

Barriers to Engagement in HIV Treatment after Community-Based Screening in Oakland, CA



Jennifer Lorvick,¹ Loris Mattox² and Braunz Courtney³

¹RTI International, Research Triangle Park, NC; ²HIV Education and Prevention Project of Alameda County

Background

The HIV Education and Prevention Project of Alameda County (HEPPAC) is a nationally recognized harm reduction leader offering a range of programs and services to reduce Hepatitis C and HIV risk in Alameda County and Contra Costa County while improving the health of low-income and disenfranchised populations and creating effective community collaborations to combat the spread of these twin epidemics. HEPPAC is California's third largest needle exchange provider and utilizes a low-threshold harm reduction approach to care, and currently oversees a successful CDC-funded HIV prevention program.

METHODS

- HCV/HIV rapid screening and confirmatory RNA testing
- Ancillary services: drop-in-center, syringe exchange program (SEP)
- Outreach targeting IDUs at drug treatment programs, street venues, homeless encampments & convening areas
- Linkage to care: Red carpet service/advocacy /navigation/ transportation



Mobile Testing Van

	n	%
HCV antibody positive	391/1,215	32%
Received RNA testing	233/391	60%
Had active HCV infection	191/233	82%
Attended intake appointment at HCV clinic	70/191	37%
Commenced HCV treatment	70/191	4%

Barriers to Engagement in HCV Care and Treatment

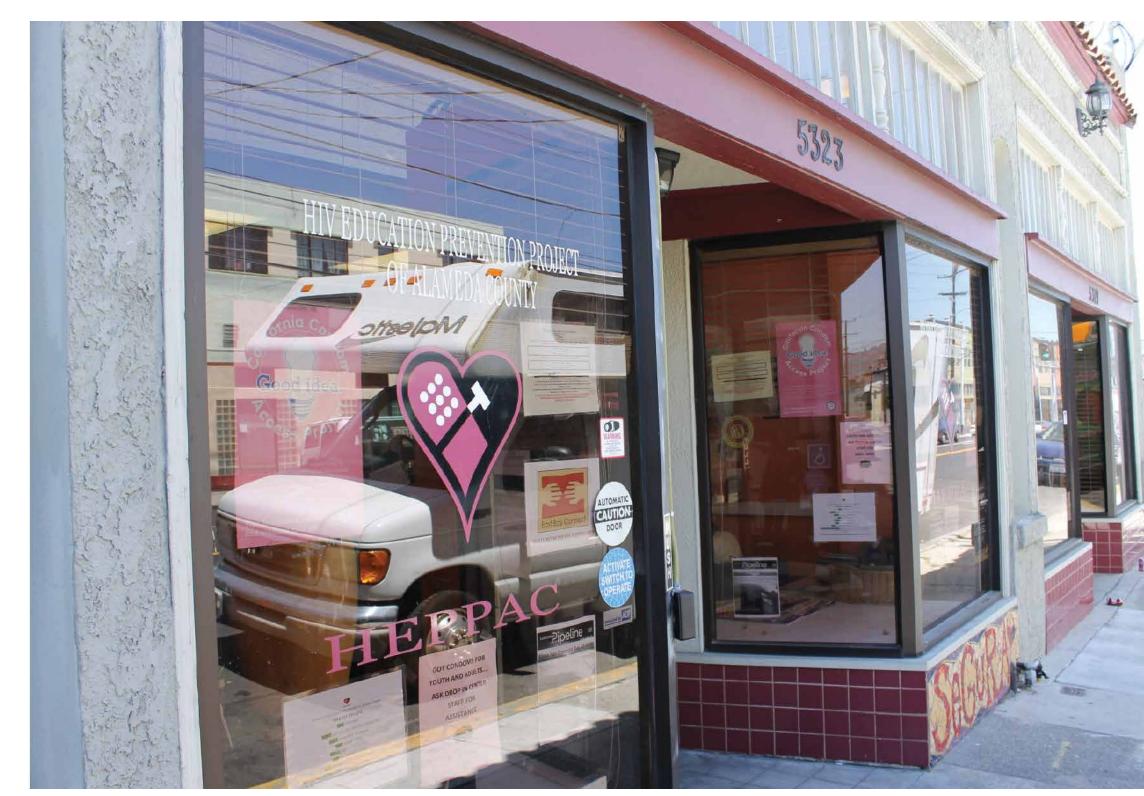
- Difficulty drawing blood for RNA testing (collapsed or scarred veins)
- Lack of Medicaid coverage
- Lack of transportation
- Poor appointment attendance
- Co-occurring conditions
- Provider hesitance to prescribe

CONCLUSIONS

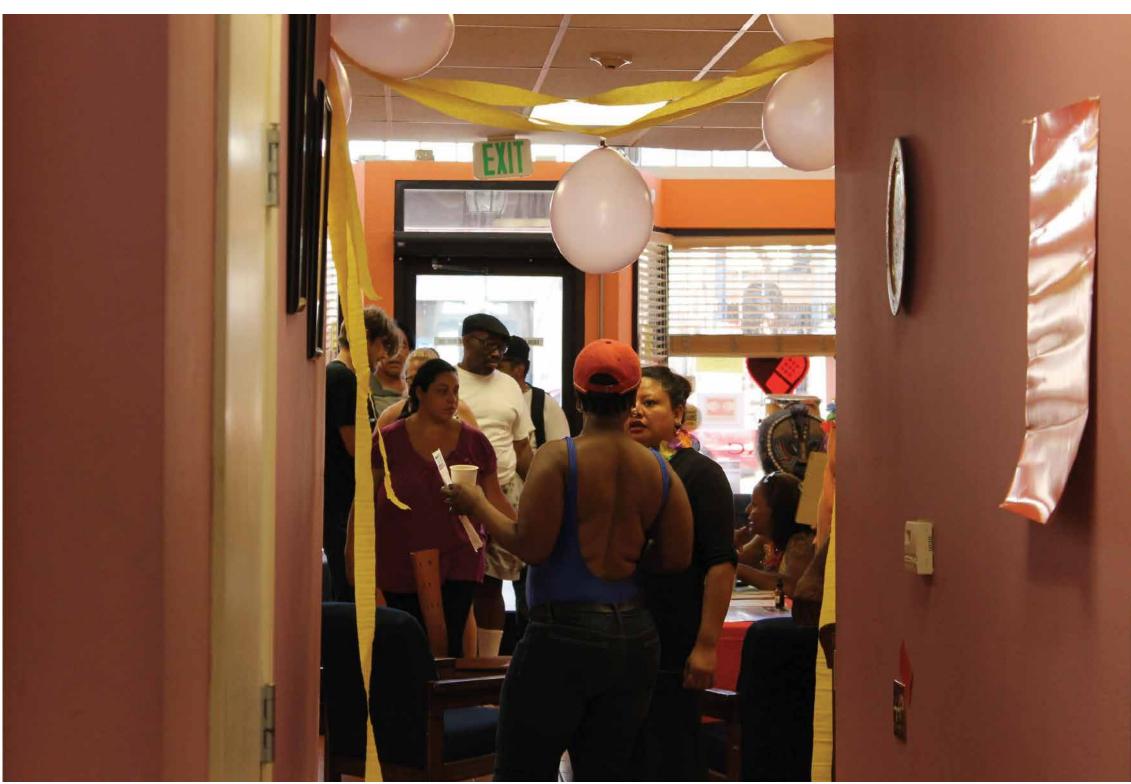
- Need for community-based treatment models
- Unique retention methods kept clients engaged, Red carpet services increased care access
- Limited capacity/availability of care providers
- Need for updated HVC screening, linkage, care and treatment education
- Need for upgraded county-wide infrastructure/capacity/EMR assessments

Summary of Findings

Significant engagement-related factors such as inadequate linkage to care and high attrition after the first clinical appointment; clinical factors such as co-morbid conditions and provider hesitance to prescribe; and social/structural factors such as lack of health insurance and difficulty obtaining Medicaid authorization for the current cost-prohibitive therapies were identified.



Casa Segura Drop-In Center



Casa Segura Drop-In Center

Author Affiliations

- ¹ RTI International, Research Triangle Park, NC
- ² HIV Education and Prevention Project of Alameda County

More Information

Braunz Courtney: bcourtney@casasegura.org
Loris Mattox: lmattox@casasegura.org
Jennifer Lorvick: jlorvick@casasegura.org

RTI International

3040 Cornwallis Road Research Triangle Park, NC 27709

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