

PROGRESS IN THE FIGHT FOR BETTER TREATMENT, A VACCINE, AND A CURE FOR AIDS



The 2013 Research in Action Awards were celebrated on December 15. Hosted by Meredith Vieira and Jenna Wolfe, the event honored Anderson Cooper, Olympia Dukakis, and Dr. Joseph Sonnabend.

Dear Friends of TAG:

In 2013, TAG stayed relentlessly focused on our core issues, HIV/AIDS, and its deadly coinfections, tuberculosis and viral hepatitis. We expanded our HIV program to include prevention and related policy—a direct response to the alarming increase in HIV infections among young men who have sex with men in our country and around the world. TAG is working at all levels of policy in response to this increase, including advocating for more aggressive goals for the U.S. National HIV/AIDS Strategy, working with New York State and New York City to improve surveillance, increase prevention awareness, and create a fully funded, evidence-based campaign to end AIDS in New York State. Internationally, we continue to work on HIV, tuberculosis, and viral hepatitis in low- and middle-income countries where diagnosis and treatment are beyond the reach of those most in need.

In 2014 and beyond, we have much to accomplish toward ending the AIDS epidemic and its deadly coinfections. I hope you will take time and review this 2013 annual report to understand the urgent need for TAG's continued work and to help by supporting TAG in the year to come.

Sincerely,

Barbara Hughes
President, Board of Directors

PROGRAM UPDATES

Prevention to the Fore

In its ongoing pursuit of sound research and policies to improve the HIV/AIDS care continuum, TAG's HIV Project has expanded its portfolio to focus on the comprehensive prevention needs of people—notably transgender women of color and young men who have sex with men—who are disproportionately at risk of becoming infected.

Working collaboratively with community leaders, TAG has already made tremendous strides in reshaping the New York State response to what is still the epicenter of the U.S. epidemic, including an evidence-based strategy to improve access to pre- and postexposure prophylaxis (PrEP and PEP); improvements in surveillance data analysis; and a push for state and city government commitments to end the AIDS epidemic in the state.

TAG is also working with government officials, community leaders, researchers, and service providers to explore prevention opportunities under the Affordable Care Act. These will include developing an HIV prevention continuum, similar to that used to visualize HIV care and treatment service delivery needs. An action plan will be released later this year.

The HIV Project remains committed to advocate for research and development of novel antiretrovirals; prevention and management of comorbidities in people living with HIV; and the pending introduction of generic antiretrovirals in the United States; and the scale-up of HIV treatment in low- and middle-income countries.

Federal and Global Policy

Despite the fiscal and political challenges posed by a year of sequestration and political gridlock in D.C., TAG continues to advocate for the best access to treatment for the most people in the United States and globally.

On last year's World AIDS Day, TAG and amfAR released *Filling the Gaps in the Treatment Cascade*. The report provides policy recommendations to the White House, the Office of AIDS Research, the Centers for Disease Control and Prevention (CDC), and other agencies responsible for the National HIV/AIDS Strategy.

Many policy makers think that it is adequate to fund agencies at the same level for years on end. But in practice, failing to increase funding reduces funding. With our colleagues at amfAR, we released a policy brief, the *Cost of Flat Funding Biomedical Research*, to give advocates and policy makers a tool to examine the declining purchasing value of public funding for health

research at the National Institutes of Health (NIH) and the impact this has on public health, scientific progress, and U.S. productivity and science leadership.

Basic Science, Vaccines, and Cure (BSVC)

TAG continued to play an important role in HIV cure research advocacy. BSVC Project coordinator Richard Jefferys serves as a community advisory board (CAB) member for the NIH-funded Martin Delaney DARE cure research collaboratory. Richard authored TAG's 2013 *Pipeline Report* chapter on research toward a cure, maintained the cure research resources page on TAG's website, and covered emerging news via the BSVC blog. As examples, the blog posted an article detailing the case of a baby in Mississippi who appears to have been cured of HIV infection (which was widely distributed and later adapted for inclusion in the Treatment Action Campaign's *Equal Treatment* newsletter in South Africa) and critiqued a wildly misleading *Daily Telegraph* piece claiming an HIV cure was just months away. The critique prompted a response from the scientists whose work had been misrepresented by the *Telegraph*, and as a result the offending article was extensively corrected. Also in the cure research realm, TAG collaborated with AVAC, the Global HIV/AIDS Vaccine Enterprise, and the Bill & Melinda Gates Foundation to sponsor a two-day workshop on therapeutic HIV vaccines, focused particularly on developing an agenda for rigorously evaluating whether therapeutic vaccination can contribute to achieving a cure. An article describing the key recommendations from the workshop has been submitted to a scientific journal.

TAGline featured an article highlighting the needs of individuals who do not experience optimal immune reconstitution on antiretroviral therapy (ART) and, as a result, remain at elevated risk of morbidity and mortality. A listing of clinical trials for this population is on TAG's website. TAG also convened conference calls between community advocates and biotechnology companies developing therapeutics that may be able to address suboptimal immune reconstitution. TAG published *Immune System, HIV, & Aging*, a report highlighting the overlap between the effects of HIV and aging on the immune system and the need for research to address the potentially elevated risk of aging-associated diseases.

This year, TAG will broaden educational efforts around HIV cure research, including a detailed and frequently updated table of all clinical trials, and participate in the Forum for Collaborative HIV Research project to create a framework for public discussion and input regarding regulatory issues in cure research.

A Gushing DAA Pipeline, but Few Have Access

For over a decade, TAG's Hepatitis/HIV Project has been working to end the hepatitis C virus (HCV) epidemic. The battle has already been won in laboratories: in 2013, the first all-oral, direct-acting antiviral (DAA) regimen was approved, and many more are in the pipeline. Highly effective and safe DAAs will simplify hepatitis C treatment, making it easier to cure millions of people.

Yet few will benefit from these therapeutic advances without the same activism that has created massive HIV treatment scale-up. Most of the 185 million people who have been infected with hepatitis C are unaware of it, and the virus continues to spread: 2 to 3 million people are newly infected each year. Despite evidence of the efficacy of providing injection equipment and opioid substitution treatment to prevent HCV—and HIV—access to these vital services remains inadequate. HCV can be cured, yet more than 350,000 people die each year from complications such as liver failure and liver cancer.

TAG is on the front lines of the fight for access to a complete package of information, prevention, diagnostics, care, and treatment for hepatitis C. In 2013, TAG worked with allies across the globe, to:

- build a global HCV treatment advocacy coalition, with hundreds of members;
- establish an International Advisory Group to spearhead campaigns;
- launch a global campaign for affordable HCV treatment: "Have a Heart, Save My Liver";
- ramp up resources for, and commitment to, tackling HCV at the highest level of the World Health Organization (WHO) through the "Missing" campaign;
- present the first-ever symposia on access to hepatitis C treatment at the European Society for the Study of Liver Disease meeting;
- contribute to development of HCV treatment guidelines from the WHO;
- roll out on-line training materials on hepatitis C and HIV/HCV for treatment advocates;
- conduct workshops on treatment access advocacy with activists in low- and middle-income countries; and
- raise the profile of the HCV epidemic through interviews, publications in scientific journals, and educational workshops.

From Our TB Team

2013 brought many changes to the global tuberculosis (TB) community, most notably the inclusion of epidemiological data on pediatric TB in the WHO's *Global TB Report 2013*, which finally acknowledged that pediatric TB in children is important and must be addressed. TAG collaborated with the Sentinel Project to produce and publish *We Can Heal*, a publication that highlighted the challenges of diagnosing and treating children with multidrug-resistant TB. Together with UNICEF, the WHO, and other partners, TAG developed and launched a *Roadmap for Childhood Tuberculosis*. Over 60 media outlets including the BBC and Reuters picked up the story.

TAG's *2013 Report on Tuberculosis Research Funding Trends, 2005–2012* was launched at the annual Union Conference, and included a special supplement on R&D spending for pediatric TB. For the first time since TAG began tracking annual spending on TB R&D, we noted a decline in investment. The data from our report has been cited in 22 articles in news outlets and medical journals on four continents.

One of the biggest advocacy successes of the year was the conclusion of an 18-month campaign to reduce the price of the TB drug rifapentine. By collaborating with international organizing partners, TB controllers and researchers, and leading U.S. clinicians and medical organizations, TAG forced a commitment by Sanofi to reduce the price of rifapentine by 57 percent.

The stock-outs of essential TB drugs and diagnostics continue to be an issue domestically and globally. In January 2013, TAG convened a meeting to address domestic drug shortages, and is taking concrete steps to remedy this problem. TAG worked with civil-society groups to address the doubling in price of Hain's MTBDR_{plus} test. TAG was a co-author of an article titled *Aligning New TB Drug Regimens and Drug Susceptibility Testing: A Needs Assessment and Roadmap for Action*, published in the *Lancet Infectious Diseases* journal.

The year concluded with a TAG-led demonstration at the World Conference on Lung Health, where activists called for zero TB deaths, new infections, suffering, and stigma, bolder targets, and more energy in the fight to eliminate—not just control—TB. The TAG annual symposium at the conference called for the use of treatment cascades to ensure that the best interventions are used at the best times; it generated the most discussion at the conference.

2013 CONTRIBUTORS

\$100,000 OR MORE

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Gilead Sciences
Elton John AIDS Foundation
Open Society Foundations
Veterans Affairs Medical Center of
Washington, D.C.

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Walter Riemann
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 for all his work"
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Plus donations from an additional **233**
 contributors as well as support from the
 United Way and regional agencies of the
 Combined Federal Campaign.

The 2013 Palm Donor Circle with TAG's Accelerating Research of Cure AIDS Campaign in Red

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TAG FINANCIALS 2013

STATEMENTS OF FINANCIAL POSITION

Year ended December 31
2013

ASSETS

Current Assets

| | |
|---|--------------|
| Cash and cash equivalents | \$ 1,361,691 |
| Contributions receivable | 118,793 |
| Prepaid expenses and other current assets | 30,594 |
| Donated inventory | 301,000 |

TOTAL CURRENT ASSETS

1,812,078

| | |
|------------------------------|--------|
| Property and equipment – net | 25,142 |
| Security deposits | 43,015 |

TOTAL ASSETS

\$ 1,880,235

LIABILITIES AND NET ASSETS

Current liabilities

| | |
|---------------------------------------|-----------|
| Accounts payable and accrued expenses | \$ 41,213 |
|---------------------------------------|-----------|

TOTAL LIABILITIES

41,213

Net assets

| | |
|------------------------|-----------|
| Unrestricted | 1,422,192 |
| Temporarily restricted | 416,830 |

TOTAL NET ASSETS

1,839,022

TOTAL LIABILITIES AND NET ASSETS

\$1,880,235

STATEMENTS OF CASH FLOWS

Cash flows from operating activities

| | |
|--|--------------|
| Change in net assets | \$ (987,293) |
| Adjustments to reconcile increase in net assets to net cash used by operating activities | |
| Depreciation | 12,456 |
| Loss on disposal of fixed assets | 8,737 |

Decrease (Increase) in assets

| | |
|--------------------------|----------|
| Contributions receivable | 972,754 |
| Prepaid expenses | (10,071) |
| Inventory | (45,500) |

Increase in liabilities

| | |
|---------------------------------------|--------|
| Accounts payable and accrued expenses | 15,577 |
|---------------------------------------|--------|

NET CASH USED BY OPERATING ACTIVITIES

\$ (33,340)

Cash flows from investing activities

| | |
|-------------------------------------|---------|
| Purchases of fixed assets | (6,128) |
| Proceeds from sales of fixed assets | 1,500 |

NET CASH USED BY INVESTING ACTIVITIES

(4,628)

NET CHANGE IN CASH AND CASH EQUIVALENTS

(37,968)

CASH AND CASH EQUIVALENTS, BEGINNING OF YEAR

1,399,659

CASH AND CASH EQUIVALENTS, END OF YEAR

1,361,691

STATEMENTS OF ACTIVITIES

| | | | Year ended December 31 |
|--|---------------------|---------------------------|---------------------------|
| | Unrestricted | Temporarily Restricted | 2013 Total |
| REVENUE AND SUPPORT | | | |
| Contributions | \$ 234,897 | \$ – | \$ 234,897 |
| Grants | 487,913 | 557,164 | 1,045,077 |
| Special events income | \$ 281,901 | | |
| Less direct cost of special events | <u>(123,968)</u> | | |
| | 157,933 | | 157,933 |
| Other income | 17,849 | – | 17,849 |
| Interest income | 2,815 | – | 2,815 |
| Net assets released from restrictions | 1,205,046 | (1,205,046) | – |
| TOTAL REVENUE AND OTHER SUPPORT | \$ 2,106,453 | \$ (647,882) | \$ 1,458,571 |
| EXPENSES | | | |
| Program services | | | |
| HIV Project | \$ 242,159 | \$ – | \$ 242,159 |
| Basic Science Vaccines and Cure Project | 130,391 | – | 130,391 |
| Hepatitis and HIV Project | 329,735 | – | 329,735 |
| Tuberculosis and HIV Project | 1,206,632 | – | 1,206,632 |
| Communications and Advocacy Project | 148,065 | – | 148,065 |
| U.S. and Global Health Policy Project | 40,727 | – | 40,727 |
| TOTAL PROGRAM SERVICES | 2,097,709 | – | 2,097,709 |
| Supporting services | | | |
| Management and general | 180,587 | – | 180,587 |
| Fundraising | 158,831 | – | 158,831 |
| TOTAL SUPPORTING SERVICES | 339,418 | – | 339,418 |
| TOTAL OPERATING EXPENSES | 2,437,127 | | 2,437,127 |
| Change in net assets before loss on disposal of fixed assets | (330,674) | (647,882) | (978,556) |
| Loss on disposal of fixed assets | (8,737) | | (8,737) |
| Change in net assets | (339,411) | (647,882) | (987,293) |
| Net assets, beginning of year | 1,761,603 | 1,064,712 | 2,826,315 |
| NET ASSETS, END OF YEAR | \$ 1,422,192 | \$ 416,830 | \$ 1,839,022 |

TAG Limited Art Editions

Each year at its annual Research in Action Awards, TAG presents a new, limited edition work of art, generously donated by a highly regarded visual artist. Past artists include Nan Goldin, Robert Gober, Bill Jacobson, Donald Moffett, Tony Feher, Carrie Yamaoka, and David Armstrong. TAG retains an inventory of many of the editions for sale to the public. All proceeds benefit TAG in support of programmatic work. If you are interested in purchasing an edition or learning more about the available editions, detailed information can be found at <http://www.treatmentactiongroup.org/limited-art-editions>.

Join TAG's Board

TAG is always seeking new board members. If you are looking for a great place to invest your time and talents, please call Barbara Hughes, TAG Board President, to learn more. Call 212.253.7922, or e-mail barbara.hughes@treatmentactiongroup.org.

Contribute

TAG welcomes donations from individuals who want to see the AIDS research agenda remain responsive to the needs of all people living with HIV. Make a tax-deductible gift now: www.treatmentactiongroup.org/support

Does your company have a matching gifts program? If so, you can double or even triple your donation. Just complete the program's matching gift form and send it in with your donation to TAG.

When you shop on Amazon, enter the site at smile.amazon.com. Choose TAG Treatment Action Group as your designated charity, and 0.5 percent of the price of your eligible purchase will benefit TAG.

About TAG

Treatment Action Group is an independent AIDS research and policy think tank fighting for better treatment, a vaccine, and a cure for AIDS.

TAG works to ensure that all people with HIV receive lifesaving treatment, care, and information. We are science-based treatment activists working to expand and accelerate vital research and effective community engagement with research and policy institutions.

TAG catalyzes open collective action by all affected communities, scientists, and policy makers to end AIDS.

TAG
Treatment Action Group

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