Exploring experiences of retention in care and medication adherence among women living with HIV in unstably housed situations

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Background

- Women living with HIV (WLH) who experience homelessness and housing instability disproportionately belong to racial and ethnic minority groups and have disparate outcomes in HIV care and mortality.
- Women in this population have unique needs and challenges to retention in care and adherence to antiretroviral medication (ART).

Purpose

- The purpose of this study was to gain a deeper understanding of the experiences of HIV care management among women who live in unstably housed situations while in care.

Methods

- We worked with medical case managers in the Ryan White Program in Miami-Dade County, Florida to recruit participants.
- We conducted qualitative, in-depth, hour-long interviews, using a semi-structured format.
- The Interview guide was designed to explore housing situations, household composition, interpersonal household relationships, neighborhood environments, and intrapersonal aspects that impacted these women's ability to maintain themselves in HIV care.
- Interviews were audio recorded, transcribed, and analyzed using consensual thematic analysis where two coders independently coded each interview and reviewed codes for agreement and meaning.
- This research was approved by Florida International University Institutional Review Board.

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Results

- 16 women participated in this study
- All participants were currently linked to HIV care in the Miami-Dade RWP and reported experiencing housing instability or homelessness in the past 12 months (determined using self reported indication of any of the situations listed as either literally homeless, imminent risk of homelessness, or precariously housed, as defined by the Housing Status Assessment Guide by the Department of Health and Human Services, 2009).
- N= 11 identified as Black/ African American; n= 5 identified as Latinx
- Mean age of participants= 48 years (Std Dev= 8.78 years)

Summary of Key Themes:

Participants highlighted retention to care and adherence barriers related to housing situations and stability:

- Relationships with persons with whom they lived (Privacy, conflict, and distrust)
- Experiences of violence and abuse
- Psychosocial issues (depression, isolation, drug use, and trauma)
- Disruption of daily routines
- Inconsistent access to medication
- Inconsistent health care utilization

Table 1. Selected key themes with sample quotes

Theme	Sample Quotes
Disruption of daily routine impacting care	*"When I was out in the street, it was hard because I didn't know the time; when I was supposed to take it. Somedays I miss days without taking my medication but I still took it whenever I thought about it so I feel like I was basically keeping up with myself just by taking it, like any little bit counts, basically. I had to do what I had to do."*
Privacy issues impacting care	*"I keep my medication hidden. I don't leave it in my pocket for whatever reason. Probably because I feel like if someone uses my bathroom, you know a lot of people that use medication, do know what they are for. And that's not for everyone to know depending on the knowledge of the person… I just don't leave it around. So, sometimes that results in me misplacing."*

Conclusions

- The results illustrate how experiences of homelessness and housing instability impact women's ability to maintain their HIV care.
- Women-oriented, integrated care and linkage to ancillary social & economic support services are needed in this population in order to achieve health equity.