Community Health Worker: Comprehensive HIV Prevention Initiative

2025 Funding Opportunity Announcement (FOA) by Gilead Foundation

BACKGROUND

Gilead Foundation | Gilead Foundation recognizes that increasing access to care creates better outcomes, and we know that requires more than just a passion for scientific discovery — and more than just Gilead. This is why, through our Gilead Foundation grant programs, we support the groups, advocates, and communities in the U.S. that work tirelessly to improve people's lives day after day. Gilead Foundation is proud to announce a new funding opportunity to catalyze innovative approaches to improve health equity and deliver comprehensive HIV prevention programs to those most vulnerable through a community health worker model.

2025 Grant Focus Area | HIV
While advances in medical research help millions of people living with HIV have longer, more fulfilling lives today, HIV continues to have a devastating impact, especially on underserved communities and in populations who lack access to medical care and are impacted by stigma and discrimination.

The goal of this funding opportunity announcement is to ensure that those individuals who want and can benefit from HIV prevention options inclusive of long-acting options have the information needed to make informed decisions. Therefore, through this funding opportunity Gilead Foundation will be supporting organizations investing in Community Health Workers (CHW) as part of the broader HIV prevention care continuum.

CHWs are well-positioned to reach communities, especially those disproportionately impacted by HIV. CHW interventions can improve uptake and access to health care services, improve communication between community members and health providers, reduce the need for emergency and specialty services, and improve adherence to health recommendations. While CHW administered interventions have a demonstrated impact, barriers to increased intervention implementation exist (e.g. insufficient numbers of trained individuals to meet existing needs; lack of funding; poor integration of CHWs in multidisciplinary care teams, in the health care delivery system, or in community organizations addressing the social determinants of health; and limited communication technology).

CHWs can improve access to HIV prevention related services (e.g. testing, linkage to PrEP, health behavior education) and management of other social determinants of health that could increase someone's risk of acquiring HIV. Through this initiative, community-based organizations can highlight the integral role of CHWs in increasing HIV prevention, and response efforts in the communities that need HIV prevention the most.

PROGRAM AND PURPOSE

According to CDC, ending the HIV epidemic and advancing health equity requires moving beyond traditional models of HIV prevention and care[1]. This means helping people improve their overall health and quality of life by:

[1] https://www.cdc.gov/endhiv/about-ehe/index.html

- Embracing innovative tools and comprehensive whole person approaches to care
- Identifying and addressing factors related to inequity and injustice
- Adopting a Status neutral and syndemic approach to testing (HIV, HCV, HBV, +/- STI)
- Reaching people with new models and in new locations

Through this funding opportunity, Gilead Foundation seeks to provide grant support to organizations who are working to deliver comprehensive HIV prevention programs to those most vulnerable through a community health worker model. This includes proposals from organizations collaborating to end the HIV epidemic within their respective regions of work.

Projects should address the social determinants of health and prioritize key populations who could benefit from long-acting prevention (e.g., Black and Latinx/Latine MSM, cis women & transgender women, people who inject drugs and their sexual partners, and /or youth under the age of 24 years old) in accordance with the United States Ending the HIV Epidemic (EHE) plan or their local EHE plan. Proposals should clearly articulate how the organization defines CHW and how they're integrated overall. Grant proposal must align to one of the two focus areas below:

1. **Comprehensive HIV Prevention Programs**: Competing pandemics have continued to cause significant disruption to existing HIV prevention education and awareness programs. Potential programs could include but are not limited to:
    - Community-based testing programs which incorporate CHW in HIV prevention education and awareness.
    - Community health worker-led product-agnostic long-acting prevention education programs
    - Stigma reduction campaigns led by CHW for healthcare professionals and individuals who could benefit from HIV prevention.
    - Culturally appropriate educational programs that address the lack of HIV prevention service options and the barriers between patients and service providers
    - Develop trainings to support the continued education of CHW's within the HIV prevention care continuum

2. **Community Outreach and Education:** Innovative community outreach projects have the potential to reach populations that need greater health support through engagement, education, and empowerment. Community-driven partnerships working to reach underserved populations provide educational programs that improve the health and well-being of marginalized communities. Using data, we can better understand the unique challenges faced by specific communities across diverse geographies, create innovative new community outreach solutions and scale-up existing programs. Potential programs could include but are not limited to:

- Developing robust outreach and education materials for in-person outreach events that prioritize key populations.
- Developing community-based CHW navigation programs for those individuals who could benefit from prevention
- Community health worker-led advocacy training for people who could benefit from prevention to educate their communities about HIV prevention.

- Opportunities to engage with local policymakers to better understand the HIV epidemic and the HIV prevention needs for their communities.
- Increasing education and access to syringe service programs for People Who Inject Drugs (PWID) using a syndemic approach

ELIGIBILITY CRITERIA

Organization(s) must be classified as a United States based not-for-profit and have an interest in public health, including but not limited to providing social services, education, or advocacy for underserved populations within the United States.

Eligible organizations must demonstrate:

- A proven history of sound financial stewardship and ability to deliver impactful programming.
- That they are driven by excellence in program development and implementation.
- That organization has been established for at least two calendar years.
- That the organization has demonstrated a history in providing HIV prevention and awareness programming
- That the organization has content and programmatic expertise and a strong grounding in existing data and methodologies to end the HIV epidemic.
- That the organization has a strong knowledge of social change approaches.
- That the organization has a strong network and partnership capacity and ability to collaborate effectively.

Gilead Foundation seeks an equitable balance between large and small organizations receiving funding, so organizations of a range of sizes/income levels are welcome to apply. Additionally, applications for programs and initiatives that have multiple sources of funding are encouraged. Should applicants have additional questions, please email gileadfoundation@gilead.com

SELECTION CRITERIA

Gilead Foundation welcomes proposals which target specific activities aimed at improving health outcomes aligned with at least one of the key focus areas noted above. Projects should be intended to support key populations who face health inequities as designated by local EHE plans in order to reduce new HIV infections

Successful proposals should:

- Make a unique and important contribution within their local community that aims to help end the HIV epidemic through comprehensive HIV prevention
- Clearly articulate the role of a community health worker with their organization and how they're engaged in the HIV prevention care continuum.
- Aligning with a local, regional, or national EHE strategy
- Includes a description of the staff's expertise and experience that qualifies them for implementing the proposed project
- Include a dissemination plan to share learnings and best practices from grant-funded activities
- Demonstrate original, innovative ideas that are not duplicative of current HIV prevention services

- Consider any necessary government resources (infrastructure, human resources, or funding) that are required and, if applicable, those that have been identified and are available
- Provide a clear transition plan for long-term program sustainability

A detailed scope of work and outreach plan and the information below should be included in the program description section:

- A description of HIV prevention materials and key educational messages that will be incorporated with the program
- A description of how HIV prevention will be framed within the organization's broader HIV services
- A description of how educational materials will be targeted and disseminated to the intended audience.
- A description of how the program will be implemented.
- A description of the primary audience and intended reach and description of previous HIV prevention programming led by community health workers.
- The anticipated number of unduplicated individuals that will be reached.

EVALUATION AND REPORTING

Projects must provide specific, measurable, achievable, realistic, and time-sensitive objectives and action steps required to meet project goals as outlined by the United States EHE or local EHE plan. All applications must include information regarding the applicant's capacity to implement the project and clear details on how data will be collected and analyzed, and by whom.

Through the reporting process and related data collection, Gilead Foundation hopes to learn about the successes and challenges faced by our partners, and to assess ways to increase the impact of future programs. Applicants may allocate up to 10% of the grant award outside of indirect cost to cover the costs of evaluation of the project against its stated objectives as outlined in your grant proposal.

Projects should prioritize collecting and documenting the success and challenges of implementing the project. Gilead Foundation will require partners to submit a quarterly qualitative and quantitative report to our evaluation partner. The submitted data will be aggregated across the funded organizations. Selected organizations should prioritize collecting the below client-level data:

- Number of community members served by the organization with this funding, listed by priority population
- Number of unique community members receiving long-acting HIV prevention education
- Number of unique community members screened for HIV
- Number of community members newly diagnosed with HIV
- Number of unique community members referred to a biomedical prevention option
- Number of unique community members referred to supportive services
- Number of unique community members and healthcare professionals reached by HIV stigma reduction campaigns

GRANT AWARDS

Gilead Foundation will consider grant requests for up to $400,000 from organizations with a project duration of two years starting January 1, 2026. The grant proposal should clearly articulate how the project will be sustained at the end of the project. Projects of a longer length will not be considered for this FOA. Grant requests should be proportional to the scope, complexity and reach/impact of the program, while reflecting reasonable, good faith estimates of the true costs related to the proposed project.

FUNDING RESTRICTIONS

This Gilead Foundation funding opportunity cannot support:

- Medications or purchasing of medications
- Educational initiatives that are not product-agnostic / that drive to a particular product
- Direct medical expenses, excluding non-clinical HIV testing
- Capital costs for treatment facilities, space refurbishment, medical equipment and supplies, medical expenses, personnel, healthcare professional or allied healthcare professional compensation support, or other costs of providing medical care
- Existing operating deficits
- Basic biomedical research, Gilead-sponsored clinical research, or clinical trials
- Projects that directly influence or advance Gilead's business, including purchase, utilization, prescribing, formulary position, pricing, reimbursement, referral, recommendation, or payment for products
- Individuals (including, without limitation individual health care providers, patient organization representatives and/or government officials) or physician group practices
- Events or programs that have already occurred
- Government lobbying activities
- Organizations that discriminate based on race, color, gender, religion, disability, sexual orientation, or gender identity or expression

HOW TO APPLY

The initial step to apply for a Gilead Foundation grant is the completion of a Letter of Interest (LOI). If your LOI is accepted organizations are required to submit their requests via the grants portal, which can be accessed by clicking: www.gilead.com/responsibility/giving-at-gilead/gilead-foundation

Please review the FOA and appendices before applying. Please ensure that the Grant Type "Creating Possible" is selected when submitting the LOI.

KEY DATES & DEADLINES

- Deadline to submit LOI: October 1st, 2025
- Response from Gilead on LOI: October 15th, 2025
- Full Proposal for Qualifying Organizations due to Gilead: November 15th, 2025
- Response from Gilead on Full Proposals: December 15th, 2025

If your LOI is accepted, full grant application requests can be submitted on a rolling basis until 11:59pm EST on November 15th, 2025.

FOA INQUIRIES

Questions related to this Funding Opportunity Announcement should be directed to gileadfoundation@gilead.com

DISCLAIMER STATEMENT

- Submission of an LOI does not guarantee any award of funding.
- Gilead Foundation reserves the right to approve or deny any submitted application for any reason, in its sole discretion.
- The number of funding requests awarded will depend on the number of applications received.
- If an LOI is accepted, applicants must provide a detailed budget as part of the grant application, which will undergo a reasonable assessment of value.
- Recipients receiving support will be required to complete post program budget reconciliation,
- The award of a grant in any one cycle does not imply that any subsequent grant for the same project or a similar project will be awarded without further application and approval.
- Previous funding from Gilead or Gilead Foundation does not imply or guarantee any future funding will be given.

APPENDIX A - Indirect Cost Guidelines

Indirect costs are overhead expenses incurred by the applicant organization as a result of the project but that are not easily identified with the specific project. Indirect costs are defined as administrative or other expenses that are not directly allocable to a particular activity or project; rather they are related to overall general infrastructure operations. Indirect costs are sometimes referred to as "overhead costs" and more recently by the U.S. government as "facilities and administrative costs." Examples include executive oversight, accounting, grants management, legal expenses, utilities, technology support, and facility maintenance.

Gilead prefers, whenever possible, that specific allocable costs of an applicant organization's project should be requested and justified in the proposal as direct costs, including those for dedicated ongoing project management, facilities, and support (further definitions are provided below).

As a company we seek to fund the actual cost of the proposed project, and to support the efficiency and effectiveness needed for improving the care of patients living with life-threatening diseases around the world. Gilead will consider supporting a consolidated indirect cost fee on a case-by-case basis (where allowed under local laws and regulations) if it constitutes 10% or less of the total proposed project cost.

For funding grants, Gilead has established basic definitions and guidance to be used by our applicants and prospective applicants (see below).

Through our philanthropy and grants programs, Gilead does not match the indirect-cost rates that the US federal government may pay to its applicants and contractors. We recognize that this means that our applicants may need to engage in cost-sharing between projects, tap into unrestricted funds, or conduct other fundraising activities to cover unbudgeted operation costs.

Indirect Cost Definitions

Indirect Costs

⇒ Facilities not acquired specifically and exclusively for the project (e.g., Foundation, Institute, or University headquarters)
⇒ Utilities for facilities not acquired for and not directly attributable to the project.
⇒ Information technology equipment and support not directly attributable to the project
⇒ General administrative support not directly attributable to the project. Examples are as follows:
- o Executive administrators
- o General ledger accounting
- o Grants accounting
- o General financial management
- o Internal audit function
- o IT support personnel
- o Facilities support personnel
- o Scientific support functions (not attributable to the project)
- o Environment health and safety personnel
- o Human resources
- o Library & information support
- o Shared procurement resources
- o General logistics support
- o Material management
- o Executive management
- o Other shared resources not directly attributable to the project
- o Institutional legal support
- o Research management costs

⇒ Depreciation on equipment
⇒ Insurance not directly attributable to a given project