

RE-LINKAGE: THE STICKING POINT IN HIV PREVENTION

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Why We Did this Study

- The Merck Foundation funded Houston, for a three-year initiative to re-connect HIV infected people back to care.
- In 2012, when the project began, there were ~26 Service Linkage Workers (SLW) linking newly identified HIV positive clients to medical care.
- No SLWs were solely responsible for **re-linking** people to care.

Why We Did this Study

- Individuals who are out of care are at high risk for disease and death.
- Individuals who have been in care and have left care are estimated to cause **61.3%** of HIV transmissions¹
- If we could find those out of care and re-link them to care, we would make a major step toward controlling HIV.

1. Skarbinski J et al. JAMA Intern Med. 2015 Apr;175(4):588-96.

What We Did

- HIV Medical Provider Referrals (654 cases)
 - Out-of-care patients referred from providers
- Surveillance Referrals (200 cases)
 - HIV+ residents that previously were in care but no CD4/VL lab in last 6 months
- HIV+ that have a new STD (63 cases)
 - Health department staff have contact with HIV+ with new chlamydia, gonorrhea, and syphilis cases
- Referrals from other areas (11 cases)

What We Did

- Prior to assignment to SLW, nine different databases were searched for:
 - Evidence of care
 - Locating information
 - Incarceration and vital status
- SLW attempted to locate client, mitigate barriers to care, and link client to medical and supportive services
- Accompanied client to medical appointments until care was established.

What We Found

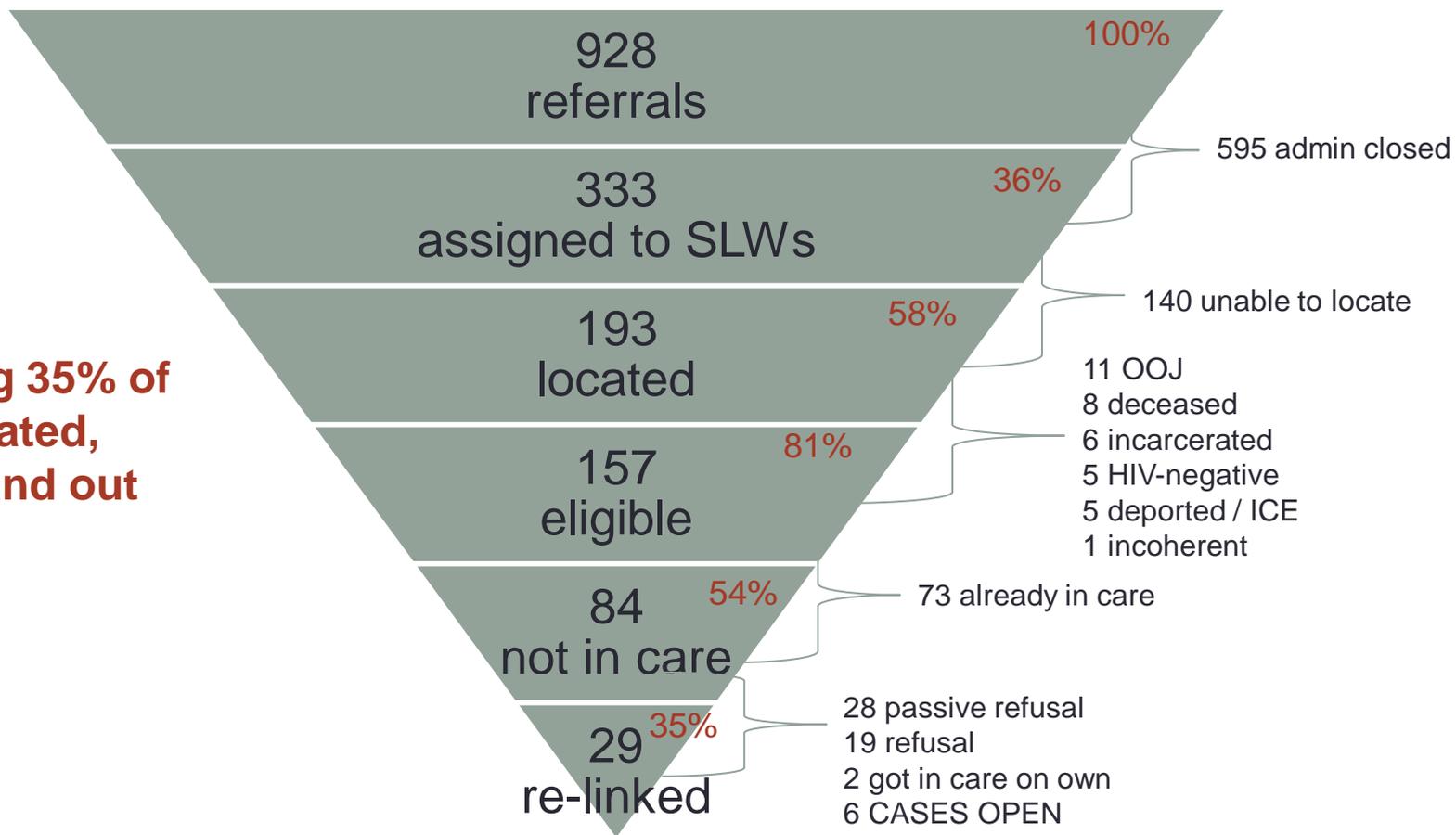
- Investigated a total of **928** cases from June 2013- March 2015
 - 595 (64.1%) referrals were closed by searching in databases

Outcome *	Number	Percent
Already in care	391	42.1%
Moved out of the area	86	9.3%
Died	92	9.9%
Ineligible	17	1.8%
In jail or prison	9	1.0%
Assigned for Service Linkage	333	35.9%

*Data as of 4/29/15

What We Found

Re-linking 35% of those located, eligible, and out of care



What Our Results Mean and Why this Matters

- More people are in care than we thought.
No lab (CD4/VL) ≠ definitively out of care
 - Migration: Other jurisdictions have also shown that 27-72% of those presumed to be out of care have migrated or are dead
- Re-linkage is resource-intensive.
- Clients report the care system is complex.
 - Re-linkage clients have already experienced complexity and intensity.
- Collaboration is needed between providers and health departments.
 - Potential intervention at point of missing scheduled visits (prior to complete drop out).

Acknowledgments

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 - St. Hope Foundation
- Texas Department of State Health Services
- Houston Area Ryan White Planning Council
- Houston HIV Prevention Community Planning Group