

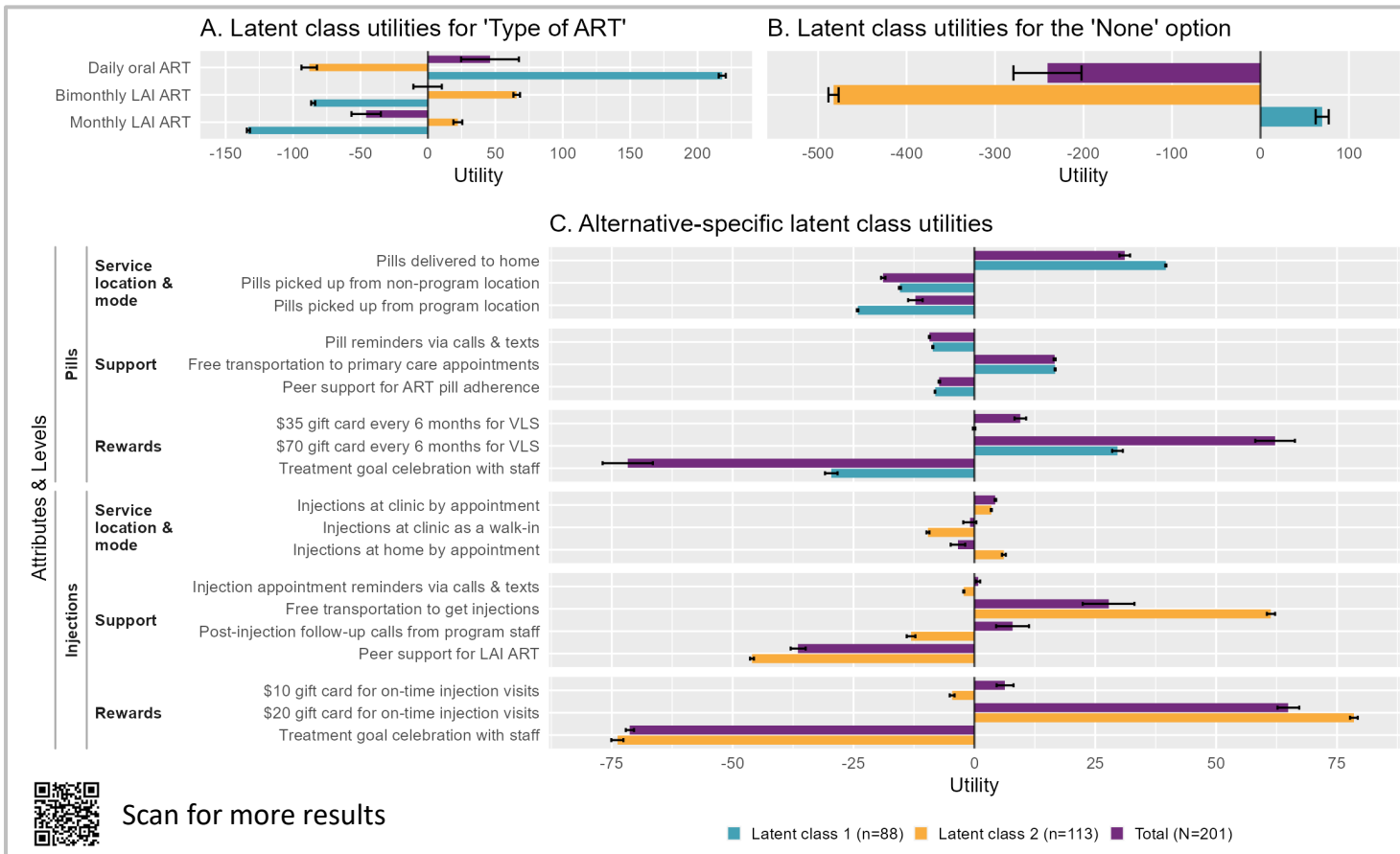


Divergent preferences for type of ART and convergent preferences for treatment support services from a DCE among New York Ryan White medical case management program clients

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OBJECTIVES: Long-acting injectable (LAI) antiretroviral therapy (ART) presents an opportunity to increase viral suppression and reduce outcome disparities. Our project aims to adapt Ryan White HIV/AIDS Program (RWHAP)-funded medical case management (MCM) service strategies to promote equitable LAI ART access, uptake, and adherence.

METHODS: Focus groups with MCM clients informed the design of a discrete choice experiment (DCE) assessing preferences for four attributes: type of ART, service location/mode, support, and rewards. The latter three were alternative-specific attributes, defined according to type of ART (pills or injections). We included a None option to avoid forcing choices between two treatment alternatives presented in each of 12 choice tasks. Using latent class multinomial logit regression, we estimated utilities (measures of preference for levels within attributes) and class membership; positive utilities indicate greater preference. We offered the survey in English, Spanish, and Haitian Creole.



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CONCLUSIONS: We found limited familiarity with LAI ART. Two subgroups had divergent preferences for daily versus LAI ART but convergent preferences for treatment support services. Future work will seek to characterize these groups. To inform regimen selection, we are pilot-testing an informational video and client-provider decision-making tool.

RESULTS: From June 2022 - January 2023, 201 New York RWHAP MCM clients with median age of 56 years (IQR: 42-63) and median MCM enrollment of 31 months (IQR: 12-46) completed the DCE. Most (92%) were Black or Hispanic; 40% identified as women. One-quarter self-reported imperfect adherence to daily ART.

- In the aggregate, clients preferred daily oral ART and were not likely to opt out of choosing one of the two treatment options in each choice task.
- Two-group latent class analysis of the DCE identified a subset of clients (n=88) with a strong preference for daily oral ART and a positive utility for the None option; and a subset (n=113) preferring LAI ART with a large negative utility for the None option.
- Both groups preferred provision of services in their homes, transportation to primary care appointments or injection appointments, and higher-value monetary incentives over other rewards or supports.
- Nine out of ten clients reported currently taking daily ART. Half of clients knew of LAI ART prior to taking the survey, but only 9 (4%) had tried it.

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*The first two authors are equal contributors to this submission; [†]New York City Department of Health and Mental Hygiene; [‡]City University of New York Institute for Implementation Science in Population Health; [§]rebecca.zimba@sph.cuny.edu; ART = antiretroviral therapy; DCE = discrete choice experiment; LAI = long-acting injectable; MCM = medical case management; RWHAP = Ryan White HIV/AIDS Program; IQR = interquartile range; VLS = viral load suppression

