# MULTICOMPONENT SUPPORT STRATEGIES

**Evidence-Informed for the Structural Interventions Chapter**
**Evidence-Informed for the Linking and Retention in HIV Care 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/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. *Clinical Infectious Diseases, 75*(1), e947–e954. doi.org/10.1093/cid/ciac179

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