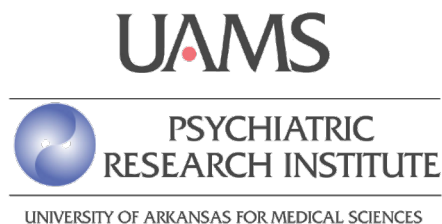


If you don't look for it, you will probably not find it:

Determining barriers to equitable implementation in healthcare settings

R. Sonia Singh, PhD

South Central Mental Illness Research, Education and Clinical Center
Central Arkansas Veterans Healthcare System
University of Arkansas for Medical Sciences



@RSoniaSingh
Rajinder.Singh2@va.gov



Acknowledgements & Disclaimer

- VA Office of Health Equity
- Dr. Eva Woodward and Implementation Science for Health Equity Lab
- Dr. Singh is funded through the VA Advanced Fellowship Program in Mental Illness Research & Treatment. Dr. Singh is a postdoctoral fellow in the South Central Mental Illness Research, Education and Clinical Center through the Central Arkansas Veterans Healthcare System and University of Arkansas for Medical Sciences.

The views expressed in this presentation do not necessarily reflect the position or policy of the Department of Veterans Affairs or the United States Government.

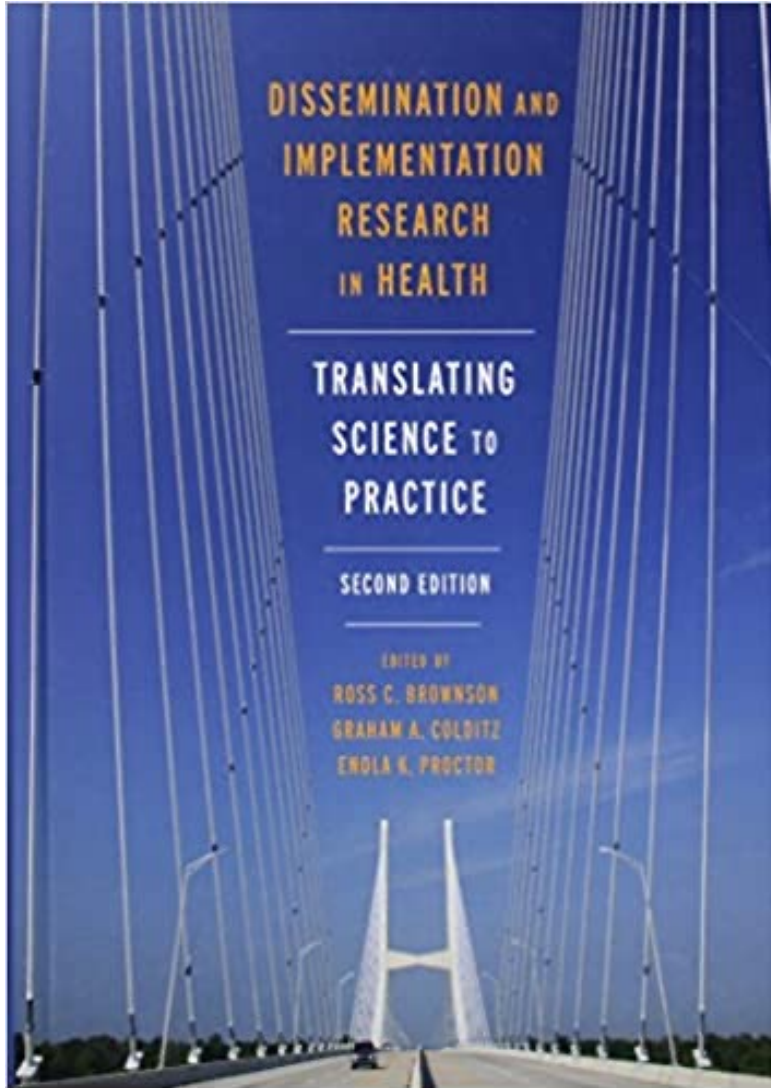
Health differences	Health disparity	Health equity
differences in health outcomes between two groups, based on a specific characteristic (e.g., height) ¹	“Not all health differences are health disparities;” health disparities are concerned with social justice ²	“Health equity is the principle underlying a commitment to reduce, and ultimately, eliminate disparities in health and in its determinants, including social determinants.” ²

Equality



Equity





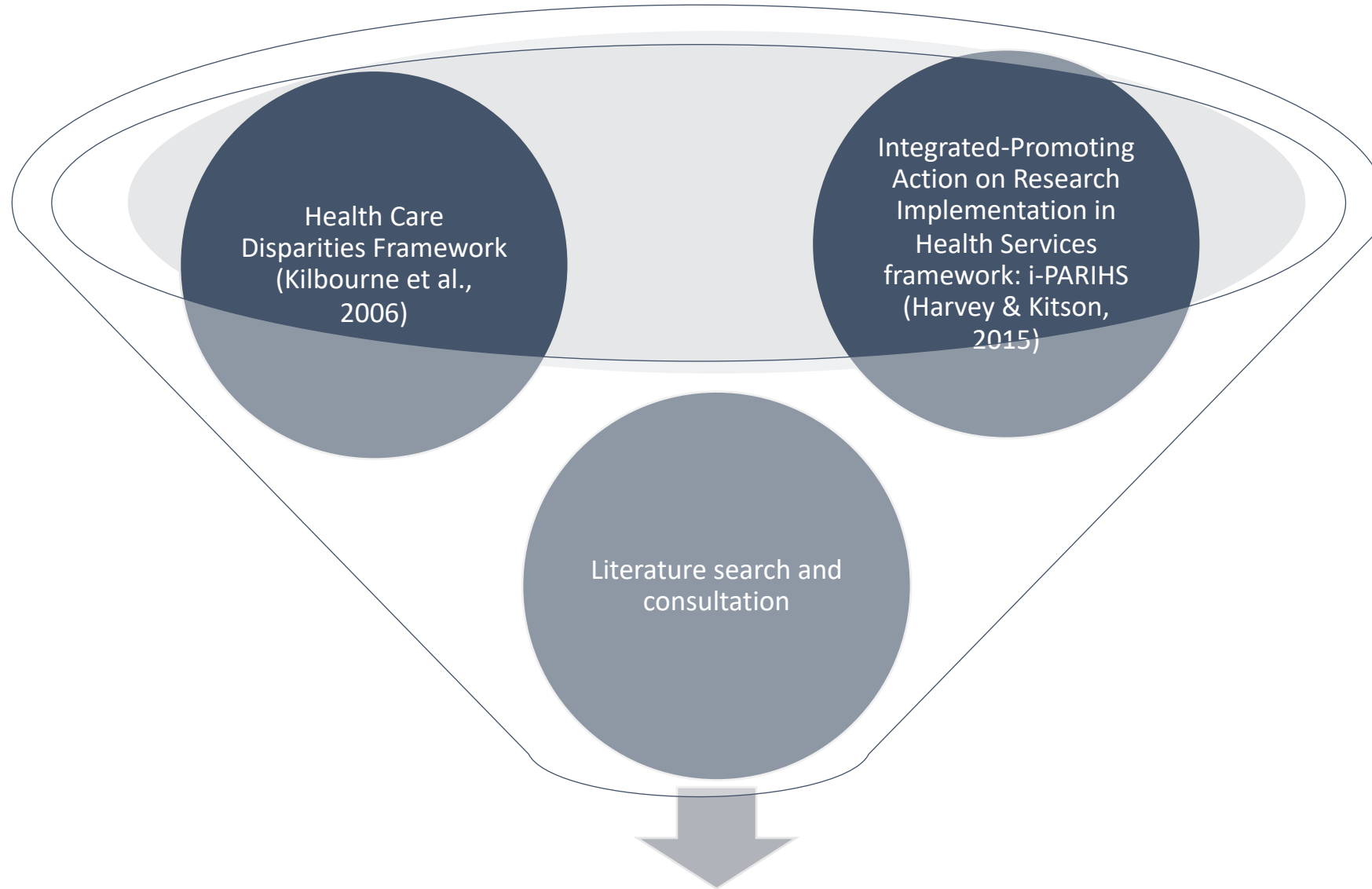
“implementation [frameworks] might be modified for application among specific racial/ethnic minorities and other vulnerable populations”

3 Types of Implementation Science Frameworks

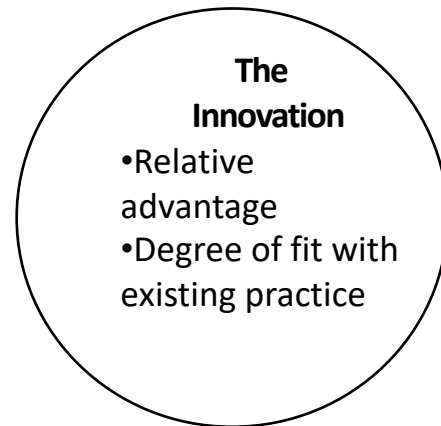
1. Determinant - What are barriers and why?

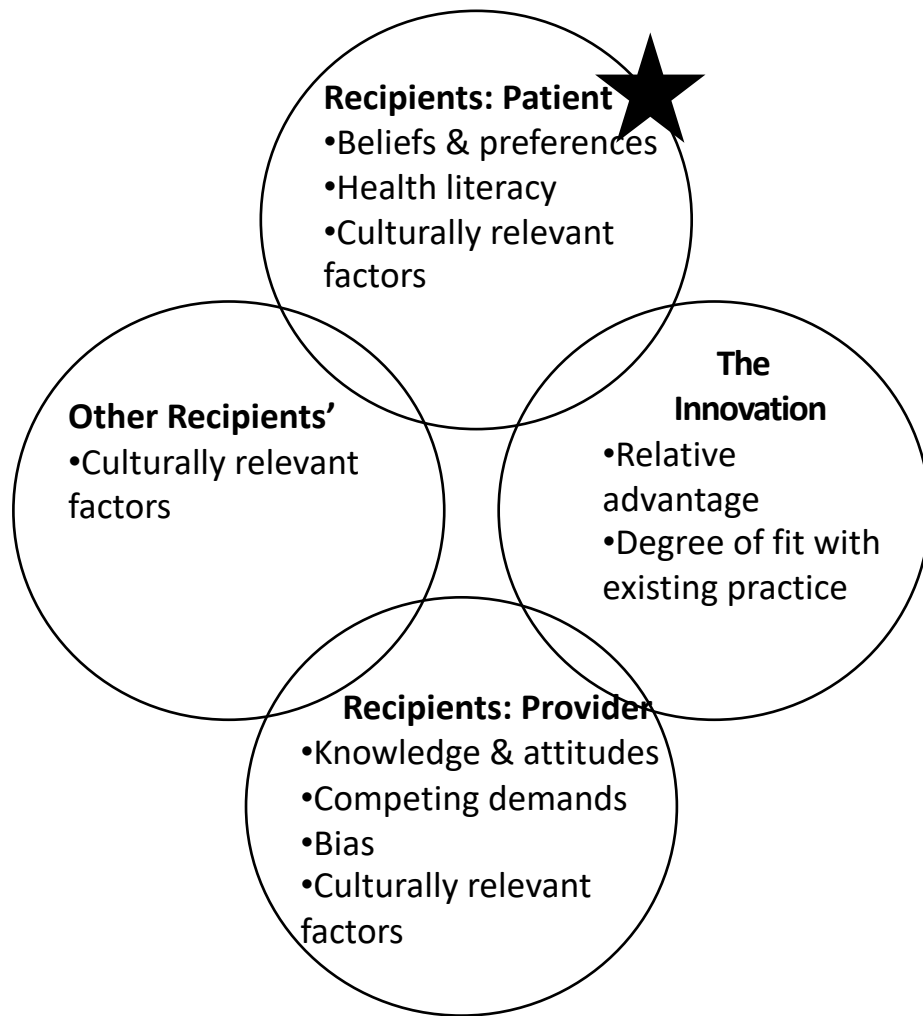
2. Process – Planning: How is this thing going to get implemented?

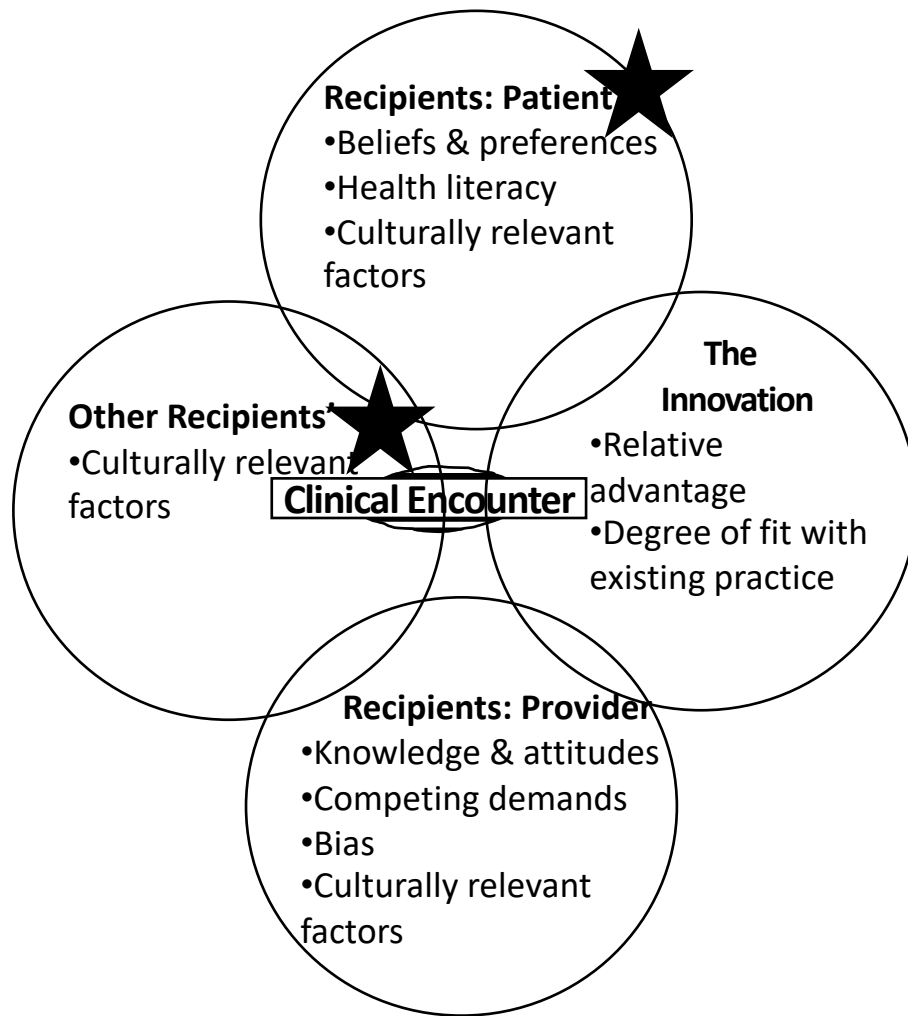
3. Evaluation - Did implementation succeed or fail?

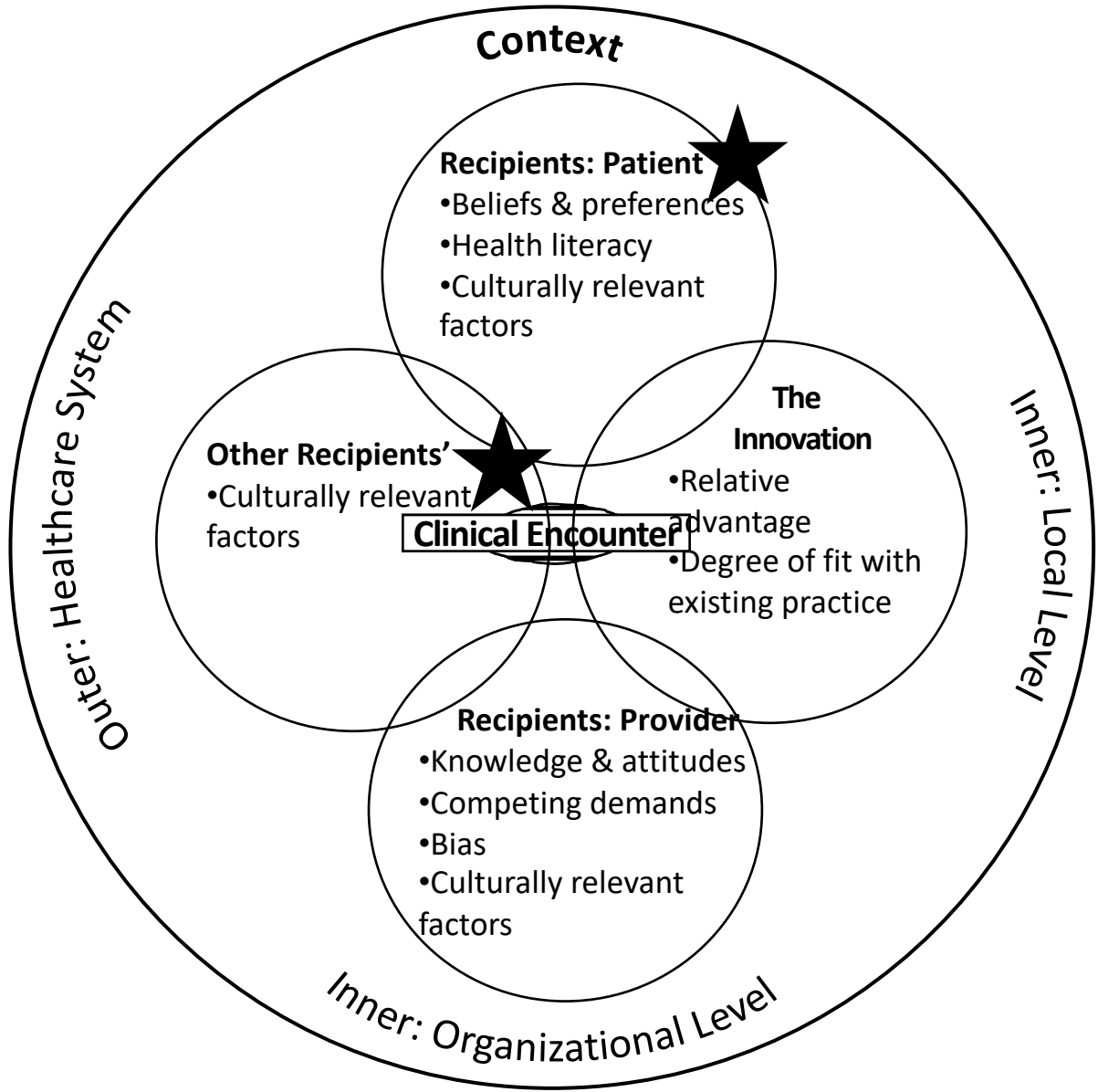


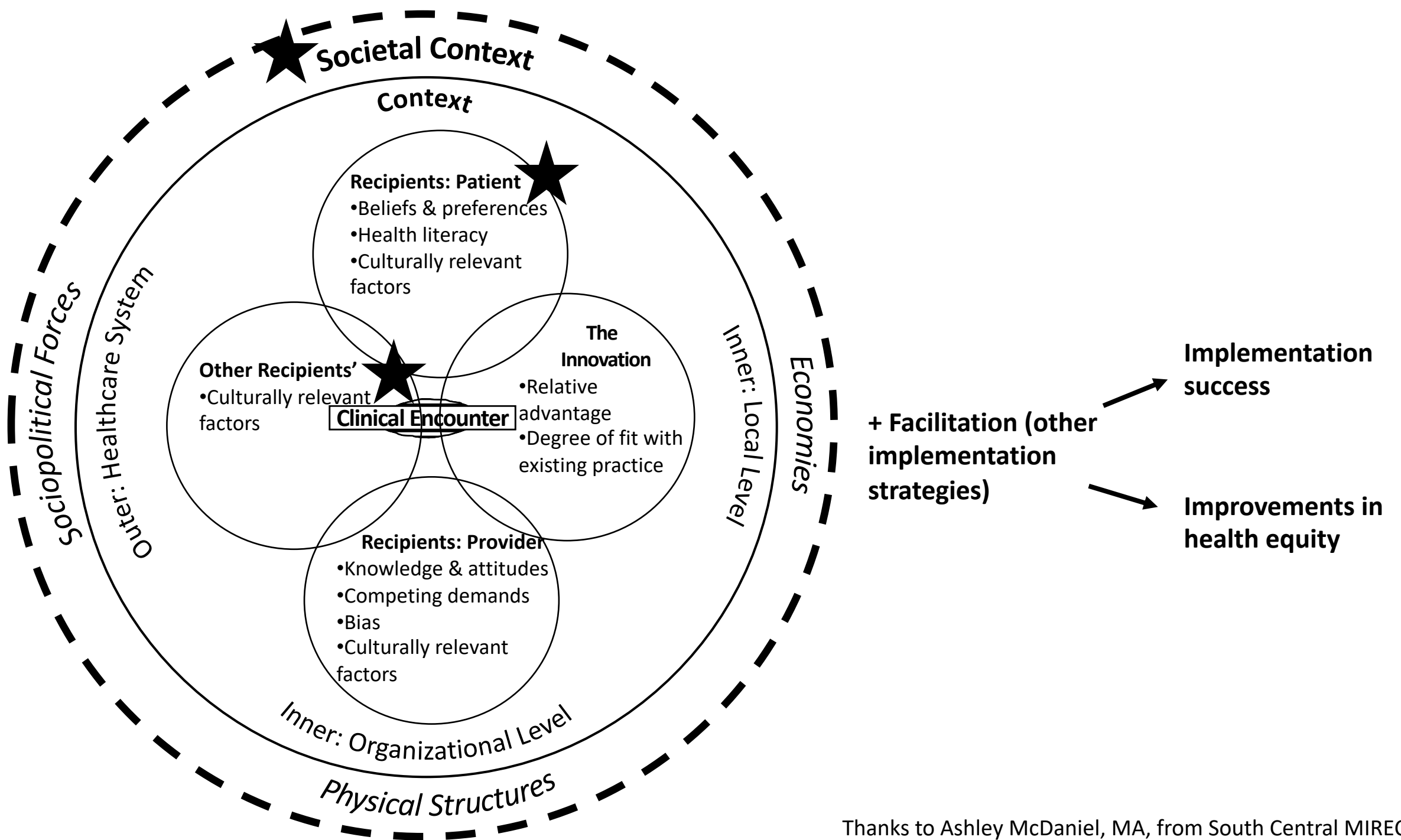
Health Equity Implementation Framework











Thanks to Ashley McDaniel, MA, from South Central MIRECC

Assess 3 health equity determinants in any implementation effort

- ★ 1. Culturally relevant factors of recipients (patients, providers, staff)
- ★ 2. Clinical encounter
- ★ 3. Societal context (economic factors, social norms, policies, laws, physical structures, social determinants of health)

METHODOLOGY

A More Practical Guide to Incorporating Health Equity Domains in Implementation Determinant Frameworks

> Eva N Woodward, Rajinder Sonia Singh, Phiwinhlanhla Ndebele-Ngwenya, Andrea Melgar Castillo, Kelsey S. Dickson, JoAnn E Kirchner

Determinant

1. Societal Context

- Economies
- Physical structures
- Sociopolitical forces
- Social determinants of health

Sample Measures and Methods

- Insurance claims data
- Observation of physical structures
- Document review of organizational policies
- State-Level Racism Index
- Social determinants: [PhenX Toolkit](#)

Determinant

2. Culturally Relevant Factors of Recipients

- Demographic match patient-provider
- Provider bias
- Patient mistrust
- Patient health literacy
- Many more

Sample Measures and Methods

- Chart reviews to calculate demographic match patient-provider
- Medical Mistrust Index
- Health literacy scale: [PhenX Toolkit](#)
- Individual interviews

Determinant

3. Clinical Encounter

Sample Measures and Methods

- Audio record encounters - Roter Interaction Analysis System
- Observe sample of encounters
- Interviews of patient and provider perceptions
- Chart review of documentation

Example: Black Veteran Perspectives on Barriers to and Facilitators of Implementing Hepatitis C Virus Treatment in the U.S. South

Eva Woodward, PhD


Monica Matthieu, PhD, LCSW

JoAnn Kirchner, MD

Shari Rogal, MD

Uchenna Uchendu, MD, MPH

VA Office of Health Equity



First pilot of the Health
Equity Implementation
Framework

(N = 12)

Characteristic	N (%)
Age, in years	<i>M = 61, SD = 8.54, Range = 38-69</i>
Current Employment Status	
Employed full time	1 (8%)
Employed part-time	2 (17%)
Disabled	4 (33%)
On SSI/SSDI	2 (17%)
Retired	3 (25%)
Highest Level of Education	
Some high school	1 (8%)
High school graduate/GED	6 (50%)
Technical school	1 (8%)
Some college	4 (33%)
Current Living Situation	
On your own	5 (42%)
Spouse/ domestic partner	3 (25%)
Friends	1 (8%)
Parents/family of origin	1 (8%)
Roommates	0 (0%)
Staying with people temporarily	1 (8%)
Other (VA homeless program)	1 (8%)
Heard about HCV Treatment Before	8 (67%)
Started or Completed HCV Treatment	5 (42%)

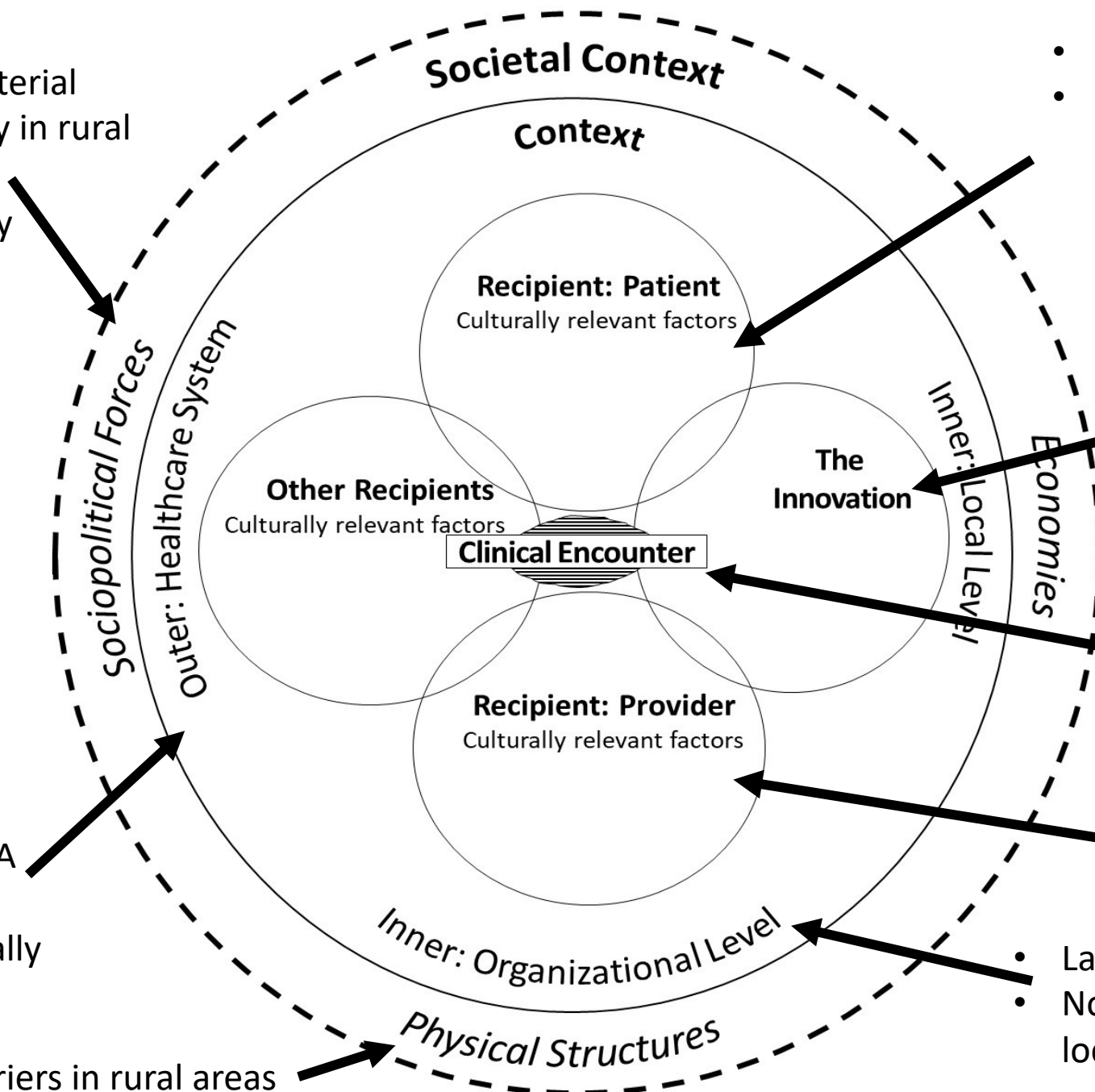
HCV = hepatitis C virus

Interviews

- Fall 2016
 - 24 - 66 minutes
 - \$25 check
 - Telephone
- Asked basic information about HCV treatment
 - Barriers and facilitators about
 - Treatment itself
 - Providers
 - Clinical encounter
 - Culturally relevant factors
 - Local VA clinic
 - Organizational VA context
 - Societal context
 - Potential racial discrimination

- Not enough HCV material circulating, especially in rural areas
- HCV stigma in society

- Doesn't know HCV symptoms
- No trust or submissive trust in providers



- Testimonials from peers about racial discrimination at VA
- Negative VA experiences generally

Need medication reminder system

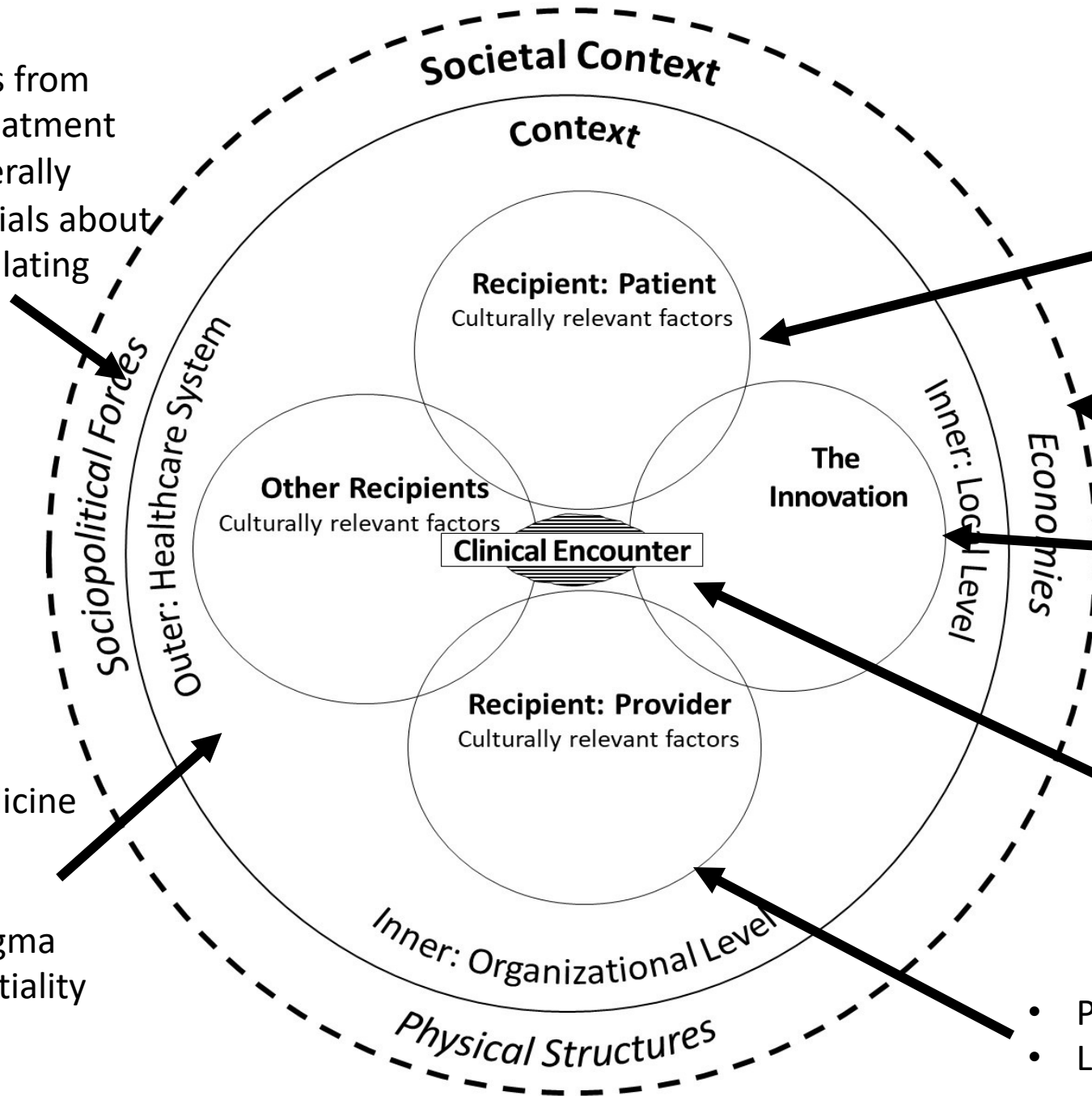
Negative when providers did not offer treatment, explain rationale for decision, or f/up

- Perceived racial bias
- Lack of knowledge about HCV treatment

- Transportation barriers in rural areas

- Lack of f/up after testing positive
- Not enough HCV treatment at local facility

- Positive testimonials from peers about HCV treatment and healthcare generally
- Some written materials about HCV treatment circulating



- Hope no racial discrimination in VA
- Optimistic about treatment
- Preferred more HCV education
- Positive trust in providers

- Free treatment!
- Regimen & cost acceptable
- Trialability is unimportant

- Positive when providers explained treatment, side effects, next steps, questions
- Many did not wait long for appointment

- VA uses best medicine & wants to help Veterans
- VA offset HCV stigma through confidentiality

- Perceived desire to help
- Lower levels of racial bias

Another example...



Consolidated Framework for Implementation Research

Intervention Characteristics

- Intervention Source
- Relative Advantage
- Adaptability

Outer Setting

- Patient needs and resources
- External Policies and incentives

Inner Setting

- Structural Characteristics
- Implementation Climate
- Readiness for Implementation

Characteristics of Individuals

- Knowledge and belief about intervention
- Individual stage of change

Process

- Planning
- Engaging
- Executing

Three Health Equity Domains

- ★ 1. Culturally relevant factors of recipients (patients, providers, staff)
- ★ 2. Clinical encounter
- ★ 3. Societal context (economic factors, social norms, policies, laws, physical structures, social determinants of health)

Culturally Relevant Factors

- Veteran
 - Do you have a general sense of the last provider you saw, and their beliefs related to LGBT Veterans?
- LGBT Veteran Care Coordinator
 - Do you have a general sense of providers' beliefs related to LGBT Veterans? Non-providers?
- Provider
 - Is there anything about LGBT Veterans from [your city/state/area] that can sometimes create barriers to delivering appropriate or high-quality LGBT-affirming care?

Clinical Encounter

- Veteran
 - Are there any providers or staff you interact with who you feel like are very affirming to your identity as [Veteran's self-described sexual orientation and/or gender identity]?
 - What exactly do they do to make you feel this way?
- LGBT Veteran Care Coordinator
 - Have providers at your VA shared any concerns with you related to providing LGBT-affirming care?
- Provider
 - Have you ever you felt unsure or confused during a clinical encounter with a patient who identifies as LGBT?

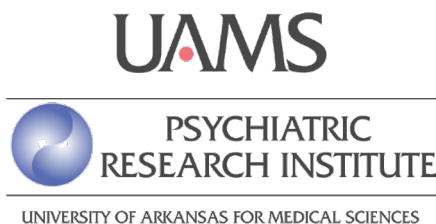
Societal Contexts

- Ask of all three groups (Veteran, LGBT Veteran Care Coordinator, and Providers)
 - Can you think of any factors outside of the VA system that may impact the care you receive as a Veteran who identifies as [Veteran's self-described sexual orientation and/or gender identity]/may impact care for LGBT Veterans?

Thank you!

R. Sonia Singh, PhD

South Central Mental Illness Research, Education and Clinical Center
Central Arkansas Veterans Healthcare System
University of Arkansas for Medical Sciences



@RSoniaSingh
Rajinder.Singh2@va.gov



south central
mirecc
Mental Illness Research, Education
and Clinical Center