1994
MARIN HIV ACTION PLAN
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Presented to: The Marin County Board of Supervisors

Robert Roumiguire
Harold C. Brown, Jr.
Annette Rose
Gary T. Giacomini, Chairman
Brady Bevis

First District
Second District
Third District
Fourth District
Fifth District

Developed by: The Marin AIDS Advisory Commission

Alcohol and Drug Advisory Board

Connie Borges
Marin Center for Independent Living

Erwin Braff
Marin Health Council

Center for Attitudinal Healing

Commission on the Status of Women

Council of Mayors and Councilmen

Criminal Justice Consortium

Hemophiliac Foundation of Northern California

Ben DeDionisio

Tom Fairwell

Jeff Fredericks

Jayme Goodale

Janet Gorewitz
Marin AIDS Project

Bill Hamilton
Community Action Marin

Deborah Kasel

Legal Aid of Marin/Marin County Bar Association

Marin Community Clinic

Marin County Chamber of Commerce

Marin County Dental Society

Marin County Medical Society

Marin Housing Center

Marin Lesbian/Gay Rights Project

Dave Martin
Marin Interfaith

Theresa Mejia
Latino Representative

Mental Health Advisory Board

Victor Newman

Office of Emergency Services Advisory Group

Planned Parenthood

William Rogers
Youth Advocates

Geoffrey Sackett

Brian Slattery
Marin Treatment Center

Hap Stewart

Steve Takemura
Canal Community Alliance
Patricia Tanquary
Marin County Hospital
Administrators

Mary Taverna
Hospice of Marin

Sally Trahan
Marin County Office of
Education

John Zukaitis

and The Department of Health
and Human Services, AIDS
Program

DEDICATION

This 1994 Marin HIV Action
Plan is dedicated to those
Marin AIDS Advisory Commission
Members whose lives have been
claimed by the HIV epidemic:

Peter Di Giorgio
Robert Katheiser
Lou Morgan
Michael
Marty Moleski
Peter Pischel
David Marcus
Bobby Richer
Aaron Anderson
Derrick Johnson
Guy Van Patten
HIGHLIGHTS

As of December 31, 1993, 977 cases of AIDS have been reported in Marin County. These cases include those who are County residents and those who are incarcerated in San Quentin Prison. Based on the number of cases per 100,000 people (per capita incidence rate), Marin County has the second highest rate in California, second only to that of San Francisco.

Using a statistical formula, we estimate that the number of Marin County residents infected with the HIV virus is even higher, somewhere between 3,000 and 5,000 people. Thousands more are at risk of contracting the virus through unsafe behaviors. Turn to the HIV/AIDS section for more information about the demographics of the epidemic in Marin.

The Marin AIDS Advisory Commission serves as the body which advises the Marin County Department of Health and Human Services and the County Board of Supervisors on AIDS policy issues, sets priorities and makes recommendations regarding how County, CARE Act Title I, and Housing Opportunities for Persons with AIDS (HOPWA) funds should be spent, and decides which programs should be funded by CARE Act Title II monies. The various sources of funds have been used to provide a complete array of direct care and treatment services. These services are described in the Health Care and Social Services sections. Prevention education services are funded with monies from the State Office of AIDS. These services are described in the Education and Prevention section. Details regarding the funding of these services is contained in the Financial section.

In addition to these functions, the Commission has been active in initiating and supporting pertinent State and Federal legislation. See the 1993 Achievements section. The History of the Commission is detailed in the section of that name. A telephone listing of some important AIDS-related resources is available in the back of this document under Directory.

The following are some definitions which may be useful in reading this document:

AIDS or Acquired Immune Deficiency Syndrome - The final and most serious stage of HIV disease characterized by clinical signs and symptoms of severe immune deficiency.

Case Management - A client-centered service that links clients with appropriate levels of health care and psychological services in a timely and coordinated manner.

HIV or Human Immunodeficiency Virus - The virus that eventually causes AIDS.

HOPWA - This acronym stands for Housing Opportunities for Persons with AIDS which is a source of funding for programs to prevent persons living with AIDS from becoming homeless. This funding comes from the Department of Housing and Urban Development through the
National Affordable Housing Act.

PLWHIV - This acronym stands for person living with HIV disease.

PWA - This acronym stands for person with AIDS.

Ryan White CARE Act - This federal legislation was intended as emergency assistance for localities that are disproportionately affected by the HIV epidemic. The Act makes financial assistance available to states and other public or private nonprofit entities to provide for the development, organization, coordination, and operation of systems for the delivery of essential care and treatment services to individuals and families with HIV disease.
HIV/AIDS

The Department of Health and Human Services, AIDS Program (AIDS Program) employs a Surveillance Coordinator whose job it is to identify all the AIDS cases in the County. It is important to identify these cases to comply with federal and state reporting requirements as well as to help determine the need for federal monies for HIV education and prevention and care and treatment services.

Since Marin County began tracking AIDS cases in 1983, there have been 977 individuals diagnosed with AIDS, 711 in the community and 266 incarcerated in San Quentin Prison. Of that number 452 have died, 438 from the community and 14 from San Quentin. That leaves 525 individuals living with AIDS, 273 from the community and 252 from San Quentin.

See Table 1 for a comparison of the rates per 100,000 people in various counties in California. The largest concentration of cases in Marin has been in Central Marin (40.9%) followed by San Quentin Prison (27.2%). See Graph 1 for the geographical distribution of AIDS Cases 1983 - 1993.

Using a statistical formula developed by George Lemp of the San Francisco AIDS Office, we estimate that the number of Marin County residents infected with the HIV virus is even higher, somewhere between 3,000 and 5,000 people. Thousands more are at risk of contracting the virus through unsafe behaviors. These individuals need to be reached by prevention education efforts so that they do not spread the disease further.
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<thead>
<tr>
<th>County</th>
<th>Cases (1)</th>
<th>Deaths (1)</th>
<th>Mortality Rate, %</th>
<th>County Population (2)</th>
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(1) County Surveillance Reports, most recent data available.
(2) State of California, Dept. of Finance, Population Research Unit; (population figures from February 1991).
GEOGRAPHICAL AIDS CASE DISTRIBUTION
MARIN COUNTY, 1983 - DECEMBER 1993

TOTAL CASES
977

South (17.9%)
175

North (7.9%)
77

Central (40.9%)
400

San Quentin (27.2%)
266

West (6.0%)
59
HEALTH CARE

Marin County has a range of health care and social services available to persons living with HIV/AIDS in the County.

Acute Inpatient Care

Marin County has three acute care hospitals which provide medical care to PLWHIV/AIDS: Marin General Hospital, Novato Community Hospital, and for Kaiser members, Kaiser Permanente Hospital. Marin General and Kaiser each have an AIDS Task Force to facilitate the coordination of services within the hospital.

Outpatient Services

The Marin Specialty Clinic of the Department of Health and Human Services (Marin Specialty Clinic) was created almost 3 years ago with Ryan White CARE Act money and financial support from the County of Marin. This County-run Clinic provides outpatient primary medical care to PLWHIV/AIDS who are not covered by a Health Maintenance Organization or a private physician. Under a contract with the Department of Health and Human Services, a group of private physicians provides on-call services so that Clinic patients can have 24 hour care.

Complementary Therapies

For those individuals who want preventative or adjunctive therapies, Spectrum offers wellness groups to PLWHIV and their families, friends, or partners. These individuals participate in 6-week workshops designed to help manage HIV infection. The workshops cover the topics of nutrition, stress management techniques, clinical drug trials, alternative medical therapies, Chinese herbs, acupuncture, visualization, and benefits counseling. These groups are financed in part by Ryan White CARE Act funds.

In the near future, CARE Act funds will provide financial assistance to clients for such complementary therapies as acupuncture, vitamins, herbs, and nutritional supplements.

Case Management Services

A case manager helps a client obtain the various services needed during the course of the client’s illness. Several case managers are funded by Ryan White CARE Act funds. Hospice of Marin, Marin General Hospital, Marin Treatment Center, and Marin AIDS Project provide case management services to PLWHIV/AIDS. These case managers meet biweekly to exchange information so that clients are able to access all appropriate services and to ensure that there is no duplication of services.

Home Care

When an individual is significantly weakened as a result of his/her illness or too sick to leave home for a lengthy period, that person may receive care at home from a nurse, social worker, and/or an attendant. This care is funded by the County’s In-Home Supportive Services program or the Hospice of Marin’s Pilot Care Project or its Ryan White...
CARE Act or HOPWA-funded programs. Attendants can help persons with such activities as bathing, shopping or cooking. Hospice can also provide emotional support to the families, friends, and partners of individuals who are in the final stages of their disease.

SOCIAL SERVICES

In addition to health care and treatment, individuals with HIV/AIDS may need a variety of social services, particularly after they become too disabled to support themselves. The AIDS Program employs a social worker whose caseload consists entirely of persons who are permanently disabled with HIV/AIDS and are low income.

The social worker assesses an individual’s need for health and social services, evaluates the services currently received, provides appropriate information and referral to needed services, monitors the reception of services, and intervenes to facilitate service delivery as needed.

Food

As individuals’ medical expenses rise, they may try to reduce expenses by cutting their food budgets which may mean they are not getting adequate nourishment. Individuals often may feel too ill to prepare or eat well-balanced meals. For those individuals, the Ryan White CARE Act funds the HIV Food Pantry at Community Action Marin. The Pantry distributes bags of groceries, food supplements, and toiletries. The Ryan White CARE Act also funds Marin AIDS Project in coordination with Community Action Marin to provide individuals with prepared and delivered meals. A privately funded organization, Meals of Marin, also provides prepared and delivered meals.

Housing Assistance Programs

Individuals living with HIV who have reduced resources may have trouble making their rent or mortgage payments. With Housing Opportunities for Persons with AIDS (HOPWA) funds, the Marin Housing Authority has established a long-term rental assistance program to help the most needy individuals stay in their homes.

Community Action Marin offers short-term assistance with rent, mortgage, or utility payments in emergency situations or when individuals are waiting to enroll in the long-term program. Other programs which assist with utilities are available through Pacific Bell, PG&E, the Salvation Army, Viacom Cable Company, and Community Action Marin. Hospice of Marin is also funded to provide attendant care to individuals to enable them to stay at home as long as possible.

Innovative Housing operates a residence specifically for individuals living with HIV/AIDS. Adam’s House is a home which rents rooms to persons living with HIV/AIDS.

Support Services

During the course of an individual’s HIV disease he or
she may have need for a variety of other support services. Marin AIDS Project is the non-profit agency in the County whose purpose is to provide support services to persons living with HIV/AIDS and their friends, family, and loved ones. Community Action Marin also provides additional support services to persons living with HIV/AIDS as part of its programs for low income individuals.

Benefits Counseling

Individuals with HIV disease often need to know what their insurance policies cover, if they are insured. If they are not insured, they may need to know how to access public entitlement programs to assist them with their various service needs. Marin AIDS Project assists clients in accessing both public and private entitlement programs.

Volunteers

Marin AIDS Project trains volunteers to provide MAP clients with emotional and practical support. Practical support includes assisting clients with transportation, shopping, cooking, cleaning, and personal care on a limited basis.

Emergency Financial Assistance

Individuals with HIV disease may find themselves in financial difficulty because of their large medical expenses and/or their inadequate entitlement allotments. Both Marin AIDS Project and Community Action Marin provide emergency financial assistance. MAP provides this assistance to its disabled HIV/AIDS clients and CAM provides it to any Marin resident living with disabling HIV/AIDS.

Pharmaceuticals

Individuals living with HIV/AIDS may have difficulty affording the expensive medications they must take to prolong their lives. The AIDS Program operates a federally-funded program which provides financial assistance in obtaining 13 specific AIDS-related drugs to low-income residents living with HIV/AIDS. Community Action Marin assists these individuals with the purchase of pharmaceuticals and healing alternatives that are not covered by the AIDS Drug Program.

Transportation

Individuals with HIV disease may no longer be able to afford their own cars. Transportation can be provided by volunteers at Marin AIDS Project or individuals can obtain vouchers for the bus, gas, bridge tolls or have cab rides to essential appointments paid for by Community Action Marin.

Pet Services

Individuals with HIV disease may become too sick or too impoverished to care for their pets. The Marin Humane Society through their Special Human-Animal Relationships (SHARE) program offers a variety of animal care services including veterinary care, food, grooming, transportation, training, and
emergency boarding.

MENTAL HEALTH SERVICES

Receiving a diagnosis of HIV infection and dealing with the consequent issues around loss of health, productivity, and income are stressful and individuals often require help in dealing with these issues. The Specialty Clinic has contracted for the consultative services of a psychiatrist. Individuals can receive referrals for personal counseling through the Marin AIDS Mental Health Project sponsored by the Marin AIDS Project. The referral list includes 150 therapists, psychologists, social workers, psychiatrists, and other professionals and agencies providing mental health services who will accept Medi-Cal insurance or fees on a sliding scale for their services.

Individual counseling is also available through Spectrum and The Center for Attitudinal Healing. Marin AIDS Project, The Center for Attitudinal Healing, and the Living/Dying Project offer support groups to different affected populations such as women, San Quentin prisoners, and loved ones.

EDUCATION AND PREVENTION

To prevent the spread of HIV disease and the reinfection of people living with HIV, several agencies utilize various strategies ranging from distributing educational materials to offering multi-session risk reduction groups. These strategies focus on increasing individuals' knowledge, changing their attitudes and beliefs when necessary, and assisting individuals in reducing behaviors which put them at risk for contracting the disease.

Early in 1993, the AIDS Program of the Department of Health and Human Services (AIDS Program) in conjunction with Marin AIDS Project, Spectrum, Marin Treatment Center, and Youth Advocates formed the Marin County HIV Prevention Education Collaborative to provide these services to the target populations of men who have sex with men, substance users, and high risk youth.

Other important prevention education activities include Marin AIDS Project's HIV+ Speaker’s Bureau which is composed of HIV+ individuals who are trained to make presentations to groups about what it is like to live with the disease. They operate a Resource Center which houses a variety of AIDS-related books, journals, and videos and is open to the public.

For individuals who worry that they may have been exposed to the HIV virus, the AIDS Program offers free, anonymous HIV antibody testing at two testing sites two evenings and one morning a week. On a quarterly basis, testing is also offered in Bolinas and Point Reyes. Individuals are seen by appointment only.

At the appointment, the individual speaks to a certified HIV test counselor about the test procedure, the meaning of the results, their
possible risk factors, and then receives educational materials and/or condoms. The individual then has blood drawn by a phlebotomist. The blood is sent to the County laboratory for testing. The individual makes an appointment to return at least two weeks later to receive the test results and post-test counseling in person. Anyone who receives a positive result is referred to the appropriate medical and support services in the community.

Education is provided to HIV+ individuals and their families, friends, or partners by Spectrum through six-week groups which cover the topics of nutrition, stress management, clinical drug trials, alternative medical therapies, Chinese herbs, safer sex, acupuncture, visualization, and benefits counseling.

HIV education and prevention must be provided continuously and vigilantly to all the residents in Marin County to stop the spread of the AIDS epidemic. Populations of special concern based on Marin statistical data include gay/bisexual men, men who have sex with men, women, youth, and people with HIV, mental health, and/or substance use problems.

The current resources to provide programs are seriously overtaxed. To provide the most effective programs possible more resources are needed for personnel and materials.

ISSUES

Although Marin County has come a long way in developing a continuum of services for persons living with HIV/AIDS in the County, several areas need further attention. In a report based on input from community based organizations and compiled by the Marin AIDS Advisory Commission for a meeting with Assemblywoman Vivien Bronshvag, four needs were identified:

1. More culturally sensitive and appropriate Education and Prevention Services adequately funded by the State of California
2. Housing assistance; From independent living arrangements to access to skilled nursing facilities
3. Equal access to direct services for all persons living with HIV/AIDS according to need
4. More services designed for women with HIV/AIDS

The Marin County HIV Prevention Education Collaborative was formed to provide HIV prevention education to those groups identified by the State Office of AIDS as at highest risk - men who have sex with men, substance users, and out of school youth. It is important that local agencies have input in identifying high risk groups and appropriate intervention strategies including needle exchange.

Marin County residents with HIV/AIDS who can no longer live independently still have limited access to facilities which provide a more intensive
level of care. Marin County does not currently have a long-term care facility specifically for AIDS patients. As more individuals progress to the end stages of their diseases, the need for a full continuum of housing assistance may become necessary.

To ensure that all persons living with HIV/AIDS receive adequate medical and support services throughout the course of their illnesses, it is important that individuals receive early intervention services which can help prolong their lives. It is also important that all persons have equal access to services regardless of transmission route and type and severity of problems accompanying HIV disease.

Marin County has few services that have been adapted for women with HIV disease. Women living with HIV/AIDS need obstetrics/gynecology care, childcare, and respite services. It would be important to receive input from women from a variety of cultural and ethnic backgrounds before designing any women-specific services.

ACHIEVEMENTS

This year was characterized by the Commission’s efforts to become more efficient locally and more influential on a state and national level. To better determine the needs of persons living with HIV/AIDS, a worksheet detailing average monthly costs of those living on SSI/SDI was developed. A brochure was published and distributed to persons living with HIV/AIDS and service providers describing the financial resources available as well as the method for accessing these resources.

A list of AIDS-specific grants in the County in 1993/94 was compiled and distributed.

In the area of service delivery, Community Action Marin became the central distribution source for several kinds of emergency assistance for persons living with HIV/AIDS.

Three agencies, Marin AIDS Project, Community Action Marin, and Project Open Hand collaborated to provide prepared and delivered hot meals to persons living with AIDS.

Five agencies, The AIDS Program, Marin AIDS Project, Spectrum, Marin Treatment Center, and Youth Advocates formed a Prevention Education Collaborative and were awarded a three-year grant by the State Office of AIDS.

A convalescent hospital began admitting persons with AIDS for skilled nursing care. The Commission took a public position of support and advocacy of needle exchange. Community members formed an organization called NEPOM (Needle Exchange Program of Marin) to conduct a needle exchange, education, and referral program. The program currently operates in San Rafael. Additional programs are being considered for Point Reyes, San Geronimo, Bolinas, Sausalito/Marin City, and Novato.
The Board of Supervisors demonstrated its concern for the health of Marin residents by declaring a public health emergency which facilitated the work of NEPOM. If the Governor approves needle exchange legislation, Marin can develop a pilot program with additional sites at 5 pharmacies.

The Commission became more efficient at monitoring by reviewing programs funded by several sources in one site visit to an agency.

For the first time in its history, the Commission had two HIV+ Co-Chairs and HIV+ Co-Chairs of most committees. The Commission began to interact with other Commissions and Boards in the County. The Commission also began to meet with AIDS Commissions outside the County. Marin was awarded a seat on the San Francisco HIV Health Services Planning Council. Commissioners regularly attended meetings of the Sonoma County Commission on AIDS.

The Commission continued ongoing partnerships with local legislators. The Commission was also represented at meetings with the U.S. Surgeon General and the National AIDS Policy Coordinator. The Commission made its position known on various AIDS-related State and Federal legislation.

The Commission looks forward to facilitating coordination of HIV-related services in the County across departments and budgets.

FINANCIAL STATEMENT

In 1993, the Marin AIDS Advisory Commission made recommendations on a total of $806,990 in Title I funds, $78,603 in Title II funds, $254,450 in HOPWA funds, and $49,600 County funds for HIV treatment, care, and housing services. The following financial statement describes the various sources of funding, the allocation process, and the actual amounts given to various programs. The AIDS Program served as a grants administrator for 12 contracts with community-based agencies funded by Title I, HOPWA, the State Office of AIDS, and the County. Community Action Marin served as the grants administrator for 3 contracts with community-based agencies funded by Title II.

Funding Sources

The largest source of funding in the past year has been the Ryan White Comprehensive AIDS Resources Emergency (CARE) Act. These are Federal funds which have been authorized for five years but the amounts appropriated vary from year to year. This is the third year of the funding. Title I funds are designated as emergency funds for Eligible Metropolitan Areas most seriously impacted by the AIDS Epidemic, i.e., > 2,000 AIDS cases. The San Francisco EMA is composed of the counties of San Francisco, Marin, and San Mateo. San Francisco has agreed to share its funding with the two other counties based on the proportion of persons living with AIDS in those counties. Title I
funding is aimed at low-income, underinsured, and uninsured individuals and may only be used for direct care and treatment services.

Title II funds are distributed through the State Office of AIDS to the 58 counties in California on a formula basis and are prioritized for case management, benefits counseling, or identification of unmet needs. If these services are already funded then other direct care and treatment services can be provided.

The Cranston-Gonzalez National Affordable Housing Act of 1990 created a new Housing Opportunities for Persons with AIDS (HOPWA) program administered by the U.S. Department of Housing and Urban Development. This program is for Metropolitan Statistical Areas which have a population over 500,000 and 1,500 cumulative AIDS cases. The County of Marin receives funds as a subrecipient of San Francisco which has agreed to share its allocation with Marin based on the proportion of persons living with AIDS in the county. This funding is designed to meet the housing needs of persons living with AIDS or related diseases and their families.

At the recommendation of the Department of Health and Human Services, the Marin County Board of Supervisors also authorizes County General Funds to contract with community-based organizations to provide AIDS-related services and in support of the AIDS Program and the Specialty Clinic. The total funding from these four sources to provide direct care and treatment services is $1,189,643.

The County funds the AIDS Program staff positions which facilitate the acquisition and allocation of funds for community-based AIDS-related programs as well as support for the Commission. It also funds the staff positions associated with surveillance and social work activities and the operation of the Anonymous HIV Testing and AIDS Drug Assistance Programs.

HIV Prevention Education services in Marin were funded in a competitive process. In response to a State Office of AIDS Request for Proposal for HIV prevention education services, the AIDS Program, Marin AIDS Project, Spectrum, Marin Treatment Center, and Youth Advocates formed The Marin County HIV Prevention Education Collaborative and submitted a proposal for three-year funding. The Collaborative was awarded $168,000 for the first year to target those groups identified by the State Office of AIDS as at highest risk-men who have sex with men, substance users, and youth at high risk.

Funding Decisions

To determine how to allocate the various sources of funding, information on the need for various programs is gathered from Commissioners who are AIDS service providers and clients of the various programs. When the need for a specific new service is identified, a Requests for Proposal Committee is
established from Commissioners who are experts in the field. This Committee provides input as to the desired elements in a new program.

A Request for Proposals is issued and a Review Team is constituted from Commissioners and community members with no conflict of interest. The Review Team rates the proposals and makes funding recommendations. These recommendations are presented to the AIDS Advisory Commission which allocates the funding for Title II, and makes recommendations for funding to the Marin County AIDS Program for Title I and County funds.

The HOPWA Working Group which is composed of Commissioners, County, and housing agency representatives with no conflict of interest gathered input from service providers and current and potential HOPWA clients and made recommendations to the AIDS Advisory Commission regarding the allocation of HOPWA funds.

Information on the success of existing programs is obtained through regular monitoring of the programs including written reports, satisfaction surveys, and yearly site visits. The summary report of the site visit includes a recommendation on whether funding should be continued for current programs.

The AIDS Advisory Commission gathers data from providers and solicits input from affected individuals and develops an HIV Action Plan which includes recommendations and requests for additional County funding and presents this Plan to the Board of Supervisors on a yearly basis.

Funding Allocations

The following table details the distribution of the above-described sources of funds to 12 programs at 7 agencies. These programs include case management, benefits advocacy, housing, meal delivery, financial assistance, attendant care, and education programs. Several are existing programs while the benefits advocacy, housing assistance, and meal delivery programs are in their first year.

INSERT TABLE HERE

Community Contributions

The Marin Community Foundation has supported AIDS services such as case management and housing as well as prevention education through its AIDS Initiative funding.

The William Babcock Memorial Endowment provides low-income Marin residents with short-term financial assistance for medical costs, including insurance premium payment, when all other resources have been exhausted.

Marin AIDS Project has recruited and trained 300 volunteers who provide practical and emotional support to MAP clients. The individual contributions of the volunteers have been estimated to be worth $250,000.
### 1993-94 AIDS Specific Grants Awarded in Marin County

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<th>Start Date</th>
<th>End Date</th>
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<tbody>
<tr>
<td>County</td>
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<tr>
<td>State Pilot Project</td>
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<td>Federal Title II</td>
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<td>Marin Community Foundation</td>
<td>Intentional Living</td>
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<td>Nutritional Counseling</td>
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9/23/93
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<tr>
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<td>Levi Strauss</td>
<td>Early Intervention-San Quentin</td>
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<td>Step II Educational-Vocational Project</td>
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<td>Kaiser Foundation</td>
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<td>Youth Advocates</td>
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<td>State</td>
<td>HIV Youth Peer Education</td>
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<td>Marin Community Foundation</td>
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9/23/93
HISTORY

The Marin AIDS Advisory Commission was established by the Marin County Board of Supervisors in September 1987 following the adoption of the first Marin AIDS Response Plan. The purpose of the Commission is to advise the Marin Department of Health and Human Services and the Board of Supervisors on the development, implementation and coordination of AIDS programs and services.

Commissioners include representatives of various AIDS service organizations, drug treatment programs, the Health Council, Medical Society, and Hospital Association, agencies serving youth, low income, and ethnic populations as well as persons living with HIV/AIDS.

To satisfy the requirements of Title II, the Marin HIV CARE Consortium was established in May, 1991. In September, 1991 the Commission voted to change its by-laws to expand its membership and merge with the Consortium. This merger facilitated the coordination of funding decisions for Title I and II monies.

The by-laws were also recently changed to add the HIV+ Community Advocates Committee to the list of standing committees. The standing committees are as follows:

Executive Committee - Composed of the Chair or Co-Chairs of the Commission and the Chairs of the standing committees. The Committee’s charge is to provide oversight and coordination of the work of the Commission.

Direct Services Committee - The Committee’s charge is to review the needs of people with HIV in Marin, identify barriers to care, and to promote cooperation among agencies delivering services.

Budget and Planning - The Committee’s charge is to oversee, coordinate, and consolidate planning efforts of all components of the Commission. It advocates for implementation of the AIDS Action Plan.

Prevention and Education - The Committee’s charge is to monitor HIV prevention and education work in Marin and to advocate for high quality prevention and education service delivery.

HIV+ Community Advocates Committee - The Committee’s charge is to provide a safe and confidential forum for persons living with HIV/AIDS to advocate to the Commission for responsible AIDS service provision.

The ad hoc Committees include the Skilled Nursing Facility Committee, Fundraising, Committee, and Legislative Committee.

Meetings are held the fourth Thursday of the month and they are open to the public. Meetings are generally from 4:00 p.m. to 6:00 p.m. and are held in Conference Rooms 3 and 4 at Kaiser Permanente in San Rafael. Contact the Marin County AIDS Program at (415) 499-7804 for further details if you are interested in attending.
DIRECTORY

Marin County AIDS Resource Information

Adam's House Housing
507-1725

Center for Attitudinal Healing Mental Health Services
435-5022

Community Action Marin Social Services
457-2522

Hospice of Marin Health Care
927-2273

Innovative Housing Housing
457-4593

The Living/Dying Project Mental Health Services
456-3357

Marin AIDS Project Health Care, Social Services and Education and Prevention
457-2487

Marin County AIDS Program Anonymous HIV Antibody Testing
499-7515 for appointments

Marin County Specialty Clinic Health Care
499-7377

Marin Housing Authority Rental Assistance
491-2577

The Marine Humane Society Pet Services
883-4621

Marin Treatment Center Health Care, Education and Prevention
457-3755

Meals of Marin Food
457-4666

Spectrum Health Care, Education and Prevention
457-1129

Youth Advocates Education and Prevention
507-1590