



# NATIONAL HIV/AIDS HOUSING COALITION

## Fact Sheet: FY26 President's HUD Budget Impact on People living with HIV

Stable housing is one of the most essential factors to any individual's quality of life, but for people with HIV, stable housing is one of the strongest indicators of someone's health and is associated with a 20% increased likelihood of being virally suppressed. Individuals who are virally suppressed cannot transmit HIV and are able to live healthy, full lives. Therefore, stable housing prevents new HIV transmissions and restores people to health.

In the United States there are an estimated 1.2 million people with HIV and about 10% of these experience homelessness each year (over 120,000 people). In 2021, The CDC found 27% of people with HIV needed housing assistance and 40% received no supports.<sup>1</sup> The following year in 2022, the CDC Medical Monitoring Project reported that of in the past 12 months, 17% of PWH had been homeless or unstably housed.<sup>2</sup> For 18-24 year-olds with HIV, 26% had experienced homelessness and/or unstable housing. Different jurisdictions report different rates of homelessness among PWH, as noted in Table 8 (below).

The Housing Opportunities for Persons with HIV/AIDS (HOPWA) program provided housing to about 46,000 households (~ 64,500 individuals) in 2022, and the Ryan White program was able to provide housing assistance to about 24,000 people. Low-income people with HIV can also be provided assistance through an array of mainstream federally-funded programs, including the Housing Choice Voucher program (formerly Section 8), Homeless Continuum of Care (CoC) assistance, the Youth Housing Demonstration Program (YHDP), and more. For many community-based organizations who implement housing programs, they stack these layers of funding together to provide assistance. Many clients are unaware of which funding source(s) assist with their housing. The entire spectrum of HUD-funding, including capital sources like CDBG and HOME, allow cities, states, and organizations to make their programs stretch and remain effective. Unfortunately, in nearly every jurisdiction in America, there is a waiting list for Housing Choice Vouchers, HOPWA, and other HUD programs.

<sup>1</sup> Dasgupta, S., Beer, L., Lu, J. F., Weiser, J., Yuan, X., Nair, P., Banks, L., & Marcus, R. (2023). Needs for shelter or housing assistance among people with diagnosed HIV by jurisdiction: United States, 2015-2020. *AIDS (London, England)*, 37(3), 535–540. <https://doi.org/10.1097/QAD.0000000000003460>

<sup>2</sup> “Unstable housing or homelessness” defined as experiencing unstable housing (i.e., moving in with others due to financial issues, moving 2 or more times, or being evicted) or homelessness (living on the street, in a shelter, in a single-room-occupancy hotel, or in a car) at any time during the past 12 months.

In 2024, HUD estimated that 372,177 low-income people living with HIV in the United States are eligible for, but not currently accessing services under the HOPWA program.<sup>3</sup>

President Trump's FY26 Budget reduces the HUD budget by 44%, including a proposal to eliminate the HOPWA program. The justification for this decision reads as follows,

"The Budget does not provide funding for the Housing Opportunities for Persons With AIDS (HOPWA) program which funds housing and supportive service interventions for low-income people living with HIV/AIDS and their families. Individuals living with HIV/AIDS who are homeless or at-risk of homelessness may be served through the expanded emergency solutions grant program, which provides emergency, short, and medium-term housing assistance."<sup>4</sup>

This proposed solution is short-sighted and dangerous, as only 34% of HOPWA funding is emergency, short, or medium-term assistance. 64% of HOPWA households are in permanent supportive housing or served by the TBRA (tenant based rental assistance) program that has no time limit. Further, "expanded emergency solutions grant program" which the administration is proposing, is also supposed to absorb the following accounts: Continuum of Care, New Permanent Supportive Housing, Construction Awards (for populations under 2,500,000), Victims of Domestic Violence, National Homeless Data Analysis Project, Youth Homelessness Demo and Youth Homelessness System Improvement Grant and Technical Assistance. To fund this collapse of programs, the Administration is actually decreasing the total award by \$532 Million, \$27 Million from "Homeless Assistance – Emergency Solutions Grants" line items and \$505M from elimination of HOPWA.

HUD rental assistance programs, in totality, would be reduced by \$26.72 billion from the previous year and restructure housing programs into a State Rental Assistance Block Grant (SRABG) program, combining the HCV program (Section 8), Public Housing, Project-Based Rental Assistance (PBRA), Section 202 Housing for the Elderly (Section 202), and Section 811 Housing for Persons with Disabilities (Section 811) programs.

In summary, **NHAHC estimates that if this budget was implemented, well over 50,000 low-income people with HIV would lose housing assistance, adding to the existing 120,000 people with HIV who experience homelessness each year.** This would, without doubt, create a new crisis in the ongoing HIV epidemic.

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#### Table 8

<sup>3</sup> [https://archives.hud.gov/budget/fy25/2025\\_CJ\\_Program\\_-\\_HOPWA.pdf](https://archives.hud.gov/budget/fy25/2025_CJ_Program_-_HOPWA.pdf)

<sup>4</sup> [https://www.whitehouse.gov/wp-content/uploads/2025/05/appendix\\_fy2026.pdf](https://www.whitehouse.gov/wp-content/uploads/2025/05/appendix_fy2026.pdf)

Table 8. National HIV/AIDS Strategy indicators among adults with diagnosed HIV, by project area—Medical Monitoring Project, United States, 2021

Jurisdiction <sup>9</sup>	Good or better self-rated health <sup>a</sup>			Unmet needs for services from a mental health professional among those who needed services <sup>b</sup>			Unstable housing or homelessness <sup>c</sup>			Unemployment <sup>d</sup>			Hunger/food insecurity <sup>e</sup>			Median HIV stigma score <sup>f</sup>		
	n	row %	95% CI	n	row %	95% CI	n	row %	95% CI	n	row %	95% CI	n	row %	95% CI	n	score	95% CI
California	404	69.8	(65.4-74.2)	41	19.2	(12.7-25.7)	98	17.5	(13.7-21.3)	86	15.8	(12.2-19.4)	80	14.9	(11.3-18.1)	537	26.5	(23.9-29.0)
Chicago, IL	134	69.4	(62.3-76.5)	14	21.0	(10.8-31.1)	24	12.5	(7.3-17.8)	37	19.9	(13.5-26.3)	31	18.5	(11.9-25.0)	185	27.4	(22.6-32.2)
Delaware	136	70.3	(63.4-77.3)	22	23.8	(14.4-33.1)	30	16.3	(10.5-22.1)	25	12.9	(7.8-18.1)	27	13.4	(8.3-18.6)	192	28.9	(25.7-32.0)
Florida	168	69.0	(62.4-75.7)	24	31.3	(19.7-42.9)	44	18.7	(13.1-24.2)	16	7.6	(3.4-11.8)	43	18.0	(12.4-23.5)	226	28.9	(25.5-32.3)
Georgia	126	69.6	(62.0-75.3)	23	33.5	(22.1-44.8)	35	19.6	(13.7-25.6)	22	12.7	(7.6-17.8)	23	13.2	(8.1-18.4)	182	28.5	(25.1-31.9)
Houston, TX	115	68.6	(61.3-75.9)	18	32.1	(19.0-45.2)	43	25.8	(18.6-33.0)	24	13.9	(8.5-19.4)	26	15.2	(8.5-20.9)	155	24.3	(19.9-28.7)
Illinois	197	69.1	(63.3-74.9)	22	22.2	(13.3-31.0)	34	11.2	(7.4-15.0)	45	16.4	(11.5-21.2)	42	16.7	(11.6-21.8)	267	30.6	(26.6-34.7)
Indiana	81	59.0	(49.3-68.7)	16	36.0*	(20.2-51.9)	25	21.9	(15.2-30.5)	17	11.7	(6.1-17.4)	22	17.9	(10.3-25.5)	131	31.4	(26.3-36.5)
Los Angeles County, CA	119	67.9	(60.4-75.4)	12	17.5	(8.1-26.9)	38	23.3	(15.9-30.8)	34	19.7	(12.9-26.5)	26	12.5	(7.6-17.2)	172	25.3	(21.5-29.1)
Michigan	135	69.9	(61.3-78.5)	22	43.6*	(26.4-60.8)	36	23.1	(14.3-31.8)	29	18.0	(9.5-26.4)	32	20.9	(12.3-29.6)	184	37.2	(32.9-41.6)
Mississippi	103	58.4	(50.1-66.7)	—	—	—	37	21.4	(14.8-27.9)	29	15.9	(10.3-21.5)	20	12.5	(6.6-18.2)	164	27.9	(23.0-32.8)
New Jersey	152	65.2	(56.9-73.4)	17	18.2	(9.7-26.7)	28	12.5	(6.5-18.3)	33	11.7	(7.5-15.8)	35	16.6	(10.0-23.3)	204	31.6	(28.5-34.6)
New York	238	70.5	(65.0-76.0)	36	21.4	(14.4-28.5)	46	12.7	(8.7-16.7)	72	21.7	(16.6-26.8)	60	17.5	(12.8-22.1)	299	28.5	(25.8-31.3)
New York City, NY	173	69.5	(62.9-76.1)	30	22.5	(14.4-30.6)	36	13.6	(8.7-18.4)	61	24.2	(18.2-30.3)	47	19.8	(13.9-25.7)	217	28.9	(26.0-31.9)
North Carolina	124	67.8	(59.9-75.7)	18	35.5*	(20.5-50.5)	37	21.7	(14.8-28.5)	27	16.1	(10.0-22.2)	26	15.7	(9.5-22.0)	171	27.6	(23.8-31.4)
Oregon	129	70.2	(65.5-76.9)	25	33.3	(22.4-44.2)	20	11.3	(6.5-16.0)	29	17.1	(11.3-22.8)	27	14.9	(9.5-20.3)	177	23.3	(19.9-26.7)
Pennsylvania	126	64.3	(57.1-71.6)	35	41.1	(28.9-53.3)	37	17.1	(11.3-22.9)	31	15.9	(9.7-22.1)	40	20.6	(14.2-27.0)	197	26.7	(22.0-31.4)
Philadelphia, PA	81	58.6	(49.1-68.0)	22	39.3	(24.5-54.2)	26	20.4	(12.0-28.7)	22	17.8	(9.5-26.1)	28	24.6	(15.3-33.9)	136	28.4	(24.0-32.7)
Puerto Rico	120	63.6	(55.6-71.3)	—	—	—	22	12.6	(7.3-18.0)	15	7.2	(3.3-11.0)	30	16.8	(10.9-22.8)	174	33.1	(23.3-36.8)
San Francisco, CA	112	73.5	(68.3-80.8)	13	16.6	(7.8-25.3)	26	22.2	(13.0-31.3)	19	12.8	(6.3-19.2)	21	14.5	(8.4-20.6)	149	25.5	(20.1-30.8)
Texas	241	70.5	(65.2-75.8)	36	33.3	(23.5-43.2)	79	22.3	(17.4-27.2)	46	12.6	(8.9-16.4)	56	15.6	(11.3-19.9)	322	31.9	(27.5-36.2)
Virginia	92	63.7	(54.5-72.8)	15	26.7	(13.4-40.1)	21	14.8	(8.2-21.3)	33	11.7	(5.1-18.2)	27	21.2	(13.4-29.0)	127	27.3	(23.7-31.0)
Washington	125	74.1	(68.7-81.5)	20	31.5	(19.7-43.4)	22	12.9	(7.8-18.2)	24	14.6	(8.5-20.8)	17	9.0	(4.7-13.4)	158	27.7	(23.9-31.4)
<b>National</b>	<b>2,697</b>	<b>68.8</b>	<b>(67.4-70.3)</b>	<b>389</b>	<b>27.7</b>	<b>(22.9-32.5)</b>	<b>651</b>	<b>17.0</b>	<b>(15.3-18.6)</b>	<b>558</b>	<b>14.7</b>	<b>(13.4-16.0)</b>	<b>607</b>	<b>15.7</b>	<b>(14.2-17.3)</b>	<b>3,712</b>	<b>28.8</b>	<b>(27.8-30.1)</b>

Abbreviations: n, number; CI, confidence interval.

Note. Unweighted numbers and weighted percentages are presented. CIs incorporate weighted percentages. Excluded are estimates with a coefficient of variation  $\geq 0.30$  and those based on a denominator sample size  $< 30$ . Estimates with an absolute CI width  $> 30$ , estimates with an absolute CI width between 5 and 30 and a relative CI width  $> 130\%$ , and estimates of 0% or 100% are marked with an asterisk (\*) and should be interpreted with caution.

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