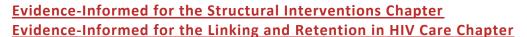
KC LIFE 360





POPULATION

- Persons with HIV (PWH) who are unstably housed, experiencing homelessness, experiencing domestic violence, unemployed or under-employed
- > PWH who are virally unsuppressed, newly diagnosed with HIV, or are out of care

KEY INTERVENTION EFFECTS

Increased viral suppression

BRIEF DESCRIPTION

KC Life 360 is implemented by the Kansas City Health Department in partnership with community agencies to increase employment and housing services for PWH using a two-pronged approach that provides direct client navigation and system-level service coordination. The intervention consists of three core components:

- Employment navigation that includes:
 - o working with an employment navigator who guides participants through the intervention
 - o completing a readiness for employment assessment and developing an individualized employment plan
 - o helping with basic needs (e.g., clothing, transportation, hygiene kits)
- Housing navigation that includes:
 - o working with a housing navigator for emergency assistance (e.g., food, cell phone), short-term housing assistance (e.g., unpaid rent), provision of necessary items to secure permanent housing
- System coordination that consists of a combination of system-level changes and includes:
 - o co-located services
 - o access to a shared system for records keeping and training for navigators
 - monthly coordination meetings for employment and housing navigators
 - o training for medical case managers
 - o a shared system to document client encounters, service referrals, and case notes
 - o electronic records that increase reporting efficiency

DURATION: 12 months

SETTING: Kansas City, Kansas **STUDY YEARS:** 2018 – 2020

STUDY DESIGN: Retrospective cohort

DELIVERERS: Navigators (employment and housing), medical case managers, medical case management data

systems, Kansas City Health Department community agencies

DELIVERY METHODS: Case management, Navigation services, Transportation

STUDY SAMPLE

The baseline study sample of N = 87 participants was characterized by the following:

• 56% Black or African American persons

20% White persons

10% Hispanic, Latino, or Latina persons

13% persons who identify as another

race/ethnicity

Note: Percentages may not add up to 100% due to rounding.

- 76% male persons
- 21% female persons
- 3% transgender persons or persons identifying as another gender
- Mean age = 36 years

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STRUCTURAL COMPONENTS

- Capacity Building Technology
 - Employment and housing data were added to medical case management data systems to improve coordination between providers
 - Use of electronic medical records allowing for efficient reporting to local HIV service organizations on client demographics, service utilization, and outcomes
- Capacity Building Training
 - o Medical case managers trained on beneficial impacts of housing and employment on client's health
- Physical Structure Integration of Services
 - o Housing and employment staff were located at the same location providing ease of use for participants
- Social Determinants of Health Survival
 - Navigation services that provided stable housing and employment opportunities, basic needs assistance with overcoming barriers to housing

KEY INTERVENTION EFFECTS (see **Primary Study** for all outcomes)

• Viral suppression improved from baseline to follow-up, with more individuals being virally suppressed (67.4% vs. 81.5%, Odds Ratio (OR) = 1.6; p < 0.05).

CONSIDERATIONS

- Housing improved from baseline to follow-up, with more individuals reported having stable housing (OR = 23.5; p < 0.001).
- Employment improved from baseline to follow-up, with more individuals reporting full-time employment (OR = 1.9; p < 0.001).
- Retention did not significantly improve from baseline. Retention in care decreased from baseline to 6 months follow up (35.3 % to 12.6%) and increased from 6 months to 12 months (12.6% to 31.5%).
- While not statistically different, it seems that those individuals who were virally suppressed and/or retained in care at baseline were retained more in the intervention over time.

ADVERSE EVENTS

The author did not report adverse events.

FUNDING

The funding was supported by the Special Projects of National Significance Initiative, Improving Health Outcomes Through the Coordination of Supportive Employment & Housing Services, Health Resources and Services Administration, U.S. Department of Health and Human Services (KCHD: 89HA00028).

PRIMARY STUDY

Lightner, J. S., Barnhart, T., Shank, J., Adams, D., Valleroy, E., Chesnut, S., & Rajabiun, S. (2022). <u>Outcomes of the KC life 360 intervention: Improving employment and housing for persons living with HIV</u>. *PLoS ONE, 17*(9), e0274923. doi: 10.1371/journal.pone.0274923.

PLEASE CONTACT STUDY AUTHOR FOR TRAINING AND INTERVENTION MATERIALS.

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