



The North American  
Housing & HIV/AIDS  
Research Summit Series

Since 2005, the Summit Series has provided an innovative forum to present research on the relationship between housing and HIV prevention and care, and to discuss the policy implications of the research findings.

Researchers, policy makers, providers and consumers work together to develop evidence-based public policy goals and strategies.

The Summit Series is convened by U.S. National AIDS Housing Coalition (NAHC) and the Ontario HIV Treatment Network (OHTN), working in collaboration with and Johns Hopkins Bloomberg School of Public Health. Summit VI will be held **September 21-23, 2011** in New Orleans, LA

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# Housing is HIV Health Care

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For people living with HIV, housing is one of the strongest predictors of their access to treatment, their health outcomes, and how long they will live.

To obtain and benefit from life-saving HIV treatments, people living with HIV must have safe, stable housing.

### Lack of stable housing equals lack of treatment success:

People with HIV/AIDS who are homeless or unstably housed:

- Are more likely to enter HIV care late
- Have lower CD4 counts and higher viral loads
- Are less likely to receive and adhere to antiretroviral therapy
- Are more likely to be hospitalized and use emergency rooms
- Experience higher rates of premature death.<sup>1</sup>

Housing status has more impact on health outcomes than demographics, drug and alcohol use, mental health status or receipt of social services.<sup>2</sup>

### Improved housing is linked to better access to health care and better health outcomes:

People with HIV/AIDS who have stable housing are much more likely to access health services, attend primary care visits, receive ongoing care and receive care that meets clinical practice standards.<sup>3</sup>

Being stably housed is positively associated with:

- Effective antiretroviral therapy (HAART)
- Viral suppression
- Lack of co-infection with hepatitis C or tuberculosis
- Significant reductions in avoidable emergency and acute health care
- Reduced mortality.<sup>4</sup>

Homeless people with HIV in Chicago who received a housing placement were twice as likely to have an undetectable viral load 12 months later.<sup>5</sup>

### HIV housing interventions are HIV health care:

**84%** Proportion of unstably housed people with HIV who received a voucher for rental assistance who were stably housed at 18 months.<sup>6</sup>

**57%** The reduction in hospitalizations for people with HIV after they were stably housed.<sup>7</sup>

**35%** The reduction in emergency visits for people with HIV after they were stably housed.<sup>8</sup>

**80%** The reduction in mortality among homeless people with AIDS who received supportive housing.<sup>9</sup>

# 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."<sup>9</sup>

**1.1** MILLION The number of persons currently living with HIV/AIDS in the United States, with 56,000 newly infected each year.<sup>10</sup>

The number of households currently served by the federal Housing Opportunities for Persons with AIDS (HOPWA) program. **Less than 60,000**

**500,000** The number of Americans living with HIV who will need some form of housing assistance during the course of their illness.

**More than 140,000** The number of households with HIV in the U.S. that currently lack stable housing and have an unmet need for housing assistance.<sup>11</sup>

## 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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