

HIV/AIDS HOUSING

Preventing HIV Transmission

Make housing homeless persons a top prevention priority, as housing is a powerful, cost-effective prevention strategy.

– Policy Imperative from the Housing and HIV/AIDS Research Summit Series



Research shows that **persons with stable housing are less likely to engage in risky behaviors and more likely to reduce HIV risk** than their counterparts who are homeless/unstably housed, highlighting the potential of housing as a structural intervention to reduce the spread of HIV.

HOUSING STATUS PREDICTS HIV RISK

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.¹

Among persons at highest HIV risk due to injecting drug use or risky sex, **those without a home are significantly more likely to become HIV infected** over time.²

Homeless or unstably housed persons are consistently found to be **2 to 6 times more likely to use hard drugs, share needles or engage in high-risk sex than stably housed persons** with the same personal and service use characteristics.³

An ongoing study of at-risk youth in Vancouver found significantly **lower levels of condom use and greater numbers of sexual partners among homeless youth** as compared to those with more stable housing.⁴

Homeless women were 2 to 5 times more likely than their housed counterparts to report multiple sex partners in the last 6 months, in part due to recent victimization by physical violence.⁵

HOUSING IS HIV PREVENTION

Over time, **persons who improved their housing status reduced risk behaviors by half**, while persons whose housing status worsened were 4 times as likely to exchange sex.⁶

Access to **housing also improves access and adherence to antiretroviral medications**, which lower viral load and reduce the risk of transmission.⁷

Proven **HIV risk reduction interventions are less effective among persons who are homeless/unstably housed** than among their housed counterparts - including counseling, needle exchange, and other behavioral interventions.⁸

HOUSING IS A COST EFFECTIVE HIV PREVENTION INTERVENTION

Preventing one new HIV infection in the US saves an estimated \$303,000 in discounted lifetime medical costs.⁹

In terms of medical cost savings alone, research shows that **a housing intervention that prevents just 1 new transmission per 64 clients** is cost-effective as an HIV prevention strategy, and preventing 1 transmission per 19 clients makes the housing investment cost-saving overall.¹⁰

THE HOUSING AND HIV/AIDS RESEARCH SUMMIT SERIES

Since 2005, the Housing and HIV/AIDS Research Summit Series has provided a unique forum for presentation and discussion of research findings on the role of housing in HIV prevention and care. Summit IV, held June 3–5, 2009, in Washington DC, was the first North American Summit, convened jointly by the National AIDS Housing Coalition (NAHC) and the Ontario HIV Treatment Network (OHTN), working in collaboration with the Johns Hopkins Bloomberg School of Public Health. Summit IV brought together 200 researchers, policy makers, service providers and people living with HIV/AIDS, representing 24 U.S. states, six Canadian provinces, West Africa and Haiti. For information on the Summit Series and to read Summit materials, visit www.nationalaidshousing.org.



HOUSING IS

The Greatest Unmet Need of Persons with HIV/AIDS

“Taken as a whole, 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.”¹

The CDC estimates that there are currently 1.2 million people living with HIV/AIDS (PLWHA) in the United States, and over 56,000 persons become newly infected each year. AIDS housing experts estimate that about half of all PLWHA—over 500,000 will need some form of housing assistance during the course of their illness.

At current funding levels, the federal Housing Opportunities for Persons with AIDS (HOPWA) program serves only about 70,000 households per year.

There is not a single county in the US where a person who relies on federal Supplemental Security Income (SSI) payments (\$674 in 2009) can afford even a studio apartment.



WHAT'S NEEDED

A Data-Driven HIV/AIDS Housing Policy Agenda

- ▶ Make affordable housing available to all persons with HIV.
- ▶ Make housing assistance a top HIV prevention priority.
- ▶ Incorporate housing as a critical element of HIV health care.
- ▶ Continue to collect the data needed to inform HIV housing policy.

1 Aidala, A. & Sumartojo, E. (2007). Why housing? *AIDS & Behavior*, 11(6)/Supp 2: S1-S6.

2 See: Wolitski, R., Kidder, D. & Fenton, F. (2007). HIV, homelessness, and public health: Critical Issues and a call for increased action. *AIDS & Behavior*, 11(6)/Supp 2: S167-S171.

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and Behavior, 11(6)/Supp 2: S56-S69; Salazar, L., Crosby, R., Holtgrave, D., Head, S., Hadscock, B., Todd, J., Shouse, R. (2007). Homelessness and HIV-associated risk behavior among African American men who inject drugs and reside in the urban south of the United States. *AIDS and Behavior* 11(6)/Supp 2: S70-S77.

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6. Aidala, et al., 2005.

7 Wolitski, et al., 2007; Holtgrave, D. and Curran, J. (2006). What works, and what remains to be done, in HIV prevention in the United States. *Annual Review of Public Health*, 27: 261-275.

8 Des Jarlais, D., Braine, N., Friedmann, P. (2007). Unstable housing as a factor for increased injection risk behavior at US syringe exchange programs. *AIDS and Behavior* 11(6) Supp 2: S78-S84; Elifson, K., Sterk, C., Theall, K. (2007). Safe living: The impact of unstable housing conditions on HIV risk reduction among female drug users. *AIDS and Behavior* 11(6) Supp 2: S45-S55.

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M., Seage, G. 3rd, Moore, R., Freedberg, K. (2006). The lifetime cost of current human immunodeficiency virus care in the United States. *Medical Care*, 44(11): 990-7.

10 Holtgrave, D., Briddell, K., Little, E., Bendixen, A., Hooper, M., Kidder, D., Wolitski, R., Harre, D., Royal, S., Aidala, A. (2007). Cost and threshold analysis of housing as an HIV prevention intervention. *AIDS and Behavior* 11(Supplement 2): S162-S166.

11 Wolitski, R., Kidder, D. & Fenton, F. (2007). "HIV, homelessness, and public health: Critical Issues and a call for increased action." *AIDS & Behavior*, 11(6)/Supp 2: S167-S171.

12 Out of Reach 2007-2008, National Low Income Housing Coalition (www.nlihc.org).



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