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Collection/Record Group: Clinton Presidential Records
Subgroup/Office of Origin: National AIDS Policy Office
Series/Staff Member: Kristine Gebbie
Subseries:

OA/ID Number: 3773
FolderID:

Folder Title:
Meeting with Women in Diverse Communities, 2:45p 3/9/94

Stack:	Row:	Section:	Shelf:	Position:
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DAY: WEDNESDAY
DATE: MARCH 9, 1994
TIME: 2:45P
LOCATION: METROTECH 5, BRROKLYN
EVENT: WOMEN IN DIVERSE COMMUNITIES

**PHOTOCOPY
PRESERVATION**

THE WHITE HOUSE

WASHINGTON

Comments by
Kristine M. Gebbie, R.N., M.N.
National AIDS Policy Coordinator

before

HIV/AIDS Prevention Education for
Diverse Communities of Women Conference

Brooklyn, NY
March 9, 1994

1. Why worry about HIV and Women
 - A. Continuing growth of cases in young women
 - B. Impact of Infection on women
 1. On their own health
 2. On their children
 3. On their families
2. Why this area is missed
 - A. Focus on men
 1. Gay men
 2. Injection behavior
 - B. Tendency to denial
 1. On the part of society
 2. On the part of caregivers
 3. On the part of women themselves
3. What it takes to get a prevention message through

HIV/AIDS Prevention Education for
Diverse Communities of Women

March 9, 1994

Page 1

- A. That the risk is real
 - B That there is something which can be done
 - C. That the individual can do it/is worth it
4. The issue of making messages pertinent/receivable
- A. The images must be relevant
 - B. The messages must get where people are
 - C. The messages must fit into priorities
5. Ownership of the issues

THE WHITE HOUSE
WASHINGTON

January 12, 1994

Clara Ann McLaughlin
HIV/AIDS Education Program Coordinator
Church Avenue Merchants Block Association
1720 Church Avenue, 2nd Floor
Brooklyn, NY 11226

Dear Ms. McLaughlin:

This letter confirms the participation of Kristine M. Gebbie, National AIDS Policy Coordinator, in the "HIV/AIDS Prevention Education for Diverse Communities of Women" conference on March 9, 1994 in Brooklyn, NY. Ms. Gebbie plans to arrive at in time to present a keynote address on issues related to HIV/AIDS and teenage women at 2:45 p.m.

I have had two conversations with Gale Morin and will work with her as appropriate. Please call me at (202) 632-1090 with any questions or for further clarification. I am enclosing a copy of Ms. Gebbie's biography and curriculum vitae for your reference.

Sincerely,

W. Steve Lee

W. Steve Lee, Executive Assistant
and Scheduler to the
National AIDS Policy Coordinator

Galen Horn
713 462 0950

THE WHITE HOUSE
WASHINGTON

Carlos

December 23, 1993

Clara Ann McLaughlin
HIV/AIDS Education Program Coordinator
Church Avenue Merchants Block Association
1720 Church Avenue, 2nd Floor
Brooklyn, NY 11226

Dear Ms. McLaughlin:

Thank you for your invitation for Kristine M. Gebbie, National AIDS Policy Coordinator, to speak at the "HIV/AIDS Prevention Education for Diverse Communities of Women" conference on March 9, 1994 in Brooklyn, NY. Your request is under consideration and I will contact you at least sixty (60) days prior to the event as to Ms. Gebbie's availability.

Thank you for your interest and patience.

Sincerely,

W. Steve Lee

W. Steve Lee, Executive Assistant
and Scheduler to
National AIDS Policy Coordinator



C A M B A

RECEIVED

CHURCH AVENUE MERCHANTS BLOCK ASSOCIATION, INC.

November 11, 1993

DEC 23 1993

Kristine Gebbie
National AIDS Policy Coordinator
Office of National AIDS Policy
750 17th Avenue NW Suite 1060
Washington, D.C. 20503

Dear Ms. Gebbie:

The Church Avenue Merchants Block Association would like to extend its warmest congratulations to you on your appointment as National AIDS Policy Coordinator. We would also like to invite you to be the keynote speaker for our conference on women and AIDS. CAMBA, along with the Brooklyn AIDS Task Force, has received a grant from the Centers for Disease Control and Prevention to sponsor a one-day conference. It is tentatively scheduled for March 9, 1994 and is entitled: "HIV/AIDS Prevention Education for Diverse Communities of Women."

This conference will be held in Brooklyn and will be attended by "front-line" fighters (health educators, HIV/AIDS service providers, activists and women living with HIV) of this epidemic. We are very excited about this opportunity to create a forum that will allow us to collectively address the needs and concerns of women in the communities we serve. It will allow us to carefully examine the work we do and confirm that what we do makes a difference in the lives of women.

Ms. Gebbie, on a recent visit to New York City, you urged people to look realistically at how we are educating adolescents about HIV and AIDS. You stressed the need to be "frank" and open with our youth. While most of the workshops at this conference will focus on empowering women, we have scheduled an afternoon session which will focus on the "teenaged-woman." Your voice will be a confirmation of the relevance of this direction that many of us have taken to address HIV/AIDS in diverse communities of women--various cultures and ethnicities, HIV-positive or "at-risk", the chemically dependent, incarcerated or teenaged woman.

Your voice will be appreciated by all who attend. We hope that you will be able to accept our invitation to share your thoughts and your goals as National AIDS Policy Coordinator. We hope to hear from you soon.

Sincerely,

Clara Ann McLaughlin
HIV/AIDS Education
Program Coordinator

Joanne M. Orlustil
Executive Director



C A M B A

CHURCH AVENUE MERCHANTS BLOCK ASSOCIATION, INC.



December 27, 1993

DEC 28 1993

Ms. Kristine Gebbie
National AIDS Policy Coordinator
Office of National AIDS Policy
750 17th St., NW, Suite 1060
Washington, DC 20500

Dear Ms. Gebbie:

On behalf of Brooklyn AIDS Task Force (BATF) and the Church Avenue Merchants Block Association (CAMBA), I am delighted to extend you an invitation to deliver the keynote address at our March 9 conference on women and AIDS. Entitled *Multicultural HIV Prevention for Women*, our conference is funded by a grant from the U.S. Centers for Disease Control and Prevention.

We anticipate more than 200 frontline HIV prevention educators will attend, along with HIV service providers and women with HIV disease. The all-day conference will be held at Metrotech Center in Downtown Brooklyn, with convenient access from all five NYC boroughs. This conference is the first of its kind in the NYC area, and it will build on our two agencies' long experience in HIV service delivery, community organizing and conference planning.

BATF is a not-for-profit HIV community service program and a CDC grantee since October, 1992. BATF is the largest AIDS service program in Brooklyn, and it has developed a wide range of state-of-the-art educational materials and social services for people with HIV disease. With a central office in Prospect Heights, BATF also has satellite offices in Park Slope, Bedford-Stuyvesant, Williamsburg and Coney Island. BATF has a staff of more than 50 professionals, including nine health educators, eight social workers and almost two hundred active volunteers. BATF works closely with networks of health care and community agencies in all parts of the borough.

CAMBA is a not-for-profit education, health and economic development organization located in Flatbush, the center of Brooklyn. CAMBA assists young people, adults and families from diverse cultural backgrounds to participate fully in community life and to attain economic self-sufficiency. CAMBA educates and serves low-income minority and immigrant populations with a holistic, practical approach that integrates HIV health education, comprehensive HIV case management and scattered site housing, long-term peer counseling, empowerment and advocacy for entitlements and legal assistance, job skills training, ESL and adult basic education.

We admire your compassionate and forceful positions on adolescent HIV education. We

1720 Church Avenue, 2nd Floor, Brooklyn, N.Y. 11226 • (718) 287-2600 FAX — (718) 856-4647

Adult Education/ESL • Schools and Families • HIV/AIDS Prevention • Community Outreach • Workshops and Technical Assistance
Homeless Family Assistance • Commercial Revitalization • Employment • Immigrant and Refugee Assistance

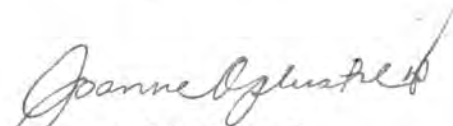
December 27, 1993 — Page 2

have scheduled an afternoon session focusing on adolescents and young women, and our conference will also examine particular strategies for stopping the spread of HIV disease among low-income African-American, Latina, Caribbean, and Asian-Pacific Islander women. The enclosed draft agenda features workshops and panel discussions on topics such as domestic violence as a barrier to reaching women for HIV prevention; complementary/holistic therapies; adolescents and young women in the age of AIDS; lesbian safer sex; and the connections between HIV and substance abuse issues. Our ultimate aim is to help empower women in all aspects of their lives.

Your participation in our conference would be a tremendous boost to our efforts and would ensure that this event is a turning point for women's HIV prevention efforts locally and nationwide. In fact, CDC views our conference as a model for replication nationwide.

If you can attend, we suggest that you speak at 12:30 or 3 p.m., but we can accommodate your schedule if necessary. We hope you can accept our invitation, and we look forward to hearing from you soon.

Sincerely yours,


Joanne M. Oplustil
Executive Director, CAMBA


Elaine Greeley
Executive Director, BATF

Enc.

February 27, 1994

Suki Port
Family Health Project, Inc.
90 Washington Street
27th Floor
New York, NY 10006

Dear Ms. Port:

This letter confirms the visit of Kristine M. Gebbie, National AIDS Policy Coordinator, at a dinner hosted by Suki Wagner on March 9, 1994 in New York, NY. As we discussed, Ms. Gebbie will be picked-up after her talk at the Church Avenue Merchants Block Association. Following dinner, you will arrange a ride for her travel LaGuardia airport.

Thank you for you help. Please call me at (202) 632-1090 with any questions or for further clarification.

Sincerely,

W. Steve Lee, Executive Assistant
and Scheduler to the
National AIDS Policy Coordinator



C A M B A

CHURCH AVENUE MERCHANTS BLOCK ASSOCIATION, INC.

February 22, 1994

W. Steve Lee
Executive Assistant & Scheduler to the
National AIDS Policy Coordinator
Executive Office of the President
Washington, D.C. 20503

Dear Mr. Lee:

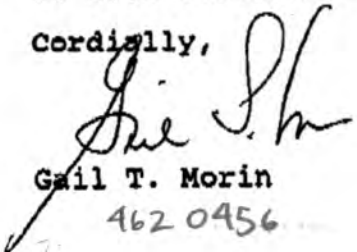
Thank you for your letter of confirmation regarding
Kristine M Gebbie's participation in our March 9th
Conference, "Multicultural HIV Prevention for Women."

Enclosed is a copy of our brochure. The response has been
great and we are anticipating close to 300 attendees.

We would like Ms. Gebbie to speak for approximately 15
minutes and would request that she touch upon the issue of
prevention and adolescent girls. We will then entertain
questions from the audience for the balance of her
program. We will have a moderator coordinating this.

Thank you for your help. With Ms. Gebbie's participation,
we look forward to a successful conference.

Cordially,


Gail T. Morin

462 0456

THE WHITE HOUSE
WASHINGTON

January 12, 1994

Suki Port
Family Health Project, Inc.
90 Washington Street
27th Floor
New York, NY 10006

Dear Ms. Port:

This letter confirms the visit of Kristine M. Gebbie, National AIDS Policy Coordinator, at a dinner hosted by Suki Wagner on March 9, 1994 in New York, NY. As we discussed, Ms. Gebbie will be picked-up after her talk at the Church Avenue Merchants Block Association. Following dinner, you will arrange a ride for her travel LaGuardia airport.

Thank you for you help. Please call me at (202) 632-1090 with any questions or for further clarification.

Sincerely,

W. Steve Lee

W. Steve Lee, Executive Assistant
and Scheduler to the
National AIDS Policy Coordinator

Office of the National AIDS Policy Coordinator



Executive Office of the President
750 17th Street, N.W. Suite 1060
Washington, D.C. 20500

Phone: (202)632-1090

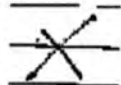
Fax: (202)632-1096



Deliver To: STEVE LEE

Sent From:

Kristine Gebbie, RN, MN, National AIDS Policy Coordinator



Carlos Velez, HIV/AIDS Prevention

Number of Pages: 2 - Cover Fax Number: _____ Date: _____

Message:

January 5, 1993

Memo to: Carlos Kibz
Director of HIV/AIDS Prevention
Office of National AIDS Policy

As per our phone conversation - we
would like to follow-up our request
for a meeting with Mr. Gebbie and
(women of color)
(you will recall the original suggested date
for the day after Thanksgiving was too
difficult for women with children home
for the long weekend.)
May be we could reschedule this
long awaited meeting for Tuesday,
March 9th at 6p.m. for dinner with a
group of women at Iris House in
New York City.

Respectfully,

Marie St. Cyr and
Suki Wagner, dinner host

Suki Pitt
Suki Pitt

**FACSIMILE
COVER SHEET**Date: 4/3/94Time: 5:30 PTo: Kristine GebbieFax: 202/632-1096

From:

☒ Barbara Gomes-Beach☐ Joseph C. Cardozo☐ Molkah B. Feldman☐ Louise McLean☐ Priscilla Tate☐ Rochelle L. Rollins☐ René Millet Hernández☐ Cheryl Hill☐ Jean E. Magloire☐ Nicholas Lohage☐ Quynh Dang☐ Myriam G. Hernandez Jennings☐ Judi Beadley☐ _____

Operator: _____

Number of Pages including this transmittal cover sheet: _____

Instructions: _____



MULTICULTURAL AIDS COALITION, INC.

Douglass Park • 801-B Tremont Street
Boston • Massachusetts • 02118

Phone: (617) 442-1622

Fax: (617) 442-6622

April 1, 1994

Kristine Gebbie, RN, MN
National AIDS Policy Coordinator
Executive Office of the President
750 17th Street, N.W. Suite 1060
Washington, D. C. 20500

Dear Ms. Gebbie:

As a member of the *National Women of Color Leadership Forum*, I again thank you for taking the time to meet with WCLF on March 9th at Iris House in New York. It was indeed an enjoyable and enlightening session for all. And, I appreciate your kind note.

I am taking this opportunity to write to you to request your assistance in a matter of great importance to women of color in Massachusetts. The Women of Color AIDS Council is hosting a two-day Summit on April 8th and 9th at the World Trade Center (Boston Harbor) and at the Omni Parker House. This Summit is the first of its kind in Massachusetts for two very important reasons: one, it is being hosted by women of color who are consumers; and two, it is bringing together women of color, providers, legislators and leadership (internal and external) to the Commonwealth for two days of dialogue and action-oriented planning to address the concerns and needs specific to women of color and their families about HIV/AIDS.

Surgeon General Joycelyn Elders will be giving the Keynote Address at the Summit on Friday, March 8, 1994. A series of workshops/seminars and roundtable discussions is also on the agenda. Please see attached agenda information. The Women of Color AIDS Council had invited you to participate at this Summit, and, unfortunately, your schedule did not permit your attendance. They were disappointed but understood the demand on your time, and look forward to inviting you to Boston in the near future.

At the meeting on March 9th you mentioned that you had an African-American woman who was going to be working closely with policy issues relative to women of color. I have since learned that this person is Frances Page, RN, ADN, BSN, MPH. The Women of Color AIDS Council and the Multicultural AIDS Coalition, Inc., is herewith requesting that the Office of the National AIDS Policy Coordinator send Ms. Page as its representative to this very important Summit.

I realize that the timing is crucial....however, it is my belief that your office and Ms. Page would benefit tremendously from the opportunity to have her network with HIV/AIDS consumers, providers and leadership in Massachusetts.



Kristine Gebbie, RN, MN
National AIDS Policy Coordinator
April 1, 1994
page 2

My office and I stand ready to help facilitate this process so that Ms. Page can attend the Summit. I recommend that she be available from Thursday (April 7th to Saturday, April 9th). My agency is hosting a reception for HIV/AIDS consumer leadership at the Omni Parker Hotel on Thursday evening offering the first of many excellent opportunities for networking and future collaboration.

Again, I realize that the timing is crucial. I appreciate the opportunity to make this request and look forward to hearing from you soon. If there are any questions I can provide relative to the Summit, please call me at (617) 442-1622.

Thank you kindly.

B. G. Beach
Barbara Gomes-Beach, M.C.P.
Executive Director
Multicultural AIDS Coalition, Inc.

Enclosures

cc: Women of Color AIDS Council/ Summit Co-Chairpersons
Ms. Frances Page, National AIDS Policy Office
Karen McManus, WCAC Coordinator
Wanda Allen-Cotter, Massachusetts Department of Public Health

AGENDA**COPY**

**Women of Color and HIV/AIDS
With Kristine Gebbie**

**March 9th, 1994
Iris House**

✓Welcome, Sonia Lopez

✓Introductions: Kristine Gebbie and the group

✓Background of our getting together, Marie St. Cyr

Issues of Sexuality, HIV+ and Incarceration: Vivian Torres

Linda Gang

Race and Ethnicity and Immigrants:

Native American, Diana Ayala Gubiseh

Latina, Miguelina Maldonado

African American, Barbara Gomes-Beach

-Asian/Pacific Islander, Wei Lam

Haitian, Nancy Dorsinville

Multiple Substances, including Alcohol, Ellarwee Gadsen

Representation, Marion Banzhaf

Advocacy, Suki Terada Ports

Comprehensive Services for Women, Marie St. Cyr

**Discussion: Working together to look at and begin to resolve
some of the issues - Action Steps**

.Policy and Advocacy Brokerage of meetings/representation

Participation in policy/RFP development and review

.Resources Parity and access: Ryan White/CDC

Fragmentation of funding

.Services, Prevention Education

**Gaps, inappropriate service models for women: women with children,
single women, lesbian and
bisexual**

Substance detox and treatment programs

.Research and Treatment

Issues as seroprevalence screening

.Evaluation and Accountability

Appropriateness of measures of outcomes



Women of Color AIDS Council Summit
*Breaking the Silence: Voices of
 HIV Positive Women of Color Living the Reality*

Friday Overview (April 8, 1994)

7:30 am	Registration - <i>Continental Breakfast outside Auditorium</i>	
8am - 9pm	Child Care (Food & Entertainment Provided)	Beacon Hill Complex
8am - 5pm	Comfort Room	Harborside Complex
8am - 6pm	Summit Exhibitors & Commemorative Film	Back Bay Complex
8:30 am	Opening Ceremonies	Auditorium
9:00 am	Keynote Address - Joycelyn Elders	Auditorium
10:15 am	BREAK - <i>Called Marlene</i>	Auditorium
10:45 am	Speak out an opportunity for women living with HIV to speak out about their experiences	Auditorium
11:40 am	Film - about women living with HIV	Auditorium
12:00 pm	LUNCH	Harborview Ballroom
1:00 pm	Film Panel Discussion	Auditorium
1:30 pm	Public Health Official Panel	Auditorium
3:30 pm	BREAK - <i>refreshments outside Auditorium</i>	
4:00 pm	Infected/Affected Children's Presentation	Auditorium
5:00 pm	BREAK	
5:00 pm	Debriefing for participants for whom english is a second language	
6:30 pm	Award - Dinner - Talk by Eleanor Mitchell	Harborview Ballroom

Saturday Overview (April 9, 1994)

8:00 am	Registration - <i>Continental Breakfast outside Auditorium</i>	
8:30 am	Positive Relationships Presentation	Auditorium
8am - 9pm	Child Care (Food & Entertainment Provided)	Beacon Hill Complex
8am - 5pm	Comfort Room	Harborside Complex
Hourlong Marathon Sessions		Congress Board Rm.
9am	Legal Issues	
10am	HIV Counseling & Testing	
11am	Clinical Manifestations in Women	
1:15	Caregivers	
2:15	Sexuality	
10:00 am	Morning Workshops (Waterfront 1,2,3, Federal 2, Back Bay 1,2) Grieving Issues Alternative Therapy & Treatment Issues HIV+ Incarcerated Women Access to supportive services Spirituality Women & Family Policy Issues	
12:00 pm	LUNCH- Talk by Janet Mitchell	Harborview Ballroom
1:15 pm	Afternoon Workshops (Waterfront 1,2,3, Federal 2, Back Bay 1,2) Adolescents Substance Abuse & HIV New Initiatives When my partner is positive and I'm not Roles for Religious Institutions Racism & Discrimination in Health Care	
3:15 pm	BREAK - <i>refreshments outside auditorium</i>	
3:30 pm	Closing Ceremonies	Auditorium
5:00 pm	Subpopulation Debriefing Sessions (Waterfront 1,2,3, Federal 2, Back Bay 1,2)	
6:30 pm	DINNER	Harborview 2
8:00 pm	Poetry Reading - Performance	Harborview 1
9:00 pm	CELEBRATION OF LIFE	Harborview Ballroom

RECEIVED

Steve,

MAR - 7 1994

Noted Kristine will be visiting the
Iris House on 3/9 & thought this
might be of interest.

Tim

IRIS HOUSE

A CENTER FOR WOMEN LIVING WITH HIV

Suki Terada Ports

(212) 349-8155 Phone at work

(212) 587-3417 Fax

Staff Contact: Elizabeth Fernandez

(212) 973-3655

(212) 749-6957 Phone at Home

①

I. Nature and Size of the Problem

The cumulative number of AIDS cases in New York City has reached 41,598 as of June, 1992. While men still make up the majority of cases, the percentage of women with AIDS has been steadily rising. In 1987, women accounted for 11%, or 1,156 cases. That percentage now stands at 16%, or 6,448 of all NYC cases. These latest figures represent over a quarter of the female AIDS cases nationwide. The New York State Department of Health predicts that the number of AIDS cases in women in New York State may reach 25,000 by 1995.

Yet, as astounding as those figures may seem, they represent merely the tip of the iceberg - ~~not~~ that encompasses ~~only~~ only those women with CDC defined AIDS, ~~not~~ ^{HIV +} the many thousands who are ~~infected and suffering from HIV-related illnesses~~. Current conservative estimates put the number of women in NYC who are HIV infected at upwards of 45,000. AIDS is now the leading cause of death for New York City women between the ages of 20 and 39. The lack of an expanded CDC case definition which includes the manifestations of the disease in women, presents virtually insurmountable barriers to treatment, clinical trials and entitlements, including Social Security Disability benefits.

Low income minority women are disproportionately affected by this epidemic. Of all NYC female adult cases, 85% are women of color, primarily Black and Latino, and fully 91% of all pediatric cases are children of color. East Harlem, a predominantly Latino community in Manhattan, has the third highest rate of AIDS cases per 100,000 population in the city. The percentage of pregnant women in East Harlem testing positive for HIV has risen to 4%.

HIV positive women face a particularly daunting set of problems. Beset by poverty, substandard housing, limited access to critical services, and the stigma attached to the diagnosis, they are usually faced with the additional responsibility of caring for other family members who may be infected. The barriers imposed by a highly fragmented health and social services system, combined with the stresses of living with a life threatening infection, suppress a woman's ability and motivation to seek care for herself. The result can be rapid progression of the disease, multiple

(2)

and prolonged hospitalizations, and premature dissolution of the family unit.

Recognition of the epidemiological changes in the disease and the dearth of services for women has sparked some increases in funding, but efforts have not kept pace with the rapid spread of the disease in poor urban areas. Furthermore, the services that are available have not been designed with the special needs of HIV infected women, women at risk and caregivers in mind. At this moment, no facility exists in this country that is dedicated to the needs of women as they confront this disease. Very few resources have been made available to address the gaps in knowledge of women who are unaware of their risk and for families who are caregivers. Women remain a dramatically underserved group.

II. Characteristics of the Proposed Innovation

→ Iris House, A Center for Women Living with HIV, is a concept which was conceived, developed and supported by women who identify themselves as "infected or affected by AIDS". Designed to be built in stages, Iris House will eventually encompass a broad spectrum of health and social services in one facility, in an environment that is supportive to women and their families.

The impetus for the formation of the Women and AIDS Working Group was a camp experience, originally provided by Herbert Birch Services, for HIV infected children and their caregivers. Most of the caregivers were women, and for the first time, they found themselves in a "safe" environment where they could talk openly about what it was like to be living with AIDS. In an effort to further the experience begun at camp, the women formed the working group which has continued to meet monthly at the Manhattan Borough President's Office to advance their concept of Iris House.

(I am on the Board of the N.Y. Women's Foundation and we have agreed to lead in the fund-raising effort)

The New York Women's Foundation and the Fund for the City of New York joined with the Borough President's office in the planning process, by providing resources to the working group for the continued development of this project. The United Way of New York City has recently joined these local groups as a partner to assist in the establishment of direct services.

→ In addition to providing for a continuum of care, Iris House will offer women a safe space

(3)

where they can share their experiences, learn to cope with their illness without fear of reprisals, and empower themselves to advocate for their own needs and the needs of other HIV infected women and caregivers.

Support for this project has come from all sectors of the community, and will therefore ensure that instead of duplicating existing services, the center will offer a unique opportunity to integrate services in a manner which is sensitive to the expressed needs of the client base. The participation of HIV infected women in the planning process, has enabled them to communicate how important it is to have their multiple needs attended to in one facility.

As a center created by women and for women, Iris House will be a model service center which can provide critical training to health and social service professionals, and policy makers on a local, state, and national level in organizing efficient, effective and accessible services for HIV infected and affected women. (Iris House will offer to women the same kind of comprehensive approach that the Gay Men's Health Crisis offered to the gay community in the early 1980's.)

III. Anticipated Outcomes

In its initial stage, Iris House will offer case management services and life planning to 50 HIV infected women and their families, women at risk, and caregivers at a temporary site in East Harlem. Paid staff and volunteers will assess the life situation of the client, and, with her full participation, will develop a service plan to secure the needed services. Coordinating primary health care and securing entitlements will accomplish several key things: 1) with early intervention, the health of HIV positive women can be improved and maintained; 2) unnecessary hospitalizations will be avoided; 3) concrete support services, such as child care and transportation, will be offered to guarantee that women remain connected to the service system; and 4) advocacy will ensure that services are responsive to the needs of the client.

With their concrete needs addressed and their health status stabilized, women can then turn their energy and attention to grappling with less tangible, but no less important issues. Improving the quality of life for women living with HIV includes building a knowledge base that enables them to effectively attack feelings of powerlessness and the stigma associated with this disease.

(4)

Through workshops and personal counseling, the program will improve their ability to communicate with health care providers, to reach out to other women at risk, and afford them the opportunity to learn about issues which impact on their lives. Iris House will offer a safe haven where they can practice what they learn and take effective action. As part of its core services, the project will offer support to the family and friends of its clients. Therefore, we expect to see a significant increase in HIV counseling and testing, and early intervention services.

IV. Program Narrative

Funds are being sought to establish the interim service component of Iris House in a temporary facility in East Harlem. The staffing pattern will consist of a Project Coordinator, a Director of Social Services and a core of volunteers, some of which have been committed to the development of Iris House for the past eighteen months. A concerted effort will be made to recruit staff that is bilingual and sensitive to the cultural values and mores of the East Harlem community. Support for this project is so broad based that virtually all services ultimately envisioned for the permanent facility can be provided in the temporary site, with the exception of primary health care. A "service wheel", which illustrates the service needs articulated by the women who have developed this project is included in the appendices. Linkages have already been established with existing services as follows:

- 1) Primary Health Care - Mt. Sinai Hospital, Metropolitan Hospital, Boriken Health Center, and Settlement Health and Medical Services.
- 2) Nutrition Education and Food Services - God's Love We Deliver
- 3) Civil Rights, Wills, Legal Clinic - HIV Law Project
- 4) Skills Training and Employment Opportunities - Hunter College School of Public Health and Multi Tasking Systems
- 5) Research for Advocacy - Columbia Presbyterian HIV Center for Clinical and Behavioral Studies
- 6) Vacation Respite - Herbert Birch Services
- 7) Health Education - Women's Health Education Project

not the
examples only
exhaustive
list.

5

The program will provide for the following services directly through paid staff and volunteers:

- 1) Case management, life planning, and community follow-up
- 2) Child care
- 3) Counseling, support groups and peer support services
- 4) Education, information and referrals
- 5) 12-Step substance recovery programs and risk reduction
- 5) Spiritual development and creativity

Plans are already under way to secure a city-owned building in the area which will serve as the permanent site for Iris House. The building consists of 6 floors which, when renovated, will provide space for a continuum of services needed by women throughout their HIV illness. *as well as innovative shared housing to meet emergency child care needs,* Transitional housing for homeless women with AIDS will occupy the top two floors. Rental space *ad an emergency shelter for a mother who is battered or some similar emergency* will be available on the middle ~~two~~ floors for women's programs of AIDS related organizations. This will meet a growing need for additional space to house these programs, and will help to integrate existing services into the program plan of Iris House. The remaining space will house a primary care unit, counseling and meeting rooms, supervised child care areas, and a full service kitchen.

The local funding partnership is committed to securing the necessary funds to establish much needed services in the short term. Integrating existing services and utilizing currently available funding streams for case management, primary care and homeless housing will ensure a future for Iris House in the long term.

This is where we estimate an approximate \$6 million cost for building acquisition, restoration and careful program planning which will include a documented journal so that a town in Idaho or Hawaii could replicate the steps without reinventing the wheel.

(6)

Iris House
Budget for Interim Service Package
(12 month Budget)

The package is a bare bones interim and does not begin to address the construction and actual program once the building is complete - target is 18 mo - 24 mo.

<u>Personnel</u>	<u>FTE</u>	<u>Amount Required</u>
Project Coordinator	1.0	\$ 30,000
Director of Social Services	1.0	35,000
Community Follow-up Worker	1.0	22,000
Receptionist/Clerk	1.0	20,000
Fringe (28%)		29,960
Sub-total Personnel		\$136,000

Other Than Personnel Services

Space Rental (Including Utilities)	\$ 22,500
Telephone	4,500
Security System	1,000
Transportation	6,500
Duplicating and Printing	1,500
Postage	2,800
Insurance	2,500
Office Supplies	1,000
Office Furniture	4,665
Workshops (Contractual)	5,000
Program Supplies	5,000
Equipment Leases and Service Contracts	2,400
Purchase of Equipment	3,850

Sub-total OTPS \$ 63,215

Grand Total \$200,175 \$100,088 \$100,087

This is based upon a fiscal sponsor (the Wyomen Foundation) which is why there is no book keeping etc. \$ allocated.

(7)