



Client Perspectives on HIV Supported Care: *Developing Service Models and Outcome Tools*

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BACKGROUND

Canada is experiencing a significant need for housing that supports the treatment requirements of people living with HIV/AIDS. This need comes from an increase in the number of new HIV infections in Canada, as well as a decrease in overall mortality.

Individuals living with HIV/AIDS often experience financial or economic vulnerability and face particular challenges with managing and maintaining housing, income, employment, and treatment requirements.

In British Columbia: Access to safe, affordable, stable housing is a concern for all of BC. While there are three HIV supported housing agencies in Vancouver (McLaren Housing with 142 units, Wings with 30 units, and Dr. Peter Center with 29 units), there is still unmet need. In fact, many communities with high rates of HIV, such as Prince George, have no HIV housing.

In Saskatchewan: Saskatchewan currently has the highest incidence rate of HIV in Canada, with 10.8 HIV positive individuals per 100,000 (Government of Canada, 2014). Areas of Saskatchewan are currently experiencing a very low rental vacancy rate, making affordable housing very difficult to find. Saskatchewan is seeing a dramatic increase in the number of young indigenous women testing positive for HIV. Saskatchewan also has a high rate of Hep C coinfection, with 70% of individuals living with HIV testing positive for Hep C (Saskatchewan Ministry of Health, 2010). Wait times for low-income housing are significant.



In Alberta: A lack of affordable housing, and a lack of culturally appropriate services are affecting the quality of life of people living with HIV/AIDS in Alberta. Housing instability and high rent costs, combined with low incomes, leaves people living with HIV at a high risk of homelessness.

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CONCLUSIONS

- ❖ Combining and comparing the logic models highlighted the differences between the agencies' priorities, which is reflected in their outcomes and the ways in which the agencies identify and measure client successes.
- ❖ Client interviews have highlighted the differences between the agencies' outcomes and what clients consider to be personal successes. Interviews have also revealed areas for program improvement.
- ❖ Client interviews and logic model comparisons have revealed new potential outcomes for agencies to consider measuring. The next step for the team is to utilize these potential outcomes, and the data from interviews, to create a new standardized tool that can be utilized by each agency to measure their outcomes.

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OBJECTIVE

The aims of the study are:

- ❖ To map HIV supported housing services and identify unmet needs (COMPLETED).
- ❖ To examine and understand how HIV supported housing agencies conceptualize and deliver their programs.
- ❖ To identify the most appropriate outcome measures for HIV supported housing.

The overall objective is to collect and analyze data to identify the strengths and weaknesses of HIV supported housing agencies in Western Canada, so that agencies may improve the way they deliver services. The knowledge generated by this project will be used to **improve the quality of life for people living with HIV/AIDS**.

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RESULTS

In total **30 clients participated in interviews**. The interviews revealed a wide range of experiences and opinions on HIV supported housing.

Clients considered **staff supports** to be an important and integral part of each program. Staff were overrappwhelmingly seen as helpful.

Having **access to transportation** was considered to be a very important aspect of the programs.

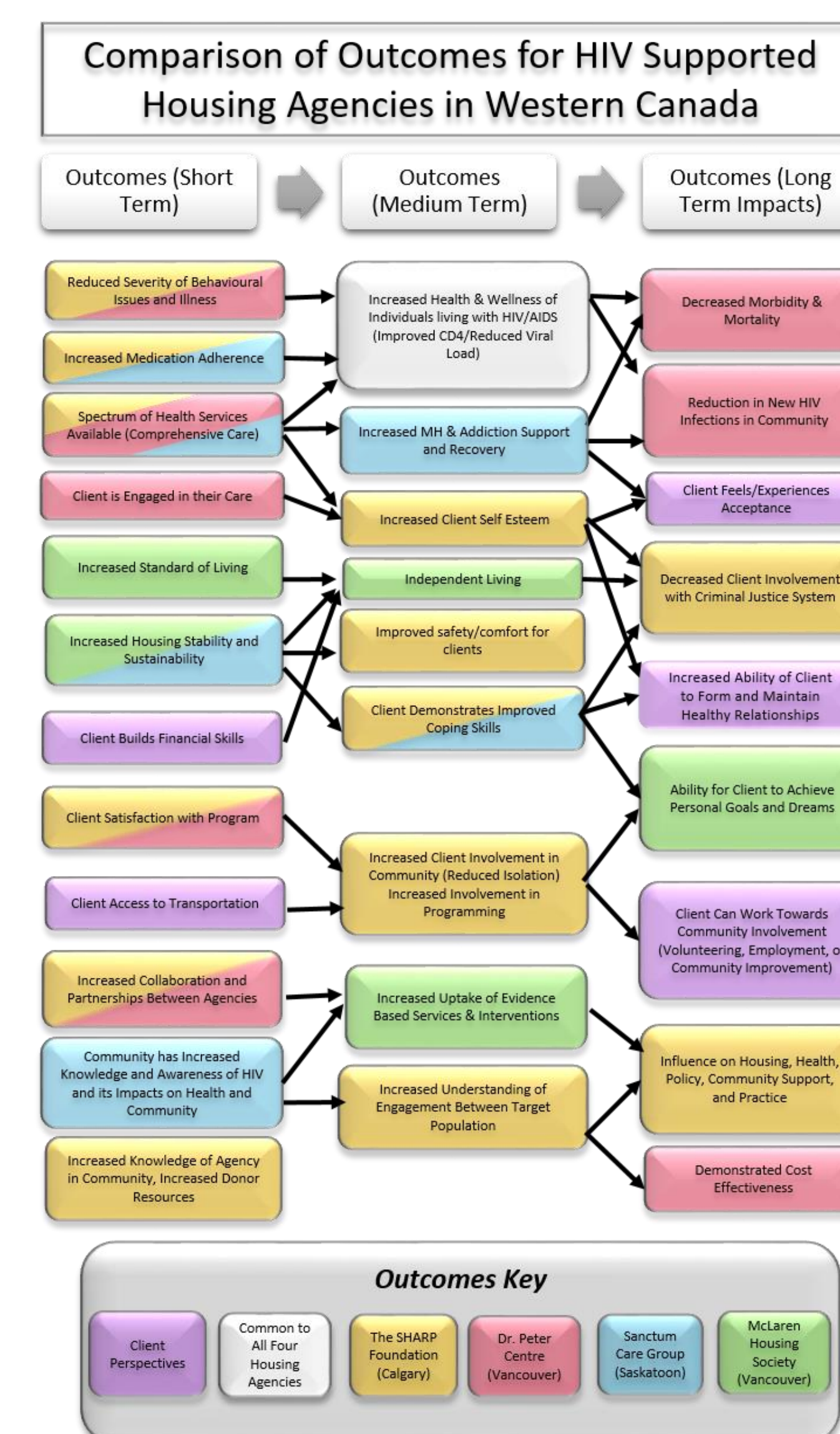
Clients discussed many aspects of **success** in relation to their housing. Many clients discussed how being a part of the housing programs had dramatically improved their **health, reduced their stress**, and given them a **home**.

Clients emphasized the importance of developing and having a **sense of community** within the programs.

Clients reported that living in a housing agency gave them a sense of **dignity, pride, and self-respect**. Being involved in community improvement was important to many clients.

Social and peer support were very important to the clients. Many saw the staff and other clients as their "family".

Clients identified **medication management** as a very important element of HIV supported housing programs. Many people noted that their health had improved dramatically since moving in. Regular **access to health services** was also identified as an important element of HIV housing supports.



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