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# Healthcare Inequities of the HIV Population

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## Healthcare Inequities of the HIV Population

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#### Introduction

The topic of this poster is the healthcare inequities in the human immuno-deficiency virus (HIV) population. This topic was chosen during the Covid-19 global pandemic to serve as a reminder that there are many illnesses that have not decreased in severity and remain a real threat to global populations. The link between clinical outcomes of HIV and disparities in health care have demonstrated significant differences in administration of treatment that members of various populations experience. The social attitude toward persons living with HIV (PLWH) has changed little since the diagnosis became prevalent in America in the 1980's. HIV disproportionately affects people who, because of issues of stigma, discrimination and health inequity, often have less access to preventative and treatment services resulting in poorer outcomes Meyers and Xavier (2019). Increased awareness of PLWH and their unique needs is necessary to elicit social change to limit stigma and increase access to appropriate

### Background

- PLWH are not identifiable based solely upon age, race, gender, sexual orientation, locale, or socioeconomic status
- Disparities in healthcare exist for several reasons, one of the most consequential is stigma associated with the diagnosis
- PLWH exist in every population, providing education and advancing social attitudes is imperative to reducing stigma
- Advancement in treatment has changed a diagnosis of HIV from a presumable death sentence to a manageable chronic illness

### Populations at risk

- Those in lower socio-economic regions Nwangwu-lke et al., (2020)
- Females living in Latino and African-American communities Essuonetal et al.,(2020)
- Persons practicing unsafe sexual behaviors
- Those sharing needles when using intravenous drugs

### Pathophysiology

- HIV or human immunodeficiency virus causes acquired immune deficiency syndrome (AIDS) Ahmed et al., (2019)
- HIV Infection causes progressive destruction of the cell-mediated immune (CMI) system, primarily by eliminating CD4+ T-helper lymohocytes. Ahmed et al., (2019)
- Decreased immunity leads to opportunistic infections and certain cancers. Thornton et al., (2017)
- PLWH experience higher morbidity and mortality due to secondary illnesses associated with HIV/Aids Thornton et al., (2017)

## Significance of Pathophysiology

- The care of the patient with HIV initiated in early stages after exposure contributes greatly to effectiveness of treatment Essuon et al., (2020)
- Immune response may vary as time elapses after exposure secondary Immunothrombocytopenia (ITP) is one example of reaction to HIV Nwangwu-Ike et al., (2020)

#### **Implications for Nursing Care**

- Advanced Practice Nurses (APN) as front-line professionals must be versed in current treatments for HIV patients
- Assessment and referral to appropriate care must be prioritized to ensure access to timely and efficient care
- Education regarding pre-exposure prophylaxis (PREP) programs for those in high risk populations Huang et al., (2018)
- Patient education regarding prompt treatment promoting better outcomes for PLWH
- Communities must have educational programs to ensure all members have access to information to make informed decisions about their HIV diagnosis
- Communal groups need tasked to promote increased participation in preventative health care screenings Bradley et al., (2018)
- Community stake-holders education on fiscal benefits of early detection of HIV vs care in late stage disease
- Education of communal healthcare teams must remain current and consistent with latest treatment modalities
- Institutional culture must be addressed to ensure appropriate professional treatment is afforded to all PLWH
- Sexual hygiene must be promoted as early as possible to increase compliance with safe sex practices
- Increased availability of HIV screening at local clinics promoting increased likelihood of prompt diagnosis of HIV Myers and Xavier (2019)
- Implement programs to aid cessation of IV drug usage and maintaining basic principles of healthy living
- Prenatal teaching to decrease HIV risk to newborns
- Promotion of an inclusive atmosphere in clinics and offices to facilitate patient and family participation in care
- Development of retention strategies for maintaining PLWH in treatment programs



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#### Conclusion

PLWH are present in all populations, those fortunate enough to obtain prompt appropriate care are living longer with higher quality of life than those who do not. It is imperative that public opinion of an HIV diagnosis be seen as, a chronic illness with viable treatments options, helping those affected live less abbreviated lives. Initiating educational programs in social, religious, and communal groups assists healthcare to access people who are otherwise hesitant to seek care. Education is key to advancing social attitude toward HIV and management of this illness. Providing early and appropriate care has demonstrated that better outcomes are obtainable for PLW Petrucci, Custer & Nemec (2019). Healthcare must continue with education of its caregivers to ensure available care is current and relevant to PLWH. Institutional culture must be frequently and consistently evaluated to ensure a non-judgmental atmosphere is present to promote active seeking of care by those PLWH.



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