

# A PROVINCIAL OVERVIEW OF COMMUNITY- BASED ORGANIZATIONAL SUPPORTS FOR OLDER ADULTS LIVING WITH HIV

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## OVERVIEW

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The goal of this brief report is to provide an overview of community-based programs and services available for older adults living with HIV across the province of British Columbia (BC). This report is intended to be read alongside its partner document: *The BC Home and Community Care System and Older Adults Living with HIV: A 2018 environmental scan of governance, policies and funding of the home and community care system as they affect individuals aging with HIV*. The partner document describes formal support services throughout the home and community care (HCC) system, whereas this provincial overview outlines the provision of services by Community-Based Organizations (CBOs) that may fill in gaps left by the formal support system. The objective of both these reports is to identify whether HCC services are being supplemented by programs provided by CBOs, to fully capture services available to older adults living with HIV in BC.

Adults over 50 now comprise half the population of people living with HIV/AIDS in BC, due in part to the growing number of older long-term survivors (1). For the purposes of this report, the term "older adult living with HIV" will refer to people living with HIV who are over the age of 50. Although this definition varies from the typical use of the term, the age of 50 is used when referencing older adults living with HIV (1).

## GENERATING THE REPORT

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Participating organizations were identified by a Peer Research Associate and through an online scan. Community-based organizations (CBOs) were invited to participate in a survey if their mandate included providing support to people living with HIV or if they offered programs tailored to people living with HIV. Some organizations from rural and remote communities were invited to participate despite not meeting these criteria; this exception was made to reflect the integrated nature of many services in rural and remote communities.

Each organization was asked to provide a description of the services they provide, in order to develop a comprehensive view of provincial service availability. Overall, thirty CBOs across BC's five regional health authorities participated in a brief survey to describe the HIV-related services they provide and the challenges that seniors face in their communities. All branches of parent organizations were invited to participate, to better capture the availability of services in different regions of BC. The services described in this report were self-reported by participating organizations and were in no way verified by the authors.

# KEY FINDINGS ON PROVINCIAL SERVICE AVAILABILITY

**Most Offered**

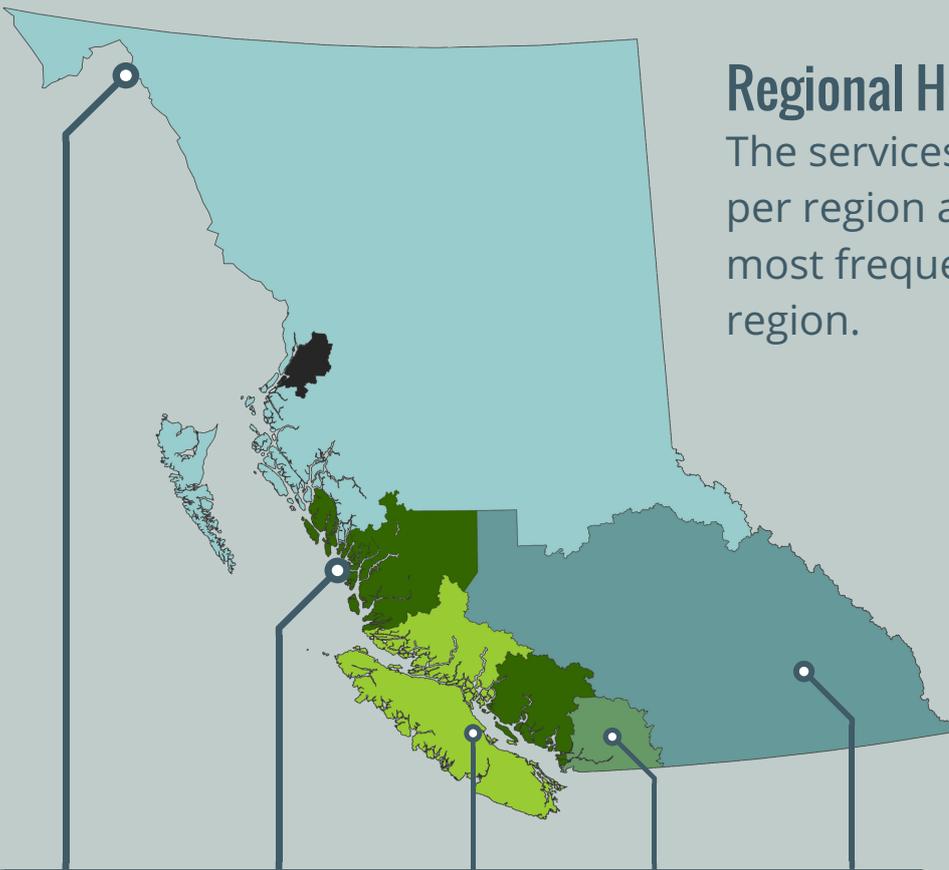
Food Security Assistance (90%)  
 Support Services (83%)  
 Outreach Services (80%)

**Least Offered**

Vocational Counselling (13%)  
 Financial Aid (27%)  
 Medical/Dental Services and  
 Alternative Therapy (33%)

## Regional Health Authorities

The services most readily available per region are not necessarily the most frequently used services in that region.



Northern	Coastal	Island	Fraser	Interior
<b>Services provided more frequently per region, compared to other regions</b>				
Medication Information and Education	Counselling and Volunteer Services	Transportation and Volunteer Services	Medical/Dental and Women-Only Services	Transportation

## CHALLENGES ACCESSING SERVICES

Organizations were asked what barriers they believe prevent seniors living with HIV from accessing services. The five challenges most often cited across BC were: isolation, housing, stigma, transportation and food insecurity. The infographic (Figure 1) below depicts which of these five challenges were most prevalent by region. This is to give readers an idea of where in the province certain issues are the most observed.

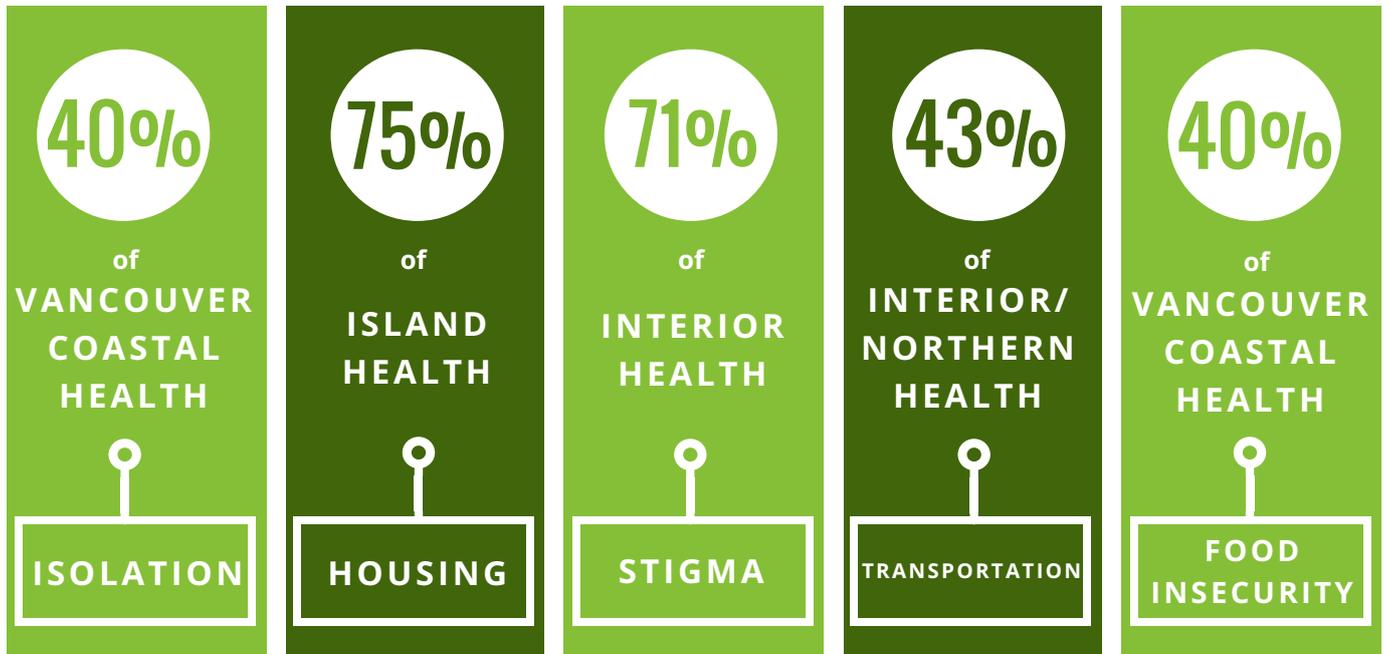


Figure 1. The percentage of organizations in a given health authority that reported a particular challenge in the greatest frequency. Organizations reported these challenges across health authorities; this graphic represents the regions where a particular challenge was found to be most prevalent.

### ISOLATION

The experience of stigma can contribute to social withdrawal, while enacted stigma (the experience of unfair treatment by others) or discrimination can take the form of social exclusion. Thirty percent of surveyed organizations identified isolation as a challenge for older adults living with HIV, and called for more opportunities for socialization and community connectedness. Both rural and urban organizations described this issue, suggesting that isolation is a province-wide issue.

### HOUSING

One third of all organizations identified attaining stable housing as a challenge; this was an issue mentioned across health regions, indicating a province-wide problem. Affordability and accessibility of housing, as well as the proximity of housing services (described below), were barriers to attaining appropriate housing. Certain regions face added issues such as high rental prices and a shortage of units in general, further contributing towards challenges in securing housing. This is the case for Island Health: a combination of a lack of housing services and the general unavailability of housing led to 75% of organizations in this health authority describing housing as an issue facing seniors living with HIV.

## **STIGMA**

Twenty-four percent of all organizations identified stigma, either external or internal, and discrimination as barriers to accessing services. Although stigma is experienced in all communities, rural and smaller communities were more likely to identify stigma as a barrier. Stigma in these communities prevents individuals from self-identifying as members of marginalized groups (e.g. PLHIV; gay, bisexual, and men who have sex with men (gbMSM)), and individuals may risk involuntarily self-identifying simply by accessing services. In an attempt to circumvent this barrier, some organizations in smaller communities reported offering integrated services. Reluctance to use services specific to stigmatized groups has resulted in reduced availability of these services in small communities.

## **TRANSPORTATION**

Twenty-three percent of organizations across the province identified transportation as a challenge to accessing services. Regional differences existed in the availability of transportation services: all respondents from the Interior and Island Health regions and 71% of Northern Health respondents offer transportation services, compared to 33% of Vancouver Coastal Health organizations. Even in areas which offered transportation, lack of accessible transportation remained a barrier to older adults living with HIV accessing services. This suggests that the accessibility, rather than the availability, of transportation services is the source of the challenge.

## **FOOD INSECURITY**

Lastly, 17% of all organizations identified food insecurity as a challenge for seniors living with HIV. Food security assistance was the most frequently offered service among organizations across health regions; however, clients cannot solely rely on food provisions from organizations. Although CBOs are working hard to provide what they can in the way of nutrition, other programs need to be made available to secure meals.

## DESCRIPTION OF SERVICES

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Services have been grouped into the following categories: physical health, mental health, drop-in, financial and employment, and community involvement. These descriptors are later used to summarize services offered by community-based organizations. The following are short descriptions of the services included in these categories.

### PHYSICAL HEALTH SERVICES

#### MEDICAL/DENTAL SERVICES

(e.g. nursing care, mammograms, HIV testing, etc.)

Medical care, which may be provided by an on-site nurse, is sometimes offered by organizations which have a dedicated clinic space. Nursing care generally involves medical services such as wound care or testing for infections and diseases (e.g. TB/hepatitis C or HIV).

Dental services are offered by some organizations in-house, which requires both financial and space-related resources. For the purposes of this survey, organizations that provide only referrals to dental services were not categorized as providing dental services.

#### MEDICATION INFORMATION and EDUCATION

(e.g. treatment outreach and/or information)

Medication information and education refers to organizations' dissemination of HIV medication information. This includes workshops, one-to-one counselling, educational materials, or other programs such as community forums. Educational materials may address both social and clinical aspects of care, including when and how to begin HIV treatment, what medications are available, potential ART side effects, and suggestions on how to best manage wellness (2).

## COMPLEMENTARY/ALTERNATIVE THERAPY

(e.g. Traditional Chinese Medicine, massage therapy, etc.)

These services involve non-allopathic treatment for HIV and HIV treatment side effects, along with treatment for other conditions. These include, but are not limited to, Traditional Chinese Medicine, massage therapies, aromatherapy, and acupuncture.

## FOOD SECURITY ASSISTANCE

(e.g. community kitchen, grocery programs, daily meals, etc.)

Food security programs vary greatly in the products provided and methods of distribution, which creates challenges for capturing the breadth of services available. Programs may provide prepared meals (either at a central location or delivered to residences), provide groceries or grocery vouchers, or support individuals in developing meal planning and food preparation skills (as is the case with community kitchen).

## MENTAL HEALTH SERVICES

### SUPPORT SERVICES

(e.g. peer navigators, case managers, advocates, etc.)

This broad category encompasses services that provide people living with HIV (PLHIV) the connections to maintain a healthy life. Included in this category are peer support and navigation services, which involve PLHIV using their lived experience to enhance clients' abilities to holistically manage their health and challenges related to HIV. Peer navigators may also provide educational materials and outreach services, to support clients in accessing health related services when the processes for doing so are not transparent.

Case managers work closely with clients to assess their unique needs and identify individualized supports, such as housing assistance, and mental health and health care services. An advocate also works alongside clients, supporting them in informed decision-making and acting as a spokesperson for clients' self-identified best interests.

## **COUNSELLING/MENTAL HEALTH SERVICES**

**(e.g. art, recreational therapy, etc.)**

Counselling and mental health services include programs with the goal of increasing wellness either individually or via group therapy. Some organizations offer art therapy, intended to heal through creative expression and allowing learning self-worth and self-acceptance (3). Organizations may also offer recreational therapy, centred around the use of socialization and community integration as a form of support (4).

## **SUBSTANCE USE SUPPORT**

**(e.g. harm reduction, addiction services, etc.)**

Substance use support includes harm reduction, which can include supervised injection sites; the provision of clean, sterile supplies for safer drug injection and smoking; or condoms for safer sex (5). Substance use support includes services and counselling specifically for problematic substance use.

## **DROP-IN SERVICES**

### **PERSONAL CARE**

**(e.g. hair salon, clothing donation, etc.)**

This category encompasses services available for self-care and hygiene, such as grooming and aesthetic services, or clothing donations. An often-cited goal of personal care is to increase the self-esteem of clients, which contributes to overall wellness (6).

### **WOMEN-ONLY/SPECIFIC SERVICES**

Women-only services provide spaces available only to female-identifying clients. Some organizations offer meal programs, a grocery day or group sessions that are provided specifically to women in order to minimize barriers and ensure safety within the community.

### **CULTURALLY-SPECIFIC SERVICES**

Culturally-specific services are created by and for members of specific cultural communities. These services are designed to minimize barriers and provide culturally safe and appropriate services that may otherwise be unavailable.

## **FINANCIAL AND EMPLOYMENT SERVICES**

### **BENEFITS/FINANCIAL ASSISTANCE**

**(e.g. health fund)**

Financial and/or income assistance services refer to the distribution of small funds to eligible clients in times of unexpected financial instability. Monetary funds can aid with small expenses, costs that may arise unexpectedly, medication costs, or moving expenses.

Some organizations provide community health funds, to which clients can apply for reimbursement of medical-related expenses. The key difference between a community health fund and financial assistance is that a health fund offers reimbursement only for health-related costs, whereas the latter can be distributed (possibly as cash) for a variety of expenses.

For the purposes of this report, organizations offering financial assistance for transportation specific expenses (e.g. bus passes, gas, etc.) were categorized as providing transportation services, rather than financial assistance.

### **HOUSING ASSISTANCE/SUPPORTIVE HOUSING**

**(e.g. housing subsidies)**

Housing assistance includes the provision of portable subsidies or other forms of rental assistance, as well as case management or advocacy that results in the acquisition of stable housing. Referrals to BC Housing were not considered housing assistance.

Supportive housing refers to subsidized housing units offering a variety of on-site support, potentially including life skills training, substance use support, and other mental and physical health supports (7).

### **VOCATIONAL COUNSELLING**

Vocational counselling involves skills training or career preparation, such as resume writing or training for future employment (e.g. training for food-handling safety).

It should be noted that organizations that provide employment advocacy were categorized as providing support services, and not vocational counselling.

# COMMUNITY INVOLVEMENT

## VOLUNTEER OPPORTUNITIES

Volunteering provides clients opportunities to socialize, practice and develop personal skills, and establish community connections. Organizations providing volunteer opportunities for clients are included in this category. Some organizations also reported that volunteering can provide a form of skills training to clients; even where this was the case, volunteering was not categorized as vocational counselling.

## OUTREACH SERVICES

### (e.g. community outreach teams)

Community outreach teams comprise individuals or groups of individuals who provide a variety of services outside of an organization's dedicated space. The objective of these outreach services is to connect with individuals who experience barriers to accessing in-location services.

Examples of outreach services include, but are not limited to, food distribution, rapid HIV testing, and accompaniments to medical appointments and errands.

## TRANSPORTATION

### (e.g. bus tickets, private transport, etc.)

Transportation services involve various modes of transporting clients. These include the distribution of bus tickets and taxi vouchers, or private transport offered by the organization. As previously described, organizations providing financial assistance for transportation were included in this category.

# SUMMARY OF ORGANIZATIONS

## HIV/AIDS SPECIFIC ORGANIZATIONS

Organization	Location	Summary of Services Offered
<b>INTEGRATED SERVICES</b>		
<b>Coastal Health</b>		
AIDS Vancouver	Vancouver	Select physical health, mental health, drop-in, financial aid and community involvement services
Dr. Peter AIDS Foundation	Vancouver	Physical health, mental health, drop-in, housing subsidies/supportive housing, and volunteer services
The Heart of Richmond AIDS Society	Vancouver	Food security assistance, select mental health, financial aid, and select community involvement services
Vancouver Friends for Life	Vancouver	Select physical health, counselling, and volunteer services
<b>Fraser Health</b>		
A Loving Spoonful	Vancouver	Offers daily meals and snacks by delivery, including culturally specific foods
Fraser Region Aboriginal Friendship Centre (FRAFCA)	Surrey	Physical health, mental health, drop-in, select financial and employment, and community involvement services
Surrey Health Positive Haven	Surrey	Select physical health, select mental health, select drop-in, and select community involvement services
<b>Interior Health</b>		
ANKORS	Cranbrook	Food security assistance, select mental health, select drop-in, financial aid, and community involvement services
ASK Wellness Society	Kamloops	Select physical health, select mental health, select drop-in, and community involvement services
Living Positive Resource Centre	Kelowna	Select physical health, select mental health, housing subsidies/supportive housing, and community involvement services
<b>Island Health</b>		
AIDS Vancouver Island	Courtenay	Select physical health, mental health, housing subsidies/supportive housing, and community involvement services
AIDS Vancouver Island	Victoria	Select physical health, mental health, drop-in services, and community involvement services
Vancouver Island Persons Living with HIV/AIDS Society	Victoria	Select physical health, select mental health, women-specific, and community involvement services
<b>Northern Health</b>		
Positive Living North	Smithers	Select physical health, select mental health, culturally-specific, and select community involvement services
Positive Living North	Prince George	Select physical health, select mental health, select drop-in, and select community involvement services
<b>Provincial</b>		
Positive Living Society of BC	Vancouver	Physical health, counselling, drop-in services, financial aid, and community involvement services

## HOUSING SERVICES

### Provincial

McLaren Housing Society	Vancouver	Offers both supportive housing and subsidies
Wing's Housing Society	Vancouver	Offers both supportive housing and subsidies

## CULTURALLY-SPECIFIC SERVICES

### Interior Health

Rel8 Okanagan North	Vernon	Select physical health, support services, and community involvement services
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### Northern Health

Rel8 Cariboo North	Quesnel	Medication information and education, mental health, and outreach services
Positive Living North (Fire Pit Cultural Drop-In Centre)	Prince George	Select physical health, support services, drop-in, housing subsidies/supportive housing, and community involvement services

## INDIGENOUS SPECIFIC ORGANIZATIONS

Organization	Location	Summary of Services Offered
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### Northern Health

Carrier Sekani Family Services	Prince George	Select physical health, select drop-in, financial aid, and community involvement services
Dze L'Kant Friendship Centre	Houston	Select physical health, mental health, select drop-in, vocational counselling, and community involvement services
Quesnel Tillicum Society	Quesnel	Physical health, mental health, drop-in, and community involvement services

## OTHER

Organization	Location	Summary of Services Offered
<b>Coastal Health</b>		
Downtown Eastside Women's Centre	Vancouver	Primarily offers food distribution, mental health, drop-in, select financial and employment, and community involvement services for women living in the Downtown Eastside
<b>Fraser Health</b>		
Purpose Society	Burnaby	Select physical health, mental health, drop-in, housing subsidies/supportive housing, and community involvement services
<b>Interior Health</b>		
North Okanagan Youth and Family Services Society	Vernon	Select physical health, select mental health, select drop-in, and select community involvement services
<b>Island Health</b>		
SOLID Outreach	Victoria	Peer-run organization offering select physical health, select mental health, drop-in, financial aid, and community involvement services
<b>Northern Health</b>		
Prince George New Hope Society	Prince George	Select physical health, select mental health, drop-in, vocational counselling, and volunteer services

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