

The goal of the HOPWA program is to provide affordable housing and housing-related services to people living with HIV/AIDS (PLWHA).

HOPWA NEEDS

In the Portland Eligible Metropolitan Statistical Area (EMSA), seven adjoining counties in Northwest Oregon and Southwest Washington, there are more than 4,074 people living with HIV/AIDS.

HOPWA funds are intended to address the housing and housing-related service needs of PLWHA. Research by the National AIDS Housing Coalition shows that having a safe, stable place to call home is a key structural factor affecting access to treatment and health behaviors among people living with HIV/AIDS (PLWHA). In contrast with people who are homeless or at risk of homelessness, PLWHA who have housing stability as a result of receiving rent assistance demonstrate reduced HIV risk behaviors and improved health care outcomes. See, *www.nationalaidshousing.org* Examining the Evidence: The Impact of Housing on HIV Prevention and Care, 2008. Among its many findings, the study confirmed that homelessness places people at heightened risk of HIV infection.

The Multnomah County Health Department's Health Assessment and Evaluation Group reported that as of December 31, 2009, an estimated 4,074 individuals with HIV/AIDS lived in the Portland EMSA. This number included 2,536 people living with a diagnosis of AIDS (PLWA), and 1,538 people living with HIV, who are HIV positive, but whose disease does not meet the diagnostic criteria for AIDS (PLWH). 298 new AIDS cases and 258 new HIV cases (non-AIDS) were reported during the last two years (1/1/08 through 12/31/09).

Because the Center for Disease Control (CDC) estimates that 21% of people infected with HIV are unaware of their HIV status, the true number of PLWH in the EMSA is probably closer to 1,860.

Although HIV is still primarily a disease of men, 14.3% of HIV cases and 13.4% of AIDS cases diagnosed in 2008 and 2009 occurred in women.

HIV in the EMSA continues to primarily impact adults. Youth (persons aged 13 to 24) now make up 5.1% of PLWH and 18.6% of new HIV cases. The EMSA's PLWHA is aging. Persons aged 50 and older account for 35.1% of all PLWHA in the EMSA.

Overall, the composition of the PLWHA in the EMSA has remained fairly constant over the past several years, with only slight increases in the percentages of Hispanic and older PLWHA.

In the Portland EMSA HIV has disproportionately impacted Blacks/African Americans.

Blacks/African Americans account for only 2.9% of the population, but make up 8.0% of PLWA and 8.3% of PLWH – almost three times higher.

This chart provides HIV/AIDS data for individuals sorted by race and sex in the Portland EMSA. Data on familial status is not currently available. INSERT RACE AND SEX CHART

Summary: Estimates of People Living with HIV and AIDS Aware of their Status as of 12/31/2006; for Clark County, as of 12/31/2007

Source: HIV/AIDS Reporting System (eHARS), data extract 7/1/2009 Capizzi.

PLWHA also typically have high medical expenses. As a group, they are less likely to have private health insurance to meet these expenses. Unless the PLWHA has secured long-term rent assistance (e.g. a Section 8 voucher), a public housing unit or a HOPWA unit, PLWHA is not going to be well equipped to compete in the housing market.

HOPWA PROGRAM DESCRIPTION

HOPWA is a flexible grant award that allows communities to design and implement long-term, comprehensive strategies for meeting the housing needs of people living with HIV/AIDS and their families. HOPWA gives participating jurisdictions the flexibility to provide a range of housing assistance, including:

- Supportive services including the following
 - Housing placement assistance
- Housing case-management
 - Alcohol and Drug Counseling
 - Mental Health Counseling
 - Benefits Eligibility Specialist
 - Employment Specialist
 - Resource identification and technical assistance
- Facility-Based transitional housing

- Project-Based rental assistance
- Tenant-Based rental assistance
- Short Term Mortgage, Rent, and Utility Assistance
- Grants for rehab of existing housing

PROJECT SELECTION

The Portland EMSA currently allocates approximately 45% of its HOPWA funds to rent assistance, 30% to support services, 18% to rehabilitation of the HOPWA development portfolio, and 7% to administration. This allocation formula is reviewed annually by the AIDS Housing Advisory Committee.

The City did an RFP for supportive services in the spring of 2009. The contracts awarded through that RFP are renewable for up to a total of four years, dependent on contractor performance. The City is currently in conversation with the Ryan White Part A Fund to discuss better resource coordination and alignment. When that conversation concludes, the City will announce its plans for a new competitive selection process.

PROGRAM ELIGIBILITY

Individuals with HIV or AIDS and their families who reside in the seven-county Portland EMSA and have incomes up to 80% MFI are eligible to participate in HOPWA programs. Priority is given to households with incomes below 50% MFI. The EMSA includes Clackamas, Columbia, Multnomah, Washington, and Yamhill Counties in Oregon and Clark and Skamania Counties in Washington.

POTENTIAL BARRIERS

All HIV/AIDS service organizations have recently seen a significant increase in clients due to the poor economy. However, funding has not kept pace with demand.

Local PLWHA are eagerly awaiting the implementation of federal health care reform.

CAREAssist (Oregon's AIDS Drug Assistance Program) pays for insurance premiums and prescription/medical services co-pays. High demand and cost-cutting measures enacted by the Department of Human Services limit the utility of this program.

The Oregon Health Plan (OHP)/Medicaid insure some PLWHA. Most uninsured PLWHA enroll in the Oregon Medical Insurance Pool, a high-risk pool that provides fewer benefits and significantly lower reimbursement rates than OHP/Medicaid. In addition to these direct impacts, OHP restrictions have resulted in increased needs for case management to find alternative insurance coverage for clients. Case managers spend as much as 50% of their time helping clients to obtain and maintain health coverage, instead of providing actual case management.

Both the Washington State and Oregon State general funds are experiencing serious shortfalls that jeopardize funding for prevention of STDs and HIV prevention, and for primary care.

The HOPWA tenant-based rental assistance program (TBRA), which allows a PLWHA to rent an apartment of his/her own choosing, was designed on the assumption that the tenant would qualify for a Section 8 voucher in a reasonable timeframe (two years or less). That has not been true for several years. Accordingly, the TBRA program no longer depends on transitioning clients to a Section 8 voucher. Instead, TBRA programs operate with the hope that clients will secure income through employment or social security.

PARTNER AGENCIES AND ORGANIZATIONS

- Cascade AIDS Project (CAP) is the largest provider of HIV/AIDS services in the EMSA. Among other activities, CAP provides case management to 59 units of HOPWA funded permanent supportive housing at the following sites: Carriage Hill, Cornerstone, McCoy Village, Nathaniel's Way, PCRI scattered sites, Project Open Door, Madrona Studios with Central City Concern, Outside In Transitional units, Northwest Housing Alternatives, Villa Capri and Howard House with Catholic Charities, and the Sandy Apartments with Luke-Dorf. CAP also partners with the Housing Authority of Portland and Washington County Department of Housing to operate 69 Shelter Plus Care units for people living with HIV/AIDS in the Portland EMSA. CAP also operates a transitional housing program; offers eviction prevention, utility, and mortgage assistance; manages and disburses Ryan White emergency rental

assistance; operates a client education program; and provides furniture and/or moving assistance.

CAP has also partnered with other public and private non-profit agencies to work with those facing multiple barriers, such as PLWHA exiting the criminal justice system, PLWHA with mental health diagnoses who need permanent supportive housing, and PLWHA experiencing chronic homelessness.

- Central City Concern (CCC) owns and operates permanent supportive alcohol/drug free housing for PLWHA. CCC functions as both the housing and the service provider, and partners with Cascade AIDS Project for provision of additional services. In addition, Ryan White Part A funds support the Healthshare Program which provides 96 rental months of alcohol and drug free housing as well as substance abuse treatment support for 32 PLWHA living in CCC properties.
- Clark County Public Health (CCPH) operates a housing case management program and a transition-in-place housing program.
- Multnomah County Health Department enjoys a longstanding collaborative relationship with the City of Portland's HOPWA program, allowing for coordination of resources and funding to maximize the efficiency and benefit of public dollars. The County administers the Ryan White Part A fund, and the STD/HIV/Hepatitis C Program. The County also runs an African-American Sexual Health Equity Program (AASHEP), and a number of evidence based interventions to reduce transmission between men who have sex with men.
- Outside In provides long term transitional housing and case-management to HIV+ youth. They have an on-site housing facility.
- Our House of Portland provides the only housing with on-site sub-acute care for people living with advanced HIV/AIDS in the Portland metro area and throughout the state of Oregon. Our House provides food, support services, and specialized care with funding from a variety of sources. Our House provides a continuum of care for people with HIV/AIDS through the following programs:

1. Our House of Portland is a 14-bed specialized residential care facility located in Portland where 24-hour nursing services are provided to those with advanced HIV/AIDS. Residents from this facility come from all over the state of Oregon.
2. Swan House is a 5-bed adult foster care facility located in Clackamas County where care in a group setting is provided for those with HIV/AIDS that are not quite able to live independently and need assistance with many of the daily tasks of medication management, money management, etc.
3. The Neighborhood Housing and Care Program (NHCP) is an innovative program where rental assistance, nursing, social work, and Occupational Therapy services are provided to those with HIV/AIDS who want to continue living independently. Services are provided on a regular basis (frequency depends on client acuity) and is custom tailored to the needs of each client.
4. Community Services include Esther's Pantry, which is a food bank for HIV + individuals, and Tod's Corner which is a thrift shop for the same population. Our House also provides assistance with pet care and cremations.

COMPLEMENTARY LOCAL, REGIONAL, AND NATIONAL EFFORTS

This program complements other local efforts to meet the needs described above by partnering with Ryan White Part A Planning Council efforts to provide a continuum of care and services.

The AIDS Housing Advisory Committee (AHAC) is an advisory body to HOPWA program staff.

GEOGRAPHIC SERVICE AREAS (INCLUDING AREAS OF LOW-INCOME FAMILIES AND/OR RACIAL MINORITY CONCENTRATION)

The Portland Eligible Metropolitan Statistical Area includes Clackamas, Washington, Multnomah, Yamhill, and Columbia Counties in Oregon, and Clark and Skamania Counties in Washington.

MONITORING

A description of BHCD's Monitoring program is in Section One.