



Supporting Physician Assistants with Culturally Responsive HIV and COVID Screening

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BACKGROUND

- With a global focus on COVID, HIV prevention efforts are being deprioritized, harming BIPCO and LGBTQIA+ patient populations disproportionately impacted by both pandemics.
- Physician Assistants (PAs) must provide HIV screening, COVID vaccination screening, and regular preventative care to all patients, but especially communities of high risk.
- Culturally responsive communication (CRC) refers to PAs' ability to engage with patients "based on views of culturally diverse patients rather than the views of health care professionals" (Tucker, et al. 2011). Cultural responsiveness includes valuing diversity within the community; institutionalizing cultural awareness; and adapting to best serve the community by creating policies, systems, administrations, and protocols that allow for cross-cultural
- Correspondingly, the Dimensionality and R4P Health Equity Frameworks, Social Ecological Model, Critical Race Theory, Queer Theory and design-based research, inform the concurrent data collection informing the design of training and subsequent practice recommendations for Primary Care Practitioners (PCPs) to promote CRC related to HIV and COVID screening.

PURPOSE

- Our research informed national training model for PCPs (e.g., PAs in family/internal medicine) aims to routinize HIV and COVID vaccine screening for all patients.
- The training module, PCP toolkit, and subsequent practice recommendations, will build capacity around screening all patients for HIV status and COVID vaccine status.
- Specifically, we support PAs by providing education on culturally responsive communication (CRC) on HIV and COVID vaccines to racial, ethnic, sexual and gender minoritized patients.

METHODS

Qualitative Interviews:

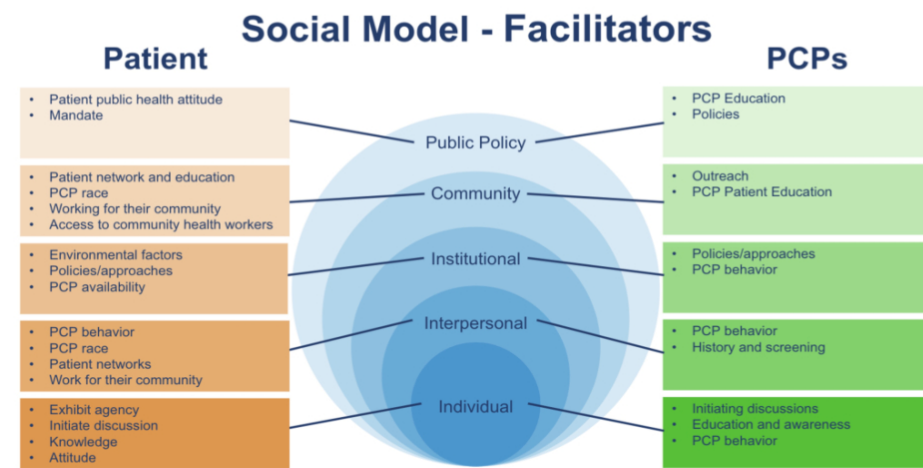
- From August 2022 to Dec 2022, the team conducted semi-structured interviews with 11 patients and 6 PCPs representing diverse professional and patient perspectives across the US. Critical linguistic analysis guided analysis of transcripts. Barriers and Facilitators are presented in Figures 1 and 2.

Scoping Reviews:

- Two scoping reviews are being conducted to map existing literature regarding culturally responsive HIV screening and preventative care and COVID vaccination screening in the primary care setting. Critical linguistic analysis is guiding analysis of literature.. Resulting themes will inform training content, PCP toolkit and policy recommendations.
- Guiding Questions:
 - How is culturally responsive communication between patient and provider related to COVID vaccination and booster screening occurring for marginalized populations?**
 - What factors influence culturally responsive HIV and PrEP screening for historically marginalized populations?**

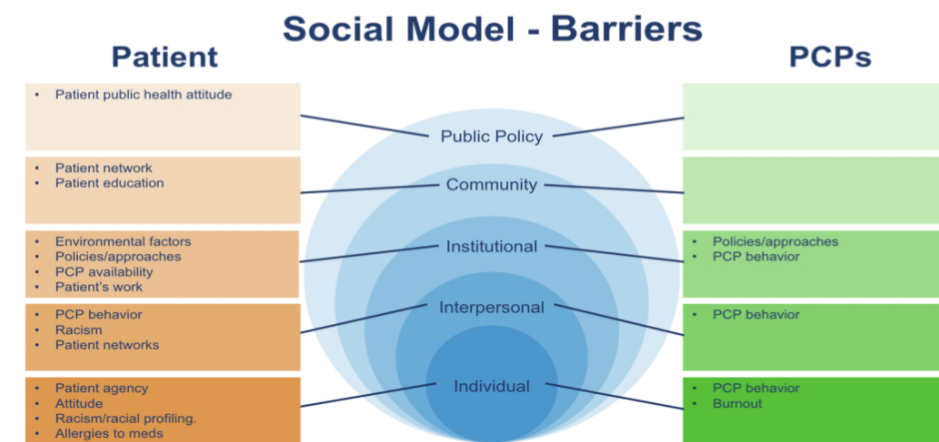
RESULTS: INTERVIEWS

- Analysis of factors that patients and PCPs identify as important for receiving quality HIV & COVID prevention and/or care yielded the barriers and facilitators to CRC in Figures 1 & 2.
- PCPs are largely **unaware** and/or unfamiliar with patient experiences and perceptions..
- PCPs attend to individual-based, institutional-based, and policy-based **facilitators** to care (i.e. overlooking interpersonal-based and community-based facilitators). Patients and PCPs align on the community-based **barriers** to care.



Adapted from McLeroy, K. R., Steckler, A. and Bibeau, D. (Eds.) (1988). The social ecology of health promotion interventions. Health Education Quarterly, 15(4):351-377.

Figure 1. Qualitative Analysis of Facilitators to CRC



Adapted from McLeroy, K. R., Steckler, A. and Bibeau, D. (Eds.) (1988). The social ecology of health promotion interventions. Health Education Quarterly, 15(4):351-377.

Figure 2. Qualitative Analysis of Barriers to CRC

FUNDING/REFERENCES/CONTACT

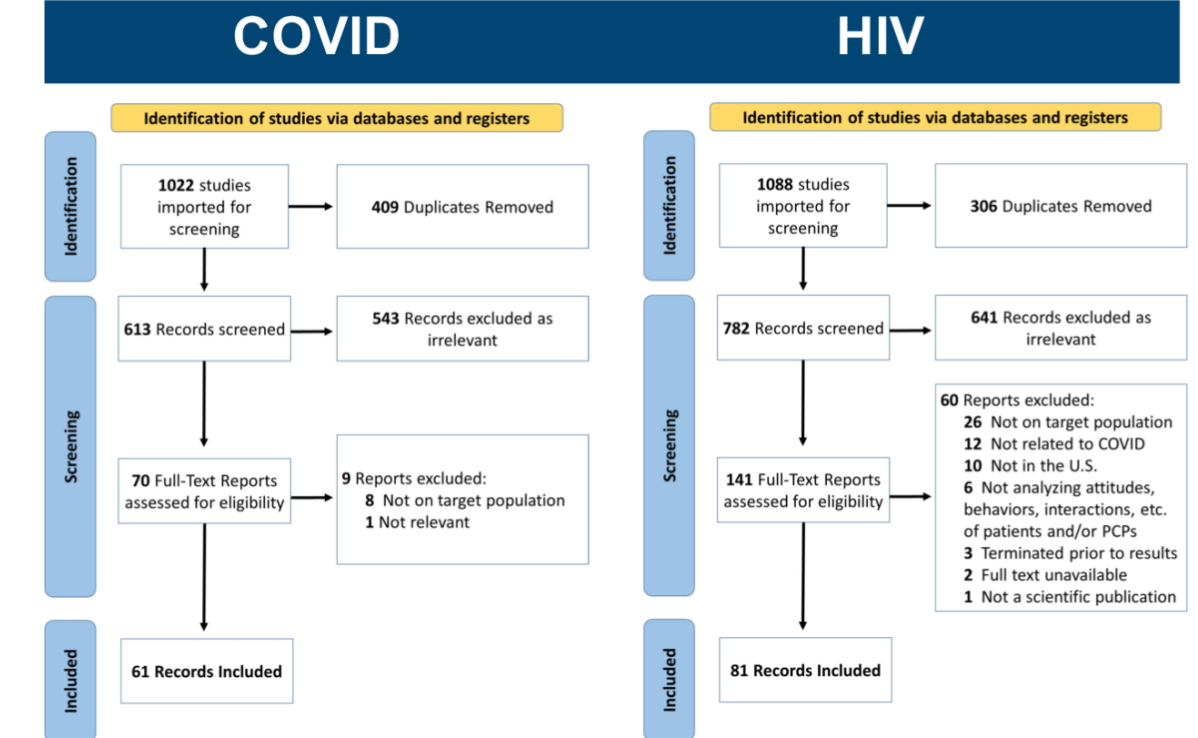
*Project funding was secured by Gilead Sciences Inc.

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- Xavier, J., Corr, P. G., Ward, M. C., Kalita, N., & McDonald, P. (2023). Identifying the barriers and facilitators to culturally responsive HIV and PrEP screening for racial, ethnic, sexual, and gender minoritized patients: A scoping review protocol. medRxiv, 2023-01.
- Additional reference available upon request for theoretical and conceptual frameworks guiding the research.

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RESULTS: SCOPING REVIEWS



COVID Progress

- Full text review complete. Data extraction and analysis underway.

HIV Progress

- Data extraction and initial analysis complete. Protocol published in *PLOS ONE*.
 - Xavier, J., Corr, P. G., Ward, M. C., Kalita, N., & McDonald, P. (2023). Identifying the barriers and facilitators to culturally responsive HIV and PrEP screening for racial, ethnic, sexual, and gender minoritized patients: A scoping review protocol. medRxiv, 2023-01.

IMPLICATIONS & LIMITATIONS

Implications: Our theory-based research will inform: 9 one-hour CME-bearing virtual lectures, an asynchronous CME-bearing online course module, 4-5 advocacy-based vignettes, a PCP toolkit, and a set of policy recommendations.

Limitations:

- This is a 18-month pilot project that inevitably limits the scope.
- There are a range of health system barriers to routinizing HIV screening that education alone will not address. These include perceived and real time constraints, strained PCP-patient relationships, strained financial resources, and difficulty in measuring adherence to clinical policies.
- There are also some populations who will not accept the COVID vaccine despite education. This reality must be accepted as an ongoing exercise to practice empathy and continue to do no harm.