



Housing Opportunities for Persons with AIDS

Assistance to Achieve Stable Housing Results for Low-Income Persons who are living with HIV/AIDS and their families

The Housing Opportunities for Persons with AIDS (HOPWA) program provides housing assistance and related supportive services for low-income persons living with HIV/AIDS and their families. Housing efforts also help to address issues of discrimination and stigma that have created barriers to achieving stable living situations. The program targets housing and other support to the most vulnerable households—those with health and life challenges from HIV/AIDS and very limited incomes. HOPWA supportive housing also serves as a cost-effective housing intervention that reduces emergency care costs and improves life outcomes for beneficiaries.

Every person, regardless of age, gender, race/ethnicity, sexual orientation, gender identity or socio-economic circumstances, will have unfettered access to high quality, life extending care, free from stigma and discrimination.

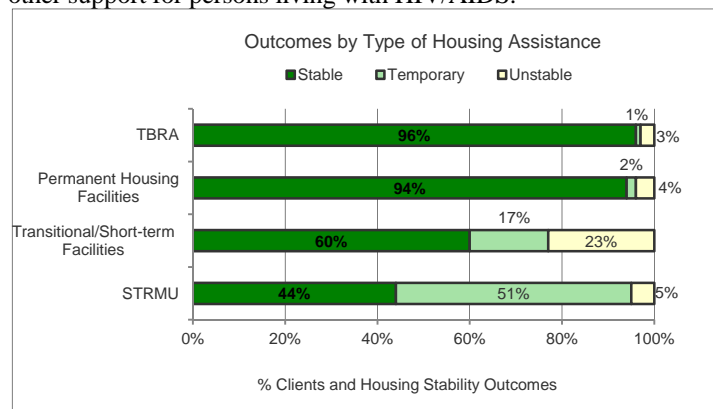
National HIV/AIDS Strategy for the United States
July 13, 2010

The first step to better health is a roof over your head care.

HOPWA housing resident, Chicago

PERFORMANCE MEASUREMENT

The HOPWA program helps beneficiaries improve their health by providing stable housing as a basis for increased participation in appropriate health care and other support. Program achievements are measured by grantees and reported in annual performance reports on housing outputs. Client outcomes for beneficiaries are demonstrated in efforts that establish or help maintain stable housing arrangements, reduce the household's risks of homelessness, and improve access to health care and other support for persons living with HIV/AIDS.



Outcomes by type of housing assistance: Tenant-based Rental Assistance is 96% stable, 1% temporary, and 3% unstable; Permanent Housing Facilities is 94% stable, 2% temporary, 4% unstable; Transitional/Short-term Facilities is 60% stable, 17% temporary, and 23% unstable; and Short-term Rent, Mortgage and Utility Assistance is 44% stable, 51% temporary, and 5% unstable.

The provision of stable housing is a critical component in a comprehensive HIV prevention and care systems. HOPWA support underpins the related national investment in HIV medications and care by improving the client's consistent and appropriate access to this care. Housing is a base from which individuals can access health care: stable housing can facilitate adherence to treatment regimens, reduction of HIV risk behaviors, and linkages to needed care and social services. The National HIV/AIDS Strategy and Opening Doors recognize housing as a key structural intervention and contain actions to integrate housing with other needed services. HUD is serving as a lead agency for planning and implementing activities to improve housing outcomes and access to HIV-related services in order to achieve goals and objectives established under these national strategies.

HUD Strategic Plan 2010-2015

The Department's mission is to *Create strong, sustainable, inclusive communities and quality affordable homes for all.* HUD's Strategic Plan FY2010-2015, issued May 12, 2010, included these key HOPWA related goals:

Goal 2: Meet the Need for Quality Affordable Rental Homes.

- End Homelessness and Substantially Reduce the Number of Families and Individuals with Severe Housing Needs.

Goal 3: Utilize Housing as a Platform for Improving Quality of Life.

- Improve health outcomes.
- Improve housing stability through supportive services for vulnerable populations including seniors, persons with disabilities, homeless persons and those at risk of being homeless.

CONSOLIDATED PLANNING

Recipient communities make use of HUD and other resources through the area's Consolidated Plan. This involves HOPWA formula grants used in coordination with other HUD programs and other community resources, such as State, local and private funds. HOPWA grantees work in partnerships with over 950 area nonprofit organizations, including faith-based, and grassroots community organizations, to provide support to clients. The Consolidated Plan process involves public consultations in assessing needs, creation of multiple-year strategies and development of annual plans for targeting results achieved through the use of these resources.

FORMULA PROGRAMS

In FY2011, the HOPWA program received an appropriation of \$334.33 million, essentially level with prior year funding (0.2% cut from FY10). Ninety percent of program funds are distributed under a formula that is based on AIDS surveillance information from the Centers for Disease Control and Prevention (CDC),

including cumulative AIDS cases and area incidence. In FY 2011, a total of \$297.888 million was allocated by formula to 134 grantees, to the qualifying cities and one county for 93 eligible metropolitan statistical areas (EMSAs) and to 41 eligible states for areas outside of EMSAs. Nine of the MSA allocations are managed by state agencies, by agreement. A description of the areas and allocation data for each HOPWA formula program is found at:

<http://www.hud.gov/offices/cpd/aidshousing/programs/formula>.

COMPETITIVE MODEL PROGRAMS

Ten percent of HOPWA funds are made available each year to support projects that demonstrate model or innovative approaches to providing permanent or short-term/transitional housing support and for projects in areas that do not qualify for formula allocations. Funds are made available with priority for the renewal of expiring competitive grants which operate permanent supportive housing efforts. Currently 92 projects are operating, with funds provided for a three-year period. In 2011, HUD awarded \$24 million to 26 renewal projects that will continue operations as permanent supportive housing projects. There were 30 renewals in FY2010.

FY2011 New Projects to Increase Access to Housing and Services. HUD targeted \$9.1 million for a HOPWA initiative to demonstrate new integrative HIV housing plans. Six to eight States or localities will be awarded funds by competition to provide housing assistance to low-income persons with HIV/AIDS and to forge new partnerships through comprehensive plans that integrate housing and non-medical supportive services in better coordination of local service delivery. Applications are due to HUD by 8/2/11. Selected projects will show models of cross program approaches in needs assessment and service evaluations. The effort will help to achieve the NHAS goal for improved housing stability for beneficiaries of CARE programs.

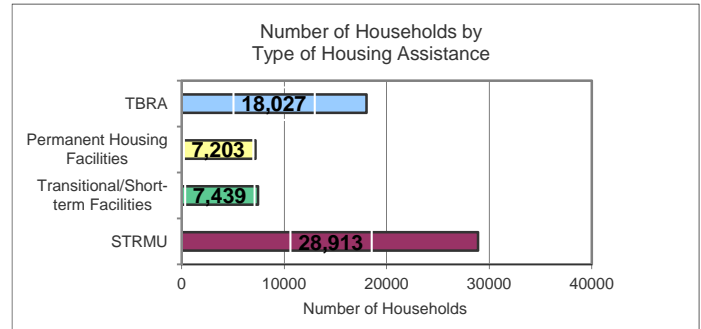
TECHNICAL ASSISTANCE PROGRAM

In addition, \$3.34 million was designated for technical assistance activities that are part of the HUD Transformation Initiative. This OneCPD approach will include support for achieving CPD program results for local projects and promote the sound management of these area programs, including evaluation of performance data collected on outcomes.

PROGRAM USES IN HOUSING OUTPUTS

In program year 2009-2010, grantees reported that 60,669 low-income households were assisted. A wide range of housing is supported with HOPWA funds including rental assistance payments and support for maintaining current residences through the use of short-term rent, mortgage and utility payments. Funds also are used for the operating costs for supportive housing facilities, such as community residences which support beneficiaries with on-site activities and services.

The supportive housing efforts may involve support for residents with their daily living activities; case management; substance abuse treatment and counseling; and other services, to help beneficiaries maintain appropriate housing and access other needed support. HOPWA clients also use a range of health and supportive services funded by DHHS through the Ryan White CARE Act and other public or private support.



Number of households by type of housing assistance: Tenant-Based Rental Assistance is 18,027; Permanent Housing Facilities is 7,203; Transitional/Short-term Facilities is 7,439 and Short-Term Rent, Mortgage and Utility assistance is 28,913.

Grantee and project sponsor administrative costs are also available and limited by statute (3 percent for grantees and 7 percent for project sponsors). Other support is provided by resource identification activities to establish, coordinate and develop housing resources to assist HOPWA eligible households.

HOPWA targets housing support to households having the lowest incomes, with 91 percent of beneficiaries having extremely-low incomes (less than 30 percent of the area's median income) and another 7 percent of beneficiaries have very-low incomes (less than 50 percent of area median income)—data from HOPWA ten largest grantees.

No one should experience homelessness.

No one should be without a safe, stable place to call home.

Federal Strategic Plan to Prevent and End Homelessness 6/22/10

AUTHORIZATION AND REGULATIONS

Authorization: AIDS Housing Opportunity Act (42 U.S.C. 12901) as amended. Funds were appropriated in FY 1992 and for subsequent years in annual appropriation acts.

Regulations: HOPWA Final Rule, 24 CFR Part 574, as amended, & Consolidated Submissions for Community Planning and Development Programs, Final Rule, 24 CFR Part 91.

FOR MORE INFORMATION CONTACT

Office of HIV/AIDS Housing Email HOPWA@HUD.GOV.

www.HUDHRE.info/HOPWA and at: www.AIDS.GOV.