HENNEPIN COUNTY

MINNESOTA

Public Health



Understanding Barriers and Facilitators to Housing in the Twin Cities

Findings from Interviews with People Living with HIV Experiencing Housing Insecurity



Agenda

Local context

Project overview

Participant characteristics

Barriers to housing

Facilitators to housing

Desirable housing

Conclusion







HIV outbreak in the Twin Cities

- Two distinct subclusters:
 - People living in encampments and using injection drugs (111)
 - Men who have sex with men (MSM) and using injection drugs (142)
- Total of 253 cases as of 5/8
- More information: hennepin.us/hiv-outbreak



Housing is one of the most significant predictors of positive HIV-related health outcomes

Lack of safe/affordable housing and increases in encampments, complicated by the opioid crisis

Housing-first approach to addressing the HIV outbreak

Movement along the housing continuum is associated with movement along the HIV care continuum







Overview

Low Barrier Housing Technical Workgroup (TWG) was created



Housing TWG sponsored the Consumer Input Project (CIP)



Data from CIP to be used for program planning

 Goal: Provide a pathway from temporary shelter to stable housing for PWH Goal: Interview
 20-40 PWH about their experiences
 with housing

 Goal: Produce a communityinformed definition of desirable housing



Project details

- 22 interviews conducted between July 2022 and March 2023
- All participants were:
 - Living with HIV and over 18 years old
 - Part of the Twin Cities HIV outbreak or outbreak adjacent
 - Either:
 - Currently experiencing homelessness
 - In unstable or transitional housing
 - Experienced homelessness in the last year

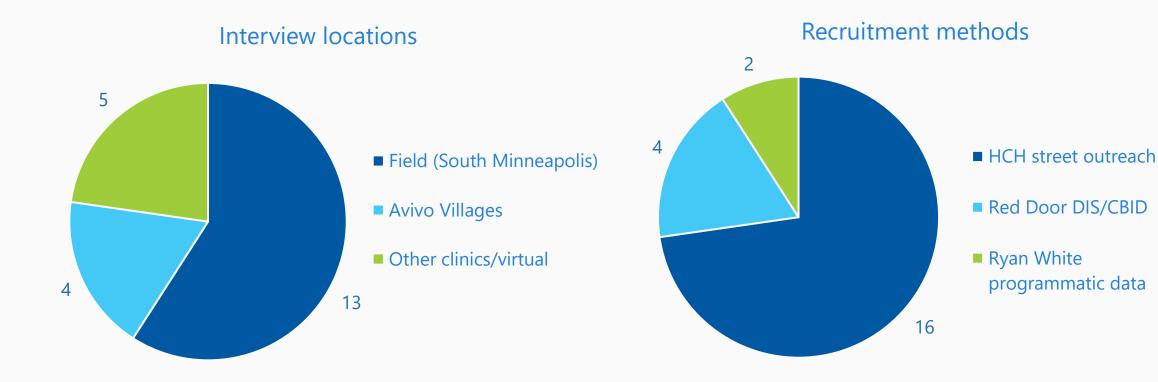


Interview questions





Interview locations and recruitment







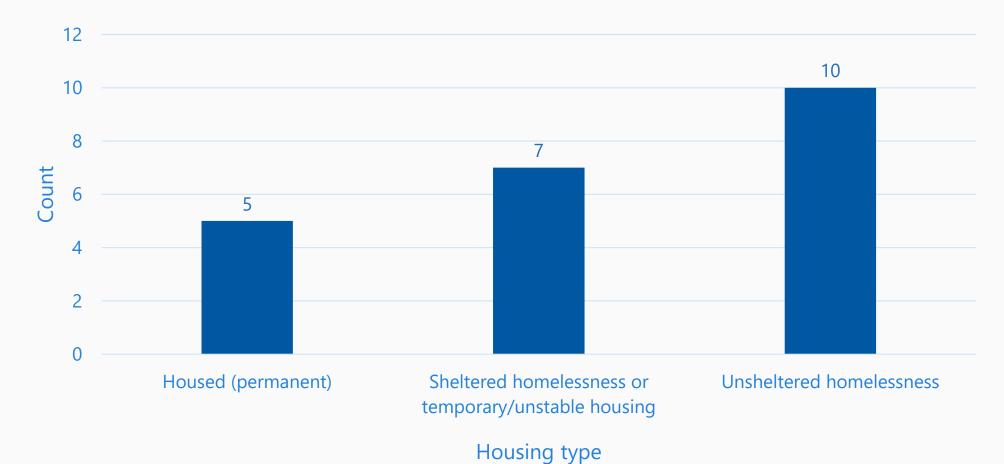


Demographics reflect the HIV outbreak

- More than 50% Native American (12)
 - Black (3), multi-racial (3), Hispanic (2), and White (2)
- MSM (3)
 - 6 in total did not identify as straight/heterosexual
- Gender
 - Cisgender male (10), cisgender female (9), transgender or non-binary (3)
- Median age 36.5
 - 50% younger than 35 and 2 older than 50

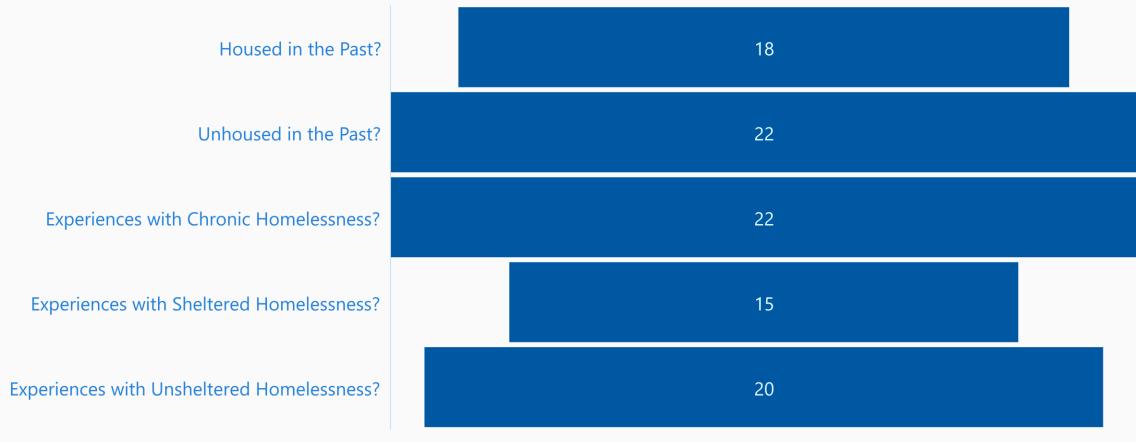


Housing statuses at time of interview





Housing experiences





Limitations and use cases

- Inclusion criteria were determined before HIV outbreak subcluster definitions were updated
- Small n's for subgroups
- Data collected is specific to:
 - Research questions
 - Populations represented in the inclusion criteria







Substance use disorder



Difficulties with life tasks
Loss or surrender of housing
Harder when unhoused

Legal n=15



No ID documents Criminal/legal background Other legal issues

Desirability n=14



Surrendering, turning down, or not maintaining undesirable housing

Mental health n=13



Difficulties with life tasks Motivation and cognition Worsened by no housing





Lack of social support Unstable relationships Other social issues



Other barriers included:



Participants'
lack of
motivation for
housing



Transportation barriers or public transit dependence



Safety issues on the streets or in housing



Finances, including barriers to employment or benefits



Negative experiences with providers or restrictive rules



Physical health issues, including HIV



Other barriers included (cont.):



Stigmatization and discrimination



Participants'
lack of
knowledge
about housing



Lack of housing



Communication challenges



Homelessness, especially chronic homelessness



Systemic issues, like structural racism or the war on drugs







Supportive services



Case management, housing, healthcare, SUD, financial Transactional vs. intensive

Strong relationships n=19



...with case managers ...with friends and family ...with other advocates

Availability of housing n=11



General availability
Specific housing programs

Personal motivation n=10



Wanting to do better for themselves or others Taking proactive steps

Desirability and rules



Liking housing/shelter Liking the supports or services around housing



Other facilitators included:



HIV-specific housing resources



Lack of legal challenges



Communication



Good mental health



Sobriety or support around substance use



Access to transportation







People want housing that:



Is in the Twin Cities, especially South
Minneapolis



Is one-bedroom and allows them to live alone or with family



Is accessible by public transportation



Is affordable, subsidized, and easy to access, with no extra fees



Has safeguards against evictions and flexibility around criminal history



Offers harm reduction tools and doesn't require sobriety



People want housing that (cont.):



Allows for visitors and pets/emotional support animals



Has on-site laundry, storage, private bathrooms, and parks



Is in a safe neighborhood with a gated entrance



Is on a lower floor and ADA or elevator accessible



Offers independence along with supportive services



Is not recognizable as HIV-specific or culturally specific



Participants also wanted specific elements related to:

Transitional housing		
Greater independence and privacy	More hands-on support	More safety and housing options
Encampments		
Sense of family and community	Openness and freedom	Security and safety issues
Individual background and needs		
Anti-discrimination policies	Culturally specific housing	Flexibility around harm reduction







Key takeaways

There are **cyclical relationships** between barriers, housing, and homelessness

Providers have different **perceptions** of housing systems and challenges

and be

Case management, street outreach, and personal motivation are important **facilitators** to housing

Housing processes and programs need to be desirable and flexible

Trust in providers, systems, and programs is important



Next steps

Writing a full summary report of findings (email to request)

Creating and implementing a plan for low-barrier housing

Presenting findings to other stakeholders

Uploading recordings to MATEC and Ryan White webpages



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