

Addressing Healthcare Disparities in the Greater Cincinnati Area through a Partnership with Caracole

Learning Community #15 and Caracole



What is Caracole?

- Greater Cincinnati's nonprofit AIDS service organization, providing:
 - Counseling
 - Medical care
 - Harm reduction services
 - Syringe exchange services
 - Housing
 - Pay assistance
 - Shelter services
- Population served:
 - People who inject drugs (PWID)
 - HIV/AIDS+
 - Hepatitis C+
 - LGBTQ+
 - People of color



Caracole in the News

- March 2021: Caracole launched a vending machine aimed at promoting safe sex and drug use practices at Northside Headquarters
 - Offers Narcan, contraception, Plan B
 - International attention
 - \$500 would go to stocking this machine with crucial supplies for at-risk populations

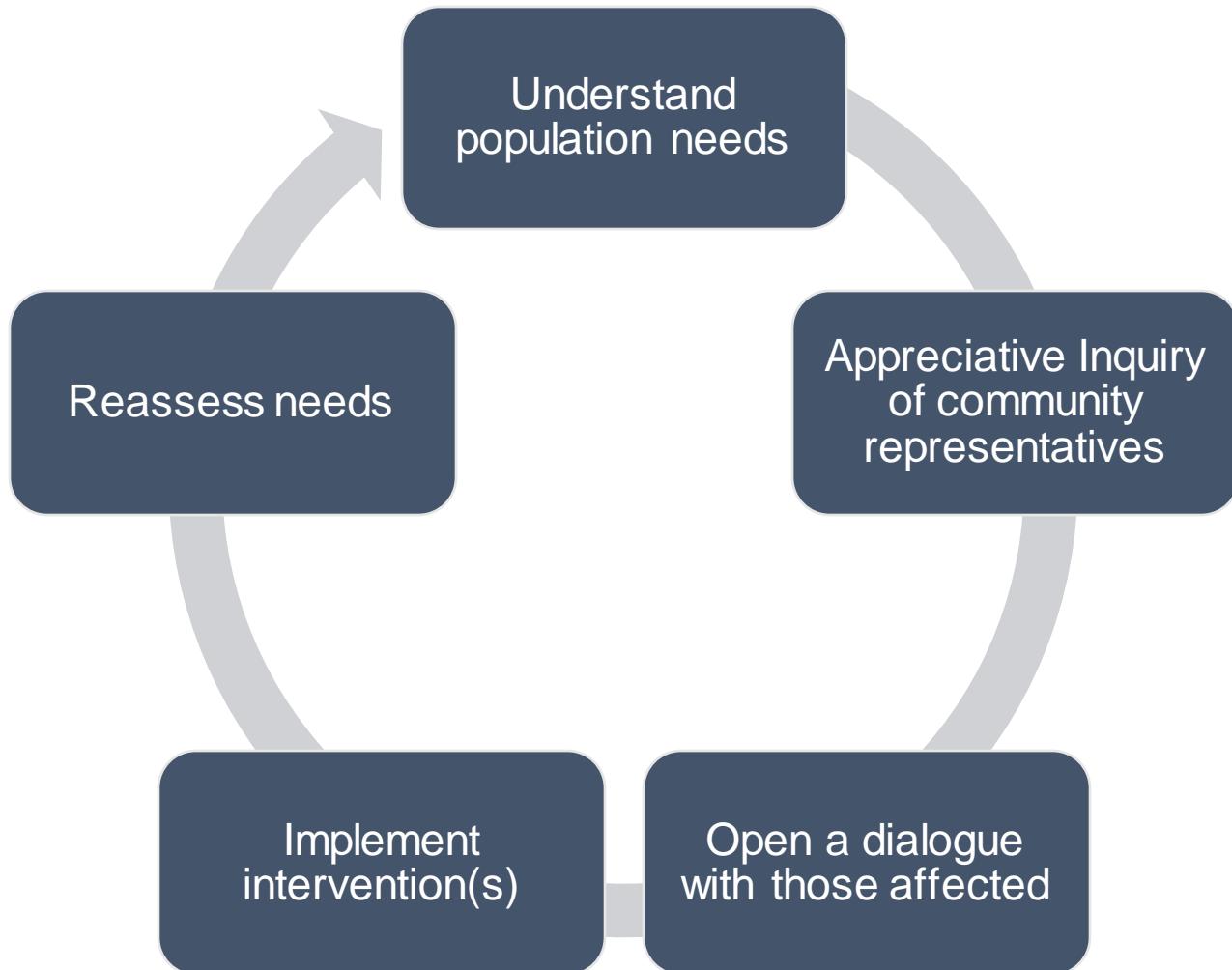
Social Determinant of Health:

- Evidence has shown that PWID experience stigma when assessing healthcare:
 - This leads to delayed HIV testing, a lack of testing, poor therapy adherence, and increased symptoms¹
 - This stigma is also associated with mental health struggles, such as depression, anxiety, and hopelessness

Sayles JN, Ryan GW, Silver JS, Sarkisian CA, Cunningham WE. Experiences of social stigma and implications for healthcare among a diverse population of HIV positive adults. *J Urban Health*. 2007;84(6):814-828. doi:10.1007/s11524-007-9220-4

Project Objectives

- Service Objective:
 - Create a questionnaire to collect demographic information about populations who use Caracole's services and assess their experiences of accessing health care, including barriers to accessing care
- Learning Objective:
 - Understand the precise social determinants of health experienced by this underserved population for future action when COVID-19 pandemic is over



The philosophy of this LC was to *build the foundation* for future LCs who will work with Caracole to instigate *long-lasting change* in the HIV+, HCV+ and PWID communities

Project Objectives



- Holistically assess diverse experiences by opening a dialogue with incoming clients



- Communicate areas of need to Caracole for future implementation

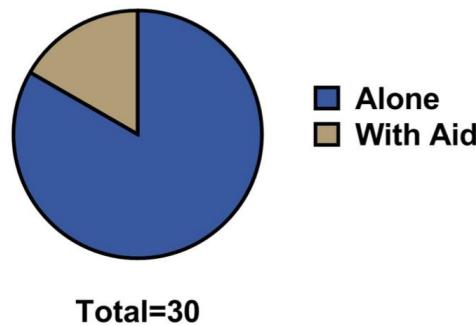


- Establish a support network and connect clients with trusted providers

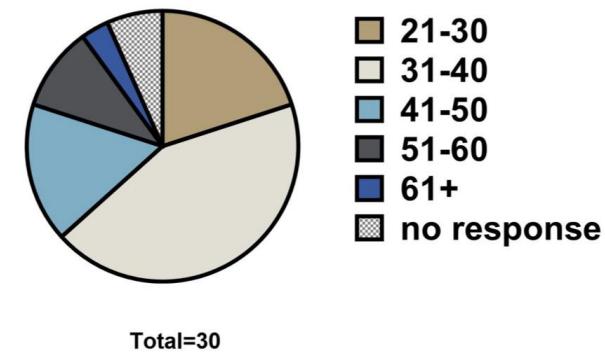
Methods

- Questionnaire: comprehensive 15-question form
 - Quantitative and qualitative prompts allowed patients to freely describe their experience with healthcare providers
 - Provided digitally and in print, with large text options; translated into Medical Spanish
- Entry counseling for Caracole staff to understand expectations and goals of questionnaire.
- Surveys distributed at Caracole between February and April 2021

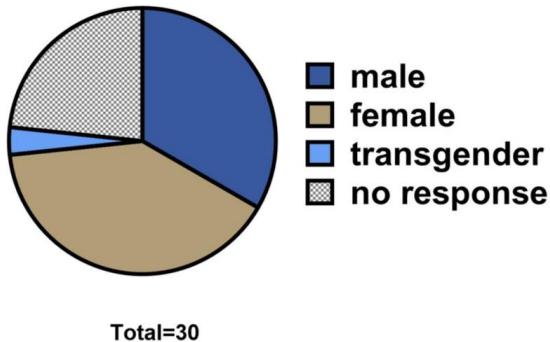
A Are you completing this survey by yourself or with the aid of Caracole staff?



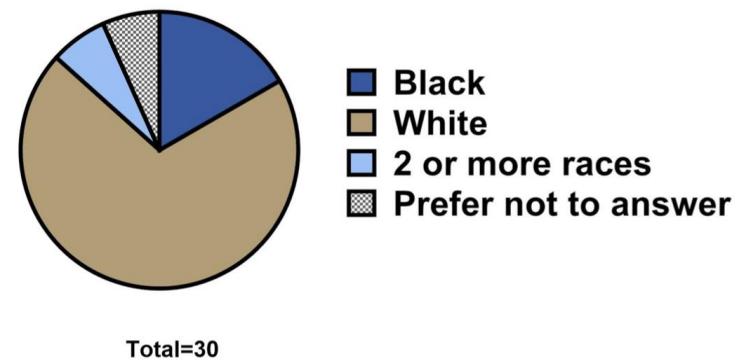
B How old are you?



C What is your gender?

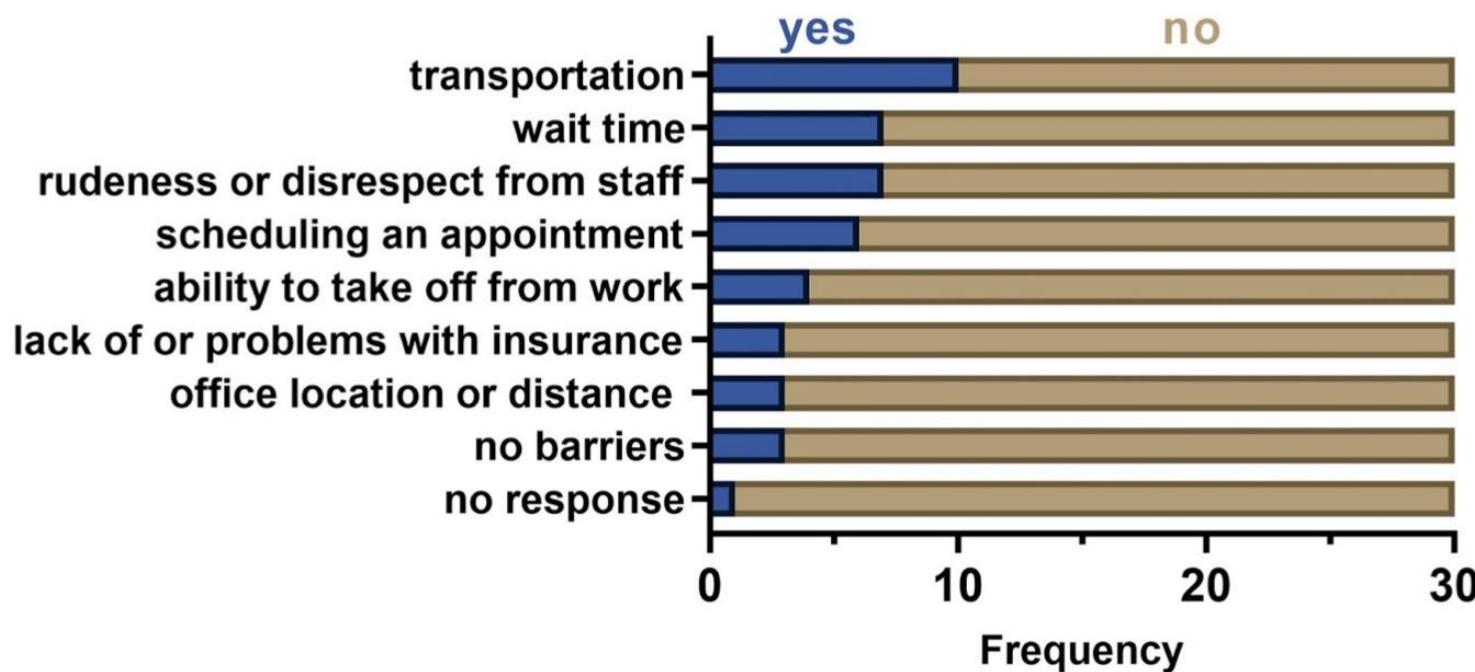


D What is your race/ ethnicity?

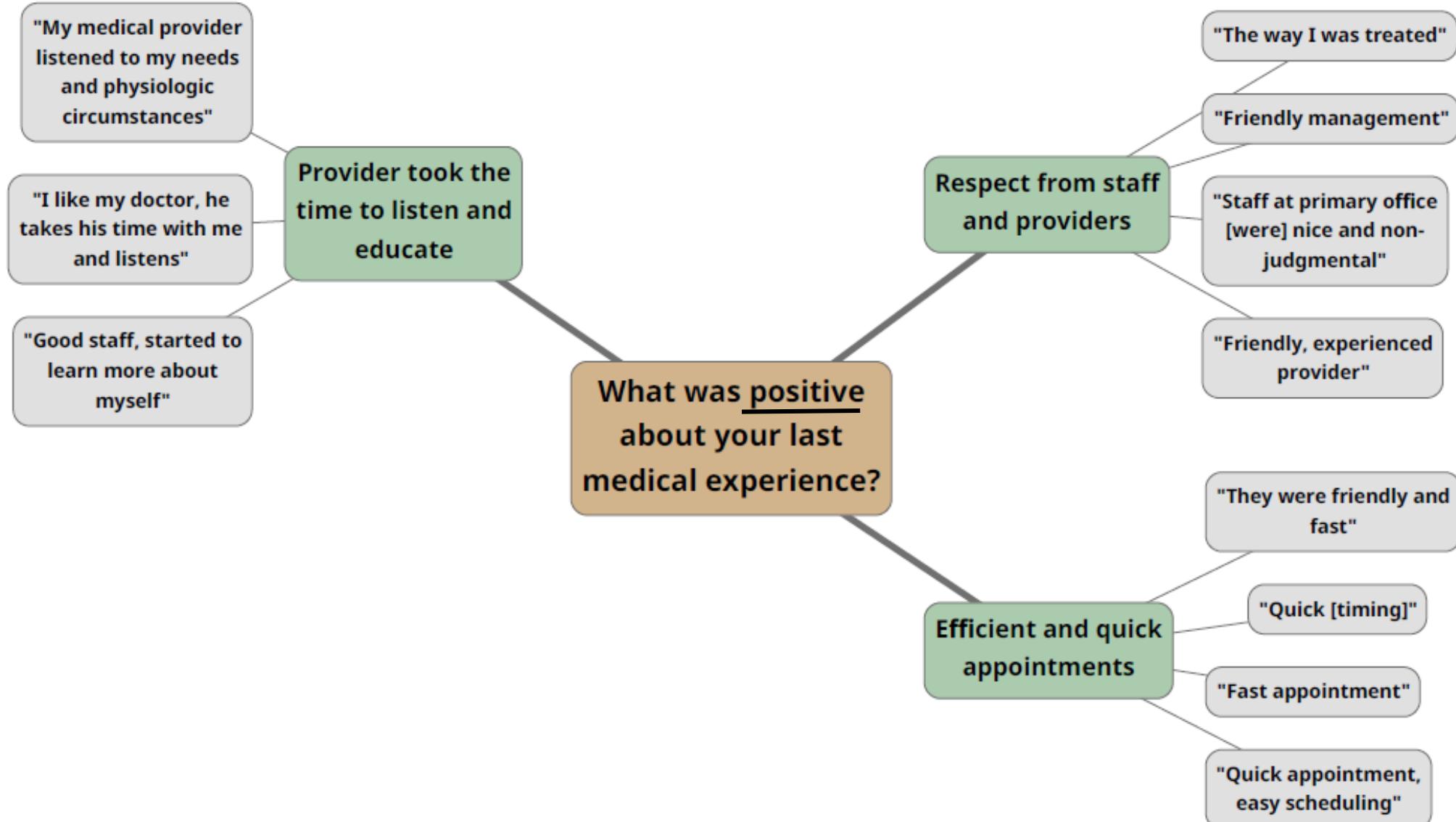


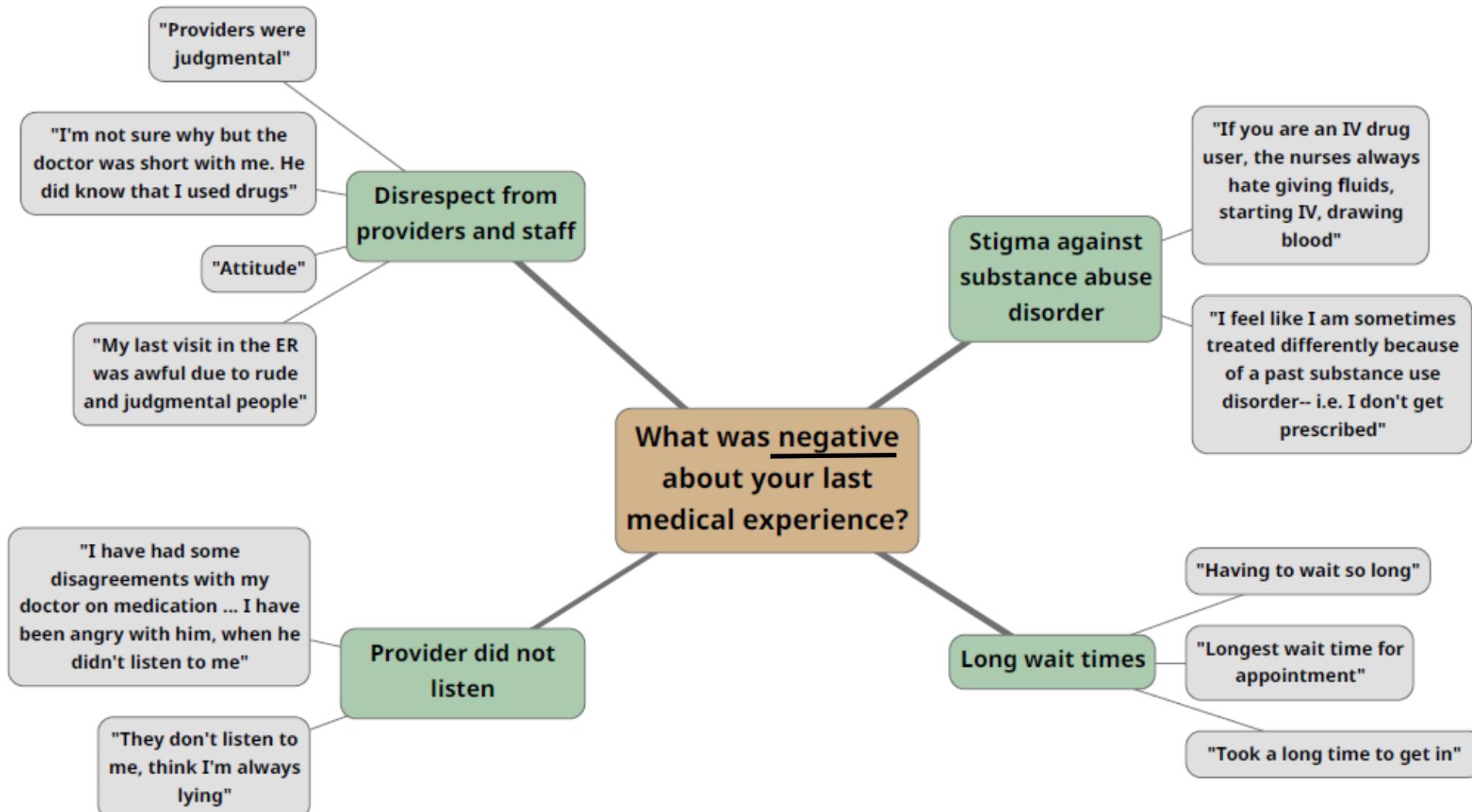
GENERAL DEMOGRAPHICS. We obtained a very diverse sample from only 30 clients

What barriers did you encounter when trying to see your medical provider?



Barriers encountered when trying to see a medical provider (n=30). Transportation to the medical clinic has been identified to be the greatest barrier in our sample population.





Cincinnati has made progress in addressing health disparities, but additional frontline barriers need to be addressed in order to truly see change within these populations

Discussion

Service and learning objectives

- Caracole staff members provided positive feedback on the questionnaire, which was developed in part for their future use as they expand services to new locations and change their practice in the wake of COVID-19
- Data provided new generalizable insights into how patients interact with Caracole and the healthcare system
- Future iterations, including the Spanish language version, may prove more useful to the organization

Discussion

Opportunities

- During the planning stage, we had the opportunity to interview several people who interact with PWID in different capacities
- Appreciative inquiry interviews allowed us to think about how trauma, unstable housing, chronic disease, financial instability, lack of social support, and other health determinants intersect to influence health in PWID
- Learned more about PrEP from Caracole and our own research

Discussion

Barriers

- COVID-19
 - Slowed communications with the community partner, delayed paper questionnaire distribution, and created miscommunications that delayed virtual questionnaire posting
 - Hindered data collection efforts- questionnaire was only received by individuals using Caracole services in-person
 - Did not receive any results from the online questionnaire or from our Spanish-translated questionnaire, so this may have affected the generalizability of our data

Discussion

Barriers

- Some respondents completed the questionnaire in the presence of their case managers, which may have skewed results
- Sources of error presented by the survey format itself:
 - Eg. Some patients who answered that they had no PCP later answered the question, “Do you trust your primary care provider?” as if they had
 - Eg. Closeness of bullet points to one another on the services used and demographics questions led to some ambiguous choice selections

Reflection by Caracole

- Why did this project matter?

"If we can eradicate the disparities some of our clients face when accessing healthcare, we can help them live longer/happier lives." -Brian Collins (Caracole/LC Liaison)

- Now what needs to occur?

"Awareness in the education programs for all Healthcare workers. Better laws and practices to ensure quality healthcare for all."

Reflection by Caracole

"The best part about this project is knowing that these students are one day going to be doctors who care about marginalized populations, who are concerned with the health of all individuals and who see the positives in harm reduction. In my eyes they are special and I feel lucky to have had the opportunity to work with them." -Leah Majesky (Community Member)

Reflection by Caracole

- Client opinion:

"...their feelings matter. Taking just a few extra minutes to identify barriers or concerns can go a long way for clients." -Christie-Lee Griffin (Community member)

Reflection by LC

- Project Implications:
 - Understand potential barriers marginalized populations may experience when accessing care
 - Treat patients as persons, unique individuals, listen to their stories
 - Recognize the importance of establishing our own practice as future physicians without stigmatization
 - See the benefit of harm reduction:
 - Respect rights of people who inject drugs
 - Avoid preconceived judgments
 - Establish trust and rapport

Next Steps

Utilize

Utilize student organizations to fund bias training sessions for UC students, community members, or healthcare providers to address determinants of health

Organize

Organize HIV/HepC/PWID information sessions to combat stigma in both civilian and healthcare fields.

Provide

Provide logistical support/staffing for volunteer syringe services, testing fairs or PrEP sessions.

Questions?