

Reducing stigma and discrimination through a blended-learning training program on HIV care and treatment

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HEALTH[e]FOUNDATION

TREAT 'N CARE[e]EDUCATION

Introduction

Progressing through the HIV cascade of care, from HIV testing to lifelong ART treatment, is critical in the success of HIV treatment and prevention. However, in Sub-Saharan Africa significant losses still occur at each step in the cascade. One of the barriers contributing to the losses and disengagement is stigma and discrimination in the healthcare setting. When patients experience stigma and discrimination they are less likely to attend appointments and stay in care. In addition, higher levels of stigma and discrimination are often associated with a lack of knowledge on HIV.

Objective

The objective of this study was to enhance positive attitudes among healthcare providers towards PLWHA, through a blended-learning training program on HIV treatment and care.



Methods

The Treat 'n Care[e]Education course contains 16 modules and enables healthcare providers to effectively treat and care for patients with HIV/AIDS.

The training program consisted of an onsite kick-off workshop, a 12-week distance-based self-study period, a two-day follow-up workshop and continuous medical education.



The individual knowledge gain was assessed via pre- and post-test scores per module and participants were asked to complete an AIDS attitude scale during the kick-off and follow-up workshop. The AIDS attitude scale with 21 items is developed by Froman et al. in 1992 and is a self-reported measure of attitude towards PLWHA.

Additional qualitative data was collected using focus group discussions.

Study population

171 healthcare providers were trained with the Treat 'n Care[e]Education program in 2013 and 2014

- South Africa (n=65)
- Rwanda (n=82)
- Tanzania (n=24)

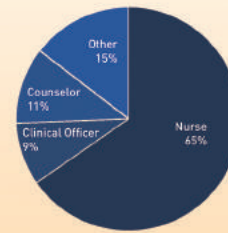


Table 1: Participant characteristics

Total	n = 171 (100%)	
Sex	Male	32%
	Female	68%
Age	20-29	8.5%
	30-39	49%
	40-49	24.5%
	≥ 50	18%
Computer usage	Daily	45%
	Often	32%
	Rarely	18%
	Never	5%

Results

Quantitative results

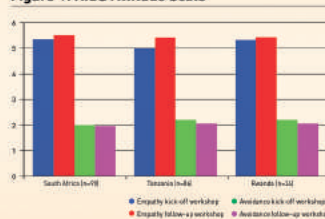
The overall knowledge increase after completion of the 15 modules of the training program was 14.5%. In all three countries the palliative care and HIV module obtained the lowest pre-test scores (pre-test < 50) but showed a significant knowledge increase after completion of the course. In all three countries empathy increased after the eLearning course and avoidance decreased. Their attitude towards homosexuals, sex workers and IV drug users became more supportive after the e-learning course.

Table 2: Five modules with the highest knowledge gain

	Avg. Pre	Avg. Post	Δ	SD	P Value
Adherence, Importance, and Support	50	76	26%	21	**
Palliative Care and HIV	43	70	27%	21	**
Substance Misuse, Addiction and Global AIDS	56	74	18%	20	*
Mental Health and HIV	69	82	13%	14	*
Human Rights and HIV	65	78	13%	17	*

** p<0.01 * p<0.05

Figure 1: AIDS Attitude Scale



Qualitative results

- Healthcare providers learned strategies to prevent discrimination
- Healthcare providers became more aware of their own attitude

"The module on drug abuse was useful. There is often no example on how to manage discrimination which still exist in the public sector towards drug users. With the module we can develop strategies and procedures on how to deal with it."
[Registered nurse, South Africa]

"The course has brought me closer to my patients, I developed empathy and appreciate the challenges that they face"
[Registered nurse, Rwanda]

"Normally you assume by looking it might be HIV, but now I check first instead of stigmatizing a patient. I will be less judgmental if someone is wasted or scratching."
[Professional nurse, Tanzania]

Conclusion and Discussion

- Blended learning is an effective method:
 - Increase knowledge on HIV care and treatment.
 - Enhance positive attitudes towards PLWHA.
- Knowledge is essential for reducing stigma and discrimination in the healthcare setting and can result in improved retention in care.
- More research is needed on the long-term impact of attitudinal change.



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