

In response to the recent affordable housing crisis in Calgary, several funds have been created to address emergency housing needs. This Briefing Document is meant to provide basic information about government or agency sponsored housing benefits, but this is not an exhaustive discussion of benefits available. For more information, or to apply for benefits, refer to the websites cited in this document or contact a Client Services worker at AIDS Calgary, Southern Alberta Clinic or other social agency.

Homeless and Eviction Prevention Fund (HEP Fund)

Provided by Alberta Employment, Immigration and Industry, this fund assists people who need to establish a new place to live, or who may lose their home due to rent increases or arrears. This fund can provide payment of rental arrears, utility arrears, moving costs, damage deposit and first month's rent. There are no dollar limits for this program, and people can access it multiple times. Also, anyone can apply for this program but applicants must provide identification, an eviction notice or arrears statement from their landlord and some kind of confirmation that they have limited funds to cover the rent shortfall, such as a bank statement. Also, people who are looking to establish a new place to live need to provide identification, confirmation of rental costs and confirmation that they have limited funds to cover moving and establishment costs, such as a bank statement. However, if you do not have identification, they will still consider your application. For coverage of moving costs, applicants must provide two or three quotes from different movers indicating the estimated costs. To apply for this program, individuals already receiving AISH or Income Support can speak directly to their case workers, otherwise individuals should go to an Alberta Works office where they will meet with an intake worker on a "first-come first-served basis". Applications can be processed very quickly and applicants may be able to receive a cheque or direct deposit the same day or within a 24 hour period.

Direct to Household Rent Supplement Program

Provided by Alberta Municipal Affairs and Housing, this program provides a subsidy to assist people with their rental costs and is administered through local housing providers, such as Calgary Housing in Calgary. If an individual or family are paying more than 30% of their income on rent, this program will provide a subsidy to cover the difference between 30 percent of their income and an agreed upon market rent, up to a maximum amount established by the housing provider. In order to qualify, applicants must meet the core need income threshold and citizenship requirements, and priority is given to those with the greatest needs and to those already in housing rather than those looking to move.

Calgary Red Cross Community Housing Program

This program offers partial *one-time* only financial assistance to pay for security deposits or rental arrears and can assist with partial *one-time* payment for utilities (electricity or gas) when disconnection could be a problem (between late fall and early spring only). Also, this program can advocate to landlords or utility companies on behalf of clients. Due to limited resources, this program prioritizes requests on the basis of need. Before applying to the program, people are encouraged to do a self assessment available on their website: www.redcross.ca. This program is a partnership between several organizations, and by filling in a universal application form, applicants are assessed for their fit with several local programs (e.g. Red Cross, CUPS, Salvation Army, Inn from the Cold, Distress Centre).

Momentum Calgary Rent Bank

This program provides loans for individuals and families for rent and utilities arrears, security deposits and utility deposits. secure housing, prevent eviction and pay utilities to prevent them from being turned off. Recipients are expected to pay back their loan each month over a 2-year period and must participate in two money management workshops during that time. The interest charged on the loan is at 1.5% above prime, but this money is refunded to the recipient when the loan is fully paid back and you have attended two workshops. Applicants must be 18 or over, and can be employed or on income assistance but must meet the program's low-income requirements (for a single individual, you must earn less than \$20,778 per year).

AIDS Calgary's Greenbough Fund

AIDS Calgary's Greenbough Fund helps people living with HIV/AIDS through financial crises affecting housing, health, and/or support. The Fund is divided into two categories of need; emergency assistance and quality of life assistance.

Emergency assistance provides funding for temporary homelessness, one-time rental or bill supplements, supplemental food costs, extra billing for health services, temporary coverage for particular prescription drugs, as well as transportation costs for Calgary Transit, taxi use, and transportation related to family emergencies. Quality of life assistance covers educational or employment related conferences or courses, one-time assistance with social or recreational opportunities and other needs as identified by an individual.

In order to qualify for this program, a client must demonstrate financial need, provide proof that the Fund is the last resort, and confirm their HIV status (if not already registered with AIDS Calgary) and register with AIDS Calgary. Each request for funding is assessed individually, and due to limited funds, priority is often given to individuals requiring emergency assistance. Money for this fund comes from donations and agency fund-raising.

HIV/AIDS and seniors is not something that is often about. With the increasing number of HIV positive people that are living into their senior years and the number of older people being diagnosed with HIV it is important to talk about these two things. We know that many people are living longer with the new HIV medications and that many HIV positive people are, or are soon going to be senior citizens.

Risk Factors

People often think that just because a person is over 50 years old that they are no longer sexually active. What we know from studies and speaking with people that this is certainly not the case. People have active and healthy sex lives well into their 60's, 70's, and 80's.

Older people are losing their partners and are entering the dating scene after many years. They enter the scene with little or no knowledge of HIV/AIDS and other STI's. Many grew up in a time when HIV was unheard of, and there are few, if any, HIV prevention campaigns targeted towards older people. Many seniors view condoms as a form of birth control, and at their age no longer have to worry about that, which means they are often not practicing safer sex.

Women experiencing menopause are also biologically at higher risk of contracting the HIV virus because as women age the amount of natural lubricant lessens and the vaginal walls become thinner. This puts women at risk because of the chances of small cuts and tears that can happen during sex, allowing HIV access to the bloodstream should their partner be HIV positive.

Another risk is that doctors do not generally speak to their older patients about sex and probably aren't supplying safer sex information and supplies. There is a discomfort around the topic of sex as many seniors were brought up in a time where sex is not something that you talked about. Also, doctors may miss the signs of an HIV infection as they are quite similar to the symptoms people experience during the natural aging process.

There is also a small percentage of new infections in people over 50 who have contracted the virus from injection drug use. It's a common misconception that people just stop their drug use at a certain age. It is important to also educate people about the risks of needle sharing, and provide them with information on how to protect themselves.

Statistics

A Study of Sexuality and Health Among Older Adults in the United States was overviewed in a news article on www.thebody.com. The study interviewed 3005 individuals. It showed that 73 percent of individuals aged 57-64 had sex within the year, that 53 percent of 64-75 had sex in the past year, and that 26 percent of 75-85 year olds also had sex in that time period. Half of the participants in the study said they had given or received oral sex in the last year, and 1/3 of those were age 75-85¹. In Canada the 2003 HIV Epi update reported that 11.7 percent of HIV infections in Canada were in people over 50².

Locally the Calgary Health Region HIV Surveillance report between Mar. 1, 1998 and Dec. 31, 2006 there were 1589 total HIV cases within that time frame, with 577 cases were 40 years old and older³. In 1996, 4 percent of HIV infections were amongst people age 51-60, and those over 60 made up only 1 percent. In 2006, 15 percent of HIV infections occurred in people age 51-60, and 5 percent were over 60 years old⁴.

Education/Outreach

It is evident from the statistics that older adults are engaging in activities that put them at risk of an HIV infection. This means there is a need for senior specific outreach and education. Education needs to be created to specifically fit their needs and comfort levels around sex. Outreach also needs to target people living in seniors' complexes. There is also a need for HIV prevention campaigns that would specifically target seniors.

Staff in places such as extended care facilities need to be aware of the issues and should be educated about universal precautions so that everyone is kept safe. Older adults need to be informed about HIV and other STI's.

Viagra and HIV Medications

The introduction of Viagra (and its alternatives) also introduces new issues not seen previously. People who use the drug may not have had current sexual health education.

In the age where we provide Viagra to older men, we also need to educate them about safer sex. We have a responsibility to protect people and arm them with the knowledge to make healthier sexual decisions. For people living with HIV who are also taking Viagra or others like it (Levitra, or Cialis) the dose should be lowered as there is a possibility of drug interaction. It would be strongly encouraged to talk to your doctor about the interactions of HIV medications with Viagra in order to avoid any complications. It is also strongly encouraged not to take Viagra with alcohol or if you have Hepatitis⁵.

References:

1. Alberta Employment, Immigration and Industry, *Homelessness and Eviction Prevention Fund*. Electronic document: accessed October 10, 2007. <http://employment.alberta.ca/cps/rde/xchg/hre/hs.xsl/5203.html>
2. Alberta Municipal Affairs and Housing, *Direct to Household Rent Supplement Program*. Electronic document: accessed October 10, 2007. http://www.municipalaffairs.gov.ab.ca/hs_direct_to_household_rent_supplement_program.cfm
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4. Momentum, *Calgary Rent Bank*. Electronic document: accessed October 10, 2007. <http://www.momentum.org/departments/fl/programs/calgaryrentbank.html>
5. The Body/The Complete HIV/AIDS Resource: <http://www.thebody.com/content/news/art42788.html>
6. Public Health Agency of Canada, *HIV/AIDS Epi Update- May 2004*: http://www.phac-aspc.gc.ca/publicat/epiuaepi/epi_update_may_04/6_e.html
7. Calgary Health Region, *HIV Surveillance, Cases by age group*: http://www.phac-aspc.gc.ca/publicat/epiuaepi/epi_update_may_04/6_e.html
8. Calgary Health Region, *Change in age distribution of Active Patients at the Southern Alberta Clinic*: <http://www.calgaryhealthregion.ca/clin/sac/graphs/slide5.gif>
9. AIDS Community Research Initiative of America, *Drug Interactions: HIV Medications, Street Drugs and Methadone*: http://www.acria.org/treatment/treatment_edu_springupdate2005_interactions.html

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