Background. The Aaron Diamond Foundation was set up in 1955 by Aaron Diamond and his wife Irene. Mr. Diamond had, by then, begun to accumulate what would become an impressive fortune by investing in New York real estate. His wife worked as a talent scout and script editor in the motion picture industry. The Foundation was intended, from the start, to be the receiver of the bulk of Mr. Diamond's fortune. It was not until the mid-1980s, however, that the Diamonds began seriously to plot the course of their philanthropy. Together, they decided that, because the Foundation's resources were relatively modest—it ultimately disbursed about $220 million—it must maintain a tight focus if it were to have any significant impact. And the Diamonds were determined that it would. They decided that 40 percent of the Foundation's activities would be in the field of medical research; 40 percent would be for minority education, and 20 percent would go to support culture in the city of New York. The Diamonds' motivation was to give back, as much as they were able, to the city that had given them so much over the years, as well as to the world at large.

In 1984, Aaron Diamond died suddenly of a heart attack, and Mrs. Diamond was left to follow through on their philanthropic plan. She recruited the foundation's board and its executive director, Vincent McGee, and she, herself, took on its presidency. But Irene Diamond was determined that, although her voice would be the strongest within the foundation that bore her husband's name, it would not dominate. Looking back, Vincent McGee recalled that “Irene Diamond stated that one of our best board meetings was the occasion of her being outvoted 10-to-1 on three grants.” This, to her, indicated a vigorously engaged board of trustees. It was, as she herself insisted, “as it should be.”

The Aaron Diamond Foundation became operational on January 1, 1987. From the start, it was understood that the Foundation must spend out its entire endowment and close its doors by December 31, 1996. Another principle upon which the Diamonds had agreed before Mr. Diamond’s death was that the Foundation, rather than linger on to face the problems of later generations, would do all the good it was able to do in a short period of time—only ten years.

Strategy. The Diamond Foundation started out “by casting a broad net in each [of its program areas], making short-term grants.” One problem that drew Mrs. Diamond’s attention was the emergent AIDS epidemic. By 1987, scientists had made advances in their understanding of what had originally been called “gay pneumonia,” but federal funding for research of the virus was still very scarce. In the Foundation’s Final Report, Vincent McGee describes the stigma still hindering efforts to fight the disease in the late '80s:

... fear and homophobia still blocked concentrated, clear and focused efforts to meet the [AIDS] crisis nationally. The larger international dimensions were only beginning to be understood.... Most of the decision-makers felt that those dying of AIDS and closely related drug abuse were negligible elements in society—gays, racial minorities, the poor and drug addicts."

The Diamond Foundation was conscious of its limited means and recognized that it would not be able stop the epidemic alone. But its officers and trustees also saw that New York, which, along with Los Angeles, was an epicenter of new plague, was lagging far behind in its response to AIDS. Joining the effort against this little-understood, widely feared disease would allow the Foundation both to pursue its medical research program goals and to support its home city. As McGee explains, “this gradually led to a realization that there was an opportunity for a modest private foundation to jump-
start basic and applied research in the face of lagging public support and institutional hesitancy to come to grips with an expanding epidemic of historic proportion.”

In late 1987, Irene Diamond was approached by Steven Joseph, the New York City Commissioner of Health. Joseph proposed that the Diamond Foundation assemble and coordinate a group of private foundations to partner with the city in establishing a cutting-edge AIDS research laboratory in the heart of New York. Mrs. Diamond liked the idea, but she was concerned that Joseph’s plan would lead to a lot of bureaucratic hand-wringing and would proceed slowly. Mrs. Diamond, eager to assure that the plan would be carried out quickly and in accordance with her demanding specifications, responded that she would like her foundation to undertake the program by itself. Vincent McGee credits the Foundation’s limited life span and its small staff (the Diamond Foundation had only twelve full-time employees) for its ability to respond so quickly to a challenge.

Certainly, the determination of Irene Diamond was also a factor. From the start, she was very hands-on in the planning of the new facility. She was critical of the conditions in which scientists were forced to work and wanted the new research center to be different. And, to that end, it was she who selected the architectural firm that would design and build the lab.” Mrs. Diamond also had her own ideas about who should run the facility. She was the primary advocate of Dr. David Ho, a young virologist from UCLA. She later recalled, “I wanted somebody young who was really committed and had a drive to do good research.... Most of my search committee of eminent doctors and scientists did not agree with me at the time. They wanted me to take somebody who was already well known....” In the end, however, Irene’s search committee, as she labels it, came to agree with her.

The Diamond Foundation contributed $8 million over the three years of the center’s construction, while the city of New York added the remaining $3.4 million. In addition, the city provided, at no charge, the 20,000-squarefoot site on which the Aaron Diamond AIDS Research Center would be built. Conscious of its niche, the center would determine to focus “on viral molecular biology and basic immunology as the most promising path toward understanding and controlling the virus.”

With this major investment, and the years of subsequent support, the Diamond Foundation became the largest private funder of AIDS research in the country. The Research Center was definitely the Foundation’s most significant contribution, but not its only one. The Foundation also funded research fellowships for post-doctoral students studying HIV/AIDS. And it took a controversial stand for AIDS education and prevention when, in 1992, the Foundation contributed $450,000 to help the New York City Board of Education offer free condoms to public high school students.

Outcomes. The Diamond Center opened on April 16, 1991. At its opening ceremony, Mayor David Dinkins praised the facility’s creation as “an act of faith in our ability to end this epidemic through creative, hard work.” Dinkins remained an avid supporter of the Diamond Center and the Diamond Foundation. In fact, in 1994, he joined the Foundation’s board. The new research center was very soon fully staffed, and, indeed, it was not long before it began to outgrow its space. The Foundation met this challenge head on—funding an expansion of the labs in 1995 that fully doubled the size of the center. By the time the Aaron Diamond Foundation closed its doors, it had contributed more than $25 million to the AIDS Research Center.

Led by Dr. Ho, the scientists working at the Aaron Diamond AIDS Research Center have ever since been on the forefront of the global effort to control and eradicate HIV/AIDS. Continually collaborating with fellow researchers around the world, the Diamond Center team has, in particular, been recognized for five major breakthroughs:

1. They identified the CCR5 molecule, which is the “central gateway” through which the HIV virus enters the CD4 lymphocytes.

2. Following up on earlier work by Dr. Ho, they demonstrated that the HIV virus does not lie dormant within the body for several years after infection. Rather, the virus is, from the time
of infection on, locked in a battle against the body's immune system. This advance was especially groundbreaking, since it contradicted the prevailing consensus among the medical establishment, and, in so doing, radically altered the treatment of HIV patients.

3. Diamond Foundation researchers identified “an early HIV genome from a 1959 blood sample,” shedding new light on the evolution of the virus.

4. A harmless gene defect, shared by approximately one in every hundred people of European descent, which confers immunity to HIV, was discovered at the Diamond Center.

5. The first combination drug therapy for AIDS was developed at the Diamond Center. Using new protease inhibitor drugs, as well as the existing treatment, AZT, these so-called drug “cocktails” have “helped reduce the death rate from AIDS in America to a fifth of what it once was.”

The impact, in particular, of this last development, has been enormous. Such cocktails are expensive and can produce unpleasant side-effects, and it no longer appears that they will be able fully to eradicate the virus from an infected person’s body, but they have, without a doubt, made AIDS a far cry from the sentence of imminent death that it once was—at least, they have in nations where such treatments are affordable.

Impact. The Aaron Diamond AIDS Research Center has been widely credited for its leading role in these and other advances. Dr. Ho, on whom the Foundation took a chance in the late ’80s, was selected by Time magazine as its Man of the Year for 1996, in recognition of his and his team’s cutting-edge work in unraveling the mysteries of HIV/AIDS. Conceding that Ho, and his fellow AIDS researchers, are not exactly household names, the magazine declared, “[b]ut some people make headlines while others make history. And when the history of the era is written, it is likely that the men and women who turned the tide on AIDS will be seen as true heroes of the age.”

Without a doubt, David Ho is not the only such hero. Doctors like Michael Gottlieb, who first reported on the new virus, Luc Montaigne, who first isolated it, and many others, working for the Centers for Disease Control, the National Institutes of Health, pharmaceutical companies, and elsewhere, have contributed enormously. And the battle is still raging. Nor can the Diamond Foundation take all the credit for enabling David Ho to do his work. Young though he was, Dr. Ho had already chosen HIV/AIDS as his focus several years before the idea for the Diamond Center was born, and, as Irene Diamond readily acknowledged, “his talent is his talent.” But Dr. Ho has always credited Mrs. Diamond for her courage and commitment, in going where other leaders of foundations and government would not, at a time when the word “AIDS” was still spoken in hushed tones—when it was spoken at all. As Dr. Ho has said, Mrs. Diamond’s “insight was truly profound . . . .” It was she and her foundation, after all, that gave, to what she called “a young, talented, but no name scientist,” what he would later refer to as “a chance of a lifetime.”

Notes

942. Over the years, Mrs. Diamond helped to launch the careers of such actors as Burt Lancaster, Kirk Douglass, and Robert Redford. And, in 1941, she had been impressed by an oft-rejected, never published play called “Everybody Comes to Rick's,” and pushed for its adaptation into film. That proved to be a wise move. In 1941, thanks to Mrs. Diamond’s strong backing, the play was released as a movie under a new title—Casablanca.


946. Ibid.
947. Ibid.
950. Clyde, “A Conversation with Irene Diamond.”
952. The following list is adapted from descriptions of these scientific advances available on the web site of the Aaron Diamond AIDS Research Center at http://www.adarc.org. Quotations, unless otherwise indicated, are drawn from that web site.
953. Christine Gorman, “The Disease Detective,” *Time*, 12/30/1997. This finding was published in a 1995 article in *Nature* in conjunction with an article by Dr. George Shaw of the University of Alabama at Birmingham, who had simultaneously reached the same conclusion.
954. At a cost of up to $20,000 per year, such remedies remain far beyond the reach of the vast proportion of HIV/AIDS sufferers in areas like sub-Saharan Africa, which currently has some 25 million people living with the disease. To its credit, the Diamond Center today is working to extend the benefits of AIDS research to the developing world, especially China, where a full 20 percent of the population has never even heard of the AIDS virus.
956. Clyde, “A Conversation with Irene Diamond.”