

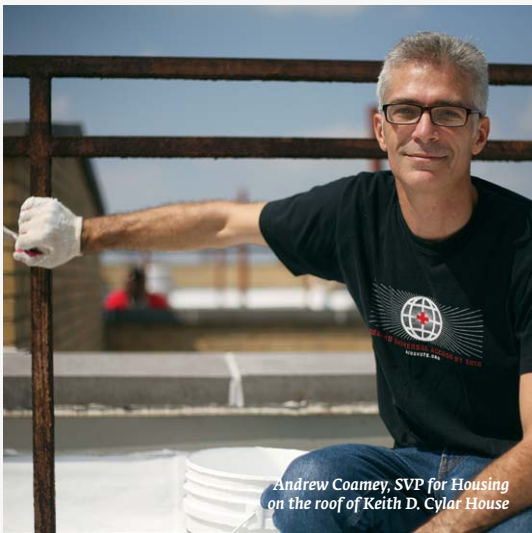
The Key is Housing



Residents and staff gather on the stoop of Stand Up Harlem House



Matilda in her home at Keith D. Cylar House



Andrew Coamey, SVP for Housing on the roof of Keith D. Cylar House



A common area at Stand Up Harlem House

Since we began our work in 1990, the mission of Housing Works has been to provide housing and community to homeless individuals and their families living with HIV/AIDS.

Why is housing so critical? Because when one is homeless, immediate survival must, by necessity, take priority over everything else. The stresses of the environment are relentless; violence is ubiquitous; stable intimate relationships are all but impossible. Housing really is the critical baseline for maintaining both psychological and physical well-being.

In this new issue of *The Key*, you'll read about the incredible difference my colleagues are making in the lives of individuals living with HIV/AIDS. We've laid out some fascinating research that underscores just how vital housing is to ending AIDS and have also included a timeline of Housing Works' experience in building housing for people in need, which has only been possible through the generous support of our members and donors.

Most importantly, you'll read stories from the front lines—stories from the brave men and women who, despite battling HIV/AIDS and poverty, live their lives with purpose and dignity every day. This issue is for them.

Sincerely,

Andrew Coamey,
Senior Vice President for Housing Development & Chief Financial Officer

Photography clockwise
from top right: Julie Turkewitz,
scm Photography,
Julie Turkewitz, Anna Moller

People who are homeless or unstably housed have HIV infection rates as much as 16 times higher than people who have a stable place to live.⁹

HOMELESSNESS IS A MAJOR RISK FACTOR FOR HIV

NEW RESEARCH confirms that homelessness and unstable housing are linked to greater HIV risk, inadequate care, poor health outcomes and early death for persons living with HIV/AIDS.

The conditions of homelessness and extreme poverty—the pressures of daily survival needs, the inability to maintain intimate relationships, and substance use as a response to stress and/or

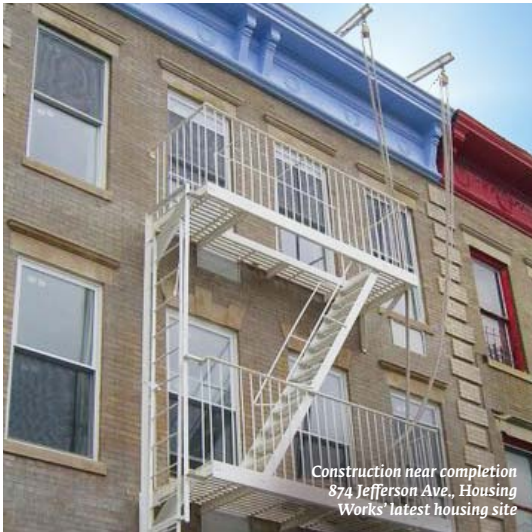
mental health problems—leave homeless and unstably housed persons extremely vulnerable to HIV infection.⁹

The people most at risk of HIV—men who have sex with men, persons of color, homeless youth, iv drug users, and impoverished women—are significantly more likely to become HIV infected over time if they lack stable housing.⁹

Research and Text
by Ginny Shubert
Information Design
by Silas Munro,
Alex Pines & Andrew Walters

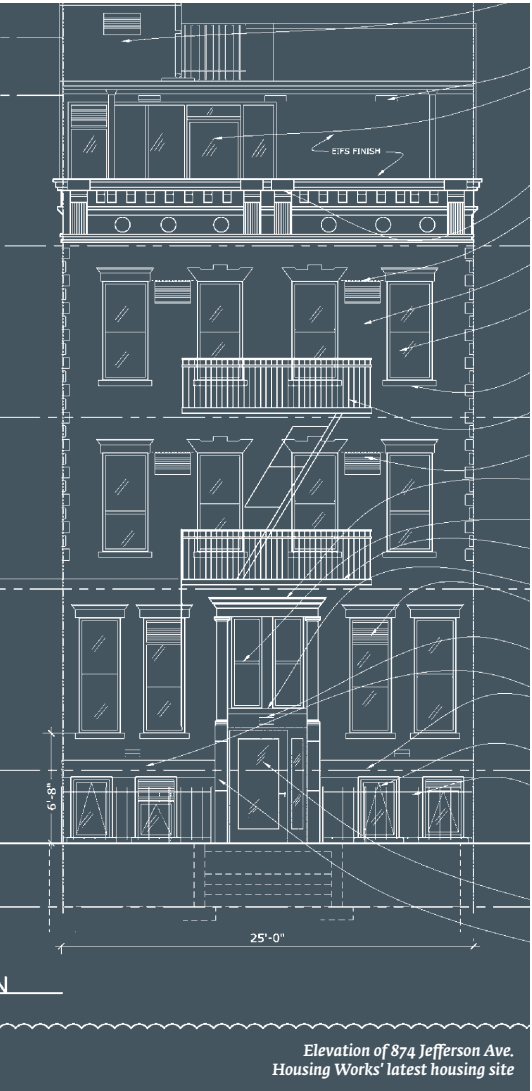
⁹ Kerker, B., Bainbridge, J., Li, W., Kennedy, J., Bannani, Y., Agerton, T., Marder, D., Torian, L., Tsai, B., Appel, K., Gutkovich, A. (2005). *The Health of Homeless Adults in New York City: A report from the New York City Departments of Health and Mental Hygiene and Homeless Services*; Robertson, M., Clark, R., Charlebois, E., Tulskey, J., Bangsberg, D., Long, H., and Moss, A. (2004). HIV seroprevalence among homeless adults in San Francisco. *American Journal of Public Health*, 94(7): 1207-1212; Culhane, D., Gollub, E., Kuhn, R., and Shpaner, M. (2000). The co-occurrence of AIDS and homelessness: Results from the integration of administrative data for AIDS surveillance and public shelter utilization in Philadelphia. *Journal of Epidemiology and Community Health*, 55(7): 505-510; ¹⁰ Adelle, A., & Samartino, E. (2007). Why Housing? AIDS & Behavior, 11(6): 51-56; ¹¹ See, e.g., Marsh, B., Kerr, T., Shovelier, J., et al. (2009). Homelessness and unstable housing associated with an increased risk of HIV and STI transmission among street-involved youth. *Health and Place*, 15(3): 753-760; Stein, J.A., Nyamathi, A.M., Zane, J.I. (2009). Situation al, psychosocial and physical health related correlates of HIV/AIDS risk behaviors in homeless men. *American Journal of Men's Health*, 3(1): 25-35; Wenzel, S., Tucker, J., Ellison, M., et al. (2007). Sexual Risk among impoverished women: Understanding the role of housing status. *AIDS & Behavior*, 11(6): 51-56; See, e.g., Kipke, M.D., Weiss, G., & Wong, C.F. (2007). Residential status as a risk factor for drug use and HIV risk among young men who have sex with men. *AIDS & Behavior*, 11(6): 51-56; Marshall, B., Wood, E., Li, K., et al. (2007). Elevated syringe borrowing among men who have sex with men: A prospective study. *J AIDS*, 46(2): 248-252.

The Key Will End AIDS



500

Housing Works has set a goal of reaching 500 units of permanent housing for those living with HIV/AIDS by 2016.



Housing Works is a healing community of people living with and affected by HIV/AIDS. Our mission is to end the dual crises of homelessness and AIDS through relentless advocacy, the provision of lifesaving services, and entrepreneurial businesses that sustain our efforts.

A newly ratified strategic plan puts Housing Works on the road to achieving that mission by 2031. An important stepping stone would be to reach 500 units of permanent housing for those living with HIV/AIDS by 2016.

Cynics will shake their heads. However, if we stay committed and with the support of donors, Housing Works will continue to grow stronger every year and more capable of reshaping the world. Meet our community and see the difference housing has made in their lives.

Photography left to right:
Dan Fleischman, Alfred A.
Eatman & Garrison McNeil
Associated Architects



Sonja speaks out for other clients

Housing Works' Fiery New Advocate

TEN YEARS AGO, Sonja was living a comfortable middle-class life. Then she lost her job and apartment, becoming homeless. Depressed, Sonja turned to substance use. In 2008, she found Housing Works and enrolled in several of our mental and health services.

She stopped substance use, found a community and now volunteers at the front desk for our Crosby Street location.

"When I was homeless, I felt lost, as a human being. It's really an uncomfortable reality and it's so easy to get used to being homeless, and to fall more and more into

Text and Photograph by
Julie Turkewitz

despair. It becomes very taxing emotionally, you can't take your medications, and it's very difficult to have a timeline, or do anything. It's like your living moment to moment, there's no planning. It's not a way to live, it's not a way to live healthily, mentally, emotionally, you become very sick. It can break the strongest person. I felt like I was in the abyss. It's not just being homeless, it becomes a cycle of negative living.

Honestly, I went to Housing Works for selfish reasons, and just started to give back. Housing Works has really helped me become human again. Housing Works saved my life."



As many as 70% of all persons living with HIV/AIDS report a lifetime experience of homelessness or housing instability.⁹

HIV IS A MAJOR RISK FACTOR FOR HOMELESSNESS

People living with HIV/AIDS are extremely vulnerable to homelessness due to discrimination, loss of income, the breakup of relationships and other factors.

Housing is the greatest a need of people living with HIV. "The available research makes it readily

apparent that access to adequate housing profoundly affects the health of Americans who are at-risk for or living with HIV." ⁵

At any given time, up to 16% of all persons with HIV are homeless – sleeping in shelters, on the street, or in a car.⁶

HOUSING IS A MATTER OF LIFE OR DEATH FOR PERSONS WITH HIV/AIDS

Housing status is one of the strongest predictors of health outcomes for PLWHA after controlling for other factors such as drug use, mental health and receipt of medical and social services.⁷

PLWA in San Francisco who were homeless at the time of AIDS diagnosis were significantly more

likely to die over a 5-year period, after controlling for medical status and other individual characteristics, and obtaining supportive housing was independently associated with an 80% reduction in mortality.⁸

Research and Text
by Ginny Shubert
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⁵ Aldale, A. Lee, G., Abramson, D., Messeri, P. & Siegler, A. (2007). Housing need, housing assistance, and connection to medical care. *AIDS & Behavior*, 11(6)/Supp 2: S101-S105. Culhane, D. (2009). The Co-Occurrence of AIDS and Homelessness. Paper presented at the First Housing and HIV/AIDS Research Summit, Atlanta, Georgia. ⁶ Wolitski, R., Kidder, D. & Fenton, F. (2007). HIV, homelessness, and public health: Critical issues and a call for increased action. *AIDS & Behavior*, 11(6)/Supp 2: S167-S171. ⁷ Culhane, D., 2009. ⁸ Kidder, D.P., Wolitski, R.J., Campsmith, M.L., Nakamura, G.V. (2007). Health status, health care use, medication use, and medication adherence in homeless and housed people living with HIV/AIDS. *American Journal of Public Health* 97(12): 2238-2245. ⁹ Schwarcz, S.K., Hsu, L.C., Vittinghoff, E., Wu, A., Bamberger, J.D. and Katz, M.H. (2009). Impact of housing in the survival of people with AIDS. *BMC Public Health*, 9: 220. Full text available electronically at: <http://www.biomedcentral.com/1471-2458/9/220>.

The Key is Community



Vargas sees a photo of his daughter for the first time in 12 years

After a Decade Apart, a Dad Tells His Daughter He Has HIV

Text and Photograph by Julie Turkewitz

ONCE IN A WHILE, a story made for a movie plays out in the real world. Euclides Vargas, 55, is a former disco dance instructor and speakeasy owner living in Brooklyn. He has HIV, lymphatic cancer and heart problems. He hadn't seen his only daughter in 12 years and thought he would likely pass away without doing so.

Loretta Cabral, 36, is a waitress living in Hollywood, Florida, nearly 1,300 miles south. She hadn't seen her father in 12 years and suspected she never would again. But earlier this summer, she sat down, punched his name into Google, and did yet another search for her dad.

This time a Housing Works URL popped up.

Vargas is a client at our dental clinic. Earlier this year, a Housing Works photographer snapped his picture for an advertisement and posted it on housingworks.org.

"I thought, 'That face staring back at me, those eyes are mine.'" Cabral recalled. "And I said, 'If anybody could be sick like that and be smiling like that, it's got to be my dad.'"

She sent an email to Housing Works, and a staffer phoned Vargas. Within days, her dad's voice was on her answering machine.

When Vargas made that first call, "I was scared," he said. "Very scared." Diagnosed with HIV in 2008, he didn't

know if Loretta knew or how she might react.

"A couple of days after we first spoke, he called me and told me," said Cabral. "And I said, 'Dad, I just want you to know it doesn't even matter.'... Actually, it makes me so proud of him. Nobody wants their parent to be sick, but this just makes me so proud. I said, 'You're not dying of something, you're living with an illness.'"

What followed was the reunion of two rolling stones who matured and have begun to roll together.

Vargas met Cabral's mother while he was in the Navy in the 1970s. The relationship was short-lived, and years passed before Cabral's mom revealed that Vargas had a daughter. Since, Vargas and Cabral have had contact only a few times. Cabral sought him out first by telephone, when she was around 12 years old. Later, in her 20s, she showed up on his doorstep in Williamsburg. The last time the two met, Vargas left her at a hotel in Manhattan where she was staying for a work trip.

Both changed addresses and phone numbers several times.

This time, life is different for both. Cabral kicked a substance use habit, entered a long-term relationship, and left a career as a stripper.

Vargas, meanwhile, has survived—barely—a number of sobering experiences, including terrifying

A Mother's Struggle & Strength

Text and Photograph by Julie Turkewitz

SUBSTANCE USE TOOK everything away from Housing Works client Aileen Vega—she lost custody of her child and spent 18 months in prison. But now she has one goal: achieve housing, health and job stability in order to reunite with her young son.

Thanks to specialists in our Re-entry to Care program, Vega lives in transitional housing in Brooklyn;

engages in harm reduction services, attends support groups and receives acupuncture, care management and Primary Care at Housing Works.

"I love coming to the Downtown Health Center and seeing other mothers with their children. Someday that will be me. I will get there. I know it's going to be tough," said Vega. "I want my son to be part of the Housing Works family."



Aileen, at our Case Management clinic in 2010



AIDS-related illnesses, several rounds of chemotherapy, and humbling encounters with poverty.

In the past month, the two have spent hours speaking on the phone, usually late at night after Cabral leaves her shift at the restaurant.

Vargas made the first payment on a plane ticket to visit his daughter later this year. And Cabral created a Facebook account for her Dad so that he can follow her virtually.

His password? "Survival."



Cornell rallies for AIDS housing

Cornell Duke Fights for Fair Housing On World AIDS Day

Text and Photograph by Julie Turkewitz

ON DEC. 1, 2011, Housing Works client Cornell Duke joined his peers, as well as hundreds of other New Yorkers, at a World AIDS Day march, to protest deep cuts in housing and HIV-related funding implemented by the Bloomberg administration. The march was followed by a civil disobedience action that led to the arrest of eight AIDS activists, seven of them from Housing Works..

"It's too many people who are homeless, and we have no way to better ourselves with these cuts that are being made."

Duke knows first hand what this year's cuts—over \$13 million for HIV/AIDS housing and services—means for people with HIV who are struggling to make ends meet. Duke lives at the Housing Works East New York

Residence, but he and his girlfriend, who is also HIV-positive, would like to find permanent housing. Duke has been afraid to look, though. He faces potential discrimination. Many brokers landlords won't consider a HASA client due to cuts in brokers' fee and security deposit assistance in the program.

But Duke has turned his fear into activism.

"I'm a poor man, an AIDS victim, and there are a lot of homeless victims to it," he said. "Mayor Bloomberg needs to stop making these cuts, and help us get back on track."

Cornell Duke and the Housing Works Advocacy team will continue to their relentless advocacy for fully funding all services for people with HIV.



Richard and Nelson, fight for others



Dr. Archie Jao, and Olicio, outside East New York House and Health Center

People with HIV/AIDS who have stable housing are much more likely to access health services, attend primary care visits, receive ongoing care and receive care that meets clinical practice standards.¹¹

© Wolitski, et al., 2010. © Wolitski, et al., 2010. © Aidala, et al., 2007.

A Couple Fights AIDS, Eviction—and Helps Others

Text and Photograph by Julie Turkewitz

HOUSING WORKS CLIENTS Richard Huddleston and Nelson Alston were nearly evicted this year as a result of bureaucratic errors at the HIV/AIDS Services Administration (HASA).

With help from Housing Works' legal team, the two fought back and no longer are in danger of losing their home. Now they're working to make sure others don't suffer at the hands of HASA: Last week they served as spokespeople at a large protest outside the administration's Manhattan office, urging the agency's boss, Robert Doar, to address HASA's chronic problems.

"The only way to keep the stress off is to keep advocating for change," said Alston.

For years, poor New Yorkers with AIDS have struggled to get help from HASA, charged with linking them to benefits such as food stamps and rental assistance. Thursday's rally kicked off a longterm Housing Works campaign to push for change at the agency.

The campaign is already showing signs of success. HASA Deputy Commissioner Jacqueline Dudley agreed to meet with Housing Works clients to hear their concerns.

"We need HASA 100 percent," said Huddleston. "To Robert Doar I would say, 'Take a closer look. Things are not as hunky-dory as you say they are.'"

Housing Works Builds Housing

HOUSING WORKS OPERATES over 170 units of permanent and transitional housing, complemented by legal aid, medical care, counseling, harm reduction, and a job training program for homeless individuals and families living with HIV/AIDS in New York City. We emerged out of

the direct-action group ACT UP (AIDS Coalition to Unleash Power) twenty-two years ago. But our model is even further rooted in social movement history—the supportive housing movement of the 1960s that sought to create affordable housing coupled with medical and social services.

Throughout its history, we have weathered periods of intense political hostility or indifference by offering care and gracious hospitality to communities in need. In 1993 Housing Works introduced *The Key*, a newsletter that boldly proclaimed, “*Housing is the key to eliminating*

homelessness and ending the neglect of people with HIV.” Today, Housing Works views housing as the key to end AIDS—it unlocks opportunities. It’s not over yet: we propose to create another 330 units for homeless individuals by 2016.

Housing Works

- 🏗️ Construction event
- 🔑 Housing program

Supportive Housing Movement

- 🇺🇸 United States
- 🗽 New York State
- 🗽 New York City

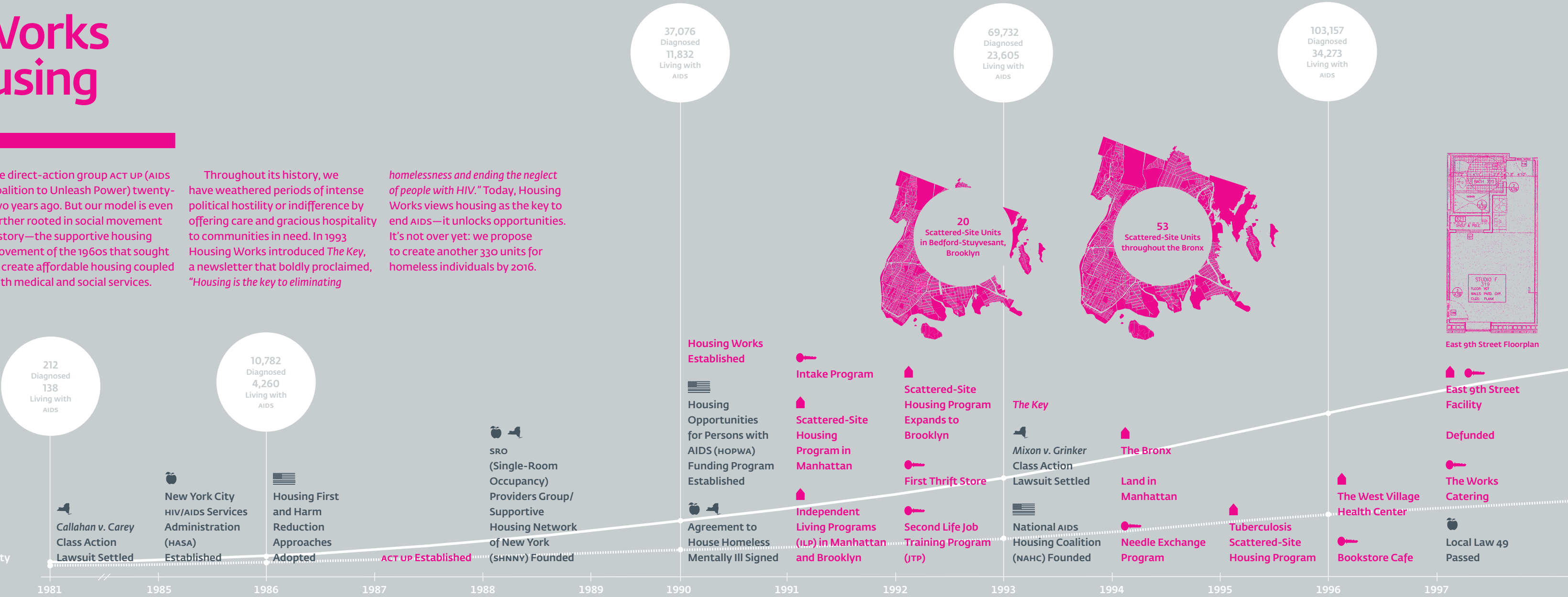
AIDS Diagnoses and Persons

Living with HIV/AIDS by Year in New York City

- New York City AIDS Diagnoses
- ⋯ Persons Living with AIDS
- ⋯⋯ Persons Living with HIV/AIDS

Source: New York City HIV/AIDS

Annual Surveillance Statistics, New York City Department of Health and Mental Hygiene



1950s–1980s

Supportive Housing Movement Emerges

The supportive housing movement emerged to address increasing homelessness and the inadequate and substandard housing available to vulnerable populations in the United States. Combining independent, affordable housing with social and medical services, supportive housing would become the model system for Housing Works.

Housing options available to at-risk populations have evolved over time, following medical breakthroughs, economic and political changes, and shifts in public opinion on what constitute acceptable living standards. The availability in the 1950s of psychotropic drugs led to the deinstitutionalization of people with psychiatric disorders. This shift, along with the closing of single-room occupancy hotels (SRO) and other affordable housing options, the emergence of HIV/AIDS, and a decrease in government benefits, led to a surge in homelessness across the United States in the 1980s. As policy makers in the late 1980s began to see value in the supportive housing movement, they established government funding programs to allow agencies like Housing Works to develop and operate.

Text by Gavin Browning and Karen Kubey
Graphic Design done in collaboration with MTRWFF and Housing Works

1981

Callahan v. Carey Class Action Lawsuit Settled

This class action lawsuit established the legal right to emergency shelter for New York State's homeless. Following this ruling, New York City policy specifies that homeless persons with HIV/AIDS must be given non-emergency housing within 24 hours of the client's request.

1985

New York City HIV/AIDS Services Administration (HASA) Established This New York City established HASA, formerly the Division of AIDS Services and Income Support, in response to the AIDS epidemic, to provide a range of services to low-income people living with HIV/AIDS. HASA rental vouchers allow homeless, very low-income New Yorkers with AIDS to enter private, transitional or permanent supportive housing, such as that operated by Housing Works, and bypass the general shelter system. These vouchers are not available for people with HIV. HASA currently makes thousands of emergency housing placements a month.

1986 Housing First and Harm Reduction Approaches Adopted Traditional homeless shelters often required people to be alcohol and drug free to be eligible for housing. In reaction to these policies, which effectively screened out most of the chronically homeless, early HIV/AIDS advocates developed complementary “housing first” and

“harm reduction” approaches to address the interrelated epidemics of HIV/AIDS, drug use, and infectious diseases. “Housing first” makes shelter an immediate goal, with services following, while “harm reduction” strategies, such as needle exchanges, aim to reduce harm to individual and community health, without requiring abstinence. These strategies became guiding principles for Housing Works and would later be adopted as government policy.

1987

ACT UP The direct action group ACT UP (AIDS Coalition to Unleash Power) was founded at a meeting at the Gay and Lesbian Center in Manhattan out of anger at the governmental indifference to the AIDS epidemic.

1988

SRO (Single-Room Occupancy) Providers Group/Supportive Housing Network of New York (SHNNY) Founded This coalition of supportive housing providers formed around shared issues related to funding, tenant-engagement, and building management of supportive housing in New York City. Housing Works would later join this network, known since 1996 as the Supportive Housing Network of New York (SHNNY), when the organization expanded to New York State. The network is now a powerful advocacy group comprising over 200 nonprofit supportive housing developers and providers.

1990

Housing Works Fewer than 350 units of housing existed for the estimated 13,000 homeless people living with HIV/AIDS in New York City. In response, members of the ACT UP housing committee Keith D. Cylar, Charles King, Eric Sawyer, and Virginia Shubert founded Housing Works with the slogan “Demand Housing for Homeless People Living with AIDS & HIV.”

Housing Opportunities for Persons with AIDS (HOPWA) Funding Program Established The United States Department of Housing and Urban Development (HUD) established the HOPWA program to fund housing, social services, program planning, and development costs for housing for people living with AIDS. Housing Works used this funding in the development of its Women's Transitional Housing Program.

Agreement to House Homeless Mentally Ill Signed This joint effort of New York State and New York City created 3,615 units of permanent and transitional housing for homeless mentally ill people in New York City.

1991

Intake Program Located at 130 Crosby Street in Manhattan, the Intake Program was the first step toward moving homeless people with HIV/AIDS off the streets—featuring a triage team, education and prevention

programs, and referrals for new Housing Works clients to one of three avenues for securing housing during the organization's early years: Scattered-Site Housing Program, Independent Living Program, or referral to other non-governmental agencies in New York City.

Scattered-Site Housing Program in Manhattan Housing Works leased apartments in different buildings—as opposed to within one centralized building—for clients who met the clinical diagnosis of AIDS as defined by the Center for Disease Control in Manhattan's Lower East Side, a neighborhood highly affected by the epidemic.

Independent Living Programs (ILP) in Manhattan and Brooklyn The first program in New York City to house and provide case-management services to people who did not meet the clinical diagnosis of AIDS as defined by the Center for Disease Control. In the early 1990s, Housing Works would lease over 25 apartments from private landlords for clients.

1992

Scattered-Site Housing Program Expands to Brooklyn Housing Works followed the geography of the epidemic by leasing 20 apartments in the Bedford-Stuyvesant section of Brooklyn.

First Thrift Store Deemed an “upscale boutique” by the New York Times, the thrift store at 136 West 18th Street was the organization's single largest source

of private income. By 2012, Housing Works had twelve thrift shops that earned approximately \$14 million a year.

Second Life Job Training Program (TJP) “[I am a] mother of two beautiful children and a proud graduate of Housing Works' Job Training Program, better known as ‘Second Life.’ After eight long months, I finally did it! What did it take? Hard work, determination, and a great support system made up of the director, my job counselor, instructors, case manager, supervisor and great peers.” —Rosa Gonzalez, *The Key*, Winter 1995 Housing Works transitioned hundreds of clients into staff in the 1990s through classes in maintenance and repair, math, clerical skills, communications and self-esteem, harm reduction, computer technology, GED, and English as a Second Language.

1993

The Key “The key to eliminating homelessness and ending the neglect of people with HIV is in your hands,” contended the inaugural issue of Housing Works quarterly newsletter *The Key*.

Mixon v. Grinker Class Action Lawsuit Settled Filed in 1988 to address the risk homeless persons with HIV-related immune suppression faced of contracting infectious illnesses in crowded New York City shelters, the 1993 ruling established that housing must meet “minimum standards of safety, and decency.”

The case set a precedent for people with HIV/AIDS to bypass the shelter system, entering directly into housing that meets their medical needs. *Mixon v. Grinker* provided an impetus for the creation of Housing Works.

National AIDS Housing Coalition (NAHC) Founded The Washington-based NAHC formed in order to join national and community-based organizations with individuals in providing advocacy, representation, and training around HIV/AIDS. Its vision statement mirrors that of Housing Works, a founding member: “The National AIDS Housing Coalition envisions an international community where housing is a human right and HIV disease ends.”

1994

The Bronx Now with 60 apartments in Brooklyn, Housing Works leased 53 apartments in the Bronx—34 for its Scattered-Site Housing Program, and 19 for its Independent Living Program.

Land in Manhattan Housing Works purchased land at 743–749 East 9th Street in Manhattan for a new facility, noting in their Annual Report that the task of moving people off the street “grows harder every day as a result of the City's policies of issuing vouchers instead of security deposits and the City's inability to make timely rental payments, not to mention the absolute havoc the massive budget cuts have wreaked on the Human Resources Administration.”

Needle Exchange Program “We began the needle exchange program at Housing Works as part of implementing a philosophy of harm reduction. Instead of exercising negative judgment about drug users and barring them from services, we work with them in a way that allows them to set their own pace. Needle exchange is a concrete manifestation of our belief that clients can be responsible, can act to reduce the spread of HIV, and can move forward into drug treatment when they're ready.” —Keith D. Cylar, *The Key*, Spring 1994

1995

Tuberculosis Scattered-Site Housing Program Housing Works leased 25 apartments and established relationships with Bellevue and St. Vincent's Hospitals as part of an agency-wide effort to address the needs of homeless individuals living with HIV/AIDS and tuberculosis when discharged from hospitals.

1996

The West Village Health Center Housing Works rented and renovated this facility at 320 West 13th Street to offer primary care, case management, and other services to clients.

Bookstore Cafe

“Imagine sipping cappuccino in a pleasant cafe while curled up on a sofa reading a book—and knowing it's all for a good cause. Such a setting will soon come to life as Housing Works opens its Used Book Cafe in the heart of SoHo at 128 Crosby Street,” announced the Fall/Winter



1995 issue of The Key. The store would be a “complete vindication from those naysayers who fear that service programs like those operated by Housing Works would have a negative impact on the presence of the neighborhood.”

1997

East 9th Street Facility
Housing Works’ first capital project, the 19,000 square-foot housing and health care facility features 36 units for single adults living with HIV/AIDS, with a cafeteria and day-treatment center.

Defunded
Citing inaccurate accounting, Mayor Rudolph Giuliani withdrew \$6.5 million worth of New York City government contracts to Housing Works.

The Works Catering
Housing Works established The Works, a commercial catering company trains and hires clients to cater events at the Bookstore Cafe and beyond.

Local Law 49 Passed ^{ⓄⓄ}
New York City Local Law 49 requires permanent and temporary housing for homeless people to be “medically appropriate,” and goes beyond *Mixon v. Grinker* to codify HASA’s existence. Addressing populations with HIV/AIDS, housing must be “suitable for persons with severely compromised immune systems” and including, but not limited to, “individual refrigerated food and medicine storage and adequate bathroom facilities” with locking doors. Housing Works facilities far exceed these requirements.

New York City AIDS Housing Network (NYCAHN) Founded [Ⓞ]
Supported by a 1998 grant from the New York City AIDS Fund, NYCAHN formed to address HIV/AIDS in the context of “race, gender, and economic inequalities.” Housing

Works was instrumental in the founding of NYCAHN, which in 2010 was renamed VOCAL-NY (Voices Of Community Activists & Leaders) to reflect the larger range of constituencies now represented by the organization.

1999

Housing Works Wins [Ⓞ]
US District Judge Allen Schwartz found that city officials acted out of “retaliatory intent” against Housing Works for its criticism of Mayor Giuliani’s policies on HIV and AIDS.

Agreement to House Homeless Mentally Ill III Signed [Ⓞ]
More modest than the first New York/New York agreement, this effort committed government funding for 1,500 units of permanent supportive housing. New York City and State split construction costs evenly, with New York State funding services and operating costs.

2001

Women’s Transitional Housing Program (WTHP)
WTHP helps single women living with HIV/AIDS who have been released from the correctional system within the past 24 hours.

2002

Gotham Assets
Housing Works established Gotham Assets, a commercial property development and management company that offers job training and placement for Housing Works clients.

The New Housing Marketplace Presented [Ⓞ]
Making commitments to fund affordable and supportive housing and services, Mayor Michael Bloomberg’s plan aimed to reduce homelessness by two-thirds by 2009. The plan included many of the strategies proposed in SHNNY’s Blueprint to End Homelessness in New York City, but advocates for the homeless have criticized it for not being adequately robust.

2004

Transgender Transitional Housing Program (TTHP)
Housing Works established ten initial scattered-site apartments for transgender and gender-variant individuals living with HIV/AIDS in the East New York, Bushwick, Bedford-Stuyvesant, Crown Heights, and East Flatbush sections of Brooklyn. The organization would establish 20 additional TTHP apartments in the following years.

2005

2605—2609 Pitkin Avenue
Housing Works renovated and opened this 4,000 square-foot townhouse in the East New York section of Brooklyn in 2005.

New York City Settles [Ⓞ]
In response to a \$4.8 million settlement with New York City in Housing Works’ favor, Housing Works CEO Charles King said, “I’m not sure people appreciate how much the Giuliani administration attempted to silence dissenting voices, in particular in communities

that relied on city funds to service needy people...I think Housing Works was used as an example to let other organizations know what would happen to them if they advocated on behalf of their clients.”

Agreement to House Homeless Mentally Ill III Signed ^{ⓄⓄ}
The third of its kind, this New York City/New York State agreement included the creation of 9,000 new units of supportive housing over the next ten years, setting aside specific funding for housing people with AIDS. NY/NY III provided operating funding for Housing Works’ Stand Up Harlem House and its new Jefferson Avenue Residence in Brooklyn.

2006

The Keith D. Cylar House Health Center
The East 9th Street Facility—deemed a “special project of national significance” by the US Department of Housing and Urban Development—was renamed in honor of activist and Housing Works founder Keith D. Cylar.

Downtown Brooklyn Health Center
Housing Works renovated this facility at 57 Willoughby Street to offer medical and dental care, job training, and other services for clients.

Staten Island Housing Program (SIHP)
Housing Works established 20 scattered-site apartments for single adults living with HIV/AIDS in the St. George section of Staten Island.

2008

Stand Up Harlem House
Housing Works renovated three Harlem brownstones that were originally built in the 1880s. The 6,800 square-foot brownstone at 143–145 West 130th Street features two two-bedroom and two three-bedroom units for families with at least one parent living with HIV/AIDS.

2009

Women’s Transitional Housing Program (WTHP)
WTHP finds a home: a renovated 6,720 square-foot townhouse at 454 Lexington Avenue in the Bedford-Stuyvesant section of Brooklyn, featuring 20 units for single women living with HIV/AIDS who have been released from the correctional system within the past 24 hours.

2010

The Claremont Residence
Housing Works acquired an established multifamily, rehabilitated 19,260 square foot property at 415 Claremont Parkway in the Bronx. Although not developed for individuals living with HIV/AIDS specifically, The Claremont Residence’s 18 two-bedroom units will be allocated to homeless families living with HIV/AIDS as the units become available.

2012

East New York Expands [Ⓞ]
With \$541,000 in federal funds from the Affordable Care Act, the expanded East New York Community Health Care Facility will “be able to see more than twice as many primary-care patients a year—about 2,600—approximately 80 percent of whom are homeless.”

874 Jefferson Avenue
Housing Works will renovate and open this 6,100 square foot townhouse in the Bedford-Stuyvesant section of Brooklyn in by September 2012. It will feature twelve units for single adults living with HIV/AIDS.

Equal Access to Housing in HUD Programs, Regardless of Sexual Orientation or Gender Identity Established ^{ⓄⓄ}
Following evidence suggesting that lesbian, gay, bisexual, and transgender individuals were being excluded from private housing, the US Department of Housing and Urban Development (HUD) implemented policy to “ensure that its core programs are open to all eligible individuals and families regardless of sexual orientation, gender identity, or marital status.”

HIV/AIDS Services Administration (HASA) Caseload [Ⓞ]
As of February 2012, HASA’s caseload numbered just over 32,000 homeless and very low-income New Yorkers with AIDS. Critics of HASA, including Housing Works, believe that HASA has not done enough to address the needs

of homeless and very low-income people with HIV/AIDS in New York City. Next Steps

330 Housing Works Units
Housing Works plans to begin development on 330 additional units of housing in the next five years, bringing the organization’s total to 500.

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The Key is Hope

It's a cruel and inhumane reality that American citizens are forced to choose between spending their money on housing or medication that will keep them alive.

But, there is hope. Housing Works currently operates eight housing programs throughout Manhattan, Brooklyn, the Bronx, and Staten Island for people living with HIV/AIDS who would otherwise not have a home. Our plan is to begin development on 330 additional units of housing in the next five years, bringing the organization's total to 500.

I invite you to take the next step and further help individuals who face their battle against HIV/AIDS and homelessness with tremendous dignity every day.

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—Charles King, President & CEO for Housing Works