

CFAR Substance Use Research Core (SURC) Faculty Publication and New Awards Digest

New research on HIV and substance use by our SURC faculty.

If you have any other publications or awards, please send them to <u>Natalia</u> <u>Gnatienko</u> to include in the next publication digest!

Please remember to cite CFAR support (P30Al042853) on your future publications!

Visit the SURC webpage

Upcoming Events

International URBAN ARCH Center Visiting Scholar Research-in-Progress Webinar Join us to hear Dr. Geetanjali Chander present progress and emerging results from the <u>Alcohol Research Consortium in HIV (ARCH)</u> P01 program. Register <u>here</u> to join the webinar on Wednesday, May 28 from 1-2pm ET / 12-1pm CT / 10-11am PT.

New Publications

Innovations to Address Unmet Behavioral Health Needs in National Ending the HIV Epidemic Priority Jurisdictions. <u>J Acquir Immune Defic Syndr</u>. 2025 Apr 15;98(5S):e146-e155.

Brown LL, Batchelder AW, Gondré-Lewis MC, Willie TC, Chwastiak LA.

People who have behavioral health disorders are disproportionately represented among people with HIV and those likely to be diagnosed with HIV. Despite repeated calls for the past decade for the integration of behavioral health into the HIV Care Continuum, findings from priority jurisdictions show these efforts lag. We present 5 examples of efforts to integrate behavioral health services into the HIV Care Continuum, across regions and populations in Ending the HIV Epidemic priority regions. Across diverse settings, care provision-screening, assessment, referrals, and treatments-remains insufficient. Consistent, ongoing actions are needed to address the compounded consequences of the HIV and behavioral health synergistic epidemics, or syndemic. The studies in this article involved local communities, provider groups, and people with lived experience of trauma,

serious mental illness, neuropsychological disorder, substance use disorder, and HIV. These example studies reveal significant unmet needs for behavioral health care and/or HIV prevention and treatment in these priority communities. A common finding among these examples was that the success of interventions hinges on the extent to which interventions are tailored to local contexts and the specific needs of historically underserved populations, including Black women, the socioeconomically disadvantaged, LGBTQIA+ individuals, and people with serious mental illness and/or substance use disorders. We suggest recommendations for how Ending the HIV Epidemic efforts can be optimized to adapt and implement integrated HIV and behavioral health care to advance national goals.

HIV Pre-exposure Prophylaxis Prescription Initiation and Maintenance Among Homeless-Experienced People Who Use Drugs. <u>J Acquir Immune Defic Syndr</u>. 2025 Mar 1;98(3):234-241. PMCID: PMC11854316.

Eger WH, Shaw LC, Biello KB, Lopez C, Brody JK, Bazzi AR.

Background: HIV pre-exposure prophylaxis (PrEP) remains particularly underused among homeless-experienced people who use drugs (PWUD).

Setting: Boston Health Care for the Homeless Program, a Federally Qualified Health Center serving homeless-experienced individuals in Boston, Massachusetts.

Methods: To identify determinants of PrEP prescription initiation and continuation, we analyzed electronic medical records and pharmacy data between April 2018 and March 2022. Participants were HIV-negative and reported sexual, drug, or community-related HIV exposures. Adjusted multinomial logistic regression explored associations between sociodemographics, social vulnerabilities, behavioral factors (eg, injection drug use), and mental health and substance use disorder diagnoses with filling of 1 and more than 1 PrEP prescription.

Results: Among 509 participants, mean age was 38 years, 28% were women, 19% were Black, and 24% were Hispanic/Latino. At program enrollment, most were experiencing homelessness (92%), injecting drugs (78%), and living with a mental health disorder (71%). In multivariable-adjusted models, injection drug use was positively associated with filling 1 and more than 1 PrEP prescription (adjusted odds ratio [AOR]: 2.88, 95% confidence interval [CI]: 1.33 to 6.26; and AOR: 3.60, 95% CI: 2.02 to 6.42, respectively). Participants with opioid use disorder and generalized anxiety disorder were more likely to fill 1 and more than 1 prescription, whereas those with bipolar disorder were less likely to fill 1 prescription. No sociodemographic characteristics, sexual behaviors, or other mental health or substance use disorders were associated with study outcomes.

Conclusions: A low-threshold, harm reduction-oriented PrEP program supported prescription initiation and continuation for homeless-experienced PWUD. Implementation research is needed to facilitate scale-up of this approach.

Feasibility and Acceptability of the Sense2Quit App for Improving Smoking Cessation in PWH. <u>AIDS Behav</u>. 2025 Feb 25.

Schnall R, Huang MC, Brin M, Cioe PA, Liu J, Das A, Fontalvo S, Xu W.

An estimated 34-47% of PWH in the US report cigarette smoking, three to four times the prevalence observed in the U.S. adult population. Given the dearth of smoking cessation interventions for PWH, our study team used community based participatory feedback to design and develop the Sense2Quit App, an mHealth app linked to a smartwatch, whose sensor technology provides for collection of hand gesture movements to detect when a participant lifts their hand to smoke a cigarette. Participants receive messages through the app to encourage their quit attempts and maintenance of smoking cessation. The goal of this feasibility study was to conduct a randomized feasibility study in 60 PWH living in NYC to assess the feasibility and acceptability of the Sense2Quit App for smoking cessation. Findings from this study suggest that the intervention was highly feasible and acceptable in this population. There was high acceptability with only 1 participant withdrawing from the trial and overall app usage increasing over the course of the study. Participants wore the sensor and used the app and rated it as highly usable. The high retention rate and engagement with the app supports the overall acceptability of this approach.