

Southern HIV Impact Fund 2019–2020 Grant Cycle Invitation to Submit Letter of Intent

Executive Summary

In 2016, Funders Concerned About AIDS (FCAA) convened a group of funders interested in a collaboration to leverage funding impact on the HIV epidemic in the U.S. South. This pooled fund brings a strategic focus on HIV care and prevention services, advocacy and movement-building, and leadership development efforts in the U.S. South, with a coordinated approach among funders. With generous support from Gilead Sciences, Ford Foundation, Elton John AIDS Foundation, ViiV Healthcare, Levi Strauss Foundation and a generous anonymous donor, AIDS United as the fund manager, in partnership with FCAA, is pleased to release this request for letters of intent for grant support through the **Southern HIV Impact Fund**.

The Southern HIV Landscape: Disparities, Strength and Resiliency

The South has an extremely disproportionate burden of HIV disease when compared with other regions of the U.S. In 2016, the Southern region accounted for an estimated 37 percent (one-third) of the total U.S. population,¹ yet an estimated 44 percent of all new HIV diagnoses (at any stage of the disease) occurred in the South;² a rate that is alarmingly disproportional to its population. The South also has the highest rate of stage-three HIV infections (AIDS) as an estimated 9.2/100,000 people living with HIV in the South are living with AIDS, and survival rates from AIDS are also the lowest nationally.³ Nationally, 40 percent of all people living with AIDS reside in the South.

Many Southerners living with HIV also face an array of overwhelming challenges in their day-to-day lives. Social determinants such as poverty, low education levels, income inequality, lack of insurance, combined with persistent HIV stigma, racism, homophobia and transphobia, and lack of specialized HIV care, all become barriers to receiving the treatment and support they desperately need. Not only are Southerners more likely to contract HIV, they are dying at higher rates of AIDS as well⁴. The death rate among people living with HIV is higher in Southern states than in any other U.S. region.⁵ In some Southern states, people living with HIV are three times as likely to die as those in other states.⁶ According to the CDC, 52% of all AIDS-related deaths occur in the South. This indicates people living with HIV in the region are not getting the care they need to stay healthy, particularly in non-urban areas. Most states with the lowest levels of linkage to care for people living with HIV are in the South.⁷

¹ United States Census Bureau. [State Population Totals 2015](https://www.census.gov/popest/data/state/totals/2015/index.html). <https://www.census.gov/popest/data/state/totals/2015/index.html>

² Centers for Disease Control and Prevention. [HIV Surveillance Report Volume 26](http://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-us.pdf). <http://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-us.pdf>

³ Centers for Disease Control and Prevention. [HIV Surveillance Report Volume 26](http://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-us.pdf). <http://www.cdc.gov/hiv/pdf/library/reports/surveillance/cdc-hiv-surveillance-report-us.pdf>

⁴ Reif S, et al. HIV diagnoses, prevalence, and outcomes in nine southern states. *J Community Health*. 2014 Dec.

⁵ Reif S, Pence BW, Hall I, et al. HIV diagnoses, prevalence, and outcomes in nine southern states. *J Community Health*. 2014 Dec;39(6).

⁶ Centers for Disease Control and Prevention. HIV Surveillance Report, 2014; vol. 26. <http://www.cdc.gov/hiv/library/reports/surveillance/>. Published November 2015. Accessed July 2016.

⁷ Centers for Disease Control and Prevention. HIV Surveillance Report, 2014; vol. 26. <http://www.cdc.gov/hiv/library/reports/surveillance/>. Published November 2015. Accessed July 2016.

Due to shortages of public and private funding, many rural areas in the South do not have nearby HIV services.⁸ This proves to be particularly challenging for Southerners living with HIV, many of whom live in small metro and rural communities, in need of specialty care and social services. Inadequate insurance coverage exacerbates the problem and the absence of Medicaid expansion in most of the South has crippling effects on efforts to address health disparities in the region.⁹ Overall, the region receives insufficient resources— compared with other areas — of federal, state and private HIV funding to redress this chronic problem.

There are also obstacles to HIV prevention in the South. The barriers to accessing HIV treatment detailed above also impact the effectiveness of treatment as prevention in the South. When people living with HIV are able to attain undetectable viral loads through effective HIV treatment, this leads to reduction or elimination of new HIV transmission and infection. When people are not able to access HIV treatment, it is not only an unacceptable blow to personal health, but also deters prevention efforts. Additionally, critical prevention tools for HIV-negative individuals—such as pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP), both biomedical interventions proven to be effective in prevention of HIV acquisition—must be easily accessible if they are to assist people in remaining HIV-negative and to truly move Southern communities toward the end of the epidemic. Southerners must have unfettered access to both HIV care and prevention.

Understanding the challenges faced in the South is critical to developing strategies to end the epidemic. However, it is equally important to recognize the strengths and commitment that Southerners possess in creating effective, relevant programs and initiatives to address the HIV epidemic in their communities. There is a strong legacy of social justice work in the South that has long focused on racial and gender equality and reproductive rights, and many allied organizations who are primed to be tapped for addressing the HIV epidemic. Organizations working in the intersecting fields of racial and social justice, gender equality and reproductive rights, LGBTQ, immigration, detention and mass incarceration, among others are well-positioned to positively impact the social determinants of health that have significant implications for people living with or at risk of HIV in the South. This initiative is committed to identifying leaders and organizations that are already engaged in HIV work, as well as those who will be relatively new to HIV but are engaged in intersecting social justice work, to effectively address the prevention, care and support, advocacy and leadership needs of individuals and communities affected by HIV.

Background on the Initiative

The funding members of the **Southern HIV Impact Fund** developed the following mission and values statements to guide their work on this critical initiative:

MISSION STATEMENT

We are a collaborative of funders seeking a more coordinated and effective response to HIV and greater collective impact against the disparities that continue to drive the epidemic in marginalized communities in the Deep South.

VISION

We envision unfettered access to HIV prevention and care for those living with, and most impacted by, HIV in the deep south, achieved through:

- increased, impactful and coordinated investment in communities where resources are most needed
- intersectional and sustainable social justice movements, recognizing HIV as a central challenge
- a robust pipeline of leadership that is inclusive of Black, Latinx, and LGBTQ communities

VALUES

- Operate with transparency in grantmaking

⁸ Zuniga MA, Buchanan RJ, Chakravorty BJ. HIV education, prevention, and outreach programs in rural areas of the Southeastern United States. *Journal of HIV/AIDS & Social Sciences*. 2006;4(4):29–45.

⁹ Reif S, Pence BW, Hall I, et al. HIV diagnoses, prevalence, and outcomes in nine southern states. *J Community Health*. 2014 Dec;39(6).

- Ensure grantmaking is informed by and responsive to community needs
- Bring an intersectional approach to movement-building and service delivery
- Build on the existing infrastructure and resilience inherent in southern communities
- Offer user-friendly and flexible grantmaking processes, accessible to a wide range of organizations and groups
- Take risks and award innovation
- Bring race, class and gender analyses to the grant-making process
- Prioritize evaluation to better understand and advocate for collaborative grantmaking

Purpose

The **Southern HIV Impact Fund** prioritizes identifying and supporting organizations across intersecting movements to enhance and coordinate HIV prevention, care and support services, and advocacy and movement-building across the South. The Fund supports and funds organizations that focus on serving trans-identified and gender non-conforming persons; Black and Latinx gay, bisexual, and queer men; other people of color; people who experience oppressive policing and mass incarceration; and reproductive justice for women of color and gay and bisexual men. For more traditional HIV-focused organizations, it is important to show how their work intersects with racial and gender justice. The collaborative of funding partners believes that the lives of people living with, or at risk of HIV cannot be siloed into one issue area.

Organizations that meet the eligibility requirements listed below are encouraged to submit a Letter of Intent (LOI) to apply for funding. A community-based review committee will review all LOIs and determine a select number of organizations that will be invited to submit a full application for review. For this grant cycle, AIDS United expects to provide a combination of cash grants and technical assistance to a total cohort of up to 45 community-based and social justice organizations and coalitions in the Deep South, under two priority areas of focus, HIV Prevention & Service Provision and HIV-Focused Political & Social Action.

Eligibility Requirements

To be eligible for funding through the **Southern HIV Impact Fund**, the following criteria must be met.

- **Geographic Location** – Applicants must have a staff member who is based in **and** who also provides services or focuses their work specifically in one of nine states: Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, and Texas.
- **Non-Profit Status** – Applicants must be non-profit, tax-exempt organizations, per the guidelines set forth by the Internal Revenue Service (IRS) with proper 501(c)(3) status. Appropriate verification of this federal status will be undertaken by AIDS United before final grant decisions are made. Organizations or coalitions that do not hold 501(c)(3) status must have a fiscal sponsor.
- **Financial Stability** – Organizations should be fiscally stable and viable prior to submission of the funding application. These funds are not intended to serve as a replacement for discontinued funding.
- **Funding Priorities** – Proposed efforts focused on 1) HIV Prevention and Service Provision and/or 2) HIV-Focused Political and Social Action
- **Grant Period** – Applicants must be able to utilize funds within a 12-month period beginning December 1, 2019 and ending November 30, 2020.

Grant Categories

The **Southern HIV Impact Fund** offers grant support under two categories: general operating support and project-specific support. AIDS United encourages applicants to review the two categories below very carefully before determining the grant category under which they will apply.

General Operating Support

Applicants may choose to request general operating support through this funding opportunity. General operating grants provide financial resources to the organization in support of its mission and overall activities including operating expenses and overhead, rather than providing support for specific projects or programs. Funds from this grant category do not have restrictions on how they may be used, with the exception of not being able to fund grassroots or direct lobbying activities.

Organizations requesting general operating support from the **Southern HIV Impact Fund** must have a proven track record of success in working in HIV and doing so through an intersectional approach. Applicants must be able to demonstrate an understanding and history of intersecting HIV and social justice work. We encourage organizations with a history of HIV work and organizations with a history of social justice work to apply; however, for organizations without a clear and demonstrable history of that intersectional work, we recommend applying for project-specific funding.

Applicants seeking funding under this grant category will need to show a clear strategy for utilizing funds that aligns with the overall organizational goals. If invited to apply, a work plan and project budget will not be required; however, organizations will need to demonstrate how funding will be used to advance or improve work in one or more of the two funding focal areas (HIV Prevention & Service Provision and HIV-Focused Political and Social Action). Requests for general operating support must contain realistic and clearly articulated benchmarks for how success will be measured.

Project-Specific Support

Applicants may choose to request project-specific support through this funding opportunity. Project-specific support is intended to provide grant funds for a distinct project with clear goals, objectives, activities and measurable outcomes. For the LOI, interested applicants must briefly outline a project idea, supporting activities, and some expected outcomes.

Applicants applying for project-specific support must be able to demonstrate a history of working within the communities they are proposing to serve and must also have substantive experience in ***either*** HIV-focused ***or*** social justice work. Applicants are encouraged to view this as an opportunity to establish or enhance efforts to address HIV in tandem with any number of intersecting systems of oppression. Organizations that have a social justice focus may submit an LOI for a new project that helps to integrate HIV into their existing work. Equally, applicants that are working in HIV, but do not necessarily have experience in applying a social justice or intersectional framework may submit an LOI describing a project that better addresses HIV from a social justice approach. Organizations seeking funding under this grant category will need to provide a work plan and project budget.

Alignment with Core Values

All funded projects and invited organizations must be aligned with the following core values.

Social Justice & Intersectionality

“There is no such thing as a single-issue struggle, because we do not live single-issue lives.” This quote by writer, feminist, and civil rights activist, Audre Lorde perfectly describes the way AIDS United approaches its grantmaking in this current political and cultural landscape. It is important to look holistically at the lived experiences of people living with and affected by HIV and not solely at their health status. The HIV movement has been historically

siloed; however, to end the epidemic it is necessary to work in coalition with diverse sectors, including social justice movements, to effect real change for people living with and affected by HIV.

Through the **Southern HIV Impact Fund**, AIDS United continues its focus on the application of an intersectional social justice approach to HIV. Intersectionality is a framework for understanding how interrelated systems of oppression support discrimination among people who share overlapping social identities. For example, a person living with HIV may face racism and homophobia, in addition to HIV stigma, all of which may present barriers to that individual's access to care and to their achievement of optimal health. Systemically, all must be addressed if we are to see an end to HIV in the United States. Core human rights values of dignity, equity, and wellness extend across racial justice, poverty alleviation, criminal justice reform, and affordable housing movements. Systems change often begins with grassroots organizing at the local level in support of critical issues that directly impact the health and wellness of the community. Through engagement with the broader social justice movement, grantees under this initiative will go beyond traditional HIV advocacy, prevention and care by addressing HIV-related disparities where they meet: at the intersection of public health and social justice. For example, case managers that work regularly with housing, job training, and food security organizations take an intersectional approach in meeting critical needs of individual clients beyond HIV care and treatment. Organizations that reach the communities that can be the most advantaged by access to prevention tools like PrEP may choose to work with community clinicians to integrate PrEP awareness with existing care and service providers. Increasing prevention efforts and accessing diverse community entry points for disseminating sexual and reproductive health information and resources must happen beyond only traditional HIV providers.

Meaningful Involvement of People Living with HIV (MIPA)

Those organizations that can explain how meaningful involvement of people living with HIV/AIDS (MIPA) is reflected in the organization's culture, hiring practices, leadership development, and project design will be the most competitive. It is important that the expertise of people most affected by the HIV epidemic are connected to and help inform your work.

What is MIPA?

MIPA is the meaningful involvement of people living with HIV in the development, implementation, resolution and evaluation of programs and policies which impact their lives.

MIPA asserts that:

- People living with HIV are subject matter experts in the issues that they face and have the right to participate in decision-making processes about issues that affect their lives;
- Those most affected by issues are integral to identifying sustainable solutions to address them;
- People living with HIV who are involved must be reflective of the local community affected by HIV; and
- Efforts to ensure involvement should emphasize populations often ignored or excluded from decision-making.

MIPA also asserts that all people living with HIV cannot be represented by a single person, or that perspectives are race- and gender-neutral. Because disclosure of HIV status can be dangerous, MIPA does not require disclosure of HIV status for participation. MIPA is more than tokenistic representation and participation.

True meaningful involvement requires that people living with HIV understand their role at the table, have a decision-making voice (including the capacity to say no without repercussions), and are resourced appropriately to participate. Efforts should be made to ensure that all people living with HIV affected by a decision can participate in making that decision, including addressing accessibility concerns. Thus, MIPA builds in the processes necessary for effective and productive coalitions of people living with HIV.

For more information on what this means to AIDS United, please view the MIPA webinar [here](#)

Focus Areas

The **Southern HIV Impact Fund** will prioritize applications that are innovative, intersectional in their approach, meet a need that is unmet or insufficiently met, and are rooted in a thorough understanding of the culture and needs of the community. It is important to provide a clear understanding of the population you propose to work with and demonstrate how the staff for your project and organization is representative of the community(ies) you serve. People who are representative of the epidemic in your locality should be involved in the design and implementation of the project. The application must fall under one or both of the following categories: HIV-prevention and service provision and HIV-focused political action and mobilization.

HIV Prevention and Service Provision

The landscape of HIV prevention has evolved over the years from a primary focus on providing prevention education and condom distribution to include a focus on stigma reduction and biomedical interventions such as pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP). However, across the country and especially in the South, many factors continue to impede access to these tools, such as lack of awareness or stigma from healthcare providers, a lack of infrastructure and resources in Southern states for prevention, and a lack of community training on prevention tools.

Community-based organizations with experience in HIV prevention and care services are ideally positioned to know best which approaches and methods have the greatest potential of reaching populations most affected by HIV in their communities. Therefore, projects focused on innovative approaches to prevention interventions, particularly for those populations that are underserved and/or are disproportionately affected by HIV, will be strongly considered. Potential prevention projects may include individual-level, group-level, or community-level interventions, social marketing prevention campaigns, and social media interventions. Applicants are encouraged to integrate harm reduction approaches.

The long-term outcomes for work focusing on HIV prevention are increased access among people representative of the most affected populations in the South to HIV prevention tools and reduction of HIV stigma in communities in the South.

HIV care and support services are critical to supporting positive health outcomes for people living with and affected by HIV. Projects focused on innovative approaches to care and support, particularly for those populations that are underserved and/or are disproportionately affected by HIV, will be strongly considered. Projects may include a wide range of interventions that are designed to increase access to and engagement into care, particularly for underserved and disproportionately affected populations; mitigate barriers to engaging into and remaining in care, including provision of legal services for people living with HIV; or to improve the responsiveness and capacity of care systems to meet community need. Examples of such interventions include but are not limited to structural interventions such as integrating trauma-informed care, initiating peer navigation services or implementing new technology to support engagement into care. Intersectional work with non-HIV organizations working on issues such as post-release referrals for people who are being released from incarceration, food security, job training, and housing, are all valued as part of a holistic response to increasing the health and well-being of people living with HIV.

The long-term outcome for work focusing on HIV service provision is increased access to culturally and geographically responsive quality HIV care and support services.

HIV-Focused Political and Social Action

This area of focus is meant to support projects that will: 1) contribute to a significant impact on HIV public policy and advocacy in the Southern U.S.; or 2) will play a role in mobilizing and expanding the base of people who support this work. Through the **Southern HIV Impact Fund**, AIDS United will support state-specific advocacy priorities that may result in changes that also impact the Southern region overall. Thus, this initiative is

strategically positioned to address HIV/AIDS policy issues and ultimately help to decrease the disproportionate impact on the region.

Priority will be placed on those organizations that can show how the organization's intersectional approach will help address the local HIV epidemic.

Projects conducted in collaboration with intersectional partners often maximize resources. Applicants are not required to have partners embedded within their project or budget, however, including language about explicit, existing partnerships that will advance the goals of their project will make those applications more competitive.

The long-term outcome for HIV-focused political action and mobilization work is improved local and state policies that reduce stigma and discrimination and increase access to prevention, care, treatment, and support services.

Letter of Intent Content

When crafting your letter of intent, please keep in mind that we ask the letter be no longer than two pages in length. Be sure to describe the proposed activities and strategies as well as previous relevant experience in a way that will help people who may be unfamiliar with your organization understand work-to-date and what your proposed work will entail. Letters should include the following information:

Organizational Information

- Organization Name
 - Please include full name and address indicating in which Southern state the organization is located and the primary point-of-contact information.
- Fiscal Sponsor
 - Please include the full name, address of fiscal sponsor, and main point of contact, if applicable.
- Mission statement
 - Please provide the mission statement of the organization.
- Organizational Description
 - What are the primary activities of the organization?
 - What is/are the primary community(ies) served?
- Diversity Table
 - A completed [diversity table](#) is required. The purpose of the diversity table is to show the representation of community members at the organization and board level. Both the diversity table and the LOI will be reviewed and used to determine invitations to submit a full application.

Budget Information

- Please provide the amount requested up to \$100,000.
- Current Organizational Budget
 - Please provide the amount of the organization's total budget for 2019.
- What percentage of your overall budget would this grant represent?

Grant Purpose & Context

- Please provide a brief summary of no more than two sentences describing the purpose of the grant.
- Understanding the HIV epidemic in the region
 - Please describe the impact of HIV on the community(ies) the organization serves.
 - How does HIV intersect with the lives of people in the region served by the organization?
- Please explain how people living with and most affected by HIV have been involved in the activities of your organization, including program planning and leadership.

For Project-Specific Requests

- Name of Project
- Project Area of Focus
 - HIV-Prevention and Service Provision
 - HIV-Focused Political and Social Action
- Summary Statement
 - What will the project accomplish?
 - What are some key activities?

For General Operating Support Requests

- Please describe the activities and programs of the organization.
- Please explain how funding from the Southern HIV Impact Fund will help advance your organization’s mission.
- Please explain how this grant will assist your organization in addressing HIV in the community(ies) the organization serves.

Letter of Intent Submission Instructions

Letters of Intent are due by **5:00 pm Eastern Time, Monday, July 8, 2019**. LOIs must be submitted via AIDS United Community Portal at <https://aidsunited.force.com/>. See below for instructions on how to navigate the web portal.

Please note: the community portal will open for LOI submission after Friday, June 21. Do not attempt to begin an LOI in the system before this date.

Navigating the AIDS United Community Portal

1. Go to <https://aidsunited.force.com/>.
2. Sign in by clicking on the “Log in” button on the upper-right corner of the screen.
 - a. If you *have an account*, entering email address and password.
 - b. If you *do not have an account*, click “Not a member? Sign up Here.”
 - i. Enter the required information. Be sure to enter your correct EIN so that your new account can be linked to your organization’s record.
 - ii. On the second screen, enter your organization’s contact information and then click “Sign Up.”
 - c. Note that there is also a “Forgot your password?” link below the “Log in” button.
3. Once you are logged in, click on the Funding Opportunities tab at the top of the screen, toward the center. On the Funding Opportunities page, click “2019-2020 Southern HIV Impact Fund.”
4. On the next page, read the application details and instructions. If you decide to apply, click the “Apply Now” button on the upper-right portion of your screen, below your name. Click “Yes” to confirm that you would like to apply and hit “Next.”
5. On the following screen, click the “Finish” button.
6. You will be taken to a “My Applications” screen, where you will see the new grant opportunity, as well as any other applications you have submitted in the past through AIDS United’s Grantee Community Portal. (Note that any proposals you submitted through AIDS United’s previous system will not show up here.)
7. Click the application name, to the left of the 2019-2020 Southern HIV Impact Fund link. *The application name will begin with “APP-” and be followed by a six-digit number.* (Clicking on “2019-2020 Southern HIV Impact Fund” itself will take you back to the screen with the instructions, which you encountered in step #4 above.)
8. You will then be taken to the application screen, where you will click “Edit” and then enter your proposal responses. Be sure to click on all the numbered tabs across the top of the proposal and to hit “Submit” at the end.

9. Note that you can save your progress at any point, log out, and come back to complete your application later.

Questions?

- If you have any questions regarding the content of the letter of inquiry, please reach out to the **Southern HIV Impact Fund** team at southernfund@aidsunited.org
- If you have any questions regarding navigating the web portal, please contact Shannon Wyss at swyss@aidsunited.org.

Timeline

Letters of Intent will be reviewed shortly after the due date of Monday, July 8, 2019. Upon completion of the review, AIDS United will invite a designated number of organizations to submit a full application for funding. That application may be submitted via AIDS United’s Community Portal or via phone/videoconference. Full applications will be reviewed by an external review committee composed of southerners who are representative of the communities most affected by HIV and who have expertise in one or more of the main focus areas of the **Southern HIV Impact Fund**. A selected group of organizations will then be notified of their grant award before the grant period begins on December 1, 2019. The proposed grantmaking timeline is outlined below.

Timeline

June 18, 2019	Organizations invited to submit a Letter of Intent
July 8, 2019	Letters of Intent due by 5:00pm EDT
August 2, 2019	Organizations invited to submit a full application
September 9, 2019	Complete applications due by 5:00pm EDT
November 2019	Approved applicants will be notified of funding decisions
November 2019	Negotiation of final targets and execution of grant agreements
November 30, 2019	Applicants not funded notified of funding decisions
December 1, 2019	Grant period begins
February/March 2020	Grantee convening
May 15, 2020	Interim grantee progress reports due
November 30, 2020	Grant period ends
January 15, 2021	Final grantee progress reports due