

KC LIFE 360



Evidence-Informed for the Structural Interventions Chapter
Evidence-Informed for the Linking and Retention in HIV Care Chapter

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:
 - working with an employment navigator who guides participants through the intervention
 - completing a readiness for employment assessment and developing an individualized employment plan
 - helping with basic needs (e.g., clothing, transportation, hygiene kits)
- Housing navigation that includes:
 - 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:
 - co-located services
 - access to a shared system for records keeping and training for navigators
 - monthly coordination meetings for employment and housing navigators
 - training for medical case managers
 - a shared system to document client encounters, service referrals, and case notes
 - 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
- 76% male persons
- 21% female persons
- 3% transgender persons or persons identifying as another gender
- Mean age = 36 years

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

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
 - Medical case managers trained on beneficial impacts of housing and employment on client's health
- Physical Structure – Integration of Services
 - 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.

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PRIMARY STUDY

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

PLEASE CONTACT STUDY AUTHOR FOR TRAINING AND INTERVENTION MATERIALS.

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