A YEAR LIKE NO OTHER:
LETTER FROM THE CEO AND BOARD CHAIR

Dear GMHC Community:

For GMHC, 2020 was a year like no other. Together, we navigated the challenges with resilience and resourcefulness to meet our clients’ increased needs, despite extraordinary circumstances.

We quickly figured out how to work remotely when New York City shut down due to the COVID-19 pandemic. GMHC transitioned most staff to working from home within a week of the March 17 shutdown, while learning how to deliver services to our core clients in new ways.

As a result, we entered 2021 with an optimized, hybrid model of remote and on-site operations that has allowed us to deliver better services to more people in more places as the pandemic persisted. Never has GMHC’s philosophy of “meeting clients where they are” been so true. Our dedicated staff quickly adapted to the new environment, making the extra effort needed to maintain connections with our clients even as they too adjusted to the COVID-19 pandemic’s realities. We pivoted most of our services to remote delivery, while launching new initiatives to protect the health and safety of our clients. That was a top priority since many are living with HIV and at higher risk for complications from COVID-19.

GMHC initiated weekly wellness calls to our core clients in March 2020 to ensure their needs were met, with staff making 1,000 monthly wellness calls on average over the year. That continues today for clients with the highest needs. We had to suspend daily hot meals in our dining room at 307 West 38th Street, so we created “GMHC Grab n’ Go” to safely distribute nutritious, shelf-stable food to our clients at Wednesday meal pickups in our lobby. In response to increased hunger from the pandemic, we also opened our Meals Program to anyone in need, regardless of HIV status.

We distributed, on average, over 700 meals every week to our clients and the community. In the last quarter of 2020, we also partnered with DoorDash through its Project DASH program to deliver free meal bags to GMHC clients at home. The need for our mental health and substance counseling services spiked from the stressors of COVID-19. Our staff and clients adapted to online Zoom calls for individual counseling sessions and support groups. GMHC staff delivered more than 3,500 counseling sessions from March 2020 through the end of the year, a 46% jump over that same period in 2019.

We adapted other crucial supportive services, such as legal aid, to remote delivery, and our Testing Center started supplying free HIV self-test kits via mail.

Our clients pitched in too. We used a portion of a $110,000 grant from New York City to employ clients as census workers, ensuring that people affected by HIV and AIDS were included in the national census, which determines crucial funding and services for marginalized communities. Adapting to COVID-19, they conducted outreach by phone instead of door-to-door. In September 2020, GMHC held its first-ever Webinar on HIV & Aging for 2,500 registrants from across the country, which featured as our keynote speaker Dr. Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases (NIAID).

We also held our annual Fall Gala remotely, honoring Dr. Fauci, U.S. House Speaker Nancy Pelosi, and iconic actor Billy Porter for their extraordinary advocacy for people living with and affected by HIV and AIDS. “Hamilton” star Javier Muñoz hosted the Oct. 21 virtual event.

Kelsey Louie
FORMER CEO

Jon Mallow
Chair – GMHC Board of Directors
GMHC Broadened and Innovated Care in Transition to Remote

GMHC was born out of a pandemic, and in 2020 the agency’s staff rose to the challenges of yet another global pandemic, COVID-19. We rapidly innovated and adapted operations to maintain essential services for clients who needed support more than ever.

“We were operationalized within a week,” said GMHC’s Chief Operating Officer Kishani Moreno. “Clients were getting services remotely from the beginning.”

When New York City shut down on March 17, 2020, GMHC was quickly able to transition its staff and clients to remote operations, because the tech infrastructure was already in place. The agency had already retooled its network system in 2018, when it relocated to 307 W. 38th Street, envisioning the transition of its 140 staff to a hybrid work model, Moreno explained.

“COVID-19 forced us to operate as optimally and efficiently as possible,” she said, adding that many of the operational innovations in 2020 to expand services and allow GMHC to better serve clients have continued.

For instance, GMHC successfully transitioned its mental health counseling services from in-person to online, providing more than 3,500 online counseling sessions from March 2020 through year-end to clients grappling with increased isolation, anxiety, and depression. This was a 46% increase over that of the same period in 2019.

Online psychosocial services, including individual counseling and support groups, have continued, Moreno said. So have regular client wellness calls, the Grab ‘n’ Go meals program, and a hybrid home and office work model for staff.

Wellness Calls

Within two weeks of the COVID-19 pandemic’s onset, GMHC launched weekly wellness calls to clients “to check in, see what their needs were, and if they were okay,” Moreno said. “That is still ongoing today.”

Staff initially made 1,200 wellness calls per week, averaging 1,000 weekly calls over 2020, said Chief Human Resources and Strategy Officer Rhonda Harris. Clients determined the frequency, she explained: some wanted a weekly call, while others needed only a biweekly or monthly check-in.

“Clients are the drivers. Folks still need that support, so we will keep doing it,” Harris said. “Our clients look forward to that call,” she added, because they’ve built rapport with their regular staff caller.

Management identified staff with availability to make the calls, including some administrative staff who hadn’t previously engaged regularly with clients. Each caller was assigned a caseload of about 20 clients receiving social services and meals, and they use a spreadsheet to track each client’s ongoing progress and needs.

GMHC also made sure to support staff who were assisting clients with new needs. Staff wellness callers took part in a weekly live chat with a clinician who can help with issues such as linking a client with suicidal ideation to a mental health counselor.

In another ongoing program, clinicians and social workers from New York University volunteered to offer staff both clinical supervision for their client caseload and individual counseling to decompress from the demands of living through the pandemic themselves, Harris said.
Meals Program

Feeding clients living with HIV nutritious meals to keep them healthy is core to GMHC’s services. In fact, 95% of our Meals Program clients have achieved Undetectable-Untransmittable viral suppression.

“Meals is one of our foundational programs, with daily service, so adapting operations to keep clients fed was critical,” Harris said.

Ordinarily, GMHC serves lunch Mondays through Thursdays and dinner on Fridays in its dining room, but the citywide shutdown in March 2020 meant finding ways to adapt. Even after the restrictions were lifted, it was not safe to host meals in the dining room, as clients living with HIV could be immunocompromised.

The Meals Program “morphed with the demands of the public health emergency and the needs of our clients,” Harris said. “The goal was to feed folks in the safest way possible. It was a dance of strategy—balancing the health and safety of our clients and staff with keeping people fed.”

GMHC established a central email, mealshelp@gmhc.org, so any staff member can request food for hungry clients—a permanent innovation.

The agency initially enlisted volunteers to hand-deliver bags of shelf-stable foods. When New York City restrictions eased in June 2020, GMHC created the Grab ‘n’ Go program, so clients can pick up a week’s worth of nutritious produce and shelf-stable food every Wednesday in the building lobby.

When infections spiked anew that November, the agency reverted to deliveries for safety. GMHC partnered with DoorDash, which deployed about 50 volunteer drivers to deliver shelf-stable food, including special Thanksgiving meal bags and gift cards for a protein of choice.

“We wanted to reduce movement,” Harris explained, because most Meals Program clients live in Brooklyn and the Bronx, a 90-minute subway ride from the agency’s Manhattan office.

GMHC also supplied clients with gift cards to use at local markets, asking them to scan their grocery receipts so a staff nutritionist could coach on eating better and stretching food dollars.

When safe, GMHC returned to Grab ‘n’ Go food distribution, which it expanded to anyone in need regardless of their HIV status, another permanent innovation. While many of the agency’s meals funding contracts were for HIV-positive clients, Harris said, it was able to redeploy funding for kitchen staff to food procurement.

It was critical to figure out how to feed people regardless of their HIV status, Harris said, because many GMHC clients who weren’t HIV positive became food insecure—for instance, Workforce Program clients who lost jobs because of the pandemic.

Staying Connected

The remote COVID-19 environment presented challenges for staying connected with clients. GMHC has deployed Zoom, Facebook, and other social media to expand its client reach, said Managing Director for Prevention Programs Armstrong Tingwane.

GMHC transitioned in-person support groups and workshops online via Zoom—and started new groups, such as “Thriving at 50 and Beyond” for people living with HIV. Meanwhile, the agency significantly stepped up its social media outreach. Some client communities already had Facebook pages, Tingwane said, and staff created new ones, such as “Latex” for the Ballroom community. The program-specific Facebook pages allowed staff to narrow focus communications for different communities.

While most programs and services pivoted to remote for client and staff safety, GMHC never closed. For example, the agency’s Testing Center adapted by supplying at-home HIV test kits by mail, but it has continued providing HIV and STI testing and counseling by appointment on Mondays and Tuesdays. Clients also can see staff by appointment Wednesdays through Fridays for in-person help with benefits, legal services, jobs, housing, and other needs.
Boger Hub Offers Lifeline to People Aging With HIV

One of GMHC’s 2020 highlights was a transformational gift from brothers David and Joshua Boger to significantly expand our services for long-term HIV survivors and other older adults living with HIV and AIDS.

GMHC launched the Terry Brenneis Hub for Long-Term Survivors in 2018, with an initial investment from David Boger to honor his late partner. In 2020, he and his brother jointly contributed an additional $500,000 over five years to this vital program, renamed the Terry Brenneis and David Boger Hub for Long-Term Survivors.

“My brother and I are thrilled to be able to provide GMHC with this new support to meet the growing needs of older adults and long-term survivors,” said David Boger, a retired New York City psychiatrist.

“As a long-term survivor myself, I understand firsthand the challenges facing my community,” he added. “The Hub will provide the intensive support that long-term survivors and older adults need for building resilience and strengthening well-being.”

People over 50 are the largest and fastest growing demographic of people living with HIV, and their need for psychosocial services is growing. In New York City, older adults are expected to make up 60% of those living with HIV by 2025 and they already make up about 64% of GMHC’s clients. Of those, over one-third are long-term survivors.

People aging with HIV face unique challenges to their mental and physical health. They experience higher rates of comorbidities and an earlier onset of aging-related diseases, including osteoporosis, diabetes and neuropathy. What’s more, many long-term survivors experience AIDS Survivor Syndrome, due to the lingering trauma of living through significant losses during the early years of the AIDS epidemic.

Older adults living with HIV also tend to be more socially isolated, and experience higher rates of depression, loneliness, and other mental health issues. A 2020 survey conducted by GMHC and the University of California found that 75% of this population in New York City lives alone.

Because social connection is critical to physical and mental health, the Hub offers a constellation of programs to address the psychosocial needs of both older adults and long-term survivors living with HIV, serving as a lifeline for many.

The Hub provides support groups, individual counseling, and workshops, such as the “I’m Still Here” webinar series on mitigating the challenges of AIDS Survivor Syndrome. The Buddy Program pairs clients with volunteers for social support and help navigating services to supply one-to-one practical and emotional support.

“The Hub will provide the intensive support that long-term survivors and older adults need for building resilience and strengthening well-being.”

—David Boger
The Bogers’ grant also supports GMHC’s National Resource Center for HIV and Aging, which disseminates research findings on HIV and aging topics through a national website at agingHIV.org.

“The Hub’s services are needed now more than ever. Many of us have been isolated due to COVID-19,” David Boger said, pointing to the Hub’s focus on mental health issues facing long-term survivors, which have been exacerbated by the COVID-19 pandemic.

“I’m hopeful that this new funding will attract additional investments and allow GMHC to bring its services to more long-term survivors and older adults in New York City and around the country,” he added.

GMHC By the Numbers

**MEALS**
700 per week on average

**WELLNESS CALLS**
average of 1,000 per month in 2020

**COUNSELING SESSIONS**
3,500 from March to December 2020
# Financial Summary

## Consolidated Statement of Financial Position

### Assets

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**Total Assets** $19,561,522

### Liabilities and Net Assets

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**Total Liabilities and Net Assets** $19,561,522

### Support and Revenue

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**Total Revenue** $21,540,347

### Expenses

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**Total Expenses** $23,922,223

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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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Kirk Stirling  
Samuel Stone  
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The Susan S. Shiva Foundation  
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Karen Tobia  
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The United Way of New York City  
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Cindy Workman  
Marc Zemsky  
Christian Zimmermann and Richard Kielar

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Thomas Alcamo  
David Alhadeff  
Glen Anderson  
Elaine Anderson  
Anonymous  
John Anselmi  
Vincent Argiro  
Katherine and Thomas Ash  
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Robert Barnowske  
Pamela Barr  
Jack Battaglia  
Bernard Bazin  
Gerald Becker  
Harold Becker  
James Bennett  
Susanna Bergtold  

Alvin Berr  
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Giovanna Calvino  
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Jason Carney  
John Casalinuovo  
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Chris Coleman and Matthew Turner  
Con Edison  
Martha Cotter  
Michael Cox  
Daniel Crewe  
Michael Dansky  
Blake Devillier  
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Anthony Distini  
Ron Dodd  
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Stephen Fleming  
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J anet Foster  
Jeffrey French  
Gregory Frey  
Peter W. Galbraith  
Christopher Gassett  
Arlene Goldberg  
Lance Gotko  
Grace Church School  
Vito Grasso  
Marey Grif f th  
Emily Grishman  
Judy Gross  
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Raymond Heff er  
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Ivan Hurwitz  
Zeljko Ivanek  
Carmen Jenovesi  
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Marko Lysko  
Ismail Ma  
Mitchell Makowski  
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J esse Manucherian  
Douglas Marron  
Howard Marton  
Barbara Massey  
Laura McCauli e  
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As the world’s first HIV/AIDS service organization, GMHC is working to end the AIDS epidemic and uplift the lives of all affected.

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(212) 367-1000
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