

MULTICOMPONENT SUPPORT STRATEGIES



[Evidence-Informed for the Linking and Retention in HIV Care Chapter](#)
[Evidence-Informed for the Structural Interventions Chapter](#)

POPULATION

- People with HIV (PWH) in clinical care
- PWH experiencing homelessness

KEY INTERVENTION EFFECTS

- Increased viral suppression

BRIEF DESCRIPTION

Multicomponent Support Strategies consists of proactive outreach and social services support for PWH during shelter-in-place orders for COVID-19.

Components include:

- Food assistance
- Medication delivery
- Mental health services
- Substance use services
- Housing support services
- In-person care
- Low-barrier high-intensity drop-in program (POP-UP) for PWH experiencing homelessness

These services were bolstered by municipal programs to provide supportive temporary housing within unused hotel rooms.

DURATION: Ongoing

SETTING: HIV clinic (San Francisco, CA)

STUDY YEARS: 2018 – 2021

STUDY DESIGN: Pretest-Posttest

DELIVERERS: Medical assistants, nurses, clinicians, outreach workers, trained volunteers

DELIVERY METHODS: Medication delivery, Social support

STUDY SAMPLE

The baseline study sample of patients (n = 1,816) was characterized by the following:

- 43% White persons
- 26% Hispanic, Latino, or Latina persons
- 18% Black or African American persons
- 8% Asian persons
- 5% persons who identify as another race/ethnicity
- 12% female persons
- 14% persons who are unhoused or unstably housed
- 16% persons with severe mental illness
- Median age = 51 years old

STRUCTURAL COMPONENTS

Physical Structure – Services provided in non-traditional settings

- Increased access to HIV care services through a high-intensity drop-in program for people experiencing homelessness
- Availability of medication delivery

Policy/Procedure – Institutional Policy/Procedure

- Policy changes for conducting proactive outreach during shelter-in-place orders (i.e., adapted to federal and state mandates during the COVID pandemic)

Social Determinants of Health – Survival

- Increased access to food and housing

KEY INTERVENTION EFFECTS (see **Primary Study** for all outcomes)

- Viral suppression was more likely at post-intervention than at pre-intervention (Adjusted odds ratio AOR] = 1.34; 95% CI: 1.21 – 1.46).

CONSIDERATIONS

- Study was conducted during the COVID-19 pandemic when temporary shelter-in-place orders were in place.
- People who participated in the POP-UP program at any point were more likely to be virally suppressed (AOR=1.51, 95% CI, 1.07–2.11).
- Among people previously experiencing homelessness or unstable housing, those who received permanent housing or a shelter-in-place hotel room during the pandemic were more likely to be virally suppressed than those who did not receive housing or a shelter-in-place hotel room during the pandemic (AOR=1.94,95% CI: 1.05-3.59).
- People under age 40 were more likely to have an unsuppressed viral load than people aged 40 or older in the 2 years before shelter in place (AOR = 2.11; 95% CI: 1.35–3.31). This difference was no longer present after the shelter in place (AOR = 1.30; 95% CI: 0.80–2.13).
- People experiencing unstable housing were more likely to have an unsuppressed viral load than people who were housed before shelter in place (AOR = 7.28, 95% CI, 4.78–11.08). This odds ratio decreased to 3.35 after the shelter-in-place period (95% CI, 2.10–5.32).

ADVERSE EVENTS

The author did not report adverse events.

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PRIMARY STUDY

Spinelli, M. A., Le Tourneau, N., Glidden, D. V., Hsu, L., Hickey, M. D., Imbert, E., Arreguin, M., Jain, J. P., Oskarsson, J. J., Buchbinder, S. P., Johnson, M. O., Havlir, D., Christopoulos, K. A., & Gandhi, M. (2022). [Impact of multicomponent support strategies on human immunodeficiency virus virologic suppression rates during coronavirus disease 2019: An interrupted time series analysis](https://doi.org/10.1093/cid/ciac179). *Clinical Infectious Diseases*, 75(1), e947–e954. <https://doi.org/10.1093/cid/ciac179>

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