



***Southern HIV Impact Fund
Request for Pre-Applications***

Pre-Application Due Date: July 22, 2024 at 6 p.m. ET

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Executive Summary

In 2016, Funders Concerned About AIDS (FCAA) convened a group of funders interested in collaboration to create a leveraged impact on the HIV epidemic in the U.S. South. The Southern HIV Impact Fund (the Fund) was created from this convening, operating as a pooled fund with a coordinated approach to bring a strategic focus on HIV care and prevention services, advocacy and movement-building, and leadership development efforts in the South. With support from Gilead Sciences, ViiV Healthcare, and a generous anonymous donor, AIDS United administers the Fund. Collaboratively, we aim to promote efforts in the U.S. South to combat HIV, increase diverse leadership reflective of the regional epidemic, and allocate additional resources to the South through grants and technical support.

This request for pre-applications is part of a multi-stage process to select 20-25 community-based and social justice organizations and coalitions in Alabama, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, and Texas to receive a 12-month project-specific or general operating support grant of up to \$60,000.

Background

In 2022, new HIV diagnoses decreased 16% in the South, when compared to 2018. While a positive trend, the South still accounts for 52% of all new HIV diagnoses in 2022, despite comprising

approximately a third of the country's population.¹ Further, for the last decade, the South has had the highest rate of new HIV diagnoses in the country.² While the new diagnoses among youth and young adults aged 13-24 decreased significantly in 2022, 56% of all people aged 13-24 who were diagnosed with HIV in 2022 reside in the South.³ Racial disparities are also clearly seen in HIV incidence and prevalence in the South and across the United States as a whole. Black/African American people represent 14% of the US population and 34% of new cases of HIV. More than half of Black/African American people in the US live in the South. In 2022, the rates of HIV diagnoses in the South among Black/African American people was 6.5 times the rate among White people, and the rate among Hispanic/Latinx people was 3.7 times the rate among White people.¹ Nationally, we saw that while women accounted for 9% of HIV diagnosis, Black women accounted for 50% of HIV diagnoses among cisgender women and 41% among transgender women.¹ Diagnoses among same gender loving men and men who have sex with men remained stable at 67% of overall diagnoses, with the majority of those diagnoses among Black/African-American and Hispanic/Latinx men.¹

Mortality due to HIV in the South signals significant barriers to accessing care and other necessary supports: the rate of HIV-related death among persons in the South was 3.1 times the rate among persons in the Midwest (the region with the lowest rate).¹ Systemic social and structural barriers, including white privilege, racism, poverty, inadequate sexual health education, HIV stigma, homophobia, transphobia, queerphobia, biphobia, sexism, lack of access to health care and specialized HIV care, HIV criminalization, and mass incarceration consistently drive these disparities.² In fact, the Deep South has the highest number of uninsured adults compared to other regions in the United States. Only two states in the Deep South have opted to expand Medicaid as of June 2024.⁴

Due to the lack of political support, poverty, shortages of public and private funding, and the closure of healthcare facilities, many rural areas in the South do not have access to nearby HIV services. There are many issues that make it 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.⁵

There are also systemic barriers to HIV prevention in the South. Critical prevention tools for HIV-negative individuals—such as pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP)—must be easily accessible if the tools are to assist people in remaining HIV-negative and to truly move Southern communities toward the end of the epidemic. However, 3 of the 5 states with the

¹ Centers for Disease Control and Prevention (2024). HIV Diagnoses, Deaths, and Prevalence. <https://www.cdc.gov/hiv-data/nhss/hiv-diagnoses-deaths-prevalence.html>

² Reif, S., Cooper, H., Warren, M., Wilson, E. (2021). HIV in the US Deep South: Trends from 2008-2019. Center for Health Policy and Inequalities Research, Duke University. <https://southernaidscoalition.org/hiv-trends-report/>

³ Centers for Disease Control and Prevention (2024). HIV Surveillance Report: Diagnoses, Deaths, and Prevalence of HIV in the United States and 6 Territories and Freely Associated States, 2022. <https://stacks.cdc.gov/view/cdc/156509>

⁴ Kaiser Family Foundation (2024). How Many Uninsured Are in the Coverage Gap and How Many Could be Eligible if All States Adopted the Medicaid Expansion? <https://www.kff.org/medicaid/issue-brief/how-many-uninsured-are-in-the-coverage-gap-and-how-many-could-be-eligible-if-all-states-adopted-the-medicaid-expansion/#:~:text=In%20total%2C%2097%25%20of%20those,rates%20compared%20to%20other%20regions.>

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).

greatest unmet need for PrEP are in the Deep South.⁶ 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. This initiative is committed to identifying leaders and organizations that are already engaged in HIV work, as well as those who are new to HIV but are engaged in intersecting racial and social justice work, which effectively address the prevention, care and support, advocacy, and leadership needs of individuals and communities most impacted by HIV.

Purpose

The Southern HIV Impact Fund addresses the needs of individuals and communities affected by HIV through HIV care and prevention services, advocacy and movement-building, and leadership development efforts. This initiative aims to enhance collaboration between traditional HIV-focused organizations and those with a background in social justice and civil rights, even if they have limited prior experience with HIV. Organizations operating at the intersection of racial and social justice, gender equity, reproductive rights, LGBTQ issues, immigration, detention, and mass incarceration are well-suited to influence the political and social determinants of health relevant to people living with or vulnerable to acquiring HIV in the South.

For the 2024-2025 cycle, \$1.2 million in funding is available through the Southern HIV Impact Fund. AIDS United anticipates making 20-25 grants of up to \$60,000 each to community-based and social justice organizations and coalitions. We welcome applications from HIV-focused organizations and coalitions, social justice organizations and coalitions working on the intersectional issues described above, and partnerships between these groups. Grants will be 12-months in length (November 1, 2024 – October 31, 2025), and two types of grants will be offered:

1. Project-specific grants to support a distinct project with clear goals, objectives, activities, and measurable outcomes. Project-specific grants aligned with the Southern HIV Impact Fund will support projects such as:
 - a. HIV prevention services
 - b. Linkage to and retention in HIV care and treatment services
 - c. Supportive services for people living with HIV
 - d. HIV-focused policy, social action, advocacy, and movement building*Projects that integrate services from multiple categories are encouraged.*
2. General operating grants to provide financial resources to an organization in support of its mission and overall activities, including operating expenses and overhead, rather than providing support for specific projects or programs. General operating requests must be aligned with the Southern HIV Impact Fund and support activities such as those noted in number 1.

Eligibility

To be eligible for funding through the Southern HIV Impact Fund, organizations must meet the following criteria:

- **Nonprofit Status** – Applicants must be nonprofit, tax-exempt organizations, per the guidelines

⁶ AIDSvU. HIV in the South. <https://aidsvu.org/resources/deeper-look-south/>

set forth by the Internal Revenue Service, with proper 501(c)(3) status, or hold 501(c)(7) status. Organizations or coalitions that do not hold 501(c)(3) or 501(c)(7) status must have a fiscal sponsor. *Note that 501(c)(4) designation is not the same. While it is possible for an organization to have both IRS (c)(3) and (c)(4) status, AIDS United will verify that each applicant organization has a (c)(3) designation.*

- **Geographic Location** – Applicants must have a staff member located in and provide services within the Southern United States. For this opportunity, the South is defined as: Alabama, Georgia, Florida, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, and Texas.
- **Financial Stability** – Organizations should be fiscally stable and viable before submission of the funding application.
- **Operating Budget** – There are no organizational annual operating budget limitations on this funding; organizations are eligible to apply regardless of their annual operating budget amount. However, funding for small, grassroots organizations with budgets under \$1 million will be prioritized.
- **Equity** – SHIF recognizes that HIV outcomes are significantly impacted by systemic racism, poverty, homophobia, and transphobia, heterosexism, and misogyny. As such, we will prioritize funding for organizations led by, majority staffed with, and serving Black and Latinx transgender folx; gender-nonconforming and nonbinary + people; Black and Latinx gay, bisexual, queer, and same-gender-loving men +; Black women; youth of color, other communities of color; and gender identities and sexual orientations of people of color that letters and words cannot fully describe.
- **Good Standing** - Current or previous grantees of any AIDS United funding portfolio must be in good standing with regard to reporting and all other grant requirements.
- **Grant Period** – Applicants must be able to utilize the funds within a 12-month period beginning November 1, 2024 and ending October 31, 2025.
- **Protection of Information** - All applicants will be required to provide a plan to protect patient information, including following guidelines in the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as applicable.
- **Relationship to AIDS United** – Current AIDS United grantees, including current and past grantees of iFORWARD and/or the Southern HIV Impact Fund, are eligible to apply. Organizations that have not been funded by AIDS United before are also eligible to apply.

Approach

- **Intersectionality and Social Justice** – 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 their achievement of optimal health. Systemically, all must be addressed if we are to see an end to HIV in the United States and create real change for people living with and affected by HIV. Southern HIV Impact Fund grantees are expected to address HIV-related disparities through an intersectional framework through their organization’s ongoing work and proposed project. Applicants can leverage the following resources to deepen their understanding of this approach:
 - [We the People Report](#) (Black AIDS Institute, 2020)
 - [A Declaration of Liberation: Building a Racially Just and Strategic Domestic HIV Movement](#) (HIV Racial Justice Now!, 2017)
- **Meaningful Involvement of People Living with HIV** – MIPA ensures that communities most affected by HIV are involved in decision-making at every level of the response, including in the development,

implementation, resolution and evaluation of programs and policies that impact their lives. Competitive organizations will incorporate MIPA into their organizational management, staffing, board of directors, and governance, as well as their proposed project. Applicants can leverage [resources from AIDS United](#) to deepen their understanding of best practices for incorporating MIPA.

Requirements

- **Participation in Evaluation** – Grantees will be asked to report the number of unique beneficiaries (for grantees who receive general operating support) or the number of unique beneficiaries within each category of work (for grantees who receive project support), as well as the demographic information (age, race/ethnicity, gender identity, HIV status and sexual orientation) of each beneficiary. Grantees may apply to waive the requirement to collect sensitive information in up to two of these categories if they can provide a reasonable justification about why they cannot collect it. Organizations that cannot collect such data are encouraged to request technical assistance in establishing systems that will support data collection in their application. Applicants will not be penalized for indicating a lower capacity for evaluative activities
- **Participation in Technical Assistance** – Grantees will be required to attend a grantee convening in the spring of 2025 and to participate in virtual technical assistance calls on a quarterly basis.

A summary of evaluation, technical assistance and grant management activities are included below. By submitting a pre-application, the applicant acknowledges and agrees to participate in the activities as described.

Activity/Requirement/Deliverable	Timeframe/Deadline
Grant Payments	Grant payments will be made in two installments: 50% of the annual approved grant amount upon signing the grant agreement and 50% upon submission of a complete interim report.
Welcome Webinar	By November 30, 2024
Participation in evaluation activities, including completion of a baseline, interim and final report.	A baseline report will be due by November 30, 2024, in addition to the interim and final reports noted below.
Attendance at an in-person All Grantee Convening	By April 30, 2025
Annual Interim Narrative and Expenditure Reports	By May 31, 2025
Annual Final Narrative and Expenditure Reports	By December 1, 2025
Check-In Calls between AIDS United and the Grantee	Calls will occur on a quarterly basis for the duration of the grant
Participation in other grantee meetings (in-person, online, or otherwise), local or regional advocacy or community meetings/events, and any other required grantee meetings.	As applicable
Participation in technical assistance activities, including webinars, online courses, and peer-to-peer learning calls with fellow grantees	Completed on a quarterly basis for the duration of the grant
Site Visits or Audits by AIDS United staff	Site visits or audits are not anticipated to occur for this program; however, AIDS United retains the right to conduct site visits or audits as needed

Completion of surveys required by AIDS United	Grantees must complete one annual all grantee survey
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Submission and Timeline

Applicants have two options to submit responses to this request for pre-applications:

1. Written pre-applications will be submitted via AIDS United’s online [Pre-Application form](#) by 6 p.m. ET on July 22, 2024. Questions do not have a word limit. However, applicants should aim for written responses to the Pre-Application Narrative questions to be no longer than one page, single space with 12 point font.
2. Applicants can submit a pre-recorded video that is no longer than 15 minutes in length, responding to the Pre-Application Narrative Questions. Videos should be uploaded to AIDS United’s online [Pre-form](#) by 6 p.m. ET on July 22, 2024. Applicants submitting a pre-recorded video will submit responses to the overview questions in the Pre-Application.

Submitting a pre-application is the first stage in our selection process. **Submitting a pre-application is required; [click here to start your pre-application](#).** A community-based review committee will evaluate all pre-application submissions and invite up to 40 applicants to submit a full proposal. The timeline for the selection process is:

Activity	Date
Pre-Application Opens	June 24, 2024
Pre Application TA Webinar (register here)	July 2, 2024, at 1 PM ET/12 PM CT
Pre-Application Closes	July 22, 2024
Full Application Opens. <i>Applicants will be notified if they have been invited to submit a complete application.</i>	August 12, 2024
Full Application TA Webinar (only applicants invited to submit a full proposal will be able to register for the Full Application TA Webinar)	August 28, 2024, at 2 PM ET/1 PM CT
Full-Application Closes	September 9, 2024
Date of Funding Notification	October 7, 2024
Grant Period Begins	November 1, 2024
Grant Period Ends	October 31, 2025

Restrictions

Grant funds may not be used for: medications or purchasing of medications; direct medical expenses, including lab expenses; existing deficits of Grantee; basic biomedical research, clinical research, or clinical trials; projects that directly influence or advance pharmaceutical business, including purchase, utilization, prescribing, formulary position, pricing, reimbursement, referral, recommendation or payment for pharmaceutical products; individuals with prescribing authority, individual health care providers, or physician group practices; events or programs that have already occurred; indirect expenses outside of the percentage noted in grantees’ approved budgets; and/or direct or grassroots lobbying. An in-depth description of direct and grassroots lobbying can be [accessed here](#).

Organizations that discriminate on the basis of race, color, gender, religion, disability, sexual orientation or gender identity or expression are not eligible to apply.

Pre-Application

Organizational Overview

1. Organization name
2. Organization Employer Identification Number (EIN)
3. Organization address
4. Organization city
5. Organization state
6. Organization zip code
7. Organization website
8. Organization Type (CBO/ASO/faith-based/human rights/clinic or medical provider/legal aid/health department/nonprofit organization not specified/other _____.)
9. Summarize the organization's mission (two to three sentences)
10. Year organization founded (Calendar Year)
11. Year organization began working in HIV (Calendar Year)
12. Staff Size
 - 0-10
 - 11-25
 - 26-50
 - 50+

Primary Contact Information

1. Primary contact name
2. Primary contact title
3. Primary contact phone
4. Primary contact email

Fiscal Sponsor Information, if applicable

1. Name
2. Address, City, State, Zip Code
3. Employer Identification Number (EIN)
4. Website
5. Contact person name
6. Contact person title
7. Contact person email
8. Contact person phone number

Organizational Leadership

AIDS United seeks to understand the leadership of the organizations we fund. We define an organization as led by a certain demographic group or community when all of the conditions below are met:

- 1) The executive director/highest paid staff or equivalent identifies as a member of the group.
- 2) 51%+ of senior leadership identify as part of the group.
- 3) 51%+ of staff identify as part of the group.

We recognize that these definitions are imperfect. We are committed to continued learning, updating our language and being cognizant of the ways in which HIV status, race, gender identity, sexual orientation, and lived/living experience impact people's access to power.

Based on the definition above is your organization led by:

If your organization does not collect data needed to answer this question, select "unsure."

	Yes	No	Unsure
People living with HIV			
Black, African American, African, or Afro Caribbean people			
American Indian, Native American, Native Hawaiian or Alaska Native people			
Latino, Latina, Latinx, Latine people			
People of color			
Women of trans experience			
Men of trans experience			
Lesbian, gay, bisexual, queer, asexual, aromantic and same-gender-loving people			
Cisgender women			
People who use drugs			
Sex workers			
People who are or have been unhoused/unstably housed			
People with a history of incarceration			
Youth (under the age of 24)			
Lifetime survivor or Dandelion			
People with other relevant lived experience (please specify)			

Please share any additional information you would like about the demographics of your organization and how the leadership is reflective of the intersectional experiences and identities of the people that you serve.

If your organization does not collect the data needed to answer any of the questions, please explain why your organization does not collect the information.

Organizational Budget

1. Total organizational budget, rounded to the nearest dollar (current fiscal year)
2. Current Budget Year Start Date
3. Current Budget Year End Date

Conflicts of Interest

1. Are you or any member of your organization an employee of AIDS United, a member of AIDS United's Board of Trustees, or the Public Policy Council (PPC)?
 - a. If yes, please provide the person's name(s) & role (Employee, Board of Trustees, Public Policy Council)
 - b. No
 - i. If the answer was "yes" to the question above, do you attest that this person will recuse themselves from any involvement in the application process and/or financial decisions associated with this opportunity?
 1. Yes
 2. No

Pre-Application Overview

1. Project title
2. Total funding amount requested
3. Type of request
 - General Operating Support
 - Project Support
 - If project support, please select what type of project (*select all that apply*).
 - HIV prevention services
 - Linkage to and retention in HIV care and treatment services
 - Supportive services for people living with HIV
 - HIV-focused policy, social action, advocacy, and movement building
4. How many unique individuals will participate in grant-funded activities? *These individuals are your beneficiaries.*
5. Geographies to reach
 - Area to be served by project or grant (urban, suburban, rural, reservation). *Check all that apply.*
 - Geographical scope (local, statewide, regional, national). *Check all that apply.*
 - Describe Location
6. What services or programming will be supported by this grant? Please check all that apply.
 - Prevention
 - Linkage to care services
 - HIV care and treatment (directly provided by your organization)
 - HIV care and treatment (referrals to other providers)
 - Retention in care services
 - Social services (directly provided by your organization)
 - Social services (referrals to other providers)
 - Digital campaigns and events
 - Harm reduction

- Training and leadership development
 - Advocacy
 - Additional services or programming
 - Please specify
7. Please indicate which of the following groups your proposal is designed to reach. *Check all that apply.*
- Black/African American/African/Afro Caribbean people
 - Latino/Latina/Latinx/Latine people
 - American Indian, Native American, Native Hawaiian or Alaska Native people
 - Asian, Asian American, or Pacific Islander people
 - People of color
 - White people
 - People aged 50 and older
 - Young people aged 25 and under
 - Lifetime survivors or Dandelions
 - Women of trans experience
 - Cisgender women
 - Men of trans experience
 - Cisgender men
 - Gender nonbinary, gender nonconforming or genderfluid individuals
 - LGBTQA+/SGL people
 - People living with HIV or AIDS
 - People living with viral hepatitis
 - Sex workers
 - People who use drugs
 - System-impacted individuals (i.e., those in or who have formerly been in jail or prison)
 - Immigrant populations
 - People who are homeless or unstably housed
 - People in rural communities
 - Additional groups (specify)

Pre-Application Narrative

1. Please provide a brief overview of your organization, including your experience addressing HIV and/or intersecting social justice issues in the South.
2. Please provide a brief description of your proposed project (project specific) or how your organization would utilize requested funding (general operating support).

Technical Assistance During the Pre-Application Process

AIDS United is committed to assisting applicants with the preparation of a complete and responsive pre-application. Our staff will be available to answer any questions and provide technical assistance. Please direct all questions about the Fund and Pre-Application to southernfund@aidsunited.org. Technical questions about the LOI can be directed to grants@aidsunited.org. Additionally, a webinar will be held on July 2, 2024, at 1 PM ET/12 PM CT to provide clarification about the grant announcement and key pre-application submission tips. [Register here](#).

Thank you for your interest in the Southern HIV Impact Fund and your commitment to people living with and affected by HIV in the South!