



## **Catalyst Request for Applications**

The Washington AIDS Partnership (WAP) invites 501(c)(3) nonprofit organizations to apply for funding as part of WAP's Catalyst Initiative. **Applications are due by 5pm Eastern Standard Time (EST) on Monday, May 6<sup>th</sup>, 2019 for funding in June 2019.**

### **Summary**

As an HIV funder, WAP is committed to ending the HIV epidemic in Washington, D.C. To do this, philanthropic resources need to be focused on the populations most at risk for and disproportionately impacted by HIV. In Washington, D.C., men of color, specifically Black/African American and Latinx men who identify as gay, bisexual, and queer, are at high risk for HIV and often underserved and marginalized by the health care system. HIV infection does not occur in a vacuum; a variety of issues help to increase risk for HIV, limit access to and reduce the quality of health care, and negatively impact the overall health and well-being of these populations. Often reported issues include stigma, racism, discrimination, mistrust of the medical system, experiences with trauma and violence, homophobia, incarceration, and other social, economic, and environmental factors like income instability and housing access. There is also a history of marginalization within the HIV epidemic, from research to access to treatment, and limited funding opportunities specific to their needs. Without addressing these issues, we cannot substantially reduce new HIV infections, improve health care quality and accessibility, and positively impact the overall health and well-being of gay, bisexual, and queer men of color.

As part of the Catalyst Initiative, WAP will support intersectional projects that address the key issues that negatively impact the health and wellness of gay, bisexual, and queer men of color in the Greater Washington region. The initiative's focus of "health and wellness" is deliberately broad, to encompass the variety of issues that negatively affect gay, bisexual, and queer men of color and provide an opportunity for innovation. Proposed projects could focus on one health concern and an issue that negatively impacts it (i.e. housing and mental health or stigma and HIV) or a specific group within this initiative's target population and issues that affect the group's overall health and wellness (i.e. Latinx gay men who are experiencing homophobia in the medical system and have disengaged from care).

Organizations focused on racial equity, health, HIV, and/or engaged in intersectional social justice work are encouraged to apply. Not having a health or HIV background does not preclude an organization from applying. WAP is open to supporting organizations already working with the target population; organizations that have experience working with communities of color but have not focused on gay, bisexual, and queer men; and organizations that have no health background but have access to and expertise in serving the target population.

### **Needs Statement**

Communities of color experience the highest rates of HIV infection in Washington, D.C. African Americans account for 71% of newly diagnosed HIV cases while only 46.1% of the D.C. population.<sup>1</sup> In fact, 4.4% of the District's African American male population is living with HIV,

followed by 2.1% of Latinx men, both exceeding the World Health Organization's 1% definition of a generalized HIV epidemic.<sup>2</sup> Approximately one-quarter (26%) of new HIV infections were among African American men who have sex with men and 7% were among Latinx men who have sex with men.<sup>3</sup> In Northern Virginia, 47% and 22% of new HIV infections were among African American and Latinx populations, and the primary mode of transmission was men who have sex with men.<sup>4</sup> In Suburban Maryland, 74% and 15% of new HIV infections were among African American and Latinx populations, and the primary mode of transmission was men who have sex with men.<sup>5</sup> Nationally, if current rates of HIV diagnosis persist, 1 in 2 African American men who have sex with men and 1 in 4 Latinx men who have sex with men will be diagnosed with HIV in their lifetime.<sup>6</sup>

There are a number of issues that increase HIV risk and negatively impact health outcomes in the Greater Washington region. Many are rooted in the social determinants of health, including:

- Poverty and unstable and unaffordable housing; without a livable income and stable and affordable housing, individuals are less likely to be able to focus on their health
- Lack of or limited access to transportation and health and supportive services which negatively affects medical appointment attendance and medication adherence
- Stigma and discrimination, leading individuals to avoid their doctor's office and hide their health diagnoses like HIV from family and friends
- Limited cultural competency among medical providers and bad experiences in the health care system, resulting in not accessing or dis-engaging from care

The racial discrimination and oppression experienced by African Americans, along with the discrimination experienced by immigrants and other communities of color, negatively affect health and wellness. Unequal pay and discriminatory hiring practices, racially biased school discipline, housing discrimination, and deadly encounters with the police are just a few examples of how widespread and insidious racism and discrimination are in our culture. The history of the medical system's abuse of people of color has led to significant distrust of providers and the system in general. A well-known example is the 40-year Tuskegee study of syphilis among African American men. It was conducted without informed consent, and treatment was unethically withheld from participants.

Even with marriage equality and the growing social acceptance of LGBTQ communities, homophobia continues to be a significant issue. Society is still biased towards heteronormative relationships, and the stigma around being perceived as gay, bisexual, or queer can lead to increased risk for "substance abuse, risky sexual behaviors, negative body image, suicide attempts, increased stress and limited social support."<sup>7</sup> These factors bleed into health care interactions, from how care is provided and at what level to language barriers between providers and patients that negatively affect health outcomes.

### **Grantmaking Focus**

This initiative will support the development of innovative and intersectional approaches designed to address the health and wellness of gay, bisexual, and queer men of color in the Greater Washington region. Requests should clearly demonstrate a need for the proposed project, both in terms of who it is for and the proposed activities. Requests should also demonstrate cultural competency and a real understanding of the community it plans to work with and for. Request strategies could include but are not limited to:

- Advocacy and public policy, e.g. a project that will focus on removing a harmful local policy affecting housing services for gay men of color

- Leadership development, e.g. a project that will mobilize emerging leaders to build an advocacy network and testify before the D.C. Council
- Empowerment and community-building, e.g. creating safe spaces to build community, break down isolation and stigma, connect to networks of support, and expand knowledge of HIV prevention and care
- Improving individual outcomes, e.g. a project that pilots an innovative approach to connect men to health care
- Technical assistance, e.g. a project that will support a health organization to go through a strategic planning process to re-envision how they engage with, provide health services to, and hire gay, bisexual, and queer men of color

Proposed projects could focus on one health concern and an issue that negatively impacts it (i.e. housing and mental health or stigma and HIV) or a specific group within this initiative's target population and issues that affect the group's overall health and wellness (i.e. Latinx gay men who are dealing with homophobia and mistrust of the medical system and have disengaged from care). The grantmaking focus is deliberately broad to allow for innovation and intersectional approaches to issues facing the target population.

WAP will provide either:

- Program funding for projects focused on the target population
- Capacity building funding focused on technical assistance and organizational development efforts to support organizations to better serve and improve the health and wellness of the target population

### **Target Population and Eligibility**

Eligible organizations are 501(c)(3) nonprofit organizations currently serving or interested in serving the target population, gay, bisexual, and queer men of color in the Greater Washington region. WAP is most interested in supporting projects that prioritize populations at high risk for HIV in the Greater Washington region, specifically Black/African American and Latinx men who identify as gay, bisexual, and queer. Requests can target one, some, or all of the sub-groups within the target population.

The geographic scope includes the District of Columbia, Arlington, Loudon, Fairfax, Prince William and Stafford counties in Virginia; the cities of Alexandria, Fairfax, Falls Church, Manassas and Manassas Park in Virginia; and Calvert, Charles, Frederick, Montgomery, and Prince George's counties in Maryland.

Organizations focused on racial equity, health, HIV, and/or engaged in intersectional social justice work are encouraged to apply. Not having a health or HIV background does not preclude an organization from applying. WAP is open to supporting organizations already working with the target population; organizations that have experience working with communities of color but have not focused on gay, bisexual, and queer men; and organizations that have no health background but have access to and expertise in serving the target population.

### **Documenting Impact**

Applicants should be prepared to demonstrate how their request will result in real change and/or positive impact for the target population's health and wellness, including measurable outcomes.

## **Funding Availability**

WAP will award funding in June 2019. Only one application per organization is allowed. Grants will be for a one-year period, and there may be an option to renew funding for an additional year. Request amounts can range from \$10,000 to \$100,000.

## **Questions**

If your organization has questions about this funding initiative, you are encouraged to contact WAP Program Associate Joe Servidio ([servidio@washingtongrantmakers.org](mailto:servidio@washingtongrantmakers.org)).

## **Application Deadline & Format**

**Deadline: Monday, May 6<sup>th</sup>, 2019, 5pm EST.** Applications must be submitted online through WAP's online application system. Paper, fax, and email applications will not be accepted. To access the online application:

- Click on this application link: [grantrequest.com/SID\\_1366?SA=SNA&FID=35079](http://grantrequest.com/SID_1366?SA=SNA&FID=35079)
- You will be asked to **sign into an existing WAP online account**. Please use the same log-in information that you used to access your application previously. This will allow you to keep all of your applications and reporting requirements for WAP under one account.
- If this is **your first time using the system**, click on the "New Applicant?" hyperlinked text, located below the email box. Make sure to use an appropriate email address as you will use it to access your current application and submit it, and access reporting forms if your application is funded. Ideally, there should be one staff contact within your organization responsible for submitting applications.
- Please make sure to coordinate your application within your organization so you don't have two staff members submitting applications for the same project.
- **Logging out/accessing the application you started:** Make sure to click the "save and finish later" button, located at the bottom of the application – this will save your entries and take you to your account page where your applications and reports are stored. Click "exit" at the top of this page to log out. To re-access the application after you have logged out, use this link which takes you to the general log-in page: [https://www.grantrequest.com/SID\\_1366/Default.asp?CT=CT&SA=AM](https://www.grantrequest.com/SID_1366/Default.asp?CT=CT&SA=AM). Do not use the application link in the first bullet as the system will think that you want to start a second application!

WAP's application includes organizational and request-specific questions. Applicants should complete general organizational and request questions on the first three pages of the application AND the Catalyst questions on the "Program Support" page. Several attachments are required, including a project budget, and are detailed in the application on the "Attachments" page.

## **Questions about the Application**

WAP has an [FAQ](#) for its online application. If the FAQ does not address your question or issue, please contact WAP Program Associate Joe Servidio ([servidio@washingtongrantmakers.org](mailto:servidio@washingtongrantmakers.org)).

## **Nondiscrimination Requirement**

WAP funds only those organizations which do not discriminate, in any practices, with regards to race, color, national or ethnic origin, religion, sex, sexual orientation, gender identity and expression, marital status, personal appearance, family responsibilities, veteran status, matriculation, political affiliation, physical ability, and age.

## WAP Grantmaking Frequently Asked Questions

### **1. What are the important dates?**

- **May 6, 2019, 5:00pm EST:** Grant applications are due.
- **June 2019:** Applicants will be notified of the outcome of their request.

### **2. What is the target population and geographic focus for this RFA?**

The target population is gay, bisexual, and queer men of color in the Greater Washington region. WAP is most interested in supporting projects that prioritize populations at high risk for HIV in the Greater Washington region, specifically Black/African American and Latinx men who identify as gay, bisexual, and queer. Requests can target one, some, or all of the sub-groups within the target population. The geographic scope includes the District of Columbia, Arlington, Loudon, Fairfax, Prince William and Stafford counties in Virginia; the cities of Alexandria, Fairfax, Falls Church, Manassas and Manassas Park in Virginia; and Calvert, Charles, Frederick, Montgomery, and Prince George's counties in Maryland.

### **3. Is my organization eligible to apply?**

Eligible organizations are 501(c)(3) nonprofit organizations currently serving or interested in serving the target population, gay, bisexual, and queer men of color in the Greater Washington region. Organizations focused on racial equity, health, HIV, and/or engaged in intersectional social justice work are encouraged to apply. Not having a health or HIV background does not preclude an organization from applying. WAP open to supporting organizations already working with the target population; organizations that have experience working with communities of color but have not focused on gay, bisexual, and queer men; and organizations that have no health background but have access to and expertise in serving the target population.

### **4. What will not be funded?**

Grants will not be made to individuals, for medical research, for sectarian purposes, or for reimbursement of medical care. Grant funds cannot be used for the following purposes: to reduce operating deficits, to fund direct health care treatment (including the purchase of medications), to reimburse health services, or to fund endowments.

### **5. What about the request amount and grant duration?**

Only one application per organization is allowed. The grant period will be July 1, 2019 through June 30, 2020. Grants will be for a one-year period, and there may be an option to renew funding for an additional year. Request amounts can range from \$10,000 to \$100,000.

### **6. How will the application be reviewed?**

WAP's Steering Committee evaluates applications and presents a grants docket for approval to the Washington Regional Association of Grantmakers' Board of Directors.

### **7. What can I expect after submitting an application?**

Steering Committee members will review submissions. WAP staff may schedule a meeting, phone interview, or site visit to gather more information from selected applicants. All applicants will be notified **in writing** of decisions made in **June 2019**.

### **8. If my project or organization receives WAP funding, what type of reporting will I be required to complete?**

Funded organizations will be required to report on activities completed, outcomes and goals

met, successes and challenges, and other appropriate measures, along with financial reporting.

### **About the Washington AIDS Partnership**

The Washington AIDS Partnership (WAP) brings together ideas, people, and resources to end the HIV epidemic in the Greater Washington, D.C. region. As an initiative of the Washington Regional Association of Grantmakers, WAP invests in local organizations, focusing programming and resources on the communities most affected by the epidemic. WAP also provides technical assistance to local nonprofits to increase capacity and expertise; initiates public policy initiatives to address systemic issues; convenes local government, providers, funders, and other stakeholders to implement innovative strategies to reduce HIV risk and improve the lives of people living with HIV; and each year, recruits and mentors a team of young people who provide direct volunteer service in the community.

In 1987, a Ford Foundation study determined that the most effective private-sector response to the HIV epidemic would come from the local level. This led to the creation of AIDS United to encourage local philanthropy to become involved in combating HIV. Because the Greater Washington region was deeply affected by the HIV epidemic, the Ford Foundation invited the D.C. community to become one of AIDS United's eight original partner sites.

In 1988, the Eugene and Agnes E. Meyer Foundation and 20 local funders joined to found WAP which began funding a wide range of HIV prevention and care services. After five years of nurturing at the Meyer Foundation, WAP became an initiative of the Washington Regional Association of Grantmakers in 1993. Since 1989, WAP has granted over \$29 million, including more than \$7 million dollars raised from national sources, and reached thousands of people.

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<sup>1</sup> DC Annual Epidemiology & Surveillance Report Appendices: 31, 40. Released 2018.

<sup>2</sup> DC Annual Epidemiology & Surveillance Report: 6. Released 2018.

<sup>3</sup> DC Annual Epidemiology & Surveillance Report: 7. Released 2018.

<sup>4</sup> VA HIV Surveillance Annual Report: 2. Released 2018.

<sup>5</sup> Maryland Suburban Regional HIV Annual Epidemiological Profile: 18, 25. Released 2018.

<sup>6</sup> Lifetime Risk of HIV Diagnosis in the U.S. CDC. Released 2017.

<sup>7</sup> Perry N. Halkitis, PhD, MS. American Psychological Association. Discrimination and homophobia fuel the HIV epidemic in gay and bisexual men. April 2012. <http://www.apa.org/pi/aids/resources/exchange/2012/04/discrimination-homophobia.aspx>.