FCAA DATA SPOTLIGHT

HIV PHILANTHROPY FOR ADVOCACY & HUMAN RIGHTS



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.

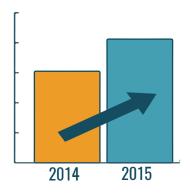
FCAA firmly believes that universal access to healthcare - including HIV treatment, prevention and care - is not only a fundamental human right, but also provides a remarkable return on investment. Resources allocated to HIV/AIDS are some of the most efficient and effective dollars that can be spent, 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

REPRESENTING:



35% increase from previous year

GENERAL FUNDING DISBURSMENT

\$123,493,268

in HIV-related philanthropy addressed advocacy and human rights



GRANTEE ORGANIZATIONS

PHILANTHROPY

accounts for roughly



HIV-related philanthropy for **ADVOCACY & HUMAN RIGHTS**

ROPY

2%
of total global resources for HIV/AIDS

18% of that already small slice of the pie

TOP 10 FUNDERS

- 1) Gilead Sciences, Inc.
- 2) M•A•C AIDS Fund and M•A•C Cosmetics
- 3) Ford Foundation

is only

- 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



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:



From the STATE DEPARTMENT & USAID



From HEALTH AND HUMAN SERVICES

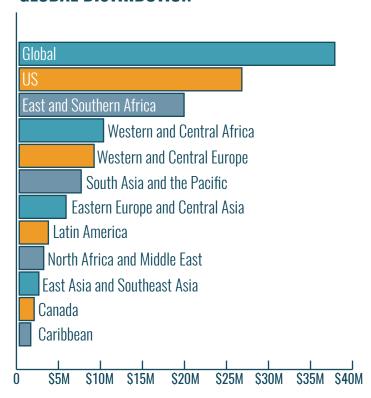


From the NATIONAL INSTITUTES OF HEALTH

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.

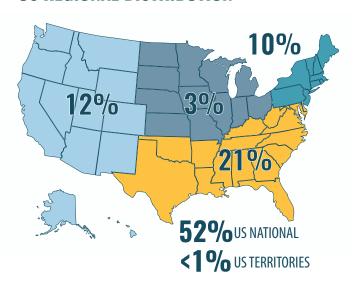
GEOGRAPHIC DISTRIBUTION OF FUNDING

GLOBAL DISTRIBUTION



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

US REGIONAL DISTRIBUTION



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

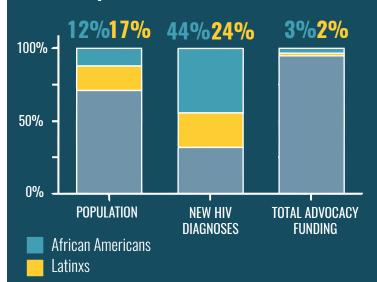
WHY IS THIS IMPORTANT?

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:



In the United States African Americans and Latinxs represent:



Recent data suggests that that roughly:



in the U.S. will be diagnosed with HIV during their lifetime.

FUNDING DISTRIBUTION BY TOP 15 POPULATIONS STRATEGIES OF HIV PHILANTHROPY FOR **ADVOCACY & HUMAN RIGHTS** People living with HIV (general) The following are examples of key advocacy and rights-related strategies supported by HIV philanthropy in 2015. Women & girls EDUCATION, OUTREACH Youth (15-24) & AWARENESS BUILDING People who inject drugs Sex workers General **LEGAL SERVICES** Children (0-14) MSM - including gay men Transgender Economically disadvantaged/homeless Focused on efforts to target HIV criminalization African American (U.S.) **Migrants** CAPACITY BUILDING Latino (U.S.) & LEADERSHIP DEVELOPMENT Incarcerated/formerly incarcerated Health care workers N \$10M \$20M \$30M \$40M of grants were in the form of 18% GENERAL OPERATING SUPPORT

WHY IS THIS IMPORTANT?

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.