Employment's Role in Supporting Federal HIV/AIDS and Homelessness Initiatives

PLWHA, like people with other disabilities and chronic health conditions, often face barriers to employment and employment services. In a similar manner, people who are homeless face significant challenges to becoming gainfully employed, yet doing so is essential to obtaining stable housing, which in turn facilitates the delivery of health care and other social services. Both HIV/AIDS and homelessness are multi-faceted issues that require a coordinated response that includes a focus on employment. Reflecting this, employment is a critical component of the National HIV/AIDS Strategy, HIV Continuum of Care Initiative and Federal Strategic Plan to Prevent and End Homelessness.

National HIV/AIDS Strategy

On July 13, 2010, President Obama released the National HIV/AIDS Strategy for the United States—the nation's first-ever comprehensive plan for responding to the domestic HIV/AIDS epidemic. This Strategy outlined priorities and specific action steps for responding to HIV/AIDS within the U.S. within the context of three primary goals:

- ✓ Reduce new HIV infections
- ✓ Increase access to care and improve health outcomes for people living with HIV
- Reduce HIV-related health disparities

Six lead federal agencies are charged with advancing these goals. They are:

- ✓ The U.S. Department of Health and Human Services (HHS)
- ✓ The U.S. Department of Justice (DOJ)
- The U.S. Department of Labor (DOL)
- ✓ The U.S. Department of Housing and Urban Development (HUD)
- ✓ The U.S. Department of Veterans Affairs (VA)
- ✓ The U.S. Social Security Administration (SSA)

DOL's participation in the Strategy as a lead federal agency reflects the changing nature of the HIV/AIDS epidemic and resulting emergence of employment as critical to responding to it. DOL supports the welfare of job seekers and wage earners, which includes funding the nationwide network of employment service centers run by state and local workforce systems (collectively called "American Job Centers"). Depending where PLWHA live and whether or not they qualify for other publicly funded services (such as state vocational

rehabilitation services), these systems may be the only public employment services they can access. Through its Office of Disability Employment Policy (ODEP), DOL works to break down barriers to employment and employment services for people with disabilities, including PLWHA. Thus, ODEP serves as DOL's representative to the Strategy.

Clearly, the work of HIV/AIDS service providers is critical to the Strategy's success, on multiple levels. Today, assisting clients to prepare for and/or obtain employment—whether through a specially developed program or by developing effective linkages with existing community resources—is increasingly among the ways they contribute. Effective employment services can positively impact health outcomes of PLWHA and help curb the economic and social costs of HIV/AIDS to individuals, families and communities. Additionally, they can contribute to HIV prevention by alleviating the negative forces—such as poverty and social marginalization—that drive continued infections, especially among those who already face challenges getting and keeping a job.

For more information on the National HIV/AIDS Strategy, visit: http://www.whitehouse.gov/administration/eop/onap/nhas.

HIV Care Continuum Initiative

A number of research and policy initiatives have led to a better understanding of how PLWHA in the U.S. access health care and other services and how those services affect their long-term health. One important research finding is that that many PLWHA are not getting the full benefits of available care and treatment.

In fact, for every 100 PLWHA in the U.S., it is estimated that:

- ✓ 80 are aware of their HIV status
- √ 62 have been linked to HIV care
- √ 41 stay in HIV care
- √ 36 get antiretroviral therapy (ART)
- ✓ 28 are able to adhere to treatment and sustain undetectable viral loads

This is referred to as the "treatment cascade." Only 28 percent—just slightly more than 1 out of 4—of the more than 1,000,000 PLWHA in the U.S are getting the full benefits of the treatment they need to manage their condition and keep the virus under control, or, put another way, moving through the "HIV continuum of care."

As a result of these findings, on July 15, 2013, President Obama directed the Strategy's lead agencies to accelerate efforts to increase HIV testing, enhance linkage and engagement in care, and improve treatment outcomes.

Efforts to improve employment options for PLWHA clearly support the goals of the HIV Care Continuum Initiative. Research has shown a positive correlation between employment and self-care and CD4/T cell counts, as well as medication adherence. Furthermore, as of 2014, patient protections of the ACA will significantly expand health insurance options for PLWHA, which will impact employment opportunities as well as access to care and treatment.

For more information on the HIV Care Continuum Initiative, visit: http://aids.gov/federal-resources/policies/care-continuum.

Federal Strategic Plan to Prevent and End Homelessness

Safe, affordable housing is the foundation upon which nearly everything else in an individual's life is built. Without it, health, education and reaching one's potential—in employment and other pursuits—is difficult, if not impossible. Reflecting this, in 2010, the 19-member U.S. Interagency Council on Homelessness (USICH) released the nation's first comprehensive Federal Strategic Plan to Prevent and End Homelessness. This Plan provides a strategy for aligning mainstream housing, health, education and other human services to prevent and end homelessness.

Titled "Opening Doors," the Plan's vision is centered on the belief that "no one should experience homelessness—no one should be without a safe, stable place to call home."

It is framed around four key goals:

- ✓ Finish the job of ending chronic homelessness in five years
- ✓ Prevent and end homelessness among Veterans in five years
- Prevent and end homelessness for families, youth, and children in 10 years
- Set a path to ending all types of homelessness

Objectives for achieving these goals fall under five themes:

- ✓ Increase leadership, collaboration and civic engagement
- Increase access to stable and affordable housing
- ✓ Increase economic security
- ✓ Improve health and stability
- ✓ Retool the homeless crisis response system

Clearly, the third of these themes encompasses increasing meaningful and sustainable employment for people experiencing or most at risk of homelessness. But, as all five illustrate, homelessness—like HIV/AIDS—is a complex issue that cannot be solved with a single change in policy or by one agency or organization. Rather, an effective response requires coordination and collaboration among the private and public sectors, at the national, state and community level. Not surprisingly, stable housing is an important ingredient for success in school for children and employment for adults.

By the same token, employment is clearly a critical component of ending homelessness. By offering employment services to individuals who are, or may be at risk of becoming, homeless, HIV/AIDS and homelessness service providers have a powerful role to play in advancing the Federal Strategic Plan to Prevent and End Homelessness as well as the National HIV/AIDS Strategy.

For more information about the Federal Plan to Prevent and End Homeless and "Opening Doors," visit: http://usich.gov/opening_doors.