Population, Reproductive Health &
Rights

Ron Simmons
President & CEO
Us Helping Us, People Into Living, Inc.

LaTida Smith
Senior Program Officer
Saint Luke's Foundation

Faith Mitchell
Vice President for Program and Strategy
Grantmakers in Health

David Ernesto Munar
Vice President, Policy & Communications
AIDS Foundation of Chicago

Alyce Myatt
Executive Director
Grantmakers in Film + Electronic Media

James (Jim) O'Brien
Director
International AIDS Vaccine Initiative (IAVI)

Suzanne Petroni
Senior Program Officer
The Summit Foundation

Michael Rhein
Director of Programs & Partnerships
National AIDS Fund

Lourdes Rivera
Program Officer
Ford Foundation

Gwen Rubinstein
Program Officer
Washington Area Women's Foundation

Terry Ryan
Special Grants Manager
Michigan AIDS Coalition

Karen Schneider
Project Director
The DC Appleseed Center for Law and
Justice, Inc.

David Sheppard
Executive Director
DIFFA

Dr. Michael Sinclair
Senior Vice President
The Henry J. Kaiser Family Foundation

Walter Smith
Executive Director
The DC Appleseed Center for Law and
Justice, Inc.

Catalina Sol
Chief Programs Officer
La Clinica del Pueblo

Todd Summers
Senior Program Officer, Global Health, Policy
and Advocacy
Bill & Melinda Gates Foundation

Adam Tenner
Executive Director
Metro TeenAIDS

Ioanna Trilivas
Associate Director
International HIV/AIDS Alliance

Julie Veroff
Executive Director
FACE AIDS

Silvija Staprans
Sr. Director
Merck & Co., Inc.

Mohan Sundararaj
Health Policy Intern
amfAR

Jasmine Thomas
Program Officer for Community Revitalization
Surdna Foundation

Angela Van Croft
Donor Relations Officer
National AIDS Fund

J. Channing Wickham
Executive Director
Washington AIDS Partnership

Sean Strub
President & CEO
Cable Positive

Brandy Svendson
Director of Development and Partnerships
Hope's Voice International

Paula Toynton
Director
New Jersey AIDS Partnership

Dea Varsovczky
Program Coordinator
AIDS Action

Phill Wilson
Executive Director
Black AIDS Institute

Appendix IV: Comments from Participants

“Thanks for helping us to do what we so frequently wish to do – a better job.”

FCAA included an evaluation form in the program binder to assess attendee’s opinions of the agenda content, meeting format, and materials. When asked to rank the value of the separate elements of the program, the majority of respondents answered (in rank order) those opportunities for formal and informal networking were the most helpful, followed closely by the U.S. AIDS Policy and Funding discussion. Attendees found having a gathering that balanced both domestic and international funding issues was helpful, but suggested that FCAA also provide the platform for separate, more in-depth conversations on both issues. Overall attendees commented that it was a successful first gathering; while they suggested having less speakers on panels in the future, they did enjoy the multiple session formats, and overwhelmingly praised the “non-PowerPoint” style as helping to build an intimate and collegial environment.

Below, please find some of the additional comments that were provided.

I. What take away from the Annual Gathering has the most importance for you?

“It’s gratifying to know that there is so much support among FCAA members for advocacy and core-support funding...”

“Role of non-grantmaking activities that funders can leverage to make change.”

“I had the opportunity to meet several people whom to date I had only know via phone or email...or even reputation. Broadening my relationships within the field of AIDS will help me in my work in numerable ways.”

2. Are there action steps you would suggest FCAA consider as an outgrowth of the Annual Gathering?

“Working group on human rights sharing resources on core/general operating support.”

“Briefings on PEPFAR-related issues.”

“It would be great to see FCAA take a leadership role in continuing the discussion about supporting grantee advocacy capacity-building and leadership development that was started at the gathering.”

“More convenings (regional, international, with bilateral agencies and governments) at the senior executive level and above/below to discuss program priorities and investments.”

“Reproductive Health Sexual Rights/HIV working group...”

“Database of “members” grantees akin to Funders Network would be very helpful.”

“Programming around leadership development for junior-level philanthropy professionals.”

“Effective ways and means to engage the huge consumer population in raising funds which could be granted by experienced funders. The success of Obama’s strategy (media session) is a striking example.”

“For future meetings, a kind of donor “match-making” session would be interesting. For example, I am interested in funding X, and am looking for a co-funder...”

Appendix V: FCAA Board of Directors

Executive Committee

LaTida Smith, Chair

Saint Luke's Foundation of Cleveland, Ohio

Daniel Jae-Won Lee, Vice Chair

Levi Strauss Foundation

Anu Gupta, Treasurer

Johnson & Johnson

Melanie Havelin, Secretary

John M. Lloyd Foundation

John L. Barnes, Executive Director

Alicia Carbaugh*

Henry J. Kaiser Family Foundation

Patricia Doykos Duquette

Bristol-Myers Squibb Foundation

Gregory W. Edwards

Flowers Heritage Foundation

Kandy S. Ferree

National AIDS Fund

Mark Ishaug

AIDS Foundation of Chicago

Nancy Mahon*

M•A•C AIDS Fund

Owen Ryan*

Bill & Melinda Gates Foundation

Jasmine Thomas

Surdna Foundation

J. Channing Wickham*

Washington AIDS Partnership

**Newly appointed members, terms
begin January 2010*

FCAA would also like to recognize the outstanding service of our outgoing Board members: Jen Kates, Henry J. Kaiser Family Foundation; Mia Herndon, Third Wave Foundation; and Kanika Bahl, The William J. Clinton Foundation.

Appendix VI: Annual Gathering Resources

FCAA collected presentations, resources, and publications that were discussed during the gathering and uploaded them to one central location: the *FCAA Connect* Library. As discussed on page 3, *FCAA Connect* is a great place to stay connected to your colleagues and the innovative examples and resources they offered in D.C.

We encourage you to look through the many documents and links we have collected thus far. You can also share any you would like to add to the discussion. In the "Program Materials," you can find instructions on how to add materials to the library. If you have any questions, please contact Sarah Hamilton at sarah@fcaaid.org.

In *FCAA Connect* go to **Library > Resources from FCAA's 1st Annual Gathering** where you will find the following folders:

Program Materials

Includes:

- Full program
- Attendee list
- Evaluation form
- Board Nominations Form
- Welcome to *FCAA Connect* (instructions for using the site)

“AIDS, Media & Technology” Resources

Includes:

- Opening remarks from moderator Sean Strub, Cable Positive
- Panelist presentations
- Blogs written by panelists from POZ.com and Hope's Voice International.
- Link to more info on the Henry J. Kaiser Family Foundation Entertainment Media Partnerships.
- Link to the Grantmakers in Film & Electronic Media's Media Database, a searchable database of media projects-in-progress.
- Link to the Center for HIV Law and Policy's Resource Bank, a comprehensive database of quality memoranda, research, reports, legal guides, court and agency decisions, pleadings and briefs, policy analyses and recommendations, and other materials on topics of importance to people living with HIV and their advocates

"Reproductive Rights of Women with HIV and AIDS" Resources

Includes:

- Notes from Reproductive Rights of Women with HIV and AIDS Institute
Critical Issues for Women and HIV: Health Policy and the Development of a National AIDS Strategy
- Improving Global AIDS Policy for Young People: Where We Are and Where We Should Be. Presentation from Brian Ackerman, International Policy Manager, Advocates for Youth
- Investing in Youth: Solving the Sustainability Challenge in PEPFAR (Advocates for Youth)
- Link to YouTube video on young mothers in Ethiopia. This brief video provides some perspective about the experience of young women's access to sexual and reproductive health services.

"Future of HIV/AIDS Funding in the Private Sector" Resources

Includes:

- Link to the Council on Foundations' "Next Generation Taskforce."
- *Philanthropic Investment in HIV: What To Do To Make A Difference by 2015*, Coates et al. May 2009.
- Barclays Wealth July 2009 Publication and Press Release, "Tomorrow's Philanthropist," Cited by Nancy Mahon during panel regarding an increased trend by consumers (notably, women) in products and companies with a corporate giving program. Nancy also noted that philanthropy is increasingly being seen as a corporate business expense.

"Future of Funding for HIV/AIDS in the Public Sector" Resources

Includes:

- NASTAD: State General Revenue Cuts in HIV/AIDS and Viral Hepatitis Programs September 2009
- Bill & Melinda Gates Foundation Living Proof Project: Progress Sheet on Global Health
- Bill & Melinda Gates Foundation Living Proof Project: Progress Sheet on HIV and AIDS

"Postcards from the Edge" Resources

Includes:

- Moderator Daniel Lee's opening presentation
- HIV-Related Talking Points on Health Care Reform (AIDS Foundation of Chicago)
- *The Global Economic Crisis and HIV Prevention and Treatment Programmes: Vulnerabilities and Impact*. UNAIDS, World Bank.
- *Tips to Form Effective Community Testimony to Shape a Result-Oriented National HIV/AIDS Strategy*. HIV Prevention Justice Alliance.
- NHAS Training Slides, HIV Prevention Justice Alliance. How can we turn our community stories and years of work into concise, effective testimony that will be compelling and effective in shaping the National HIV/AIDS Strategy (NHAS).
- Link to Office of National AIDS Policy - HIV/AIDS Community Discussions
- Link to A Call to Action from the Office of National AIDS Policy

Examples of Funder Innovation

Includes:

- *Local Voices, Global Ban: How small grants to local campaigners can contribute to global change.* Diana, The Princess of Wales Memorial Fund.
- AIDS Funding Collaborative (AFC) Annual Report 2008
- *Evaluation of Responsible Sexual Behavior: Cleveland Metropolitan School District.* Evaluation Report from the K-12 comprehensive sexuality education program in the Cleveland Metropolitan School District for the 2007-2008 school year. The program was implemented by AFC
- Evaluation Brief for K-12 Responsible Sexual Behavior Education Initiative (AFC)
- Tides - Catalyst Fund Brochure. Discussed during Friday's "Exploring New Horizons" panel, The Catalyst Fund (housed through the Tides Foundation) is an innovative and collaborative funding model. On page 4 of the brochure read how the Catalyst Fund removes obstacles from funding that helps leverage resources toward reproductive rights.
- Link to NASTAD's Leadership Development Assessment Report Series--Leadership Development and Management Needs Assessment
- Link to Hispanics in Philanthropy's Funders' Collaborative
- Link to Agile grantmaking for cluster bomb ban wins top award - Diana, Princess of Wales Memorial Fund. As highlighted by Astrid Bonfield, more information on the Diana, Princess of Wales Memorial Fund's support the global cluster munitions campaign, which resulted in a new international treaty. See PDF for more information.
- Link to AIDS Foundation of Chicago's Public Health Boot camp
- Link to Kaiser Media Fellowships and Intern Program. Cited by Jen Kates as a possible model for an "Advocacy Fellowship" program.
- Link to Health and Human Rights: A Resource Guide. Prepared by the Open Society Institute and Equitas, this resource guide is designed to support health and human rights advocacy, training, education, programming, and grantmaking worldwide.