

QUALITY IMPROVEMENT (QI) APPROACH IN TACKLING HIV-RELATED STIGMA AND DISCRIMINATION (S&D) AMONG HEALTHCARE WORKERS IN SELECTED HEALTH FACILITIES IN MALAYSIA : THE INITIAL PHASE



AUTHOR

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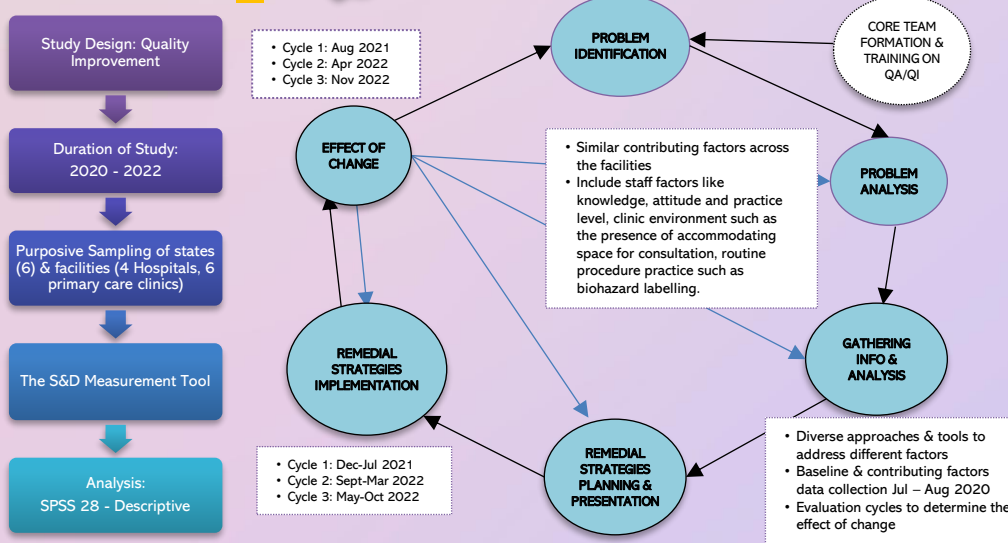
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BACKGROUND

- Stigma had been described as a union of five inter-related dimensions from labelling, stereotyping, separation to status loss and discrimination¹. S&D led to consequences like avoidance of access to care which delayed diagnosis and in turn initiation of the treatment².
- Theory and / or evidence-based interventions had been implemented globally to reduce stigma either at the PLHIV level³, health care facility which targeted health care workers^{4,5} or community³.
- As Malaysia too recognized S&D among PLHIV in health facility as one of the challenges compromising services delivery and access to care, a mutual partnership between policymaker (HIV/STI/Hep C Sector, MOH), research institute (IHSR) and civil societies representative (Malaysian AIDS Council (MAC)) was established.
- This was the initiation of this study that used a quality improvement approach to reduce S&D among healthcare workers in selected health facilities.

MATERIAL AND METHODS

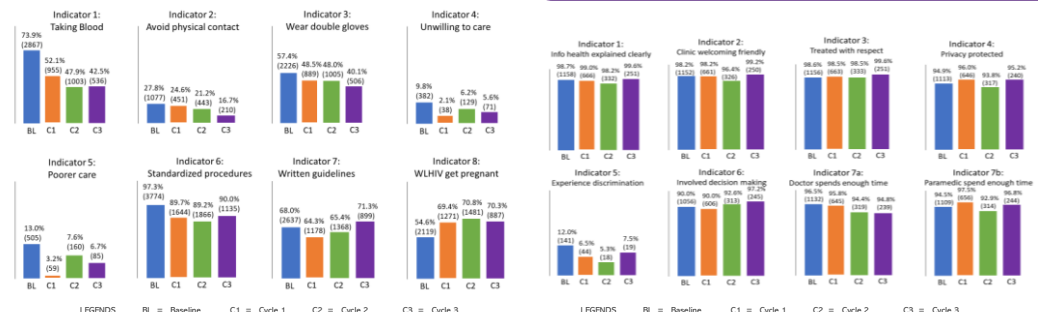


RESULTS

Facility-specific intervention strategies were developed based on the factors identified. They were categorised into structure support, process improvement and people-related intervention which targets either the PLHIV or HCW¹⁸.

HCW S&D INDICATOR

PLHIV S&D INDICATOR



CONCLUSION

Although improvement in S&D status were observed in post-remedial Cycle 1, they plateaued in Cycle 2 and 3 in almost all HCW and PLHIV indicators. Scaling-up must take into consideration contextual factors to ensure sustainability.

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