

NEWARK EMA

**NEEDS ASSESSMENT
– 2020 UPDATE**

July 10, 2020

Focus: PLWH Housing Needs

- ▶ Research Question:

What are the housing needs of People Living with HIV (PLWH) that prevent or interfere with their achieving Viral Load Suppression and what are some strategies to improve their housing?

- ▶ Goals: ID Barriers & Challenges. ID possible solutions for expanded housing program.

METHODS

- ▶ Analysis of **CHAMP Data 2019** on Housing Status & Health Outcomes – Viral Load Suppression (**VLS**) & **Retention In Care**.
- ▶ **Key Informant** Presentation – Housing Systems for PLWH in NJ & NEMA
- ▶ **Consumer Focus Group** on Needs.
- ▶ **Agency Key Informant (KI) Survey** – Barriers, Needs & Recommendations for NEMA Housing Program.

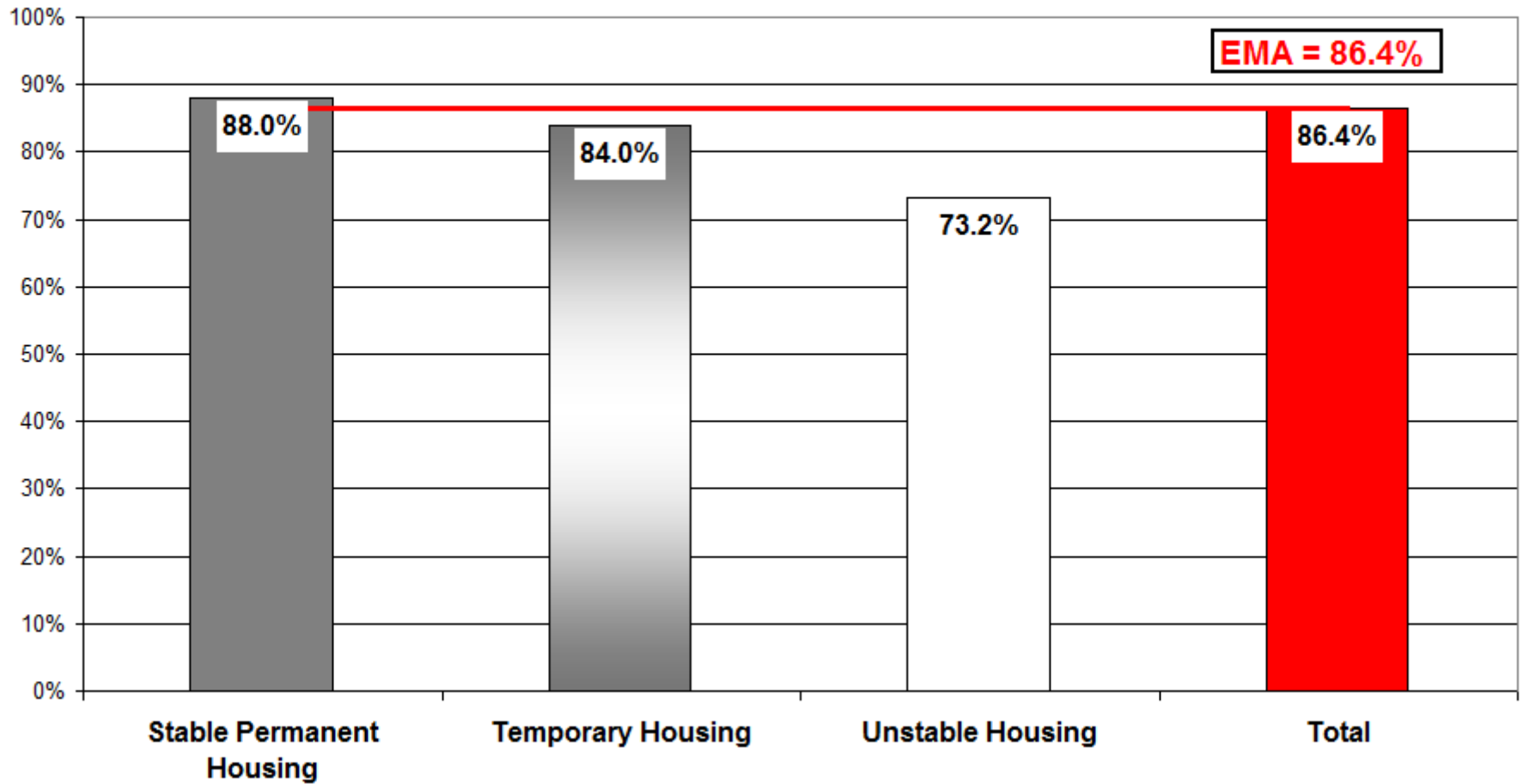
#1 CHAMP DATA 2019

▶ HRSA & HUD Housing Definitions (Handout):

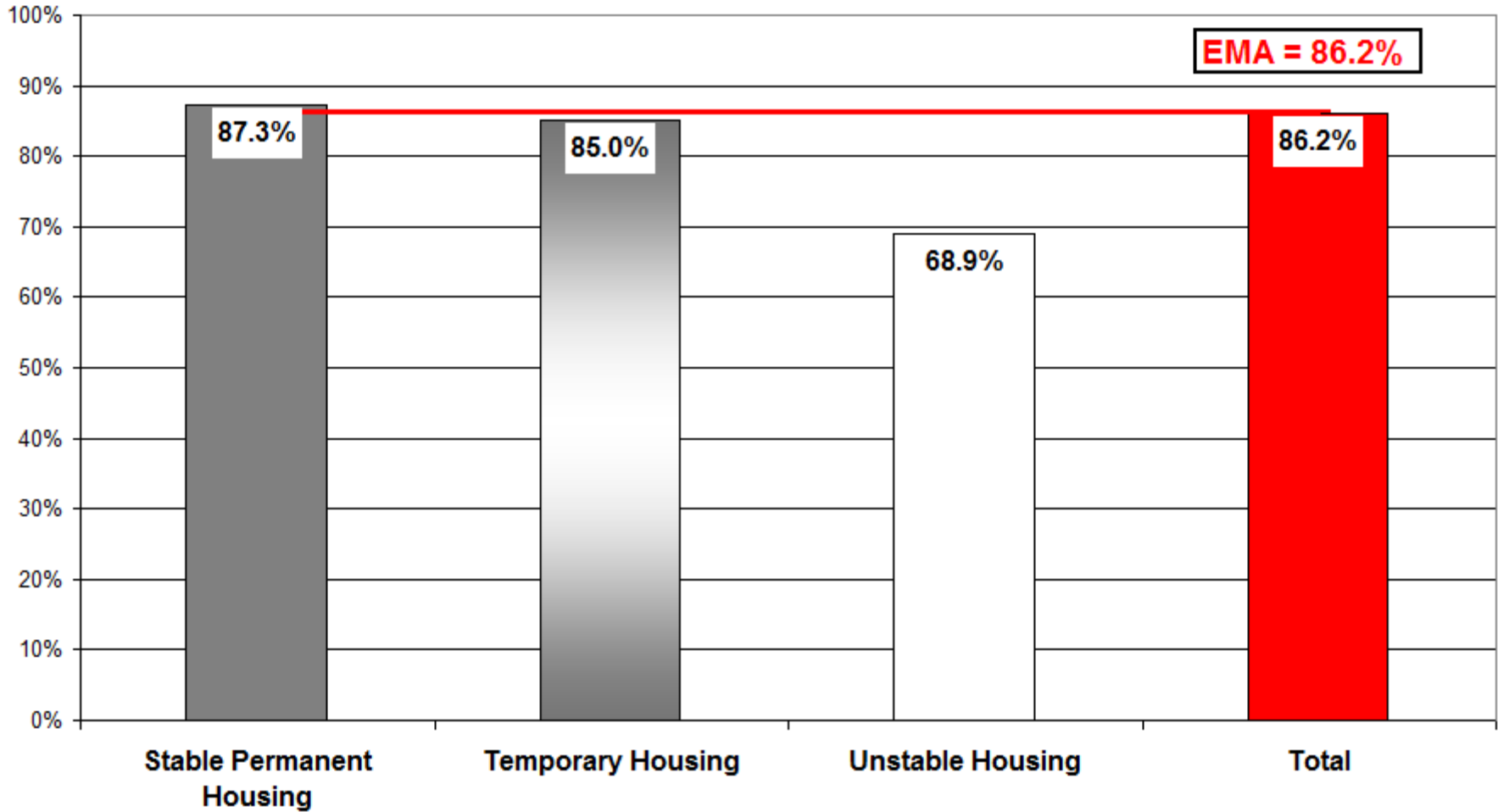
- **Stable Permanent** = Own/rent home, HOPWA LT, non-HOPWA subsidized, SRO, Group/Nursing Home
- **Temporary** = “Doubling up w/ family, friends”, Transitional (RW/non-RW), Residential Tx, institution
- **Unstable** = Emergency shelter, Homeless, Prison/Jail

▶ Health outcomes (VLS, Retention) are higher with stable housing.

Viral Load Suppression by Housing Status - Newark EMA - Year Ending 12/31/19



Retention In Care by Housing Status - Newark EMA - Year Ending 12/31/19



Distribution of RW Clients by Housing Status and VLS Outcomes - 2019

Housing Status & Key Subtypes	#	%	#	%	VLS
Stable Permanent			4,417	70%	88.0%
Own/Rent Home	3,477	55%			87.9%
HOPWA	205	3%			89.3%
Subsidized not HOPWA	585	9%			87.8%
Temporary			1,689	27%	84.0%
Doubling Up	1,543	24%			84.0%
Transitional RW & non-RW	85	1%			82.5%
Residential Tx or Institution	52	1%			89.2%
Unstable			234	4%	73.2%
Emergency Shelter	95	2%			76.1%
Homeless	88	1%			64.4%
Jail/Prison	44	<1%			83.3%
TOTAL			6,340	100%	86.4%

#2 KEY INFORMANTS

- ▶ ARFC – NJ HIV Housing Assistance
- ▶ 2 RWHAP–funded agencies in Newark EMA with unique housing services for clients which
 - Fill gaps,
 - Manage a continuum of housing programs including HOPWA, Section 8, etc.,
 - Work with landlords to locate housing, and prevent eviction where feasible.
 - Work with clients to help them manage responsibilities of housing.

#3 CONSUMER FOCUS GROUP

- ▶ CIA meeting February 26, 2020 on Housing
- ▶ Focus group questionnaire
- ▶ 32 individuals attended. 25+ gave input.
- ▶ Housing Situation
 - All lived in house or apartment. No shelters.
 - All received housing subsidy – HOPWA (65%), public housing (20%), Section 8 (10%), subsidy (5%)
 - **41% “doubled up”** at some point.
 - 66% stable housing, 9% temporary, rest did not discuss (not comfortable)

#3 CONSUMER FG – 2

▶ Housing Situation (cont.)

- Recent changes – **Bad**: unsanitary, rodents, bad maintenance. Late rent payments due to change in subsidy. **Good**: HOPWA approval, new residence.
- Take medications on schedule? **Most Yes**. Habit, want to keep healthy. **No**. If in shelter.
- Knew someone denied housing. Age, long waiting lists, bad credit, prior eviction, incarceration, father.
- Lost housing. Not paying rent, substance use, not following rules (sub-leasing, smoking), vandalism, hoarders, domestic violence, filed a complaint.

#3 CONSUMER FG – 3

- ▶ If More Housing Funds Available...
 - Improve stability. Mental health.
 - Priority – non-VLS. Stop transmission. Help get healthy. Move from unstable housing.
 - Priority – VLS. Show stability. Keep stable.
 - Include MCM, CM–NM, substance use & MH treatment.
 - 24 mos. not long enough. To find stable housing, get job, get life together, fix credit. Rents too high! Fixed incomes. **Not enough time to afford unsubsidized housing.**

#4 AGENCY KI SURVEY

- ▶ **Part 1: ID Housing challenges & possible solutions.**
- ▶ All agencies w/ housing, MCM, CM, EFA=32!
- ▶ 25 responded. Including legal. EMA-wide.
- ▶ **#1 Housing Challenges (non-VLS)**
 - “Yo–Yo” between temporary & unstable. In either.
 - Living in cars, shelters.
 - Compounded by active SA use & MH.
 - Stable housing + addiction. Youth/young adults.
 - Stigma – HIV & poverty (welfare)
 - Not affordable or enough – housing, subsidies

#2 Challenges for Non-VLS PLWH

Challenge/Issue	% Cited
Behavioral Health (substance use, MH)	90%
Unstable Living (homeless, lack housing, subsidies)	52%
Health Issues (comorbidities, no follow up, denial)	52%
Stigma (due to HIV)	24%
Lack access to health care (ins. Change, no transp.)	24%
Poverty, Income	19%
Lack Living Skills (find/keep job, life skills)	19%
Social/Personal Issues (no family support, criminal backgr)	14%
Cultural Issues (undocumented, culture)	10%

#3 Housing Assistance Types (Referrals)

- ▶ All = HOPWA, Section 8, Public, RW-funded, non-RW (CDBG, transitional, disabled), Housing Authority, CoC
- ▶ Additional = shared housing (roommates).

#4 Circumstances

- ▶ **Actual/imminent homelessness (62%)**
- ▶ Domestic violence, expiration of transitional housing, recent release from incarceration, behavioral health issues including left rehab before completing program.
- ▶ **Assessment done before referral/placement.**

#5 Types of Assistance Provided by Housing Agencies (11)

- ▶ Rental/housing payments + support services (CM, SA, EFA, support groups) (5)
- ▶ Housing & utility payments only (3)
- ▶ Support services (MH, Med adherence, linkage to housing) (1)
- ▶ Supportive services (advocacy, lease negotiation w/ landlords, homeless prevention) (1)
- ▶ Legal representation (1)
- ▶ **For 1-3 months or RWHAP, HOPWA limits**

#6 Eligibility Criteria = RWHAP, HOPWA, housing program (income, etc.)

#7 Solutions if Insufficient Resources?

- ▶ Transitional housing, referrals to other agencies, add to waiting lists, advocacy w/ landlords to prevent eviction/homelessness.

#8 Where do Unserved PLWH Go?

- ▶ Housing placement assistance, support services, apply transitional housing.
- ▶ Referral/placement hotels, motels, shelters
- ▶ Advocacy.
- ▶ Informal arrangements (couch surf).
- ▶ Eviction. Homeless – sleep on park benches, abandoned houses, Penn Station.

#4 AGENCY KI SURVEY (Cont.)

- ▶ **Part 2: Recommendations for RWHAP Housing Program and VLS.**
- ▶ Research Question:
- ▶ The Ryan White Program may be receiving additional funding for housing. However, we want to link this financial support to achievement of Viral Load Suppression (VLS) – either helping clients to achieve VLS or to assist in maintaining VLS. We need your input on how to structure this program.

#9 Eligibility Criteria for Receiving RWHAP Housing Program Assistance?

MINIMUM ELIGIBILITY CRITERIA

- Retention in HIV medical care (2 visits per year) and medication adherence (VLS or VL improvement).
- Participation in behavioral care treatment (SA &/or MH) – per diagnosis. Agency knowledge of harm reduction methods.
- Support services – agency-specific. Regular monitoring by MCM/CM.
- Participation in training in client responsibility, financial [literacy] and life skills to manage housing situation.
- Consider client circumstances – homelessness, eviction, no family support or living arrangements. Returning from incarceration.
- Source of income to sustain housing.
- Require client commitment to improve health and comply with housing requirements.

#10 Duration of Housing Assistance

- ▶ 18 months or longer.
- ▶ No limit depending on client circumstances & when permanent housing is found.

#11 Require Housing Plan?

- ▶ All said YES!
- ▶ **Client-specific Housing Plan** to include keeping medical appointments & health care leading to or maintaining VLS, participate in appropriate SA &/or MH treatment services, other needed services as condition of receiving housing.
Couple w/ MCM Care Plan.
- ▶ Every client meet with a **Housing Placement Specialist or case manager** to create service plan to follow. Include “life skills” training to help manage finances, pay rent, help transition to unsubsidized housing status.
- ▶ **ID & Use Existing Models.**

#12 Other Recommended Services

- ▶ **Housing Assistance Positions** – CM/others work on housing issues & ensure clients stay housed & not evicted.
- ▶ **Expanded and/or Targeted RWHAP services** (SA & MH available when needed)
- ▶ **Life Skills Training** (many county resources)
- ▶ **Improved Service Coordination** – In EMA between medical & housing agencies. In & out of EMA – ID housing resources, beds, etc.

#13 Administer via Existing Agencies

- ▶ Based on experience, expertise. 1-stop shopping. Collaboration. Seamless systems. Other factors.

#14 & #15 Other Ideas

- ▶ Advance housing payments by City of Newark to housing agencies. (Expand capacity)
- ▶ **Increase RWHAP housing payment & duration. (PSRA)**
- ▶ Expand payment for non-RWHAP housing services. (security deposits)
- ▶ Systems coordination – existing agencies.
- ▶ Build on HOPWA model – 70%/30%
- ▶ Increase access to & knowledge of housing. (PC, COC, etc.)
- ▶ **Start planning now. Use EHE, other NEMA & NJ resources.**

THANK YOU!!!

- ▶ **TO ALL CONSUMERS AND INDIVIDUALS AND AGENCIES WHO TOOK THE TIME TO GIVE US YOUR EXPERIENCE AND EXPERTISE ABOUT HOUSING AND OTHER ISSUES FACING PLWH AND FANTASTIC IDEAS ON POTENTIAL SOLUTIONS!**