



Housing Data:

An Interdisciplinary Approach to Improved Health Outcomes for PLWHA

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Disclosures

Presenter(s) has no financial interest to disclose.

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Learning Objectives

At the conclusion of this activity, the participant will be able to:

- Distinguish concrete ways to improve housing-related data collected through the SNA and client focus groups, as well as steps for meaningful analysis
- 2. Describe new ways to assess the housing stability of PLWH in caseloads or across communities
- 3. Discuss how housing stability impacts positive health outcomes
- Describe specific ways to use HIV housing data to advocate for PLWH locally in their communities





Obtaining CME/CE Credit

If you would like to receive continuing education credit for this activity, please visit:

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Housing and Health Outcomes

- Studies show that among persons at high risk for HIV infection due to injection drug use or sex with multiple partners, those without a stable home are more likely than others to contract HIV
- PLWH who are homeless are less likely to
 - Report good or excellent health
 - Take ART medication
 - Adhere to treatment
 - Have CD4 > 200
 - Achieve viral suppression



Housing IS an Intervention

Housing improves access to care, maintenance of care, and health outcomes along the care continuum

Stable, affordable housing is a strong predictor of well-being, employment, and education attainment

National HIV/AIDS Strategy cites housing as a critical structural intervention necessary to HIV prevention and care



Housing Impacts Health Outcomes

Housing Instability

- 1. Delayed diagnosis
- 2. Increased risk of acquiring and transmitting
- 3. Delayed entry into care
- 4. Delayed use of ART
- 6. Less likely to be virally suppressed

Housing Stability

- 1. Reduced risky behaviors
- 2. Increased rates of care visits
- 3. More likely to return to care
- 4. More likely to receive ART
- 5. More likely to be virally suppressed
- 6. Reduced use of ER and public resources



History of The CHANGE Coalition

Mission:

The Coalition of HIV/AIDS Nonprofits & Governmental Entities (CHANGE) advocates on behalf of persons living with or at risk of HIV infection to achieve improved health outcomes and systems change through collaborative prevention, testing diagnosis, linkage to care, retention in care, supportive services, and housing throughout the Greater New Orleans area.





CHANGE Coalition Key Players

- AIDS Service Organizations RW and HOPWA providers
- Ryan White and HOPWA grantees:
 - City of New Orleans Health Dept., Ryan White
 - City of New Orleans, Office of Community Development
 - State of LA, Office of Public Health, HIV/AIDS Program
 - Competitive HOPWA grantees:
 - UNITY of GNO
 - Odyssey House New Orleans
- New Orleans Regional AIDS Planning Council
- PLWH



CHANGE Coalition

Our primary methods focus on:

- Analysis of local data to document & support PLWH needs
- Targeted data-driven advocacy to influence funding policies & priorities
- Provider and PLWH leadership and collaboration to speak with a strong, united voice, and interface with other local/regional/national advocacy groups



CHANGE Client Board Training





Tenant-Based Rental Assistance Consumer Focus Group

- Participants: 10 current TBRA recipients
- Ages: 32 62
- Race: 9 Black, 1 White, All Non-Hispanic
- Gender: 6 Male, 3 Female, 1 Trans-1
- Included 2 adults in one HH with 7 children
- Length of time HIV+: 2-16 years
- Time on TBRA: 6 months to 3 years
- Income: Majority on SSI/SSDI and Food Stamps



Themes discussed:

- Better health; having a place to keep meds; able to get to medical appointment
- Safer environment
- Living like a "normal" person
- 1st apartment of their own for 4 of the 10
- Without the help, would be on the street and homeless again
- Lots of interest in employment programs















Housing Data: Asking the Right Questions

Funded through AIDS United Southern REACH grants, GNOF and other sources

Analysis conducted by CSI between 2008 and 2015

Based on data from the PLWH Statewide Needs Assessments for 2008-2013, used with permission of the LA Office of Public Health, STD/HIV Program.

Additional qualitative data based on client focus groups

Purpose: to investigate the housing needs of PLWH in the Greater New Orleans area



Assessed the survey instrument used for the PLWH Statewide Needs Assessment and made recommendations on the measures collected to better assess the HIV housing need in NOLA.

Used data collected from surveys 2008-2013 for analysis.

Survey questions that were needed for in-depth analysis included collecting information on the following:

- Housing type
- Household size
- Income
- Rent / Mortgage and Utility payments



Sample Questions – Rent / Mortgage and Utilities:

How much do you and/or your household pay monthly to the rent or mortgage? (This is not necessarily the amount of your rent, but how much you and your household members ACTUALLY PAY.)

Does the rent/mortgage amount above include Water & Garbage? Y/N

❖ If no, what is the average monthly amount you pay? _____

Does the rent/mortgage amount above include Electricity & gas? Y/N

❖ If no, what is the average monthly amount you pay? _____



Sample Questions – Income and Housing Subsidy:

What was your total household income last month? (Include all the money you received, plus the money anyone else who lives with you received. Include money from government assistance, except food stamps.)

(check box if no income) ___ No income

Are you currently receiving an ongoing monthly housing subsidy, such as Section 8, Housing Choice Voucher, Permanent Supportive Housing (PSH), Shelter+Care, or living in public housing? ____Yes ____No



ANALYSIS:

Housing Burden:

[Monthly Housing Payment + Monthly Utility Payments] / Household Income for the Month = Housing Rent Burden.

Gap in Housing Affordability:

Typical Rent in the Community (FMR) – 30% of the average income for survey respondents = Gap in Affordability

(Note – HUD defines affordable housing as payments at no more than 30% of household income)



This analysis can be stratified by using additional data elements including housing unit size and household composition:

Sample Questions:

Please indicate the size of your current home: (MARK ONE)

Single Room Occupancy (SRO)/Studio/0 bdrm

- 1 bdrm
- 2 bdrm
- 3 bdrm
- 4 bdrm
- 5+ bdrm

None, I'm homeless



Asking the Right Questions - Discussion

Distinguish concrete ways to improve housing-related data collected through the SNA and client focus groups, as well as steps for meaningful analysis

Discuss handout on selected HIV housing-related survey questions:

- Questions
- Rationale
- Analysis







Additional Data Sources

The New Orleans CHANGE Coalition HIV/AIDS Housing Analysis: 2008, 2011, & 2013

Client Focus Group(s)

City of New Orleans 2012-2016 Consolidated Plan

2014 HOPWA CAPER – City of New Orleans

National HOPWA database:

Performance profile comparisons with other cities

Allocation comparisons and trends

Cost per unit comparisons for permanent and transitional facility-based housing and TBRA



Population characteristics*:

Mean Income: \$909/Month

Mean Age: 44

Race: B-66%; W-24%; Other- 7%

Gender: Male-58%; F-38%; Trans-4%

Income Source: 59% SSI/SSDI

19% Wages/Employment

Employment: 26% Employed

73% Unemployed

*2013 Data



Summary Findings:

Very low income across all 3 years - \$908.76 in 2013 Nearly 60% receive SSI/SSDI in 2013 compared to 49.8% in 2008 73% unemployed in 2013 (versus 62% in 2008) 44% receive Food Stamps

Top-reported barriers to HIV care:

Money to pay for rent Lack of resources Fear of disclosure



HIV/AIDS Housing Analyzed

Housing Stability Risk Factors Investigated:

Risk Factors:	Description
HOMELESSNESS:	A history of homelessness in the last six months is an indicator of housing instability
AFFORDABILITY:	A rent burden over 30% of the household's income is an indicator of housing instability
RENT INCREASE:	A perceived need to move due to an increase in rent of \$50 or less is an indicator of housing instability
TENURE:	A short tenure at the current residence (less than 1 year) could indicate housing instability
SUBSTANCE ABUSE:	A history of treatment for substance abuse in the last 6 months could indicate housing instability
MENTAL HEALTH:	A history of receiving mental health services in the last 6 months could indicate housing instability



Housing Stability Risk Factors – Findings:

Homelessness (2013) -

4% reported as "currently" homeless 11% homeless at least 1 night in 2013 At-risk numbers likely much higher



Housing Stability Risk Factors – Findings:

Affordability (2013)-

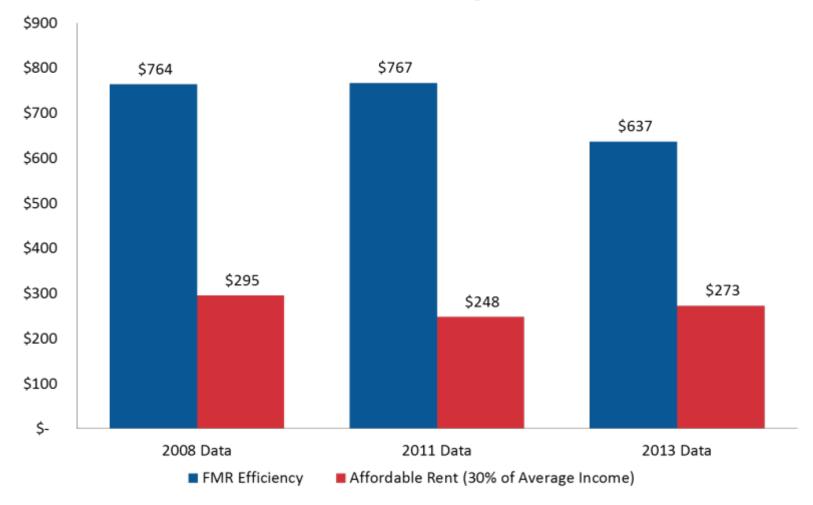
60% pay more than 30% for rent/utilities

35% pay more than 50% (extreme housing burden)

Affordable rent for the average person in the 2013 needs assessment group was \$272/month but the 2013 FMR for a 1-BR unit was \$755/month

Trend info: Households with Extreme Rent Burden increased from 26% in 2008 to 35% in 2013







- Rent Increase Impact (2013) -
 - Nearly 25% of PLWH feel they would have to move if their rent increased by \$50 or less
 - 46% report they would have to move if rent increased by \$100



- Housing Tenure -
 - PLWH have shown increased tenure in housing since 2008
 - 37% had lived in their unit for less than 6 months in 2008 versus only 18% in 2013



- Substance Abuse/Mental Health (2008-13) -
 - 7-10% reported receiving substance abuse treatment in the past 6 months
 - 28-31% reported mental health treatment in the past 6 months
 - 3-6% reported both



- Consolidated Stability Risks -
 - More than 70% of respondents had one or more risk factors
 - Even among "permanently housed" PWLHA, 57-70% had one or more housing stability risk factor
 - In 2013, nearly 1/3 had 2 or more risk factors



HIV/AIDS Housing Analysis - Discussion

Learn new ways to assess the housing stability of PLWH in their caseloads or across communities

Discuss how these analysis components can inform providers' understanding of local HIV housing need.







Housing Data: Community Impact

HIV/AIDS Housing Analysis Impact

2012-16 Consolidated Plan

- Participation by HOPWA and RW providers on the Steering Committee
- CHANGE Coalition housing analysis data (2008-2011) was used throughout the plan to demonstrate housing need, rent burden, housing instability, housing gaps, etc.
- Goals were set to include TBRA and increasing permanent housing resources and the capacity of transitional agencies to provide permanent housing



HIV Housing Analysis Impact

2014 HOPWA CAPER - Unmet Need Numbers Reported:

- **3,162** Total HH with unmet housing subsidy assistance needs
- 1,450 Unmet TBRA need
- 1,670 Unmet short-term emergency (STRMU)need
- 42 Unmet need for community residences, housing facilities



HIV Housing Analysis Impact

Selected accomplishments made possible in the past 5 years

- CHANGE has become well known locally as an organization that backs its advocacy and recommendations with hard data
- In-depth data analyses conducted by CSI using RW statewide needs assessment data has yielded multiple reports for CHANGE on HIV/AIDS housing and service needs, gaps and trends. Highlights of this data have been used in advocacy efforts, educational materials and in the City's Consolidated Plan.

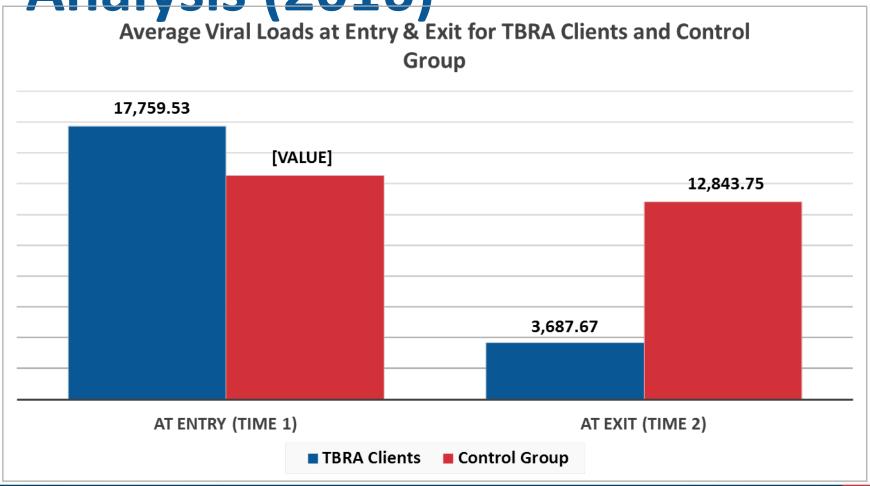
HIV Housing Analysis Impact

Selected accomplishments made possible in the past 5 years

- More than 300 housing vouchers and additional units of HIVspecific housing has been put in place through HOPWA and HOME TBRA, HIV set-aside Housing Choice Vouchers, and the building of new units.
- The City of New Orleans used Federal funding (HOPWA and HOME) to support long-term rental assistance (TBRA) and permanent housing placement programs for the first time ever.
- The collaboration, leveraging and planning work of the CHANGE Coalition was highlighted as a "best practice" in HUD's 2012 publication, HOPWA 20: Housing Innovations in HIV Care



NOLA TBRA Health Outcome Analysis (2016)





HIV Housing Analysis Impact - Discussion

Understand how housing stability impacts positive health outcomes; Describe specific ways to use HIV housing data to advocate for PLWH locally in their communities

Discuss the examples outlined along with other additional ways HIV housing data can impact policy and programming. Discuss connecting specific interventions with health outcomes.



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Thank you for attending this workshop session!