

# Cultivating Growth: Home-Based Behavioral Health and Supportive Housing across Oregon's Balance of State

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ON HIV CARE & TREATMENT

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Heather Hargraves, Sara Pyle and Jeff Williams have no relevant financial interests to disclose.

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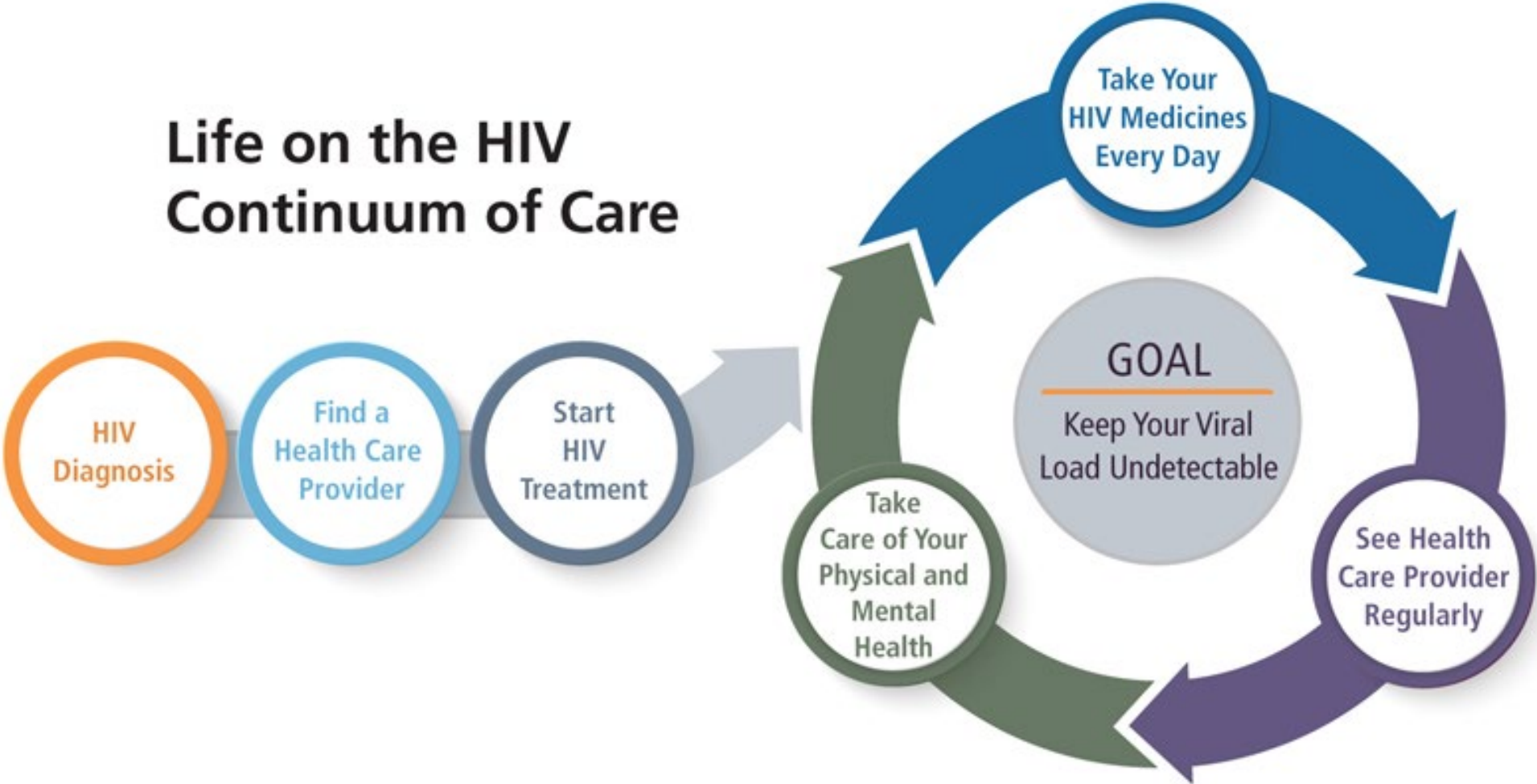
# Learning Objectives

At the conclusion of this activity, participants will be able to:

1. Discuss the critical role of housing and behavioral health services for PLWH, including but not limited to viral suppression.
2. Describe models of integrating intensive case management, behavioral health, in-home and other wrap-around services with housing assistance.
3. Identify opportunities to replicate the successes of Oregon's programs in other jurisdictions while learning from their challenges.

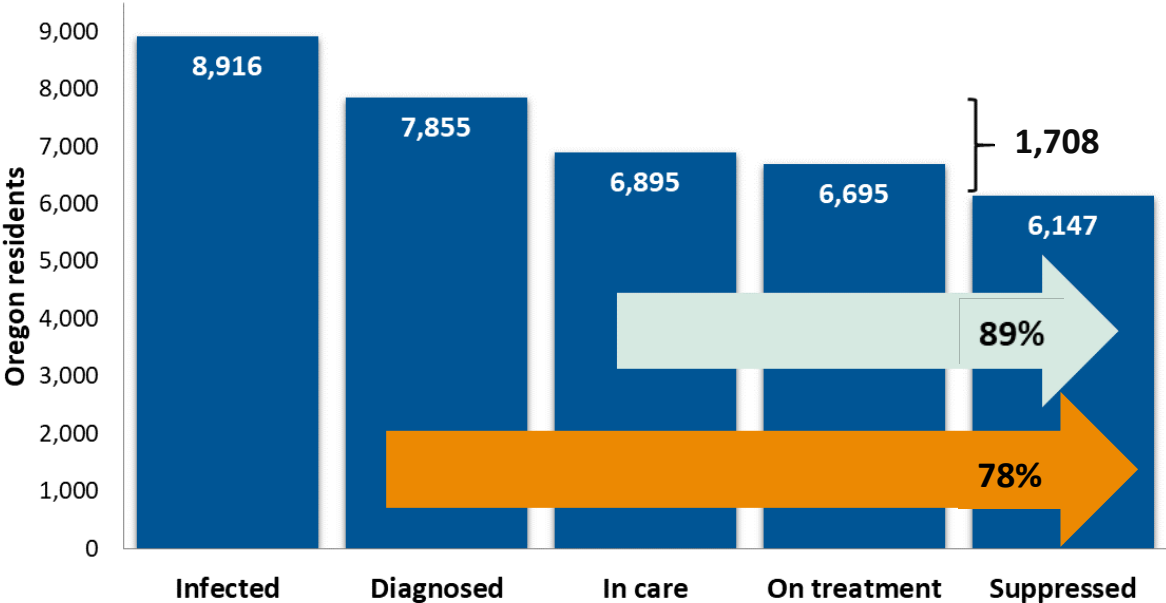
# HIV Care Continuum

## Life on the HIV Continuum of Care



# Increasing Viral Suppression

**Oregon HIV care continuum, 2021,**  
 excludes cases without a CD4/VL in the last five years



Ending  
 the  
 HIV  
 Epidemic

**Overall Goal:** Increase the percentage of people with diagnosed HIV who are virally suppressed to at least 95% by 2025 and remain at 95% by 2030.

# Undetectable = Untransmittable (U=U)



<https://www.oregon.gov/oha/PH/DISEASES/CONDITIONS/HIVSTDVIRALHEPATITIS/HIVPREVENTION/Pages/U=U.aspx>

# Housing is Healthcare

- A lack of stable housing was almost universally associated with **worse health outcomes** for PLWHA<sup>1</sup>
- Housing stability was associated with **better health outcomes**<sup>1</sup>
- PLWHA that identified as unstably housed reported they are:
  - **less** likely to continue taking their HIV medication or achieve viral load suppression, and are
  - **more** likely to report problems like depression and anxiety<sup>2</sup>

<sup>1</sup> Aidala, AA, Wilson, MG, Shubert V, et al. Housing Status, Medical Care and Health Outcomes Among People Living with HIV/AIDS: A Systematic Review. American Journal of Public Health. 2016;106(1):e1-e23.

<sup>2</sup> Oregon HIV Medical Monitoring Project, 2015-2016 weighted data

# In Oregon...

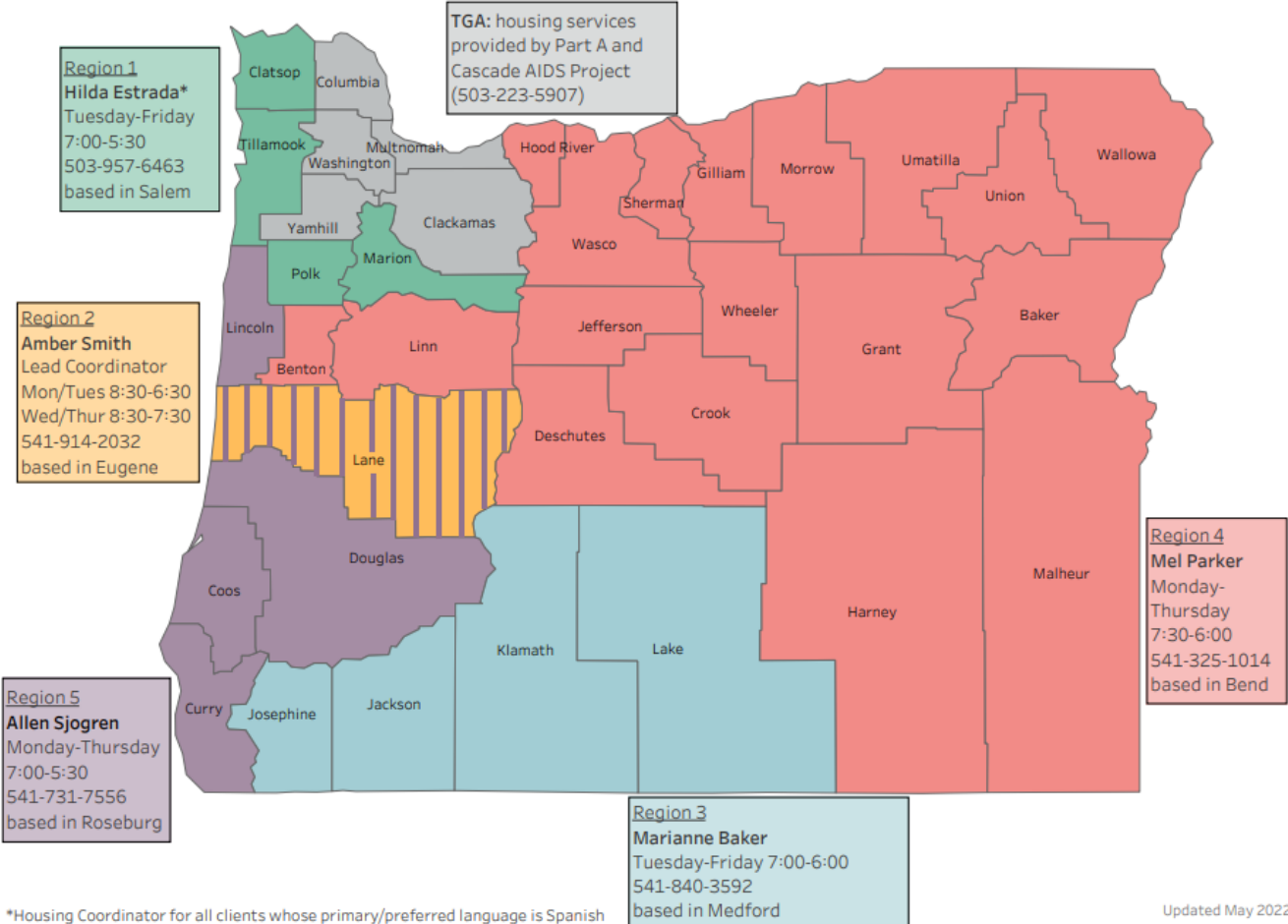
- Nearly **1 in 10** (8%) of people living with HIV/AIDS (PLWHA) across Oregon report unmet housing needs<sup>2</sup>
- Rent prices and homelessness are increasing
- Mental and behavioral health needs create *additional* housing barriers
- Oregon's HOPWA model is unable to meet high acuity needs

<sup>2</sup> Oregon HIV Medical Monitoring Project, 2015-2016 weighted data

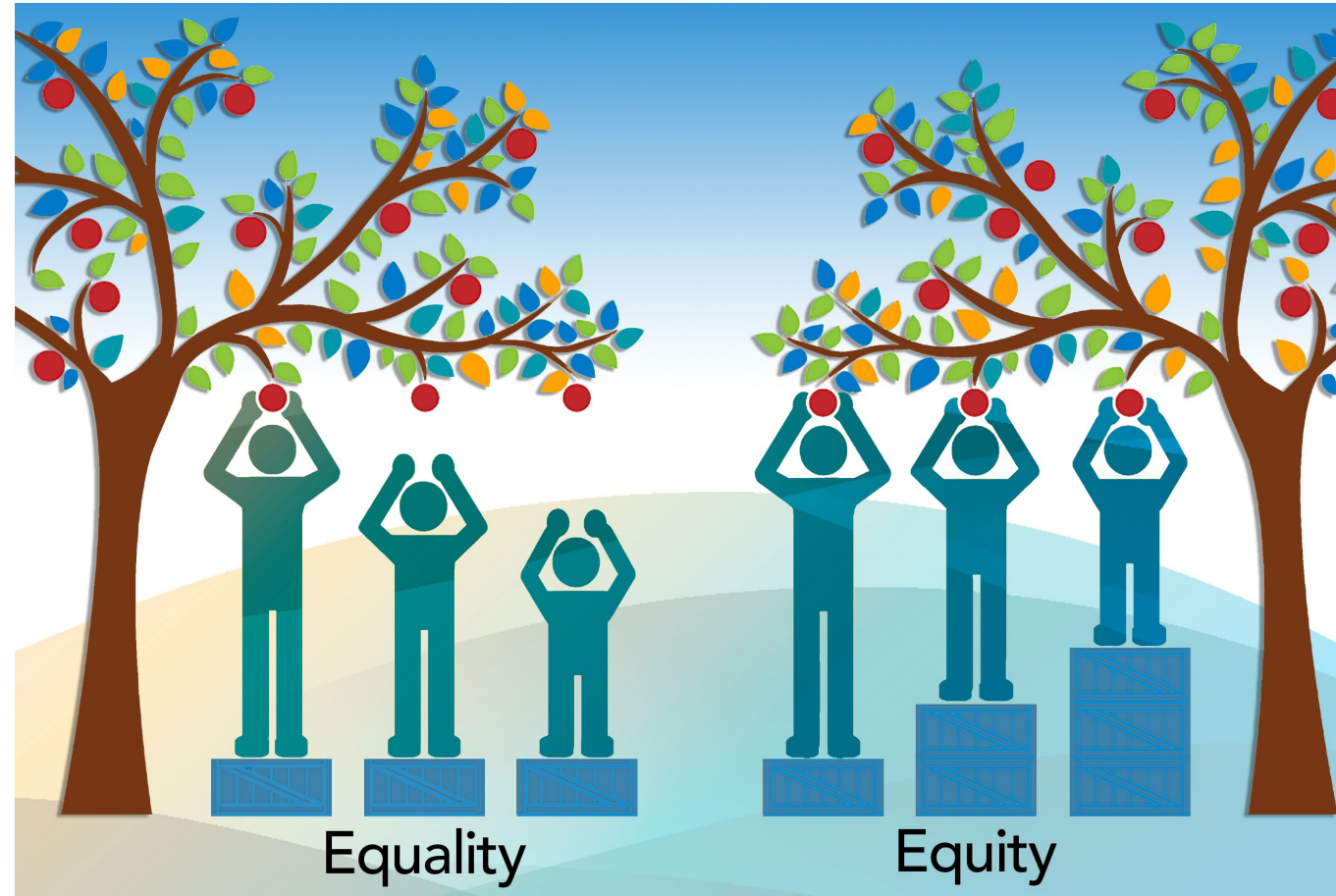


# In Oregon...

## Oregon Housing Opportunities in Partnership (OHOP) Regions



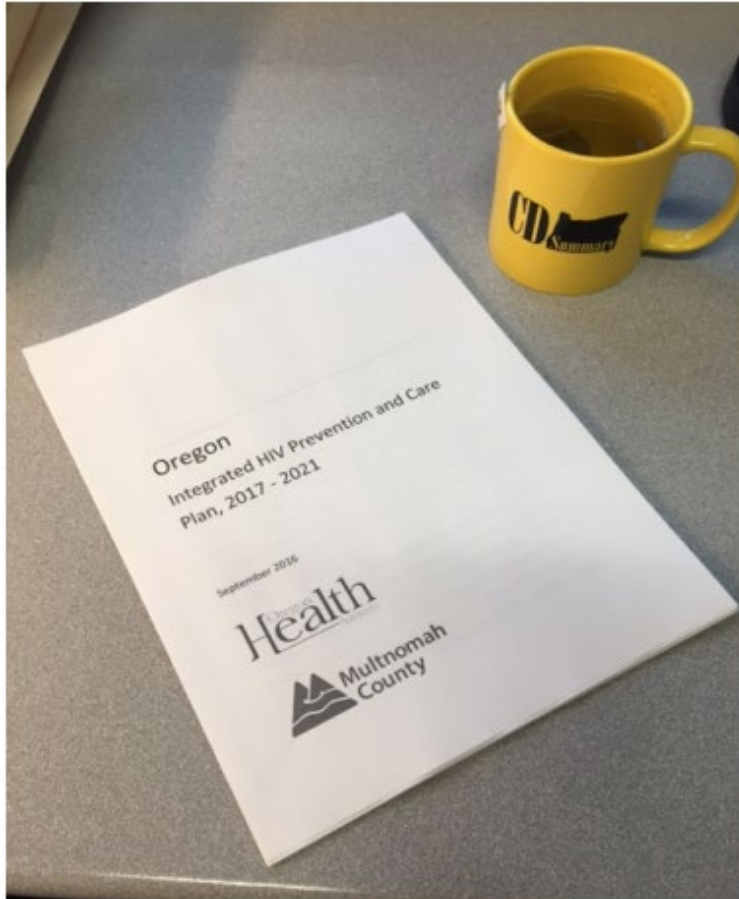
# Equity is everyone having what they need



# Supportive Housing Models Vary

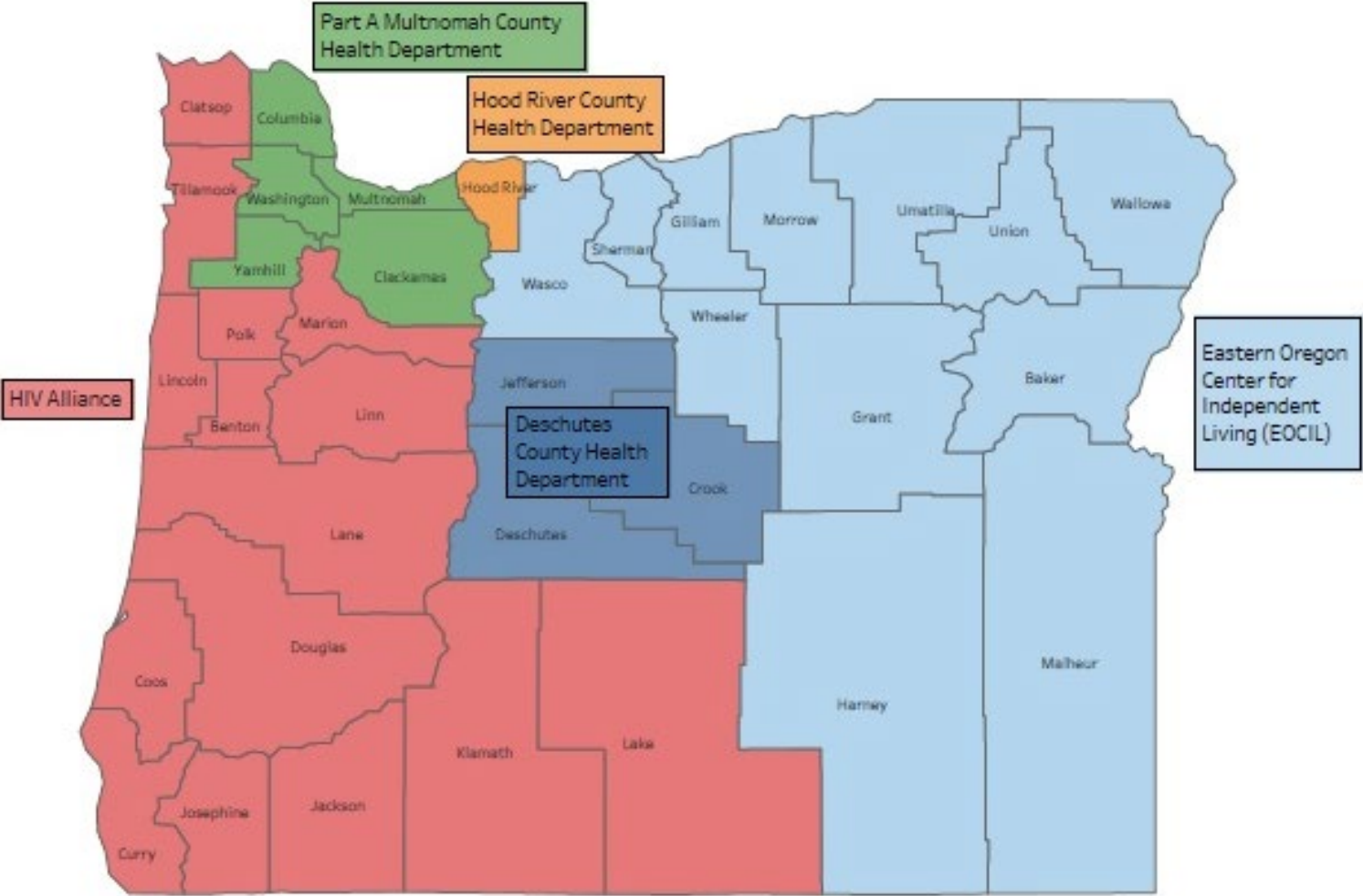
- **Criteria:** highly structured and defined (SPMI/Axis I dx) → any behavioral health challenges
- **Application:** streamlined/ “coordinated” entry across city/region → site-specific
- **Staffing:** 24 hour to drop-in → as-needed staffing
- **Levels of care:** resident services coordinators, case managers, community health workers, peers, social workers, physicians/psychiatrists
- **Structure:** independent living (individual support plans) → sober/communal living (groups required or available) → residential treatment programs (strict expectations and regulations)
- **Housing:** scatter-site/private units, SROs, entire apt complexes, master leases

# Oregon's Plan



- \$10m for statewide supportive housing over five years
- Two Community-Based Organizations in Part B
  1. HIV Alliance
  2. Eastern Oregon Center for Independent Living

# Oregon's Ryan White Structure





# Oak Program – HIV Alliance

- Weekly home/in-person visits
- Financial support
- Wrap-around services from support team



# Oak Program Goals

Goal 1: Supportive Housing clients will achieve and maintain viral suppression.

Goal 2: Supportive Housing clients will achieve and maintain engagement in HIV medical care.

Goal 3: Supportive Housing clients will establish long-term wellness through engagement in program services.

Goal 4: Self-Sufficiency.

# Oak Program Successes

- 40 clients served
  - 20 unhoused clients obtained housing through Oak
  - 9 clients housed unstably at enrollment; currently maintaining that housing stably
- Housing Partnerships
  - Master leases
  - Targeted set-asides
  - Scattered-site rentals
- Low Barrier
  - Peers
  - Resident Services Specialist
  - Client remedy plans





# Oak Program Opportunities



- Identify and advocate for more housing and partnerships
- Increase on-call/immediate behavioral health support
- Strengthen individualized, client-centered and trauma-informed approaches
- Creatively support community

# Cultivate – Eastern Oregon Center for Independent Living

- Low barrier supportive housing
- Behavioral health and addiction supports
- Treatment and sustainability goals
- Comprehensive, intensive trauma-responsive approach



# Cultivate Program Goals

Goal 1: Supportive Housing clients will achieve and maintain viral suppression.

Goal 2: Supportive Housing clients will achieve and maintain engagement in HIV medical care.

Goal 3: Supportive Housing clients will establish long-term wellness through engagement in program services.

Goal 4: Self-Sufficiency.

Goal 5: Quality, Safe, Affordable Housing.

Goal 6: Flexible Voluntary Services.

# Cultivate Program Goals 2

Goal 1: Supportive Housing clients will achieve and maintain viral suppression.

Goal 2: Supportive Housing clients will achieve and maintain engagement in HIV medical care.

Goal 3: Supportive Housing clients will establish long-term wellness through engagement in program services.

Goal 4: Self-Sufficiency.

Goal 5: Quality, Safe, Affordable Housing.

Goal 6: Flexible Voluntary Services.

# Cultivate Program Successes

- 19 clients housed
- 92% viral suppressed
- 3 clients completed alcohol and drug treatments
- All clients engaged in behavioral health care
- Program purchased a 7-unit apartment complex





# Cultivate Program Opportunities



- Strengthen relationships with landlords and property managers
- Engage community in anti-stigma education
- Practice trauma-responsive approaches
- Explore innovative behavioral health approaches

## PILOT PROGRAM



# Questions and Discussion





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