Over the course of the HIV epidemic, advocacy and rights-based programming has driven scientific and therapeutic advancements, changed policies and public opinion, and raised the voices and protections of those most vulnerable. Unfortunately, this crucial work is often undertaken with inadequate support and in the face of political opposition. With a new U.S. Administration that has signaled potential dramatic funding cuts and roadblocks to domestic and global health, foreign aid, the U.S. Department of Health and Human Services, the National Institutes of Health and family planning services, it is critical to better understand the current nature of HIV-related philanthropic funding for advocacy and human rights to identify, and respond to, potential future gaps in the response.

In July of 2016, we published our first data benchmark on HIV philanthropy for human rights that illuminated the critical work of advocacy within HIV/AIDS funding streams to reduce stigma, expand legal services, inform policy efforts, protect the rights of those most vulnerable, and to combat widespread discrimination. Given the relationship between advocacy and human rights, we have since aligned our taxonomy to both analyze and discuss these issues and strategies interchangeably.

FCAA firmly believes that universal access to healthcare - including HIV treatment, prevention and care - is not only a fundamental human right, but also provides a remarkable return on investment. Resources allocated to HIV/AIDS are some of the most efficient and effective dollars that can be spent, paying enormous dividends in terms of public health, trade, economic security and leveraging capacity.

With the uncertainty of our current political climate, FCAA also developed an Advocacy Network in 2017 to respond to the needs of funders trying to remain informed and prepared to act. It is in this context that this data spotlight on the importance of advocacy and human rights funding emerges, distilled from FCAA’s annual resource tracking report Philanthropic Support to Address HIV/AIDS in 2015.

IN 2015: $123,493,268 in HIV-related philanthropy addressed advocacy and human rights

35% increase from previous year

REPRESENTING:
FUNDERS: 187
GRANTS GIVEN: 1,686
GRANTEE ORGANIZATIONS: 892

$123,493,268 in HIV-related philanthropy addressed advocacy and human rights

WHY IS THIS IMPORTANT?
Funding for organizations doing advocacy and rights-based work is our strongest tool to leverage private funding to ensure adequate public resources and sound policy. But as we know, public funding for the epidemic is under attack.

As of April 1, 2017, the new administration has indicated it will make cuts upwards of:

- 28% = $10B
  From the STATE DEPARTMENT & USAID

- 18% = $15B
  From HEALTH AND HUMAN SERVICES

- 18% = $5.8B
  From the NATIONAL INSTITUTES OF HEALTH

The White House has also proposed additional cuts in FY2017, including a dramatic $300 million from PEPFAR, and has already released a January Executive Order reinstating the “Global Gag Rule” to restrict funding for international family planning services. In addition, there likely will be future attempts to repeal or cut the Affordable Care Act, as well as attempts to restrict funding for Planned Parenthood.

TOP 10 FUNDERS
1) Gilead Sciences, Inc.
2) M•A•C AIDS Fund and M•A•C Cosmetics
3) Ford Foundation
4) Bill & Melinda Gates Foundation
5) Open Society Foundations
6) Elton John AIDS Foundation (US & UK)
7) Viiv Healthcare
8) AIDS United
9) Levi Strauss & Co.
10) Tides Foundation

TOP 10 DONORS

83% of HIV philanthropy for advocacy came from

PHILANTHROPY accounts for roughly
2% of total global resources for HIV/AIDS

AND
HIV-related philanthropy for ADVOCACY & HUMAN RIGHTS is only
18% of that already small slice of the pie

83% of HIV philanthropy for advocacy came from

892 GRANTEE ORGANIZATIONS
Even though 41% of HIV philanthropy for advocacy and human rights was distributed to key populations in 2015— including sex workers, people who inject drugs, transgender people, and gay men and other men who have sex with men (MSM)— there are still many communities that are heavily impacted by the epidemic and insubstantially funded. For example:

**Eastern Europe and Central Asia** have:
- **19%** of HIV-related philanthropy for advocacy and human rights
- **YET ONLY 5%** received of new infections among key populations
- **0%** of HIV-related philanthropy for advocacy and human rights

In the United States, **African Americans and Latinxs** represent:
- **12%** of population
- **44%** of new HIV diagnoses
- **3%** of total advocacy funding

**Why is this important?**

- **32%** of funding went to low- and middle-income countries

**US Regional Distribution**

- **52%** US national
- **<1%** US territories

- **42%** of funding in the US went to state and local efforts;
- **56%** went to national and regional efforts

Recent data suggests that roughly:
- **1 in 2** black MSM
- **1 in 4** Latino MSM in the U.S. will be diagnosed with HIV during their lifetime.
Looking forward, we want to emphasize the importance of funding advocacy and human rights in these uncertain times. Only through this funding can we ensure the global voice for HIV is given the support it needs to continue to fight for the resources necessary to end HIV.

Some of the strategies these advocates employ include educating constituents and community leaders to combat stigma and discrimination within and outside their communities; providing legal services for PLWHA who are victims of discrimination and unfair criminalization laws; and developing the capacity of organizations and new leaders that are representative of the epidemic in their locale. Supporting these services, as well as providing critically needed general operating funds for organizations doing this work, are important steps towards helping to reignite the fight, and to be sure this fire does not diminish in the face of potentially devastating cuts at the federal and international levels.