In February 2019, the federal government announced a goal to end the HIV epidemic in the United States within 10 years, and specifically to reduce the number of annual new HIV transmissions by at least 90 percent by 2030. A new national initiative has been launched to increase federal resources to HIV efforts in 57 key locations, including Cuyahoga County.

This is a critical moment in the history of the HIV response.

We have the ability to end the HIV epidemic in Greater Cleveland.

Now is the time.
The current HIV effort in the Greater Cleveland region is strong. Through HIV-related services funded largely by city, county, state and federal government agencies, the region is making significant progress against the HIV epidemic:

- There are fewer than 160 new HIV infections diagnosed annually in Cuyahoga County — half the rate seen in the early 1990s.

- Of the 5,800 people living with HIV in Cuyahoga County, most know their status, and nearly 3,000 people are enrolled in regional Ryan White Part A services.

- Approximately 60% of people living with HIV in Cuyahoga County, who know their status, are virologically suppressed.

- Greater Cleveland also has a wealth of health and social service providers who are experienced in offering:
  - routine testing for HIV and other STIs,
  - sexual health information and services,
  - mental health, addiction, and harm reduction services,
  - emergency shelter and housing,
  - HIV treatment, and
  - pre-exposure prophylaxis (PrEP) or post-exposure prophylaxis (PEP).
To achieve the national Ending the HIV Epidemic goals in Greater Cleveland, Cuyahoga County will need to reduce annual HIV transmissions to fewer than 20 new HIV diagnoses by 2030.

To do this, the HIV response in Greater Cleveland needs to help approximately 10,000-20,000 people who are at highest risk of HIV to know their HIV status and prevent infection. Efforts also need to engage approximately 2,200 people who are as-yet undiagnosed or not in regular care to ensure that they access and benefit from the services that they need.

**Ending the HIV epidemic is achievable if:**

- Federal funding to Greater Cleveland increases to sustain and strengthen local health and social services.

- Philanthropic funding supports intensive community-centered work to mobilize the people most at risk for being undiagnosed, out of care, or not virally suppressed.

The AIDS Funding Collaborative is the leading philanthropic funder focused on the HIV effort in Greater Cleveland. We convene local governmental agencies, foundations, medical and research institutions, social service providers, and community organizations and activists to work together in the HIV response.

We believe that every person living with HIV and every person at risk of HIV can be informed, empowered and connected to the services and supports that they might need.

We believe we can end the HIV epidemic.
The work ahead

Strategic opportunity and risk of inaction

NEWLY REPORTED HIV DIAGNOSES (BY YEAR)

CLEVELAND DEPARTMENT OF PUBLIC HEALTH BEGINS TRACKING REPORTED HIV CASES <50


First local community organizing and services (AIDS Commission, Citizens’ Committee, Community AIDS Partnership Project, AIDS Taskforce, AIDS Housing Council)

First national AIDS information campaigns reach Cleveland

First HIV programs funded by City of Cleveland and Cuyahoga County

First national grants from HRSA, SAMHSA, HOPWA, CDC reach Cleveland

US government declares goal to end the HIV epidemic

AIDS Funding Collaborative formed

ENDING HIV

TARGET <20

CURRENT EFFORT IF ONLY MAINTAINED

CURRENT EFFORTS NOT MAINTAINED

CLEVELAND DEPARTMENT OF PUBLIC HEALTH BEGINS TRACKING REPORTED HIV CASES <50

(AVG 3 YEARS) 265

151 (AVG 3 YEARS) 210

219 (AVG 3 YEARS) 265

451-458 (AVG 3 YEARS) 451-458
Ending the HIV epidemic requires working with people in greatest need

People face disproportionally high rates of HIV not only because of their sexual and drug-use practices but also because their neighborhoods or networks are not sufficiently reached with HIV testing, treatment and prevention services. For example, in Cuyahoga County in 2017:

**2017 NEW HIV DIAGNOSES IN CUYAHOGA COUNTY**

- **103** men who have sex with men
- **107** African Americans
- **93** young people under 30

First Ryan White AIDS Program funding reaches Cleveland
Combination HIV treatment begins to dramatically reduce AIDS-related deaths.
Affordable Care Act expands access
FDA approves PrEP
HPTN 052 and PARTNER studies prove Undetectable = Untransmittable (U=U)
US government declares goal to end the HIV epidemic
The HIV epidemic is also increasingly concentrated in zip code areas that are economically poorer with fewer services for behavioral and sexual health.

**Reported New Diagnoses of HIV Infection by Zip Code Cuyahoga County, 2013–2017**

**Ending the HIV epidemic requires working to achieve ambitious goals**

- **2,200** Benefit from Treatment
  - Approximately 2,200 people who are HIV-positive but as-yet undiagnosed or not in regular care benefit from HIV treatment, care and support.

- **< 20 per year by 2030**
  - New HIV transmissions each year in Greater Cleveland fall to less than 20 per year by 2030.

- **10,000–20,000** Benefit from Prevention
  - Approximately 10,000–20,000 people who are at highest risk of HIV benefit from HIV prevention services and related health promotion and support.

**Source:**
About the AIDS Funding Collaborative

Our history

Cleveland has a proud history of a community-led HIV response. From the earliest days of the Community AIDS Partnership Project and the Citizens’ Committee on AIDS/HIV in the late 1980s and the early 1990s, people living with HIV and others directly affected by the HIV epidemic got together and organized innovative HIV programming including pioneering safer sex education, peer support, home-based care, and syringe access services.

The AIDS Funding Collaborative (AFC) continues that history with the same urgency and solidarity that led many of us to come together in the 1980s.

The AFC was formed in 1994 by a group of leaders affiliated with Cuyahoga County and City of Cleveland government agencies, foundations, leading medical and research institutions, and other local service providers and community organizations. Our mission since the beginning has been collective strategic grant making to strengthen the community’s response to HIV/AIDS.
Our mission
To strengthen the community’s response to HIV/AIDS as a public/private partnership providing advocacy, funding, leadership, and coordination in Greater Cleveland.

Our vision
Progress toward ending the HIV epidemic and a Greater Cleveland that is a place of health and opportunity for everyone who lives here.

Our values
We believe in community involvement and leadership. In the history of the HIV response, successes have come in large part from programs designed and implemented by individuals directly impacted by HIV/AIDS and those who serve them. Now more than ever, to end the HIV epidemic, an intensive and inclusive community-led community-focused effort is needed. Investment is needed in each of Greater Cleveland’s diverse communities so that people are informed and empowered in their health decisions, supported by their peers and community, and able to benefit from services that are affordable, accessible, relevant, and welcoming.

We are committed to racial equity. The HIV epidemic in Greater Cleveland disproportionately impacts African Americans, especially people who are younger, economically vulnerable, and less connected to sexual health and behavioral health services. Ending the HIV epidemic requires confronting all disparities in health by investing in specific neighborhoods and networks and working with the people who are most at risk for being undiagnosed, out of care, or not virally suppressed.

Our funding approach
- Enhances the breadth, depth and sustainability of grant making beyond the capabilities of any one funder
- Leverages additional funding from public and private funders across the United States
- Allows for provision of focused technical support and engagement with grantees
- Supports unified policy work and advocacy at a local and state level.
The AFC convenes multiple funders in collective grant making.

Since 1994, the AFC has mobilized nearly $13 million in funding for the HIV response, with an average of $425,000 allocated in grants and initiatives each year during the past five years.

The AFC grant making process is designed to be open, efficient, flexible and responsive so that the AFC can be the first and leading funder of innovative and effective programming to end the HIV epidemic.

→ The AFC Advisory Committee includes a diversity of perspectives, including representatives of city and county government, addiction and mental health services, leading foundations, medical and health service providers, community organizations, and individual advocates.

→ The AFC staff and AFC Advisory Committee maintain current knowledge about local HIV programs through their work and from AFC grantee reporting and site visits.

→ With this knowledge, the AFC invites and reviews letters of inquiry (LOIs) and full funding proposals and allocates funding in a mix of targeted, responsive and discretionary grants.

→ The AFC staff and AFC Advisory Committee then monitor how funding is used by grantees through grantee reporting and in-person conversations and meetings.

→ The AFC then regularly and collectively discusses the relative effect and impact of AFC funding, to inform further funding priorities and decisions.
Our results

The AFC is the largest philanthropic funder of HIV prevention in Northeast Ohio.

RESULTS
Leading health providers such as MetroHealth and Circle Health Services expanded effective HIV prevention programs, including PrEP and syringe access services, that now reach thousands of people and are partly sustained by state and federal funding.

The AFC funds organizing for health, equity and human rights.

RESULTS
Community-led workshops, trainings, and media campaigns increased public awareness and political support for the needs of people living with HIV and the needs of those most vulnerable.

The AFC is able to be the initial funder of new community organizations and is structured to support small organizations to pilot new ideas and new ways of working.

RESULTS
More than 30 community groups developed new programs, built capacity to provide new services, and hired new people, including individuals trained and placed through the AFC AmeriCorps program.

THE IMPACT
Because of sustained work by the AFC and many others in the HIV response:

New HIV transmissions are on the decline in Cuyahoga County, dropping by 25% during the past five years, making it possible to end the HIV epidemic here by 2030.
Our strategic priorities in 2020–2022

Ending the HIV epidemic in Greater Cleveland by 2030 is possible. However, it cannot be achieved without a coordinated effort and investments in inclusive community-level action.

In this strategic plan, the AFC commits to investing in local coordination and community-level action.
The AFC will invest in HIV programs centered on specific neighborhoods and networks.

As a small funding collaborative, the AFC can allocate funds in efficient and unrestricted ways to allow organizations to develop programming, generate evidence about effectiveness, develop new organizational capacity and leverage governmental funding. The AFC is also able to target its grants to work that is centered on specific neighborhoods and networks where people are most at risk for being undiagnosed, out of care, or not virally suppressed.

**Our actions in 2020-2022:**

- The AFC will allocate at least 20% of its funding through small grants for innovative and intensive HIV-related efforts in specific neighborhoods and networks. These small grants will include discretionary grants of less than $5,000 and community catalyst grants of $5,000-$20,000 for community organizing, pilot projects, and selected trainings and events. Both types of grants will be allocated through a process that is open to any applicant throughout the year.

- The AFC will continue to make large multiyear investments, including targeted and responsive grants of $20,000-$100,000 per year, for development, demonstration and delivery of effective HIV services and local health campaigns and coalitions.

- The AFC will seek to raise and allocate at least $1 million in grants during 2020-2022.
The AFC will mobilize increased funding for the local HIV response.

As a place-based collaborative of funders, the AFC is a crucial ally and advocate for local organizations seeking funding from local, state and national funders.

**Our actions in 2020-2022:**

- The AFC will present and participate in local, state and national funder networks to communicate about innovative and effective work in Greater Cleveland.
- The AFC will support county and city government agencies and local community organizations in their efforts to increase federal and state government funding for local services.

The AFC will be a central place for collaboration among HIV funders and leaders.

The AFC operates as a collaborative of county and city government agencies, foundations, researchers, community organizations and networks, and individual advocates who work together for coordination, leadership, advocacy, and funding of the HIV effort in Greater Cleveland.

**Our actions in 2020-2022:**

- The AFC will organize its Advisory Committee meetings to share information and learn about innovative and effective approaches and funding opportunities in the HIV response.
- The AFC will organize roundtable events to provide opportunities for funders, grantees and other allies and stakeholders to meet and learn from each other.
- The AFC will engage community advisors to ensure that AFC’s grantmaking and advocacy are deeply informed about key populations, neighborhoods, or thematic areas of HIV work.
- The AFC will be a collective advocacy voice for coordinated and well-funded HIV-related policies and programming at the state and federal level.
Please, join this effort to end the HIV epidemic in Greater Cleveland!

**LEARN MORE AT**
WWW.AIDSFUNDINGCOLLABORATIVE.ORG

**Here’s how to join our work:**

→ If you’re a **FUNDER**, **join us or partner with us** in supporting local organizations.

→ If you’re a **GOVERNMENT OFFICIAL**, **let us work together** to ensure public and private sector programs complement each other to meet the needs of people most affected by HIV.

→ If you’re a **COMPANY REPRESENTATIVE**, **work with us** to find a way to express and expand your corporate social responsibility to advance health and equity in specific neighborhoods and communities and achieve an end to the HIV epidemic.

→ If you work with a **SERVICE PROVIDER OR COMMUNITY ORGANIZATION**, **contact us** to let us know about your work and how we can support you.

**Contact us**
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