

Retention in HIV care: The role of outreach interventions



APHA Annual Meeting
November 5, 2007

C Tobias, J Bradford, S Rajabiun
H Cabral



HRSA SPNS Outreach Initiative (2001-2006)

- Promote engagement & retention of underserved populations in HIV medical care
 - Find out-of-care individuals and re-connect them to HIV medical care
 - Turn sporadic users to regular users of HIV medical care

Participating Sites

- The Fenway Institute, Boston MA
- Montefiore Medical Center/Citiwide Harm Reduction, Bronx, NY
- Project Bridge, Providence, RI
- UCLA/Drew Mobile Health Outreach Project Los Angeles, CA
- University of Miami Medical Center, Miami FL
- University of Washington/POCAAN, Seattle, WA
- Wayne State Medical Center, Horizons Project, Detroit MI
- Well Being Institute, Detroit MI
- Whitman Walker Clinic, Washington DC

Program Interventions

● Outreach

- Find and connect out of care HIV-infected individuals
 - Link with HIV Counseling & Testing agencies to identify newly diagnosed HIV individuals at risk of not entering care
 - Link with medical providers, substance abuse treatment providers, case management agencies, and correctional facilities

Program Interventions

- Retain HIV-infected individuals in care
 - Care coordination-linkages to case management
 - Health systems navigation
 - Accompaniment to medical and social service appointments
 - Appointment coordination/reminders
 - Peer support programs
 - HIV health literacy and skills building

Methods

- Client Interview
 - Baseline, 6 months, 12 months
- Medical chart review
 - Medical visits
 - CD4 & viral load counts
- Outreach contacts
- Client qualitative study

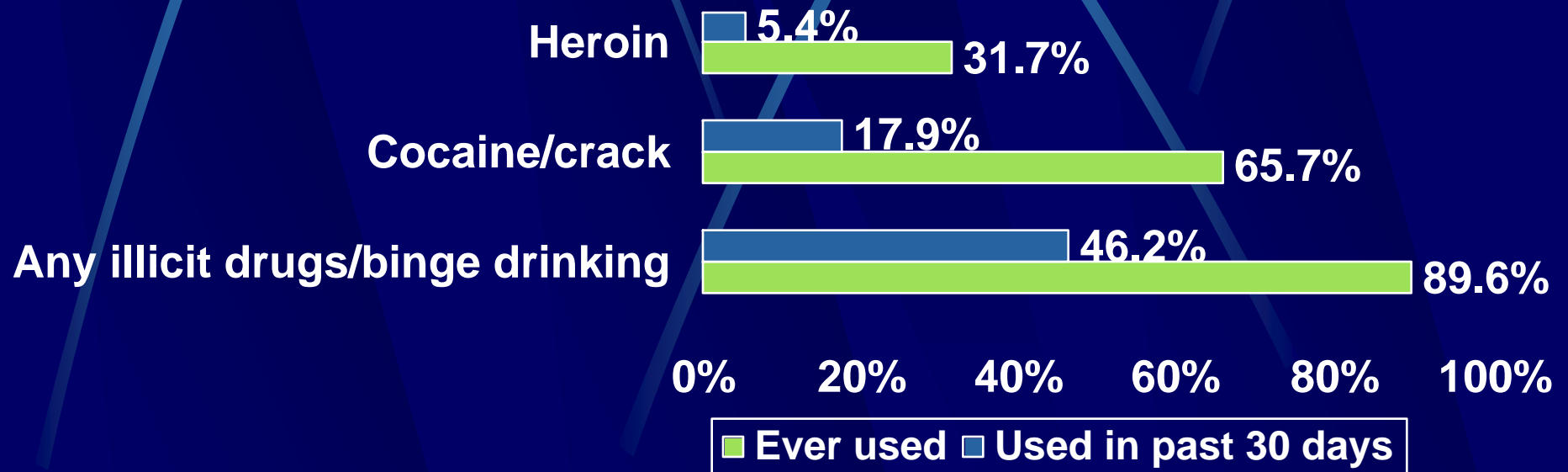
Interview data

- Socio-demographics characteristics
- Service utilization
- Engagement with Provider Scale
- Support service needs
- Health-related quality of life
- Barriers to care

Sample description: Socio-demographics

- 1133 HIV-infected individuals
 - 58% African-Americans
 - 22% Latinos
 - 61% male, 39% female
 - 38% Sexual minority
 - 25% no health insurance
 - 38% did not finish high school
 - 39% temporary housing
 - Living with HIV-8.2 years (mean)
 - 10% newly diagnosed with HIV (< 6months)
 - 52% CD4 <350

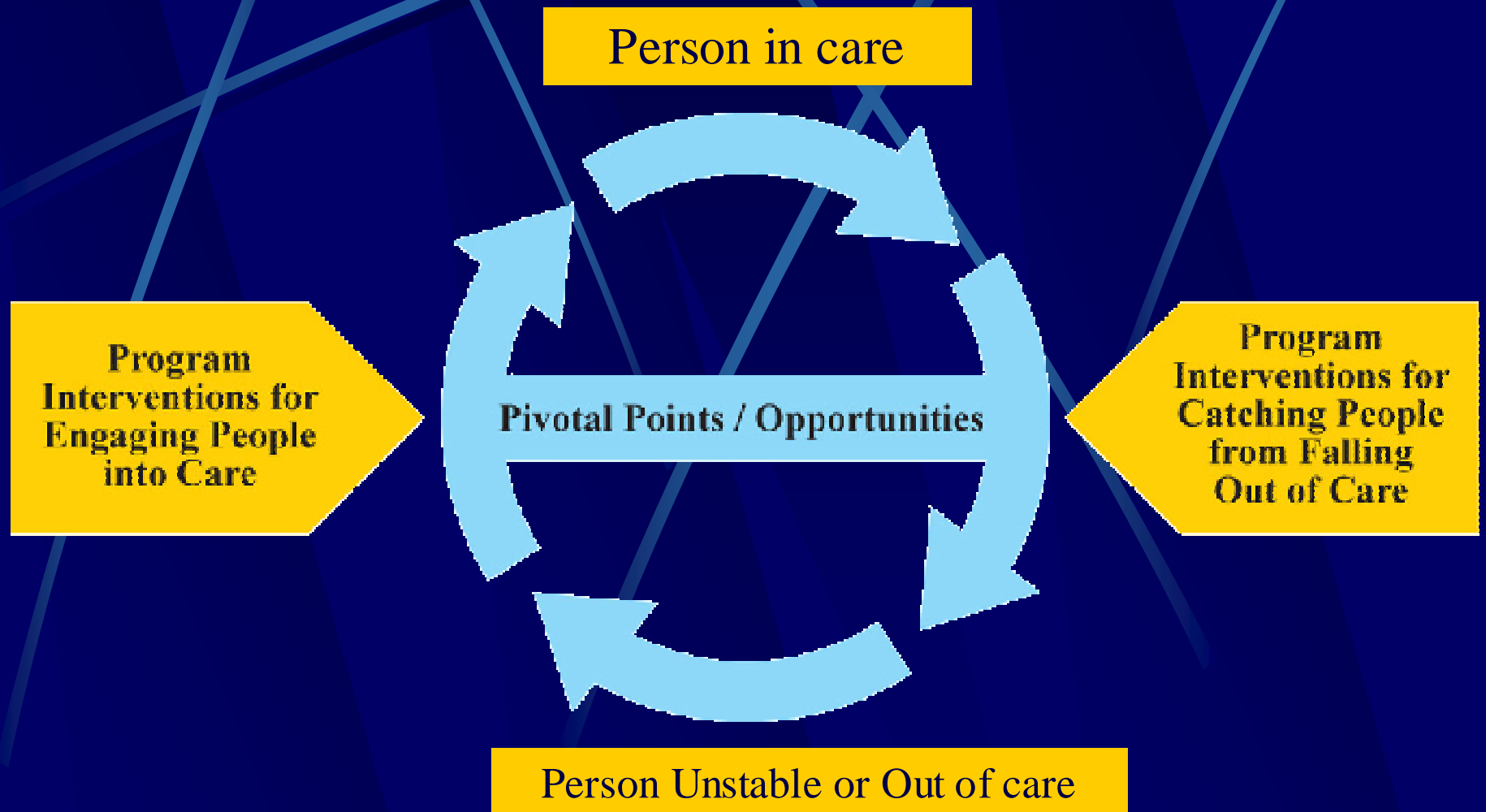
Sample description: Substance use



Barriers to care & Service needs

- 43% any practical barrier to care
- 38% any stigma as a barrier to care
- 53% any belief barrier to care
- 63% reported unmet needs for support services

Results: Engagement Process



Results

Factors associated with engagement in care at 12 months (n=328)

- Discontinued drug use
- Decreased practical barriers to care
- Absence of belief barrier
- Decreased unmet needs

Results

Outreach Contacts & Gaps in HIV Care (n=733)*

# Contacts in first 3 months	Hazard ratio (95%, CI)	Robust variance based p value
None	Referent	Referent
One	1.04 (0.78,1.40)	.77
2 to 4	1.19 (0.69,2.08)	.53
5 to 8	1.10 (0.71,1.69)	.68
9 or more	0.45 (0.26,0.78)	.005

*Stepwise Cox proportional hazards analyses

Results

Systems navigation

Variable	Baseline (n=437)	12 months (n=266)
Has a case manager	57.9%	71.6%*
Engagement with provider score [†]	18.3 (.42)	16.7 (0.41)**
No health insurance	21%	9.1%***
Undetectable Viral Load	34.8%	53.1%***
PCS (SF-12)	44.6	46.1***
MCS (SF-12)	41.5	43.6***
2 or more visits in past 6 months	63.9%	78.9%***

*p<.05,***p<.001

[†] lower score is more engaged

Conclusions

- Outreach interventions can be effective in promoting engagement & retention in HIV primary care and improve quality of life
 - Addressing HIV knowledge & beliefs
 - Reducing practical barriers to care & unmet support service needs
 - Improving communication between patient & health care providers

Implications for Policy & Practice

- Improve coordination of HIV care, substance use treatment, and mental health services
- Adopt culturally sensitive and patient centered models
- Use of peer or professionally-trained staff to build patient-provider relationship

Participant perspective

- “[the doctor] would be telling me what I needed to do. I just wouldn’t listen to her. There was a lot of other stuff I had to worry about. I took a break so long I got sick. The [outreach program] helped me a lot. Got me back on track with medications and places I had to be..”