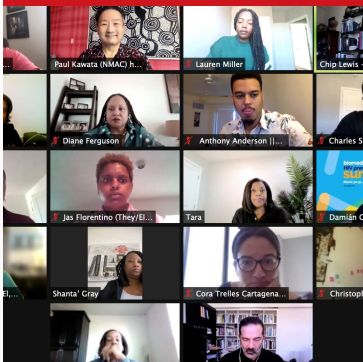


2021

ANNUAL REPORT



NMAC 
leads with race

01

Welcome

"This was not the year we had planned."

"DESPITE THIS CURVE BALL, NMAC WAS ABLE TO HAVE A SUCCESSFUL 2021."



PAUL KAWATA
EXECUTIVE DIRECTOR

This was not the year we had planned.

We had hoped that 2021 would bring an end to the Covid pandemic and allow us to return to our in person conferences and trainings.

That didn't happen.

Instead, we had to spend another year pivoting our programming to the virtual space. While we knew this was unavoidable, we also knew that we would take a second year of financial stress due to not having in person trainings and conferences.

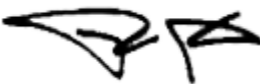
Despite this curve ball, NMAC was able to have a successful 2021. That is only due to the hard work and commitment of the

NMAC Board, staff, constituent advisory panels, donors, sponsors, and supporters. Without all of them, we simply would not have achieved nearly as much as we did.

I want to extend my deepest appreciation and gratitude to all of those who stood by us during this year. I know that no one had it easy and so my thanks for that support runs deep.

Here's hoping that next year I can tell you that our previous year went according to our plans.

Yours in the struggle,



Paul Kawata
Executive Director

02

About the Summit



FORMAT

This year's Summit was a two-day online conference that featured four plenary sessions, an exhibit hall and 40 workshops at three levels of instruction (beginner, intermediate, and advanced).

OPENING PLENARY

The opening plenary, "I Want Your Sex- PrEP and Claiming Power & Pleasure among GBMSM," explored how PrEP has impacted sexual communication and behavior in an open and real conversation about sex.

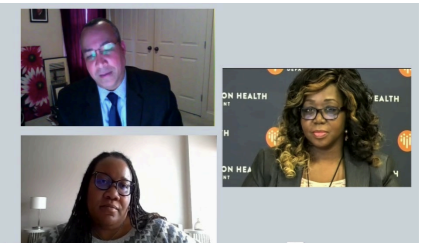


From academic and community perspectives, panelists shared their thoughts on the perceptions of risk, negotiation, and practices as they deepen into the liberating yet highly stigmatized aspects of PrEP. Panelists also discussed the transmasculine experience and its impact on not only its users but also on those who are living with HIV.

THE BIOMEDICAL HIV PREVENTION SUMMIT

The Biomedical HIV Prevention Summit is the only major regular conference focused on the prevention of HIV through biomedical means. This year was the fifth conference.

Due to the COVID-19 pandemic, this year's conference was held online instead of in person. More than 1,200 people registered to attend the conference.



GILEAD PLENARY

Summit Presenting Sponsor Gilead offered their plenary "Evolving HIV Testing as the Entry Point to HIV Prevention," to close day one of the Summit. Key topics explored include the current landscape of HIV testing, which includes the Ending the Epidemic plan and other initiatives, barriers, and gaps, as well as best practices highlighted through case studies.



WOMEN'S PLENARY

"Pink Table Talk: Women's Engagement and Inclusion with Biomedical Prevention Research" opened day two of the Summit. This plenary tackled the issues around the lack of inclusion cisgender women in biomedical prevention research, the limited options for HIV prevention for women, and how to address the HIV field to close these persistent gaps.



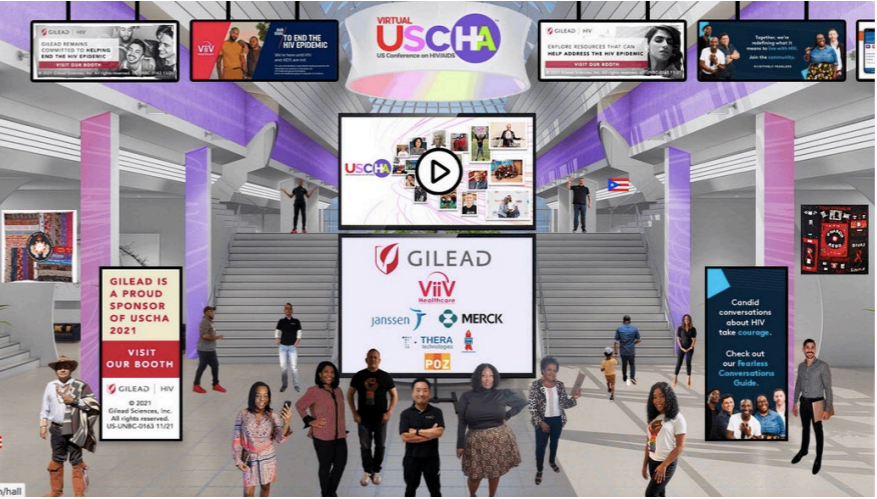
CLOSING PLENARY

The Summit closed with "Biomedical HIV Prevention Technologies. Are Our Systems Ready?" This plenary focused on the new methods of biomedical HIV prevention currently in the pipeline and whether or not our current health care systems will be able to provide access to them for the communities that need them.

WORKSHOPS

This year's virtual summit offered over 40 workshops in the following tracks: finance and access models; PrEP and ending the HIV epidemic; Training and Education Models; PrEP en español; community mobilization; COVID-19 and PrEP; Women and PrEP; Health Disparities, Social Justice and PrEP; implementation Research, Evaluation, and PrEP; and the PrEP continuum of care. Additionally, the Summit worked with Federal Partners to offer a Federal pathway of workshops from NIH, HRSA, and IHS.

03
About USCHA



**THE UNITED STATES
CONFERENCE ON HIV/
AIDS**

The 2021 USCHA was scheduled October 29 – 31 in Washington, DC. In August, USCHA was moved to the virtual format due to upticks in the Delta variant of the Coronavirus.

More than 2,000 people registered to attend the conference.

COMMUNITY CORNERS

Community Corners are a unique feature of the Summit. They are 15-minute presentation sessions from community partners on a variety of topics connected to biomedical HIV prevention. This year, there were four Community Corner sessions:

Gay Men of Color - Follow up thoughts and questions from the opening plenary.

Cisgender women- Women in the PrEP era and the huge gender gap in upkeep. Aracelis Quiñones and Cecilia Dennis, two long-term survivors, reflected on the AIDS Epidemic of the '80s and discussed the necessity of PrEP retention for women today.

50+ - Biomedical prevention on 50+ individuals. Steven Vargas and Michelle López discussed PrEP, sex, polypharmacy, co-occurring conditions, and more.

Transgender community corner- Biomedical prevention and transmasculine health from a provider's perspective.

LOUNGES

The Summit hosted a two-day community virtual lounge during the conference. The lounge was co-facilitated by HIV community organizers and consisted of two days of fun filled activities such as yoga, art therapy, and a dance happy hour. The lounge also facilitated community sessions on Women in PrEP, Surviving HIV During an Epidemic, and a Community Trans roundtable discussion.

EXHIBIT HALL

Every sponsor of the Summit had a booth in the Summit Virtual Exhibit Hall, offering attendees an opportunity to learn more about their services.

FORMAT

This year's USCHA was a two-day online conference that featured four plenary sessions, an exhibit hall, institutes, and workshops. USCHA offered more than 140 workshops and institutes at three levels of instruction (introductory, intermediate, and advanced).

OPENING PLENARY

Federal Perspectives on HIV in the COVID Era

This year's Opening Plenary focused on the federal response to HIV in the COVID environment. Dr. Anthony S. Fauci gave an update on the latest in HIV Treatment,



vaccines and cure research. Harold Phillips, the Director of the White House Office of National AIDS Policy and the newly decorated four-star admiral in the Public Health Service, Assistant Secretary of Health Dr. Rachel Levine gave a live address on the Biden/Harris administration's plan to end the HIV epidemic and the community's role in its implementation.

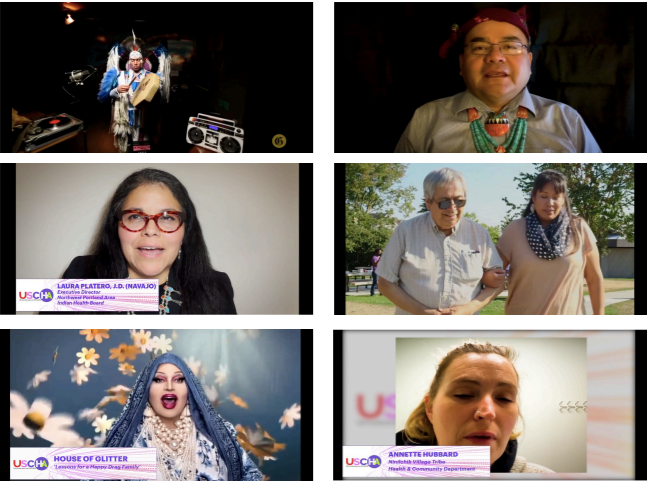
Additionally, representatives from the PLHIV Caucus discussed the importance of having a PLHIV federal policy agenda and the importance of quality of life. USCHA honored House Speaker Nancy Pelosi for her tireless work championing HIV issues in Congress to effect positive change in the lives of persons living with HIV and AIDS.



VIIV HEALTHCARE PLENARY

Self, Identity and Culture: How culture and identity shape and inform each other

Culture plays a critical role in resolving the tension between how we are seen and how we see ourselves – and if we create nuanced and accurate cultural portrayals of identity and experience, we have an opportunity to reduce stigma and change perception – impacting everything from HIV to institutional inequality. This session explored how BIPOC and LGBTQ identities are shaped (and maintained) in mainstream culture and how exploring these identities serves as a mechanism for bringing us together.



GILEAD PLENARY

Voices of Resilience: Forging Progress and Urgency in Challenging Times

The Gilead Sciences plenary featured grassroots advocates working in the Southern U.S. to address barriers to helping end the HIV epidemic, particularly in response to the COVID-19 pandemic. A panel discussion explored how these advocates are helping forge progress, through innovation and resilience in challenging times.

CLOSING PLENARY

Foundation Stones to Building the EHE Effort in Indian Country, Presented by the American Indian/ Alaska Native CAP

This plenary highlighted the work of those addressing HIV and COVID in Indian Country, rural states, and among Alaska Natives with limited infrastructure. This plenary addressed these challenges and provided innovative solutions by Indian Country—making the case to support Native HIV care by providing essential building blocks.

ATTENDEES

The 2021 USCHA had a total of 2,781 attendees in these categories.



POSTER PRESENTATIONS

For the first time at an NMAC virtual conference, more than 20 poster presentations were held. Topics included Covid-19, PrEP, mental health, and substance abuse.



EXHIBIT HALL

Nearly 40 companies, organizations, and providers took part in the USCHA Exhibit Hall, offering attendees an opportunity to learn more about their services.

LOUNGES

USCHA offered five virtual lounges at this year's conference: the Trans Lounge, the 50+ Lounge, the Youth Lounge, the PLWHA Lounge, and the ESCA-LATE/ELEVATE Lounge. Inside the lounges, participants could find opportunities to network, learn more about HIV programs and services, take part in fun activities, or just enjoy the company of others.



50+ STRONG & HEALTHY SCHOLARS

This year's USCHA held workshops featuring some of the members of the co-hort. They were able to talk about the mini-grant projects sponsored by NMAC, how to build virtual communities during this COVID era, among other topics. There were also experts from the field present to talk about the National Agenda to end HIV, comorbidities, and aging-related health issues.



GAY MEN OF COLOR FELLOWSHIP

The Gay Men of Color fellowship program trains members on current biomedical prevention methods to pass that information to peers in their communities. As part of USCHA, there were workshops featuring members to showcase the work they do in their communities and how they have been able to overcome the challenges of the pandemic to implement the program. Conversations revolved around safer sex during COVID, peer-education efforts to empower and advocate, and how racism is impacting access to biomedical prevention among gay men of color.



YOUTH SCHOLARS

During USCHA, Youth Initiative (YI) Scholars attended webinars related to health communication, health literacy, and stigma in preparation to plan and facilitate their own HIV community project this upcoming spring. These sessions were facilitated by YI Champions (formerly known as Peer Educators/ Mentors).

In addition, scholars gained a chance to meet and network with leaders from Viiv Healthcare, where they presented their World AIDS Day (WAD) media project featuring YI program staff, scholars, champions, and friends of the program from across the nation to highlight the importance and significance of WAD, HIV prevention and treatment, and our commitment to ending the HIV epidemic.

04

About ESCALATE

ESCALATE

Ending Stigma through Collaboration And Lifting All To Empowerment

OVERVIEW

In 2021, NMAC embarked on an ambitious journey to develop and implement a first-of-its-kind stigma reduction training. ESCALATE—Ending Stigma through Collaboration and Lifting All To Empowerment—is an innovative training and capacity-building initiative specifically designed to address HIV-related stigma at multiple levels within the HIV care continuum.

NMAC created ESCALATE to reflect its mission and commitment to the communities of people living with HIV. NMAC “leads with race” as the burdens of the HIV/AIDS epidemic are most deeply felt in racial and ethnic minority communities. *The ESCALATE program offers three tracks to*

NMAC created ESCALATE to reflect its mission and commitment to the communities of people living with HIV. NMAC “leads with race” as the burdens of the HIV/AIDS epidemic are most deeply felt in racial and ethnic minority communities.

mitigate and eliminate stigma in HIV-related service provision in the United States.

Stigma Reduction Training: Training is designed to reduce HIV-related stigma through evidence-informed interventions and strategies with an emphasis on cultural humility for HIV service systems, organizations, and individuals. Training is designed to meet the needs of individual RWHAP care providers (e.g., clinicians, administrators, patient navigators) who acknowledge the impact of HIV-related stigma on their client populations and communities. These individuals are ready to create change but may not have the organizational capacity needed to create change across their clinical setting.

ENDING STIGMA THROUGH COLLABORATION AND LIFTING ALL TO EMPOWERMENT



In 2021, NMAC hosted *four* National ESCALATE training cohorts virtually.

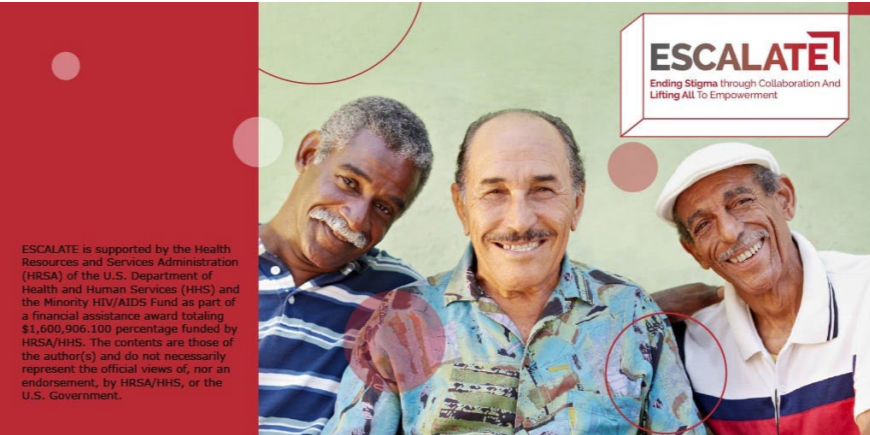
TRAINING EVENT	DATE	APPLI-CATIONS RECEIVED	NUMBER OF ORGS.	TOTAL PARTICIPANTS
Y1, T1	8/23– 8/26 –2021	10	4	17 COMPLETED
Y1, T2	8/30 – 9/3 – 2021	8	6	23 COMPLETED
Y2, T1	9/13 – 9/17-2021	5	3	12 COMPLETED
Y2, T2	12/13 – 12/17-2021	4	3	10 COMPLETED

TRAINING IMPACT

- 13 Community, Academic, and Public Health Leaders– certified as ESCALATE Training
- 16 organizations nationally en-gaged
- 62 individuals completed stigma reduction training
- 120 Hours of curriculum delivery
- 65 subject matter experts engaged in the development of ESCALATE Curriculum
- 60 ESCALATE Organizational Stigma Assessments Completed
- 64 hours of organizational coach-ing provided

TECHNICAL ASSISTANCE

The ESCALATE TA program is designed to increase the capacity and readiness of RWHAP recipients and subrecipients to address HIV-related stigma within their organizations and communities. Activities are designed to create organizational-level change through targeted work plans. In 2021—NMAC selected 10 sites to participate in technical assistance. NMAC’s TA activities with selected stigma reduction teams begin January 2022.



LEARNING COLLABORATIVES

The ESCALATE Learning Collaboratives will support organizations in addressing HIV stigma at organizational and structural levels to engage staff, clients, and those organizations to whom they refer. Ideally, these organizations will either be ready to implement a stigma-reduction program focused on a population of interest or have already begun implementing such a program. LC participation will assist organizations in reaching the next stage of implementation (and/or overcoming barriers to successful implementation) of their program.

During 2021, NMAC engage 8 organizations from around the United States in the ESCALATE learning collaborative. Learning

05

About ELEVATE



Engage Leadership through Employment,
Validation & Advancing Transformation & Equity

OVERVIEW

In 2021, NMAC was able to build upon the success of our previous co-operative agreement with HRSA with our BLOC - Building Leaders of Color Living with HIV program with the formal launch of ELEVATE - Engage Leadership through Employment, Validation & Advancing Transformation & Equity.

The ELEVATE program aims to build the capacity of Persons with HIV to be meaningfully involved in the planning, delivering, and improving of Ryan White HIV/AIDS Program services.

ELEVATE is a combination of the following HRSA programs:

- BLOC - Building Leaders of Color
- ACE TA Center: Improving health literacy
- Planning CHATT: Program development

- CQII: Clinical quality improvement
- Improving Access to Care: Community health workers (CHWs) addressing L2C gaps

ELEVATE builds on the achievements of HRSA and RWHAP training programs and incorporates their features into a single project.

ELEVATE LEADERSHIP TRAINING DESIGN:

ELEVATE is designed to address needs in workforce recruitment, development, and advancement for PWH in populations 50+, Young Black Men, transgender/ gender non-conforming (T/ GNC), Latinx, and the recovery community. ELEVATE will bring forth an increased initiative in these communities hit hard by HIV so that self-awareness and self-advocacy will grow, while supporting the four goals of the HIV National Strategic Plan.

ENGAGE LEADERSHIP THROUGH EMPLOYMENT, VALIDATION & ADVANCING TRANSFORMATION & EQUITY



ELEVATE TRAININGS:

During the 2021 reporting period, the NMAC team and the ELEVATE Planning Team made advances towards developing the ELEVATE curriculum, finalized the coaching outline, and TOT training outline. While the curriculum design team worked to finalize the ELEVATE curriculum and TOT training outline, NMAC hosted 5 Building Leaders of Color (BLOC) trainings. Below are the specific accomplishments for the ELEVATE BLOC trainings for this reporting period.

TRAINING DETAILS	TRAINING REGION	DATES	AUDIENCE
Training One - Bloc	National Tgnc	July 6-9, 2021	110 Applicants 5 Participants 100% People With HIV
Training Two - Bloc	Indian Country	July 12-15, 2021	46 Applicants 2 Participants 100% People With HIV
Training Three - Bloc	National Latinx	July 19-23, 2021	42 Applicants 16 Participants 100% People With HIV
Training Four - Bloc	National Cis-gender Hetero-sexual Women And Men	August 9-12, 2021	78 Applicants 14 Participants 100% People With HIV
Training Five - BLOC	National Black Gay Men	August 23-26, 2021	93 Applicants 20 Participants 100% people with HIV

During the fall of the 2021 reporting period, the NMAC team and the ELEVATE Curriculum Development Team completed the design of the ELEVATE curriculum. Following the completion of the curriculum

development, NMAC also hosted the ELEVATE TOT. The graduates from the ELEVATE TOT were engaged as trainers to initiate the first two (2) community ELEVATE trainings.

TRAINING DETAILS	TRAINING REGION	DATES	AUDIENCE
Year 2, Training of Trainers (TOT) - Virtual	National	Oct 20-22, 2021	Applicants - 20 Participants - 18
Year 2, Training One - Virtual	MSM	Nov 1-5, 2021	Applicants - 23 Com. Participants - 9 Org. Participants - 1
Year 2, Training Two - Virtual	Latinx (In English)	Dec 6-10, 2021	Applicants - 21 Com. Participants - 7 Org. Participants - 3

ELEVATE WEBINARS:

During this reporting period, ELEVATE hosted several webinars to introduce ELEVATE and increase recruitment efforts by creating specialized content that aligned with the ELEVATE goals and objectives. The ELEVATE

webinars were recorded and facilitated by NMAC and JSI staff. The ELEVATE Yr 2. webinar plan is currently under review and approval from HRSA and will be finalized in January 2022; at which time, the development, recording, and dissemination of the webinar materials will move forward.

ELEVATE WEBINAR DATES AND TITLES:

- October 26, 2021
Preparing for Employment in HIV Services
- October 27, 2021
Preparing People with HIV (PWH) for Involvement in HIV Community Planning
- October 28, 2021
Using Health Literacy Strategies to Increase Involvement of People with HIV (PWH) in Care and Community Planning

The NMAC team host ELEVATE orientation webinars for the training participants and training team the week prior to scheduled training. The ELEVATE orientation webinar serves as introduction between the NMAC staff, facilitators, and program participants prior to entering the training space. The ELEVATE orientation webinars provide background of the ELEVATE program along with the goals, objectives, and daily training outline.

ELEVATE Orientation Webinar meeting dates – 60 mins:

- TOT - 10/15/21 - 4:00-5:00 PM EST
- MSM - 10/29/21 - 4:00-5:00 PM EST
- Latinx (In English) - 11/30/21 - 4:00-5:00 PM EST

06

About BLOC



OVERVIEW

In 2021, NMAC launched BLOC en español, the Spanish version of the BLOC (Building Leaders of Color) training program. The main objective of BLOC en español is to increase the meaningful participation of Latinx people living with HIV to participate in leadership roles and activities related to providing HIV services in their communities.

BLOC en español is designed to provide language justice and cultural humility to the Latinx community. The learning objectives focus on leadership

development, introduction to data and performance measurement of HIV services, increasing knowledge of the Ryan White HIV/AIDS program and identifying opportunities for involvement to develop a leadership action plan.

TRAININGS

In 2021, NMAC hosted three BLOC en español virtual trainings training 42 participants.

- Puerto Rico Training: May 2021 (n=21)
- Texas Training: June 2021 (n=5)
- National Training: July 2021(n=16)

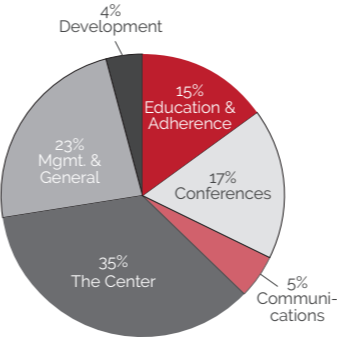
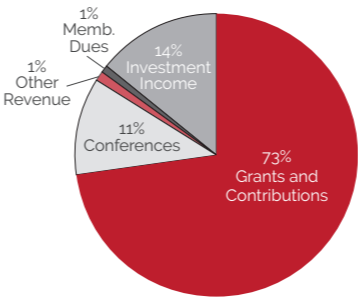
BLOC en español is designed to provide language justice and cultural humility to the Latinx community.

BUILDING LEADERS OF COLOR EN ESPAÑOL



07

Financials



OVERVIEW 2021	2020	2021
REVENUE		
Grants and Contributions	\$7,036,433	\$5,451,745.00
Conferences	100,179	852,806.00
Membership Dues	56,243	40,548.00
Other Revenue	87,896	37,500.00
Investment Income	300,063	1,060,373.00
Total Assets	\$7,580,814	5,820,195.00
EXPENSES		
Expenses	4,120,947	5,820,195.00
PROGRAM SERVICES		
Education Adherence	422,706	882,654.00
Conferences	836,958	990,754.00
Communications	417,569	278,666.00
The Center	855,985	2,060,040.00
SUPPORT SERVICES		
Management and General	1,353,288	1,360,849.00
Development	234,441	247,232.00
NET ASSETS		
Beginning Net Assets	8,992,002	12,451,869.00
Ending Net Assets	12,451,869	14,074,646.00
Change in Net Assets	3,459,867	1,622,777.00

08

NMAC Staff & Board

STAFF

Executive Office Paul Kawata, Executive Director Kim Ferrell, Deputy Director of Operations	Development Robert York, Development Director Diane Ferguson, Development Associate	NMAC Center to End the Epidemic Ken Pettigrew, Director of the Center Charles Shazor, Manager Terrell Parker, Program Manager Gabriella Spencer, Associate Program Manager Lauren Miller, Health Equity Program Coordinator Marshun Redmond, Administrative Assistant Cora Trelles Cartagena, HIV Systems Coordinator Christopher Paisano, Program Coordinator-Indian Country
Conferences Tara Barnes-Darby, Director of Conferences Alison J. McKeithen, Assistant Director of Conferences Shanta' Gray, Senior Registrar and Meeting Planner	Treatment Moisés Agosto-Rosario, Director of Treatment Damián Cabrera-Candelaria, Program Manager Jonathan Ayala, Program Coordinator	
Communications Chip Lewis, Communications Director Dernell Green, Social Media Coordinator	Strategic Partnerships & Policy Joe Huang-Racalto, Director of Strategic Partnerships & Policy Andres Rodriguez, Advocacy Coordinator	



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Norm Nickens San Francisco, CA		