

“Driving Progress to Zero”: Overcoming transportation vulnerability among individuals re-engaging in HIV care in Columbia, South Carolina through an innovative ride-sharing program

BACKGROUND

Social determinants of health are the physical conditions where people grow and develop, as well as the interconnected social and economic systems that promote or inhibit positive health.^{1,2} Social determinants, including housing and transportation vulnerability are important—yet understudied—barriers to HIV care and, as such, are critical when considering new strategies, tools, and interventions for improving the HIV care continuum.

In the Southern United States (US), people living with HIV (PLHIV) are less likely to receive timely HIV care, more likely to fall out of care, and subsequently have death rates three times that of non-Southern US states.^{3,4} The Southern US is also characterized by high poverty rates and inadequate public transportation infrastructures.³ Therefore, the current study sought to address underlying barriers to care—including transportation-related barriers—in order to improve engagement in care and viral suppression rates among PLHIV and reduce current regional HIV disparities.

METHODS

A transportation pilot project was implemented at a large immunology center in Columbia, South Carolina—a *Fast-Track City* that is also a priority area for the new federal *Ending the HIV Epidemic (EHE)* initiative. Participants included PLHIV who were either re-engaging in HIV care or currently engaged but not virally suppressed. All participants self-reported transportation vulnerability. Participants were randomly assigned to receive either 1) a concierge rideshare transportation intervention or 2) standard of care transportation services (e.g., bus passes, Medicaid van).

Semi-structured interviews were completed with 20 participants currently enrolled in the pilot project to learn about how their transportation vulnerability impacted their HIV care. Participants were also queried about the feasibility of the concierge rideshare transportation intervention. All interviews were audio-recorded, transcribed verbatim, and exported into Dedoose. Two trained coders used a deductive and inductive approach to identify common themes.

RESULTS

Emergent themes and illustrative quotes on transportation vulnerability are presented below.

Lack of access to reliable, safe, and affordable public transportation is a barrier to care

“The problem is transportation. It’s not that they don’t want to come, we don’t have a steady ride to get back and forth”

“If we had...a bus or something to help us to where if [my doctor] wanted me to come in...at least I would have that option. Now that’s something I could afford. To even come here with, but with you don’t even have that.”

HIV-related and poverty-related stigma are barriers to care

“Mostly, people don’t know you have HIV, so I ain’t pulling out no paperwork saying I’ve got HIV. Cause right then, they gonna build an opinion, you ain’t getting in that car then.”

“Even a cab, you know, you say you’re going there, they want to see 20 bucks off the top. You got to show them some money before you can get in the cab.”

Transportation-related barriers hinder care and worsen physical and mental health

“You’re standing there waiting on a certain bus to come and it don’t show up and it just throws your whole schedule off plan, so you have to call in, cancel your appointment and they have to reschedule you to another appointment.”

“Cause if I can’t make it, I can’t, especially if I have labs done, I got to come back and see...so I mean, that’s frustrating too cause I can’t make my doctor’s appointments and I always like to make my doctor’s appointments cause they’re helping me”

A concierge ride-sharing service was deemed reliable, safe, convenient, and acceptable

“Cause as long as we’ve got Lyft [ride-share program], a lot of us patients will come to the doctor. If we guarantee a ride and a ride back, we will come”

“I really like it because they [ride-sharing program] on time, they tell you, okay look for such you know black such and such, it’s very safe for me, I, it’s very very safe, and it’s also convenient.”

Emotional and instrumental support from family and friends helps overcome

“My grandmother knows, my uncle knows, my mom knows that I’m HIV positive. They know when I’ve got a doctor’s appointment, they ‘do you have a ride there?’ I say ‘yeah, I got a ride there’ and they say ‘okay, just be safe and make it back up here.’”

DISCUSSION

Addressing transportation-related barriers is critical to reduce current HIV disparities in the Southern US. This study provides support for ride-sharing programs for PLHIV and offers suggestions for their implementation. Innovative programs are needed to overcome transportation-related challenges, as well as address related psychosocial and economic needs to ensure PLHIV are able to engage in their care, as well as reach and maintain viral suppression.