

HIV/AIDS - HOUSING IS PREVENTION

Housing assistance must be a priority for HIV prevention.

An increasingly large body of evidence demonstrates the direct relationship between housing status and HIV risk behaviours. People with HIV who are stably housed have significantly better physical and mental health, and experience increased health related quality of life.

STABLE HOUSING REDUCES THE RISK OF HIV INFECTION

- ▶ Inadequately housed people are faced with the pressure to simply survive. The daily pressure to to survive takes precedence over efforts to reduce HIV risk.
- ▶ Among persons at highest HIV risk due to injecting drug use or high-risk sex, those without a home are significantly more likely than others to become HIV infected over time.²
- ▶ Proven risk reduction interventions – such as counseling, needle exchange and behavioural interventions – are less effective among people who are homeless or unstably housed.²
- ▶ Among persons disproportionately affected by HIV/AIDS – such as men who have sex with men, persons of colour, homeless youth, IV drug users, and impoverished women – those without a home are significantly more likely to become HIV infected over time.¹³

STABLE HOUSING HELPS PEOPLE WITH HIV GET INTO CARE AND STAY IN CARE

- ▶ According to a recent study funded by the US Centers for Disease Control (CDC), housing status is one of the strongest predictors of treatment access and health outcomes for people with HIV.²
- ▶ People who are unstably housed who receive any level of housing assistance are almost four times as likely to enter into medical care as those who do not receive assistance.⁵
- ▶ Over time, homeless/unstably housed persons whose housing status improved were five times more likely to report a recent HIV outpatient visit than persons whose housing status did not improve.⁴
- ▶ Homeless/unstably housed people whose housing improved over time were six times more likely to be receiving antiretroviral therapy as those who remained homeless or unstably housed.⁴

STABLE HOUSING IMPROVES HEALTH AND REDUCES MORTALITY

- ▶ People who are unstably housed experience worse overall physical and mental health and are more likely to be hospitalized and use costly emergency department services. They have lower CD4 counts and higher viral loads, and are less likely to receive and adhere to antiretroviral therapy.³
- ▶ Stable housing improves continuity of HIV care as well as ART participation, adherence and success.⁸
- ▶ Stable housing is significantly associated with treatment success after controlling for demographics, drug and alcohol use, and receipt of medical and social services, which indicates that housing itself improves the health of people with HIV.⁴
- ▶ Among extremely poor and homeless people with HIV, the number of months on ART and level of adherence are directly related to lower viral loads, fewer opportunistic infections, and reduced mortality.⁹

QUALITY OF HOUSING MATTERS

- ▶ People who are housed in buildings that are appropriate to their needs, aesthetically pleasing, and situated in safer neighborhoods have had more dramatic reductions in health-care utilization than people directed to less appropriate housing. Those in better quarters also showed a trend toward a reduction in mortality.¹⁰

HOUSING IS THE GREATEST UNMET NEED OF PEOPLE LIVING WITH HIV

TOWARD A NATIONAL HIV/AIDS HOUSING POLICY IN CANADA

WHY IS HOUSING IMPORTANT?

Housing is a key determinant of health – for everyone, including people with HIV. By improving housing, it is possible to improve health outcomes which, in turn, has a positive social and economic impact. Healthier citizens contribute more to their communities and “cost” less. It makes sense to provide people with the basic necessities of life – such as housing – that allow them to thrive.

WHAT'S NEEDED?

A DATA-DRIVEN HIV HOUSING POLICY AGENDA

Research findings support four key imperatives for a sound HIV housing policy:

- ▶ Affordable housing must be available for all persons with HIV
- ▶ Housing assistance must be a priority for HIV prevention
- ▶ Stable, appropriate housing must be an essential component of HIV health care
- ▶ Data must be collected to inform housing policy

Surprisingly, **Canada is the only G8 country that does not have a national housing strategy.** This must change. We need a strong national housing strategy, as well as provincial and local strategies, that reinforce that housing is health and housing is health care.

For people with HIV in Canada, Housing IS Health
The Positive Spaces Healthy Places Study observed over 600 participants in a longitudinal study in the Province of Ontario...

50%

Nearly half of people with HIV experience housing instability, which adversely affects their health.¹ This costs us all.

40%

Only 40% of people with HIV have access to rent-geared-to-income housing, and 40% reported having trouble meeting monthly costs.¹

25%

One in four people with HIV moved at least once in the first year of the study, and one in four was at risk of losing their housing because of cost.¹

65K

65,000 Canadians are living with HIV in Canada in 2008. The number of new HIV infections is increasing.

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