

The National AIDS Housing Coalition

HOPWA 2010 Budget Request: NAHC recommends \$360 million.

This amount will fund an additional 12,000 households, four times as many as added in FY2008

2010 ACTUAL HIV/AIDS HOUSING NEED

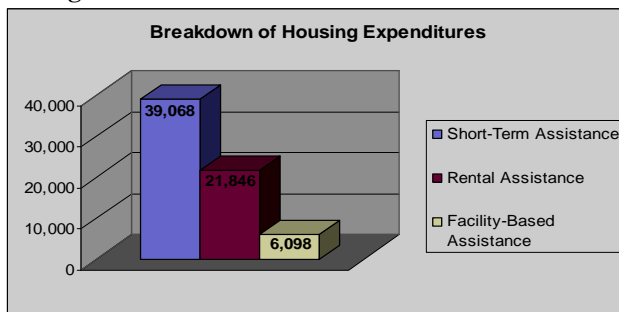
| | |
|---|----------------------|
| Estimated Number of People Living with HIV/AIDS | 1,200,000 |
| Percentage of People living with HIV/AIDS needing some form of housing assistance | 72% ¹ |
| Number of Households Potentially Served | 864,000 |
| Average Annual Housing Choice Voucher Cost | 7,500 |
| Total FY2009 Actual Need | \$3.2 billion |

To remain on target doubling the number of households added to HOPWA during FY2008, NAHC proposes multi-year funding of \$405 million in FY2011 and \$450 million in FY2012. With more than 200,000 low income people with HIV/AIDS in need of housing assistance, based on the 2005 HIV Cost and Utilization Services Study, this multi-year strategy will permit some modest growth in existing programs to accommodate growing need.

In 1992, the National AIDS Commission reported that housing serves as a base from which to receive care. The Housing Opportunities for Persons with AIDS (HOPWA) program was created to address these realities.

- HOPWA housing assistance helps prevent homelessness and creates access to medical care and support services for individuals and families affected by HIV/AIDS. There is still the perception that the HIV/AIDS Epidemic is under control, but in reality, AIDS is still an active crisis. In August 2008, the CDC presented new information on annual HIV infections. About 56,000 people became infected with HIV in the past year in the U.S., which translates to about 40% more cases than originally estimated. Experts estimate that over half of people living with HIV/AIDS will need some form of housing assistance during the course of their illness and national research has shown that **housing is the greatest unmet service need** for people living with the disease. Data suggests that approximately 72% of PLWHA have incomes below \$30,000 and with the weakening economy the number in need is likely to grow..
- In FY 2008, HOPWA funded housing assistance and housing-related supportive services through 127 formula grants and 105 competitive grants including 9 new and 96 continuing.

See Figures 1 & 2



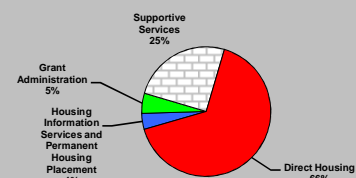
(Figure 1)

- The need for stable and affordable housing is more urgent than ever as more people are living longer with HIV/AIDS and housing costs skyrocket. Improved drug therapies and medical care have dramatically reduced the number of AIDS deaths. According to the National Low Income Housing Coalition's *Out of Reach* study, the 2008 national housing wage is \$17.31. An American worker must earn this hourly wage working 40 hours per week 52 weeks a year to afford housing at the fair market rent for his or her family. According to HUD, 91% of HOPWA clients have family incomes less than \$1,000 per month, roughly 60% less than what is needed to afford housing, paying 30% of their income for rent.

• Housing as prevention

Important new research demonstrates a direct and independent relationship between improved housing status and reduction in HIV risk behaviors among HIV positive persons with multiple behavior issues, highlighting the significance of housing as an exciting new structural intervention to reduce the spread of HIV. Homeless persons face enormous pressures of daily survival needs that supersede efforts to reduce HIV risk, as well as multiple barriers to risk reduction resources. Homeless or unstably housed persons were two to six times more likely to use hard drugs, share needles, or exchange sex than stably housed person with the same personal and service characteristics. Access to housing also increases access to antiretroviral medications, which lower viral load and may reduce the risk of transmission.

- HIV/AIDS disproportionately affects people of color, and the poor and those from the south. (2) Although African Americans make up only 12% of the U.S. population, in 2005 they accounted for nearly half of the new HIV/AIDS diagnoses. AIDS is now the leading cause of death for African American women ages 25-34. Recent research also shows a strong correlation between higher AIDS rates and lower income. These rates may be affected by lack of access to high-quality medical care and HIV prevention education. The South has the highest number of new AIDS diagnoses in the U.S. as a region. Many areas face ongoing poverty and discrimination, placing individuals and communities at elevated risk of infection. Unlike the early days of the epidemic, when outbreaks were concentrated in urban areas, a greater proportion of the southern population, including PLWHA, live in rural areas.



National use of HOPWA Funds: 2006 (figure 2)

\$360 million for FY2010 will:

Reduce waiting lists for HOPWA housing ▪ Assist communities in developing new housing for poor individuals with HIV/AIDS and their families ▪ Provide rental assistance ▪ Establish strategic housing plans ▪ Help the thousands of low-income people receiving assistance through the Ryan White CARE Act get the housing assistance vital to the success of their medical treatments ▪ Make a minimal level of supportive services available to keep people in their housing and fill gaps in comprehensive care.

HOPWA Funding 2005-2009
(in millions \$)

HIV/AIDS Housing Need

A snapshot from across the country

AIDS housing need remains at crisis levels throughout the country. Many waiting are homeless or unstably housed and multiply diagnosed with mental health, substance abuse and other health challenges. Rather than hold out false hope, in many regions providers don't maintain waiting lists. A sample of only 12 NAHC members reveals 4000 people with HIV/AIDS waiting for transitional or permanent housing, not including their family members. For example:

- In **Alabama**, while 7,242 people with HIV/AIDS and their families receive HOPWA and other assistance. There are currently 26 families on a waiting list for Tenant Based Rental Assistance.
- In the dead of winter on January 30, 2008, communities across **Connecticut** conducted the second annual statewide count of homeless individuals and families. The point in time count found that homelessness had increased by 13% from last year's count.
- In **Washington, D.C.** there is a shortage of 13,152 rental units affordable to extremely low income people. The wait list is at 278 for PLWHA. There are many more waiting to be added to the waitlist. There is only budgeted support for 320 on permanent housing long term assistance vouchers.
- In **Delaware**, as of World AIDS Day, 2008, there are 324 persons living with HIV/AIDS waiting on a list for HOPWA funded housing.
- In **San Francisco**, the Client Services Director puts the waitlist number at 2600. Some persons have been on the wait list for at least 10 years. This list has been closed to new applicants since November 2001. Approximately 45% of people on the Housing wait list report that they are homeless or have a history of homelessness and over 50% have an income below \$1,000 per month.
- In **Hawaii**, over 100 documented PLWHA on the wait-list at Gregory House Programs. This does not accurately count all those with HIV/AIDS in need of housing services. Section 8 Housing Choice Voucher Program administered by the Hawaii Public Housing Authority, has been closed to new applicants since May 2005, and is expected to remain closed until 2015.
- In **Colorado**, there is currently a waitlist of 65 for HOPWA units. Section 8 waitlist is closed and not expected to open until summer 2009.
- In 2008, **New York's** Options for community Living/Inc.'s Community Follow up Program-for individuals and families with HIV or AIDS received approximately 28 referrals per month. With 430 clients served so far in 2008, half were not in permanent housing.

| Fiscal Year | Formula Allocations | Competitive Grants | Technical Assistance | Total |
|-------------|---------------------|--------------------|----------------------|---------|
| 2005 | \$251.3 | \$27.9 | \$2.4 | \$281.7 |
| 2006 | \$256.2 | \$28.5 | \$1.5 | \$286.1 |
| 2007 | \$256.2 | \$28.5 | \$1.5 | \$286.1 |
| 2008 | \$267.4 | \$29.7 | \$1.5 | \$300.1 |
| 2009 | unknown | unknown | unknown | \$315* |

*Senate Appropriations Committee approved a \$15 m. increases over FY2008 enacted and FY 2009 House-passed level to accommodate "...increased rental and other associated inflationary costs." S. Rep. 110-418, p. 176 (7/10/2008).

Data-Based Evidence Presented at the third national HIV Research Summit Confirms Housing's Impact in the Continuing HIV Epidemic³

AIDS Housing is:

A Basic Human Right

"The available research makes it readily apparent that access to adequate housing profoundly affects the health of Americans who are at risk for or living with HIV. Sadly, much of the public health community has been slow to recognize this fact and take action to address it." Homelessness and unstable housing are strongly associated with greater HIV risk, inadequate health care, poor health outcomes, and early death. 4

• **A Necessary Component of HIV Health Care**

Among persons at highest risk for HIV, housing status is increasingly identified as a determinant of health outcomes. A long-term ongoing study of people with HIV/AIDS in NYC demonstrates that over a 12 year period, receipt of housing assistance was one of the strongest predictors to accessing HIV primary care, maintaining continuous care, receiving care that meets clinical practice standards and entry into HIV care among those outside or marginal to the health care system. 5

• **A Tool to End the AIDS Crisis by Preventing New Infections**

HIV risk reduction interventions shown to be effective in the general population are less effective among persons homeless/unstably housed than among housed counterparts-including counseling, needle exchange, and other behavioral interventions. 6

HOPWA, Continues to be one of HUD's Most Efficient and Cost-Effective Programs.

During program year 2008, for example, 90% of HOPWA clients receiving rental assistance achieved stability. In September 2008 HOPWA received an "effective" PART (Performance Assessment Rating Tool) rating from the Office of Management and Budget. The program scored high marks in the areas of Program Purpose, Design and Results and 100% scores on Planning and Management. <http://www.whitehouse.gov/omb/expectmore/rating/effective.html>

1. HIV Cost & Services Utilization Study (HCSUS)1996

2. Krawczyk, C.S., Funkhouser, E., Kilby, J.M., & Vermund, S.H., Delayed Access to HIV Diagnosis And Care: Special Concerns For the Southern United States, AIDS Care, 2006
3. Housing & HIV/AIDS Research Summit III, Baltimore, MD, March 2008 convened by the National AIDS Housing Coalition in collaboration with the Department of Health, Behavior and Society, Johns Hopkins Bloomberg School of Public Health.
4. Wolitski, R.J., Kidder, D.P., & Fenton, K.A. (2007). HIV, homelessness and public health: critical issues and a call for increased action, *AIDS and Behavior*, 11(6)/Supp 2:S167-S171
5. Aidala, A.A., Lee, g., Abramson, D.M., Messeri, P., & Siegler, A. (2007). Housing need, housing assistance, and connection to medical care, *AIDS and Behavior*, 11(6)/Supp 2:S101-S115.
6. E.g. Aidala et al, (2005), Housing status and HIV risk behaviors: Implications for prevention and policy. *AIDS and Behavior*, 9(3):251-265; Wenzel et al, (2007) Sexual risk among impoverished women: Understanding the role of housing status. *AIDS and Behavior*, 11(6)/Supp 2:S9-S20; German et al, (2007). Residential Transience and HIV Risk Behaviors among Injection Drug users. *AIDS and Behavior*, 11(6)Supp 2:S21-S30; Kipke et al (2007). Residential status as a risk factor for drug use and HIV risk among young men who have sex with men. *AIDS and Behavior*, 11(6)/Supp 2:S56-69

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