THE GMHC DIFFERENCE

2019 ANNUAL REPORT



A Message from the CEO and Chair of the GMHC Board

Dear GMHC Community:

GMHC excels in many ways, ensuring the communities we serve have access to high-quality HIV/AIDS services. Our comprehensive approach is designed to help people living with HIV/AIDS overcome barriers to healthy, productive lives.

For nearly four decades, GMHC has been a major partner with the City of New York and the State of New York in fighting to end the AIDS epidemic. In 2019, our contributions helped push new HIV infections to an historic low of 1,772. Our programs reach into communities where the epidemic now concentrates, particularly young Black and Latinx men who have sex with men.

The HIV care continuum is a public health model that outlines the stages people with HIV go through from diagnosis to achieving and maintaining viral suppression—the key to positive health outcomes and the virtual elimination of the risk of transmission. We work across nearly every step of the HIV care continuum. Again this year, our impact can be seen in our exceptionally high rates of linkage to care, adherence, and viral suppression rates: 91 percent of people who test HIV positive at GMHC were linked to care; 89 percent were adherent to treatment; and 94 percent were virally suppressed.

Our comprehensive model is vital to achieving these outcomes. In particular, our services work to address the barriers such as housing and food insecurity and other social determinants of health that prevent people from accessing and adhering to treatment. Many of our clients are homeless when they come to the agency, making housing one of the most requested services. It may sound simple but it's profound: people who don't have to worry about shelter or a place to sleep at night are more likely to take their medications and keep their doctor's appointments. In 2019, all of our clients who gained permanent housing remained stably housed six months later, and this metric correlated closely with treatment adherence and viral suppression. Our model works.

Our impact along the HIV care continuum can also be seen in our approach to testing. In 2019, we relocated our Testing Center from West 29th Street to our new offices at West 38th Street, which allowed us to deliver all of our services under one roof. In 2019, the Testing Center conducted more than 3,000 HIV tests and nearly 7,100 STI tests. For those people who test HIV positive, we focus on immediately linking them to care. In some cases where the risk to follow-up is high, we actually escort newly diagnosed clients to their first doctor's appointment to ensure that they enroll in care and begin treatment.

While the data speaks for itself, the real impact of our work can be seen in the individual stories of our clients. This year's annual report provides a glimpse into how we're changing lives, everyday, and making real progress towards the end of AIDS. Your sustained generosity and support made all of this possible.

Warmly,

Kelsey Louie CEO

Kelsey

Jon Mallow Chair – GMHC Board of Directors

JastMilles

The GMHC Difference

Why Housing is Healthcare

The conditions where people live, learn, work, and play deeply affect health and well-being. For those living with HIV/AIDS, stable housing can make the difference in whether they can access medical care, adhere to treatment, and become virally suppressed.

Housing is a basic human need. Many people living with HIV/AIDS arrive at GMHC's doors after being homeless for extended periods. Some may not have ever had their own home. Homelessness prevents people from accessing HIV care and treatment since other needs may take priority over healthcare. Homelessness also makes it more difficult to adhere to HIV medications, which can lead to poor health outcomes and increase the risk of transmitting the virus to others.

One of GMHC's core services is supportive housing. Two programs provide clients living with HIV/AIDS with emergency temporary housing or permanent housing in the

form of rental assistance or housing placement assistance. Depending on their needs, these programs are accessible to clients from their first day at the agency.

"We know that we have to get our homeless clients into stable housing as soon as possible," said Kishani Moreno, GMHC chief operating officer who oversees the housing programs. "This is a critical part of their path toward good health and wellbeing." 100%
Of Clients Who Gained
Permanent Housing
Remained Stably Housed 6
Months Later

Moreno said clients who are stably housed show rapid improvement

over a very short period of time. "Once they're in an apartment, we see a lot of positive changes for people," said Moreno. "They're already a step ahead."

GMHC staff play a key role in ensuring our clients stay healthy, including scheduling medical appointments, providing clients with reminders, and physically escorting clients to their appointments. With this support, Kishani said clients are more likely to take their medications and become virally suppressed.

In 2018 and 2019, GMHC received awards from the New York City Department of Health and Mental Hygiene for achieving a 90+ percent viral suppression rate for clients in the agency's permanent housing program.

"We know that we have to get our homeless clients into stable housing as soon as possible."

-Kishani Moreno, GMHC Chief Operating Officer

José's Experience with the Supportive Housing Program

GMHC housing staff know to "hit the ground running" with homeless clients living with HIV and AIDS as soon as they walk through the agency's doors and ensure that they are connected to stable housing. Recently, José* was referred to GMHC by the pastor of a church. He arrived in the United States homeless after being kidnapped and raped in his country of origin and sold for money. GMHC staff were able to secure supportive housing for José on his first day at the agency. They accompanied him to his new home and assured that he had adequate clothing, dishes, and other essential items. They showed him how to open the apartment door and lock it when he went into his home — basic things that he did not know how to do. They also made the commitment to return two days later to check on how he was doing.

Since that day, José has remained stably housed and been able to move forward with his life. In addition to housing, GMHC provided him with mental health counseling to address trauma and information about living with HIV.

The road to stable housing also includes skills building for clients. GMHC leads workshops on how to communicate with landlords and the responsibilities of tenants. Other topics focus on house cleaning, shopping for healthy food, budgeting and entitlement management, personal hygiene, and stress reduction.

Clients attend monthly support groups where they can get together, hear other clients' stories, and exchange resources. Through these groups, clients build a support network, learn how to address problems, and figure out what they need to stay on track.

"Housing can be a very lonely experience for clients who have learned to depend on the communities created in shelters," said Moreno. "They need a support network and the platform to build relationships as well as learn important skills. These support groups provide that platform for clients."

Many clients who are provided supportive housing find it a lifechanging experience. Many remain permanently housed or are able to secure apartments on their own without additional support from GMHC staff.

Supportive housing is in high demand by our clients. The programs are at full capacity and there is currently a wait list. While GMHC continues to look for ways to increase our housing capacity, our efforts will focus on ensuring clients like José stay on track physically and emotionally.

Reflecting on his experience with GMHC, José said, "I am so thankful to all the departments within GMHC as I was able to obtain all kinds of help. Currently, I am doing very well health-wise, and I feel really good to be a part of GMHC."

*José's name is a pseudonym to protect his identity.

The GMHC Difference

Linkage to care is a critical part of the strategy to end the HIV/AIDS epidemic in New York City

GMHC's Testing Center plays a critical role on the HIV care continuum in ensuring newly diagnosed people are immediately linked to health care and have the comprehensive support needed to maintain their health and well-being.

In 2019, 91 percent of GMHC clients who tested positive were linked to care within 30 days, which represents a significant testament to the effectiveness of the GMHC model.

Newly diagnosed people who are linked to care are more likely to achieve viral suppression, a key outcome to protect health and prevent onward transmission of the virus. Since 2008, the number of new infections in New York City have dropped by more than 50 percent due in part to a focus on linking newly diagnosed people to care and treatment.

In 2019, the Testing Center staff conducted 3,038 HIV tests. Forty-seven of those tests yielded a positive result and GMHC successfully linked 44 people out of this group to HIV care.

GMHC's high linkage to care rate owes in part to the compassionate and welcoming approach of the Testing Center. *New York Magazine* once called GMHC the "Best Place for an HIV test" in New York City.

91%

Of Clients Who Tested Positive Were Linked to Care

"We have a non-judgmental, nonshaming approach," said Omi Singh,

MPH, director of the Testing Center. "We don't ask questions just to pry and poke. Rather, we ask questions about people's lives to help them."

When a person comes into the Testing Center, a testing counselor talks with them about their HIV risks including their sexual practices and substance use. They also ask about how they might be protecting themselves from infection and provide information about condoms and pre-exposure prophylaxis (PreP).

"We don't just draw people's blood and run the HIV test," said Singh. "We want to help people whether they test positive or negative move forward with their lives."

Counselors are trained to address the range of emotional reactions from shock to denial that can accompany an HIV diagnosis. "If a person tests positive, this can be quite a shock for some," said Singh. "There are people still affected by HIV-related stigma."

For those who test positive, counselors explain what an HIV diagnosis means and the importance of getting into care to protect their health and prevent transmission to others. Because the period immediately following a diagnosis is critical, counselors will try to make appointments for medical care while a newly diagnosed person is still in the Testing Center. In some cases, staff may escort newly diagnosed people at high risk of being lost to follow-up to nearby healthcare clinics where GMHC has partnerships.

For some people, housing and food insecurity may present barriers to getting people linked to care. Healthcare often takes a back seat when people don't have enough food to eat or are homeless. "Our comprehensive services are designed to address these needs so people who are linked to care remain enrolled," said Singh.

While most people who come to the Testing Center don't know their status, some people show up knowing they are HIV positive and seek out the agency's help in linking them to care. Singh recalled the experience of a young man who recently came to the Testing Center who knew he was already HIV-positive. He was new to New York City, but did not have access to HIV medicines, medical care, or insurance. A Testing Center counselor linked him to care and provided him information about other GMHC's services that were available to him. Singh recalled his response. "A few days ago, I did not have medicine, a doctor, or health insurance, and now I have all three with thanks to you."

While the Testing Center staff primarily operate out of GMHC's headquarters, they also bring testing services to the community through a mobile testing unit and conduct onsite testing at colleges and universities, health fairs, faith communities, bars, and events throughout the year.

"Many people are unaware that they are infected with HIV," said Singh. "We need to continue making taking testing as accessible as possible, especially in communities where the epidemic concentrates today."

2019

FINANCIAL SUMMARY

AS OF DECEMBER 31, 2019

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

ASSETS

Cash and Cash Equivalent	\$	645,204	
Government Grants Receivable		6,353,416	
Medicaid Receivables		165,597	
Contributions Receivable, Net		602,204	
Other Receivables		1,275,109	
Prepaid Expenses and Other Assets		403,900	
Property and Equipment		4,618,484	
Restricted Cash		250,061	
Security Deposits		4,089,748	
TOTAL ASSETS	\$	18,403,723	
LIABILITIES AND NET ASSETS			
Accounts Payable and Accrued Expenses	\$	3,653,347	
Deferred Rent and Rent Incentives		3,664,765	
Government Contract Advances		1,089,398	
Note payable		272,868	
Capital lease		732,546	
		4 000 000	
Line of credit		4,000,000	
	\$	13,412,924	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE		13,412,924	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions	\$	7,090,561	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events		7,090,561 1,267,937	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts		7,090,561 1,267,937 16,184,707	
Line of credit TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue		7,090,561 1,267,937 16,184,707 850,535	
Line of credit TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue		7,090,561 1,267,937 16,184,707 850,535 241,965	
Line of credit TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue		7,090,561 1,267,937 16,184,707 850,535	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue Contributed Services and In-Kind Support		7,090,561 1,267,937 16,184,707 850,535 241,965 328,680	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue Contributed Services and In-Kind Support Other Revenue	\$	7,090,561 1,267,937 16,184,707 850,535 241,965 328,680 266,080	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue Contributed Services and In-Kind Support Other Revenue TOTAL REVENUE	\$	7,090,561 1,267,937 16,184,707 850,535 241,965 328,680 266,080	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue Contributed Services and In-Kind Support Other Revenue TOTAL REVENUE EXPENSES	\$	7,090,561 1,267,937 16,184,707 850,535 241,965 328,680 266,080 26,998,236	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue Contributed Services and In-Kind Support Other Revenue TOTAL REVENUE EXPENSES Program Services	\$	7,090,561 1,267,937 16,184,707 850,535 241,965 328,680 266,080 26,998,236	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue Contributed Services and In-Kind Support Other Revenue TOTAL REVENUE EXPENSES Program Services Management and General	\$	7,090,561 1,267,937 16,184,707 850,535 241,965 328,680 266,080 26,998,236	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue Contributed Services and In-Kind Support Other Revenue TOTAL REVENUE EXPENSES Program Services Management and General Fundraising	\$	7,090,561 1,267,937 16,184,707 850,535 241,965 328,680 266,080 26,998,236 20,377,729 7,812,076 1,084,505	
TOTAL LIABILITIES AND NET ASSETS SUPPORT AND REVENUE Contributions Special Events Government Contracts Medicaid Revenue Program Revenue Contributed Services and In-Kind Support Other Revenue TOTAL REVENUE EXPENSES Program Services Management and General Fundraising Total Expenses	\$ \$	7,090,561 1,267,937 16,184,707 850,535 241,965 328,680 266,080 26,998,236 20,377,729 7,812,076 1,084,505 29,274,310	

The consolidated statement of financial position of Gay Men's Health Crisis, Inc. and affiliates and related consolidated statements of activities and changes in net assets, and of cash flows were audited by Grant Thornton LLP. The condensed consolidated financial statements represented here have been derived from the consolidated audited financial statements. Copies of the audit reports and the complete consolidated financial statements are available upon request to Michael Hester, Vice President of Finance, at GMHC, 307 West 38th Street, New York, NY 10018-9502.

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GMHC CEO Kelsey Louie speaks to participants at AIDS Walk New York 2019 in Central Park.

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John Quinn Seth Radwell Yolanda Ragland Steven Rank Maxine Rapoport Richard Read **Gregory Reed** Refinitiv

John Renninger Jeremy Robbins Julia Rocco

Rockefeller Archive Center

Roger Rose

S&P Global Foundation

Lynn Sable Dr. Jill Salberg Sarah Sanderlin Frank Schaefer Gretchen Schnabel

Schoenhut Family Foundation

Jason Schreiber

David and Stephanie Schwartz

Paul Sears Michael Shattner Jason Shaw Rebecca Shea Judith Siegel Dan Silver Michael Silver Leslie Simitch Richard Sinnott Susan Slaff Samantha Slager



U.S. Senator Kirsten Gillibrand spoke at AIDS Walk New York 2019.

Dennis H. Smith Rollin Smith Joseph Sobleskie Charles Sperling **Ernest Spieler** Allan Starr

Grace Church School Esther Sternberg **Andrew Stewart** Abigail Stokes Krishna Stone

Samuel Stone Household

Court Stroud Susanna Suh Anthony Sweeney Max Szadek Shannan Tarrer Virginia Teller Gabrielle Tenzer Karl Thies Jr. Eric Thirer Matthew Thomas Thomas Thompson

Henry Tisch Karen Tobia Elyse Topalian **Christopher Tower** Joseph Trohman Trust

Scott Turner **UBS AG** Lucia Vail

Minerva Velazquez-Munoz Thomas von Foerster

John Walsh Barton Warner Madeline Weeks Harold Weidman Joseph Weinike Frederick Wertheim Danny Whitman Louise Wilson Jeff Wolk Marc Wright John Wurmser Ross Yasgur

Daniel Young

Craig Zimmerman