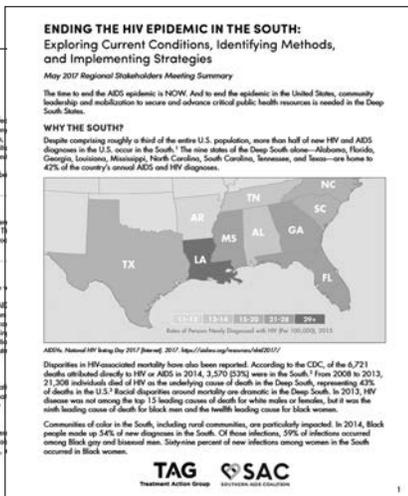
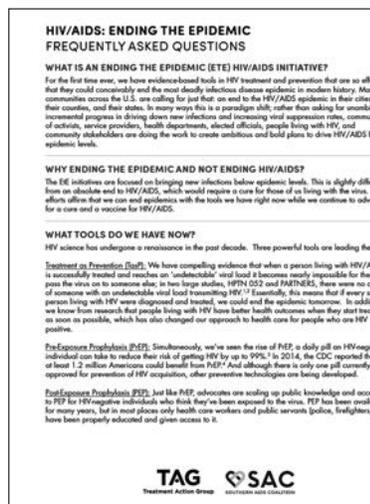


HIV Project

In the face of relentless White House and Congressional attacks on the Affordable Care Act and Medicaid, TAG's HIV Project continued to advance its campaign to end HIV as an epidemic in the United States. As the blueprint for the community-driven initiative to end AIDS in New York State continues to yield a high degree of implementation success, TAG spent the past six months laying the groundwork for similar strategies in some of the most heavily impacted jurisdictions in the Deep South.

The anticipated launch of the HIV Project's web portal for community leaders and other stakeholders either working toward or interested in jurisdictional EtE strategies is scheduled for World AIDS Day on December 1, 2017.

This work continues in tandem with the HIV Project's long-standing engagement with the pharmaceutical industry, research networks, and regulatory agencies in their commitment to advance antiretroviral drug development, particularly for people requiring novel therapies to treat drug-



In May, TAG, the Southern AIDS Coalition, the Southern HIV/AIDS Strategy Initiative, Sisterlove, and AIDS Alabama, and the National Alliance of State and Territorial AIDS Directors (NASTAD) held a consultation with more than 40 community advocates and key stakeholders from across the Deep South to assess the major challenges and opportunities for EtE planning. Several key findings from that meeting can be found in a summary report and FAQ now available on the TAG website: treatmentactiongroup.org/EtE/summaries

In May, TAG and its campaign partners conducted a groundbreaking meeting of 45 activists and public health officials to chart the potential for ending-the-epidemic (EtE) initiatives in U.S. southern states. The meeting and follow-up engagement resulted in commitments from community leaders to move forward with action plan development in Alabama, Louisiana, and Nashville, Tennessee, with additional requests for further exploration from community leaders in Jackson, Mississippi, North Carolina, and Texas.

Following a flagship assembly of community leaders in Louisiana in October and similar meetings planned for Alabama and Nashville in December, TAG's EtE campaign continues to bear considerable fruit. Work to ensure robust community leadership and mobilization toward EtE strategies in Jackson, North Carolina, and Texas is slated for early 2018.

resistant HIV and novel options for pre-exposure prophylaxis as a primary HIV prevention tool. TAG has also stepped up its direct and coalition-based advocacy to both defend and advance global and domestic policies required to ensure that people living with and vulnerable to HIV have affordable and streamlined access to testing and comprehensive, culturally competent care.

BSVC Project

An important resource created by TAG's Basic Science, Vaccines, and Cure (BSVC) Project is the Research Toward an HIV Cure Clinical Trials website listing, which is updated monthly. The listing contains information on ongoing and completed clinical trials, along with links to study results where available. The web page has been widely cited by researchers, both in scientific papers and in conference presentations.

TAG's BSVC Project and HIV Project staff co-authored a new report: *HIV Research in the Era of PrEP: The Implications of TDF/FTC for Biomedical Prevention Trials*. It was launched in September, generating considerable interest and a collaborative webinar on the topic hosted by AVAC. The report addresses the complex implications of the availability of pre-exposure prophylaxis (PrEP) for the development of other candidate HIV prevention interventions, such as vaccines.

The BSVC Project's contributions to TAG's annual *Pipeline Report* included a chapter on research toward a cure and immune-based and gene therapies, along with the vaccine and passive immunization sections of the preventive technologies chapter. Seven posts were written for the BSVC Project blog, including reports from the International AIDS Society HIV Cure & Cancer Forum.

BSVC Project presentations included a May webinar that provided an update on cure research results, targeted toward community advisory board members of the Martin Delaney Collaboratories (projects funded by the National Institutes of Health that are focused on the development of an HIV cure). BSVC Project and HIV Project staff also presented biomedical prevention, treatment, and cure research pipeline updates at the NASTAD Prevention and Care Technical Assistance Meeting in July.

Two media articles on the use of treatment interruptions in HIV cure research featured quotes from BSVC Project staff; an article by Tim Murphy for TheBody.com and another article by Ben Ryan for POZ Magazine—both published in September.

TB Project

As tuberculosis (TB) persisted as the world's leading infectious killer, TAG ramped up its activism for accelerated patient- and community-oriented TB research and access to benefits, and invested in capacity building to empower partners around the world to do the same. TAG invoked the right to science through academic publications and submissions to global bodies to underpin these efforts.

On the research and development (R&D) side, in addition to facilitating the community review of several clinical trial protocols for new treatment options, TAG's TB team made exciting headway on regulatory and research policies that include two overlooked, vulnerable groups: children and adolescents, and pregnant and postpartum women. TAG's annual Tuberculosis Research Funding Trends report and a seminal policy paper commissioned by the World Health Organization (WHO) for the Ministerial Conference on TB provided in-depth analyses of TB research funding. TAG's setting of country-specific funding targets provided important accountability for closing the TB R&D funding gap.

On the access front, TAG and its partners' advocacy resulted in increased U.S. legislative commitments to funding the domestic and global TB response, a notable win in a challenging political environment. TAG influenced global policy and raised awareness to improve access to life-saving but underutilized interventions, including the first-ever point-of-care test for TB in people with AIDS (Determine TB LAM), newer drugs (bedaquiline, delamanid, and child-friendly formulations), and a newer prevention option (3HP). TAG led a coalition to safeguard the availability of TB medicines from the unintended threat of new WHO prequalification fees.



Erica Lessem, Deputy Executive Director – TB Program; Mike Frick, TB/HIV Senior Project Officer; and Suraj Madoori, U.S. and Global Health Policy Director in the TAG office developing communications and advocacy strategies in advance of November's Global Ministerial Conference on Ending TB in the Sustainable Development Era in Moscow.

TAG's TB team helped build advocacy capacity among its partners by generating and disseminating webinars, guides, and toolkits, and through trainings for the community groups it coordinates (the Global TB Community Advisory Board and the Community Research Advisors Group). In preparation for the 2017 Ministerial Conference and a United Nations High-Level Meeting on TB in 2018, TAG developed tools for activists to engage national stakeholders in delivering strong commitments on TB R&D and access at these events.

In 2018, TAG will build on this momentum to ensure that the unprecedented opportunity to garner political will to end TB offered by the High-Level Meeting is not squandered. TAG will continue to closely monitor and influence U.S. and global TB policies so that they advance human rights. The TB team is excited that new funding opportunities will enable us to expand our work on access to evidence-based interventions for children, and on ensuring availability of preventive options.



Global funding for TB research reached a previously unreported high of \$726 million in 2016, according to the TB Project's latest Tuberculosis Research Funding Trends report, released November 8th. Yet this amount remains woefully inadequate when judged against the innovation gaps holding back the response to TB, which is the world's leading cause of death from a single infectious agent. Read more at: treatmentactiongroup.org/tbrd2017

HCV Project

The combination of extremely effective treatments, increasing generic options for a number of developing countries, comprehensive policy guidelines and testing recommendations, and a vision for elimination in New York State (NYS) and the United States offers us a unique moment for wiping out hepatitis C virus (HCV). However, the crippling effect of the opioid epidemic in North America, continuation of punitive drug laws around the world, and the onslaught of dangerous, repressive policies from the Trump Administration could roll back the achievements we have made and neuter the effectiveness of these milestones.

In February, a coalition of NYS stakeholders held the first elimination summit in the United States to describe the landscape and present recommendations, and call for political commitment. HCV Project staff at TAG and a member of the Summit Steering Committee contributed to all aspects of the program development for the gathering, which was held in Albany. Over 200 statewide stakeholders attended, including members from the NYS Department of Health, NYC Department of Health and Mental Hygiene, NYC Department of Corrections, providers, and community members.

Following the Summit, TAG spearheaded the formation of the NYS Hepatitis C Elimination Campaign, consisting of our key partners, Housing Works, Harm Reduction Coalition, and VOCAL-NY, with the goal of implementing



In the current climate favoring fear-driven populism over evidenced-based policies, TAG raised the urgency to defend funding for HIV/HCV/TB at the March for Science in Washington, D.C., New York, and Amsterdam. The HCV co-directors, Annette Gaudino and Bryn Gay, conducted a teach-in on the right to science at Amsterdam's March during the International Liver Congress.

the Summit's recommendations. Ongoing work includes consultation on NYC and NYS budget asks for HCV prevention, linkage to care, and surveillance, as well as technical assistance on international models for HCV elimination to inform policy and lobbying efforts.

In June, HCV Project staff joined hundreds of non-governmental organizations (NGOs) in a global day of action, Support, Don't Punish, to end the criminalization of drug users. TAG continues to participate in local and state efforts to authorize safer consumption spaces and supervised injection facilities. Recent advocacy includes pressuring the NY City Council to require trainings for homeless shelter staff to administer naloxone to help prevent opioid overdose deaths.

The World Community Advisory Board on HCV Generics and Diagnostics, co-organized by HCV Project staff, was held in July in Bangkok. The meeting brought together 37 treatment activists from 17 countries, three generic manufacturers,

and three diagnostics companies to exchange information and consider options for accelerating access to affordable generic DAAs and simpler tests, particularly in high-burden, low- and middle-income countries. With the launch of the meeting report at

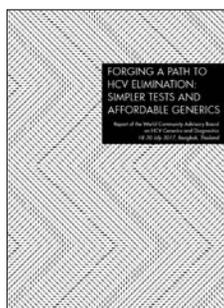
the World Hepatitis Summit in November, Forging a Path to Elimination: Simpler Tests and Affordable Generics, the HCV Project will continue its leadership and engagement to scale up the HCV response in low- and middle-income countries.

Cross-Cutting Policy and Advocacy

Despite a challenging political dynamic sparked by turnover across the executive and legislative branches, TAG departs 2017 with momentum from its cross-cutting HIV, TB, and HCV policy-advocacy efforts. Having started the year with proposed cuts to federally funded research, attempts to weaken and undermine the Food and Drug Administration (FDA), and attacks on the Affordable Care Act (ACA) and Medicaid, TAG responded vigorously to these challenges. This involved a year-long effort to strengthen and heavily invest in strategic policy advocacy, capacity and coalition building, and developing a robust rapid-response communications infrastructure.

TAG's federal policy advocacy has been highly effective against this challenging backdrop. TAG, both directly and in coalition with its national partners, implemented strategic campaigns to protect National Institutes of Health (NIH) funding, which faced a \$7.5 billion cut, along with the complete elimination of the Fogarty International Center (FIC) in the President's FY18 budget proposal. TAG successfully fought back against these cuts, resulting in significant increases in the funding for these vital research institutions.

When the end of the Obama era saw the passage of the flawed 21st Century Cures Act, TAG positioned itself to counter further attacks by the Trump administration aimed at weakening the regulatory authority of the FDA. Notably, TAG submitted letters and testimony to block the advancement of dangerous "Right To Try" bills. As a silver lining



Among TAG's recent publications is a detailed summary of the July 2017 Hepatitis C World Community Advisory Board meeting on the HCV landscape and the significant barriers—such as financing, awareness, complicated and unaffordable diagnostics, centralized service delivery, and stigma—that obstruct the sustainable scaling up of prevention, testing, and treatment services: treatmentactiongroup.org/2017WorldCAB

to the 21st Century Cures Act, TAG led advocacy on TB by coordinating the submission of community comments to the newly-formed interagency Task Force on Research for Pregnant and Lactating Women (PRGLAC) to address the unique—and neglected—research needs of pregnant women with TB.

TAG also centered itself in the ongoing health care debate, which sought to destroy Medicaid and threaten access to health care for communities living with, or vulnerable to HIV, TB, and HCV. Joining a growing national groundswell of support for the ACA and Medicaid, TAG contributed to community efforts to stop three legislative attempts by Congress to repeal and replace the ACA. Following these tremendous advocacy successes, TAG will remain on watch as the administration and Congress continue to seek to destabilize the ACA through other executive, regulatory, and legislative means.

Although 2017 was a watershed moment in U.S. politics, the considerable momentum generated by robust activism and advocacy places TAG in a better position for advancing important policy priorities in 2018. Addressing domestic drug pricing for HIV, TB, and HCV; protecting the FDA and the NIH; capitalizing on global political attention to TB; and advancing a radical vision for health care access for all, are some of the important issues TAG will remain focused on in the coming year.

Transitions

With the departures of Scott Morgan, David Zwany, and Kenyon Farrow to pursue new opportunities, TAG is thrilled to announce two exciting and much-deserved staff promotions: Erica Lessem as Deputy Executive Director–TB Program and Suraj Madoori as U.S. and Global Health Policy Director. The Board of Directors and staff also extends a warm welcome to TAG’s new communications officer, Dorrit Walsh.

25TH Anniversary Campaign

As TAG marks 25 years of activism and advocacy, our mission is more vital than ever. **A quarter-century of progress promoting research, prevention, and treatment critical to ending the HIV/AIDS, TB, and HCV epidemics is at risk.**



We are more determined than ever to shape policy toward defeating HIV and ending the TB and HCV epidemics, as quickly as possible.

Learn more and join us at: treatmentactiongroup.org/TAGat25/join.

About TAG

Treatment Action Group is an independent, activist and community-based research and policy think tank fighting for better treatment, prevention, a vaccine, and a cure for HIV, tuberculosis, and hepatitis C virus.

TAG works to ensure that all people with HIV, TB, or HCV 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 HIV, TB, and HCV.

TAG

Treatment Action Group

90 Broad St, Suite 2503

New York, NY 10004

Tel 212.253.7922

Fax 212.253.7923

tag@treatmentactiongroup.org

www.treatmentactiongroup.org

TAG is a nonprofit, tax-exempt 501(c)(3) organization. EIN 13-3624785

BOARD OF DIRECTORS

PRESIDENT

Barbara Hughes

SECRETARY AND TREASURER

Laura Morrison

Jim Aquino

Frank Bua

Dick Dadey

Nick Debs

Joy Episalla

Kevin Goetz

Roy M. Gulick, MD, MPH

Robert W. Lennon

Richard Lynn, PhD

Robert Monteleone

Jason Osher

David Sigal

Monte Steinman

Director Emeritus

Alby P. Maccaroni Jr.

EXECUTIVE DIRECTOR

Mark Harrington

DEPUTY EXECUTIVE DIRECTOR – HIV AND HCV PROGRAMS

Tim Horn

DEPUTY EXECUTIVE DIRECTOR – TB PROGRAM

Erica Lessem

TB/HIV SENIOR PROJECT OFFICER

Mike Frick

HCV PROJECT CO-DIRECTOR

Annette Gaudino

HCV PROJECT CO-DIRECTOR

Bryn Gay

BASIC SCIENCE, VACCINES, AND CURE PROJECT DIRECTOR

Richard Jefferys

HIV PREVENTION RESEARCH AND POLICY COORDINATOR

Jeremiah Johnson

U.S. AND GLOBAL HEALTH POLICY DIRECTOR

Suraj Madoori

ADMINISTRATOR

Joseph McConnell

TB/HIV SENIOR PROJECT OFFICER

Lindsay McKenna

COMMUNICATIONS OFFICER

Dorrit Walsh