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2025 SUMMIT

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Integrated Chronic Care:

Positioning HIV within a Whole-Health Framework

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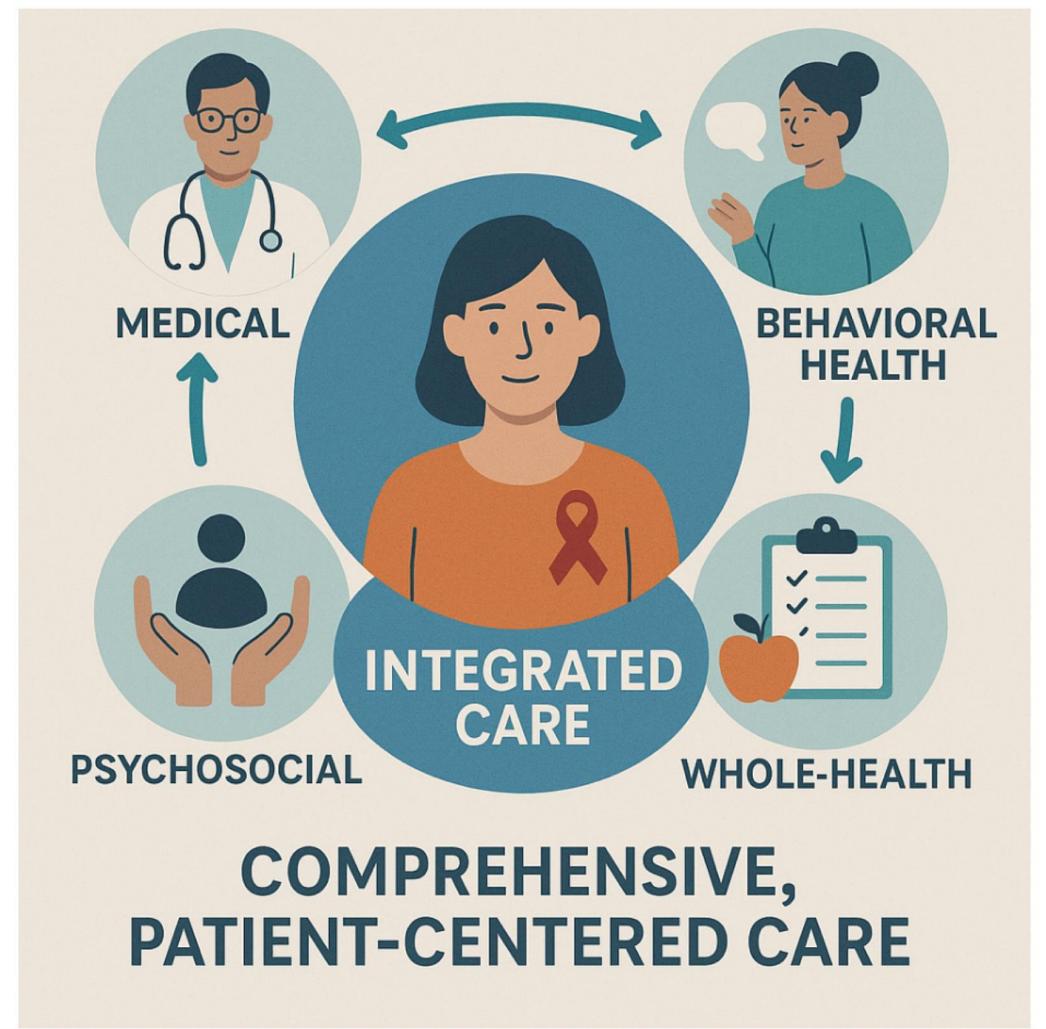






Integrated Chronic Care for PLWH: Overview

- Integrated care is a coordinated, multidisciplinary approach that addresses the medical, psychosocial, and behavioral health needs of PLWH within a whole-health framework, supporting comprehensive, patientcentered care.
- It aims to improve health outcomes and quality of life for those with complex chronic needs.





Objectives

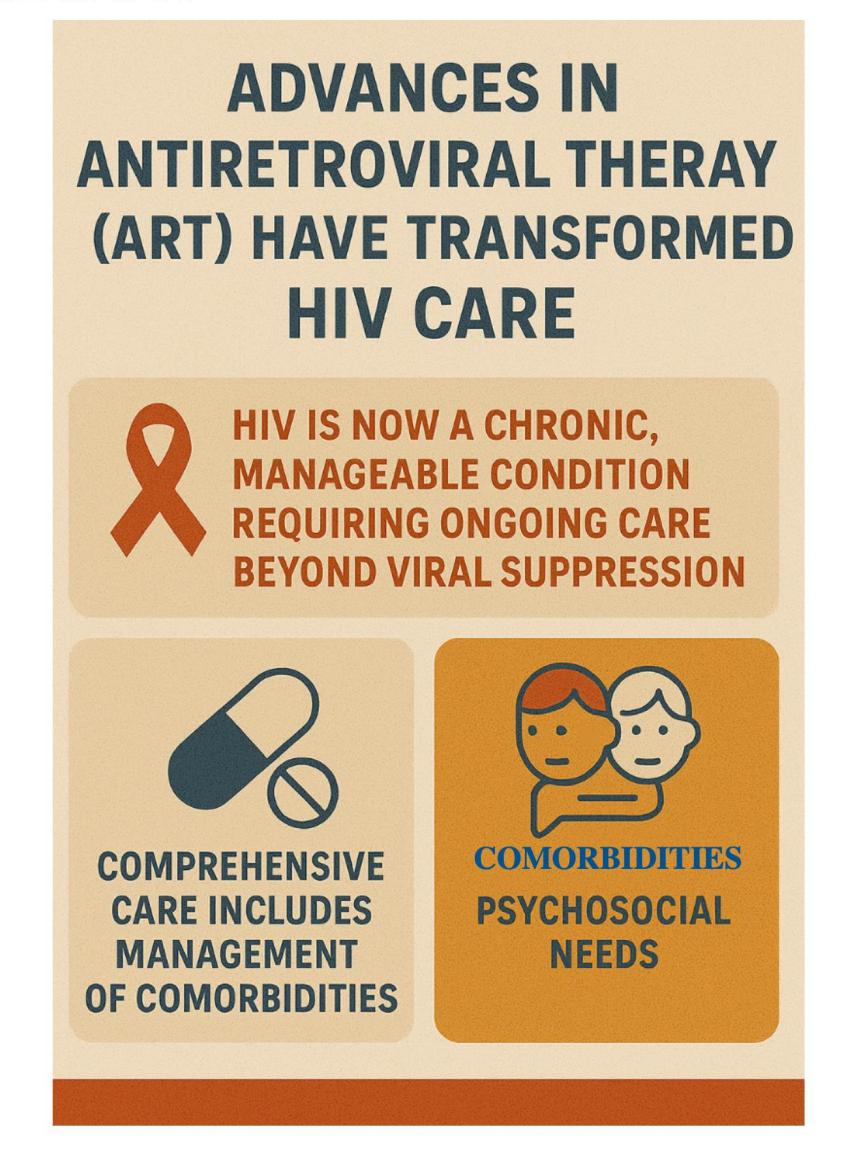
- Understand the importance of integrated, patient-centered care for PLWH
- Explore how patient-centered care improves clinical outcomes, reduces stigma, and advances health equity
- Highlight the shift from HIV as a fatal disease to a manageable chronic condition





HIV: From Acute Illness to Chronic Condition

- Advances in antiretroviral therapy (ART) have transformed HIV care
- HIV is now a chronic, manageable condition requiring ongoing care beyond viral suppression
- Comprehensive care includes management of comorbidities and psychosocial needs





The Need for a Holistic Approach

- HIV intersects with other chronic conditions: cardiovascular disease, diabetes, mental health, and substance use
- Integrated care reduces barriers and stigma, improves engagement, and long-term health
- Holistic care: integrating HIV services with primary care, behavioral health, and social support

THE NEED FOR A HOLISTIC APPROACH

HIV INTERSECTS
WITH OTHER
CHRONIC
CONDITIONS:
CARDIOVASCULAR
DISEASE, DIABETES,
MENTAL HEALTH,



HOLISTIC CARE:
INTEGRATING HIV
SERVICES WITH
PRIMARY CARE,
BEHAVIORAL HEALTH
AND SOCIAL SUPPORT

INTEGRATED CARE REDUCES
BARRIERS AND STIGMA, IMPROVES
ENGAGEMENT AND LONG-TERM HEALTH



- Co-location of HIV, primary care, behavioral health streamlines screening and mental health and substance use management.
- Telehealth and mobile health platforms: expand access for marginalized groups, maintain care continuity during disruptions.
- Community-led care models involve PLWH in program design, increasing trust, reducing stigma, and boosting engagement.
- Rapid ART initiation and differentiated service delivery: shortens time to viral suppression and improves retention.





- Co-location of services:
 - Integrating people-centered HIV care within primary care succeeds by combining workforce models, policies, and community engagement.
 - Experts at IAS 2025 highlighted that co-location enables coordinated screening and interventions, with government reforms in countries like Kenya showing real-world success in improving access and equity. IAS2025





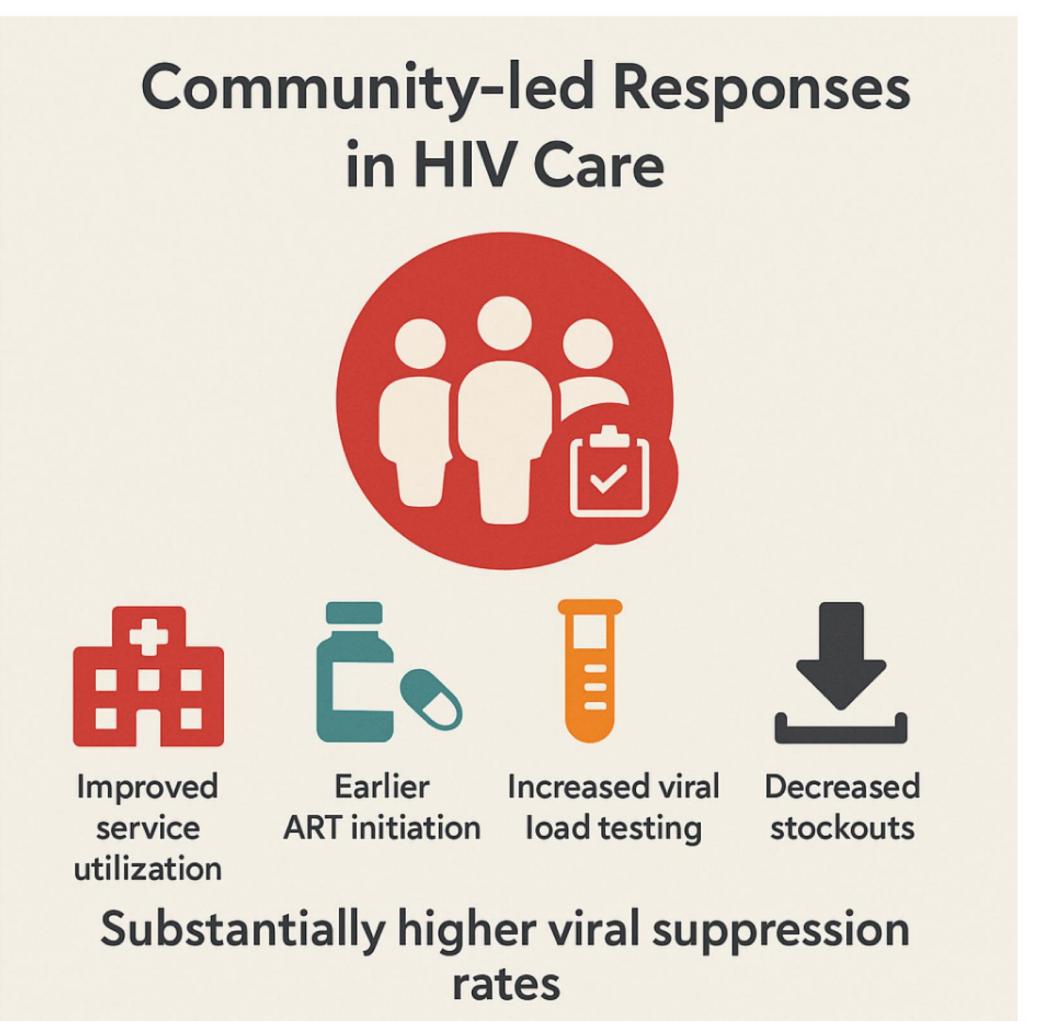
- Telehealth and mobile health platforms:
 - Recent reviews and case studies show telemedicine is crucial for bridging care gaps in rural and marginalized groups, enhancing service use, adherence, and confidentiality.
 - Evidence from Georgia and similar settings demonstrates that telemedicine-supported models can increase viral suppression and PrEP uptake beyond traditional in-person care



TELEMEDICINE-SUPPORTED MODELS CAN INCREASE VIRAL SUPPRESSION AND PrEP UPTAKE BEYOND TRADITIONAL-IN-PERSON



- Community-led models:
 - Community-led HIV responses like treatment/health observatories improve service use, lead to earlier ART, more viral load testing, fewer stockouts, and higher suppression rates.
 - Policy briefs and global networks show that community-led monitoring and engagement improve retention, adherence, and overall health infrastructure.





- Peer- and Community-Led HIV Responses: Evidence Review
 - Peer-led HIV programs improve knowledge, attitudes, and health outcomes.
 - Peer/community models improve access, retention, and structural outcomes in 48 studies.
 - UN aims for 30% of HIV testing/treatment and 80% of prevention programs to be community-led by 2025, but scaling faces challenges.
 - Authors suggest involving peer/community leaders in HIV prevention and treatment to reach global targets faster.





- Rapid ART initiation & differentiated service delivery:
 - Implementation science shows that integrating organizations and sitespecific protocols like Medical-Legal Partnerships enable rapid ART and scalable, tailored care.
 - These strategies boost suppression speed and retention through careful cross-sector efforts.







- Social Barriers and Health Equity
 - A 2024 study using data from three southern US HIV programs found that lacking insurance, housing insecurity, unmet basic needs, and low social integration directly predicted lower engagement with HIV care.
 - Care management programs for housing-insecure or rural patients showed better retention when linked with social supports.

Social Barriers: Housing Insecurity, Food Access, **Transport Challenges Heavily Impact Care Retention**

J Int Assoc Provid AIDS Care. 2024 May 30 RAPID RESPONSE SERVICE | #185, MARCH 2025



- Care Coordination and Social Support
 - Systematic reviews show that programs targeting social determinants like housing, food, transportation, along with care coordination and community partnerships, improve care retention and viral suppression.
 - Models with intensive case management and social support significantly improve engagement, especially for marginalized groups.

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INTEGRATED PROGRAMS



Addressing
Care Coordination
and Social Supports

- Workforce Diversity, Cultural
 Competence, and Patient Involvement
 - Racial, ethnic, and cultural diversity in HIV workforce improves health equity and reduces disparities in care outcomes.
 - Diverse teams can better address social-structural barriers and stigma, and culturally competent care increases patient trust and engagement.

Health Educ Behav. Author manuscript; available in PMC: 2024 Sep 16. https://doi.org/10.1016/j.hpe.2020.01.002



- Stigma Mitigation Strategies
 - Systematic reviews and RCTs show effective stigma reduction methods like cognitive behavioral therapy, empowerment, youth peer mentoring, group interventions, and client-centered counseling.
 - These strategies lower HIV self-stigma and boost medication adherence.
 - Real-world examples show reduced stigma and better health through integrated psychological support and inclusive care.



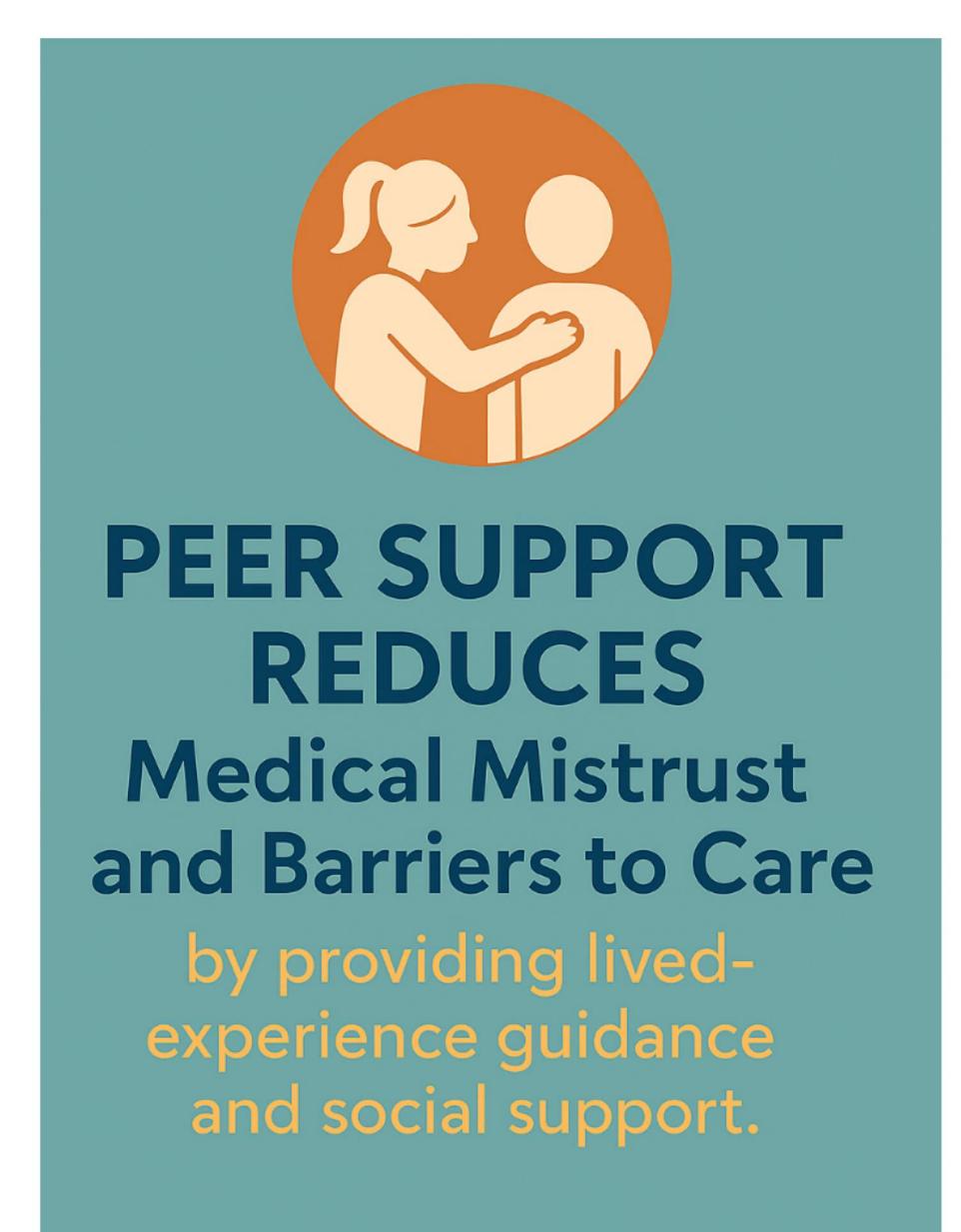


- Nurses in adherence counseling and symptom monitoring:
 - A 2024 study found a positive correlation between nurses acting as counselors and higher adherence to ART among people living with HIV, emphasizing the critical role nurses play in promoting healthy behaviors and medication adherence.
 - Nurse kindness, confidentiality, and acceptance are key to perceived quality HIV care and patient engagement.





- Social workers and peer navigators:
 - Peer navigators and community health workers improve linkage to care, retention, medication adherence, and viral suppression, especially among marginalized populations.
 - Peer support reduces medical mistrust and barriers to care by providing lived-experience guidance and social support.





- Mental health specialists integrated into care:
 - Integration of mental health services into HIV care improves diagnosis and treatment of depression, anxiety, and substance use.
 - Studies report better clinical outcomes, reduced stigma, improved social functioning, and higher care engagement with mental health and HIV services co-located or coordinated.

AIDS. 2019 Apr 9;33(9):1411-1420.





Outcomes & Cost-Effectiveness of Integrated HIV Care



Outcomes & Cost-Effectiveness of Integrated HIV Care

- Integrated care models significantly increase viral suppression, retention in care, and reduce hospitalizations, improving overall patient health and reducing complications.
- The Patient-Centered HIV Care Model demonstrates cost savings, costing ~\$5,000 per patient achieving viral suppression while averting transmissions, saving 12+ QALYs, and preventing nearly \$1.3 million in lifetime HIV treatment costs, proving integrated care is both effective and economically advantageous.

PLoS Med. 2021 Nov 9;18(11):e1003836. Acquir Immune Defic Syndr. 2020 Nov 1;85(3):e48–e54

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Conclusion: Key Takeaways on Integrated Chronic Care for PLWH



Conclusion: Key Takeaways on Integrated Chronic Care for PLWH

- HIV is now a chronic, manageable condition, but PLWH face early and frequent comorbidities requiring holistic care beyond viral suppression.
- Integrated care models coordinate HIV treatment with primary care, behavioral health, and social supports, improving outcomes and equity.
- Multidisciplinary teams—including nurses, social workers, mental health professionals, and peer navigators—are essential to enhance adherence, mental health, and social needs.
- Robust evidence shows integrated care boosts viral suppression and retention, reduces hospitalizations, and is cost-effective, supporting wider adoption.





