

Housing and HIV/AIDS: A Public Health Issue

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Research shows a direct correlation between stable housing and stable health. This is why housing is such an important issue for people living with HIV/AIDS. According to a 2004 report, "An Assessment of the Housing Needs of Persons with HIV/AIDS" based on New York City research, "If the City does not plan appropriately to meet the housing needs of the population living with HIV/AIDS by 2010, it will face a major public health crisis." Further, "When homelessness first peaked in the late 1980s, it was estimated that as many as 15% to 30% of all homeless New Yorkers were HIV seropositive; one study showed HIV infection levels higher than 60%."

It is clear that HIV/AIDS disproportionately affects people who are homeless or living in transitional housing. Likewise, people who are homeless or living in transitional housing are disproportionately affected by HIV/AIDS. Lack of stable housing, inconsistent healthcare and the rise of intravenous drug use have greatly contributed to the number of people affected by HIV/AIDS in recent years.

Although many people conceptualize homelessness as sleeping on the streets, people in need of housing support and information include people living in shelter systems, in transitional housing programs, staying temporarily with family or friends, or in need of more affordable housing. This population also includes those that need housing after incarceration, hospitalization, or completing a treatment program.

HIV/AIDS case managers or caseworkers are often the gateway to housing support. Housing eligibility may depend on a number of factors including financial resources, stage of HIV/AIDS illness, age, gender, criminal records, and other health or mental health issues. HIV/AIDS Services Administration (HASA) can provide a considerable amount of support but only works with people who have been diagnosed with AIDS or symptomatic HIV (Contact information on following page).

The need for more stable housing has become a public health crisis because the lack thereof is correlated not only with HIV/AIDS rates but also with drug use, mental illness, and other health problems. It is startling that, according to the 2005 New York City publication, *The Health of Homeless Adults in New York City*, "Compared with the general NYC adult population, homeless adults who use DHS (Department of Homeless Services) facilities had substantially higher death rates" and, "Among women who used the single adult system, the largest proportion of deaths was due to HIV/AIDS."

HIV/AIDS and housing advocacy groups are constantly fighting for increased access to affordable housing. Recently, thanks to community advocacy led by Housing Works, David Hansell, who is the New York State Commissioner of the Office of Temporary and Disability Assistance in Spitzer's new administration, announced that there would not be rent increases for people with HIV who live in rent-subsidized, supportive housing. These increases had been on the agenda of Pataki's administration. While this is a major success for the HIV/AIDS community, there is always more work to be done to ameliorate both the housing and the HIV/AIDS crises.

Sources:

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