This year's honorees and their inspiring stories are presented on the following pages. We commend and congratulate them and celebrate their outstanding contributions.

A VERY SPECIAL THANK YOU TO OUR CO-HOSTS:
The Pharmaceutical Research and Manufacturers of America, along with its distinguished co-hosts, is pleased to highlight and honor individuals and organizations for their commitment and progress in the field of HIV/AIDS research. The Research & Hope Awards honor these outstanding researchers and patient advocates.

The Research & Hope Awards are presented this evening in the following categories:

**Academic Research**

Presented to individuals or a team from the academic community for outstanding HIV/AIDS research.

**Community Champion**

Presented to an individual or organization that has made a significant impact advocating for the HIV/AIDS community to policymakers, community leaders and health organizations with the goal of helping people with HIV/AIDS live healthy, independent lives.

**Biopharmaceutical Industry Research**

Presented to individuals or a team from a biopharmaceutical research company for outstanding HIV/AIDS research.

**Visibility & Progress**

Presented to an individual or organization that has made a significant impact on public education and awareness of HIV/AIDS prevention, progress in research and policies impacting people living with HIV/AIDS.

**Excellence in Advocacy & Activism**

Presented to an individual or organization that has made a significant impact supporting and advocating for legislative or regulatory health policy issues specific to HIV/AIDS. Their work has increased awareness, funding for research or access to care. The award recognizes the involvement, commitment and achievement in promoting the importance of research for and access to HIV/AIDS treatments and therapies.
SCHEDULE

2014 RESEARCH & HOPE AWARDS DINNER

Wednesday, September 10, 2014 - 6 PM

RECEPTION

DINNER SEATING

Welcome Remarks from PhRMA's Chairman of the Board of Directors (2014-2015)
Ian C. Read,
Chairman of the Board and Chief Executive Officer, Pfizer Inc.

Conversation between President George W. Bush and
PhRMA President and Chief Executive Officer John J. Castellani

Dinner Service

Keynote Address:
Anthony S. Fauci, M.D.
Director, National Institute of Allergy and Infectious Diseases

AWARDS PRESENTATION
George W. Bush
President of the United States

George W. Bush, the 43rd President of the United States, was sworn into office on January 20, 2001, and served as Commander in Chief for two consecutive terms. Before his presidency, he served for six years as Governor of the State of Texas.

President Bush was born July 6, 1946, in New Haven, Connecticut, to Barbara and George H.W. Bush—later the 41st President of the United States. In 1948, the family moved to Texas, where President Bush grew up in Midland and Houston. He received a bachelor’s degree in history from Yale University in 1968 and a master’s degree in business administration from Harvard Business School in 1975. Following graduation, he moved back to Midland and began a career in the energy business.

On November 8, 1994, George W. Bush was elected the 46th Governor of Texas. He became the first governor in Texas history to be elected to consecutive four-year terms when he was re-elected on November 3, 1998. In Austin, he earned a reputation for his bipartisan governing approach and his compassionate conservative philosophy.

As President, George W. Bush worked to expand freedom, opportunity and security at home and abroad. This included important health care and health initiatives such as modernizing Medicare by adding a prescription drug benefit that provided access to needed medicine for 40 million seniors and other beneficiaries, and launching global HIV/AIDS and malaria initiatives that have saved millions of lives.

Since leaving office, President Bush has returned to Texas, where he has focused his attention on the development of the George W. Bush Presidential Center at Southern Methodist University in Dallas, which opened in May 2013. The Bush Center encompasses President Bush’s presidential library, museum and archives, as well as the George W. Bush Institute. The Bush Institute seeks to improve the human condition, and its work is based on the principles that have guided President Bush throughout his life: freedom is universal; each human life is precious; to whom much is given, much is required; and the marketplace is the best way to allocate resources. President Bush has continued to promote these values through the work of the Bush Institute in economic growth, education reform, global health, human freedom. Throughout, President Bush’s commitment to improving health has remained strong, including programs such as Pink Ribbon Red Ribbon, an innovative partnership established to leverage public and private investments in global health to combat breast and cervical cancer in developing nations in Sub-Saharan Africa and Latin America. President Bush partnered with President Bill Clinton in the wake of Haiti’s devastating earthquake to lead a major fundraising effort to assist the Haitian people.

President Bush is married to Laura Welch Bush, a former teacher and librarian whom he met at a friend’s backyard barbeque. They have twin daughters, Barbara and Jenna, a son-in-law, Henry Hager and a granddaughter, Mila Hager. The Bush family also includes two cats, Bob and Bernadette.
Anthony S. Fauci, M.D.
Director
National Institute of Allergy and Infectious Diseases
National Institutes of Health

Anthony S. Fauci, M.D., is director of the National Institute of Allergy and Infectious Diseases (NIAID) at the National Institutes of Health. Since his appointment as NIAID director in 1984, Dr. Fauci has overseen an extensive research portfolio devoted to preventing, diagnosing and treating infectious and immune-mediated diseases. Dr. Fauci is also chief of the NIAID Laboratory of Immunoregulation, where he has made numerous important discoveries related to HIV/AIDS and is one of the most-cited scientists in the field. Dr. Fauci serves as one of the key advisors to the White House and Department of Health and Human Services on global AIDS issues, and on initiatives to bolster medical and public health preparedness against emerging infectious disease threats such as pandemic influenza. He was one of the principal architects of the President’s Emergency Plan for AIDS Relief (PEPFAR), which has already been responsible for saving millions of lives throughout the developing world.

Dr. Fauci is a member of the National Academy of Sciences and is the recipient of numerous prestigious awards for his scientific and global health accomplishments, including the National Medal of Science, the Mary Woodard Lasker Award for Public Service and the Presidential Medal of Freedom. He has been awarded 38 honorary doctoral degrees and is the author, coauthor or editor of more than 1,200 scientific publications, including several major textbooks.
nearly 35 years ago, a mysterious new disease emerged. The numerous symptoms were complex and defied medical knowledge. Its origins, how it was transmitted and possible treatments stumped physicians and health care professionals. Worse yet, it was nearly always fatal for patients.

The discovery of what is now called the Human Immunodeficiency Virus (HiV) and Acquired Immune Deficiency Syndrome (aiDS) started a global health crisis. Indeed, HiV/aiDS’ human toll has been enormous, with the death of more than 36 million people worldwide, including more than 630,000 Americans.

These numbers and the full human costs of HIV/AIDS are staggering. Patients’ lives, entire communities and even nations have been devastated. But the effort to find solutions also inspired patients, activists, health care professionals, researchers, governments, academia and biopharmaceutical research companies to mobilize to fight the disease, seek to prevent its transmission and, one day, hopefully find a cure.

Early efforts to combat HiV/AIDS were not smooth or fast enough to meet the hopes and needs of HIV/AIDS patients. But some early activists quickly understood the health crisis that the disease represented. They saw the individual suffering along with the impact and stress the disease placed on health care workers and delivery systems. They also understood that fighting HIV/AIDS required confronting ignorance and stereotypes. With time, advocates, the government and research scientists all came to understand the challenges that ultimately fueled an aggressive search for treatments.

Understanding turned into cooperation and collaboration—all leading to new treatments and improved patient care. Since anti-retroviral treatments (ART) were approved in 1995, HIV/AIDS-related deaths in the United States have dropped by 83 percent, resulting in a 32 percent decline in HIV/AIDS-related hospitalizations, improving overall care and reducing the cost burden. Today, according to a University of Chicago study, HIV/AIDS patients live 15 years longer than in the 1980s. HIV/AIDS is increasingly a disease with a functional cure—a condition that patients live with rather than die from. In the words of former NBA star, entrepreneur and HIV/AIDS patient Earvin “Magic” Johnson: “The only time I think about HIV is when I have to take my medicine twice a day.”

And new research continues to inspire more progress and new hope for many patients in countries around the globe. Today, more than 40 innovative medicines and vaccines are being developed by biopharmaceutical researchers, including 25 antivirals, 16 vaccines and 3 cell/gene therapies. Further, the continuing improvement of our understanding of HIV/AIDS, as well as the science and technology we use to research new cures and treatments, suggests that there is real reason to hope that one day, we will find an answer that allows us to completely prevent or cure HIV/AIDS.

The men and women, researchers, practitioners and advocates honored with the 2014 Research & Hope Awards merit recognition and our gratitude for their contributions in seeking to end HIV/AIDS. Their achievements represent a critical part of the continuum of research, development, treatment and care that is revolutionizing our approach to HIV/AIDS.
NEW HOPE FOR PATIENTS
THE ROAD AHEAD:
PROGRESS IN THE FIGHT
THE BURDEN OF HIV/AIDS

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**HIV/AIDS: THEN AND NOW**

Since HIV/AIDS was first recognized in 1981, advances in medicines have helped lower the death rate by 83%. Prior to 1995, when the first anti-retroviral treatment was approved by the FDA, an HIV diagnosis was a death sentence; now, thanks to medicines developed by biopharmaceutical scientists and their research partners, it is a chronic condition with manageable costs and patients are able to reach nearly a full life expectancy.

**ARThUR ASHE**
Due to the lack of effective medicines, Arthur Ashe succumbed to AIDS-related pneumonia at 50 years old in 1993, just 10 years after he contracted the disease and 5 years after diagnosis.

**MAGIC JOHNSON**
Despite being diagnosed with HIV/AIDS in 1991, Magic is expected to meet his full life expectancy due to the treatments available at the outset of his diagnosis.

“We used to think HIV costs would overwhelm us... but we figured it out and let drug development progress.”
— Ira Klein, MD, MBA, FACP, Aetna

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**THE BURDEN OF HIV/AIDS**

**LITTLE HOPE: SOARING DEATH RATES AND UNSUSTAINABLE BURDEN ON ECONOMY**

1987: Patients could only expect to live months before they succumbed to the illness. Absent an effective treatment, the disease was also very costly to the health care system and society as a whole.

**BETWEEN 1990 AND 1995:** HIV/AIDS-related death rates continued upwards, increasing by 59% overall.

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**PROGRESS IN THE FIGHT**

**THE EVOLUTION OF HIV/AIDS TREATMENT**

1995: the first protease inhibitors were approved by the FDA, and the HIV/AIDS death rate decreased 67% over a few years.

2006: transmission rates between mother and infant dropped below 2%.

2012: U.S. death rate dropped 83%.

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**THE ROAD AHEAD: NEW HOPE FOR PATIENTS**

**INCREASED SURVIVAL RATES, DECREASED HOSPITALIZATIONS AND MANAGEABLE HEALTH CARE COSTS**

New antiretroviral treatments contributed to the rising survival rates of HIV/AIDS patients across the U.S., as the number of people living with HIV/AIDS increased by 29% between 1996 and 2000.

A 20 year old diagnosed with HIV today can expect to live to the age of 70, near average life expectancy for the population as a whole.

As more is discovered about HIV/AIDS, biopharmaceutical research companies are seeking further opportunities to develop a cure.

Hospitalization rates fell by 32% between 1995 and today.

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“The more than 40 medicines in development offer great hope for better treatment and prevention of HIV/AIDS in the years ahead.”
— John J. Castellani, PhRMA President and CEO

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HIV/AIDS IN THE UNITED STATES

**44 MEDICINES & VACCINES IN DEVELOPMENT**

for HIV infection

- **25** Antivirals
- **3** Cell/Gene Therapy
- **16** Vaccines

**Source:** PhRMA Medicines in Development for HIV/AIDS, PhRMA.
Raymond F. Schinazi, Ph.D., D.Sc.

Dr. Raymond F. Schinazi is the Frances Winship Walters Professor of Pediatrics and director of the Laboratory of Biochemical Pharmacology at Emory University. He serves as senior research career scientist at the Atlanta Department of Veterans Affairs and director of the Scientific Working Group on Viral Eradication for the NIH-sponsored Emory University Center for AIDS Research (CFAR). Dr. Schinazi received his D.Sc. (1972) and Ph.D. (1976) in chemistry from the University of Bath, England. He has authored over 500 peer-reviewed papers and seven books and holds 92 issued U.S. patents and over 120 non-U.S. national stage patents and patent applications, which have resulted in 12 New Drug Applications (NDA). A world leader in nucleoside chemistry, Dr. Schinazi is best known for his pioneering work on HIV and hepatitis C virus (HCV) drugs 3TC (lamivudine), FTC (emtricitabine/Emtriva), LdT (telbivudine) and most recently sofosbuvir (Sovaldi), which are now approved by the FDA. He is also the founder of five biotechnology companies, including Pharmasset, Inc. (VRUS; acquired by Gilead in 2012 for 11.4 B). More than 94 percent of HIV-infected individuals in the U.S. on combination therapy take at least one of the drugs he invented, and it is estimated that his work has saved more than three million lives worldwide. His contributions related to hepatitis C virus are expected to have a profound positive impact on the approximately 130-150 million people worldwide suffering from the chronic infection. Dr. Schinazi served on the Presidential Commission on AIDS and is the recipient of numerous awards, including the 2006 Distinguished Scientist Award from the Hepatitis B Foundation, the Friends of the National Library of Medicine 2013 Distinguished Medical Science award, and the SCRIP “100 Leaders” award in 2014. He was also chosen in 2011 as one of Emory University’s “175 History Makers.” In 2014, he was selected for PhRMA Foundation’s Research & Hope Award for Excellence in Academic Research. He currently serves as a governing trustee for the Foundation for AIDS Research (amfAR). He was inducted into the Technology Hall of Fame of Georgia in March 2012, received the Intellectual Property Legends Award in October 2012 and was inducted into the National Academy of Inventors as a Charter Fellow in January 2013. Dr. Schinazi is internationally recognized as one of the most influential persons in the life science sector.
Dennis Michael Grasela, Pharm.D., Ph.D.

Dr. Dennis Grasela is currently executive director and exploratory development lead for virology within the Department of Exploratory Clinical and Translational Research at Bristol-Myers Squibb (BMS). In the first half of his nearly 25-year career at BMS, Dr. Grasela was involved in understanding the clinical pharmacology of the compounds in the infectious diseases portfolio, including the development and/or registration of Azactam® (antibiotic; pediatric indication), Tequin™ (fluoroquinolone antibiotic), Reyetaz™ (HIV protease inhibitor) and Baraclude™ (HBV antiviral). Following his appointment as head of discovery medicine in 2001, his research focused on the exploratory development/translational medicine aspects of the novel HIV and hepatitis C virus antiviral portfolio at BMS and exploration of the host-virus interaction, including the use of immunomodulators of T-cell function in the treatment of chronic hepatitis B virus and HIV.

Prior to joining BMS, Dr. Grasela held a joint appointment as assistant professor of pharmaceutics and pharmacy practice at Temple University, School of Pharmacy. He received his Pharm.D. and Ph.D. from the University of Sciences in Philadelphia, with post-graduate research training within the laboratories of the Division of Clinical Pharmacology, Jefferson Medical College. He has been an invited speaker at international infectious diseases conferences and has co-authored over 100 abstracts and over 75 manuscripts in peer-reviewed journals.

George Hanna, M.D.

Dr. George Hanna is vice president of HIV development within virology global development and clinical research at Bristol-Myers Squibb (BMS). In this role, he is responsible for the overall HIV drug development strategy within BMS R&D. He is also directly responsible for the development of HIV drugs that are in clinical-stage development. His research interests have included drug development and resistance mechanisms of HIV nucleoside and non-nucleoside reverse transcriptase inhibitors, protease inhibitors and attachment inhibitors.

Dr. Hanna has 15 years of experience in drug development and treatment in HIV and infectious diseases, encompassing clinical care, translational medicine, clinical drug development and medical affairs. He received his Bachelors of Arts degree from Harvard University and his medical degree from Baylor College of Medicine in Houston. He completed a residency in internal medicine at the Beth Israel Deaconess Medical Center and a Fellowship in Infectious Diseases at the Massachusetts General Hospital, both teaching hospitals of Harvard Medical School. He subsequently served in the Division of Infectious Diseases at the University of Pittsburgh School of Medicine before joining BMS. He is board certified in internal medicine and infectious diseases.
John F. Kadow, Ph.D.

Dr. John F. Kadow is currently a director in the virology chemistry group within the Department of Discovery Chemistry at Bristol-Myers Squibb (BMS). He has worked on projects in the oncology, virology and anti-infective disease areas since joining BMS over 28 years ago. Since assuming the role of discovery working group co-chair & chemistry program lead in the early 90s, he has been a member of teams that advanced 16 compounds to the development organization. Several of these compounds remain in active development either internally or externally as HIV or hepatitis C virus inhibitors. He has also been involved with various early phase to full phase program transitions, initial program proposals and therapeutic disease area preclinical strategy teams.

Dr. Kadow is currently a member of the American Chemical Society and serves as a reviewer for a number of chemistry journals and of biomedical research grants for the state of Connecticut. He has co-authored a number of book chapters, reviews, meeting abstracts and over 80 manuscripts in peer-reviewed journals. He is a co-inventor on more than 90 issued U.S. patents. He has presented his work as an invited speaker at international conferences and the chemistry departments of a number of universities. Prior to joining BMS, Dr. Kadow carried out postdoctoral research in synthetic organic chemistry at Yale University, New Haven, CT. He received a Ph.D. in Organic Chemistry from Wayne State University, Detroit, MI and a B.A. in Chemistry, magna cum laude, Hope College, Holland, MI.

Mark Krystal, Ph.D.

Dr. Mark Krystal is director in the Department of Discovery Virology at Bristol-Myers Squibb (BMS), where he currently leads programs targeting direct acting agents against HIV-1 from early phase research through initiation of clinical development. Mark has also been involved in the development or regulatory processes for the anti-HIV marketed agents Sustiva®, Reyataz® and Zerit®, along with the attachment inhibitor. In his 22 years at BMS, Mark has led antiviral discovery programs against influenza virus, respiratory syncytial virus and HIV-1, where his team has identified numerous clinical candidates. Prior to joining BMS, Mark was an assistant professor of Microbiology at the Mount Sinai School of Medicine in New York, where he pioneered studies that helped develop reverse genetic systems for negative strand viruses. Mark received his Ph.D. in Molecular Biology at SUNY Stony Brook and was a post-doctoral fellow in the laboratory of Dr. Peter Palese at Mt. Sinai. Mark has been an invited speaker at infectious diseases conferences, lectured in virology courses at Yale and Mt. Sinai and has co-authored over 100 manuscripts and 16 patents. Mark currently serves on the editorial boards of Journal of Virology, Antimicrobial Agents and Chemotherapy and Virology.
Nick A. Meanwell, Ph.D.

Dr. Nicholas Meanwell is executive director, Department of Discovery Chemistry, Virology and has led drug discovery programs in the cardiovascular, neurosciences and virology therapeutic areas, which have resulted in the advancement of over 25 clinical candidates for the prevention of thrombosis, the treatment of stroke and therapy for viral infections, including human immunodeficiency virus (HIV), hepatitis C virus (HCV) and respiratory syncytial virus (RSV). Recent significant discoveries to emerge from this group include RSV fusion inhibitors, characterized as the first small molecules to interfere with the association of the 6 helical peptide bundle that is a critical step in the virus entry process, and a series of HIV attachment inhibitors that are the first small molecules described to function by interfering with the interaction between virus gp120 and the host cell CD4 receptor. BMS-663068, a phosphonooxymethyl prodrug of BMS-626529, is currently in Phase 2 clinical trials.

Significant compounds in the HCV arena include daclatasvir, a pioneering molecule that established NS5A inhibition as a clinically-relevant target and which is currently in Phase 3 clinical trials, the HCV NS3 protease inhibitor asunaprevir which incorporates the cyclopropyl acylsulfonamide moiety that has been widely adopted and BMS-791325, a thumb site inhibitor of HCV NS5B polymerase. The combination of daclatasvir and asunaprevir in a clinical trial conducted in HCV-infected subjects established for the first time that a HCV infection could be cured by direct acting antiviral agents in the absence of immune stimulation.

He is the author/co-author of 140 peer-reviewed publications, 45 review articles and book chapters and more than 150 meeting abstracts. Named as inventor/co-inventor of over 100 issued U.S. Patents, he has presented over 65 invited lectures at national and international meetings, universities and schools on medicinal chemistry.
Phill Wilson

Phill Wilson is president and chief executive officer of the Black AIDS Institute, the only national HIV/AIDS think tank focused exclusively on black people. The Institute’s mission is to stop the AIDS pandemic in black communities by engaging and mobilizing black institutions and individuals in efforts to confront HIV. The Institute interprets public and private sector HIV policies, conducts trainings, offers technical assistance, disseminates information and provides advocacy from a uniquely and unapologetically black point of view.

Prior to founding the Institute, Mr. Wilson served as the AIDS Coordinator for the City of Los Angeles (1990-1993), the director of policy and planning at AIDS Project Los Angeles (1993-1996), co-chaired the Los Angeles County HIV Health Commission (1990-1995) and was an appointee to the HRSA AIDS Advisory Committee (1995-1998).

Mr. Wilson was also the coordinator of the International Community Treatment and Science Workshop at the 12th, 13th, 14th and 15th International AIDS Conferences in Geneva, Switzerland, Durban South Africa, Barcelona, Spain, Bangkok, Thailand and Toronto, Canada.

In addition to co-founding the National Black Lesbian & Gay Leadership Forum and the National Task Force on AIDS Prevention, he has been involved in the founding of a number of other notable AIDS service and community-based organizations, including the Chris Brownlie Hospice, the AIDS Health care Foundation, the National Minority AIDS Council, the Los Angeles County Gay Men of Color Consortium and the CAEAR Coalition.

Mr. Wilson has published articles in the Los Angeles Times, The New York Times, Los Angeles Weekly, Essence, EBONY, VIBE, Jet, POZ and HIV+. The Ford Foundation named him one of the 20 award recipients for the Leadership for a Changing World, in 2001. Wilson was a member of the U.S. delegation to the 1994 World AIDS Summit in Paris, and has worked extensively on HIV/AIDS policy, research, prevention and treatment issues in Botswana, France, Germany, Holland, India, Latvia, Mexico, Russia, South Africa, Tanzania, the UK, the Ukraine, Zambia and Zimbabwe.

Mr. Wilson is a recent recipient of the Delta Spirit Award from the Los Angeles Alumnae Chapter of Delta Sigma Theta Sorority, Inc.; he was given the Discovery Health Channel Medical Honor in July 2004 and was recently named one of the 2005 Black History Makers in the Making by Black Entertainment Television (BET). Most recently, Phill was an opening-day plenary speaker at the XIX International AIDS Conference in Washington, D.C.

Mr. Wilson graduated with a bachelor’s degree in fine arts in 1977 from Illinois Wesleyan University. He currently resides in Los Angeles, CA.
Kathie Hiers is the CEO of AIDS Alabama, a nonprofit organization that works statewide to provide housing and services to low-income persons with HIV/AIDS as well as education, outreach and testing. AIDS Alabama was recently announced as the Community-Based Organization of the Year by the AIDS Drug Assistance Program Advocacy Association. AIDS Alabama was also one of twelve organizations featured by the Kaiser Family Foundation and Ford Foundation’s Greater Than AIDS Campaign in metro stations in Washington, D.C. during the 2012 International AIDS Conference. In August 2013, AIDS Alabama was one of two AIDS Service Organizations nationwide to be awarded a navigator grant from the Department of Health and Human Services (HHS) to enroll people statewide in insurance marketplaces.

Kathie is 1 of 25 people appointed to the Presidential Advisory Council on HIV/AIDS, providing advice and expertise to the President and the Secretary of HHS. Kathie is also a member of the Planning Committee for the White House Summit on HIV and the South, which was held on June 18, 2014.

Kathie has served locally as chair of the Ryan White Consortium and as president of the Metropolitan Birmingham Services for the Homeless. Kathie is an appointee to the Governor of Alabama’s HIV Task Force.

Nationally, Kathie served for four years as chair of the Southern AIDS Coalition and was a primary author of the Southern States Manifesto, as well as a leading force in changing the Ryan White distribution methodology in the 2006 reauthorization of the bill. Kathie serves as president of the National AIDS Housing Coalition, as president of the Community Access National Network, and as co-chair of the Federal AIDS Policy Partnership. She also serves on the Public Policy Committee of AIDS United.

Kathie is frequently called upon to speak on AIDS housing, Ryan White, advocacy, the South and rural issues and has been a featured speaker for many media conferences and congressional briefings.

In 2012, Kathie’s work in fighting the HIV epidemic in its epicenter, the U.S. South, was featured in the documentary deepsouth and in Don Rather Reports: It’s a Southern Thing.
At birth, Hydeia Broadbent was abandoned at the University Medical Center of Southern Nevada in Las Vegas where Patricia and Loren Broadbent adopted her as an infant. Although her HIV condition was congenital, she was not diagnosed as HIV-positive with advancement to AIDS until age three. The prognosis was that she would not live past the age of five. Now at the age of 30, Hydeia spends her time spreading the message of HIV/AIDS awareness and prevention by promoting abstinence, safe-sex practices (for people who choose to have sex) and national HIV testing initiatives.

Hydeia began her debut as an HIV/AIDS activist and public speaker at six years old. By 12 years old, Hydeia appeared on many national television programs, including Oprah, 20/20, Good Morning America, Weekly with Ed Gordon and "A Conversation with Magic Johnson" on Nickelodeon. She has been featured in The New York Times, People, Essence, EBONY, Health Quest, Sister 2 Sister, POZ, National Geographic, Real Health, Seventeen and Heart & Soul. Hydeia also co-graced the cover of TV Guide. Hydeia has also taken part in many of America’s talk radio programs including, The Michael Eric Dyson Show, Russ Parr Morning Show and The Tom Joyner Morning Show.

This year The Oprah Winfrey Network featured Hydeia on OWN’s Where Are They Now, and to date Hydeia was the most requested update by fans.

Over the last 24 years, Hydeia has become a notable speaker and guest panelist at many of America’s most respected educational institutions, including Duke University, Morehouse School of Medicine, UCLA, USC and Howard University. Hydeia was a featured speaker for the International AIDS Conference in 2006 and a featured speaker main stage at 2000 & 2007 Essence Music Festival, as well as the 2007 AIDS Rally at the Potters House lead by Bishop T.D. Jakes, in Dallas, Texas.

Not since Ryan White has a young person spoken out so passionately about living with AIDS. Hydeia is one of a few young activists to follow in his footsteps and speak out on an international level about being affected by HIV/AIDS. Broadbent is also considered a pioneer as the first African-American youth to speak up and speak out about the epidemic. EBONY named Hydeia one of the Most Influential 150 African Americans in 2008. She has been honored with an American Red Cross Spirit Award and an Essence Award. In 2010, Hydeia was invited by the BET Networks Chairman/CEO Debra Lee to participate as a panelist in the First Annual Leading Women’s Defined Summit in Washington, D.C. Hydeia also received an award for Health Education and Awareness from WEEN (Women in Entertainment Empowerment Network). Hydeia also had the honor of being selected by TheGrio.com, a division of NBC News, TheRoot.com and EBONY as one of today’s Top 100 African American History Makers for Power 100 for 2011.

Today, Hydeia is a distinguished international, public speaker and HIV/AIDS activist with a mission to educate people of all ages. When addressing the public about the issues of HIV/AIDS, her primary goal is to provide a clear understanding of how to avoid at-risk behaviors through self-examination and informed decision making. She succinctly stated, "With all that we know about the virus, it is clear to me that contracting HIV/AIDS today is a choice and we can't allow anyone the power to make that choice for us!"
Advocates for Youth

Advocates for Youth is a national, nonprofit organization dedicated to creating programs that help young people ages 13 to 24 make informed and responsible decisions about preventing unintended pregnancy, sexually transmitted infections (STIs) including HIV/AIDS and empowering LGBT youth, youth of color and marginalized youth. For over 30 years, Advocates has provided resources, training and strategic assistance to youth-serving organizations; LGBT and AIDS-serving organizations; community-based organizations; schools, including Historically Black Colleges and Universities; and the media about evidence-based best practices in adolescent reproductive health. Advocates’ Youth Activist Network stands 75,000 strong including young people from nearly 100 countries around the world and 1,000 campuses across the U.S. Advocates is dedicated to fostering partnerships with both youth-led and youth-serving organizations, collaborating closely with at least 100 organizations domestically and 30 internationally with programming in 15 countries across Africa, Asia and the Caribbean.

AIDS Alabama

AIDS Alabama is a large nonprofit that has been held up as a national model because of the unique partnerships it has developed with other community-based organizations that allow the agency to serve all 67 Alabama counties. It has provided housing and supportive services to HIV-positive Alabamians since 1987, and is the largest HIV/AIDS service provider in the state – providing more than 170,000 nights of safe and affordable housing to more than 700 low-income, HIV-positive individuals and family members last year alone. As recipients of a navigator grant, AIDS Alabama has also been instrumental in the statewide effort to educate and enroll under and non-insured individuals in the health insurance marketplace established by the Affordable Care Act.

AIDS Alabama has many programs that keep the organization deeply rooted in the community, including nine different housing programs, and a prevention program, which provides professional HIV prevention education to at-risk populations statewide. Each year, the programs operate in a plethora of settings, including correctional facilities, homeless shelters, churches, businesses, high schools, universities and other health care settings. AIDS Alabama also provides at-risk populations with peer education, a state and local confidential helpline, free and confidential HIV testing and more.

Through policy and outreach, AIDS Alabama has successfully engaged the Latino community and staffs the Alabama Latino AIDS Coalition. In the last two years, efforts to engage young people have grown into a new group, the Alabama Alliance for Healthy Youth. This organization has 800 names of young adults ages 15 to 24 who are interested in health issues related to young people.

According to an internal 2010 Statewide Needs Assessment Survey, 36.8 percent of persons with HIV/AIDS in Alabama were unable to work, and only 27.8 percent received income from earned wages. Strong relationships and years of experience have allowed AIDS Alabama to engage persons of lower income and other vulnerable populations. In addition, collaborative partnerships with organizations that serve these targeted populations, including non-AIDS Service organizations, clinics, faith-based entities, educational institutions, health care providers and advocacy groups have allowed AIDS Alabama to remain a pillar of the community and create safe spaces for all individuals, including those with HIV.
AIDS Institute

The AIDS Institute (TAI) is a national organization founded in 1985 by volunteer advocates and incorporated in 1992 as a 501(c)(3) nonprofit organization. The core activities of TAI relate directly to the mission of our organization to: *Promote action for social change through public policy, advocacy, research and education*. The organization achieves its mission and goals through offices located in Washington, D.C., Tampa and Tallahassee, Florida. Over the years the reach of the organization has grown to become a leading national organization that focuses on HIV/AIDS and Hepatitis while addressing health care barriers that impact all patients. The staff is diverse and highly experienced with all aspects of the HIV/AIDS and Hepatitis communities at the global, national, regional and local levels. The national board of directors and advisory board members represent a strong diversity in geography, ethnicity, race, culture, gender, sexual orientation, skills and background. The demographics and needs of the communities that TAI serves are as diverse as the communities impacted by HIV/AIDS and Hepatitis. As a national organization, TAI focuses on a strong portfolio of activities and programs within each of our target areas: public policy, advocacy, research and education. Within those areas we provide: policy analysis, policy research, communications, capacity building, training, convening and technical assistance. We strive to achieve our mission by making an impact and being change agents at the systems level. We ensure that our work and targeted programs have a direct impact on the most vulnerable populations and improve health care and treatment access.

AIDS United

Born out of the merger of the National AIDS Fund and AIDS Action in late 2010, AIDS United’s mission is to end the AIDS epidemic in the United States, through strategic grant making, capacity building, formative research and policy. AIDS United works to ensure access to life-saving HIV/AIDS care and prevention services and to advance sound HIV/AIDS related policy for U.S. populations and communities most impacted by the epidemic. To date, our strategic grant making initiatives have directly funded more than $85.8 million to local communities, and have leveraged more than $110 million in additional investments for programs that include, but are not limited to, HIV prevention, access to care, capacity building, harm reduction and advocacy.

American Academy of HIV Medicine

The American Academy of HIV Medicine (AAHIVM) is a professional organization that supports the HIV practitioner and promotes accessible, quality care for all Americans living with HIV disease. Our membership of HIV practitioners and credentialed HIV Specialists™ provides direct care to the majority of HIV patients in the U.S. AAHIVM believes in giving HIV frontline practitioners the support, resources and educational opportunities they need for providing optimal care for those living with HIV disease. AAHIVM supports the HIV care provider and the profession by:

- Providing continuing medical education;
- Credentialing HIV Specialists™, HIV Experts™ and HIV Pharmacists™;
- Providing practice management information;
- Advocating on behalf of the HIV care provider at the federal and state levels for issues relevant to clinical and professional support; and
- Advancing health care resources for HIV-infected patients.

A leader in advancing continued education and research in HIV, AAHIVM is currently leading the **HIV and Aging Consensus Project**, developed to assess how the presence of both HIV and common age-associated diseases alter the optimal treatment of HIV, as well as other coexisting medical conditions. As part of this project, in 2011, AAHIVM released the first clinical treatment strategies for managing older HIV patients: **Recommended Treatment Strategies for Clinicians Managing Older Patients with HIV**. The report, developed by a panel of experts with experience in the fields of HIV and geriatrics, provided guidance for HIV clinicians and other health care providers who treat, diagnose and refer older patients with HIV disease. As part of the project,
AAHIVM also just launched www.HIV-Age.org, an online site for clinicians seeking best practices for managing the care of older HIV patients.

AAHIVM is also the publisher of *Fundamentals of HIV Medicine*, the nation’s most frequently utilized HIV patient care and reference textbook and *HIV Specialist*, an award-winning quarterly magazine for HIV practitioners. With a circulation of more than 10,000, *HIV Specialist* goes directly to health care providers, pharmacists, policymakers, industry leaders, medical students, educators and researchers.

**Association of Nurses in AIDS Care**
The Association of Nurses in AIDS Care promotes the individual and collective professional development of nurses involved in the delivery of health care to persons infected or affected by the Human Immunodeficiency Virus (HIV) and promotes the health and welfare of infected persons by: creating an effective network among nurses in AIDS Care; studying, researching and exchanging information, experiences and ideas leading to improved care for persons with AIDS/HIV infection; providing leadership to the nursing community in matters related to HIV/AIDS infection; advocating for HIV infected persons; and, promoting social awareness concerning issues related to HIV/AIDS. Inherent in these goals is the abiding commitment to the prevention of further HIV infection.

**Black AIDS Institute**
The Black AIDS Institute is the only national HIV/AIDS think tank focused exclusively on black people. Our mission is to stop the AIDS pandemic in black communities by engaging and mobilizing black institutions and individuals in efforts to confront HIV. We interpret public and private sector HIV policies, conduct trainings, offer technical assistance, disseminate information and provide advocacy mobilization from a uniquely and unapologetically black point of view.

**Caregiver Action Network (CAN)**
The Caregiver Action Network is the nation’s leading family caregiver organization working to improve the quality of life for the 90 million Americans who care for loved ones with chronic conditions, disabilities, disease or the frailties of old age. CAN serves a broad spectrum of family caregivers ranging from the parents of children with special needs, to the families and friends of wounded soldiers; from a young couple dealing with a diagnosis of MS, to adult children caring for parents with Alzheimer’s disease. CAN (formerly the National Family Caregivers Association) is a nonprofit organization providing education, peer support and resources to family caregivers across the country free of charge.

**Community Access National Network**
The Community Access National Network (CANN) is a 501(c)(3) national nonprofit organization (formerly incorporated under the “Ryan White CARE Act Title II Community AIDS National Network”) focusing on public policy issues relating to HIV/AIDS and Hepatitis C. Its coalition-based work is done on behalf of its patient advocacy groups, pharmaceutical partners and government agencies.
Forum for Collaborative HIV Research

The Forum, founded in 1997, is a public/private partnership addressing cutting edge science and policy issues through a process of stakeholder engagement. Its impetus was a request from Vice President Al Gore to convene all stakeholder groups to discuss and discover opportunities for cross-sector dialogue and collaboration at a time when newly approved antiretrovirals — and a healthy new drug pipeline — allowed the transition of HIV-infection from a death-and-dying to a chronic disease model. The hallmark of the Forum is its unique structure — stakeholder partners (patients/patient advocates, academia, governmental agencies, industry, insurers, professional societies and other relevant entities) co-own the Forum collectively, creating a neutral and independent space for ongoing, issue-specific deliberation in which all stakeholders have an equal voice.

Since its inception, the scope of the Forum’s work increased to include viral hepatitis in the landmark National Summit on testing and linkage to care series, and development of drugs for hepatitis C virus (HCV), cytomegalovirus (CMV) and liver fibrosis/cirrhosis. The Forum process has changed the way clinical trials are conducted; facilitated broader and fairer access to trials and expanded access programs; and accelerated the delivery of new drugs for HIV and HCV. Most recently, the Forum established an interdisciplinary framework for deliberation of science, regulatory policy, ethics and fairness as the HIV cure research agenda unfolds.

The Forum’s contribution to drug development — facilitated through informal yet structured interactions between academic experts, patient community, U.S. and European regulatory agencies and the pharmaceutical/biotech industry results in reduced uncertainty regarding the regulatory pathway for new therapeutic strategies and new disease areas. The independent and neutral space created by these interactions allows for the co-evolution of science and regulatory guidance, providing an opportunity to effect directional change.

The Forum is the sponsor of the C. Everett Koop HIV/AIDS Public Health Leadership Award, first awarded to Dr. Koop in November 2010.

Based in Washington, D.C., operating under the auspices of the UC Berkeley School of Public Health, the Forum offers unique educational and training opportunities through its interns/fellows program and the Forum-sponsored course on FDA and Drug Development taught on the Berkeley campus.

Gay and Lesbian Medical Association

Gay and Lesbian Medical Association (GLMA) is a national, multidisciplinary membership organization dedicated to advancing equality in health care for lesbian, gay, bisexual and transgender (LGBT) individuals and health care providers. GLMA achieves its mission through public policy and advocacy work, professional education, patient education and the promotion of LGBT health research.

Gay and Lesbian Victory Fund and Institute

The Gay and Lesbian Victory Fund and Institute is the nation’s largest resource for openly LGBT leaders in government and politics. Through its leadership, training and executive development programs, Victory works to expand the number of LGBT people in elected and appointed office at all levels of government, giving our community a voice in decisions that affect our lives and families.
HealthHIV
HealthHIV is a national nonprofit working with organizations, communities and health care providers to advance effective prevention, care and support for people living with, or at risk for, HIV and HCV through education and training, technical assistance and capacity building, advocacy and health services research and evaluation. HealthHIV leads the Pozitively Healthy national HIV consumer coalition, a HealthHCV initiative, the National Center for Health care Capacity Building and the National Coalition for LGBT Health.

HIV Medicine Association
The HIV Medicine Association is an organization of medical professionals who practice HIV medicine. We promote quality in HIV care and advocate for policies that ensure a comprehensive and humane response to the AIDS pandemic informed by science and social justice.

Human Rights Campaign Foundation
The Human Rights Campaign Foundation improves the lives of lesbian, gay, bisexual and transgender (LGBT) people by working to increase understanding and encourage the adoption of LGBT-inclusive policies and practices. We build support for LGBT people among families and friends, co-workers and employers, pastors and parishioners, doctors and teachers, neighbors and the general public.

International Association of Providers of AIDS Care
The International Association of Providers of AIDS Care (IAPAC) has worked over the past 19 years to marshal the coordinated strength of health care professionals worldwide to the benefit of people living with and affected by HIV/AIDS. IAPAC represents more than 20,000 clinicians and other health care professionals in over 150 countries who deliver both prevention and treatment services in multiple disease areas, including HIV, hepatitis, malaria and tuberculosis. IAPAC educational, research, technical assistance and advocacy activities are conducted by a professionally diverse staff, and are guided by an international board of trustees composed of highly esteemed medical, public health and advocacy professionals from across six continents.

Working in partnership with the health care professions, business, government, academe and religious communities, IAPAC accomplishes its mission through a comprehensive program of education, policy and advocacy, direct technical assistance, research and care provision initiatives spearheaded by its members. IAPAC’s strength is firmly rooted in the belief that the most effective and creative solutions to ongoing issues of access to and provision of HIV prevention, care and treatment services evolve from within the association’s membership. IAPAC provides educational services to its membership on best clinical practices in managing HIV and its associated complications, while it also develops and implements innovative public health care policies that reflect its membership’s commitment to changing the course of the HIV pandemic.

IAPAC is the successor organization to the Physicians Association for AIDS Care (PAAC), which was the first organization to support U.S. physicians in the mid-1980s as they ministered to people who, given limited treatment options, were quickly dying of AIDS-related complications. PAAC was the precursor to the International Association of Physicians in AIDS Care, established in 1995 to represent HIV-treating physicians worldwide, which became the International Association of Providers of AIDS Care in 2012 as a formal acknowledgement of the contributions made by various cadres of professional and paraprofessional providers of HIV prevention, care and treatment services.
National Alliance for caregiving
The National Alliance for caregiving is a national, nonprofit coalition focused on advancing family caregiving through research, innovation and advocacy. Through supporting public policy research, coalition building and education, the Alliance has supported America’s nearly 66 million family caregivers since 1996.

National Gay and Lesbian Task Force
The National Gay and Lesbian Task Force builds power, takes action and creates change to achieve freedom and justice for lesbian, gay, bisexual and transgender people and their families. As a progressive social justice organization, the Task Force works toward a society that values and respects the diversity of human expression and identity and achieves equity for all.

Project HOPE
Project HOPE is an international medical nonprofit organization established 56 years ago with a mission of advancing health care around the world. Project HOPE has worked in more than 120 countries, improving global health through community education, training of medical providers and the delivery of humanitarian assistance. Identifiable to many by the SS HOPE, the world’s first peacetime hospital ship, Project HOPE now conducts land-based medical training and health education programs.

Project HOPE’s focus is on sustainable rather than short-term health improvements and it is committed to working in partnership with local government agencies, other international nonprofits and with the business sector to develop long-term solutions to complex health challenges.

Today, Project HOPE has five practice areas: Women’s and Children’s Health, Infectious Diseases (TB and HIV), Noncommunicable Diseases, Health Systems Strengthening, Humanitarian Assistance and Disaster Relief. In addition, Project HOPE publishes Health Affairs, the nation’s leading health policy journal.

Project HOPE has played a crucial role in saving lives in regions hit by natural disasters over much of the last decade, in China, Haiti, Indonesia, Japan, the Philippines and other parts of Southeast Asia. While Project HOPE does respond in the short-term to hurricanes, typhoons, tsunamis, earthquakes and refugee crises, it also stays behind in disaster zones after the initial trauma has passed, to offer long-term support to often damaged health systems and communities.

HOPE’s Gift-in-Kind platform provides critically needed medicines, vaccines, medical supplies and equipment to promote quality health care around the world, particularly in response to natural disasters and humanitarian need. Volunteerism has been at the heart of Project HOPE’s work since its beginning as a floating hospital ship, the SS HOPE, in 1958. Today, medical volunteers for Project HOPE participate in ship-based care in partnership with the U.S. Navy as well as land-based medical training and health education programs.
Seed Global Health

Seed Global Health strives to build a world with greater health equity. We place U.S. doctors and nurses as educators in partner country training institutions where they strengthen the medical, nursing and health systems by immediately increasing teaching capacity and supporting clinical care delivery. Our greater goal is to help provide a sustainable solution for improved health by addressing the vast shortages of health professionals in places of need; we invest in a future generation of doctors and nurses who will go on to train others.

Health care provider shortages limit the ability of many countries to deliver even basic health care let alone respond to more complex needs. These shortages are perpetuated by the scarcity of educators able to train new professionals. To help address this need, Seed Global Health works with the U.S. Peace Corps and the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR) in a public-private partnership called the Global Health Service Partnership (GHSP). In collaboration with host country governments and training institutions, GHSP Volunteers enhance existing clinical training systems through the development and implementation of innovative teaching tools, clinical guidelines and education programs. Volunteers teach students, house staff and other learners through classroom teaching, daily rounds on patients, didactic sessions and informal teaching activities. Seed supports current health care professionals capable of providing excellent care with improved training, in addition to teaching future generations of physicians and nurses. In this way, Seed fulfills a unique niche and has been called the “missing link of health care delivery” in its partner countries. Seed invests in U.S. clinical educators committed to this vital work by providing stipends for debt repayment to facilitate their ability to serve. Through their deep experience in these countries, GHSP Volunteers have the potential to develop a much richer understanding of the complex determinants of good health, and can return as paradigmatic health care advocates for the underserved domestically. There are very few programs like GHSP, which focus on supporting current and investing in future generations of health professionals who will become the critical leaders of the medical, nursing and public health response going forward.

Services & Advocacy for GLBT Elders

Services & Advocacy for GLBT Elders (SAGE) is the country’s largest and oldest organization dedicated to improving the lives of lesbian, gay, bisexual and transgender (LGBT) older adults. Founded in 1978 and headquartered in New York City, SAGE is a national organization that offers supportive services and consumer resources for LGBT older adults and their caregivers, advocates for public policy changes that address the needs of LGBT older people and provides training for aging providers and LGBT organizations, largely through its National Resource Center on LGBT Aging. With offices in New York City, Washington, D.C. and Chicago, SAGE coordinates a growing network of 26 local SAGE affiliates in 19 states and the District of Columbia.

Whitman-Walker Health

Established in 1978, Whitman-Walker Health is a nonprofit, community health center serving the Washington, D.C., metropolitan area. Through two sites in the District of Columbia, Whitman-Walker Health offers primary medical and dental care; mental health and addictions counseling and treatment; HIV education, prevention and testing; legal services; and medical adherence case management. Whitman-Walker Health is committed to meeting the health needs of the gay, lesbian, bisexual and transgender community and people living with HIV/AIDS.