



National Alliance to End Homelessness

Homelessness and HIV/AIDS

Health and homelessness are deeply interwoven issues. Chronic illness and/or disabling conditions, including HIV/AIDS, are more prevalent in the homeless populations.

Of the estimated 3.5 million people who are homeless every year in the U.S. as many as 3.4 percent are HIV positive. This represents a rate 3 times higher than that of the general population. In specific homeless subpopulations, the rate is estimated to be even higher.¹

In general people living with HIV/AIDS are at a higher risk of homelessness than the general population. Some studies have indicated as many as half of individuals with HIV/AIDS are at risk of homelessness due to unaffordable housing costs and the high cost of medical care.

Health Impacts

People who are homeless have higher rates of illness and chronic diseases than the general population. The conditions of homelessness including nutritional deficiencies, exposure to the elements and extreme weather, and other lifestyle factors, can exacerbate or cause chronic health problems.² According to a study by HUD, more than two-thirds of those who were homeless suffered from a chronic illness and nearly a quarter indicated they needed to see a doctor in the last year but were unable to do so.³

For homeless individuals living with HIV/AIDS the conditions of homelessness are even more dire. The impact of HIV/AIDS on a person's immune system makes homelessness a serious health risk. Homeless shelters, while they provide respite from the elements are often a significant threat to people with HIV/AIDS. Shelter conditions can expose people with HIV/AIDS to dangerous and even life threatening infections such as hepatitis A, pneumonia, tuberculosis, and skin infections. One study shows that homeless people with HIV who sleep in a shelter are twice as likely to have tuberculosis as the general shelter population.⁴

Homelessness not only puts individuals with HIV/AIDS at a high risk of contracting an infections, it also makes obtaining and using common HIV/AIDS medications more difficult.⁵ Antiretroviral medications used to treat HIV come with demanding and rigorous regimens. Without stable housing, access to clean water, bathrooms, refrigeration, and food the likelihood of taking the medication on a regular schedule, which is vital for proper treatment, is severely impaired.⁶

Housing for People with HIV/AIDS

Affordable housing for people with HIV/AIDS is vital. A study in New York indicated that once in supportive housing formerly homeless individuals were four times more likely to seek medical care than those in case management alone.⁷ Additionally stable housing increases the likelihood of being placed on anti-HIV drugs.⁸

The U.S. Department of Housing and Urban Development currently administers the Housing Opportunities for Persons with AIDS (HOPWA) program. HOPWA is a relatively small federal housing program the provides funding to 79 cities and 38 states.

Sources

- ¹ AIDS Housing of Washington, "Homelessness and HIV/AIDS," *AHW Fact Sheets*, (Spring 2003).
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- ³ U.S. Department of Housing and Urban Development, *Homelessness: Programs and the People They Serve Technical Report*, (December 1999). Available: www.huduser.org/publications/homeless/homeless_tech.html
- ⁴ Adams, Michael, *HIV and Homeless Shelters: Policy and Practice*, American Civil Liberties Union AIDS Project, (1999). Available: http://archive.aclu.org/issues/gay/hiv_homeless.html
- ⁵ Curry, Jen, "Homelessness and HIV/AIDS," *CRIA Update*, Vol. 9, No. 3, Community Research Initiative on AIDS, (Summer 2000). Available: www.thebody.com/cria/summer00/homeless.html
- ⁶ Song, pp. 35-36.
- ⁷ AIDS Housing of Washington.
- ⁸ Curry.