## Spotlight: Project Kasih - Malaysia

Reducing stigma and discrimination through involving people living with HIV in service delivery at Health Clinic Selangor



#### Background

In 2020, the Malaysia Healthcare Workers Stigma & Discrimination Evaluation Survey found high rates of healthcare worker (HCW) stigma towards people living with HIV (PLHIV). HCW stigma predominantly involved fear of infection and negative social judgment with 42% reporting avoidance of physical contact with PLHIV and 14% observing other HCW unwilling to provide care for PLHIV (see graph on page 2). HCW awareness of standardized protocols to decrease stigma and discrimination against PLHIV was low.

Project Kasih – 'Project Love' – became Health Clinic Selangor's solution. Inspired by the work of Pulerwitz, et al. (2010) which showed that involving PLHIV in service delivery could reduce HCW stigma, they developed a program in which PLHIV from the community were recruited, trained as wheelchair patient navigators (WPN), and accepted as members of the healthcare team. This new staff cadre escorted older and disabled clients and assisted them in their navigation of care at the clinic. With the advent of the COVID-19 global pandemic, WPNs allayed the fears of patients seeking treatment, escorted them throughout the clinic, and disinfected the wheelchairs in between clients.

This intervention served a dual purpose of enhanced engagement with the clinic for PLHIV and the opportunity for HCWs to view PLHIV as colleagues and as people, not just as HIV patients. Community leaders, the health clinic advisory panel, government agencies, and NGOs have all worked together on this project, including through the donation of wheelchairs. As reported through interviews and questionnaires, the program resulted in reduced stigma and discriminations, increased PLHIV case registration, improved networking with HCW, and increased uptake of COVID-19 vaccination in the general population.



Picture 1. Project Kasih participants

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# Timeline

using QI methods

2020	) 2021			
FEB	JUL -AUG	NOV	DEC - JUL	AUG
Design Meeting – S&D Reduction	HCW S&D Baseline Survey	Intervention planning	Intervention Period (cycle 1)	HCW S&D Reevaluation Survey



#### Picture 2. Project Kasih participants

### A New Way of Thinking

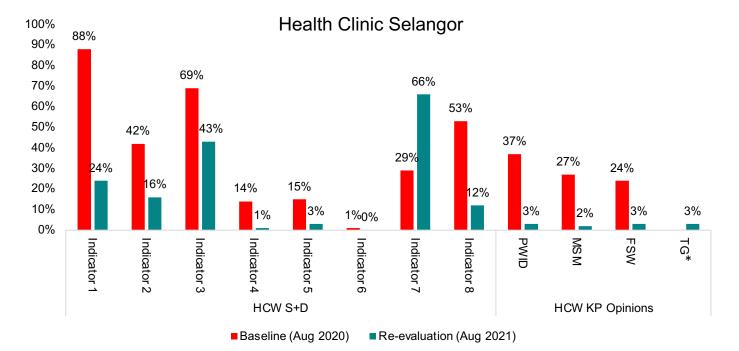
At Health Clinic Selangor, the staff thought about stigma differently. Rather than just training to encourage increased empathy and awareness among HCWs, they created an environment where those feelings would be actualized, occurring naturally through practice changes. Inspired by the theory that stigma is born from a lack of understanding, they hypothesized that increased contact through exposure outside of the patient-provider interaction would lead to decreased stigma and discriminatory practices in the healthcare setting.

#### **Quality Improvement Integration**

The WPNs worked with the Health Clinic Selangor quality improvement team to develop and test change ideas within Project Kasih. They focused on COVID19 mitigation strategies, addressing patient fears and barriers to care, and tested the change ideas using the "plan, do, study, act" (PDSA) model. Successful change ideas from the activities of the WPNs included: Wheelchair transport provided to and from the clinic, disinfecting the wheelchair before and after client interactions, and adhering to infection mitigation protocols.

## The Success of Project Kasih

When the MYSES was repeated in August 2021, the percentage of HCW reporting fear of taking blood from PLHIV dropped by 64 points, both avoidance of physical contact with PLHIV and double glove usage dropped by 26 points, and very few reported any preference against providing care for KP. Although the decrease in HCW S+D practices cannot be directly attributed to Project Kasih as other initiatives were also implemented during this time, Project Kasih contributed to a culture of change that showed meaningful results. The increase in HCW reporting no written guidelines to protect PLHIV from discrimination is a result of respondents better understanding the nature of the question in the second round and the fact that these guidelines were not in place in the facility.



#### Malaysia Healthcare Workers Stigma & Discrimination Evaluation Survey

HCW S+D Survey Key: 1 - Fear taking blood from a PLHIV; 2 - Avoid physical contact when providing care to PLHIV, 3 - Wear double gloves when providing care to PLHIV; 4 - Observed HCW unwilling to care for a patient living with or thought to be living with HIV; 5 - Observed healthcare providers provide poorer quality of care to a people living with or suspected to be living with HIV, compared to other patients; 6 - There are no standardised procedures/protocols in my health facility that reduce my risk of becoming infected with HIV; 7 - My health facility has no written guidelines to protect PLHIV from discrimination; 8 – Women living with HIV should not be allowed to get pregnant

HCW KP Opinions Key: PWID - Prefer not to provide services to people who inject drugs (PWID); MSM - Prefer not to provide services to men who have sex with men (MSM); FSW - Prefer not to provide services to female sex workers (FSW); TG - Prefer not to provide services to transgender individuals (TG). \*Question not included in baseline