PEER (PLHIV) BASED HOUSING SUPPORT

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Approach: Over the past 3 years, service gaps were identified in the provision of homelessness and accommodation services for People Living with HIV (PLHIV). Case Managers reported PLHIV were presenting with social housing support concerns, which resulted in them spending less time supporting PLHIV achieve their health goals.

Argument: Service partners reported contact with mainstream housing services was hampered and inaccessible. When attempts were made to facilitate individual referral, without peer support, typically the positive person would not follow through and turn to case managers and clinicians to seek assistance for complex processes. There are typically a range of health and social concerns confronting the positive person. Namely: alcohol and other drugs, comorbid physical and mental health conditions; Domestic Violence; legal; gender/ sexuality; and employment and finances.

Results: After 23 weeks of the peer based housing program various levels of support was provided to 64 PLHIV. PLHIV identified as male, female, transgender and gender non-conforming. The program continues to service 3-4 new PLHIV a week. It is estimated that this work, along with the ongoing client work and follow up, would generate at least 35-40 contacts per week. The type of contacts included with PLHIV and service partners was varied depending on the need in both urban and rural/remote locations.

Conclusions: We found that it is important to deal with the issues of a PLHIV in a comprehensive and systemic manner. Whilst it may be important for a PLHIV to have employment for a good quality of life, they often find it difficult to maintain employment if stable housing or a medical care plan aren't in place. Whilst the program is primarily focussed on health and housing, in the best interests of an early intervention approach, a peer led program proves beneficial in identifying and facilitating referrals to relevant services.

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