

MEDICAL NUTRITION THERAPY

Medical nutrition therapy provides nutrition supplements and nutritional counseling to persons living with HIV (PLWH) outside of a primary care visit by a licensed registered dietician based on physician recommendation and a nutrition plan. The purpose of such services can be to address HIV-associated nutritional deficiencies or dietary needs as well as to mitigate medication side effects.

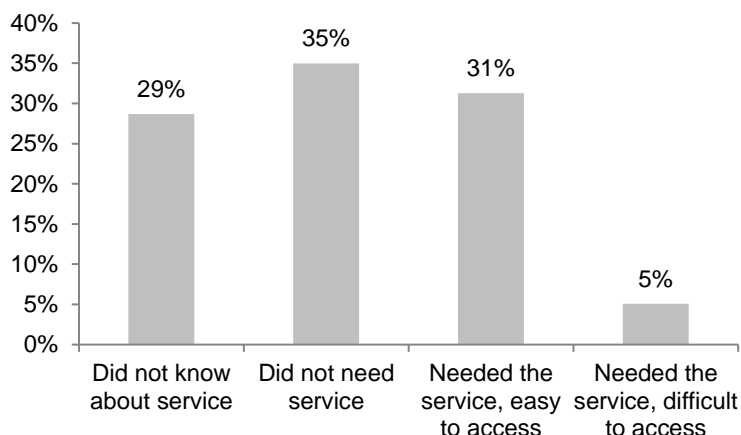
(**Graph 1**) In the 2020 Houston HIV Care Services Needs Assessment, 36% of participants indicated a need for *medical nutrition therapy* in the past 12 months. 31% reported the service was easy to access, and 5% reported difficulty. 29% stated that they did not know the service was available.

(**Table 1**) When barriers to *medical nutrition therapy* were reported, the most common barrier type was education and awareness (35%) Education and awareness barriers reported include lack of knowledge about service availability, what the service entails, and who to contact to access the service.

TABLE 1-Top 3 Reported Barrier Types for Medical Nutrition Therapy, 2020

	No.	%
1. Education and Awareness (EA)	8	35%
2. Eligibility (EL)	6	26%
3. Interactions with Staff (S)	4	17%

GRAPH 1-Medical Nutrition Therapy, 2020



(**Table 2 and Table 3**) Need and access to services can be analyzed for needs assessment participants according to demographic and other characteristics, revealing the presence of any potential disparities in access to services. For *medical nutrition therapy*, this analysis shows the following:

- More female than males found the service accessible.
- More Hispanic/Latino PLWH than other race/ethnicities found the service accessible.
- More PLWH age 18 to 24 found the service accessible than other age groups.
- In addition, more homeless PLWH found the service difficult to access when compared to all participants.

TABLE 2-Medical Nutrition Therapy, by Demographic Categories, 2020

Experience with the Service	Sex (at birth)		Race/ethnicity				Age		
	Male	Female	White	Black	Hispanic	Other	18-24	25-49	50+
Did not know about service	29%	28%	24%	28%	31%	27%	19%	35%	20%
Did not need service	35%	33%	36%	35%	36%	27%	71%	30%	39%
Needed, easy to access	31%	33%	36%	31%	31%	38%	10%	29%	37%
Needed, difficult to access	5%	6%	4%	6%	2%	12%	0%	6%	4%

TABLE 3-Medical Nutrition Therapy, by Selected Special Populations, 2020

Experience with the Service	Homeless ^a	MSM ^b	Out of Care ^c	Recently Released ^d	Rural ^e	Transgender ^f
Did not know about service	29%	31%	35%	41%	43%	17%
Did not need service	37%	36%	45%	28%	40%	54%
Needed, easy to access	24%	29%	16%	30%	17%	29%
Needed, difficult to access	10%	4%	3%	2%	0%	0%

^aPersons reporting current homelessness ^bMen who have sex with men ^cPersons with no evidence of HIV care for 12 mo.

^dPersons released from incarceration in the past 12 mo. ^eNon-Houston/Harris County residents ^fPersons with discordant sex assigned at birth and current gender