2024 **CHIPTS HIV NEXT GENERATION CONFERENCE BLACK AND LATINE CARE COSUMERS' PERCEPTIONS OF PROVIDERS' BEHAVIORS, MEDICAL MISTURST, AND EXPERIENCES OF DISCRIMINATION**

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HIV-Related Disparities Among U.S. Black and Latine Populations

- In 2019:
 - Adolescents and adults had seven and three times the prevalence rates of HIV. [1]
 - Sexual Minority Men (SMM) jointly represented 50% of the total **burden of new HIV infections.** [2]
- Stigma and medical mistrust highly prevalent among Black and Latine populations with HIV
 - Key contributors to HIV-related disparities, including adherence, care engagement, and clinical outcomes. [3]





Research Questions

- What are the perceptions of provider behaviors that increase or decrease care consumers' trust and mistrust within healthcare?
- What are Black and Latine HIV care consumers' experiences of stigma and discrimination?
- What are HIV care consumers' behaviors/actions when experiencing medical mistrust?







Semi-structured Interviews conducted in Nov-Dec 2021

Conventional content analysis conducted using Dedoose

2024 CHIPTS HIV NEXT GENERATION CONFERENCE

• 21 Black and Latine HIV care consumer participants

• Mean age: 52.5 years (*SD*=12.7 years)

- 57% female
- 67% heterosexual; gay
 (29%);
 lesbian (5%)
- Black (57%); Latine (33%)





Provider behaviors that increase mistrust

Perceived stigma and discrimination in healthcare

• HIV care consumers' behaviors when experiencing mistrust





Provider behaviors that increase mistrust

Lack of active listening,
 Lacknowledgement, and
 validation of care
 consumers' concerns

"What would make me not trust them	"I ca
is no eye-to-eye contact, strictly	liste
looking at the computer, not	<i>me</i>
bothering to find out what is	"Yes
important or my input on what is	you
going on with me."	- 54-
- 67-year-old Black female	fema

Lack of person-centered care

an tell if you're just ening to me or have heard ..It's a difference between s, I'm listening." But did hear me?" -year-old Black Latina ale



Provider behaviors that increase mistrust

Lack of partnership in health decision making

"There is no I in team. It's a four-letter word. There's no I. How are you gonna make it like it's about you? I gotta do what you say. No. I am the patient. They don't get that. They just don't."

- 57-year-old Black male



Perceived incompetence

"I had an HIV specialist who didn't know how to read labs before. So, I was like, this is not the provider for me." - 50-year-old Black male



Perceived stigma and discrimination in healthcare

Observed differential treatment by race/ethnicity

"I have a friend who recently tested positive for HIV and he goes to the same place I go. I have been going there for two or three years and he for about three months. His provider told him that he can transition from the pills to one shot every month. My doctor never told me about that." - 34-year-old Latine non-binary



HIV care consumers' behaviors when experiencing medical mistrust

Changing providers

"I will actually change immediately if I'm feeling uncomfortable with that person." - 70-year-old Black male

"...If I had some concerns that I didn't trust [my provider], I would just sit with them and say, 'you know what, I really don't trust what you're telling me. You know, and I would like you to explain to me what is happening'..." - 50-year-old Latina female

Self-advocacy



Future Directions and Limitations

Limitations	F
 Sample population 	• B
insufficient to	C
assess all	ir
categories of	t
intersectional	C
stigma	n
	S
 Latine subsample 	• D
included 1 Spanish	ti
speaking	b
participant	n

uture Directions

Building long-term apacity and istitutional policies hat address onsumers' medical istrust and reduce tigma

Develop interventions that address provider behaviors that increase medical mistrust and stigma



References

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3. Bogart LM, Takada S, Cunningham WE. Medical mistrust, discrimination, and the domestic HIV epidemic. In: Ojikutu BO, Stone VE, eds. HIV in US communities of color. Springer International Publishing; 2021:207-231.

