During March 2011, the Latino Commission on AIDS, in collaboration with the Philadelphia Department of Public Health, coordinated a 3-day training institute in Philadelphia, PA. This training institute brought together leaders, activists and service providers in the community to disseminate and exchange information regarding their work in HIV prevention. On the last day, we were pleased to have Terri Clark, Prevention Services Coordinator of Action AIDS, present closing remarks on her experience throughout the 3-day institute. Please enjoy the remarks and pictures summarizing the 2011 Philadelphia Training Institute.

“Let me first start by saying thanks again to our colleagues at The Commission for organizing and hosting this training institute. It has been a productive and engaging three days.

I’ve been asked to put a closing together with the theme “Making It Work”, and I’d like to start by taking us back to a time that some of you in the room will remember quite vividly as the face of the epidemic as we knew it back in the early 90’s. At our opening plenary, David Acosta shared with us a timeline of the epidemic as it has unfolded over the past 30 years.

I think we can all agree that we have come a far way with confronting HIV here in Philly. We now have life-saving drugs that help us manage the virus as a chronic disease vs. a death sentence; laws are in place to take action against job and housing discrimination based on HIV status; and rapid testing is available so we can know our status in 20 minutes as opposed to a 2 week waiting period. And as of July, 2010, we have our First National HIV/AIDS Strategy, and although not perfect, is certainly a step in the right direction.

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Reflections on Government Grant Writing

Dr. Andrew Spieldenner

In this economy, Community Based Organizations (CBOs) are all after successful grants. Unfortunately, there is never enough money available and, just based on the law of averages, CBOs will not get every application funded. After years of doing government grants – as a writer and a reviewer – I have seen some basic keys to success and failure.

Ideally, a grant should fit the CBO’s mission and strategic plan. I understand that often CBOs just need the money, but if it falls way outside of your purview, applying may be a waste of time. If you do somehow manage to get the funding, the projects can be a pain to administer, potentially leading to ill-will with the funder.

When writing for government grants, keep in mind the following:

• Read the entire RFA. This may sound tedious, but it’s necessary. Sometimes the scoring section will give you insight on how to write the application.
• Read the required documents and make sure you obtain them all.
• Start with the budget first. This will tell you exactly what you can afford to do. Budgets are usually not a scored item, but every reviewer checks the budgets. Knowing how much things cost shows a basic capability to implement the project.
• Answer all the questions asked in the order they are given.
• Use the voice of the funder in the grant, as good portion of the reviewers will be from that agency. The alphabet soup of agencies – DHHS, CDC, SAMSHA, OMH, IHS, DOC, DOE, NIH, HDs, etc.— all have different cultures. As a result, they respond to different kinds of writing styles.
• Have realistic and attainable goals and objectives in an appropriate timeline (e.g. Include time for formative assessment, hiring and training staff. Ask yourself, are there really XXX number of clients in your jurisdiction?)
• Use your organizational data to make your point. Why are you the best choice for this project?
• Don’t wait until the last minute to put the whole grant application together. It always takes longer than you think just to compile everything and upload it correctly.

As a reviewer, I have seen a lot of basic errors. A reviewer often has multiple grant applications to score. Don’t make things more difficult for them to find. Break up the narrative with graphs and flow charts, as appropriate. Also, check your spelling and grammar, especially of your organization, the health issue, the target population or potential partners. I read one grant where the applicant organization changed its own name in the middle of the grant, and I realized it was a recycled application from another job!

Cite relevant articles and reports in your grant. Yes, the footnotes may detract from your page allocation, but it will show the reviewers that you’ve done your homework. In case you’re wondering, Wikipedia, newspaper and magazine articles, blogs and entertainment media, such as films and TV, do not count as academic sources – so do not cite them. You want to sound smart about the issue at hand.

If you don’t get the grant, ask for feedback from the funder. Sometimes they will share the scoring criteria and concerns from the review committee. Don’t take it personally: if the grant was deemed non-responsive in some areas, then think about how to make it more clear and evident in the next application.

The Dennis deLeon Sustainable Leadership Institute

Named after Dennis deLeon, former president of the Commission and a tireless advocate on behalf of Latinos, people of color, LGBT and other marginalized populations, The Dennis deLeon Sustainable Leadership Institute is a space for emerging community leaders to enhance and develop leadership skills in order to impact HIV/AIDS local, state and federal health policy affecting Latinos in the Deep South.

The institute is a platform to promote participatory and honest dialogue about how to address the pressing social and structural issues affecting Latinos in the Deep South.

In its first year, this institute aims to become an ongoing initiative in the Deep South, happening yearly with a different set of emerging leaders each year. The 2011 Dennis deLeon Sustainable Leadership Institute is currently under way and will be taking place from April to September 2011. This year’s institute will focus on leaders in the states of North Carolina, South Carolina and Louisiana.

For information about this, or future leadership institutes, contact the Latino in the Deep South:

Yanira Arias, Director of Community Organizing — yarias@latinoaids.org—(212)675-3288 x344

Christian F. Castro, Program Director — cfcastro@latinoaids.org—(323)304-5161
On July 13, 2010 the White House unveiled the National AIDS Strategy for the United States (The White House Office of National AIDS Policy, 2010). The strategy is meant to be a clear, action-driven roadmap for addressing the HIV epidemic in the United States. The Office of National AIDS Policy hosted 14 HIV/AIDS Community Discussions with thousands of Americans across the U.S. and reviewed suggestions from the public via the White House website. Approximately 4,200 people attended 14 community-based meetings (12 in U.S. cities, 2 in U.S. territories) to help discuss the strategy.

The strategy aims to lower the HIV incidence rate by 25% by 2015 and increase by 90% the proportion of people living with HIV who know their serostatus. With the release of the National AIDS Strategy there are bound to be shifts in funding requirements, new interventions diffused by the CDC and tactics that community based organizations will have to engage in. Below are some key points from the Strategy that will be helpful to keep in mind as new programs are considered and designed.

### Key Action Steps
*(including, but not limited to…)*

1. Intensify HIV prevention efforts in communities where HIV is most heavily concentrated.
   - Gay and bisexual men
   - Black men and women
   - Latinos and Latinas
   - Substance abusers
2. Educate all Americans about the threat of HIV and how to prevent it, including the utilization of evidence-based social marketing and education campaigns.
3. Establish a seamless system to immediately link people to continuous and coordinated quality care when they are diagnosed with HIV.
4. Support people living with HIV with co-occurring health conditions and those who have challenges meeting their basic needs, such as housing.
5. Adopt community-level approaches to reduce HIV infection in high-risk communities, including interventions that reach a larger number of individuals (meaning less group level interventions) and measuring community viral load.
6. Reduce stigma and discrimination against people living with HIV.

### Three Main Goals

1. Reducing the incidence of HIV
2. Increasing access to care as well as optimizing health outcomes
3. Reducing HIV-related health disparities

Throughout all these goals and proposed steps, there is a major focus on efficiency, evaluation and wide reach of programs. Structural level interventions, along with inventions that focus on those that are HIV positive, will be receiving more attention in the coming years. To accomplish these goals, the White house proposed a more coordinated national response to the HIV epidemic - which is why the NAS also includes a Federal Implementation Plan that outlines key, short-term actions to be undertaken by the federal government to execute the outlined recommendations. The White House Office of National AIDS Policy (ONAP) will provide oversight and manage interagency coordination implementing the Strategy. ONAP will also provide an annual report analyzing the information provided by various departments and states on the progress towards achieving the goals of the National AIDS Strategy.

For more information on the National AIDS Strategy and to view the document in its entirety, as released by the White House Office of National AIDS Policy, please visit AIDS.gov

For information on how to request Capacity Building Assistance please visit www.latinoaids.org/programs/cba or contact us at CBAdivision@latinoaids.org or 212-675-3288
At the same time, some things from [the early 90’s] era remain the same. The stigma, prejudice, and marginalization that HIV folks experience is very much a part of our city and society. This stigma creates mighty barriers which prevent people from being tested; seeking medical and support services; and disclosing their status to partners, family and friends. Stigma is one of the major reasons why the HIV epidemic continues and thousands of people are getting infected with HIV every year.

“Great to be unleashing the local experience.”
Participant Quote

For the past 3 days, we have worked to gain skills and insights about our HIV prevention work here in Philly. We spent time learning how to engage communities; create organizational effectiveness and program sustainability, and how to design and implement effective programming.

On Day 1 we kicked off the institute with a series of roundtables that addressed poverty and homelessness, mental illness, sexuality, IDU, our NHAS, and the shift of CBO to a medical setting. Local providers presented their posters and we wrapped up the day with a series of workshops that spoke to social marketing, data trends, overcoming stigma, shifting populations, and the use of social networks.

“Very informative and enjoying the networking opportunities.”
Participant Quote

On Day 2 we started our morning hearing from Elicia Gonzalez from Galaei talking about program sustainability and how Galaei, much like Madonna, has had to reinvent itself over the years to keep up with the changing face of the epidemic. Chris Bartlett, the warm and welcoming leader our the William Way Community Center, talked about program sustainability through the lens of self-care and the importance of loving ourselves and our community in order to stay passionate and creative about our work. We spent the remainder of the day talking about grant writing, program evaluation, staff burnout, recruitment and retention, selecting DEBIs, and fundraising.

This morning you wrapped up by learning how to utilize data to inform program design; Dr. Vega identified those factors critical to packaging our interventions; and we looked at adapting individual, group and community level interventions, along with an overview of public health strategies.

“I will take what I learned about staff burnout and definitely apply it to my job.”
Participant Quote

As I reflected on what these 3 days have meant to me, I recognize that although we have varied backgrounds and experiences, we are all advocates who are joining the fight against this epidemic. My message is one of collaboration and hopefully motivation. Let’s take what we have gained individually from this local experience and come together in collaboration, building on strengths that each of us brings to this work in order to:

- Dispel the myths around HIV/AIDS that work against effective prevention and risk reduction.
- Increase awareness about HIV/AIDS and eliminate the stigma associated with the disease.
- Voice support for greater access to health care, housing, and education for the many marginalized and disadvantaged communities who are impacted by HIV.

In closing, I’d like to share a quote from civil rights leader Howard Thuman:

“Don’t ask what the world needs. Ask what makes you come alive and go do it. Because what the world needs are people who have come alive.” - (Howard Thuman, educator and civil rights leader)

Thank you.”
Cielo Latino Gala Unmasks AIDS and Commits to Address Health Challenges in Latino Communities

New York, May 12, 2011 — The Latino Commission on AIDS held its annual Cielo Latino benefit gala on May 10th at Cipriani Wall Street in a room full of stars, business & community leaders, and distinguished honorees. Cielo Latino, the largest fundraiser for Latino/Hispanic AIDS initiatives in the U.S, came alive this year with the theme AIDS Unmasked, which unveiled the many issues still affecting people living with HIV/AIDS, including stigma and important health issues such as diabetes and hepatitis, among others. This year’s gala was hosted by Emmy Award-winning reporter Tom Llamas and honored Anderson Cooper with the Compañero Award; Jose “Pepe” Morales Jr., Pioneer Award; Humberto Cruz, Dennis de Leon Voz de Compromiso Award; and Gilead, with the Business Leadership Award.

“Far too many people are living with HIV and don’t even know it. Far too many will become infected because they don’t have access to information or medical care. You’ve helped so many people overcome the obstacles they face to prevent them from getting tested or getting treated. Obstacles of poverty, language, immigration concerns, social stigma. You’re serving populations who are not being served well by others. I’m really moved to receive this award tonight because I’m so moved by your work, by your dedication, and your willingness to stand with those who have been ignored for far too long,” stated Anderson Cooper about the Latino Commission’s work.

Celebrity presenters and attendees included actors Rosie Perez, Lupe Ontiveros, Tony Plana, Wilson Cruz, Steve Guttenberg,Yancey Arias, and Miss Universe 2008 Dayana Mendoza. The Grammy-nominated salsa band the New Swing Sextet was the Commission’s headline performer, along with DJ Henry Knowles. “We re-committed to continue implementing our prevention, education, HIV testing initiatives and connecting people to medical care. The supporters of Cielo Latino and the Latino Commission on AIDS represent hope and support to meet our diverse communities’ needs.” commented Guillermo Chacon, President of the Latino Commission on AIDS.

The funds raised from Cielo Latino allows the Commission to continue to provide critical and vital services to thousands through its innovative programs and initiatives, and millions more through its social marketing education, awareness, outreach, and treatment education campaigns.