

# \$500 million to almost 2,000 organizations that are helping to address unmet needs and lessen the impact of diseases such as HIV and HCV.

Through our programs, we have helped more than 2 million people get tested for HIV since 2010 and more than 275,000 get tested for HCV since 2014. In 2015, Funders Concerned About AIDS named Gilead the largest corporate funder of HIV-focused organizations in the world.



In 2015, our Pre-Exposure Prophylaxis (PrEP) Grants Program grew by 379 percent, giving more than \$11 million to 101 U.S.- based nonprofit organizations — up from \$2.3 million given to 19 nonprofits in 2014.

### Gilead's Four Pillars of Giving



**Reducing Disparities** 



**Providing Access** 



**Advancing Medical Education** 



**Supporting Local Communities** 

### NATIONAL BLACK JUSTICE COALITION: RAISING PREP AWARENESS IN THE BLACK LGBT COMMUNITY

The National Black Justice Coalition (NBJC) is a civil rights organization dedicated to the empowerment of Black Lesbian, Gay, Bisexual and Transgender (LGBT) people and leads the effort to address and improve their health and wellness, including advocating for culturally competent healthcare and health services. Despite progress in the prevention and treatment of HIV/AIDS, there continues to be a lack of access to education about HIV prevention and treatment that disproportionately affects LGBT people of color.

In 2015, Venton C. Jones, program officer for LGBT Health and Wellness Initiatives at NBJC, helped launch an innovative program — the "PrEPing Our Future" Historically Black College and University (HBCU) Tour — that aims to educate students, administrators and healthcare providers at HBCUs about using PrEP as part of a comprehensive HIV prevention strategy on their campuses. "The challenge in addressing the needs of the Black LGBT community on HBCU campuses is the ongoing need to create safe and inclusive spaces to facilitate an environment where health messaging can reach those who are in most need of this information," says Venton.

With support from Gilead, the tour is traveling to HBCUs in Georgia, Florida, Maryland, North Carolina, Texas and Washington, D.C., reaching approximately 3,000 students, stakeholders, administrators and healthcare providers. Information about PrEP and how to access it will be a key portion of programming on NBJC visits to these campuses.

"It's been amazing to see the level of openness and interest shown in our program by our HBCU partners — from students, faculty and administrators. There is a huge opportunity to push policies that advance the success of LGBT people at HBCUs. NBJC is stepping up to the plate to provide direct resources and tools to empower these campuses to provide their students with a 21st century education, inclusive of respecting and affirming LBGT people," says Venton.



### **Reducing Disparities**

Gilead funds programs that draw on proven best practices and are sustainable beyond initial funding, ensuring our grantees continue to help reduce the disparities faced by underserved communities long into the future. We bring together organizations across the public and private sectors to create integrated solutions that help patients remove barriers to care and receive treatment regardless of age, disability, ethnicity or race, geographical location, gender and gender identity or sexual orientation.

### **PrEP**

Prevention is an important strategy for reducing HIV infection rates, and Gilead has created a PrEP Grants Program to help reduce the number of new infections every year. Through the program, Gilead supports community organizations to help educate their members about PrEP's role as part of comprehensive HIV prevention. In 2015, our PrEP Grants Program grew by 379 percent, giving more than \$11 million to 101 U.S.-based nonprofit organizations — up from \$2.3 million given to 19 nonprofits in 2014.

### **HIV AND AGING**

In 2015, Gilead released <u>a new funding opportunity announcement</u> (<u>FOA</u>) for nonprofit organizations exploring the impact of HIV disease and treatment on an aging population. Our goal is to support grantees that focus on finding novel ways to determine or discover policies and interventions to support the health of patients as they grow older.

### REMOVING BARRIERS TO HCV TREATMENT AMONG AT-RISK POPULATIONS

To change the way healthcare organizations think about working with at-risk populations living with HCV, Gilead launched two key initiatives in 2015:

• The Hepatitis C Fellowship Program. In June, Gilead launched the Hepatitis C Fellowship Program, which funds initiatives

that facilitate constituency engagement and education in HCV with a focus on supporting underserved populations. Three organizations were awarded grants of up to \$150,000 each, which are being used to achieve the following:

- Address policy barriers that impede access to HCV testing and cures for underserved individuals,
- Support HCV consumer education and advocacy through legal policy and research,
- Identify, develop and disseminate economic and quality-oflife data to inform health policy from a more holistic, patientcentered perspective.
- Hepatitis C FOA. In December, Gilead introduced the Hepatitis C FOA, inviting nonprofit organizations to seek funding for programs that address challenges associated with diagnosing individuals with HCV and overcoming personal and systemic barriers to accessing care. We are especially interested in funding programs designed to find long-term, sustainable and holistic solutions for those in the intravenous drug user community who are co-infected with HIV/HCV.

### **PEPFAR**

Through the DREAMS (Determined, Resilient, Empowered, AIDS-free, Mentored and Safe women) initiative, Gilead has partnered with PEPFAR, the Bill & Melinda Gates Foundation and other corporate donors to reduce HIV infections among adolescent girls and young women in sub-Saharan African countries. In December 2015, PEPFAR announced a new program to continue carrying out the goals of the DREAMS initiative. Gilead contributed to the program by enhancing PrEP programs for HIV-negative adolescent girls and young women at risk in sub-Saharan Africa. Gilead funds also support costs related to Truvada® for PrEP procurement, transportation and dissemination.

## No greater action is needed right now to end AIDS than empowering adolescent girls and young women. ,,

Ambassador Deborah Birx, U.S. Global AIDS Coordinator



Gilead works to expand access to lifesaving medicines in 130 countries worldwide

### **Providing Access**

Gilead is working to expand access to treatment wherever possible by helping patients overcome barriers to get the medicines and care they need.

### **DRUG DONATIONS**

In 2015, Gilead began supporting a comprehensive HCV elimination program that utilizes drug donations in the country of Georgia. When the country's Ministry of Health (MoH) developed its HCV prevention and control plan, it partnered with the Centers for Disease Control and Prevention (CDC) to help manage and evaluate the program. When presented with the plan, Gilead saw a critical opportunity to expand access to our medicines in a way that would have a transformative impact. Gilead partnered with the CDC and Georgia's MoH to support a treatment plan aimed to help eliminate HCV in the country within five years.

Gilead's Medical Affairs team advanced the country's existing efforts by helping train and educate healthcare providers and physicians on treatment delivery. With the support of Georgia's MoH and the CDC, Gilead also agreed to donate an initial 5,000 treatment supply of our HCV medicines in 2015, followed by 20,000 treatments per year in subsequent years.

### **PATIENT ASSISTANCE**

The U.S. healthcare landscape is often complex to navigate. <u>Gilead's U.S. Patient Support & Assistance Programs</u> help patients and their families understand their access options. Throughout the year, nearly 110,000 patients were assisted with understanding insurance coverage, financial assistance options and eligibility for free goods.

Key achievements from 2015 include:

- 41,920 U.S. patients received their treatment at no cost through our patient assistance programs,
- Patients eligible to participate in our copay coupon program received assistance with out-of-pocket cost-share obligations, including deductibles, coinsurance and/or copays.

### PHARMACCESS: INNOVATING HEALTHCARE IN SUB-SAHARAN AFRICA

Kees van Lede, mobile health director at PharmAccess, has lived and worked in Africa for more than four years and has seen firsthand the challenges Nairobi faces.

"Nearly two million people can't receive regular treatment in a city where the HIV, HCV and HBV epidemics present a very real threat," says Kees. "The current system hasn't worked for them, so we need to find new solutions."

In 2013, PharmAccess came up with an idea that could revolutionize healthcare access across the region, starting in Nairobi: the mobile health wallet. The wallet allows users to make healthcare payments directly from their cell phone and allows healthcare providers to capture the medical data related to every patient visit. This grassroots approach creates much-needed financial transparency, letting patients, PharmAccess and public health officials track healthcare payments and the healthcare needs of patients.

PharmAccess received a Gilead grant to help launch the mobile health wallet in Nairobi, with a goal of 50,000 people accessing the wallet on their phone by the end of 2017. The wallet will allow patients to pay for basic primary care at a provider of their choice. Soon after, wallet payments will also be accepted for secondary care for critical diseases including HIV, malaria, tuberculosis, HCV and HBV, as well as comprehensive healthcare for mothers and children.

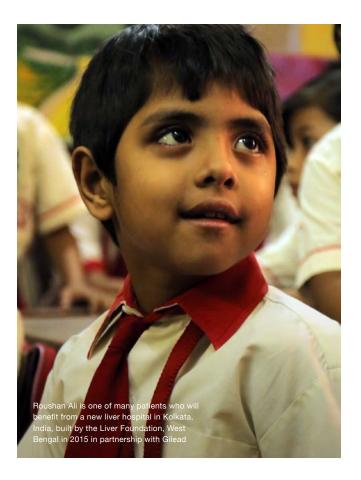
"Gilead has been a great supporter — they believed in our vision from the get-go and impressed us with how quickly they moved to support the mobile health wallet program," says Onno Schellekens, CEO of PharmAccess. "With their help, I believe this project has the potential to revolutionize healthcare, not just in Kenya and further throughout sub-Saharan Africa, where people face significant barriers in access to quality healthcare."



Gregg Alton, Executive Vice President, Commercial and Access Operations ALA, Corporate and Medical Affairs, Gilead, using PharmAccess's mobile health wallet technology



Gilead was the first biopharmaceutical company to join the Medicines Patent Pool in 2011.



### **TIERED PRICING**

Gilead's Access Operations & Emerging Markets (AOEM) team has established a sustainable business model that enables access to medicines for patients who are most in need across 130 countries. In addition to generic licensing partnerships, Gilead provides access to our branded medicines at significantly discounted prices in low- and middle-income countries.

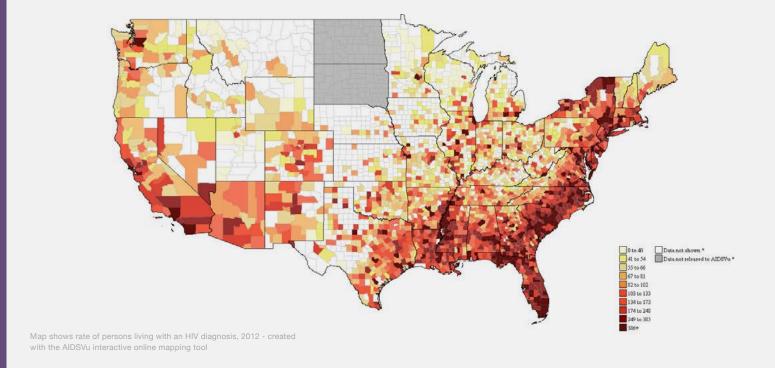
The AOEM team's work has helped increase the number of people in developing countries who receive Gilead-based antiretroviral therapies from fewer than 30,000 people in 2006 to nearly nine million people by the end of 2015. More than 50 percent of people currently receiving antiretroviral therapy in developing countries are being treated with Gilead-based medicines.

### **ACCESS PARTNERSHIPS**

Through partnerships with generic drug manufacturers and the Medicines Patent Pool, Gilead has played a central role in greatly expanding access to HIV and hepatitis treatment in resource-limited countries. Today, 99 percent of our HIV medicines used in low- and middle-income countries are produced and sold by our generic licensing partners.

In 2015, Gilead continued to build relationships with governments and nonprofit organizations in new markets where healthcare needs are greatest:

- Gilead expanded its licensing agreements, providing generic manufacturers with the rights to develop tenofovir alafenamide (TAF) for HIV for distribution in 112 resource-limited countries. They also have the rights to distribute TAF for HBV as a single agent, upon U.S. regulatory approval.
- Gilead managed its HCV generics agreements, which include
  11 international partners and three domestic partners, to provide medicines to 101 resource-limited countries.
- In 2015 Gilead partnered with the Liver Foundation, West Bengal to build the Indian Institute of Liver and Digestive Sciences in Kolkata, the first hospital of its kind in the region. Previously, patients had to travel almost 1,000 miles for treatment.
- In Brazil, we are working closely with the Ministry of Health to treat 60,000 HCV patients over the next two years.
- In Zambia, we are collaborating with the Ministry of Health on Option B+, an approach to help prevent expectant mothers living with HIV from transmitting the virus to their unborn child.
- Our new offices in Brazil, Mexico, Argentina, South Africa and India allow us to work more closely with local partners in order to make our medicines accessible to millions more people who need them most.



### **AIDSVU**

Since 2010, Gilead has partnered with Emory University's Rollins School of Public Health to launch AIDSVu, an interactive online mapping tool that highlights the impact of HIV on geographic areas at the state, county, and in some cases ZIP code and census tract levels. AIDSVu also provides critical resources such as HIV testing and treatment center locations as well as NIH-funded HIV Prevention and Vaccine Trials Sites. AIDSVu's big data visualizations are used by government officials, students, community health workers, academics, and researchers to target areas most impacted by HIV and identify resource gaps, expand HIV research, and target HIV prevention resources where they are needed most.

### **FOCUS**

In 2010, Gilead launched the Frontlines of Communities in the United States (FOCUS) program to address systemic and institutional barriers - first to routine HIV screening and access to care and, since 2014, to HCV screening and access to care. The goal of FOCUS is to develop better healthcare practices to help achieve government guidelines and recommendations. FOCUS partners with healthcare organizations, government agencies and community-based organizations across 18 of the most vulnerable U.S. cities.

### **FOCUS KEY STATS**

HIV tests performed

HCV tests performed

Totals Through 2015

2.2 million 275.000

Through 2015, the FOCUS program continued to make progress toward potentially ending HIV and HCV in the U.S. FOCUS program partners have performed 2.2 million HIV tests since 2010 and 275.000 HCV tests since 2014.

The FOCUS program is designed to change the way clinical and community institutions approach HIV and HCV testing, meeting an unmet need in the care continuum.

### **Advancing Medical Education**

Education is key to achieving disease prevention and effective longterm disease management. Gilead assists community organizations by supporting disease awareness programs for patients and expanding knowledge and skills for healthcare professionals. We support continuing independent medical education programs that expand the knowledge and skills of healthcare professionals.

### **COMMUNITY AND PATIENT EDUCATION GRANTS**

Gilead seeks to advance medical education and raise awareness about disease transmission and diagnoses all over the world, especially in regions where access to medical specialists is limited. In 2015, Gilead funded organizations that advance training for healthcare professionals, including a state association in Brazil called Grupo de Amparo ao Doente de Aids (GADA). GADA has worked to raise awareness among men and women over the age of 45 about the transmission, risk and early diagnosis of HCV. In 2015, Gilead helped fund a GADA campaign to increase HCV detection rates in six cities across the countryside of Sao Paulo, Brazil. By the end of the campaign, GADA reached more than 1.5 million people and doubled detection rates among the targeted population.

### **HIV PREVENTION EDUCATION IN EUROPE**

The National AIDS Manual (NAM) has been a leading independent information provider about HIV/AIDS across Europe for nearly 30 years. NAM created the European HIV Prevention Network in 2012 to provide accurate, upto-date information about HIV prevention and treatment. When NAM saw the potential of treatment as prevention (TasP) and Truvada for PrEP to change how people think about HIV/AIDS, it looked to Gilead for support.

"We didn't know for certain what the outcome of future TasP and PrEP studies would be, but Gilead was very quick to provide support," says Caspar Thomson, executive director at NAM. "They've been an outstanding partner and supporter of NAM for nearly 15 years, especially when it comes to supporting initiatives involving the latest, most cutting-edge science."

Supported by a 2015 Gilead grant, the European HIV Prevention Network shares information in briefing sheets and a monthly newsletter on topics such as PrEP and mother-to-child transmission. The newsletter is produced in English, French, Spanish, Portuguese and Russian, and now reaches about 1,400 subscribers. The letter was published on a monthly basis throughout 2015, and the grant also enabled the publication of some additional fact sheets and briefing sheets during the year.

"We don't often get to meet the patients our work affects, but a friend of mine who has HIV told me something I'll never forget," says Caspar. "He said, 'because of what I've learned about TasP, I can finally see myself not as a vector for transmission, but as a regular person.' Being aware of the prevention options available can remove a huge burden from people with HIV — because they no longer have to fear they will spread the disease to their loved ones. That makes what we do so worth it."



A selection of newsletters from NAM's European HIV Prevention Network



In 2015, the Foundation granted more than \$12.9 million, a 29 percent increase year-over-year, to 69 organizations doing work around the world.

### THE GILEAD FOUNDATION

Established in 2005, the Gilead Foundation aims to improve the health and wellbeing of underserved communities around the world, supporting organizations that expand access to HIV and hepatitis education, outreach, prevention and health services. The Gilead Foundation operates independently from our corporate contributions function.

In 2015, the Foundation granted more than \$12.9 million, a 29 percent increase year-over-year, to 69 organizations doing work around the world. Visit the <u>Gilead Foundation webpage</u> to learn more about the programs we support.

### PROJECT OPEN HAND: PROVIDING NUTRITIOUS MEALS FOR THOSE LIVING WITH HIV AND HCV

Project Open Hand was founded in 1985, at the height of the HIV/AIDS crisis. Mark Ryle, CEO of Project Open Hand, says, "Our founder literally saw her neighbors dying and no one knew why. All she could think of to do was make sure they had enough food to eat."

Now Project Open Hand provides more than 2,500 meals each day to the critically and chronically ill, and it is the largest food provider in the country for people living with HIV.

Through a Gilead grant, Project Open Hand supports an outreach program that provides food and nutrition counseling and education to people of color and transgender individuals. Project Open Hand beneficiaries from these two populations combined have an HIV infection rate of more than 60 percent, an HCV infection rate of more than 12 percent and an HIV/HCV co-infection rate of 10 percent. A second Gilead grant goes toward an HIV and Aging Nutrition Education Program, which trains 50 employees on the special nutritional and dietary needs of people over 50 who are HIV-positive.

"Gilead has been an invaluable supporter of Project Open Hand for more than a decade. They helped us to expand what we're doing for some of the most vulnerable populations around us," says Mark. "The best part of my job is seeing our clients when they come to one of our grocery centers. There's this ease that comes across their face because they know they're safe, that they will have nutritious food that day."

### **Supporting Local Communities**

With over 8,200 employees in more than 30 countries around the world, Gilead is proud to fund initiatives that promote the wellbeing and betterment of the local neighborhoods and cities in which we live and work. One such organization in 2015 was Bay Area-based Project Open Hand. To find out more about Project Open Hand, as well as SisterLove, an Atlanta-based grantee also featuring in our 2015 Giving video, see <a href="https://www.gilead.com/csr2015">www.gilead.com/csr2015</a>.





### POTENTIALLY ELIMINATING HCV IN THE CHEROKEE NATION

In 2012, Dr. Jorge Mera came to Oklahoma's Cherokee Nation — the largest Indian tribe in the United States — to help screen for and treat HCV. When he started, he didn't realize the extent of HCV prevalence among the Cherokee Nation members: three to five times higher than the U.S. average. "On my first day, I had a backlog of more than 250 HCV patients waiting to be seen."

Dr. Mera, with the help of Dr. Douglas Drevets of the University of Oklahoma Health Sciences Center, created an ambitious plan aimed at eliminating HCV within the Cherokee Nation Health Service, which involved screening all adults between 20 and 69 years old. A research plan to eliminate HCV from the Cherokee Nation was developed with assistance from the CDC Foundation, and in 2015 they received a grant from the Gilead Foundation to start the program.

"The Gilead Foundation's support was instrumental in launching the Cherokee Nation HCV Elimination Program, the first program of its kind in the U.S. What's exciting now is that many other tribes in Oklahoma have already taken notice and are interested in screening and treating their citizens for HCV," Dr. Drevets says.

The program has increased patient screenings from 500 a month in September 2015 to more than 2,500 a month in January 2016. It has also expanded the number of healthcare providers who can manage HCV patients from seven in 2014 to 27 by the end of 2015. So far, more than 26,000 patients have been screened for HCV since October 2012.

"We're making great progress, but a lot of work remains to be done. If there's one message I'd love for our patients to hear, it's that we need every eligible Cherokee patient to get screened. The sooner that happens, the sooner we can eliminate HCV," says Dr. Mera.



Dr. Jorge Mera, Director of Infectious Diseases at the Cherokee Nation