

# Outside of the City:

### Applying Conversations from a Rural State to Diverse AD Geographies

#### **Darla Peterson and Lexie Hach**

Division of Public Health

Bureau of HIV, STI, and Hepatitis | Capacity Extension Program

1

### Introductions







Lexie Hach

Regional Health Specialists—6 years ago on November 8, 2016
Iowa Department of Health and Human Services
Division of Public Health
Bureau of HIV, STI, and Hepatitis Capacity Extension Program





#### **Disclosure Statement**

We have NO financial disclosures or conflicts of interest with the presented material in this presentation.





### **Objectives**

- I. Identify ways to adapt academic detailing to fit the needs of a rural state with rural medical providers and service providers in mind.
- 2. **Explore creative models** for sharing information, engaging stakeholders, and ways to adapt your practice.
- 3. Recognize the benefits of collaborating with other detailing programs.
- 4. **Discuss scenarios** and **offer responses** to difficult conversations or situations.





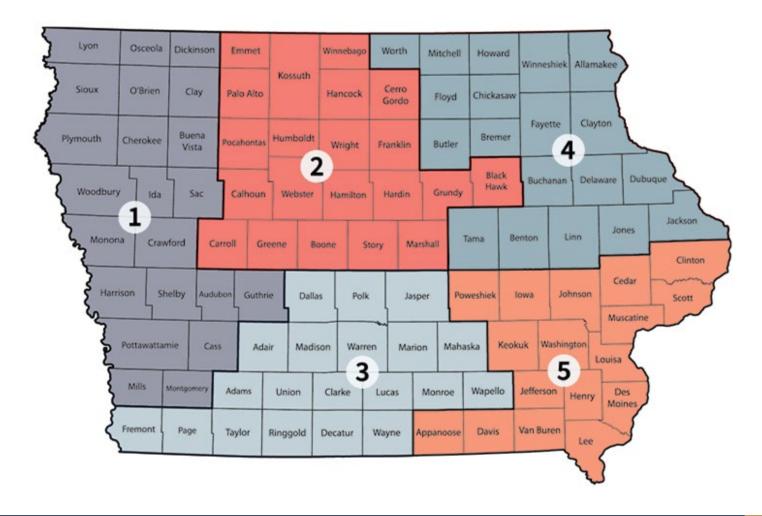
### **Geography of Iowa**

- 99 counties
- Population:~3.1 million
- 85% of the land in lowa is farmland
- 54 people per square mile



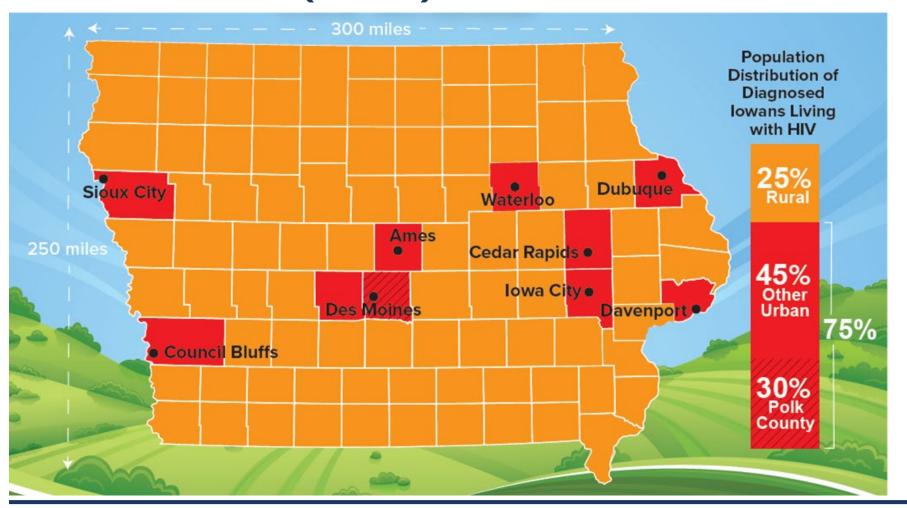


### Regional Health Specialist (RHS) Map





### **HIV** in Iowa (2021)



In 2021, there were 3,077 people living with HIV in Iowa who were diagnosed.

Approximately **75**% resided in the ten most populous counties, with **30**% in Polk County alone.

The remaining **25**% resided in more rural areas.



### History of the Program

Iowa HIV and Hepatitis Community Planning Group (CGP)

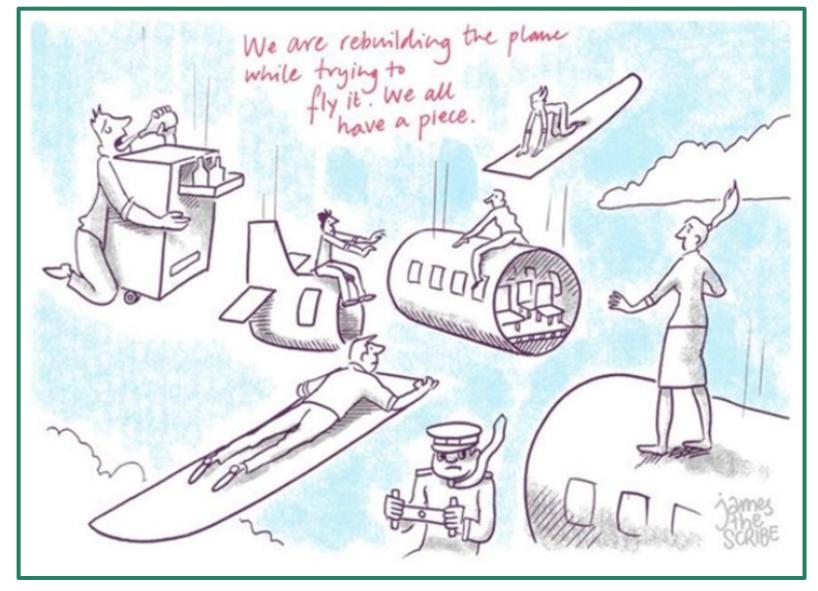
• The CPG saw a need to have this type of education in the rural parts of lowa, especially as it relates to stigma.

Our funding comes from the HRSA's Ryan
 White Part B Supplemental grant as an Early
 Interventions Services (EIS) activity.
 Other grants also support the initiative.

Program is 6 years old this November!



### Our First Steps...





# Adapting Academic Detailing for Rural Areas



### Adapting AD for a Rural State

WHAT DIDN'T WORK --> ADAPTATION

Cold calls

Calling or emailing to ask who is in charge of scheduling provider/nurse training (too far to drive)

Emailing providers — Contacting the person in charge of scheduling providers

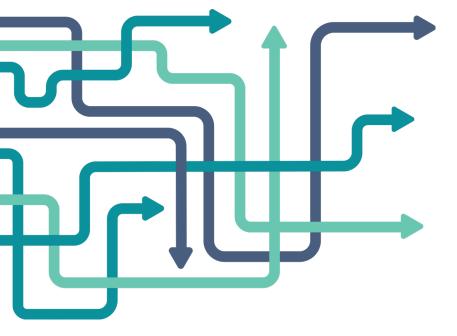
One-on-one conversations --- Speaking to all the medical providers

Broad topics— Focused topics require too much time





### **Pivot Points**



- Instead of providers, try scheduling with nurses
- Covid-19
- Weather
- Monkeypox
- Menu of Options
  - Variety of ways to provide AD sessions
  - Variety of focused topics







### Innovative Ways to Maintain Communication

- Hybrid presentations: one person presents remotely and the other is in person
- Co-presentations
- Pop-up presentations (i.e., Facebook)

- Engage your audience!
- CEU/CME offerings
- Open houses
- Community forum/education panel



# **Consider Collaboration**



### Don't Duplicate—Collaborate!

- Example: State Opioid Response Academic Detailers
  - Address the opioid overdose crisis
- Know what they are presenting and who they present to
- Mentoring
- Work together—co-presentation
- Attend their presentations!
- Have joint meetings/check-ins





# 2021 Program Outcomes



### 2021 Outreach Outcomes by the Numbers

Stakeholders work in a variety of settings and the following represent the locations where outreach was conducted in 2021.



17 sheriff/police/jail5 pharmacy80 substance use

76 public health 41 educational facilities 10 fire dept./EMS



### 2021 Outreach Outcomes (continued)

414 outreach engagements with 5044 stakeholders



- 90 Presentations (AD Sessions)
- 276 Community Meetings
- **48** Other\*

\*May include "check-ins," condom deliveries, consultations, or referrals





### 2021 Outreach Outcomes (continued)

In 2021, AD sessions were attended by 1071 stakeholders.

91% of session attendees rated the course they attended as very good or excellent

94% of attendees rated the instructor as very good or excellent

83% of respondents were able to identify at least one example of new information they gained

**54**% of respondents named at least one action they were willing to take to help address HIV, STIs, and hepatitis.



# Newsletter Analytics 2021

### Public Health







31%

average open rate for the RHS newsletter in 2021\*

\* Industry standards vary, however, a generally accepted percentage for an email campaign success rate is 15–20%.

6.08%

average monthly click rate for the RHS newsletter in 2021\*\*

\*\* According to Campaign Monitor, a good clickthrough rate for email is between 2 and 5%.





# Condom Program 2021

1,684,340 condoms distributed

436 participating organizations

Regional Health Specialists help administer the condom program, called <u>myiacondoms.org</u>



## **Breakout Session Activities**

### Scenario One

You are in an AD session discussing health topic "X". One of the clinicians states, "That health issue isn't a problem here."

#### For example:

"I don't believe in offering HIV testing; we don't have that here."

#### How would you respond?





### **Scenario Two**

You are offering several AD sessions at a medical clinic with a variety of providers.

Dr. Smith is not on board with this health topic. Dr. Smith continues sharing her opinion on the health matter and even brings politics into the conversation. She states, "You must be on X side of the political spectrum."

How do you navigate the conversation and bring it back to the AD topic?





### **Scenario Three**

You contact the clinic manager to schedule a one-on-one meeting with a provider/ clinician. The clinic manager states you will have to present to all 10 providers during their 7am staff meeting.

How do you make this AD session work? How do you respond?





# Questions/Closing

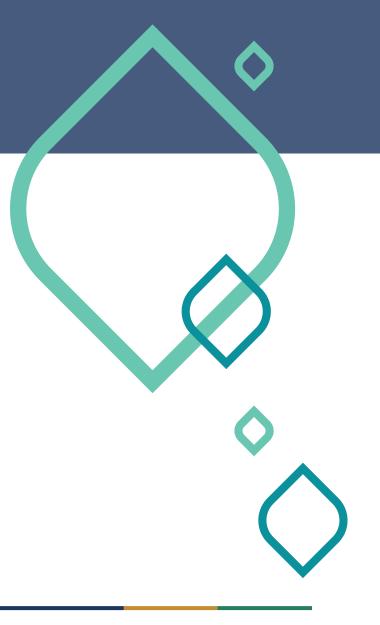
- Takeaways from today?
- One thing you learned?
- Are there ways you can incorporate what you learned today into your AD?



### **Contact Information**

Darla Peterson
<a href="mailto:darla.peterson@idph.iowa.gov">darla.peterson@idph.iowa.gov</a>
515-401-7114

Lexie Hach
<a href="mailto:lexie.hach@idph.iowa.gov">lexie.hach@idph.iowa.gov</a>
515-401-6120









Please rejoin the main room now by clicking on the link in the chatbox.

