

ABSTRACT (revised)

INTERVENTION

RESULTS

OUTCOMES

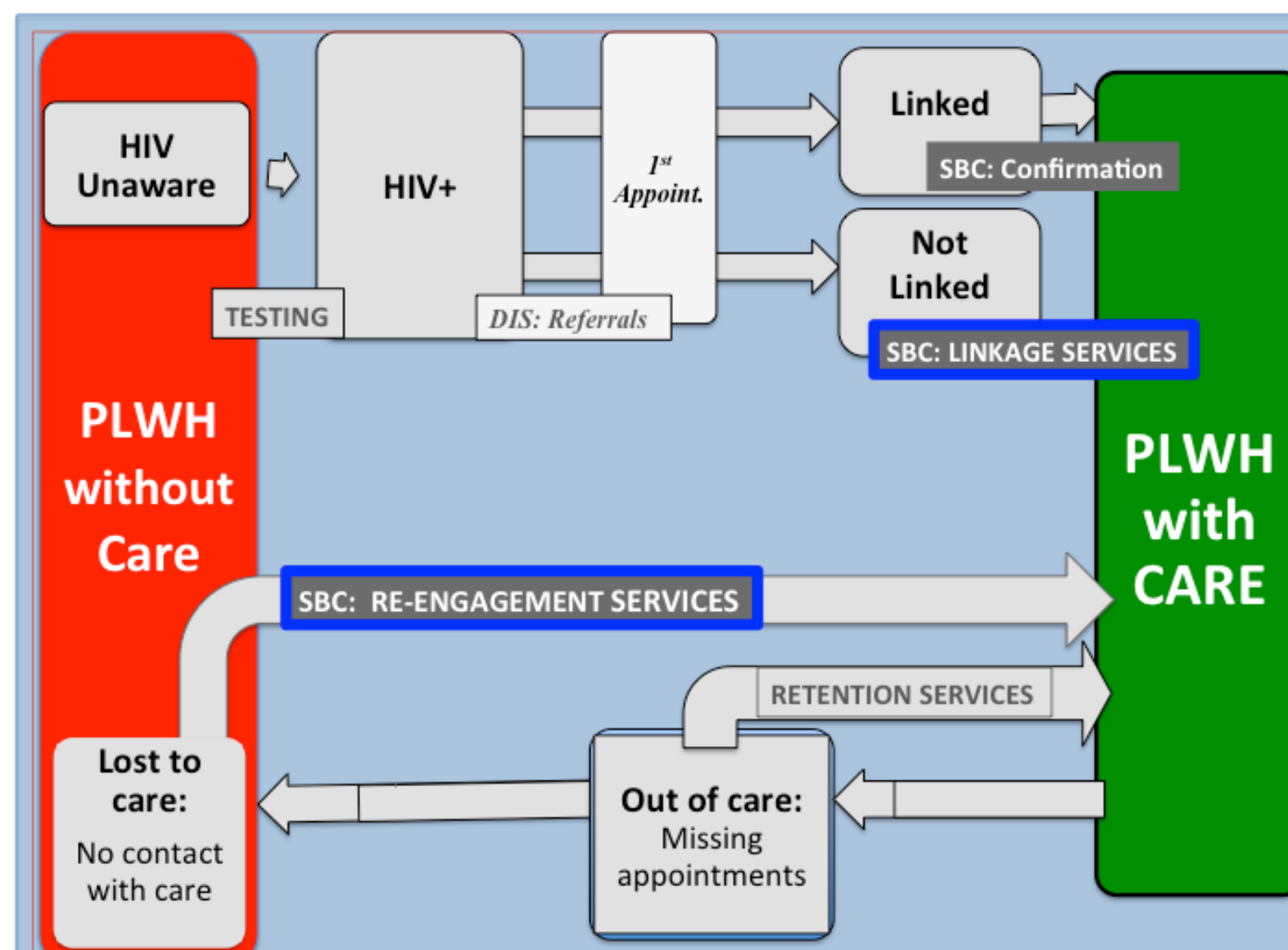
Objective: People living with HIV (PLWH) need lifelong medical care but many experience difficulties that may negatively impact retention in care. This is noted to be a particular challenge for women. Re-engagement services were provided by a public health service team (State Bridge Counselors, SBCs) to women identified as out of care (OOC) by HIV medical clinics, i.e., without both recent (>6-9 months) and future medical appointments. To examine markers of HIV care prior to the referral for re-engagement services, we analyzed client data collected in the 12 months before referral.

Methods: Referral, intervention and clinical data were analyzed from a CAREWare database for Ryan White Part B clients in North Carolina from the period of July 2013 to June 2014. Markers of care were defined as 1 cd4 or 1 viral load (VL) and were obtained from eHARS.

Results: There were 494 clients identified in CAREWare during the study period, of which 29% were female (n=144) and 71% male; 77% were African-Americans (n=381). Most of the clients were heterosexual (n=237, 48%) and 34% were MSM (n=171). At the time of SBC contact, the HIV-positive women were reported as transitioning care (relocating or new provider, (n=32, 23%); continuing care at same location (no reported transition, n=60, 42%); could not be located (n=21, 20%) or had incomplete records (n=31, 15%). The proportion with viral load suppression (VLs) was low among women referred for re-engagement services (24/144, 17%, missing = VL not suppressed) as well as among women with a marker of care in the last year (24/68, 35%, missing = excluded). Women transitioning to new care site vs. women continuing care in same location had a similar frequency of care markers (new care=53%, no change in care=48%; RR: 1.10 95%CI: 0.72, 1.67) and VLs (29% vs. 38%; RR: 0.78 95%CI: 0.32, 1.85). Similar numbers of women (47%) and men (45%) had evidence of care in the 12 months prior to the referral. However, women had lower levels of VLs even after restriction to only those with a care marker (35% vs. 48%, RR=0.73 95%CI: 0.51, 1.05).

Conclusions: Women who were referred for re-engagement services from HIV medical clinics had low levels of care and VL suppression during the prior year. Frequency of care markers was similar to men but the proportion of women with VL suppression

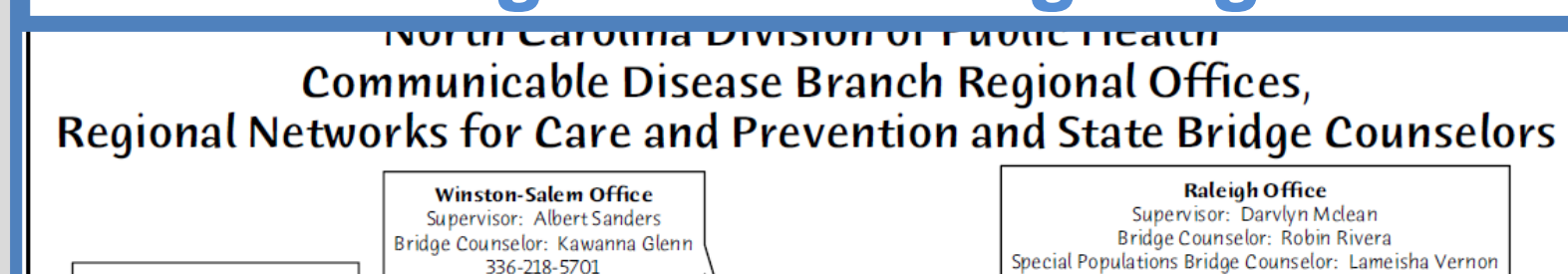
CIRCLE OF CARE



Left: Not in care
Right: In Care
Center: Transitions in care
Top flow: Continuum of care
Bottom Flow: Falling out of care
Middle Flow: returning to care

PLWH: People living with HIV
SBC: State Bridge Counselor
DIS: Disease intervention specialist

NC Bridge Counseling Regions



DEMOGRAPHICS

	W	M	TransW	Total
Heterosex	123 (85%)	114 (33%)	0	237 (48%)
IDU	10 (7%)	27 (8%)	0	37 (7%)
MSM	- na -	169 (49%)	2	171 (34%)
OTHER	11 (8%)	38 (11%)	0	49 (10%)
Black, AA	104 (72%)	275 (79%)	2	381 (77%)
White	32 (22%)	50 (14%)	0	82 (17%)
Other	8 (6%)	23 (7%)	0	31 (6%)
< 26 yr.	13 (9%)	46 (13%)	1	60 (12%)
26-35 yr.	43 (30%)	103 (30%)	0	146 (30%)
36-45 yr.	48 (33%)	84 (24%)	1	133 (27%)
> 45 yr.	40 (28%)	115 (33%)	0	155 (32%)
Total	144	348	2	494

FREQUENCY OF CARE Year Prior to Referral

Gender and Care

Care in Year Prior to Referral

Gender	No	Yes	Total	%
Female	76	68	144	47%
Male	193	155	348	44%
Transgender	2	0	2	0%
Total	269	223	492	45%

VLs in Year Prior to Referral If has Marker of Care

Gender	No	Yes	Total	%
Female	44	24	68	35%
Male	80	75	155	48%
Transgender	0	0	0	0%
Total	124	99	223	44%

Referral Outcome and Care

Care in Year Prior to Referral

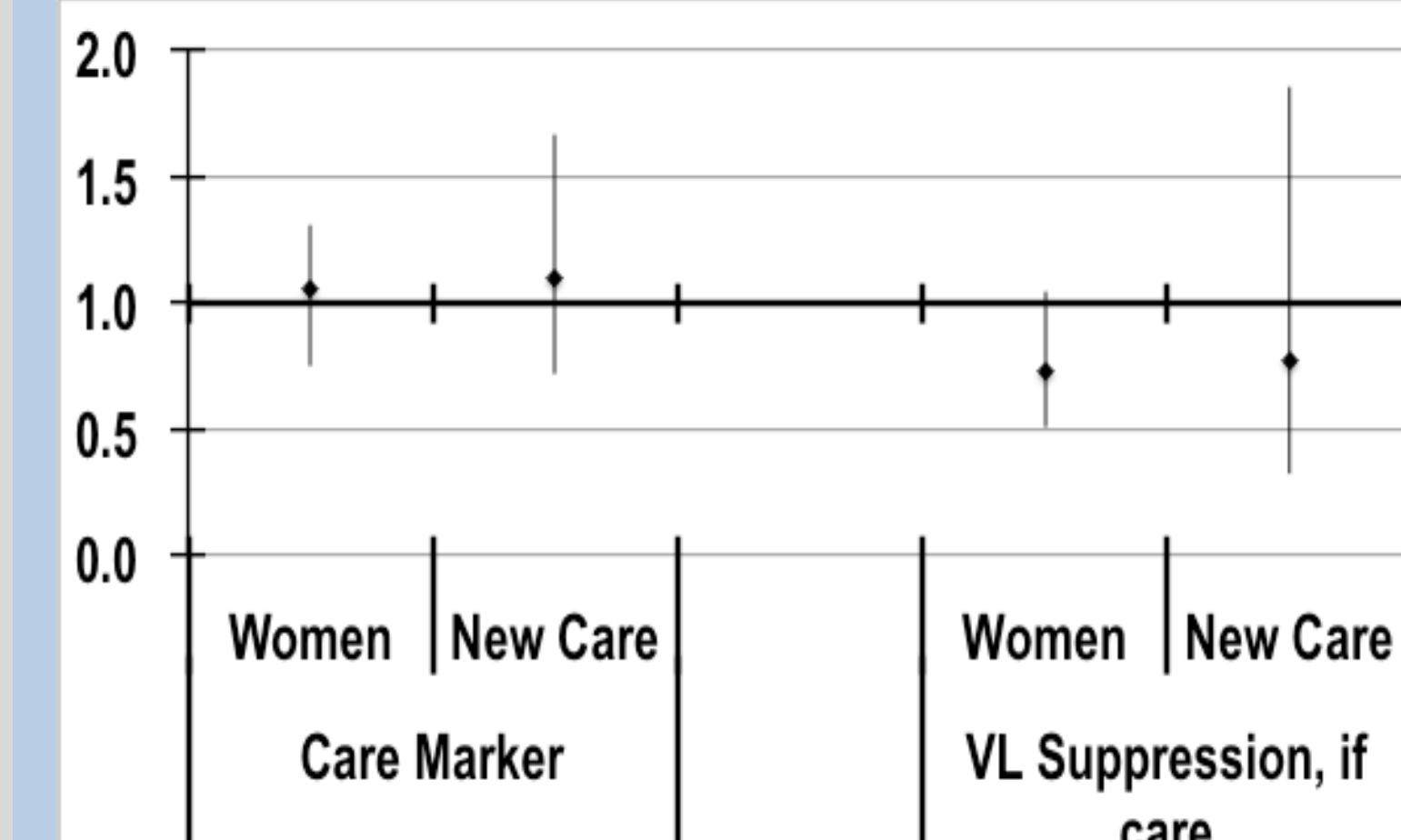
Ref. Outcome	No	Yes	Total	%
New care	15	17	32	53%
Same care	31	29	60	48%
Total	46	46	92	50%

REFERRAL OUTCOME

	No.	%
New Care	32	23%

MARKERS OF CARE

Risk Ratios



Sample Sizes

W:M All = 490 In care =233
New Care: No Change (W) All= 92 In care = 46

CONCLUSIONS

- ◆ Women referred for re-engagement services from HIV medical clinics had low levels of care and VL suppression during the prior year.
- ◆ Frequency of care markers was similar to men.
- ◆ The proportion of women with VL suppression was 27% lower than men.
- ◆ Women referred for re-engagement services have significant needs for re-engagement in HIV care.