

Viral suppression trends among HIV+ housing clients, New York City, 2008-2013



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Background

- US ART guidelines have called for progressively earlier initiation over the years, and NYC HOPWA contracts have increased the focus on retention in care
- NYC PLWH comprise 13% of US total
- HOPWA administered by NYC health department serves ~2,000 PLWH with \$17M in federal funding for supportive housing, rental assistance, housing placement assistance, and case management
- NYC HOPWA eligibility criteria: very low income*, HIV-positive NYC resident

Sources:

NYC DOHMH HIV data: <http://www.nyc.gov/html/doh/downloads/pdf/ah/surveillance2013-table-all.pdf>

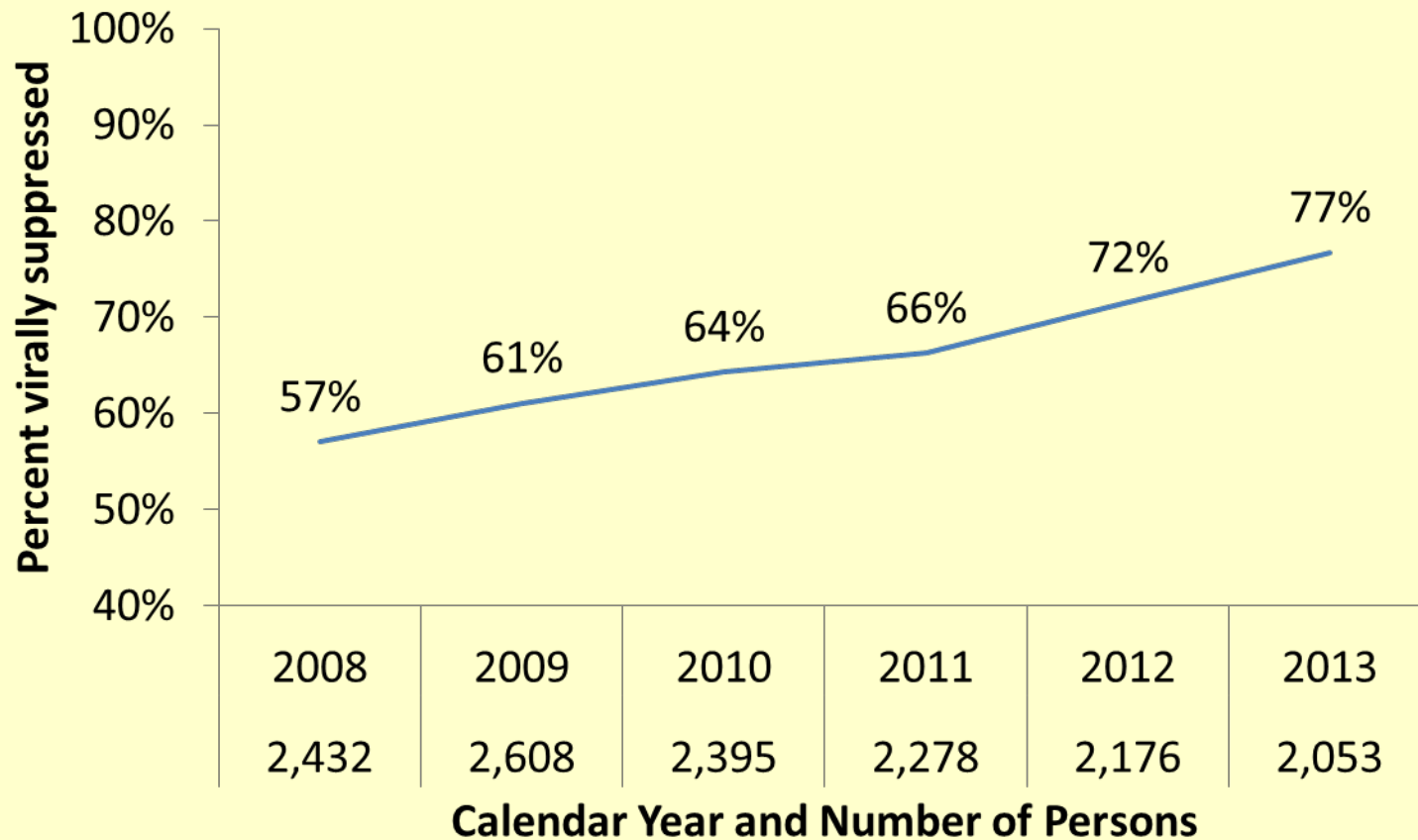
CDC NYC/US HIV data: http://www.cdc.gov/hiv/pdf/g-l/hiv_surveillance_report_vol_25.pdf

*Very low income is defined as annual gross income that does not exceed 50% of median family income for NYC defined by HUD

Aims & Methods

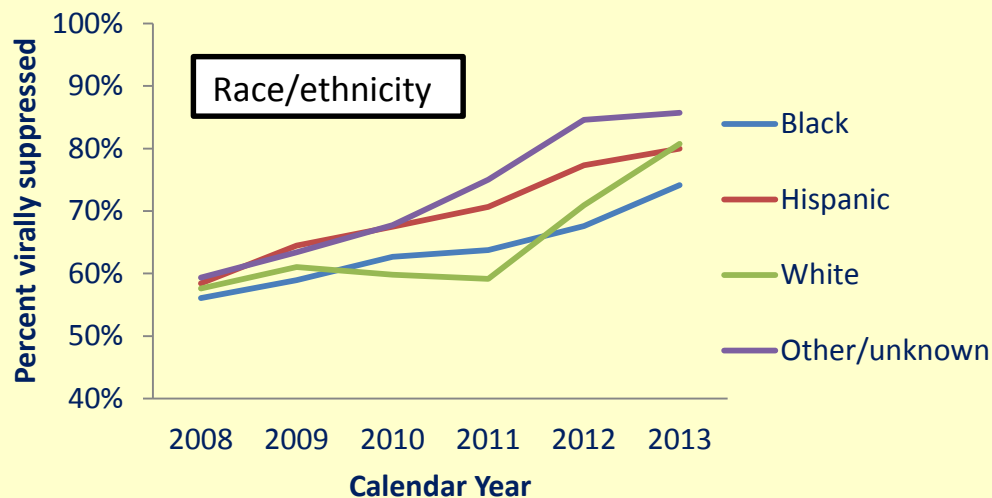
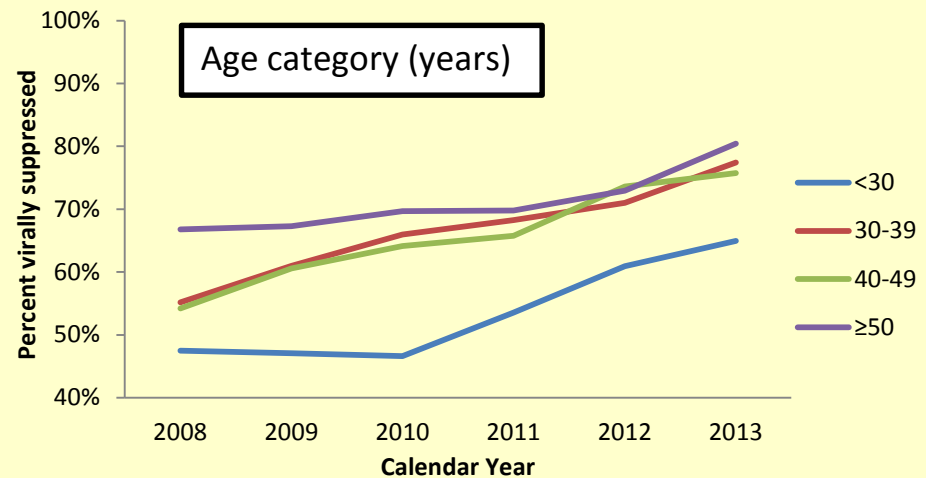
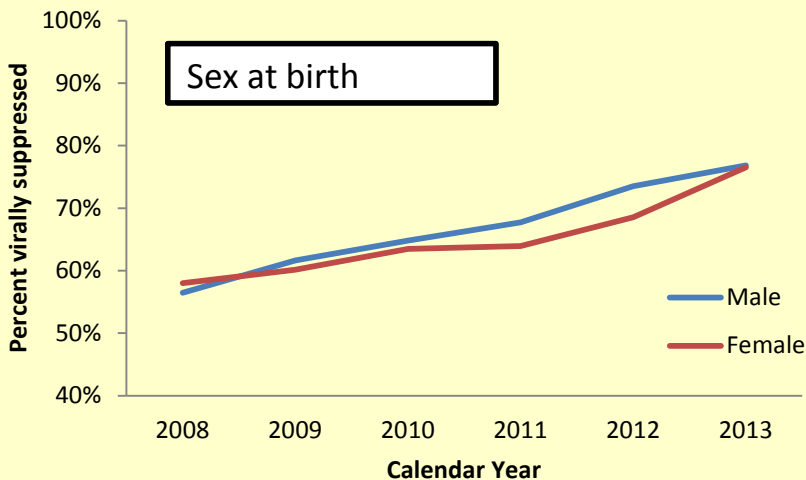
- Measure viral suppression for NYC HIV+ housing program clients, using data on NYC HOPWA enrollees matched with the NYC HIV surveillance registry
- Registry provides dates and results of HIV viral load [VL] tests, which are electronically reported to DOHMH, for each year in 2008-2013
- Virally suppressed defined as any VL in the year was ≤ 200 copies/mL
- Assess statistical significance of changes in suppression from 2008 to 2013

Results: Viral suppression trends overall

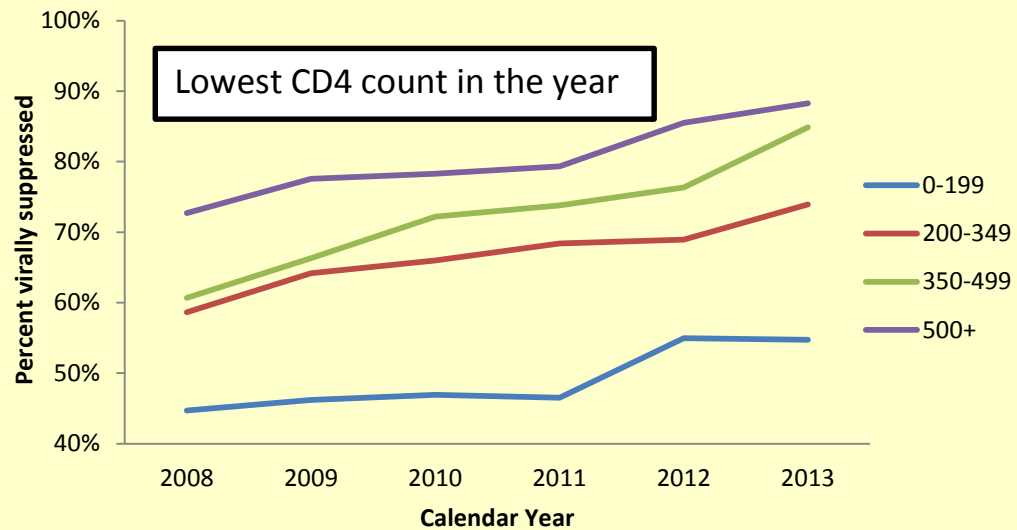
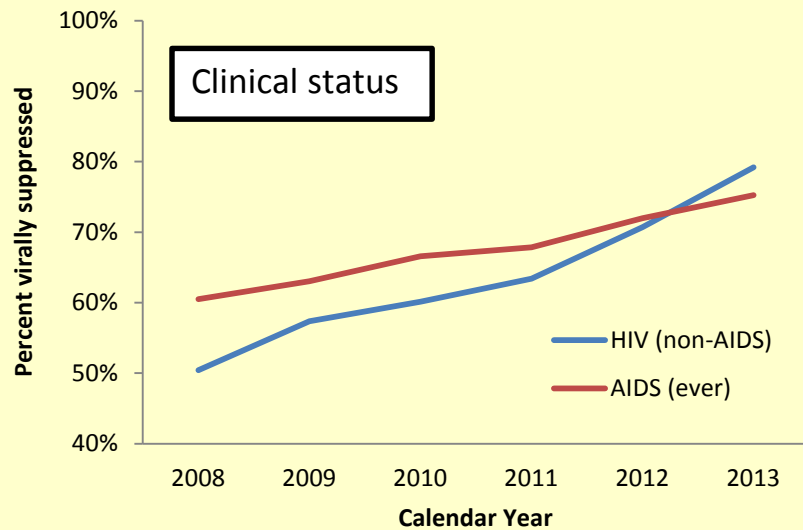


p trend <0.0001

Results: Viral suppression trends by demographic characteristics

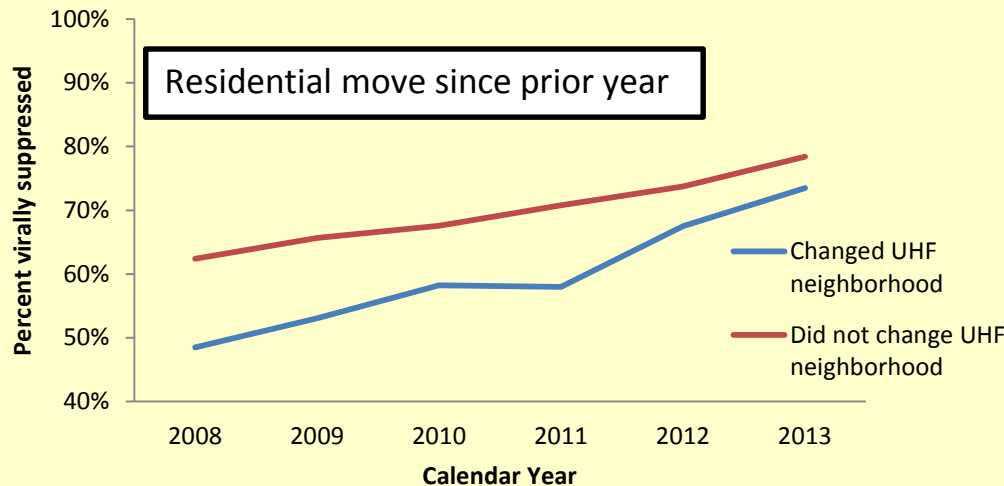
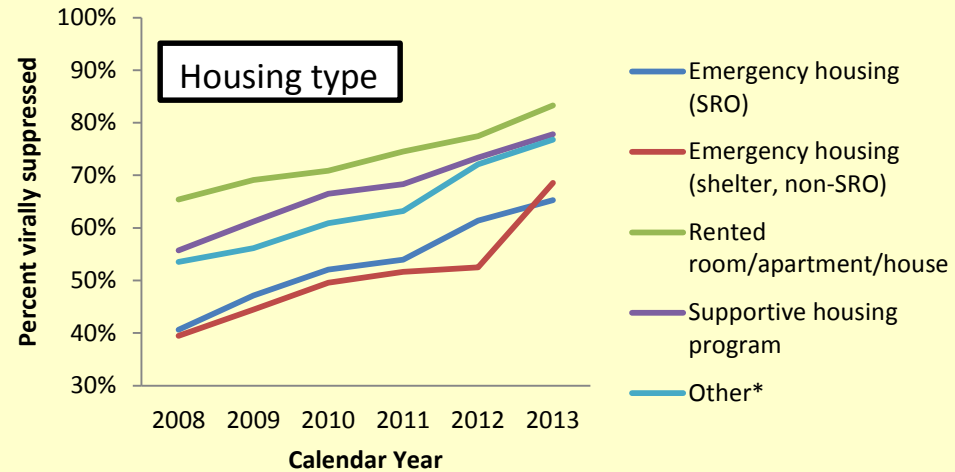
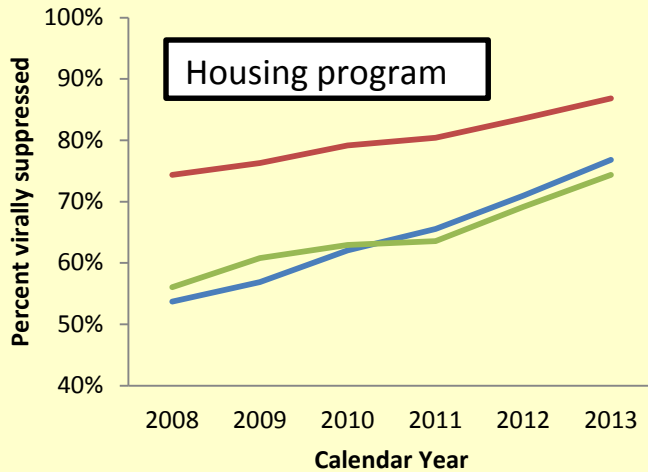


Results: Viral suppression trends by clinical characteristics



All subgroups had statistically significant ($p < 0.0001$) increasing trends in viral suppression.

Results: Viral suppression trends by housing characteristics



All subgroups had statistically significant ($p < 0.0001$) increasing trends in viral suppression.

* "Other" housing type includes missing.

Discussion

- Substantial increases in viral suppression overall (57→77%) and in all demographic, clinical, and housing subgroups among NYC HOPWA clients
- Coincided with expanded ART recommendations and emphasis on retention in care in HOPWA service model
- Some disparities in suppression have closed, others persisted, and others widened

Limitations

- Doesn't illuminate *how* clients achieved VS
- Unadjusted analyses subject to confounding
- No causality proven between demographic, clinical, or housing characteristics and viral suppression

Future Research Directions

- Compare increases between subgroups, adjusting for other factors
- Explore different clinical status - suppression relationship among HOPWA clients than PLWH overall
- Consider alternative measures, e.g., limit to retained in care and identify factors associated with non-suppression

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