Poster # 01255

NATIONAL CENTER FOR HIV, VIRAL HEPATITIS, STD, AND TB PREVENTION

MEDICAL MONITORING PROJECT

Availability of onsite substance use disorder services at HIV facilities in the United States by urbanicity

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BACKGROUND

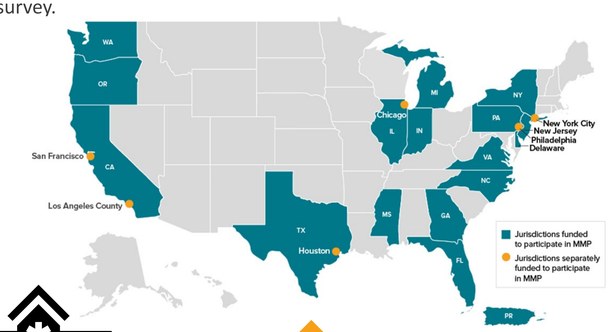
- HIV outbreaks related to injection drug use continue to be reported in the U.S., including in rural communities, where accessing HIV care services and substance use disorder (SUD) services may be challenging.
- Preventing and addressing HIV outbreaks related to injection drug use is a key strategy for the Ending the HIV Epidemic initiative (EHE).

Objective

- Describe the availability of SUD services at HIV care facilities attended by a representative sample of people with HIV (PWH) in the U.S. and the percentage of persons receiving these services by urbanicity.

Methods

- We analyzed 2021 survey data from 514 facilities that were recruited from a census of 1023 facilities providing care to a national probability sample of US adults with HIV. Facility survey data were linked to data from 3798 Medical Monitoring Project (MMP) respondents from 2019. Percentages of facility characteristics by urbanicity, defined by the Rural-Urban Continuum Code*, were weighted at the facility level using data from the 455 facilities that completed the full survey and, to produce estimates among all PWH, missing data were imputed at the patient level using data from full survey respondents and 59 facilities that completed an abbreviated version of the full survey.



455 facilities (45%) complete 30-min survey + 59 facilities (6%) abbrv. 5 min survey = 514 HIV care facilities

3,798 MMP respondents

MMP Facility Survey Question:

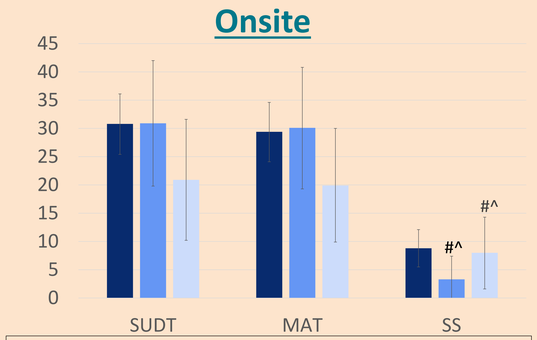
Which of these clinical and supportive services are currently available at the same geographic location (onsite) or through established outside referral relationships? (Choose all that apply.)

1. Substance use disorders treatment (**SUDT**)
2. Medication-assisted treatment (**MAT**) for substance use disorders
3. Syringe services (**SS**)

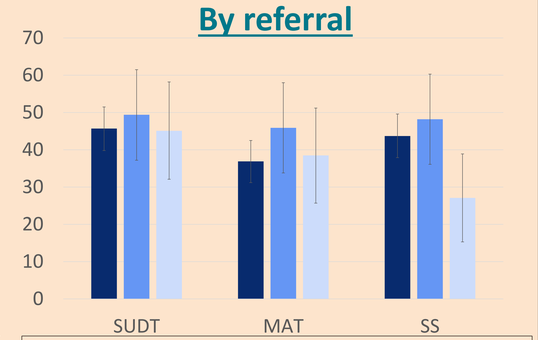
*USDA's rural-urban continuum codes: https://www.ers.usda.gov/data-products/rural-urban-continuum-codes/

Onsite SUD service availability is limited at HIV care facilities and varies by urbanicity, with less availability in smaller counties.

Weighted percentages* of facilities with SUDT, MAT, SS by urbanicity.

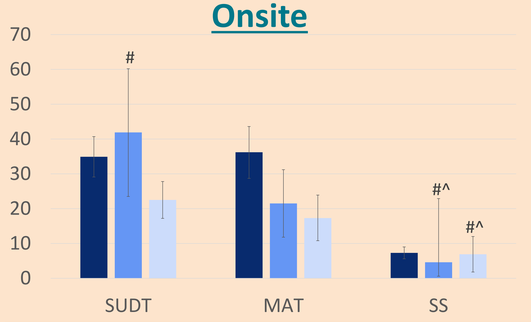


Facilities with onsite SUD services varied by urbanicity (large metro, medium metro, and small/nonmetro), with SUDT at 31%, 31%, 21%, MAT at 29%, 30%, and 20%; and SS at 9%, 3%, and 8%, respectively

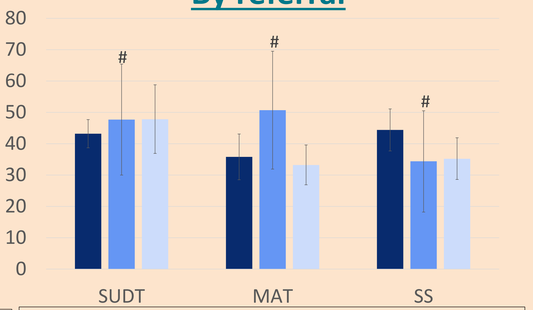


Facilities with established outside referral relationship for SUD services varied by urbanicity (large metro, medium metro, and small/nonmetro), with SUDT at 46%, 49%, 45%, MAT at 37%, 46%, and 39%; and SS at 44%, 48%, and 27%, respectively

Weighted percentages* of PWH receiving HIV care at facilities with SUDT, MAT, SS by urbanicity.



Persons attending facilities with onsite SUD services varied by urbanicity (large metro, medium metro, and small/nonmetro), with SUDT at 35%, 42%, 23%, MAT at 36%, 22%, and 17%; and SS at 7%, 5%, and 7%, respectively



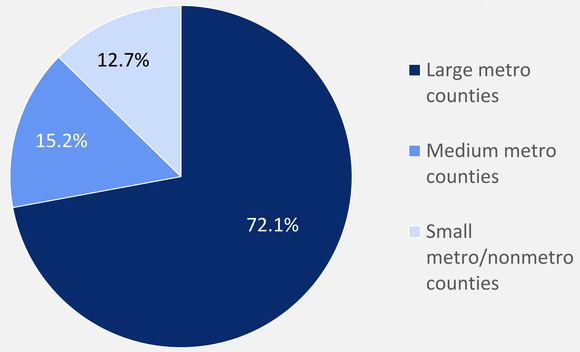
Persons attending facilities with established outside referral relationship for SUD services varied by urbanicity (large metro, medium metro, and small/nonmetro), with SUDT at 43%, 48%, 48%, MAT at 36%, 51%, and 33%; and SS at 44%, 34%, and 35%, respectively

- Large metro: counties in metropolitan areas of 1,000,000 population or more
- Medium metro: counties in metropolitan areas of 250,000 to 1,000,000 population
- Small metro/nonmetro: counties in metropolitan areas of fewer than 250,000 population

*weighted percentages with 95% CIs; ^ Estimate may be unstable due to having a coefficient of variation >=0.3 # Estimate may need to be interpreted with caution due to having an absolute CI width >30 or an absolute CI width between 5 and 30 and a relative CI width >130%.

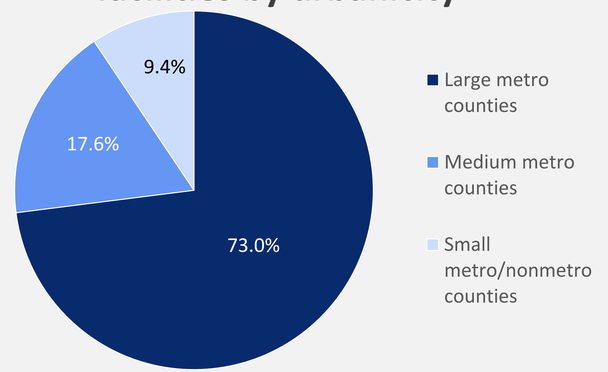
RESULTS

Weighted **percentage** of HIV care facilities by urbanicity



Of facilities attended by MMP respondents, 72% were in large metro counties, 15% were in medium metro counties, and 13% were in small metro/nonmetro counties.

Percentage of PWH receiving care at facilities by urbanicity



Among PWH, 73% attended HIV care facilities in large metro counties, 18% attended facilities in medium metro counties, and 9% attended facilities in small metro/nonmetro counties .

Conclusion

- **In a sample of HIV care facilities, onsite SUD service availability is limited**
  - May vary by urbanicity (less available in small metro/nonmetro counties)
  - Services more often available by referral than onsite
- **Ensuring access to SUD services could help limit risk of HIV outbreaks related to injection drug use, a national priority of the Ending the HIV Epidemic initiative.**

Limitation

- Small sample sizes limited robust assessment of differences between facilities.

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