

Developing Training Modules for PCPs to Address Systemic Inequities in HIV and COVID-19 Vaccine and Screening Practices

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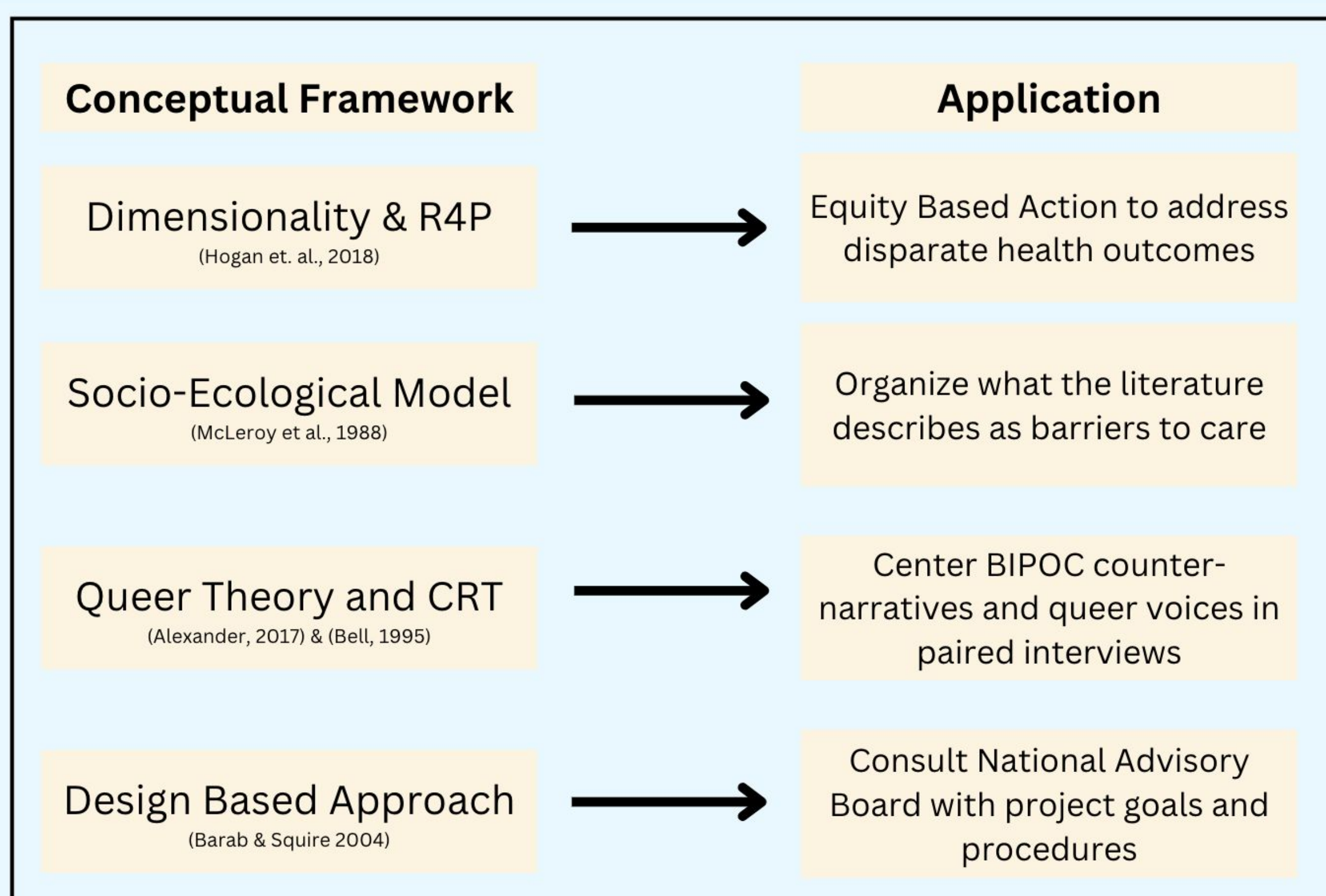
Background

- Racial, ethnic, sexual, and gender-minoritized patients have been disproportionately impacted and stigmatized by the convergence of **human immunodeficiency virus (HIV)** and **coronavirus disease 2019 (COVID-19)**.¹ To address disparate HIV and COVID outcomes, **equity-based action in medical training** is required to dismantle the structural and historical conditions of the respective disparities.²
- The **Two-in-One Model** has employed the **Dimensionality and R4P Health Equity framework** to train Primary Care Practitioners (PCPs) to routinize HIV PrEP/PEP and COVID vaccine screening for all patients and engage in **culturally responsive communication (CRC)** with their minoritized patients.

Purpose

- To achieve this goal, Two-in-One has created a training series that guides PCPs to **remove** discriminatory structures, **repair** historical trauma, **restructure** institutional change, **remediate** current harms, and **provide** culturally responsive care that addresses intersectional disadvantages (Hogan et. al., 2018).
- This series came in two parts: a nine-part monthly live webinar and an online, asynchronous, self-paced course.** All of the training topics historicize and contextualize barriers to care disparities that **racial, ethnic, sexual, and gender-minoritized patients face.**

Methods



- The conceptual framework was utilized to develop the PCP training modules learning objectives, required readings, patient care tool kit, and retrospective survey.

Results

Table 1. Nine Asynchronous Course Modules

Module #	Module Title	Speakers other than Maranda Ward, EdD
1	Confronting U.S. History: We must End Racism to End Disparities	Nikole Hannah-Jones
2	Culturally Responsive Communication in Clinical Care	Susan LeLacheur, DrPH Lalit Narayan, MD
3	How Clinicians Shape Community Narratives on HIV and COVID	Oni Blackstock, MD
4	Restoring Patient Trust Through a Health Justice Approach	Clover Barnes, RN, MSN
5	We Test Everyone, Unless You Say No: State Level HIV Opt Out Testing and Screening Guidelines	Philip Alberti, PhD
6	Primary Care IS Prevention: Why PrEP and PEP Belong in the Primary Care Setting	Adedotun Ogunbajo, PhD
7	Culturally Responsive Communication, Part II: Sharing Power with Patients	Stephen Lee MD, MA Edwin Corbin-Gutierrez, MA
8	Combatting PCP Burnout with Emergent Infections	Leon McCrea II, MD, MPH
9	Culturally Responsive Communication, Part III: Language and Literacy Access	Joaquín Carcaño

Screenshot of the Asynchronous Course Module on Culturally Responsive Communication in Clinical Care

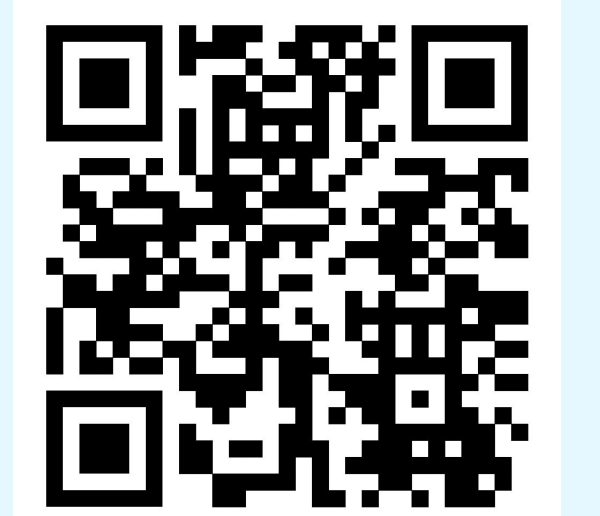
Discussion

- The first five of the nine modules have been launched. Each module comprises of the expert presentation, readings, supplemental resources, policy papers, and retrospective pre/post tests.
- Applying the conceptual framework allowed the teams to build out the modules using evidence, first-hand experiences, and expert opinions.
- Data will be collected by evaluating responses from a retrospective survey that assesses changes in knowledge, attitudes, and skills related to routinizing COVID-19 vaccine and HIV screening as well as overall course satisfaction. The number of registrants, attendees, and CME credit claims will also be counted.

Conclusion

- The training series helps PCPs build the capacity to tackle historical harm and structural discrimination while integrating CRC into care, and offers a structural solution to address health disparities.

Using the QR code, PCPs, allied health professionals, or pipeline health professions students can enroll in the 2in1 trainings.



Acknowledgements

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