Dear Ryan White HIV/AIDS Program (RWHAP) and Housing Opportunity for Persons With AIDS (HOPWA) Colleagues:

The U.S. Department of Housing and Urban Development’s Office of Special Needs Assistance Programs (SNAPS) Office of HIV/AIDS Housing (OHH) and the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB) are pleased to support and encourage recipient efforts to integrate and utilize the Housing Opportunities for Persons With AIDS (HOPWA) and Ryan White HIV AIDS Program (RWHAP) data sets to improve HIV and housing outcomes for clients accessing services through these programs.

In the United States, it is estimated that more than 1.1 million people are infected with HIV.\(^1\) Data from studies indicate that PLWH are more likely to experience housing instability and homelessness than the general population; at least half of Americans living with HIV experience homelessness or housing instability following diagnosis.\(^2\) Significant disparities have been identified in research studies in HIV treatment access, retention and health outcomes between PLWH who are homeless and unstably housed and those who are stably housed.\(^3\)

Given the negative effect of unstable housing on HIV health care outcomes, it is important for grant recipients/subrecipients and project sponsors to utilize data to facilitate efficient and data-driven activities that coordinate health care and housing service delivery programs. To this end, both HAB and OHH encourage grant recipients to create data sharing agreements and integrate data systems to help identify and serve PLWH most at-risk for unstable housing and poor HIV health care outcomes.

Specifically, HAB and OHH encourage RWHAP and HOPWA grant recipients to develop formal agreements to support data sharing processes and systems. These agreements and systems

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may include access to aggregate and/or client-level data needed to improve the coordination of services for PLWH who are unstably housed, or at-risk for, or experiencing homelessness. In addition, the data sharing agreement must detail each agency’s role in protecting client confidentiality and in securing data in compliance with program specific requirements. Many RWHAP grant recipients already employ such data sharing agreements to create Data to Care strategies that use HIV surveillance data to identify HIV-diagnosed individuals not in care and then link them to care. For examples, please visit the Centers for Disease Control and Prevention’s Data to Care website at: https://effectiveinterventions.cdc.gov/en/HighImpactPrevention/PublicHealthStrategies/DatatoCare.aspx

While both HAB and OHH recognize the challenges grant recipients, subrecipients, and project sponsors face in integrating data systems, a more integrated data approach creates the ability to better coordinate services and evaluate program effectiveness as well as leading to a variety of improvements, including:

• Improved quality and efficiency of housing and HIV care and treatment services for PLWH;
• Identification of service gaps and tracking of client outcomes;
• Facilitated evaluation of program effectiveness;
• Decreased duplication of data entry; and
• Improved information for resource planning and allocation.

To support costs associated with creating data sharing agreements and integrating data sets, HAB and OHH encourage eligible recipients within the context of program legislation to utilize program income and/or rebate revenue, as well as federal grant dollars. Both HAB and OHH are committed to collaborating with our partners and stakeholders to provide technical assistance for using data for decision making and service planning, data sharing, program evaluation, and data-driven service delivery. For available resources, please visit our technical assistance websites at www.careacttarget.org and https://www.hudexchange.info/. For program specific questions, please consult with your Project or Desk Officer.

We look forward to our continued work with all our partners and stakeholders to improve health outcomes for PLWH at-risk for or experiencing homelessness.

Sincerely,

/Laura W. Cheever/  /Rita Harcrow Flegel/
Laura W. Cheever, MD, ScM  Rita Harcrow Flegel
Associate Administrator  Director
HIV/AIDS Bureau  Office of HIV/AIDS Housing