

BRIEF – 24 January 2007

Outline of potential impacts of 37.5% funding reduction to Southern Vancouver Island HIV/HCV community health services

AIDS VANCOUVER ISLAND

Under the new geographic redistribution of existing HIV funds, AVI services in the South Island could be dramatically affected. Some examples of how AVI services would be impacted or eliminated include:

Services to over 278 registered HIV-positive clients:

- Extensive preparation of the Persons with Disability status application assessment and assistance;
- Range of support, including counselling on social, emotional and practical needs;
- A drop-in program offering group support, wellness and necessary nutritional support focused on the health needs of positive people;
- Advocacy and support for clients to secure housing, medical and health care, employment and other service needs.

Prevention services to more than 2000 at-risk individuals for HIV and hepatitis C (HCV):

- Peer education for people living with HIV and HCV to inform individuals about the risks of passing on these viruses;
- Innovative on-the-street prevention programs for injection drug users, women, youth and others most at-risk for HIV and/or HCV.
- Training programs for aboriginal health workers and workers from other agencies serving the above populations;
- Closure of Street Outreach evening drop-in programs;
- Peer and other additional prevention initiatives for needle exchange clients.

VICTORIA AIDS RESOURCE & COMMUNITY SERVICE SOCIETY (VARCS)

Cuts to VARCS' funding would mean a cut back in staff and office hours. The repercussions of this would be:

- Less time devoted to community partnership development;

DOWNTOWN SERVICE PROVIDERS COMMITTEE

AIDS Vancouver Island

City of Victoria
Social Planning and
Housing Division

Community Social
Planning Council
Planning Council

Downtown Victoria
Business Association

Inner City Aboriginal
Society

Our Place

Pacifica Housing

PEERS

The Salvation Army

United Way of Greater
Victoria

VARCS

Victoria Police
Department

Victoria Cool Aid Society

Victoria Native Friendship
Centre

Victoria Youth
Empowerment Society

- Only one staff person to operate the needle exchange and coordinate all other programs, volunteers, scheduling and administration;
- A one staff person office would reduce in-house program accessibility, as the office would be un-staffed for portions of the day during mobile needle exchanges.
- Mobile needle exchange activities would be reduced in order to provide office presence.
- Less access to staff would reduce referral service to other programs required for clients to maintain and improve their health outcomes.
- Reduced and less consistent office hours would result in more sporadic access by local youth, neighbourhood residents and visitors to prevention information, condoms and other prevention materials that contribute to reductions in HIV, HCV and STIs.

It is not feasible for VARCS to do “more with less” as both the province and the health authority grapple with funding issues. The agency applauds enhancements of up-island services to meet increased needs. However, the majority of new HIV/HCV infections and those living with these illnesses reside in the Capital Regional District. To shift funding away from the Victoria area to serve other populations weakens the structures that support the majority of people with HIV/HCV in southern Vancouver Island.

A more sound approach by both the province and VIHA must include augmented funds in order to bolster CRD initiatives while strengthening new initiatives up-island.

COOL AID COMMUNITY HEALTH CENTRE

The Cool Aid Community Health Centre is not in negotiations with VIHA. Nevertheless, the Centre would be impacted by cuts to the south island region. These impacts include:

- Increased requests for HIV education counselling, advocacy and testing—yet the Centre does not have the internal capacity to increase these services;
- The AVI/Cool Aid collaborative medical clinic, which is hosted by AVI’s Positive Wellness Program, may be put at risk, resulting in decreased lab access and monitoring of patients that could lead to their progression from HIV to AIDS. Furthermore, cases of medication toxicity may not be identified in a timely manner.
- The large number of undiagnosed HIV+ people in Victoria who use injection drugs is of great concern. Many high-risk individuals are unlikely to access traditional health services. The south island urgently requires an expansion of funding for innovative HIV/AIDS care services, including case managers and outreach workers who can link harm reduction services.

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PACIFICA HOUSING

Pacifica Housing’s areas of responsibility include family housing, housing for the “Hard to House” and Housing Outreach Services. Any barriers that impede/prevent access to affordable housing or that threaten existing housing are of concern to us and ultimately, our clients.

Living with HIV/AIDS and other illnesses (such as those associated with IV drug use) present significant issues that threaten the ability to maintain housing, including mobility, nutrition, emotional well being, financial stability and planning. When the support is insufficient or non-existent, the tenant’s capacity to address these issues is severely compromised. People suffering have limited ability to attend to the day to day affairs that are necessary to maintain housing.

There is an existing scarcity of referral opportunities for support for people with HIV/AIDS and resources are insufficient to deal with the demand. To further deplete existing services would be unconscionable.

One of the challenges in the Victoria housing market is high rent. The more someone pays for rent the less he or she has for other needs, such as food. To lose AVI’s hamper and lunch program would mean losing the only decent meal-a-day program for many HIV+ Victoria residents. The medical advocacy and emotional support from counselling provided by AVI staff increases the odds of individuals accessing the financial, medical and emotional help they need, in addition to adequate housing.

Pacifica Housing’s capacity to house and/or assist in housing people rests in our capacity to ensure they have access to all necessary support services. Any cuts to services for people with HIV/AIDS will affect their capacity to find and maintain appropriate housing and will result in increased homelessness—and poorer health outcomes.

THE VICTORIA POLICE DEPARTMENT

Proposed cuts to HIV/AIDS services in Victoria will potentially impact already strained policing resources. The current social and health care challenges faced by the city of Victoria constitute policing challenges by default. The proposed cut can only exacerbate this issue.

Challenges faced by the Victoria Police Department include negative outcomes for client groups affected in addition to negative impacts on the surrounding neighbourhood(s). Harm reduction is about "community," and sometimes we can become too myopic, focusing only on the client base, to the exclusion of the other stakeholders.

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