Breaking the Link Between Homelessness and HIV

Homelessness is both a cause and an effect of HIV infection.

People coping with homelessness are at greater risk of becoming infected with HIV and people living with HIV/AIDS experience high rates of housing loss and instability.

Homelessness increases the risk of HIV infection:

• The pressure of daily survival needs, exposure to violence, substance use as a way to cope with stress or mental health issues, and other conditions of homelessness make homeless and unstably housed persons extremely vulnerable to HIV infection.1
• The people most at risk of HIV – men who have sex with men, persons of color, homeless youth, IV drug users, and impoverished women – are significantly more likely to become HIV infected over time if they lack stable housing.2
• People who are homeless or unstably housed have HIV infection rates as much as 16 times higher than people who have a stable place to live.3

HIV infection increases the risk of homelessness:

• At least half of all people living with HIV/AIDS experience homelessness or housing instability.4
• Housing is the greatest unmet need of people living with HIV.5
• For many people with HIV, problems finding and keeping stable housing are exacerbated by discrimination related to HIV, sexual orientation, race, culture, mental health issues, substance use and/or involvement with the criminal justice system.6

For people with HIV/AIDS, housing is a matter of life or death:

• People with HIV/AIDS who are homeless or unstably housed have worse overall physical and mental health. Their CD4 counts are lower and their viral loads are higher. They are less likely to receive and adhere to antiretroviral therapy, and they are more likely to die prematurely.7
• Low-income people with HIV/AIDS who receive housing assistance have better access to health care services, their physical and mental health improves, and they live longer.8
• Over time, stable housing can significantly reduce avoidable emergency and hospital care. The savings in health care costs can offset the cost of housing interventions.9
**HOUSING IS THE GREATEST UNMET NEED OF AMERICANS LIVING WITH HIV/AIDS**

“...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.”

The number of persons currently living with HIV/AIDS in the United States, with 56,000 newly infected each year.

The number of households currently served by the federal Housing Opportunities for Persons with AIDS (HOPWA) program.

The number of Americans living with HIV who will need some form of housing assistance during the course of their illness.

The number of households with HIV in the U.S. that currently lack stable housing and have an unmet need for housing assistance.

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What’s needed: Evidence-based HIV/AIDS housing policy

- Make safe, affordable housing available to all people living with HIV
- Make housing assistance a top HIV prevention priority
- Include housing as a key component of HIV health care
- Continue to collect the data needed to inform HIV housing policy

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