

Transitional Housing: A pilot study of its impact on housing sustainability and health outcomes of people living with HIV/AIDS in Ontario



June 2014

Introduction

Transitional housing is 'an intermediate step between emergency crisis shelter and permanent housing', and assists individuals to move towards greater autonomy and self-sufficiency, thereby increasing the likelihood of housing stability.

Housing is a structural intervention that can decrease the risk of HIV transmission as well as improve health outcomes amongst people living with HIV/AIDS (PHAs). Community-based supportive housing agencies for PHAs have long known that one model does not fit all. Efficacy of housing depends on appropriately matched model of housing and support services to client needs. A continuum of housing options is needed to best support PHAs through the varying life circumstances. Transitional housing is one of the housing options, however, there is a dearth of literature on the impact of transitional housing on people living with HIV/AIDS. This research study is an endeavor to address the gaps in knowledge and to develop better understanding of the impact of transitional housing on people living with HIV/AIDS.



The objectives of this research:

- ✚ To identify the factors (individual and structural) associated with 'housing readiness' of PHAs in the transitional housing program.
- ✚ To better understand the practices and services of transitional housing.
- ✚ To explore the experiences and change in support needs and support structure of PHAs from intake into transitional housing to being successfully housed.



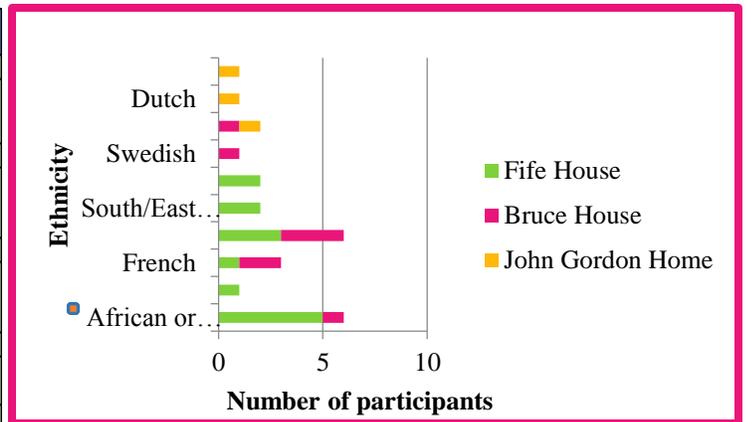
The findings represent data from a qualitative, longitudinal study conducted at Fife House in Toronto, Bruce House in Ottawa, and John Gordon Home in London, Ontario.

Twenty-five participants were recruited for this study. Fourteen from Fife House, eight from Bruce House, three from John Gordon Home. Two interviews, at Entry and Exit, were conducted with each participant. Forty-seven interviews were conducted throughout this study.



Participant Demographics

	Fife House	Bruce House	John Gordon Home	Total
Number of participants (Intake)	14	8	3	25
Age (in years)	Average: 42 years Range: 26-62	Average: 49 years Range: 35-62	Average: 47 years Range: 43-55	Average: 46 years Range: 26-62
Gender	Male: 11 Female: 3	Male: 6 Female: 2	Male: 2 Female: 1	Male: 19 Female: 6
Refugee Status	5	0	0	5



Summary of Findings

- ✚ Participants enter into transitional housing with a variety of needs with regards to health care, financial support and assistance with activities of daily living.
- ✚ Participants expressed considerable difficulties maintaining drug therapies prior to residency in transitional housing and linked improvements with medication adherence due to 'med-reminders' and other supports provided in transitional housing.
- ✚ Although connected with a variety of services from various AIDS Service Organizations (ASOs), participants report the use and benefits of three key supports provided by transitional housing programmes:
 - Management of HIV (and other) drug therapies
 - Assistance with appointments
 - Support through service referral
- ✚ Greater housing instability contributes to substance use, and negatively impacts physical and mental health.
- ✚ Participants were affected by multiple physical and mental health issues, and used their time in the Transitional Housing Programs for necessary recovery and integration.
- ✚ Housing environment is a critical variable in substance use/relapse for participants.
- ✚ While independent living was the long-term goal of majority of the participants, as well as the objective of the transitional housing programs, lack of supportive housing to transition into, creates a barrier in actualizing this goal.

Conclusions

Transitional housing programs provides foundational skills in managing daily living (with HIV and other health concerns).

Transitional housing provides a safe space for residents to stabilise and manage fundamental HIV and non-HIV health care needs.

Access to transitional housing program significantly reduced the use of emergency healthcare.

Supports from transitional housing promotes better utilisation and greater access to health and social services.

Benefits that accrue from transitional housing supports lay the groundwork for transformative changes in the lives of residents upon which other core competencies can be developed for residents to live independently in permanent housing.

Transitional housing program is seen by refugee residents as a place of reprieve and a first step to reintegration. However, the client-centered empowerment model used in transitional housing requires greater flexibility.

Refugee claimants, due to experiences of loss, trauma or violence have a unique set of needs, that require sensitivity and may require greater support within the programs.

Recommendations

Develop community connections with pertinent agencies and healthcare providers and share evidence-based, up-to-date information about HIV/AIDS.

Greater accessibility to and connections with mental health supports and holistic supports.

Enhance staff capacity to advocate alongside residents in critical situations when working with medical practitioners and social service providers.

Develop resources within transitional housing to assist tenants at different stages of engagement with substance use.

Provide staff with ongoing critical, anti-oppression training, and knowledge of chronic healthcare conditions.

Develop further research to enhance the understanding of the issues of refugee PHAs.