

The New Orleans CHANGE Coalition

HIV/AIDS

Housing Analysis:

2008, 2011, & 2013

Research Findings and Analysis Report

**AN ASSESSMENT OF HOUSING NEEDS AMONG PLWHA
IN THE NEW ORLEANS METRO AREA**



This report was prepared by Collaborative Solutions, Inc. (CSI), with funding provided by AIDS United through the Southern REACH grant project. The information contained in this report is based on Louisiana PLWHA Statewide Needs Assessment data from 2008, 2011 and 2013, the City of New Orleans 2012 HOPWA CAPER, and consumer focus groups conducted in 2013. Data from the PLWHA Statewide Needs Assessments is used with permission of the Louisiana Office of Public Health, STD/HIV Program. The purpose of the report is to inform the reader on housing needs among PLWHA in the New Orleans area.

CSI is a nonprofit organization based in Birmingham, Alabama, with a mission to work in partnership for the empowerment of human service organizations and communities in order to positively impact special needs populations. CSI has partnered with the Coalition of HIV/AIDS Nonprofits and Governmental Entities (CHANGE) on various projects to further the missions of both programs. The CHANGE Coalition advocates on behalf of persons living with or at risk of HIV infection to achieve improved health outcomes and systems change through collaborative prevention, testing diagnosis, linkage to care, retention in care, supportive services, and housing throughout the Greater New Orleans area.



Collaborative Solutions, Inc.
P.O. Box 130159
Birmingham, AL 35205
(205) 939-0411
(205) 939-4048 fax
collaborative-solutions.net

INTRODUCTION

The following is an assessment of HIV/AIDS housing and service needs in the New Orleans area. This analysis uses existing community data and consumer assessments to quantify various aspects of housing need.

DATA SOURCES

PLWHA Statewide Needs Assessments (SNA)

The data analyzed in this investigation comes primarily from the Louisiana Persons Living With HIV/AIDS (PLWHA) Statewide Needs Assessments conducted in 2008, 2011, and 2013, under contract with the Policy and Research Group, by the State Office of Public Health, STD/HIV Program. All Ryan White Part A-funded case management and/or Primary Health Care agencies offered the survey to clients. In New Orleans this included HOP Clinic, NO/AIDS Task Force, Priority Health Care, T-Cell Clinic, FACES, and Southeast Louisiana AHEC. The respondents were determined through convenience sampling, as the survey was advertised at agencies. Consumers could take the survey while waiting at the agency to receive case management or other services, and/or come to the agency specifically to take the survey. The surveys were self-administered and available in both English and Spanish; additionally, peer coordinators were available to assist with survey completion, if needed. Consumers who completed the survey were given a \$10 gift card in appreciation for their participation, except for the 2013 survey when the appreciation was offered via raffle tickets to win a media device.

The needs assessment was designed to collect a broad range of information from PLWHA throughout the state and within each of the eight administrative regions. The survey collected information about basic demographics, employment and income, barriers to HIV medical care, housing, childcare, transportation, mental health and substance use, other services, and social support.

In 2008, nearly 1,850 PLWHA statewide responded to the needs assessment survey, in 2011 there were nearly 950 responses, and in 2013 a total of 1,577 consumers responded. The sample for analysis was determined to be those consumers living in Metropolitan Statistical Area (MSA) at the time of survey completion. The number of clients retained for analysis was 594 (2008), 465 (2011), and 487 (2013) respectively (See Figure 1).

Figure 1. Statewide Needs Assessment: Respondents Retained for Analysis

2008 SNA	2011 SNA	2013 SNA
N=594	N=465	N=487

HOPWA Consolidated Annual Performance and Evaluation Report (CAPER)

The Housing Opportunities for Persons with AIDS (HOPWA) CAPER was submitted to the U.S. Department of Housing and Urban Development (HUD) by the City of New Orleans for calendar year 2012. The CAPER report for HOPWA formula grantees is a required report and provides annual information on program accomplishments that supports program evaluation and the ability to measure program beneficiary outcomes as related to maintaining housing stability; preventing homelessness; and improving access to care and support. The report included an assessment of the relationship of HOPWA funds to goals and objectives, grantee and community overview, annual performance under the action plan, barriers and trends overview, and accomplishment data. This information is also covered under the Consolidated Plan Management Process (CPMP) report and includes narrative responses and performance charts required under the Consolidated Planning regulations.

OVERVIEW OF HOUSING SITUATION FOR PLWHA

Demographics

The Louisiana Statewide Needs Assessment (SNA) data from 2008, 2011, and 2013 was analyzed across various demographic variables. Figure 2 below includes information about age, gender, race, ethnicity, household income and source, rent, overall health status, and level of employment and education for the respondents in the New Orleans MSA (See Figure 2).

Figure 2. Demographic Characteristics of Survey Respondents

		2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)	Trend
Age	Mean (SD)	41.3 (10.2)	43.8 (11.5)	44.04 (11.9)	↑
	24 and under	4.2% (25)	4.3% (20)	4.1% (20)	-
	25 and over	92.3% (548)	89.2% (415)	88.3% (430)	↓
	No Response	3.5% (21)	6.5% (30)	7.6% (37)	↑
Gender	Female	31.60% (188)	37.40% (174)	38.2% (186)	↑
	Male	62.60% (372)	58.10% (270)	57.9% (282)	↓
	Transgendered	1.20% (7)	3.40% (16)	3.9% (19)	↑
	No Response	4.5% (27)	1.1% (5)	0.0% (0)	↓
Race	Black	66.0% (392)	66.9% (311)	66.5% (324)	-
	White	19.7% (117)	25.2% (117)	23.8% (116)	-
	Other	8.6% (51)	5.8% (27)	7.0% (34)	-
	No Response	5.7% (34)	2.1% (10)	2.7% (13)	-
Ethnicity	Hispanic	9.40% (56)	6.70% (31)	7.4% (36)	-
	Non-Hispanic	77.8% (462)	77.0% (358)	85.8% (418)	↑
	No Response	12.8% (76)	16.3% (76)	6.8% (33)	-
Income (outliers removed)	Mean (SD)	\$982.95 (\$901.50)*	\$827.02 (\$849.34)	\$908.76 (905.27)	-
Sources of Income	Wages or salary	24.1% (143)	16.3% (76)	19.3% (94)	-
	SSI	29.6% (176)	34.8% (162)	34.1% (166)	↑
	SSDI	20.2% (120)	22.6% (105)	24.8% (121)	↑
	AFDC/TANF	1.5% (9)	3.0% (14)	1.0% (5)	-
	Child support or alimony	1.2% (7)	1.9% (9)	0.6% (3)	-
	Unemployment	1.3% (8)	1.7% (8)	2.3% (11)	↑
	Food Stamps	42.1% (250)	42.2% (196)	44.1% (215)	↑
	Other	3.2% (19)	5.2% (24)	4.5% (22)	-
Amount Contributed to Rent/Mortgage (outliers removed)	Mean (SD)	\$390.55 (356.74)	\$387.65 (364.75)	\$412.14 (358.60)	-
Health Condition	Poor	7.90% (47)	6.00% (28)	6.8% (33)	-
	Fair	27.10% (161)	23.70% (110)	21.8% (106)	↓
	Good	44.40% (264)	35.10% (163)	37.8% (184)	-
	Very good**	-	22.40% (104)	19.7% (96)	↓
	Excellent	18.50% (110)	10.80% (50)	13.3% (65)	-
Employment***	No Response	2.1% (12)	2.2% (10)	0.6% (3)	↓
	Employed	32.60% (194)	25.40% (118)	25.5% (124)	↓
	Unemployed	61.80% (367)	71.8% (334)	73.1 (356)	↑
	No Response	5.60% (33)	2.8% (13)	1.4% (7)	↓
Education	<High school/GED	31.30% (186)	27.90% (130)	24.2% (118)	↓
	>/= High school/GED	64.70% (384)	69.7% (324)	72.3% (352)	↑
	No Response	4.00% (24)	2.4% (11)	3.5% (17)	-

*In 2008, income was reported by range (Ex. \$1-\$500, \$501-1,000, etc.). The mean income was found by assigning the average income by category to the respondents reporting that category. (Ex. 86 respondents reported an income of \$1-\$500, to calculate the mean, all of the 86 respondents choosing this category were assigned \$250.)

**"Very Good" was not an option in the 2008 survey

***Employment defined as full-time, part-time, and self-employed; Unemployed defined as working on & off and not working

Reviewing the demographic data over time illustrates that the average survey respondent remains a non-Hispanic, black male in his early forties. Of note in the other subpopulations identified in this analysis, the percentage of younger consumers (24 years and younger) remains low, and there is an increasing percentage of transgender and female survey respondents.

Average income has fluctuated over the three years between \$825 and \$985. Also, the income survey questions were asked slightly differently from 2008 to 2011/2013. In 2008, respondents marked an income category (e.g., \$1-\$500) and in 2011 and 2013 respondents reported an actual income amount. There is also a marked increase of consumer respondents who access SSI/SSDI, food stamps, and unemployment benefits across the three years.

In assessing perceived health condition, the central value “Good” on the Likert Scale was consistently found as the most popular answer across all three surveys. The percentage of respondents reporting “Excellent Health” condition fluctuated across the survey iterations. Note: consumers reported “Excellent” and “Good” with high frequency in 2008, while in 2011 many consumer responses shifted to “Very Good”, an option between “Excellent” and “Good” that was created after the survey in 2008.

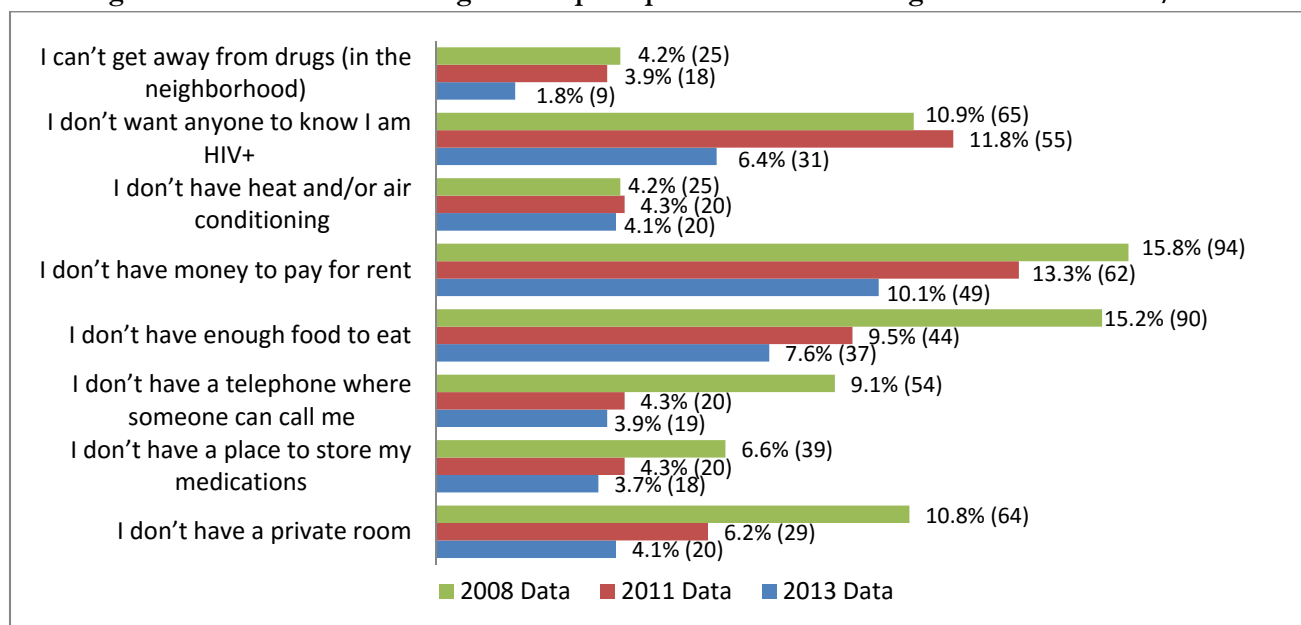
The percent of consumers stating they completed high school has increased steadily over time, while employment levels dropped in 2011 and remain lowered in 2013.

Characteristics of Housing

Recent HIV/AIDS housing research has focused on the connection of housing to health related outcomes. Researchers found positive relationships between stable housing and HIV prevention (Coady et al., 2007; Des Jarlais, Braine, & Friedman, 2007; German, Davey, & Latkin, 2007; Weir, Bard, O'Brien, Casciato, & Stark, 2007), access to and engagement in care (Aidala et al., 2007; Bennett, Pope, & Dantzler, 2007), maintenance of care (Aidala et al., 2007; Smith, 2000), and improved health outcomes (Leaver et al., 2007). Since housing is so critical to managing HIV, it is important to assess the housing challenges clients face and mitigating measures.

In 2011, additional questions were included in the SNA to glean more information from consumers about linkage to care. Fourteen percent of respondents to the 2011 SNA reported that when they were first diagnosed, they were referred for housing services. Five percent (23) of 2011 SNA respondents reported homelessness as one of the reasons it took six months or more to get into care after diagnosis. Of those that reported *ever* having been out of care for a 12-month period or more, 3.4% (16) stated housing was one of the reasons. When asked what caused the respondent to get back into care, 2% (9) reported that finding housing was one of the reasons.

The SNA survey data across 2008, 2011, and 2013 also describes attributes of housing that consumers identified as “stopping them from taking care of their HIV/AIDS.” Across the three iterations of the survey in this analysis, the most frequently cited issues are lack of resources including money rent and food, and fear that others will know about their HIV status. Although there was a percentage change across the three years, these barriers remain at the top of the list in all three datasets (See Figure 3).

Figure 3. Attributes of Housing that Stop Respondents from Taking Care of Their HIV/AIDS

The data shows that across all surveys “Money to Pay for Rent” was the single highest-rated housing attribute that posed a barrier to HIV care for respondents.

Current Living Situation

The SNA survey collected information on respondents’ current living situation. There were 15 possible survey responses to the current living situation question, which were grouped into 8 housing categories for analysis. Those categories were then grouped further into three housing status types: permanent, transitional, and homeless (See Figure 4). For the purposes of the analysis, respondents stating that they were living at a friend’s or relative’s apartment, house, or trailer were considered in permanent housing; however, it is recommended that further distinction is made within this category on the survey to assess if the housing is indeed a permanent arrangement.

Figure 4. Current Living Situation Response Categories

Survey Response Options	Housing Categories	Housing Status: Place of Residence
Apartment/house/trailer that I own	Own	Permanent Housing
Apartment/house/trailer that I rent	Rent	
At my parent’s/relative’s apartment/house/trailer; Someone else’s apartment/house/trailer	Live w someone else	
In a rooming or boarding house; In a “supportive living” facility (Assisted Living Facility); In a half-way house, transitional housing or treatment facility (drug or psychiatric)	Live in a facility	Temporary Housing
Other housing provided from city or state	Other housing provided from city or state	
Hospice; Nursing home; Other	Other	
In jail/prison	In jail/prison	Homeless
Homeless (on street/in car/abandoned building); Homeless shelter; Domestic violence shelter	Homeless/homeless shelter/DV shelter	

All of the consumer responses retained for analysis were broken down by housing status type (See Figure 5). By looking at the place of residence alone, it appears that a large portion of the survey respondents are in permanent housing (63% in 2008, 85% in 2011, and 88% in 2013).

Figure 5. Percent of Respondents by Place of Residence

	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Permanent Housing	62.6% (372)	84.7% (394)	88.1% (429)
Temporary Housing	8.9% (53)	6.5% (30)	5.1% (25)
Homeless	4.1% (24)	3.9% (18)	4.3% (21)
No Response	24.4% (145)	4.9% (23)	2.5% (12)

However, assessing housing need strictly using place of residence can be misleading and provide an underreported statement of need for the community. Place of residence provides some insight into a household's living arrangements; however, it cannot fully define an individual's housing stability status. A household traditionally thought of as living in permanent housing could also experience additional risk factors for housing instability. **It is important to note that currently residing in permanent housing does not necessarily equate to a high level of housing stability.**

Place of Residence + Assessment of Additional Risk Factors = Housing Stability Status

ASSESSMENT OF HOUSING RISK FACTORS

In the previous section analysis indicated that assessing the place of residence alone did not fully assess a household's housing stability status. Using strictly the place of residence as an indicator, less than 15% of respondents across all three years had a housing need (reported as temporarily housed or homeless) and were not in permanent housing. This does not, however, fully address the risk of housing instability households may face. In this assessment, six housing risk factors will be measured and joined with the place of residence analysis to determine a more accurate assessment of housing instability and need. The following sections of this report will discuss the analysis on these seven factors in more detail.

Risk Factors:

HOMELESSNESS:	A history of homelessness in the last six months is an indicator of housing instability
AFFORDABILITY:	A rent burden over 30% of the household's income is an indicator of housing instability
RENT INCREASE:	A potential move caused by an increase in rent of \$50 or less is an indicator of housing instability
TENURE:	A short tenure at the current residence (less than 1 year) could indicate housing instability
SUBSTANCE ABUSE:	A history of treatment for substance abuse in the last 6 months could indicate indicator of housing instability
MENTAL HEALTH:	A history of counseling or other mental health services in the last 6 months is an indicator of housing instability

Homelessness:

This analysis describes two methods of reviewing homelessness reported by SNA survey respondents: reviewing respondents that reported their housing status as currently or recently experiencing homelessness, and reviewing respondents who indicated one or more nights of homelessness in the last year.

Method 1 Assessing Homelessness: The 2008, 2011, and 2013 surveys asked respondents about their current housing as well as their housing six months ago. The first three lines of Figure 7 (below) report on the number of clients that stated they were Row 1.) Homeless currently, Row 2.) Homeless 6 months ago, and Row 3.) Homeless currently and 6 months ago. Note that for this analysis, homelessness was defined as “in homeless shelter”, “domestic violence shelter”, and/or “on the street”.

Method 2 Assessing Homelessness: The surveys asked additional questions about homelessness. The 2008 SNA survey asked respondents, “*In the past year, how many nights have you NOT had a place of your own in which to live and sleep?*” In the 2011 and 2013 versions of the survey, the following additional statement was added to the question, “*Meaning you were homeless, in a shelter, on the street, or in a similar situation.*” The fourth row in Figure 7 reports 29% of 2008 respondents, 12% of 2011 respondents, and 11% of 2013 stated they had experienced one or more nights of homelessness in the past year. The large decrease from 2008 to 2011 and maintained through 2013 could be related to the clarification that was provided on the question in 2011. Of those that stated homelessness of a night or more, the average nights of homelessness was calculated and reported on row 5 (See Figure 7).

Figure 7: Two Methods of Assessing Homelessness

Homelessness*	2008 SNA (N=594)				2011 SNA (N=465)				2013 SNA (N=487)			
	TOTAL (all ages)	Age 24 & Under	Age 25 & Up	No Age Reported	TOTAL (all ages)	Age 24 & Under	Age 25 & Up	No Age Reported	TOTAL (all ages)	Age 24 & Under	Age 25 & Up	No Age Reported
Method 1: Homeless Currently &/or 6 months ago												
Row 1 Experiencing Homelessness Currently*	4% (24)	1	22	1	4% (18)	0	17	1	4% (21)	2	18	1
Row 2 Experiencing Homelessness 6 Mo Ago*	2% (9)	0	7	2	6% (26)	0	25	1	5% (24)	2	19	3
Row 3 Experiencing Homelessness Currently & 6 Mo Ago*	1% (4)	0	3	1	3% (14)	0	13	1	2% (11)	1	10	0
Method 2: Nights of Homelessness												
Row 4 Experienced at least one night of homelessness in the past year**	29% (172)	9	159	5	12% (56)	2	52	2	11% (53)	4	43	6
Row 5 Average Length of time homeless (of those who are homeless and reported on the line above)	111 nights	136 nights	122 nights	153 nights	164 nights	75 nights	166 nights	196 nights	124 nights	29 nights	129 nights	153 nights

*Homelessness defined as in homeless shelter, domestic violence shelter, and on the street.

**Outliers removed

The number of respondents who reported experiencing homelessness “currently” has remained at 4% across the last three surveys. Those experiencing homelessness 6 months ago increased from 2% to 6% from 2008 to 2011, and then went down slightly to 5% in 2013. The percent of respondents reporting homelessness currently and 6 months ago has stayed between 1% and 3% over the last three surveys.

Twenty-nine percent (172) of respondents stated they had experienced at least one night of homelessness in 2008. This percentage dropped significantly in 2011 (12%) and remained lowered in 2013 (11%). As reported early, some of this change could be due to the question wording. The average nights homeless for those respondents has changed over time from 113 nights (2008), to 164 nights (2011) and finally to 124 nights (2013).

Chronic Homelessness: To look more in-depth into chronic homelessness, analysis was conducted on the group of respondents that reported 365 nights of homelessness over the last year. Based on the survey responses, the number of individuals reporting *being homeless every night of the last year* has decreased slightly over time: 16 respondents (2008), 14 respondents (2011), and 10 respondents (2013).

Figure 8: Percentage of Homeless Respondents who Could be Considered Chronically Homeless

	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Total Experienced at Least One Night of Homelessness in the Last Year	172	56	53
Experienced 365 Nights of Homelessness in the Last Year	9% (16/172)	25% (14/56)	19% (10/53)

To underscore the instability associated with homelessness, an additional survey question was added in 2013. This question addresses the respondent's level of extreme housing instability, by asking if the respondent has had to partake in risky behavior (defined by the multiple choice answers) to secure housing. The analysis below provides more in-depth information about the respondents' overall housing stability.

Figure 9: 2013 SNA Data - Extent of Housing Instability

	2013 SNA N=487	2013 SNA Respondents Reporting 1+ Nights of Homelessness (N=53)
Sleep on the streets, in a park, or other outdoor place	7% (35)	51% (27)
Trade sex for a place to spend the night, or money for rent	4% (19)	32% (17)
Sleep at a family/friend's house	12% (58)	68% (36)
Sleep in a car	4% (21)	32% (17)
Sleep in a shelter	6% (29)	42% (22)

When the data is broken down further by looking at the extent of housing instability particularly for those respondents stating they have had one or more nights of homelessness (N=53), over half (51%) stated they slept in an outdoor place, over 30% have either slept in a car or traded sex for a place to sleep, money or rent.

In assessing homelessness as a housing stability factor, the respondents who were homeless in the last 6 months, are considered at an increased risk for housing instability. Using Method 1 (the most conservative of the two methods aforementioned) a total of 29 (2008), 30 (2011), and 34 (2013) respondents stated they experienced current homelessness and/or homelessness 6 months ago.

For the purposes of this analysis, a history of homelessness in the last six months is an indicator of housing instability

5.0% (29/594) of 2008 respondents have housing instability due to homelessness
 6.5% (30/465) of 2011 respondents have housing instability due to homelessness
 7.0% (34/487) of 2013 respondents have housing instability due to homelessness

Affordability:

The third housing stability risk factor addresses housing affordability. This factor will also be assessed using two methods – determining the gap in affordability and determining the housing burden.

Method 1 Gap in Affordability:

The first approach is to compare the area's Fair Market Rent (FMR) to 30% of the average household annual income. FMRs are gross rent estimates developed by the United States Department of Housing and Urban Development (HUD) that include rent and necessary utilities and provide a measure of a reasonable rent within a metropolitan area. HUD's definition of housing affordability is that a household should pay no more than 30% of its annual income towards housing. Therefore, the gap between the FMR and the average payment that would be affordable for the survey respondents provides a picture of the gap in housing affordability in the New Orleans Metropolitan Statistical Area (MSA). The difference between the FMR and 30% of the household income indicates the degree to which their housing is or is not affordable.

$$\text{Typical Rent in the Community (FMR)} - \text{Rent that would be Affordable to the Client (30\% of income)} = \text{Gap in Affordability}$$

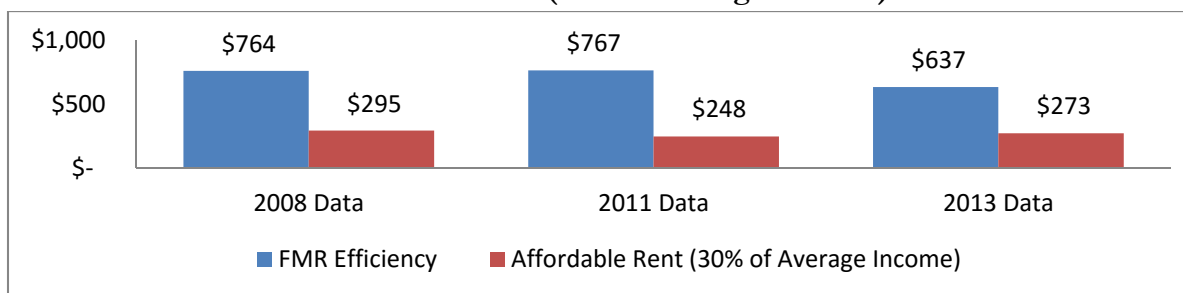
Figure 10 shows the FMR for the New Orleans MSA by unit size for 2008, 2011, and 2013. The rates range from \$764-\$1420. The SNA surveys in 2008 and 2011 did not ask clients to report the unit size of their dwelling so longitudinal analysis comparing FMR and 30% of income *by unit size* is not available. However, comparing the FMR of the efficiency (the smallest unit) to the average rent payment amount affordable to survey respondents can describe a very conservative measure for the affordability gap (See Figure 10).

Figure 10. New Orleans FMR

New Orleans MSA FMR			
	2008	2011	2013
Efficiency	764	767	637
1-BR	846	850	755
2-BR	990	994	935
3-BR	1271	1276	1173
4-BR	1314	1319	1420

Figure 11 reports the average affordable rent amount (30% of income) for 2008, 2011, and 2013 survey respondents along with the FMR for an efficiency unit. In all three cases, an affordable monthly rent or mortgage payment (based on 30% of current income) would be less than \$300. The affordable rent is in stark contrast to the FMR for the MSA. For all three years, the affordable rent would pay less than 45% of the FMR of an efficiency unit. (See Figure 11).

Figure 11. NOLA FMR (Efficiency) vs. Average Amount of Affordable Rent (30% of Average Income)



In 2013, an additional question was added to the SNA survey to collect unit size information. This allows the analysis to delve deeper by allowing comparison of 30% of respondents' income to FMR at *each* housing unit level. (Note: Of the 487 respondents to the 2013 survey, 467 were retained for the income analysis - excluding 15 missing responses, and 5 outliers which reported monthly income above \$8,400.)

Figure 12, Row 1 outlines the 2013 SNA data used for analysis in Figure 11. Comparing 30% of the average income to the FMR of the efficiency unit, only 43% of the lowest FMR is covered by the affordable rent. The column "Affordability Gap" provides the percentage and dollar amount of the FMR that could not be covered by the respondent's average affordable rent. In Row 1, this leaves a gap in affordability of 57% (\$364). With unit size collected in 2013, this analysis is now able to be broken out into the unit size (see Rows 2-9).

Starting with respondents who reported living in a Single Room Occupancy (SRO), the average affordable rent for this group of respondents leaves an average of 55% (\$263.55) of the FMR that could not be covered by the affordable rent. The percentage of affordability gap climbs from 55% in SROs to percentages in the 80's for the 4 and 5 bedroom units.

Figure 12. 2013 Analysis of Affordable Rent by Unit Size

Unit Size	Respondent Count	Average Income	Affordable Rent (30% of Average Income)	FMR	Affordability Gap (Amount of FMR which is NOT Covered by the Affordable Rent)
Row 1: Overall	N=467*	\$908.76	\$272.63	\$637	57% (\$364)
Row 2: Single Room Occupancy / Studio	4% (17)	\$714.82	\$214.45	\$478	55% (\$263.55)
Row 3: 1 BDRM	29% (136)	\$922.02	\$276.61	\$755	63% (\$478.39)
Row 4: 2 BDRM	32% (151)	\$1,049.40	\$314.82	\$935	66% (\$620.18)
Row 5: 3 BDRM	21% (103)	\$906.18	\$271.85	\$1,173	77% (\$903.15)
Row 6: 4 BDRM	5% (22)	\$742.82	\$222.85	\$1,420	84% (\$1,197.15)
Row 7: 5+ BDRM	1% (3)	\$1,103.33	\$331.00	\$1,633	80% (\$1,302)
Row 8: None, I'm homeless	5% (22)	\$183.14	\$54.94		
Row 9: Unit Size Missing from Survey Responses	3% (13)	\$874.31	\$262.29		

*Of the 487 respondents to the 2013 survey, 467 were retained for the income analysis (excluding 15 missing responses, and 5 outliers which reported monthly income at above \$8400).

Method 2 Housing Burden:

Another approach of looking at affordability is to address the housing burden. As previously stated, the generally-accepted definition of affordability is for a household to pay no more than 30 percent of its annual income on housing. Households who pay more than 30 percent of their income toward housing are considered cost burdened and may have difficulty affording necessities such as food, clothing, transportation, and medical care. Households paying 50% or more of income towards housing are extremely housing burdened. Housing burden is the percentage of monthly income a household spends on rent or mortgage and utilities, and can be a very informative measure as HUD estimates 12 million renter and homeowner households now pay more than 50 percent of their annual incomes for housing in the United States.

Housing + Utility Payment / Household Income = Housing Burden

$\leq 30\%$ (No Housing Burden)
 30.1% - 50% (Moderate Housing Burden)
 $> 50\%$ (Extreme Housing Burden)

Conducting the rent burden analysis requires three preliminary steps:

1. **INCOME:** Removing respondents from analysis if they 1.) Didn't provide an income amount; 2.) Provided an income amount that was determined to be an outlier; or 3) Reported income amount as zero.
2. **RENT:** Removing respondents from analysis if they 1.) Didn't provide a rent amount; 2.) Provided a rent amount that was determined to be an outlier; or 3) Reported rent amount as zero.
3. **OUTLIERS:** After dividing the monthly rent amount by the monthly income amount, the next step is to review the ratios and remove the outliers which indicate that the rent amount the household paid *exceeded* the amount of rent paid by the household. This final steps keeps the ratios between 0 and 1.

After these steps are completed, rent burden can be assessed (See Figure 13).

Figure 13. Rent Burden Analysis

	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Number of Respondents Retained for Rent Burden Analysis	258	285	281
No Housing Burden ($\leq 30\%$)	40% (102/258)	35% (100/285)	40% (111/281)
Moderate Housing Burden (30.1%-50%)	21% (54/258)	23% (66/285)	25% (71/281)
Extreme Housing Burden ($> 50\%$)	40% (102/258)	42% (119/285)	35% (99/281)

Rent Increase:

The next housing stability risk factor addresses the degree to which a household could sustain a fluctuation in housing payment or a rent increase. This factor will be assessed through analyzing survey results from respondents' *perceived* ability to sustain an increase in their housing payment.

The surveys ask respondents to indicate the perceived amount of increase in their monthly rent or mortgage payment that would precipitate a move to more affordable housing. Respondents that stated rent amount as zero or did not provide rent information were removed from this analysis along with those who reported a rent amount determined to be an outlier (See Figure 14).

Figure 14. The Amount of Rent Increase that would Cause the Respondent to Move

	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Respondents Retained in Rent Analysis	346	337	344
Rent Increase of \$1-\$50 Would Cause Move	32% (109/346)	25% (85/337)	24% (81/344)
Rent Increase of \$51-\$100 Would Cause Move	23% (81/346)	17% (57/337)	22% (76/344)
Rent Increase >\$100 Would Cause Move	32% (110/346)	42% (143/337)	42% (146/344)
Rent Increase Missing or Reported "Don't Pay"	13% (46/346)	16% (52/337)	12% (41/334)

Results show that from the three surveys administered and analyzed in this report, 24%-32% of respondents reported that a rent increase if \$50 or less would require them to seek other housing. An additional 17%-23% stated that an increase of \$51-\$100 would require them to seek other housing. The largest percentage, 31%-42% of respondents from the three surveys stated that it would take an increase in housing payment of more than \$100 to cause them to move. While these percentages are based solely on the respondents' perceived assessment of what rent amount change would require them to move, it does allow practitioners to assess that a fourth or more of respondents believe an increase in rent as small as \$50 or less per month would push them out of their current housing in search of more affordable housing options.

For the purposes of this analysis, a potential move caused by an increase in rent of \$50 or less is an indicator of housing instability

32% (109/346) of 2008 respondents have housing instability due to a potential risk of rent increase

25% (85/337) of 2011 respondents have housing instability due to a potential risk of rent increase

24% (81/344) of 2013 respondents have housing instability due to a potential risk of rent increase

Tenure at Current Residence:

The fifth housing stability risk factor assesses housing tenure or the length of time the household stays in their current residence. A brief tenure at the current residence in addition to other risk factors can signal housing instability. Figure 15. reports the housing tenures for 2008, 2011, and 2013 survey respondents. In all three years, more consumers reported tenures over 1 year than any other category. The figure below describes the length of tenure by housing type (See Figure 15).

Figure 15. Housing Tenure by Housing Type

		2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Tenure <= 6 MO	Permanent	20.4% (121/594)	21.9% (102/465)	13.8% (67/487)
	Temporary	4.4% (26/594)	3.2% (15/465)	2.9% (14/487)
	Homeless	2.5% (15/594)	1.5% (7/465)	0.6% (3/487)
	Missing	9.6% (57/594)	2.2% (10/465)	0.6% (3/487)
Tenure 6MO-1YR	Permanent	11.4% (68/594)	14.2% (66/465)	11.7% (57/487)
	Temporary	1.00% (11/594)	1.00% (6/465)	00.0% (2/487)
	Homeless	00.0%(2/594)	00.0% (1/465)	00.0%(0/487)
	Missing	4.4% (26/594)	0.9% (4/465)	0.0% (0/487)
Tenure > 1YR	Permanent	29.5% (175/594)	47.1% (219/465)	60.2% (293/487)
	Temporary	1.00% (12/594)	00.0% (7/465)	00.0% (7/487)
	Homeless	00.0% (4/594)	00.0% (1/465)	00.0% (3/487)
	Missing	6.1% (36/594)	1.1% (5/465)	1.2% (6/487)

For the purposes of this analysis, a short tenure at the current residence (less than 6 months) is an indicator of housing instability

**37% (219/594) of 2008 respondents have housing instability due to low housing tenure
29% (134/465) of 2011 respondents have housing instability due to a low housing tenure
18% (87/487) of 2013 respondents have housing instability due to a low housing tenure**

Substance Abuse and Mental Health:

The final two housing stability risk factors assess a history of substance abuse treatment and mental health treatment (medication) in the last 6 months. Substance abuse and mental illness is often associated with housing instability and is used in this analysis as the last two risk factors addressed (See Figure 16).

Figure 16. Respondents in Treatment for Substance Use and/or Mental Health in the Last 6 Months

	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Respondents in Treatment for Substance Use in the Last 6 Months	9.9% (59)	6.9% (32)	8.2% (40)
Respondents in Mental Health Treatment (medications) in the Last 6 Months	30.8% (183)	27.5% (128)	30.8% (150)
Respondents in Treatment for Substance Use <u>AND</u> Mental Health in the Last 6 Months	5.9% (35)	2.6% (12)	5.1% (25)

HOUSING STABILITY (2013 SNA DATA)

The six housing stability risk factors: homelessness, affordability, rent increase, tenure, substance abuse and mental health treatment, have been used in this analysis to go beyond the survey respondents' place of residence to determine housing stability. By analyzing households with these reported risk factors in addition to the place of residence, a more accurate description of housing stability is captured.

To assess the overall risk factors, each respondent received a single "point" for every risk factor they met (e.g. a respondent who has a high housing burden and a history of homelessness would receive a score of "2"). A total score for a single respondent could range from 0-6. For the purposes of this analysis, the composite score displays the count of additional housing risk factors faced by the survey respondents (See Figure 17).

Figure 17. Developing Score Based on Risk Factors

Risk Factor	Description	Did the Survey Respondent Display this Risk Factor Characteristic?
HOMELESSNESS:	A history of homelessness in the last six months is an indicator of housing instability	Yes = 1/No = 0
AFFORDABILITY:	A rent burden over 30% of the household's income is an indicator of housing instability	Yes = 1/No = 0
RENT INCREASE:	A potential move caused by an increase in rent of \$50 or less is an indicator of housing instability	Yes = 1/No = 0
TENURE:	A short tenure at the current residence (less than 1 year) could indicate housing instability	Yes = 1/No = 0
SUBSTANCE ABUSE:	A history of treatment for substance abuse in the last 6 months could indicate indicator of housing instability	Yes = 1/No = 0
MENTAL HEALTH:	A history of counseling or other mental health services in the last 6 months is an indicator of housing instability	Yes = 1/No = 0
COMPOSITE SCORE:	Each respondent providing information meeting the criteria for the risks above receive a single "point" for every risk. A total score for a single respondent could range from 0-6. For the purposes of this analysis, the composite score displays the count of additional housing risk factors faced by the survey respondents.	Sum of "Y" responses

Using these additional risk factors to assess housing stability provides a better understanding of need especially for those traditionally seen as permanently housed.

Figure 18. Percentage of Respondents with Each Risk Factor

	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Rent Burden	26% (157/594)	40% (185/465)	35% (170/487)
Homelessness	5% (29/594)	6% (30/465)	7% (34/487)
Tenure	37% (219/594)	29% (134/465)	18% (87/487)
Rent Increase	18% (109/594)	18% (85/465)	17% (81/487)
Mental Health Tx	31% (183/594)	28% (128/465)	31% (150/487)
Substance Use Tx	10% (59/594)	7% (32/465)	8% (40/487)

Figure 18 indicates across the 3 years the most common risk categories were low tenure, recent mental health treatment, and high rent burden.

Figure 19 reports the number of respondents who had various levels of risk. Using 2011 as an example, 27% of all respondents had two of the seven housing instability risk factors outlined in this report. Across all three years it can be noted that over 75% of respondents have one or more risk factors and over 40% have two or more risk factors.

Figure 19. Respondents Categorized by the Number of Risk Factors Present

Number of Housing Instability Risk Factors	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
0 Factors	27% 160/594	40% 185/465	28% 137/487
1 Factor	37% 220/594	39% 181/465	40% 196/487
2 Factors	22% 131/594	16% 73/465	22% 106/487
3 Factors	10% 64/594	5% 22/465	8% 39/487
4 Factors	2% 13/594	1% 4/465	2% 8/487
5 Factors	1% 6/594	0% 0/465	0% 1/487
6 Factors	0% 0/594	0% 0/465	0% 0/487

Early in the analysis it was reported that using place of residence alone under reported the amount of housing instability faced by PLWHA in the New Orleans MSA. To highlight this point, the following figure (Figure 20) reports the number of respondents *living in permanent housing* that are associated with the various levels of housing instability risk. **Results indicate that only 30%-43% of the permanently housed survey respondents indicated they had zero additional risk factors.**

Figure 20. Respondents in Permanent Housing Categorized by the Number of Risk Factors Present

	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Respondents in Permanent Housing (PH)	63% 372/594	85% 394/465	88% 429/487
In PH with 0 Risk Factors	31% 116/372	43% 173/394	29% 125/429
In PH with 1 Risk Factors	37% 137/372	39% 154/394	42% 180/429
In PH with 2 Risk Factors	20% 72/372	12% 49/394	20% 86/429
In PH with 3 Risk Factors	11% 40/372	4% 15/394	7% 30/429
In PH with 4 Risk Factors	1% 3/372	1% 3/394	2% 7/429
In PH with 5 Risk Factors	1% 4/372	0% 0/394	0% 1/429
In PH with 6 Risk Factors	0% 0/372	0% 0/394	0% 0/429

Housing Subsidy Assistance

In the previous section that reviewed place of residence, many of the respondents who reported “owning”, “renting”, or “living with someone who owns/rents”, also receive ongoing housing subsidies, which if lost, could impact their housing status tremendously.

**Figure 6. Respondents Living in Permanent Housing
And Receiving Ongoing Housing Subsidies**

	2008 SNA (N = 594)	2011 SNA (N = 465)	2013 SNA (N = 487)
Total Respondents Receiving an Ongoing Housing Subsidy	17% (103/594)	29% (136/465)	29% (139/487)
Total Respondents in Permanent Housing	63% (372/594)	85% (394/465)	88% (429/487)
Total Respondents in Permanent Housing <u>that are</u> <u>also</u> Receiving an Ongoing Housing Subsidy	15% (57/372)	28% (110/394)	31% (131/429)

Approximately 15% (57/372) of permanently housed respondents to the 2008 Statewide Needs Assessment reported that they received an ongoing housing subsidy. This percentage increased substantially in 2011 when survey respondents who were permanently housed stated that 28% (110/394) received a housing subsidy. This percentage grew slightly higher in the 2013 survey data where 31% (131/429) reported living in permanent housing with a subsidy. This change is likely a result of the increase in dedicated Housing Choice Vouchers, implementation of the state Permanent Supportive Housing (PSH) program, and the HOME Tenant-Based Rental Assistance (TBRA) program. This information underscores the importance of reviewing additional factors in determining housing stability.

If these housing subsidies were lost, it is likely many households could experience substantial housing instability.

For the purposes of this analysis, currently receiving an ongoing monthly housing subsidy or living in public housing is an indicator of housing instability

17% (103/594) of 2008 respondents have housing instability due to Housing Subsidy
29% (136/465) of 2011 respondents have housing instability due to Housing Subsidy
29% (139/487) of 2013 respondents have housing instability due to Housing Subsidy

HOPWA-FUNDED HOUSING:

One of the primary funding streams of HIV/AIDS housing comes from HUD's Office of HIV/AIDS Housing (OHH). OHH's Housing Opportunities for Persons with HIV/AIDS (HOPWA) program provides HIV/AIDS housing funding nationwide. The City of New Orleans has been a HOPWA grantee since 1992; the 2013 allocation for the city was \$3,741,388.

The following chart describes the City's HOPWA activities and funding for the 2012 program year. A total of approximately \$3 million was spent on housing activities, reaching over 500 households (See Figure 21).

Figure 21. HOPWA Housing Assistance Activities

Type of Activity	Households Served	Expenditures	Percentage of Total Expenditures	Per Unit Cost
Housing Assistance				
Households in permanent housing facilities that receive operating subsidies/leased units	20	\$256,206.00		\$12,810.30

Households in transitional/short-term facilities that receive operating subsidies	143	\$2,123,070.68		\$14,846.65
Short Term Rent, Mortgage and Utility Assistance	352	\$559,005.18		\$1,588.08
Total	515	\$2,938,281.86	92%	\$5,705.40
Housing Information Services	46	\$93,328.32	3%	
Administration and Management Services: Project Sponsor Administration		\$146,481.94	5%	
Total Expenditures		\$3,178,092.12		

National Comparison:

One of the standards of national comparison is the Per Unit Cost for each type of HOPWA Housing Subsidy Assistance. The chart below shows the City of New Orleans experiences higher per-unit costs for permanent and transitional housing than the national average for HOPWA Formula grantees. Suggested future analysis includes comparing this information on a regional level (See Figure 22).

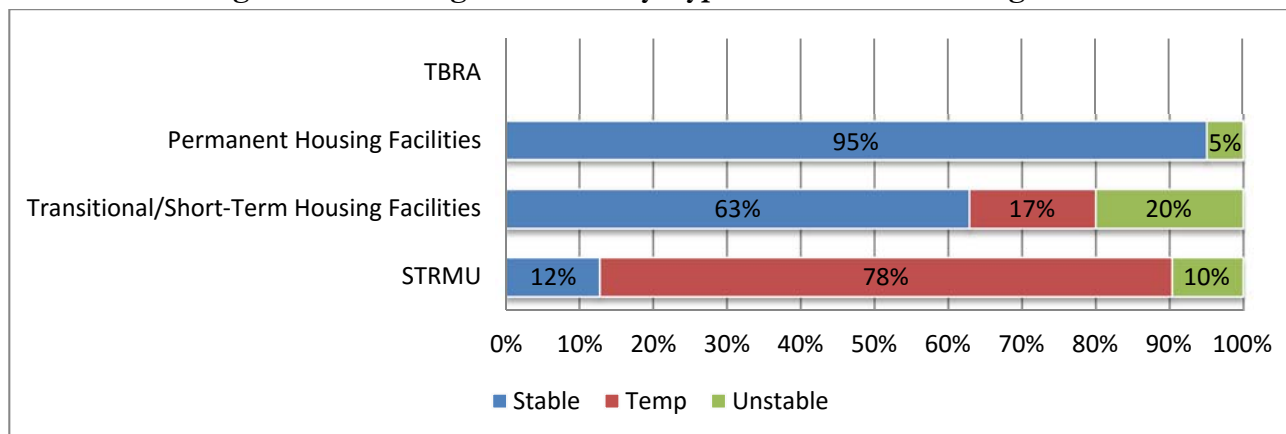
Figure 22: Per Unit Cost Comparison

Type of Activity	City of New Orleans Per Unit Cost	National Range of Per Unit Costs*
Households in permanent housing facilities that receive operating subsidies/leased units	\$12,810.30	Low Point: \$1,909.68 High Point: \$8,314.54
Households in transitional/short-term facilities that receive operating subsidies	\$14,846.65	Low Point: \$875.47 High Point: \$4,520.72
Short Term Rent, Mortgage and Utility Assistance	\$1,588.08	Low Point: \$458.01 High Point: \$1,597.13

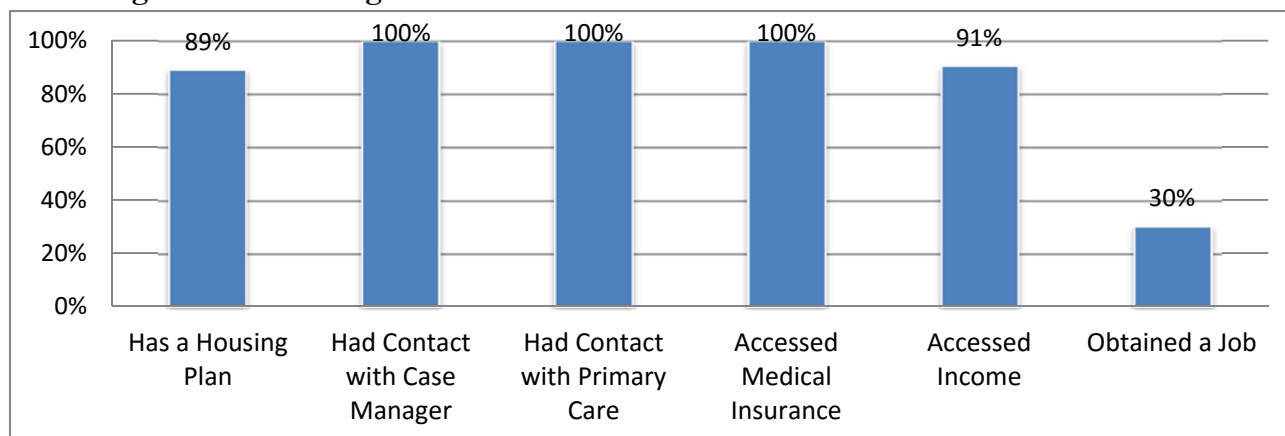
**The National Average Range is developed using the standard deviation of Per Unit Cost amounts for all Formula Grantees during the 2011-2012 program year.*

Outcomes:

Of those households in permanent housing facilities, 95% exited into stable housing, and 5% exited into temporary housing. Of those households in transitional facilities, 63% exited into stable housing, 17% exited into temporary housing, and 20% exited into unstable housing. Of the households that received STRMU, 12% are in stable housing, 78% are in temporary housing, and 10% are in unstable housing (See Figure 23).

Figure 23. Housing Outcomes by Type of HOPWA Housing Assistance***Access to Care and Support:***

Based on data reported in the 2012 HOPWA CAPER, 89% of households had a housing plan, 100% had contact with a case manager, had contact with a Primary Care Provider, and accessed or maintained medical insurance. Ninety-one percent of households accessed or maintained sources of income, and 30% obtained a job (See Figure 24).

Figure 24. Percentage of Households who Accessed or Maintained Access to Care

N= 515 number of households that received HOPWA Housing Subsidy Assistance and/or HOPWA Case Management

Note: Sources of Medical Insurance and Assistance include, but are not limited to the following

- MEDICAID Health Insurance Program, or use local program name
- Veterans Affairs Medical Services
- MEDICARE Health Insurance Program, or use local program name
- Louisiana Drug Assistance Program (LDAP)
- Louisiana Children's Health Insurance Program (LaCHIP) name
- Ryan White-funded Medical or Dental Assistance

CITATIONS:

- Aidala, A., Lee, G., Abramson, D. M., Messeri, P., & Siegler, A. (2007). Housing need, housing assistance, and connection to HIV medical care. *AIDS and Behavior*, 11(6), S101–S115.
- Bennett, R. L., Pope, C., & Dantzler, J. (2007). *Tampa EMSA HIV/AIDS housing plan: Responding to the need for permanent supportive housing for low income individuals and families living with HIV/AIDS*. Birmingham: Collaborative Solutions, Inc. (CSI).
- Coady, M. H., Latka, M. H., Thiede, H., Golub, E. T., Ouellet, L., Hudson, S. M., et al. (2007). Housing status and associated differences in HIV risk behaviors among young injection drug users (IDUs). *AIDS and Behavior*, 11, 854–863.
- Des Jarlais, D. C., Braine, N., & Friedman, P. (2007). Unstable housing as a factor for increased injection risk behavior at U.S. syringe exchange program. *AIDS and Behavior*, 11(6), S78–S84.
- German, D., Davey, M. A., & Latkin, C. A. (2007). Residential transience and HIV risk behaviors among injection drug users. *AIDS and Behavior*, 11(Supplemental), S21–S30.
- Leaver, C. A., Bargh, G., Dunn, J. R., & Hwang, S. W. (2007). The effects of housing status on health-related outcomes in people living with HIV: A systemic review of the literature. *AIDS and Behavior*, 11(6), S85–S100.
- Smith, M. Y. (2000). Housing status and health care service utilization among low-income persons with HIV/AIDS. *Journal Internal General Medicine*, 15, 731–738.
- Weir, B., Bard, R. S., O'Brien, K., Casciato, C. J., & Stark, M. J. (2007). Uncovering patterns of HIV risk through multiple housing measures. *AIDS and Behavior*, 11(Supplemental), S31–S44.