

# Voices From The Field



## HOUSING ASSISTANCE PROVIDERS IN THE RYAN WHITE CARE ACT: Report 3, 2002

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### INTRODUCTION

This report summarizes the results of a consultation conducted with agencies funded by the Ryan White CARE Act in FY 2000-2001. Agencies were asked to identify the services they provide directly, regarding if those services are funded by the CARE Act or other source.

### TYPE OF AGENCY PROVIDING HOUSING ASSISTANCE

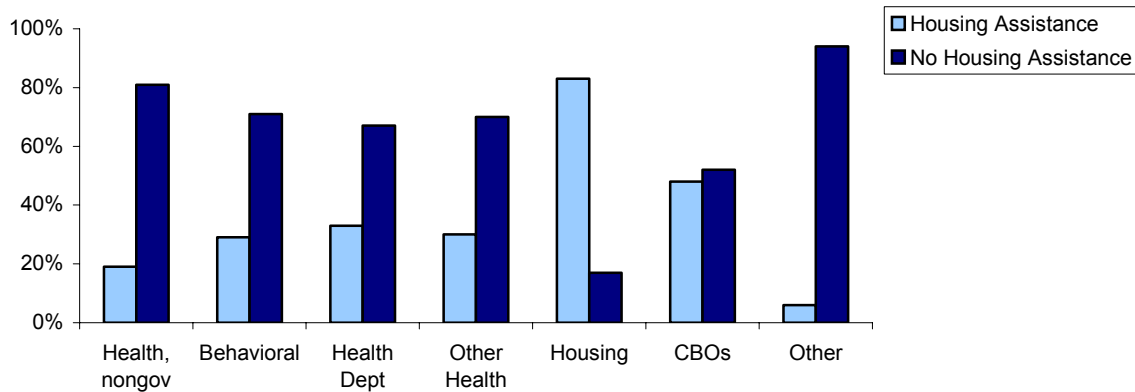
- A significant number ( $p < 0.05$ ) of agencies that provide housing assistance to their HIV clients are CBOs. Almost one-half of the 611 consulting agencies that provide housing assistance (46%) define themselves as a CBO. Another 16% of these agencies are hospitals or hospital-based clinics, solo or group practices, or community health centers. In addition, 13% of agencies providing housing assistance are health departments and 8% define themselves as housing agencies. The remaining 17% of agencies providing housing assistance are other health agencies (9%), behavioral health programs (6%), and other types of agencies (2%).
- Housing agencies are significantly more likely ( $p < 0.05$ ) to provide housing assistance to their clients than other types of agencies. Over three-quarters (83%) of housing agencies provide housing assistance compared to 48% of CBOs, 33% of health departments, 30% of other health agencies, 29% of behavioral health agencies, 19% of non-government health agencies, and 6% of other types of agencies.

### METHODS

The Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) supported the study in which data presented in this brief were collected. Grantee lists were obtained from HAB to identify agencies throughout the US funded by the CARE Act. Grantees of Titles I, II, III, or IV or SPNS funds in FY 2000-2001 provided lists of their contractors or agencies receiving funds through fee-for-service or other mechanisms. State Title II grantees using consortia to distribute funds provided consortia contact information. Consortia were then asked to provide list of agencies receiving Title II funds via their consortia. All grantees provided contractor and/or consortia lists. The agency lists were unduplicated to obtain a list of CARE Act grantees. A total of 3,240 agencies were identified. They were contacted via facsimile and asked to complete a three-page consultation form. Agencies without facsimiles were sent the form via the mail. The agency response rate is 58%. Check out the POI website for more information about this project and other reports:

[www.positiveoutcomes.net](http://www.positiveoutcomes.net)

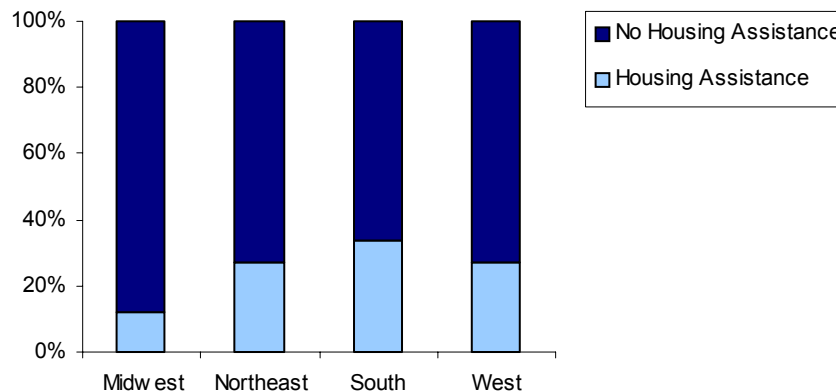
**FIGURE1: PERCENTAGE OF AGENCIES PROVIDING HOUSING ASSISTANCE BY AGENCY TYPE**



## GEOGRAPHIC CHARACTERISTICS OF HOUSING ASSISTANCE PROVIDERS

- Approximately one-third of all agencies (32%) provide housing assistance to their clients. The majority of these agencies are located in the South (34%), Northeast (27%), and the West (27%). Only a small percentage of agencies providing housing assistance are located in the Midwest (12%).
- There is no association between an agency’s location within a Title I EMA and providing housing assistance. For agencies that provide housing assistance, one-half (50%) are located within a Title I EMA. Similarly for agencies that do not provide housing assistance, 47% are located within a Title I EMA.

**FIGURE2: PERCENTAGE OF AGENCIES PROVIDING HOUSING ASSISTANCE BY CENSUS REGION**



- Agencies that provide housing assistance are statistically more likely ( $p < 0.05$ ) to provide core HIV services including case management, child day care, drug treatment, health education and risk reduction, HIV counseling and testing, outreach, HIV prevention, support groups, and transportation as well as many other services compared to agencies that do not provide housing assistance.
- These agencies are statistically less likely ( $p < 0.05$ ) to provide specialty medical care compared to agencies that do not provide housing assistance (19% versus 23%).

- There is no association between providing dental care or primary medical care and providing housing assistance.

## OVERVIEW OF SERVICES PROVIDED BY HOUSING ASSISTANCE AGENCIES

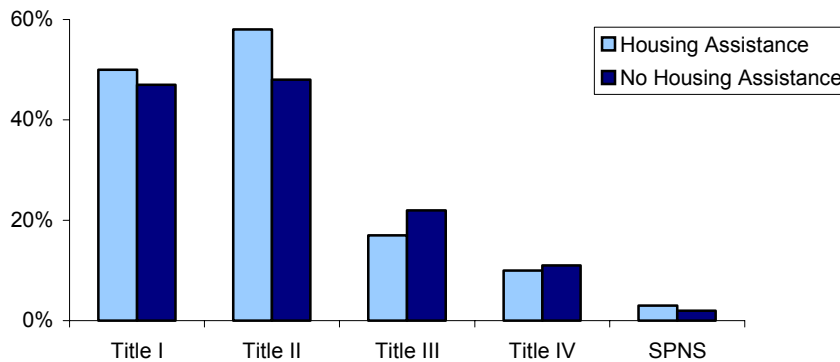
<b>SERVICE</b>	<b>AGENCIES PROVIDING HOUSING ASSISTANCE</b>	<b>AGENCIES NOT PROVIDING HOUSING ASSISTANCE</b>
Buddy services*	32%	9%
Case management*	89%	46%
Child day care*	9%	4%
Child welfare services*	6%	2%
Client advocacy*	71%	29%
Complementary/alternative services*	28%	11%
Day/respite care for adults*	10%	3%
Dental care	19%	12%
Development assessment*	10%	4%
Drug treatment*	32%	18%
Emergency assistance*	59%	15%
Employment/vocational services*	22%	3%
Food bank/home delivered meals*	53%	16%
Health education/risk reduction, etc.*	76%	47%
HIV counseling and testing*	59%	45%
Home health services*	12%	7%
Hospice*	9%	4%
Legal services*	16%	6%
Mental health services*	45%	31%
Nutritional services	48%	27%
Outreach, case finding, etc.*	51%	26%
Prevention*	45%	22%
Primary medical care	29%	33%
Referrals to clinical trials*	43%	26%
Rehabilitation (non-substance abuse)*	7%	3%
Specialty medical care*	19%	23%
Support groups*	66%	31%
Translation/interpreter services*	31%	17%
Transportation*	70%	24%
Treatment adherence*	52%	30%

\*Significant chi-square at p<0.05 or less

## SOURCES OF FUNDING FOR HOUSING ASSISTANCE PROVIDERS

- There are statistically significant differences (p<0.05) in sources of funding for agencies that provide housing assistance and those agencies that do not. Agencies providing housing assistance are significantly more likely to receive Title II funds (52% versus 48%) and less likely to receive Title III funds (17% versus 22%) compared to agencies that do not provide housing assistance.

**FIGURE 3: PERCENTAGE OF AGENCIES RECEIVING RYAN WHITE CARE ACT (RWCA) FUNDS BY HOUSING ASSISTANCE**



- There is no association between receipt of Title I, Title IV, or SPNS funds and providing housing assistance.
- Agencies providing housing assistance are also significantly more likely ( $p < 0.05$ ) than agencies that do not provide housing assistance to receive HOPWA funds (39% versus 5%), CDC counseling and testing funds (19% versus 12%), CDC prevention funds (27% versus 13%), other Federal funds (26% versus 12%), other state or local funds (58% versus 35%), and charitable contributions (60% versus 31%).
- Agencies providing housing assistance are significantly less likely ( $p < 0.05$ ) to receive Medicare (17% versus 26%), Medicaid managed care (16% versus 21%), commercial managed care (7% versus 13%), and private insurance (15% versus 25%) compared to agencies that do not provide housing assistance.
- There is no significant difference between receipt of Medicaid fee-for-service (FFS) and providing housing assistance. Approximately one-third (30%) of housing assistance providers receives Medicaid FFS compared to 33% of those agencies that do not provide housing assistance.

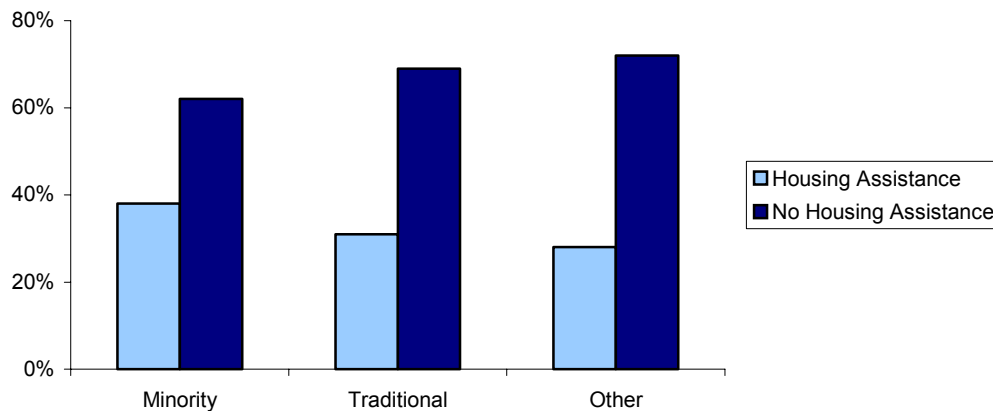
<b>Funding Source</b>	<b>AGENCIES PROVIDING HOUSING ASSISTANCE</b>	<b>AGENCIES NOT PROVIDING HOUSING ASSISTANCE</b>
Medicaid Fee-for-service	30%	33%
Medicare*	17%	26%
Medicaid Managed Care*	16%	21%
Commercial Managed Care*	7%	13%
Private Insurance*	15%	25%
HOPWA	39%	5%
CDC Counseling and Testing*	19%	12%
CDC Prevention*	27%	13%
Other Federal Funds*	26%	12%
Other State/local Funds*	58%	35%
Charity*	60%	31%

\*Significant chi-square at  $p < 0.05$  or less

## MINORITY PROVIDER STATUS

- Agencies providing housing assistance are significantly more likely ( $p < 0.05$ ) to be minority providers (45%) than traditional (36%) or other providers (19%).
- More than one-third of minority providers (38%) provide housing assistance compared to 31% of traditional providers and 28% of other providers.

**FIGURE 4: PERCENTAGE OF AGENCIES PROVIDING HOUSING ASSISTANCE BY PROVIDER TYPE**



## PARTICIPATION ON HIV PLANNING COUNCILS

- Agencies providing housing assistance are significantly more likely ( $p < 0.05$ ) than agencies that do not provide housing assistance to participate in planning councils.
- More than one-half of all agencies providing housing assistance participated in HIV/AIDS public hearings (71%), other planning groups (69%), state HIV/AIDS services planning groups (64%), HIV housing planning groups (55%), and state HIV/AIDS prevention planning (54%).
- One-half of all agencies providing housing assistance participated in Title II consortia (50%) and almost one-third of agencies participated in Title I planning council as a member (30%) or on a Title I planning council committee (29%).

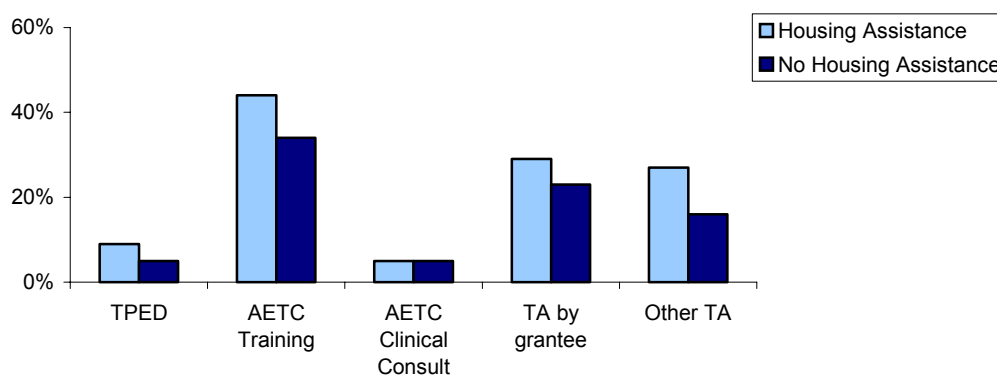
Type of Planning Council/Group	AGENCIES PROVIDING HOUSING ASSISTANCE	AGENCIES NOT PROVIDING HOUSING ASSISTANCE
State HIV/AIDS Services*	64%	47%
State HIV/AIDS Prevention*	54%	35%
ADAP Advisory Group*	19%	12%
Title I Planning Council (as member)*	30%	23%
Title I Planning Council (committee)*	29%	23%
Title II Consortia*	50%	34%
HIV Housing Planning Groups*	55%	14%
HIV/AIDS Public Hearings*	71%	50%
Other Planning Activities*	69%	52%

\*Significant chi-square at  $p < 0.05$  or less

## PARTICIPATION IN TRAININGS AND TECHNICAL ASSISTANCE (TA) PROGRAMS

- Agencies providing housing assistance were significantly more likely ( $p < 0.05$ ) than other agencies to participate in specific trainings and TA within 12 months of the consultation.
- Almost one-half (44%) of agencies providing housing assistance attended AIDS Education and Training Center (AETC) compared to only 34% of agencies that are not providing housing assistance.
- Almost one-third (29%) of agencies providing housing assistance participated in TA arranged by their CARE Act grantee or HRSA project officer compared to 23% of agencies not providing housing assistance.
- Over one-quarter (27%) of agencies providing housing assistance participated in other TA not arranged through the CARE Act compared to 16% of agencies that do not provide housing assistance.

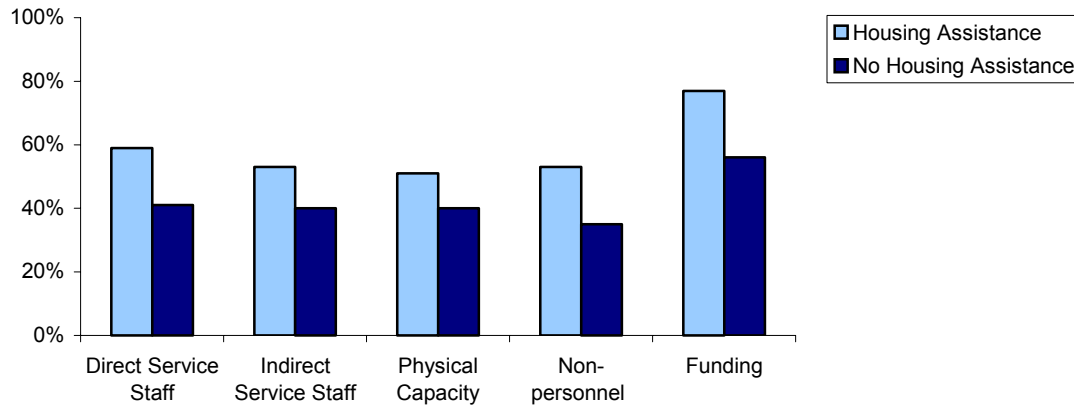
**FIGURE 5: PERCENTAGE OF AGENCIES PARTICIPATING IN TRAININGS AND TECHNICAL ASSISTANCE PROGRAMS BY HOUSING ASSISTANCE**



## ADEQUACY OF HIV PROGRAM RESOURCES

- Agencies that provide housing assistance are significantly more likely ( $p < 0.05$ ) to feel that their HIV program's resources are inadequate compared to agencies that do not provide housing assistance to HIV clients. The consultation focused on five particular resources: direct service staff, non-direct service staff, physical capacity, non-personnel resources such as computers and office equipment, and funding.

**FIGURE 6: PERCENTAGE OF AGENCIES INDICATING INADEQUATE PROGRAM RESOURCES BY HOUSING ASSISTANCE**



- Agencies that indicated inadequate resources were asked to list their top three needs within each category. The needs for agencies providing housing assistance and those not providing housing assistance are very similar.

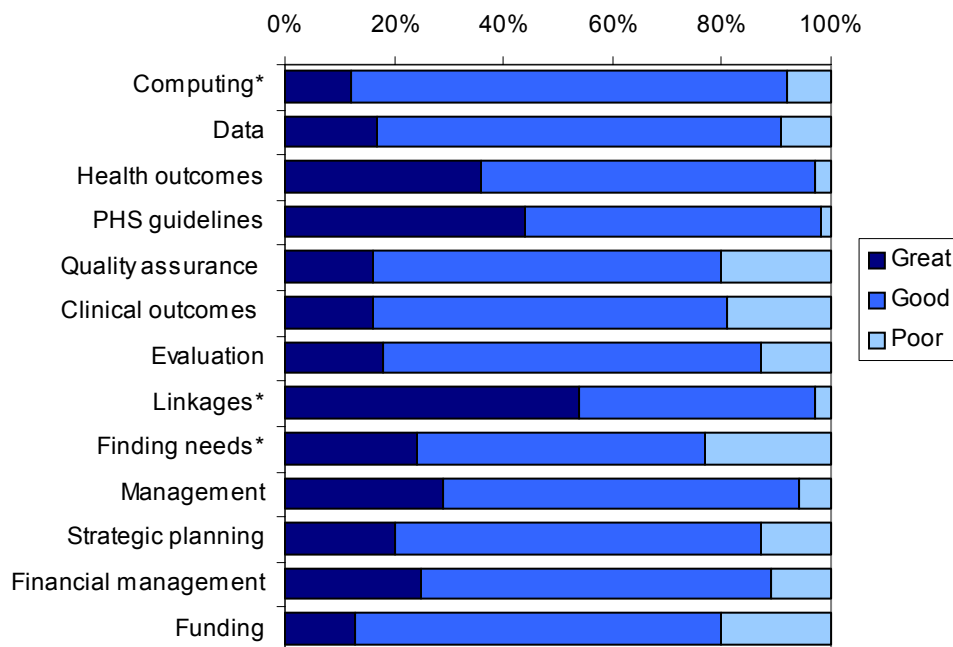
<b>TABLE 4: TOP THREE RESOURCE NEEDS BY HOUSING ASSISTANCE</b>		
<b>RESOURCE</b>	<b>AGENCIES PROVIDING HOUSING ASSISTANCE</b>	<b>AGENCIES NOT PROVIDING HOUSING ASSISTANCE</b>
Direct Service Staff	1. Case managers	1. Case managers
	2. Nurses	2. Nurses
	3. Doctors	3. Doctors
Non-direct Service Staff	1. Clerical staff	1. Clerical staff
	2. Support staff	2. Support staff
	3. Data entry personnel	3. Managers
Physical Capacity	1. Office space	1. Office space
	2. Storage space	2. Interview/counseling space
	3. Interview/counseling space	3. Storage space
Non-personnel Resources	1. Computers	1. Computers
	2. Printers	2. Software
	3. Software	3. Printers
Funding	1. Direct Services	1. Direct Services
	2. Operations	2. Operations
	3. Staff	3. Staff

- There were some differences in the top resource needs. Agencies that provide housing assistance listed housing program staff, life skills trainers, vocational staff, and acupuncturists among their top direct service staff needs. These agencies listed fundraising staff and client advocates for non-direct service staff needs.
- Agencies providing housing assistance listed furniture and food pantry space for physical capacity needs, computer training and scanners for non-personnel resource needs, and rent and overhead for funding needs.

## SKILLS AND ABILITIES IN TECHNICAL AND MANAGEMENT ACTIVITIES

- The majority of consulting agencies rated their HIV program's skills and abilities. Ratings were compared between agencies that provide housing assistance and those that do not. Housing assistance providers are significantly more likely ( $p < 0.05$ ) than agencies not providing housing assistance to rate their program good for using computer hardware and software (Computing: 80% versus 74%). These agencies are also significantly more likely to rate themselves as great for developing linkages (Linkages: 54% versus 41%) and for finding out the health care and support service needs of people living with HIV/AIDS in their community not receiving services (Finding needs: 24% versus 17%).
- Figure 4 shows the ratings for housing assistance providers. Ratings for agencies providing housing assistance that are significantly greater than ratings for agencies not providing housing assistance are marked with an asterisk (\*).

**FIGURE 7: PERCENTAGE OF AGENCIES THAT PROVIDE HOUSING ASSISTANCE RATING THEIR HIV PROGRAM'S SKILLS AND ABILITIES AS GREAT, GOOD, OR POOR**

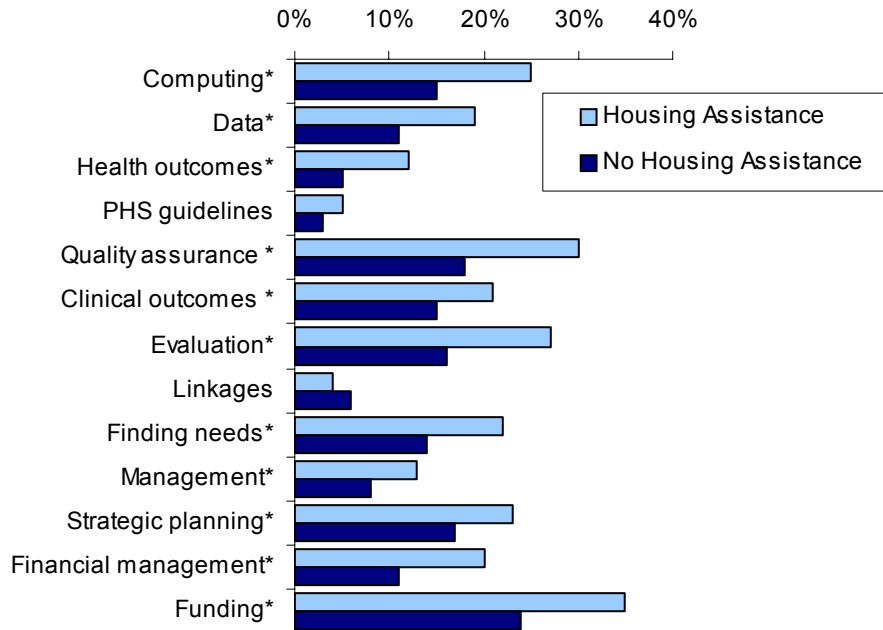


## TECHNICAL ASSISTANCE (TA) NEEDS

- Agencies providing housing assistance are significantly more likely ( $p < 0.05$ ) to need TA compared to agencies that do not provide housing assistance. Over one-half (59%) of agencies providing housing assistance indicated a need for some type of TA compared to 44% of agencies not providing housing assistance.
- There is no association between the need for TA for providing HIV care that meets Public Health Service guidelines (PHS guidelines) and for developing linkages with other HIV organizations (Linkages) and providing housing assistance.
- Statistically significant differences between agencies providing housing assistance and those not for each technical and management activity are marked with an asterisk (\*).



**FIGURE 8: PERCENTAGE OF AGENCIES NEEDING TA BY HOUSING ASSISTANCE**



**EMAIL AND INTERNET ACCESS**

- For agencies providing housing assistance, it is significantly more likely ( $p < 0.05$ ) that some or all of their staff have email access and Internet access.
- Almost all agencies providing housing assistance (91%) have email and 93% have Internet access compared to 83% of agencies not providing housing assistance with email and 87% with Internet access.

**INTEREST IN HIV/AIDS BUREAU (HAB) RESOURCES**

- Agencies that provide housing assistance are significantly less likely ( $p < 0.05$ ) than agencies that do not provide housing assistance to want to participate in HAB resources such as an email listserv, mailing lists, or other studies.
- Only 29% of agencies providing housing assistance are interested in an email listserv or mailing list to receive HIV news and other information compared to 40% of agencies that do not provide housing assistance.
- Just over one-third of agencies providing housing assistance (38%) are willing to participate in an email listserv or mailing list of other HIV/AIDS related organizations compared to 47% of agencies not providing housing assistance.
- In addition, 37% of agencies providing housing assistance are interested in other studies to help improve CARE Act programs and policies compared to 54% of agencies not providing housing assistance.

- There is no association between sharing consultation information with HAB and providing housing assistance.

<b>TABLE 5: PARTICIPATION IN HAB RESOURCES BY HOUSING ASSISTANCE</b>		
<b>RESOURCE</b>	<b>AGENCIES PROVIDING HOUSING ASSISTANCE</b>	<b>AGENCIES NOT PROVIDING HOUSING ASSISTANCE</b>
HAB Listserv or Mailing List*	29%	40%
Other Listserv or Mailing List*	39%	47%
Other Studies*	37%	54%
Sharing Information with HAB	86%	82%
*Significant chi-square at p<0.05 or less		

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