

Converging Epidemics: COVID-19, HIV & Inequality

Community-led Lessons for Funders

EXECUTIVE SUMMARY



**ELTON JOHN
AIDS FOUNDATION**

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“What we are seeing is confirmation that the communities we serve are vulnerable and the systems are fragile. It is necessary to think differently about what communities need to flourish.”

- Executive Director, U.S. HIV/AIDS network

This report—commissioned by Funders Concerned About AIDS (FCAA) in partnership with the Elton John AIDS Foundation (EJAF)—highlights how marginalized communities have been impacted by COVID-19 in the U.S. and globally and what their key evolving needs have been as the pandemic has progressed; provides reflections on lessons learned from private funders' emergency COVID-19 response; and presents a set of recommendations for funders, global health institutions, and governments—including the new U.S. administration—for their efforts going forward. The learning and recommendations are based upon and informed by a review of surveys, reports, and rapid assessments produced by HIV-related funders, philanthropy-serving organizations (PSOs), research institutions, and global, regional, and national networks representing the populations of focus¹ for the learning effort, as well as over 30 interviews with funders, networks, community-based organizations (CBOs), and individual activists, which were conducted by an external consultant team from November 2020 to February 2021.

The **key underlying theme** running through-out this report, and the most commonly expressed reflection from CBOs, networks, and the funders who support them, **is that the challenges and stresses highlighted by the pandemic are not new for people living with or at risk of HIV, especially in the case of LGBTQ individuals and communities of color in the U.S. and key populations globally.** These challenges reflect the structural, systemic issues that have disproportionately affected these communities for decades, and continue to do so.

The pandemic has deepened existing inequalities and vulnerabilities but did not create them. During the first 12 months of COVID-19, marginalized and criminalized communities have struggled first and foremost with basic survival needs—food, shelter, cash—which funders have tried to partially address through emergency grantmaking, especially as these groups have largely been excluded from governmental humanitarian responses. Governments and philanthropic entities seemed to have minimal communication, particularly in the U.S. context, causing overlaps in funding in some areas, while leaving other important areas unfunded.

¹As described in greater detail in the report, information gathering for this learning effort focused on the following communities: in the global context, LGBTQ people, sex workers, women who use drugs, and young people, and in the U.S., black gay and same gender loving men, Black women and transgender women of color. Reflections on the impact of COVID on intersecting communities, including migrants and immigrants, and people in prison settings are included, but could not be covered comprehensively due to the time frame for this work.

Key Needs of Communities during the COVID-19 Pandemic



The long-term impact of disruptions in access to essential health services during lockdowns, including harm reduction, sexual and reproductive healthcare, and HIV prevention, testing, and treatment programs, is still unknown. Governments in many regions are using COVID-19 as a pretext to introduce even more repressive policies and criminal measures towards sex workers, people who use drugs, LGBTQ people, migrants, and other vulnerable groups who are also bearing the brunt of COVID-19 restrictions on trade, movement, and health services access.

Other key and evolving needs during the pandemic that, if left unaddressed, will continue to have a devastating impact on the health, well-being, and human rights of people at risk of or living with HIV include: increased **mental health issues** (anxiety, depression, trauma), **gender-based violence (GBV)** and violence at the hands of law enforcement and security structures, as well as **lack of access to technology** for information, care and services which have increasingly shifted on-line. Throughout this period, communities and CBOs have demonstrated incredible resilience, flexibility, and creativity in meeting their own needs—as they always have—and examples are shared in this report.

It is hoped that the findings and recommendations in this report, many of which stem from what marginalized communities have themselves asked for over many years, can serve as a call to action for funders and other actors in the HIV response to “do things differently,” as the environment continues to shift rapidly. Many communities and CBOs are struggling to survive as resources—already severely limited for populations most at risk of HIV—are shifting to COVID response and longer-term health preparedness and security.

COVID-19 has laid bare the consequences of siloed philanthropy and the imperative to accelerate intersectional, multi-level work, with particular attention to integrating the HIV and COVID responses with racial justice efforts in the U.S. While the report highlights many positive and responsive funder practices, both in the U.S. and global context, it is clear from community networks and groups’ feedback that much is left to be done.

“More dialogue is needed between donors and community groups on what is actually needed. There is still a huge gap and disconnect between needs and what is being funded.”

- Global Key Population Network Leader

Key Recommendations:

Below are key recommendations for the primary audience for this report: the funder community and FCAA. All the recommendations prioritize attention to marginalized and criminalized populations, for whom philanthropic and governmental resources remain all too scarce, particularly, LGBTQ people, sex workers, people who use drugs, vulnerable youth populations, immigrant/migrant communities, and Black, Indigenous and People of Color (BIPOC). A full list of recommendations is provided in Section 5 of the report for funders, global health institutions, governments, and FCAA.

- Commit to **long-term core support for movements and CBOs** to transform unequal and discriminatory economic and health systems and social structures;
- Provide **increased and longer-term support to intermediary funders and infrastructure organizations** that are closer to—and oftentimes part of—grassroots community advocacy and actions, and thereby able to provide rapid, flexible funding and other support to CBOs;
- Commit to even greater **funding flexibility** (including humanitarian support) to ensure the survival and sustainability of community-led groups and intensify efforts to create **streamlined and low-threshold grantmaking processes**;
- Increase efforts to **engage and involve communities in foundation governance**, including at the institutional level (boards) and grantmaking level (priority-setting and decision-making);
- Increase funding and establish funding mechanisms to **strengthen and support local advocacy by CBOs**, especially in regions where private and bilateral donors have decreased their commitments and national government policies, programs, and funding sources do not include protections and access to services for marginalized groups;
- Ramp up and **prioritize mental health and technology equity** in funding strategies;
- Ensure funding for **documentation, monitoring, and advocacy around human rights violations**, as well as **safety and security plans and protections** for community-based networks, organizations, and individual activists;
- **Coordinate priority-setting and crisis response** more effectively across the donor community and **strengthen collaboration and learning** among different donor spaces, including humanitarian response;
- Lift up and actively advocate for policies, programs, and processes that **address racial, gender, and other forms of injustice against criminalized and marginalized groups**, including with governments and other stakeholders.

Recommendations for FCAA, as part of its core mission to inform, connect, and support philanthropy to mobilize resources to end the global HIV pandemic and build the social, political, and economic commitment necessary to attain health, human rights and justice for all, include the following:

- Bring together donors, networks, and community groups to reflect on key lessons learned over the last 12 months and share framing, priorities, and recommendations for the future;
- Accelerate donor discussion of meaningful support for reform of structures and systems that will lead to greater economic, health, and social equity;
- Facilitate greater linkages, collaboration, and learning between HIV-related funders and donors in other spheres, including the humanitarian area;
- Share lessons learned across donors on how to make the grantmaking process more streamlined, sensitive to community experience, low-threshold, and flexible;
- Organize discussions on the nature of donor flexibility and ways to support increased community agency;
- Actively promote the inclusion of community voices and experience in donor governance.

Through its 'COVID-19 Learning Group' (Learning Group), described in greater detail in Section 1 of this report, FCAA has already begun the process of actively discussing these and other recommended action steps to take forward in 2021 and beyond.