

STRATEGIC PLAN

2016 – 2018



FUND

CONVENE

ADVOCATE

WHO WE ARE



The AIDS Funding Collaborative (AFC) strengthens the community's response to HIV / AIDS as a public / private partnership providing coordination, leadership, advocacy, and funding in Greater Cleveland.

OUR VISION

We believe that Greater Cleveland can be a place of health and opportunity for everyone who lives here and that we can make significant progress against HIV and AIDS.

ACHIEVE PROGRESS TOWARD ENDING THE HIV/AIDS EPIDEMIC

As of 2015, too many people are newly infected by HIV every year in Cuyahoga County.

HIV is preventable. People's risk of HIV drops dramatically when they routinely test for HIV, have access to condoms, and access appropriate treatment, medical care, harm reduction support, and social services. Yet despite this, approximately 200 people in Cuyahoga County are newly diagnosed with HIV every year.

By 2018, the number of people infected by HIV each year could drop by 25%.

If routine HIV testing, support for safer sex and safer drug use, and appropriate medical care and social services become accessible, Cleveland could see fewer than 150 people newly diagnosed with HIV each year, signaling a drop of 25 percent in new HIV infections.

As of 2015, too many people in Cuyahoga County were not treated for their HIV infection.

HIV is treatable. If people have access to the medicines that treat and prevent HIV, no one should have to fall ill due to HIV or should even contract the virus. Yet despite this, it is estimated that only one third of the 4,800 HIV-positive people in Cuyahoga County is accessing the treatment they need to fully suppress the virus.

By 2018, the number of HIV-positive people accessing HIV treatment and achieving viral suppression locally can double.*

Treatment success will require access to health-care and also a range of support services, including mental health, addiction and harm reduction, transportation, housing, and employment support.

**As witnessed in jurisdictions where resources were marshalled and coordinated to support people living with HIV in self-care.*

ADVANCE HEALTH AND REDUCE HEALTH DISPARITIES IN GREATER CLEVELAND

In 2015, Cuyahoga County ranked 65th of 88 Ohio counties in overall health.

According to the 2015 County Health Rankings (www.countyhealthrankings.org), our region excels in number of primary care physicians and other measures of potential healthcare access, but we fail in several health outcomes such as high rates of sexually transmitted infections and in other factors of health.

We should all strive to make Cuyahoga a healthier county.

Every person in Cuyahoga County should be supported to achieve good health, not only by preventing infections like HIV, but also by addressing key health issues such as exercise, nutrition, mental health, and management of chronic conditions such as asthma, diabetes, or addiction.

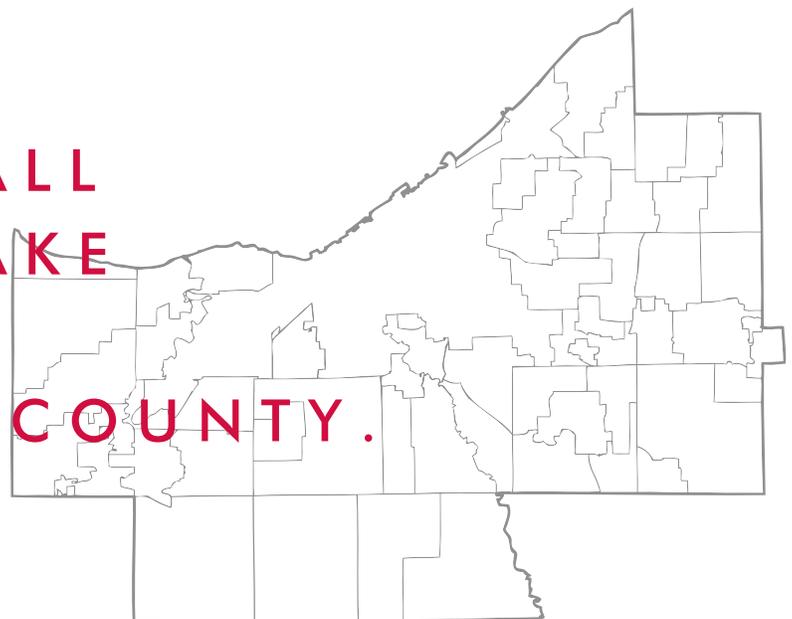
In 2015, Cleveland ranked 41st of the 50 largest U.S. metropolitan areas for upward economic mobility.

People's access to employment, housing, education, and healthcare shapes their ability to achieve and maintain good health. Cleveland needs to tackle poverty and disparities of opportunity to make progress against HIV/AIDS. (web.stanford.edu/group/scspi)

Cuyahoga County should strive to be a place where people succeed.

Every person should have social and economic opportunity, no matter their gender, age, race or ethnicity, national origin, sexuality, gender identity, health status or economic background.

WE SHOULD ALL STRIVE TO MAKE CUYAHOGA A HEALTHIER COUNTY.



OUR PRIORITIES

During 2016–2018, the AFC will prioritize the health of key populations and the increased delivery of and access to effective HIV prevention. We will be guided by data and stakeholder feedback in our grant making, programming, and advocacy, and we will aim to:

- **Support leadership related to HIV/AIDS** to promote people’s capacity to understand and access effective HIV prevention options, navigate health services, understand the impact of policy decisions and maintain good health.
- **Support community organizations to build capacity** to promote health, especially to help key populations to access effective HIV prevention options, HIV / AIDS-related healthcare, and contributors to health, such as stable housing and employment.
- **Support healthcare professionals to provide competent care**, including sexual health counseling, effective HIV prevention and other harm reduction support and behavioral healthcare, to reduce the number of people who are at risk for HIV, undiagnosed or not in care.

KEY POPULATIONS IN THE HIV/AIDS EFFORT

In Greater Cleveland, as elsewhere, HIV / AIDS disproportionately affects specific segments of the community. This is in part because of how the virus is transmitted and also in part because historically high rates of HIV / AIDS in any sexual network or drug use network will

persist until a very high percentage of people know their status and can effectively use effective treatment and prevention services. As examples of three overlapping key populations:

- **African American communities** in Greater Cleveland carry a disproportionate share of the HIV / AIDS burden. As of late 2014, 65 percent of all new HIV diagnoses among men in Cuyahoga County were among black men, with greatest increases seen among black men ages 20 to 29 years old.
- **Gay men** have the highest rates of HIV infection in Cuyahoga County and account for approximately three of every four people living with HIV / AIDS. Black gay men have particularly high rates of HIV / AIDS and account for over a quarter of the HIV / AIDS cases in the county.*
- **Young people** are also a key population in the local HIV / AIDS epidemic, with youth under 24 years of age accounting for an estimated one in four new HIV infections.

Members of these communities in Greater Cleveland are central to the city’s future as a creative, diverse, and dynamic place. As active leaders – and potential leaders – in the fight against HIV / AIDS, they have and continue to provide the community health education, peer support, and crucial visibility, organizing and activism for health. For these reasons, they are key to the response to the epidemic.

**Transgender women are also known to have disproportionately high rates of HIV. We are aware from HIV providers that this is also the case in Cuyahoga County, although our surveillance mechanisms are currently inadequate to capture a statistical trend.*

HIV IS PREVENTABLE.

People's risk of HIV infection drops dramatically when they routinely test for HIV and have access to, and use, condoms and the appropriate combination of harm reduction and behavioral health support, medical

care, and social services. New HIV infections are also prevented when people living with HIV are treated, since HIV treatment keeps people healthy and prevents onward transmission. Scaling these services in Greater Cleveland would yield a significant reduction in new infections, with a 25% reduction in new infections possible in three years. As examples of three HIV prevention services proven to be effective and potentially available for immediate large scale implementation alongside sustained scaled-up HIV testing, treatment, and care:

- **Syringe access and harm reduction services** typically include community outreach to people who are using drugs, peer health education, testing for HIV, hepatitis, and sexually transmitted infections, overdose prevention, primary medical care, and referrals to drug treatment. These are provided without requiring that the person stop using drugs, to promote health and reduce harms related to drug use. These services have proven highly effective in preventing HIV infection and other lasting harms but historically have been under-funded due to stigma of drug use and addiction. As of 2016, the federal government allows for funding for syringe exchange programs, an opportunity to leverage private funds to expand programming.
- **Post-exposure prophylaxis (PEP)** is a one-month course of medications, started within 72 hours of an HIV exposure that will prevent HIV infection if someone is exposed to the virus, such as when a condom breaks or in the case of a sexual assault. Many physicians are unused to prescribing PEP, and because PEP must be started quickly, before insurance or other reimbursement can be secured, healthcare agencies generally need to train clinicians and procure a supply of the HIV drugs in preparing for this service.
- **Pre-exposure prophylaxis (PrEP)** is a strategy wherein an individual takes anti-HIV medicines once a day to protect against infection. An increasing number of people are aware of PrEP as a prevention option, but, as with PEP and harm reduction services, community outreach is needed to encourage people to seek the service when needed. Also, as with PEP and harm reduction services, clinicians need training for proper administration of this strategy, which includes ongoing medical monitoring, HIV testing and risk reduction counseling.

FUNDING

The AIDS Funding Collaborative brings together Cuyahoga County's leading philanthropic funders and government agencies to award grants to reduce the burden of HIV / AIDS in Greater Cleveland.

In 2015, the AFC invested nearly \$300,000 in targeted, responsive, and discretionary grants to community partners. During the past ten years, from 2006 through 2015, the AFC succeeded in raising and allocating over \$3 million in grants for HIV / AIDS programs and advocacy.

With AIDS Funding Collaborative grants, community organizations provided HIV testing, syringe exchange, legal services, and HIV / AIDS treatment support, and engaged in important HIV / AIDS policy work and advocacy. As a result, the number of people in Greater Cleveland who are accessing HIV / AIDS treatment has increased, and the number of new HIV infections in the city has gradually declined.

During 2016–2018, the AIDS Funding Collaborative will remain a central source of funding for the effort to end HIV / AIDS in Greater Cleveland. Our aim is to raise and allocate at least \$300,000 each year in grants, reaching at least \$1 million in grants during the next three years.

CONVENING

Throughout our history, the AIDS Funding Collaborative has sponsored, facilitated, and supported programs and events as needs have emerged. For example, in 2015, the AFC hosted and managed the local AIDS United AmeriCorps program for its third year of operation. Eight AmeriCorps Service Members – future public health leaders and change agents – were placed at eight local agencies and received stipends, training, and support, as they served to build programs to meet HIV / AIDS direct service needs.

The AIDS Funding Collaborative organizes training and educational events for front line HIV / AIDS professionals and community members. In recent years

this has included an annual community dialogue about emerging HIV / AIDS strategies and trainings on the Fundamentals of HIV / AIDS, the Affordable Care Act and HIV / AIDS, Smarter Sex: Anal Sex and Health, and PrEP.

“AFC is responsive to community training needs and bringing best practice models to our region.”

— TAMMIE JONES, PROJECT DIRECTOR,
HIV, CLEVELAND DEPARTMENT OF
PUBLIC HEALTH

During 2016–2018, the AIDS Funding Collaborative will continue these efforts, investing in local capacity and an informed and coordinated HIV / AIDS response in Greater Cleveland.

ADVOCACY

All of the AIDS Funding Collaborative members – including representatives of philanthropic funders, government agencies, healthcare providers, and local communities – advocate within their organizations for targeted, coordinated and well-funded HIV / AIDS policies and programming.

“The AFC provides more than funding in our community.”

— MAX RODAS, EXECUTIVE DIRECTOR,
NUEVA LUZ URBAN RESOURCE CENTER

In 2015, AFC staff and members participated in local coalitions, conferences and meetings, including local and state Ryan White planning groups, HIV prevention advisory groups, and philanthropic networks

to share information, identify new opportunities for funding and collaboration, and maintain the visibility of HIV / AIDS. Staff also met with local and state officials and legislators to support their understanding of the Ryan White program and the need for enhanced access to harm reduction strategies in Ohio.

During 2016–2018, the AIDS Funding Collaborative will continue to be an informed advocacy voice in all of these venues for an effective HIV / AIDS response in Greater Cleveland.

THE WAY WE WORK

THE AFC STRIVES TO OPERATE COLLABORATIVELY AND EFFICIENTLY.

The AIDS Funding Collaborative makes decisions collectively. AFC members meet at least five times per year and are kept informed through regular briefings. Every member has an opportunity for input about AFC decisions concerning funding, programming and advocacy. During 2016–2018, the AFC will continue to operate in this manner.

The AFC priorities are aligned with and complementary to the National HIV/AIDS Strategy and the Ohio Plan to End AIDS

For efficiency and to connect HIV / AIDS to broader health topics, the AIDS Funding Collaborative is administered by 1.4 staff located and employed in a shared staffing arrangement at The Center for

Community Solutions, a not-for-profit policy and advocacy group. The Center for Community Solutions provides back office support for the AFC grant making and administrative activities, as well as advocacy and public policy support to promote best practice in HIV / AIDS service funding and provision in Ohio.

WE ARE GUIDED BY DATA AND BY STAKEHOLDER FEEDBACK.

The HIV / AIDS effort in Greater Cleveland must be guided by evidence of what is and is not effective, so that limited resources can be allocated for maximum impact. The HIV / AIDS effort also requires participation, leadership, and steady commitment from all sectors — government, business, philanthropy, the medical community, community organizations, people living with HIV / AIDS and others.

As the AFC continues its work during the coming months and years, we welcome an ongoing dialogue with all allies and stakeholders about HIV / AIDS funding, convening, and advocacy to advance health and reduce health disparities and achieve progress toward ending the HIV / AIDS epidemic in Greater Cleveland.

WE INVITE ADDITIONAL FUNDERS TO JOIN OUR COLLABORATIVE.

The AIDS Funding Collaborative currently has 16 members. AFC members represent four leading philanthropic funders (The Cleveland Foundation, The George Gund Foundation, Mt. Sinai Health Care Foundation, and United Way of Greater Cleveland) and three government agencies (City of Cleveland, Cuyahoga County, and Cuyahoga County Alcohol, Drug Addiction & Mental Health Services Board) – each of these funding partners has two seats at the table; a leading medical research center (Case Western Reserve University); and the community at large (3 members).

Most of the AFC members have been part of the collaborative for more than a decade, and many have participated since our founding in 1994, showing the commitment and confidence that our members have in the work that we do.

During 2016–2018, the AIDS Funding Collaborative will continue to invite new funding partners and other members to join our partnership. Greater Cleveland is home to several corporate grant makers, health-

care conversion funds, and small foundations that see our work as relevant and of interest to their grantmaking priorities. Furthermore, several leading national HIV / AIDS grantmakers are also aware of our work. The AFC has unique abilities to make targeted, responsive, and discretionary HIV / AIDS-related grants, and we will actively reach out to a range of organizations to invite them to join our efforts.

The AFC is actively engaged in the State Integrated Planning process to ensure consistency in best practice across the state and that NE Ohio priorities are realized

WHO WE ARE

The AIDS Funding Collaborative (AFC) is a partnership that includes private philanthropic funders, government agencies, medical professionals, community organizations, and people living with HIV / AIDS.

AFC MEMBERS AS OF 2016

Jill Paulsen, MNO, Board chair

Deputy Director, Cuyahoga Arts & Culture
Representing The George Gund Foundation

Valeria A. Harper, MA, Board vice-chair

Chief Operating Officer,
ADAMHS Board of Cuyahoga County

Jan Briggs, MSN, RN, ANP-BC, AACRN

Nurse Practitioner, Louis Stokes Cleveland
VA Medical Center
AFC Community-at-Large member

Bob Bucklew, JD

Outreach Coordinator, Cleveland AIDS Clinical Trials Unit,
Case Western Reserve University / University Hospitals
AFC Designated Organization member

Councilman Brian Cummins

Cleveland City Council, Ward 14

Daniel Cohn

Program Officer, Mt. Sinai Health Care Foundation

Danielle Doza, JD

Policy and Development Manager, Empowering and
Strengthening Ohio's People
Representing The Cleveland Foundation

Shelly Galvin

Program Officer, Mt. Sinai Health Care Foundation
Representing Mt. Sinai Health Care Foundation
Board of Trustees

Claire Gauntner, MPH

Fellow, The George Gund Foundation

Tammie Jones, MS

Project Director, HIV / AIDS Unit, City of Cleveland
Department of Public Health

Rick A. Kemm, MNO

Executive Director, May Dugan Center
AFC Community-at-Large member

Janet McGrath, PhD

Professor, Case Western Reserve University
AFC Community-at-Large member

Kimalon Meriweather, MBA

Program Officer, The Cleveland Foundation

Ben Miladin, MSW

Director of Health, United Way of Greater Cleveland

Sabrina L. Roberts, MPA

Administrator of Health Policy & Programs
Cuyahoga County Department of Health
& Human Services

Steve Schreiber, RN, PHR

Integrated Care Coordinator, Recovery Resources
Representing United Way of Greater Cleveland

Ericka L. Thoms, JD

Policy Analyst, Federal Reserve Bank of Cleveland
Representing ADAMHS Board of Cuyahoga County

**STAFF AND FISCAL
SPONSOR
REPRESENTATIVE**

Melissa Federman, MPH
Director, AIDS Funding Collaborative

Lindsay Marcus, MS
Program Coordinator, AIDS Funding Collaborative

Zulma Zabala, JD, MPA
CEO, East End Neighborhood House
Representing The Center for Community Solutions

— FUNDING PARTNERS —



THE GEORGE GUND FOUNDATION

FOR MORE INFORMATION ABOUT THE AIDS FUNDING COLLABORATIVE,
PLEASE VISIT OUR WEBSITE AT:
WWW.AIDSFUNDINGCOLLABORATIVE.ORG



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