

# Housing is **HIV Prevention and Health Care**

*Findings from the*

National Housing and HIV/AIDS Research Summit Series

Convened by the National AIDS Housing Coalition

*in collaboration with*

The Johns Hopkins Bloomberg School of Public Health

**Presented at the Georgia Coalition to End Homelessness**

**Fourth Annual Conference and Learning Institute**

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**Nancy Bernstine, Executive Director**

[www.nationalaidshousing.org](http://www.nationalaidshousing.org)



**“It would seem like a no-brainer to me that you need a roof over your head to maintain your health.”**

**—Cassandra Ackerman**

**HIV/AIDS Consumer Advocate & NAHC Board Member**



### **Research and Public Policy**

- Stories are important, but...
- To impact policy & funding decisions:
  - Science-based data on housing and HIV prevention and health outcomes is **IMPORTANT**
  - Science-based data on the cost-effectiveness of HIV/AIDS housing interventions is **ESSENTIAL**
- With evidence to back them, policy makers can secure the resources we need to serve people living with HIV/AIDS (PLWHA)



### **NAHC Housing and HIV/AIDS Research Summit Series**

- Unique venue for presentation and discussion of research findings relevant to housing policy
- Regular forum to gather & share what we know about housing and HIV prevention and care
- Researchers, policy makers, providers and consumers working together to develop public policy goals and action strategies
- Summit II (October 2006) brought together 160 participants, representing 24 states, DC & Canada



### **Summary of findings presented at Summits I & II**

- Research shows strong correlations of homelessness/unstable housing to greater HIV risk, poor health outcomes & early death
- Strong correlation between improved housing status and...
  - Reduction in HIV/AIDS risk behaviors
  - Access to medical care
  - Improved health outcomes
  - Savings in taxpayer dollars
- Citations for the research findings in this presentation available at [www.nationalaidshousing.org](http://www.nationalaidshousing.org)



### **Yet, housing remains the greatest unmet service need of PLWHA**

- 1.2 million PLWHA in the United States—half (500,000+) will need housing assistance during their illness
- The Federal Housing Opportunities for Persons with AIDS (HOPWA) program serves only 67,000 households/year nationwide—91% with incomes of less than \$1000 a month (60% less than needed to afford housing at Fair Market Rents)
- National research shows that housing is the greatest unmet service need of PLWHA



# Housing is HIV Prevention and Health Care

## Introduction

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### Overview of this presentation

- What the research tells us about:
  - HIV and homelessness
  - Housing and HIV prevention
  - Housing and health care
- Policy implications of these findings:
  - Beyond a risky person paradigm
  - Housing interventions work
  - Housing is a sound public investment
- What's next:
  - The HUD/CDC Housing and Health (H&H) Study
  - Transforming research into policy initiatives



*HIV and  
Homelessness*



## **Homelessness—a major risk factor for HIV infection**

- Rates of HIV infection are 3 to 16 times higher among persons who are homeless or unstably housed, compared to similar persons with stable housing
- 3% to 10% of all homeless persons are HIV positive (10 times the rate in the general population)



## **HIV—a major risk factor for homelessness**

- Up to 70% of all PLWHA report a lifetime experience of homelessness or housing instability
- Up to 16% of all PLWHA in some communities are homeless—sleeping in shelters, on the street, or in a car



## **Housing—a matter of life and death for PLWHA**

- All-cause death rate among homeless PLWHA five times the death rate for housed PLWHA
- Death rate due to HIV/AIDS seven to nine times the death rate due to HIV/AIDS among the general population
- Homeless PLWHA three times as likely to be outside medical care than housed PLWHA



*Housing and  
HIV Prevention*



# Housing is HIV Prevention and Health Care

## Housing and HIV Prevention

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### **Housing status predicts HIV risk**

- Among persons at high HIV risk, homeless and unstably housed persons are significantly more likely to become HIV infected
- Research shows a direct relationship between housing status and risk behaviors among extremely low income HIV+ persons with multiple behavioral issues
- Homeless or unstably housed persons were two to six times more likely to use hard drugs, share needles or exchange sex than stably housed persons with the same personal and service use characteristics



# Housing is HIV Prevention and Health Care

## Housing and HIV Prevention

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### **Housing is HIV Prevention**

- Research shows a strong association between change in housing status and risk behavior change
- Over time, persons who improved housing status reduced risk behaviors by half; while persons whose housing status worsened over time were 4 times as likely to exchange sex
- Access to housing also increases access to antiretroviral medications, which lower viral load & may reduce the risk of transmission



*Housing and  
Health Outcomes*



# Housing is HIV Prevention and Health Care

## Housing and Health Outcomes

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### **Lack of stable housing = lack of treatment success**

- Homeless PLWHA compared to stably housed:
  - Worse mental, physical & overall health
  - More likely to be uninsured, hospitalized & use ER
  - Lower CD4 counts & less likely to have undetectable viral load
  - Fewer ever on ART, and fewer on ART currently
  - Self-reported adherence significantly lower
- Housing status more significant than individual characteristics as a predictor of health care access & outcomes



# Housing is HIV Prevention and Health Care

## Housing and Health Outcomes

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### **Housing improves access to health care**

- Receipt of housing services independently associated with improved health care access
- Homeless/unstably housed PLWHA whose housing status improved over time were:
  - Five times more likely to report a recent HIV outpatient visit
  - Six times more likely to be receiving anti-retroviral therapy
- Controlling for demographics, health status & receipt of case management



# Housing is HIV Prevention and Health Care

## Housing and Health Outcomes

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### **Housing improves health outcomes**

- Provision of housing is directly related to continuity of care and better health outcomes
- Stable housing found to predict anti-retroviral therapy (ART) participation and adherence
- Number of months on ART and level of adherence directly related to lower viral loads and reduced mortality among extremely poor and homeless people living with HIV/AIDS



*Beyond a  
“Risky Person”  
Paradigm*



# Housing is HIV Prevention and Health Care Beyond a “Risky Person” Paradigm

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## **Risky contexts vs. risky persons**

- Improvement in housing situation is associated with reduction in HIV risk behaviors and positive change in medical outcomes
- Data show strong relationship between housing status and HIV risk and health outcomes, controlling for other client characteristics, health status, and service use variables
- Findings suggest that the condition of homelessness, and not simply individual traits and habits, influence risk behaviors and health service utilization



# Housing is HIV Prevention and Health Care Beyond a “Risky Person” Paradigm

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## Housing—a structural HIV prevention & care intervention

- HIV prevention and health care interventions that emphasize individual-focused factors are effective but not sufficient
- Effectively addressing HIV risk & health care disparities requires attention to structural factors—environmental or contextual factors that influence health
- Housing affects an individual’s ability to avoid exposure to HIV; an HIV-positive individual’s ability to avoid exposing others to HIV; and the ability to access & adhere to care



*Housing  
Interventions  
Work*



# Housing is HIV Prevention and Health Care

## Housing Interventions Work

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### **Housing assistance works to create stability & improve health**

- New reporting by the federal HOPWA program shows high levels of stability at low per-unit costs:
  - 89% of households receiving average annual rental assistance of \$3,750 stable after one year
  - 79% of residents of supportive housing stable at an average annual cost of \$9,000
- Supportive housing enables chronically homeless persons to achieve and maintain stability despite serious medical & psychosocial issues
- Study projects show improved health and reduced reliance on unnecessary emergency & inpatient care



# Housing is HIV Prevention and Health Care

## Housing Interventions Work

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### **Low-demand “housing first” models work**

- “Housing first” or “low-demand” housing models place persons with substance use and/or mental health issues directly into permanent housing without requiring sobriety
- Growing evidence shows that these programs achieve housing and service use outcomes comparable to traditional abstinence-only supportive housing
- Low-demand housing programs that enrolled “more challenging” consumers did not see worse housing outcomes, demonstrating that “housing readiness” is not a good predictor of outcomes



*Housing Is  
A Sound Public  
Investment*



# Housing is HIV Prevention and Health Care

## Housing Interventions Work

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### **Investments in housing reduce other public costs**

- Preliminary evidence that supportive housing for PLWHA & other disabilities sharply reduces costly emergency & inpatient services
- Such savings have been found to offset up to 95% of the cost of supportive housing
- These cost-offset analyses support the provision of housing even before taking into account the costs of heightened HIV risk & treatment failure among homeless PLWHA



# Housing is HIV Prevention and Health Care

## Housing Interventions Work

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### **Housing is a cost-effective HIV prevention intervention**

- Each prevented HIV infection saves over \$300,000 in life-time medical costs
- Findings from an ongoing HUD/CDC study indicate that housing is a cost-saving and cost-effective HIV prevention intervention
- This makes housing costs a sound use of limited public resources



Housing is HIV Prevention and Health Care

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*The HUD/CDC  
Housing & Health  
Study*

[www.nationalaidshousing.org](http://www.nationalaidshousing.org)



# Housing is HIV Prevention and Health Care

## The HUD/CDC Housing & Health Study

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**Study Goal:** assess the ability of housing to:

- (1) reduce the risk of HIV transmission
- (2) improve the health of PLWHA



# Housing is HIV Prevention and Health Care

## The HUD/CDC Housing & Health Study

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### **H&H findings will compare**

#### **Stably Housed**

- Viral Loads
- CD4 Counts
- Access to Care
- Care Costs
- Risk Behaviors

#### **Homeless/Unstably Housed**

- Viral Loads
- CD4 Counts
- Access to Care
- Care Costs
- Risk Behaviors



# Housing is HIV Prevention and Health Care

## The HUD/CDC Housing & Health Study

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### **Housing & Health Study**

- Ongoing large-scale longitudinal research
- Conducted by HUD and the CDC
- First effort of its kind to rigorously evaluate housing as a structural prevention & health care intervention for homeless/unstably housed PLWHA
- Detailed results to be discussed at NAHC Summit III in March 2008!



*Transforming Research  
into Policy Initiatives*



# Housing is HIV Prevention and Health Care

## Transforming Research into Policy Initiatives

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### **Summit outcome: A re-visioned housing & HIV/AIDS policy agenda**

- **Make subsidized, affordable housing available** to all low-income people living with HIV/AIDS (including supportive housing for those who need it)
- **Make housing assistance a top prevention priority**, since housing is a powerful HIV prevention strategy
- **Incorporate housing as a critical element of HIV health care**
- **Collect & analyze data** to assess the impact and effectiveness of housing as an independent structural HIV prevention and healthcare intervention



# Housing is HIV Prevention and Health Care

## The HUD/CDC Housing & Health Study

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### **NAHC action strategies**

- **Shift the HIV/AIDS paradigm** to include structural risk factors such as homelessness and unstable housing
- **Promote structural interventions** that include housing as a key component of HIV prevention and health care, including “housing first” low demand housing models
- **Continue research** to deepen our understanding of the link between housing and health



# Housing is HIV Prevention and Health Care

## Transforming Research into Policy Initiatives

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### **Take action nationally!**

- Demand full funding for programs for affordable housing for PLWHA and other disabling conditions, including HOPWA
- Ask Congress to acknowledge the critical interconnection of housing & HIV prevention & health care
- Urge Congress to enact the National Housing Trust Fund as a dedicated source of funding for low-income housing
- Call for passage of the Second Chance Act, to address barriers to housing for persons leaving prison and jail
- Support the Services for Ending Long Term Homelessness Act to fund services in supportive housing



# Housing is HIV Prevention and Health Care

## Transforming Research into Policy Initiatives

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### **Take action locally!**

- Get informed—study the research
- Gather your own facts—document local need & the results of housing programs
- Spread the word—share research findings & with local data with your national, state and local policy makers
- Make sure your local housing and health planning processes are informed by the facts
- And...



## *Stay Connected!*

- To learn more about the Summit Series and find out how to get involved in advocacy efforts, go to: [www.nationalaidshousing.org](http://www.nationalaidshousing.org)
- ***Save the date!*** Summit III will be held March 5th -7th, 2008, in Baltimore



# Housing is HIV Prevention and Health Care

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