Presentation for HIV Health Improvement Affinity Group

December 7, 2016
Rita Flegel, Director, Office of HIV/AIDS Housing
Health Services Center Service Area

- 14 Northeast Alabama Counties
- HSC’s service area is larger than the District of Columbia, Connecticut, and Rhode Island combined
HSC Housing for PLWHA

- Shelter (8 beds)
- Rental Assistance Vouchers (approximately 30 vouchers)
- Permanent Housing Placement (first month rent)
- Permanent Housing Units (6 units)
- Specialty short-term housing (1 unit)
- Short-Term Rent, Mortgage & Utility Assistance
- Supportive Services
Outcomes and Lessons Learned

• In 2007, the year HSC started providing housing assistance, approximately 16% of HSC clients (60 of 378) were reported in CareWare as “unstably housed.”

• In 2011, approximately 8% of HSC clients (41 of 470) were reported in CareWare as “unstably housed.”

• In 2012 HSC served 173 people in households living with HIV with direct housing assistance (i.e. a bed).

• There is not enough funding to meet the need, with waiting lists for most programs.
Why HOPWA?

HIV is a public health risk and a highly communicable disease. Housing is a proven, effective tool in preventing the spread of HIV by improving health outcomes and quality of life for PLWHA.

50% of PLWHA will have some form of a housing crisis in their lifetime.
Housing’s Impact on HIV Health Outcomes

**Housing Instability**
- Delayed diagnosis
- Increased risk of acquiring & transmitting
- Delayed entry into care
- Lack of regular care visits
- Delayed use of ART
- Less likely to be virally suppressed

**Housing Stability**
- Reduced risky behaviors
- Increased rates of care visits
- More likely to return to care
- More likely to receive ART
- More likely to achieve viral suppression
- Reduced use of ER and public resources
Office of HIV/AIDS Housing Vision

To elevate housing
as a structural intervention in ending
the AIDS Epidemic
in the United States.
HOPWA Program Origin and Purpose

ORIGIN.....
The Housing Opportunities for Persons With AIDS (HOPWA) Program was created to address the housing needs of low-income individuals living with HIV/AIDS and their families.

Established by the AIDS Housing Opportunity Act of 1992 (42 U.S.C. 12901)

PURPOSE.....
To provide state and local governments with resources and incentives for devising long-term strategies to develop a range of housing assistance and supportive services for low-income persons living with HIV/AIDS and their families to overcome key barriers to stable housing - affordability and discrimination.
HOPWA Structure

- **HOPWA**
  - Formula 139 Jurisdictions
  - Competitive 92 grantees

- **Formula**
  - 90%
  - State and Local Governments

- **Competitive**
  - 10%
  - State and Local Governments & Non-Profits
HOPWA Client Eligibility

Client Eligibility Requirements

- HIV/AIDS Diagnosis
- Documented Housing Need
- Gross incomes at or below 80% of the Area Median Income (i.e. Low Income)

Jurisdictions may impose more stringent requirements

- Based on local housing availability and community need
- Planning decisions
- HUD approval
HOPWA Eligible Activities

- Both Facility-Based and Scattered site
- Permanent Supportive Housing
- Emergency Housing
- Transitional/Short-term Housing
- Supportive Services
Who HOPWA Serves

- Approximately **55,000** are provided with housing assistance under the HOPWA program annually.

- **9 out of 10** HOPWA housing beneficiaries are extremely low or very low income.

- Among new clients served last year, approximately **4,400** (18%) were homeless and HIV-positive.

- Over **60%** of the HOPWA-eligible individuals served under the program are male and **more than half** are between the ages of 31 and 50.

- **51%** identify as Black or African American, **35%** identify as White, and **17%** identify as having Hispanic/Latino ethnicity.
Access to Care and Support

- Had a Housing Plan: 94%
- Had Contact with Case Manager: 94%
- Had Contact with Primary Care: 89%
- Accessed Medical Insurance: 90%
- Accesssed Income: 83%
- Obtained a Job: 5%
Released in 2010 and updated in 2015 with 4 major goals:

1. Reduce new infections;
2. Increase access to care and improve health outcomes for people living with HIV;
3. Reduce HIV-related health disparities and health inequities; and
4. Achieve a more coordinated national response to the HIV epidemic.
Why is Collaboration Important?

- Need is greater than available resources
- Coordination across funding streams:
  - Leads to more efficient use of funds and prevents duplication of services
  - Results in Improved quality of services and streamlined service delivery
  - Draws upon expertise of various providers (with varying purposes and histories)
  - Allows for a comprehensive approach to HIV/AIDS care and services.
HUD’s NHAS Action Items: Cross-Agency Collaboration

• Work with DOJ to identify models of improved service integration among HIV housing providers and sexual assault, domestic violence, dating violence, and stalking service providers.

• Work with HRSA/HAB to identify models for the integration of housing and HIV care data systems

• Continue to disseminate information and encourage usage of the joint HUD/DOL Getting to Work Curriculum
VAWA/HOPWA Project Demonstration

• 2012 - White House established an interagency working group to explore the intersection of HIV/AIDS, violence against women and girls, and gender-related health disparities – HUD named as member agency

• Resulted in DOJ/HUD collaboration on the “VAWA/HOPWA Project Demonstration”

• Incorporated into the NHAS as HUD/DOJ Action Item
VAWA/HOPWA Project Demonstration

- Awards announced July 2016 - more than $9 million to support 8 local programs across the country.

- Grantees will provide housing assistance and supportive services to low-income PLWHA who are homeless, or in need of transitional housing or other housing assistance, as a result of sexual assault, domestic violence, dating violence, or stalking.

- Innovative 3-year projects that will work to improve cross-agency planning, resource utilization, and service integration between the two service systems.
VAWA/HOPWA Project Demonstration

8 VAWA/HOPWA Grantees:

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<tr>
<th>State</th>
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<tr>
<td>California</td>
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<td>California</td>
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<td>City of Portland</td>
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Ryan White/HOPWA Data Integration

Addressing HIV Care and Housing Coordination through Data Integration to Improve Health Outcomes along the HIV Care Continuum Initiative:

• Partnership between HRSA’s HIV/AIDs Bureau and HUD’s Office of HIV/AIDS Housing
• Funded under HHS Secretary’s Minority AIDS Initiative Funding (SMAIF)
• Focus on integrating RWHAP and HOPWA data to improve the coordination of services for PLWHA who are unstably housed, or at risk for or experiencing homelessness.
5 Performance Sites selected for 2.5 year initiative:
• City of Hartford (CT) Health & Human Services Department
• Gregory House Programs (HI)
• Kansas City (MO) Health Department
• Palm Beach County (FL) Department of Community Services
• Cascade AIDS Project (OR)

RAND Corporation is providing support and capacity building assistance to the five selected sites and conducting the multisite evaluation.
Models of data system integration adopted by the performance sites include:

- Development of external data bridges and interfaces to interconnect CAREWare with HMIS
- Customization of CAREWare or HMIS to incorporate the corresponding data elements from either the housing or HIV care system

Data systems integration efforts are currently underway at each of the 5 sites.
Ryan White/HOPWA Data Integration

Data integration will lead to more coordinated patient care, supportive services, and housing services for PLWHA. Examples include:

- Dedicating staff or re-organizing staff efforts to coordinate housing and health care services for clients (e.g., care coordinators, coordinated case management, or enhanced peer navigation services);
- Increasing the efficiency of the referral process between Ryan White and HOPWA service providers;
- Streamlining intake and assessment forms to accurately identify unmet needs of clients seeking housing and HIV care services;
- Using integrated data to inform staff efforts to quickly identify and conduct targeted outreach with clients needing additional services or support; and
- Working across the Ryan White and HOPWA programs to find clients that are no longer engaged in care.
Getting to Work: A Training Curriculum for HIV/AIDS Service Providers and Housing Providers

• Jointly developed by HUD/DOL, in collaboration with the National Working Positive Coalition, with input from DOE, DOJ, and SAMHSA

• Recognizes that employment is a key component of serving the whole person and that employment leads to improved health outcomes for PLWHA

• Assists AIDS service providers in understanding HIV/AIDS in the context of employment and the different approaches to helping clients who are ready to work identify and achieve their related goals
HIV Housing Care Continuum Initiative

- HIV Care Continuum Initiative and Federal Working Group established by the White House in 2013 (incorporated into NHAS 2015)

- HUD assigned responsibility for a number of action steps including 5.4: HUD and HHS will provide technical assistance and trainings to better coordinate and align the provision of housing services with medical care for PLWHA.

- Based on the 5.4 action step:
  - “HOPWA White Paper” developed and published by the Office of HIV/AIDS Housing – jointly promoted with HRSA/HAB
  - HUD-National AIDS Housing Coalition-Collaborative Solutions, Inc. collaboration on HIV Housing Care Continuum Initiative to increase HOPWA grantees’ ability to measure and track client health outcomes along the HIV Care Continuum
Why Build an HIV Housing Care Continuum?

- Illustrate overall engagement in care and treatment for PLWHA receiving HIV housing assistance.
- Benchmark against national and community-level HIV Care Continuums.
- Identify successes and gaps in care and treatment experienced by PLWHA receiving HIV housing assistance.
- Improve health outcomes by implementing system and/or service enhancements to programs.
- Inform policy-makers on program development.
- Align with national initiatives
  - White House HIV Care Continuum Initiative (2013)
In 2015, the Office of HIV/AIDS Housing, the National AIDS Housing Coalition, and Collaborative Solutions, Inc., hosted a series of HIV Housing Care Continuum regional meetings

- Brought together teams of grantees and project sponsors, Ryan White providers, and health department surveillance staff to create community strategies for developing and implementing HIV Housing Care Continuums.
- Meetings took place in Chicago, IL, Washington, DC, Atlanta, GA, and Portland, OR.

HIV Housing Care Continuum webinar series and workbook were developed to share the information and resources presented at the regional meetings to a broader audience of HOPWA grantees and providers.

- The resources were designed to help HOPWA grantees develop strategies in their own communities to:
  - Improve ability to measure client health outcomes;
  - Create the strategic partnerships necessary to build a local HIV Housing Care Continuum; and
  - Utilize local data to benefit clients by demonstrating the link between housing and health and engaging in cross-system advocacy efforts.
Resources

HOPWA webpage (program info and resources, grantee performance profiles, grantee contact information, HOPWA Desk Officers, Ask-A-Question):
https://www.hudexchange.info/programs/hopwa/

Getting to Work Curriculum:
https://www.hudexchange.info/trainings/dol-hud-getting-to-work-curriculum-for-hiv-aids-providers/

HIV Housing Care Continuum Initiative Resources: