The National AIDS Housing Coalition

HOPWA 2009 Need: NAHC recommends $470 million

A $170 million increase will provide urgently needed housing assistance for an additional 40,000 people with HIV/AIDS and their families

2009 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	50%
Number of Households Potentially Served	600,000
Average Annual Housing Choice Voucher Cost	7,500
Total FY2009 Actual Need	**$4.5 billion**

Since 1992 the Housing Opportunities for Persons with AIDS Program (HOPWA) has provided a national safety net of housing and support services for people living with HIV/AIDS and their families. The Centers for Disease Control and Prevention (CDC) currently estimates that as many as 1.2 million people are living in the United States with a diagnosis of HIV or AIDS.

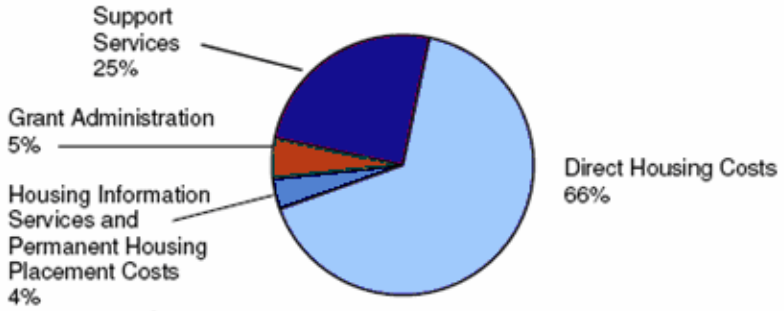
- HOPWA housing assistance **helps prevent homelessness and creates access to medical care and support services** for individuals and families affected by HIV and AIDS. Experts estimate that roughly half of people living with HIV/AIDS will need some form of housing assistance during the course of their illness and national research has shown that **housing is the greatest unmet service need** for people living with the disease.

Types of HOPWA Housing Assistance [4]

Type of Assistance	Avg. Annual Cost	% of Households Stable After One Year
Rental Assistance	$3,750	90%
Housing w/ On Site Support Services	$9,056	79%
Short term assistance	$811	44%

- In FY2007, the HOPWA program funded 31 competitive grants to nonprofit groups, state agencies, and local governments to provide housing and supportive services for low income people with HIV/AIDS and their families.

Distribution of HOPWA Expenditures: Program Year 2003



[2]Source: HUD Data provided to GAO, published in "Changes Needed to Improve the Distribution of Ryan White CARE Act and Housing Funds" (GAO Report, 2/06)

70% of HOPWA funds go directly to housing assistance and placement.

- **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.

- **New research demonstrates a strong link between housing and HIV prevention.** New CDC estimates are anticipated to significantly increase the estimated number of annual HIV infections to between 50,000 and 60,000. Improvements in housing status are strongly associated with lowered rates of HIV risk behaviors and increased likelihood of access and adherence to care. These findings suggest that housing may be an important, cost-effective method of preventing transmissions leading to improved individual and community health outcomes and reducing treatment and care costs.

- **HIV/AIDS disproportionately affects people of color, and the poor**. 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.

NAHC recommends an additional $170 million in HOPWA funding. $470 million for FY2009 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.

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 20 NAHC members reveals 4081 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 family members receive HOPWA and other assistance, more than 200 PWAs languish in shelters or on the streets in Birmingham alone. Thirty eight percent report at least one episode of homelessness following their HIV diagnosis.
- In **Boston**, 833 households, or 16.8% of reported HIV/AIDS cases receive housing assistance but 226 are waiting.
- Statewide in **Connecticut**, requests for housing increased 40% in 2007. Ninety-three percent of those seeking housing were turned away due to lack of space.
- In **Baltimore,** 505 PWAs were added to the HOPWA voucher waiting list during a one month period – Sept. 2007 bringing the total to 670 who are awaiting assistance.
- The **Portland, OR** EMA estimates that an additional 2,143 PWAs require a subsidy in addition to the 164 currently served.
- In **St. Louis**, 262 individuals, including 67 children, are awaiting assistance.
- In **Philadelphia**, the 146 PWAs needing housing have average waits from 6 to 15 months.
- In **San Francisco**, when the wait list was closed in 2001, 2000 PWAs were waiting though housing is consistently rated in needs assessments as one of the top three most needed services.
- In **Hawaii**, 101 PWAs waited for assistance during 2006-2007 while more than 10,500 names are on the now closed Section 8 waitlist for the city and county of Honolulu.
- In **Milwaukee, WI** 40% of very low income people living with HIV in Milwaukee are not eligible for housing support. For those who are eligible waiting lists can be as long as 5 years.

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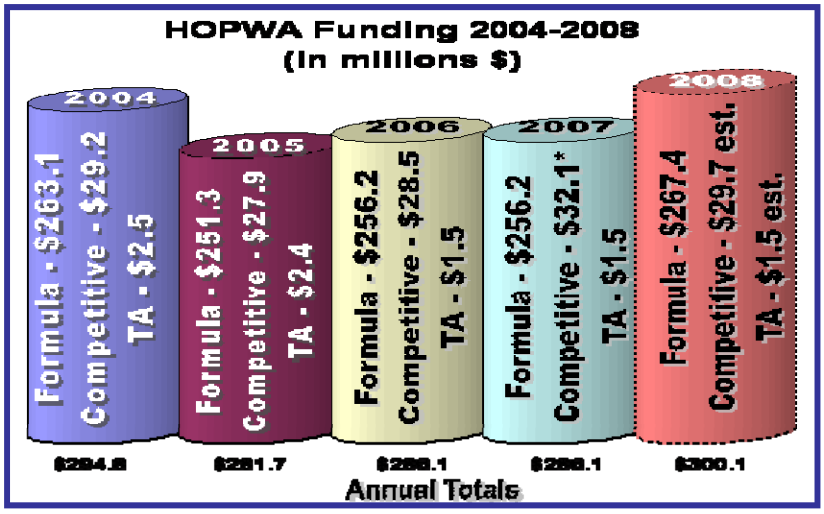

The approved FY2008 HOPWA appropriation of $300.1 million – the highest funding level in the program's history – will support the delivery of housing and related services to 70,500 households in 127 jurisdictions eligible for formula allocations. *The FY 2007 HOPWA competitive awards of $32.1 million include funds recaptured from prior year competitive awards.

AIDS Housing: Compelling Research Confirms Housing's role as a Cost-effective Tool in HIV Prevention and Treatment

Among the findings of research studies presented in the special housing supplement to the journal ***AIDS and Behavior***:

- Homeless or unstably housed persons were two to six times more likely to "have recently used hard drugs, shared needles or exchanged sex" than similar low-income persons who were stably housed.
- Receipt of housing assistance enabled homeless persons with substance use and mental health problems to achieve stability over time and to cease or reduce both drug related and sexual risk behaviors.
- Over a 12-year period, housing status and receipt of housing assistance consistently predicted entry and retention in HIV medical care, regardless of demographics, drug use, health and mental health status, or receipt of other services.

In addition, analyses from the soon-to-be-released CDC-HUD Housing and Health Study indicate that housing interventions for PLWHA are both **cost effective** and **cost-saving**; making housing costs a sound investment of public resources. [2]

Stable healthcare outcomes and reduced infection rates can be achieved through modest investments in housing:

- In 2006, HUD utilized a new HOPWA reporting format to examine 2004-2005 costs and 2005-2006 outcomes which found high levels of stability achieved at relatively low per-unit costs. [4]
- **HOPWA** clients exceeded the National Performance Goal of **80%** achieving housing stability/reducing risks of homelessness and participating in health care. [3]

1. *AIDS and Behavior*, Vol. 11, No. 6, Nov. 2007 Supplement. Abstracts available at http://www.springerlink.com/content/1090-7165.
2. Id., Holtgrave, David, et al, *"Cost and Threshold Analysis of Housing as an HIV Prevention Intervention"*.
3. HOPWA Update Fall 2007, HUD Office of Community Planning and Development, Office of HIV/AIDS Housing, *http://www.hud.gov/offices/cpd/aidshousing/programs/index.cfm*.
4. U.S. Department of Housing and Urban Development, *Housing Opportunities for Persons with AIDS* fact sheet, 2006 and Vos, David, *"Quantifying and Measuring Outcomes of Housing Interventions,"* NAHC Research Summit II presentation, 2006.