

A green square with a white border containing the text "Positive spaces" and "Healthy places" in white, stacked vertically. The square is set against a background of a blue sky with white clouds.

Positive
spaces
Healthy
places

community-based
research exploring
HIV, housing & health



*Promoting excellence and innovation
in HIV research and care*

Finding Strategies for Empowered Living: HIV, housing & health in Central Ontario

February 2010

Presentation at a Glance

- 1) Situational Overview
- 2) Study Background
- 3) Study Method
- 4) Key General Findings, Ontario
- 5) Key Qualitative Findings, Ontario
- 6) Key Findings, Central Ontario
- 7) Research to Action Strategies
- 8) Solutions and Recommendations



Understanding the Context of the Problem

Many people throughout Ontario are faced every day with making the hard choice between eating a meal for the day or having a place to sleep for the night



Understanding the Issues at Hand

Many Ontarians struggle to maintain stable housing, but it is worse if you have HIV.

*Approximately **3 out of 5 people with HIV** in Ontario **spend more than 30% of their income on housing***



Understanding the Challenges of Navigating the Housing System

*“They sent me to this other place where the hydro was like a thousand dollars, the rent was going to be six...the next one they showed me [was] back to the ghetto place, it was just disgusting. There was no school...there was no where for me to work if I was trying to locate a job...so I said no to that one and then they said to me this is your last chance, if you don’t take the next place we show you, we’re not helping you, too bad and you’re going to have to find somewhere else to live and we’re done...I didn’t even get a chance to deal with the fact that I was positive...” **Participant testimony***

Community Based Research

STUDY BACKGROUND



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The Study Background

- Community members witnessed many people with HIV having problems finding appropriate and affordable housing
- Community agencies took action by arranging meetings with researchers and policy makers, and learned that there was a lack of information on the link between HIV/AIDS and housing
- 2008 Ontario Ministry of Health Strategy to Address HIV/AIDS identified housing as the most urgent unmet need of people with HIV



The Study

Peer Research Assistants conducted 600 interviews with people with HIV from across Ontario

Collected data on:

- ✓ age
- ✓ gender
- ✓ sexual orientation
- ✓ ethnicity and language
- ✓ education and income
- ✓ mental and physical health
- ✓ substance use
- ✓ ability to buy food & clothes
- ✓ housing status
- ✓ use of health services
- ✓ experience with the criminal justice system

Expected Outcomes

- *To position people with HIV/AIDS in safe and stable housing situations that improve their access to health care, treatment and social services*
- *To develop effective and appropriate housing policies and supportive healthcare models that provide sustainable support to people with HIV throughout their lives*

Our Method

EMPOWERING PEER RESEARCHERS



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The Concept of Empowerment

“A multi-dimensional social process that helps people gain control over their own lives. It is a process that fosters power [that is, the capacity to implement] in people, for use in their own lives, their communities and in their society, by acting on issues they define as important.”

“Empowerment: What is it?” *Journal of Extension*, Volume 37, Number 5 (October 1999)

Overcoming Isolation

powerless

frustrated

trapped

paralyzed

depressed

Fearful

broken

Benefits of Peer Research

Skill Building



Community Support



Personal growth and Development

Opening Doors

- ***Experts within our field of experience***
- ***Catalyst for personal change***
- ***Process of Research for Action***



Our Key General Findings

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Our Findings

Approximately

1 in 3



were at risk of losing their homes

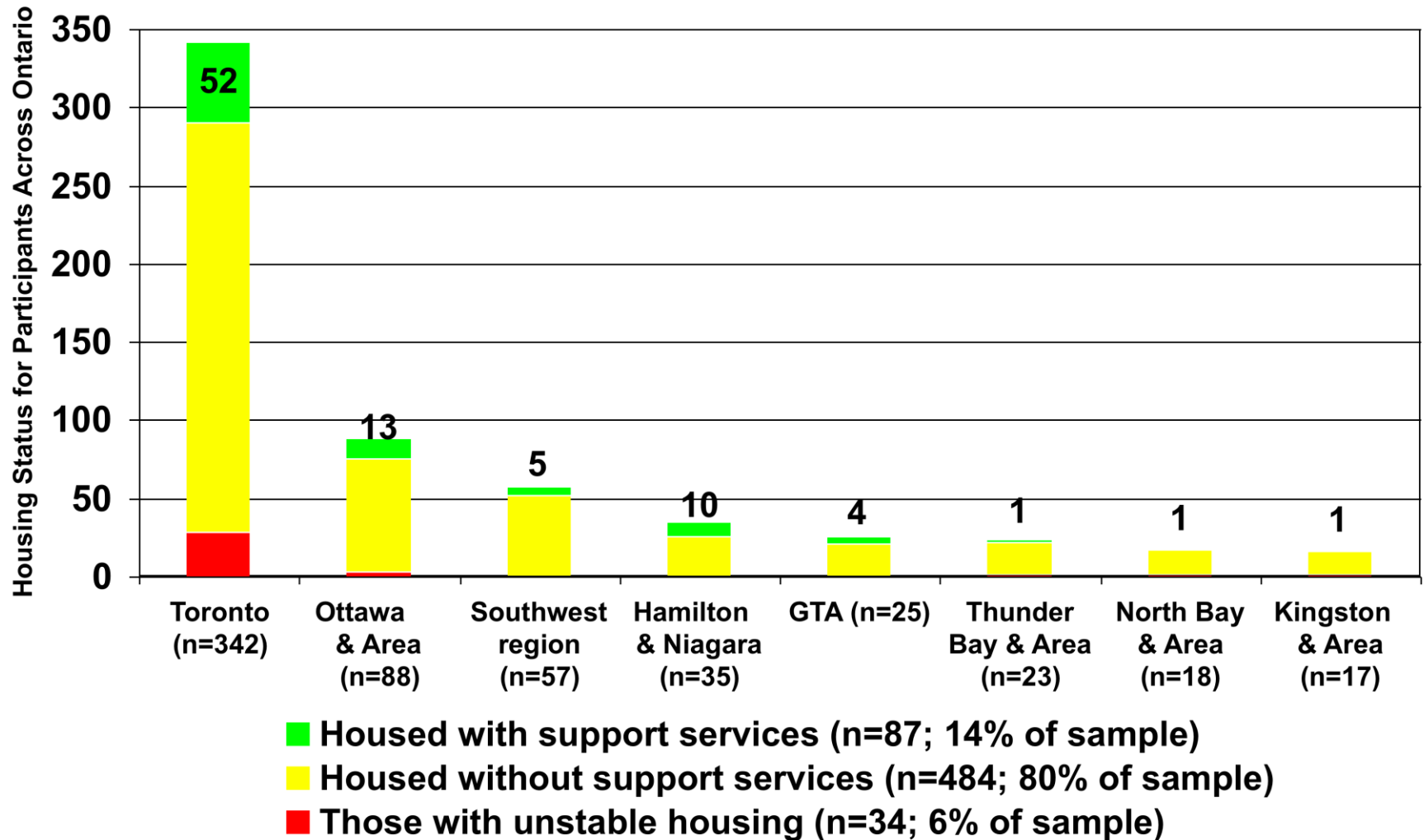
The Social Demographic Profile

The majority of study participants were found to be:

- Male
- Men who have sex with men
- Middle aged
- Above high school education
- Low income

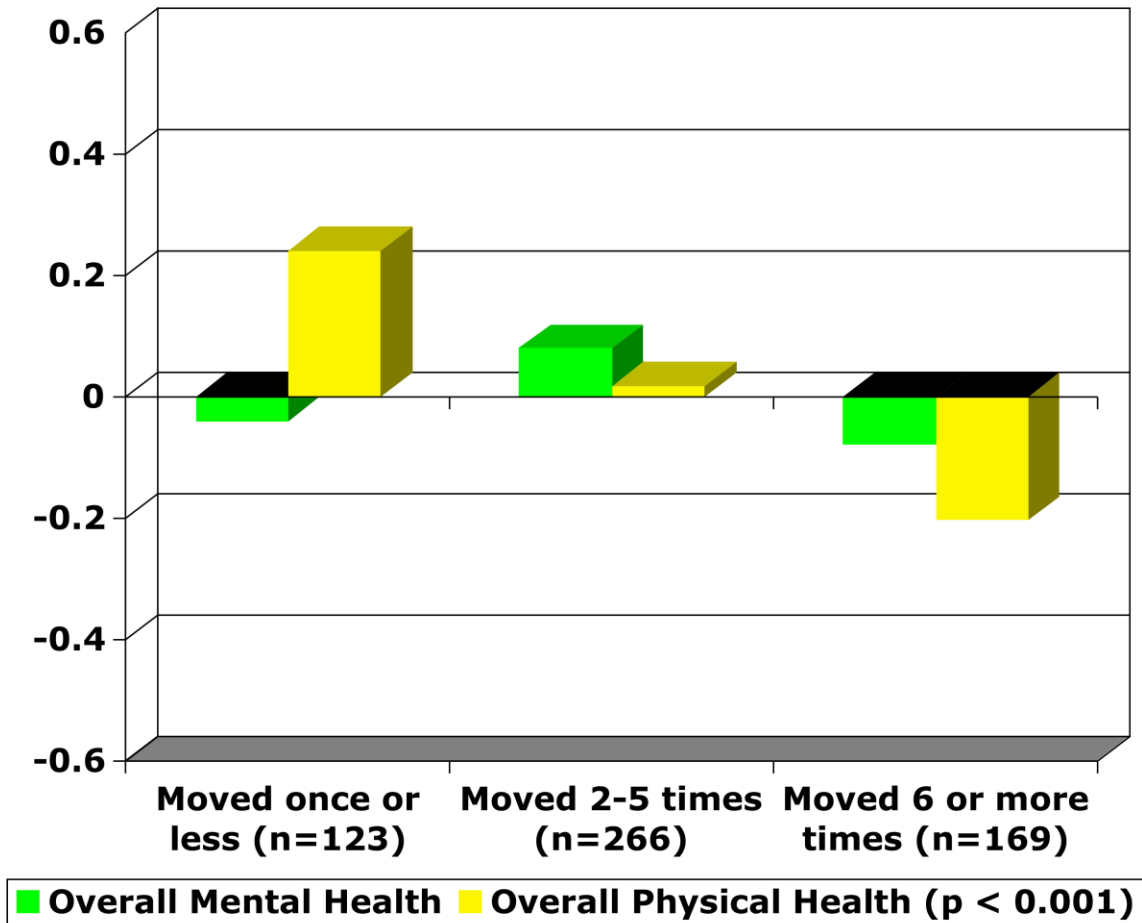


Housing Status for People with HIV by Ontario Region



P = 0.05 (marginal differences in proportions across geographical areas)

Impact of Moving Since HIV Diagnosis on Health Related Quality of Life



Key Results for the Province

25% felt they did not belong in their neighborhoods

50% of participants spent 30% or more of their income on housing

20% are dissatisfied with their access to housing and social service agencies

75% had a monthly income under \$1,500

23% moved in the last year, of which nearly **60%** moved more than twice

About 40% had difficulty paying monthly rent and housing costs

43% had access to rent-geared-to-income programs

Key Results for Women in Ontario

78% lived with and cared for their children

90% identified as heterosexual, as compared to about **20%** of male participants

48% identified as African/Caribbean or Aboriginal

Our Key Qualitative Findings

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The Sub Study

Peer Research

Assistants conducted 50 in-depth qualitative interviews to better understand the housing experiences of participants with HIV

Collected data on:

- ✓ Housing status
- ✓ Income
- ✓ Family status
- ✓ Mental health
- ✓ Substance use
- ✓ Access and use of health services
- ✓ Experience with criminal justice system
- ✓ Social determinants of health

Our Findings for Women with HIV

Women with HIV were

3 times

more likely to be unstably housed



Key Study Results, Women with HIV

1 out of 3 had been homeless at least once

1 out of 3 had less than high school education

72% had difficulty buying clothes

40% experienced housing related discrimination

About **13%** had experienced homelessness as compared to about 6% of men

2 out of 3 had difficulty buying food

Facing Stigma

“... the [housing] system is very discriminating and especially to us immigrants...what I found quite challenging with the system, [is] the fact that I’m an immigrant, and a single mother and a woman with HIV and a black woman was all working against me...”

Experiences with Discrimination

“When I go to the [African/Caribbean] community in which they don’t talk about AIDS...you don’t really feel comfortable just talking about being HIV positive ‘cause of discrimination and stigma. Of course some people, at the first sign any woman mentions that you’re HIV positive it’s ... everyone disappears in your life, you know?”

Cost of Living

“...if it’s not the hydro and it’s not the housing where you’re living in, it’s going to be a medication and if it’s not the medication it’s going to be about the food and if it’s not about the food it’s always about something...it’s something different everyday so you have to learn to choose and pick your battle...”

Impact on Families

“Being a mother, being a positive mother, a single mother, you think about your child, because that’s what you live for. But people, they don’t really understand; it doesn’t mean that because you’re HIV positive you don’t have plans, don’t have pride. HIV’s just a disease. It doesn’t mean it stops me from thinking; doesn’t mean it stops me from going to school; doesn’t mean it stops me from working....

Just when I wake up every day I’m just like every other mother. And when my child looks at me, I’m the best thing she has in the whole world. But in case something happens, we are living in this house, she’s just under my umbrella; She’s under me, my umbrella. But if something happens to me, then she doesn’t have her home. That’s my main concern...What happens to our kids?”

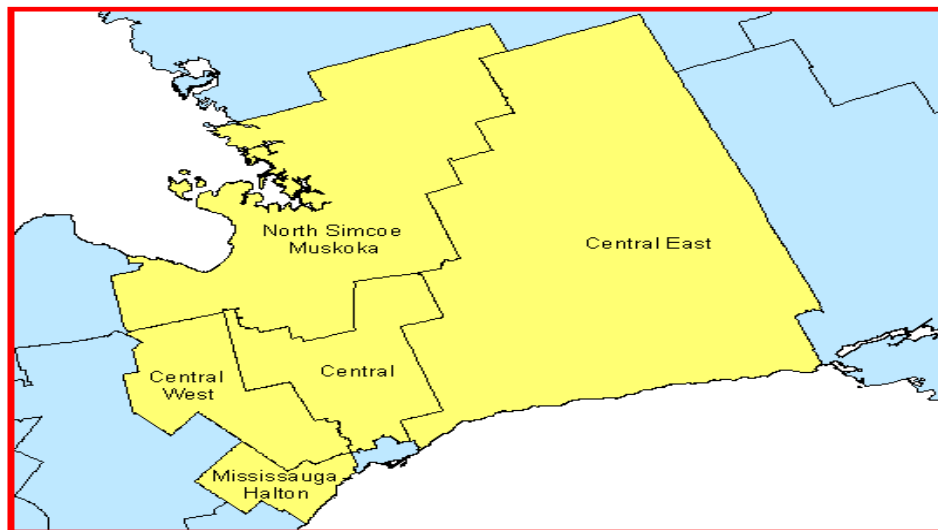
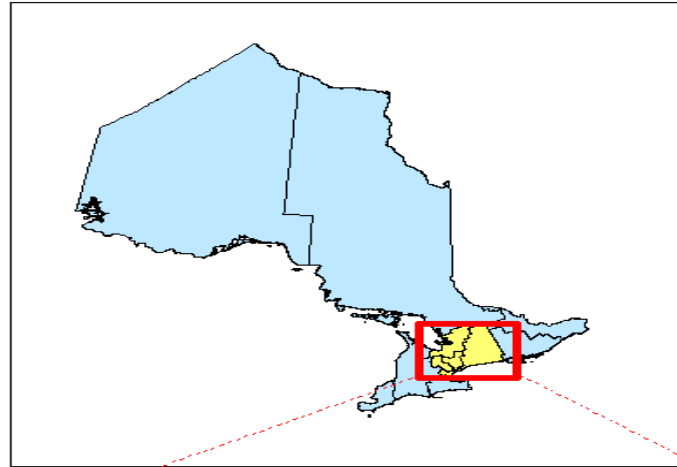
Our Key Findings

CENTRAL ONTARIO



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Focus on Central Ontario



The Social Demographic Profile

When compared to the rest of Ontario, participants from Central Region were **more likely** to be:

- Female or transgendered
- Employed
- Higher income



Health Status in Central Region

As compared to other regions, more participants from Central Region reported:

- Less harmful alcohol and substance use
- Less experience with significant depression
- More recent HIV diagnosis
- Being on HIV treatment
- Not having been diagnosed with an AIDS defining health condition



Housing Status in Central Region

Central Region participants were **less likely** than others in Ontario **to have**:



- A history of homelessness
- Moved in the previous year
- A history of incarceration

Housing Status in Central Region

Central Region participants were **more likely** than others in Ontario **to have experienced housing related discrimination**



Access to Health Services

As compared to the rest of Ontario, Central Ontario participants:



Made less use of mental health services and culturally-specific health services.

Used medical doctor services about the same amount

Made more visits to HIV specialists

Impact on Families in Central Region

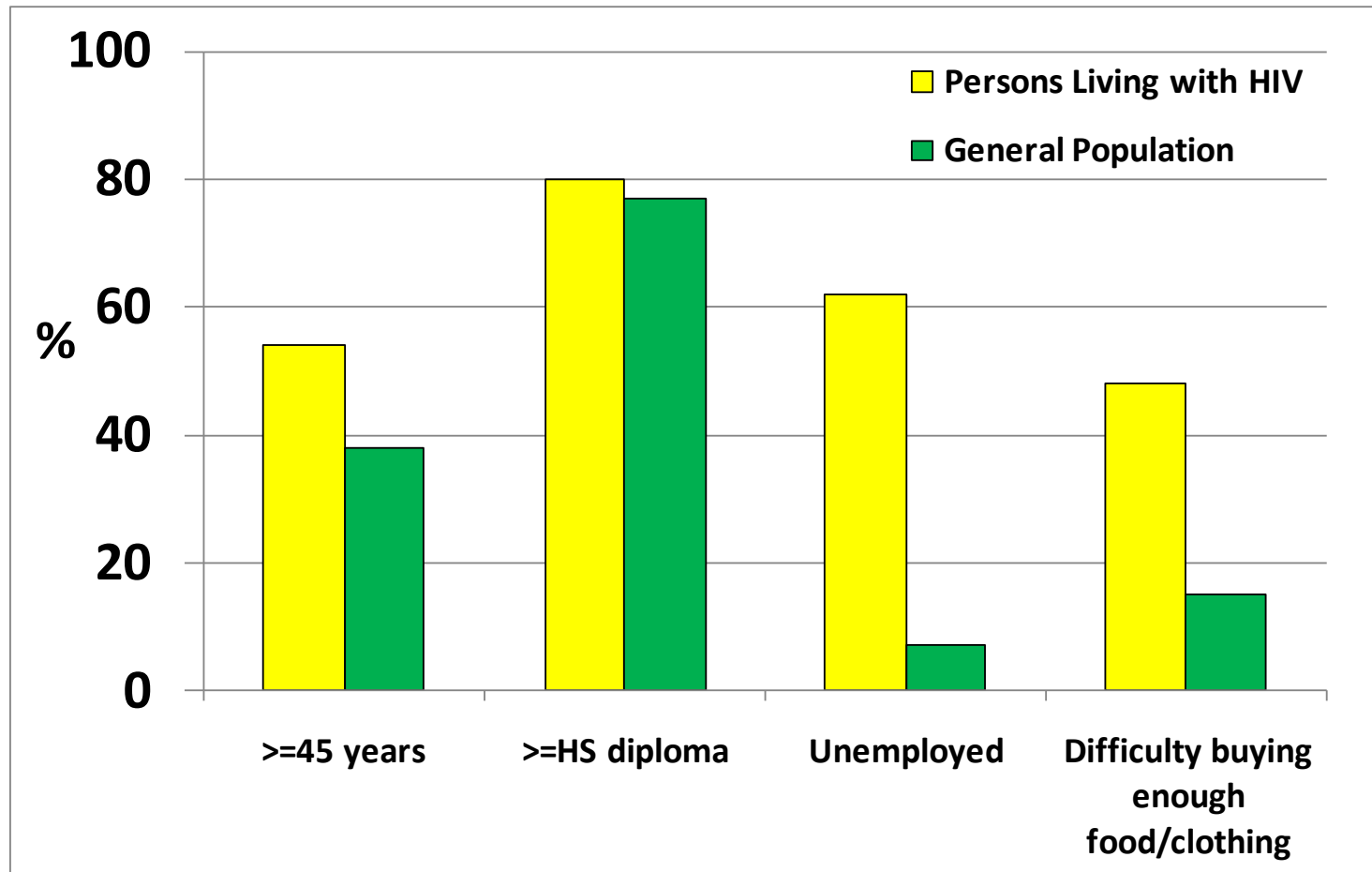
As compared to other regions, participants in Central Region were

twice as likely

to live with their children.

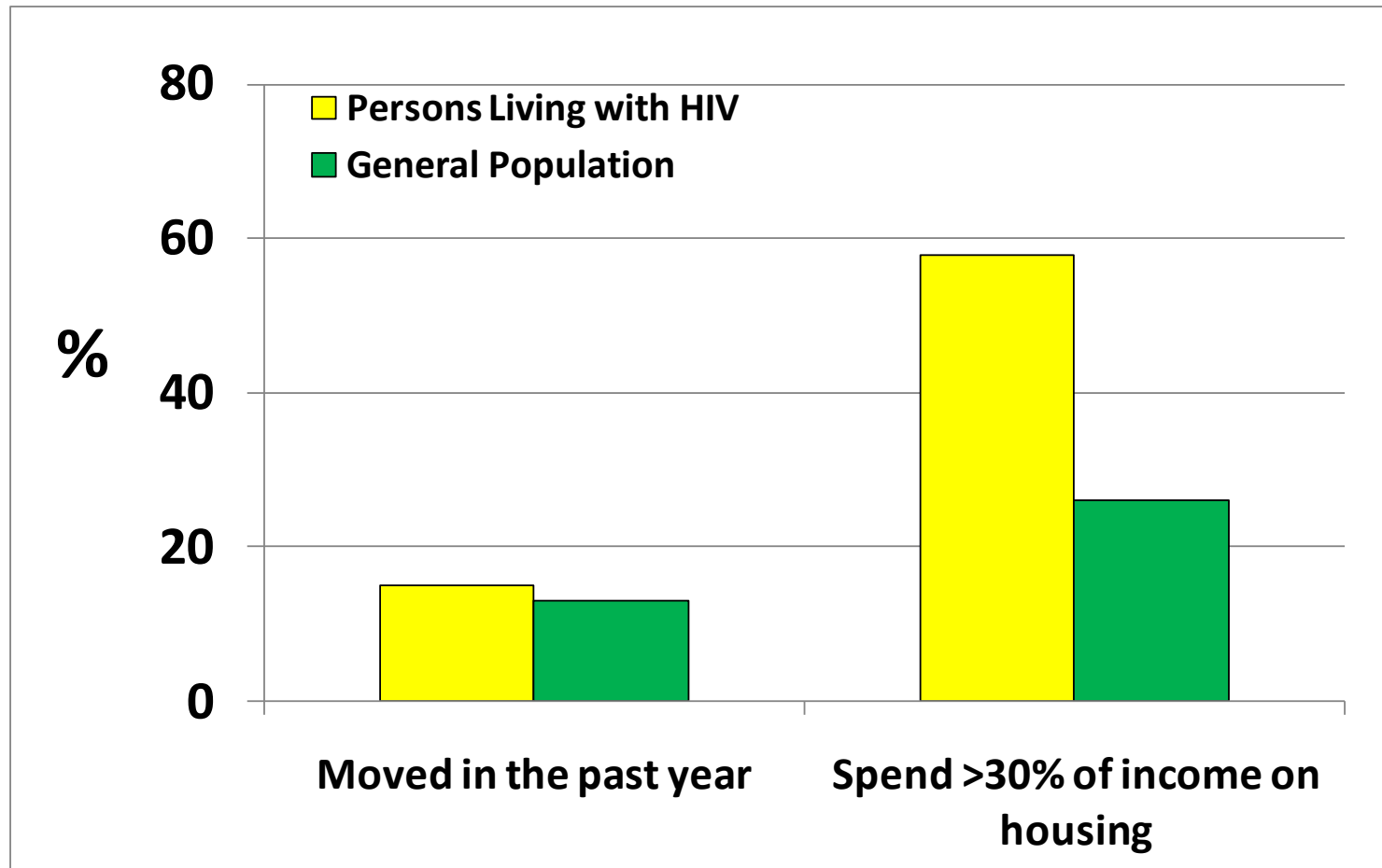


Unemployment and Decreased Purchasing Power: People with HIV in Central Region versus General Population



Data for general population taken from 2006 Canadian Census, regions based on LHINs

Cost of Living: People with HIV in Central Region versus General Population



Data for general population taken from 2006 Canadian Census, regions based on LHINs

Key Message: Barriers facing people with HIV in Central Region

When compared to the general population, people with HIV in Central Region were **significantly more likely** to:

- Be unemployed
- Have difficulty buying enough food and clothing
- Spend over 30% of their income on housing



Next Steps

RESEARCH TO ACTION STRATEGIES



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What we did and are still doing at a local, regional and provincial level

- Presentations at all stages of the study
- Regional meetings with housing providers and other health sectors such as mental health, addictions and population specific serving agencies
- Regional fact sheets

What we did and are still doing at a local, regional and provincial level

- Meetings with policy makers
 - CEOs and Boards of Local Health Integration Networks (LHINS)
 - Ontario Ministry of Health, Addictions and Mental Health
 - Ontario Ministry of Health, AIDS Bureau
- Press releases with local media
 - Local partner agencies released information through the press to raise awareness of the issue in the general community

What we did and are still doing at the national and international level

- National HIV, Housing and Health Research to Action Symposium
 - AIDS community, housing providers, researchers, policy makers and funders from across Canada met to review findings of Positive Spaces Healthy Places and strategized together about next steps
- International Partnerships
 - Collaborative relationship developed with US National AIDS Housing Coalition (NAHC) to learn from their work.
 - Symposium on Poverty, Homelessness and HIV/AIDS at the International AIDS Conference in Mexico, August 2008 with NAHC, Housing Works and San Francisco AIDS Foundation

Impact of Our Work To Date...

- PSHP findings cited in the Ontario Human Rights Commission report: Right at Home: Report on the consultation on rental housing and human rights
- \$19m in government funding for new supportive housing for people with HIV in Toronto, increase of 35%
- \$200,000 in new funding for supportive housing for PHAs in southwestern Ontario

Impact of Our Work To Date

- People with HIV and substance use issues now eligible for new supportive housing developed for people with addictions in Ontario
- New relationships with regional health planners
- International Declaration on Poverty, Homelessness and HIV/AIDS presented and accepted by the International AIDS Society

Impact of Our Work To Date

- 1st North American Research and Capacity Building Symposium held in Washington D.C. in June 2009
- Hosting 2nd North American HIV/AIDS & Housing Research Summit in Toronto, Canada in June 2010
- Funding for more research including:
 - Aboriginal, African and Caribbean communities
 - Francophone communities
 - Families with HIV/AIDS
 - Phase III and Phase IV of PSHP

Closing the Gap Between Research and Action

Our strategy will continue to be based on the following five principles:

1. About *people* and *partnerships*
2. A *culture*, not an activity
3. About the *interconnection* between evidence-based research and practice-based (front-line) evidence
4. A moral *imperative*
5. About solving problems *together*

Next Steps

SOLUTIONS & RECOMMENDATIONS



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Housing Solutions

- NO “one size fits all” housing strategy
- Housing solutions must be tailored to the local populations they seek to house and address the context of their lives
- Staying in one place does not necessarily mean living in appropriate, safe and stable housing
- Towards a scattered model of supportive housing (not unit based)

Partnership Strategies

- Build a stronger case by developing collaborative relationships among all stakeholders, including health care decision makers and community service providers in mental health and addictions, supportive housing, and HIV/AIDS support, treatment and care
- Overcome barriers by working across boundaries – municipal, provincial, and regional – and sectors
- Involve policy makers and other stakeholders early on to move research into action

Key Recommendations

- Develop effective and appropriate housing policies and supportive healthcare models that provide sustainable support to people with HIV throughout their lives
- Learn from best practice models in other areas, including other regions across Ontario, Canada, and internationally

In thanks to our funders



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Ontario AIDS Network

With support from our partners



Ontario AIDS Network



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Thank you! Questions?

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