

April 2023

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## **JOURNEY MAP**

# **People Experiencing Homelessness in Urban Areas Accessing Synchronous Telehealth for Primary Care**

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U.S. Department of Health and Human Services  
Health Resources & Services Administration  
Bureau of Primary Health Care



**HRSA**  
Health Resources & Services Administration

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## Background

This is one in a series of four journey maps that depict the journeys experienced for populations as they access, receive, and engage in virtual care at health centers, including:

- People experiencing homelessness in urban areas accessing synchronous telehealth for primary care.
- Older adults in rural areas using remote patient monitoring technologies to manage chronic conditions.
- Pregnant residents of urban public housing using mHealth app for prenatal care.
- Adolescents using telehealth for mental health care at urban school-based service sites.

## How Your Health Center Can Use Journey Maps

These journey maps are illustrative examples your health center can adapt and use to map the journeys of people in your community and expand your understanding of different populations and priority health topics.

The intent of these journey maps is for your health center to gain additional understanding of:

- Issues impacting peoples' ability to access, receive, and engage with virtual care at a health center.
- Actionable strategies to address populations' barriers to equitable access to virtual care.

Your health center staff can apply information from the journey maps to promote equity in virtual care programs to:

1. Think strategically to promote equity in virtual care access and delivery.
2. Identify equity-related issues and actionable strategies to mitigate health care disparities.
3. Prepare to establish or expand virtual care.
4. Implement and evaluate virtual care.
5. Enhance peripheral workstreams in health care delivery.

## Guide to the Virtual Care Journey Maps, References, and Other Resources

This journey map is one in a series of four journey maps that depicts the experiences for populations as they access, receive, and engage in virtual care at health centers. The following materials can be found at the [Optimizing Virtual Care](#) webpage:

- Links to each of the four journey maps.
- Guide to the Virtual Care Journey Maps: Background and Tips for Review which contains detailed information on the journey map development process and glossary of terms.
- References for OVC Journey Maps which contains references cited throughout the journey maps.
- Additional information on the OVC program overall, including the OVC Implementation Toolkit.

## Scenario

This journey map is about people experiencing homelessness who live in urban areas and need primary care services but are not enrolled as patients at a health center. People experiencing homelessness do not have stable housing. Instead, they may live in temporary accommodations (e.g., a shelter), transitional housing, or permanent or supportive housing that is targeted to people experiencing homelessness.<sup>1</sup> They may also live in a vehicle, a motel, the outdoors, or at another person’s house or apartment (i.e., “doubled-up”).

To support the health of people experiencing homelessness, an urban health center wants to:

1. Conduct outreach and enroll them in primary care services.<sup>2</sup>
2. Provide information and the chance to sign up for synchronous telehealth for primary care by using a personal device (e.g., smartphone) or a telehealth kiosk at a site in the community (e.g., shelter).<sup>3</sup>

Synchronous (“real-time”) telehealth services include:<sup>4,5</sup>

- Audio-only services that use a two-way, interactive audio-only technology, such as a telephone for “live” or real-time interactions between a patient and provider.
- Video-only services that use a two-way video technology or other Health Insurance Portability and Accountability Act (HIPAA)-compliant video connection to conduct a “live” or real-time interactive visit between a patient and provider.

## Social Determinants of Health (SDOH)<sup>6</sup> That Can Impact the Journey to Access Care

Older adults living in rural areas may:



### Economic Stability

- Not earn or have enough money to pay for housing, food, or other basic needs.<sup>7-9</sup>
- Be employed but still experiencing homelessness.<sup>7</sup>



### Education Access and Quality

- Experience challenges finding or using health information (health literacy).<sup>10</sup>
- Use technologies but may have challenges finding, appraising, and using health information using electronic sources (digital literacy).<sup>11,12</sup>



### Health Care Access and Quality

- Need complex medical care because of stress, trauma, and challenges in reaching care.<sup>13</sup>
- Need support with substance use and behavioral health.<sup>14,15</sup>
- Need access to free or low-cost health insurance or health services.<sup>16</sup>



### Neighborhood and Built Environment

- Not want to be homeless but have trouble finding housing due to a shortage of available affordable housing.<sup>17</sup>
- Not have access to affordable or easy to use transportation.<sup>18-20</sup>
- Need places to charge devices, secure devices, or connect to the internet.<sup>11</sup>



### Social and Community Context

- Feel that “being homeless” becomes their identity.<sup>21</sup>
- Experience discrimination and stigma, including when seeking health care, because of “being homeless” and other identities (race, ethnicity, gender identity, sexual orientation, ability).<sup>22</sup>
- Be from a population with more representation in the homeless population compared to the overall U.S. population, including people of color, LGBTQI+, Veterans, and people with disabilities.<sup>8,15,22-29</sup>

All references can be accessed in the “References” document available at <https://bphc.hrsa.gov/funding/funding-opportunities/optimizing-virtual-care>.

**Step 1**

**Understanding health care needs and health center services available**

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People experiencing homelessness have new primary health care needs that require treatment but are not an emergency. Health centers want to let them know about synchronous telehealth services available.



**Step 2**

**Considering the costs and benefits of a synchronous telehealth visit**

Page 8

To help see if it is worthwhile, people experiencing homelessness think about what might get in the way of using telehealth for an appointment. Health centers want to help them minimize costs and maximize the benefits of using telehealth and seeking care.

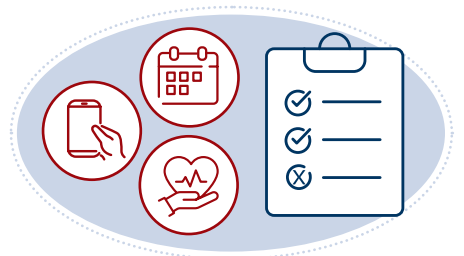


**Step 3**

**Preparing for a synchronous telehealth visit for the first time**

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To prepare for their telehealth visits, people experiencing homelessness are figuring out how to make an appointment fit within their lives and use telehealth technologies. The health center wants to help them make an appointment and use the technologies.



**Step 4**

**Having a synchronous telehealth appointment**

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People experiencing homelessness need to get online using their personal device or go to a kiosk at a community site to connect to their visit. Health centers want to ensure they can connect and engage in the visit.



**Step 5**

**Keep engaging in health care and telehealth**

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After their visit, people experiencing homelessness continue to engage in telehealth, following up on referrals, and monitoring their health. Health centers want to support continuity of care by helping them make follow-up appointments and access resources.





## Step 1 Understanding health care needs and health center services available

During this step, people experiencing homelessness have new primary health care needs that require treatment but are not an emergency. The challenge is they are not enrolled to receive care at a health center and are not aware of primary care services available to address their needs. Health centers are aware of community members experiencing homelessness who have unmet primary health care needs.



The health center begins outreach programs to:

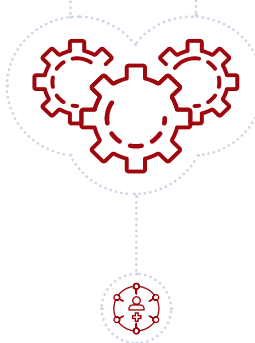
1. Inform people experiencing homelessness about the exciting new primary care services available through synchronous telehealth.
2. Help them enroll for health care services.

### Issues patients may face at this step

**Not being able to find and use health and technology information.** Information is not made easily available in a way that accommodates for health literacy, digital literacy, and ability to write.<sup>30</sup>

**Distrust of health care, especially among people of color and people who identify as LGBTQI+.** Current and historic mistreatment by health organizations and providers leads to lack of trust in health care.<sup>31-35</sup>

**Distrust of technology, especially among people of color and people with disabilities.** Technology made without all users in mind can lead to products that are harmful or very difficult to use.<sup>36-39</sup>



### Health center activities that impact access to care

**Methods for outreach.** The way and place outreach is done can impact trust and who is reached.<sup>40</sup>

**Complexity of enrollment process.** How new patients enroll for services can impact the ability to start or complete enrollment.<sup>41</sup>

**Training available staff and health care providers.** Knowledge about people experiencing homelessness and how telehealth can help health care can impact care provided.<sup>42</sup>

### Societal factors impacting people experiencing homelessness

Stigma and discrimination against people experiencing homelessness, especially for people of color and people who identify as LGBTQI+. Accepting discrimination against people experiencing homelessness can lead to lower quality care and support for people experiencing homelessness.<sup>30,33-37,43-46</sup>



## Ways A Health Center Can Support People Experiencing Homelessness at This Step

#### Build trusted partnerships to help outreach to people experiencing homelessness

- Hire community health workers to support outreach, enrollment, and health literacy among people experiencing homelessness.<sup>30,46,47</sup>
- Partner with community organizations trusted and visited by people experiencing homelessness (e.g., food banks)<sup>34</sup> to build trust and support needs.<sup>40,48</sup>

#### Support people experiencing homelessness with health knowledge and comfort using telehealth technology

- Hire digital navigators (professionals who help people learn to use digital technologies) to screen for technology needs among people experiencing homelessness and provide needed training.<sup>49</sup>

#### Welcome people experiencing homelessness, especially people of color and those who identify as LGBTQI+

- Find and fix ways that the health center might be biased against people experiencing homelessness.<sup>50</sup>
- Provide staff training on bias, discrimination, cultural humility, and ways that telehealth supports health equity for people experiencing homelessness.<sup>51,52</sup>



## Step 2 Considering the costs and benefits of a synchronous telehealth visit

After learning that the health center can help with their health care needs using virtual care, people experiencing homelessness are enrolled in synchronous telehealth for primary care. During this step, they now think about what might get in the way of or help them use synchronous telehealth services.

In this step, the health center wants to help people experiencing homelessness minimize costs and maximize the benefits of using synchronous telehealth for primary care.



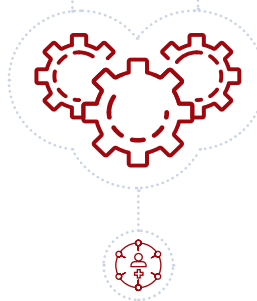
### Issues patients may face at this step

**Telehealth cost.** Appropriate devices, data plans, or internet are often not affordable or accessible.<sup>53</sup>

**Medical care cost.** Direct costs, like insurance coverage for services and prescriptions, and indirect costs, like transportation, are not affordable or easily available.<sup>54-56</sup>

**Competing financial & scheduling needs.** Seeking care might lead to a loss of opportunities (e.g., lost wages if taking time off work for telehealth visit).<sup>56-58</sup>

**Competing social & basic needs.** Engaging in care may be hard if their needs are not met (e.g., housing, childcare).<sup>59-61</sup>



### Health center activities that impact access to care

**Types of telehealth services offered.** Telehealth reimbursement policies, costs, and savings can impact the type and variety of telehealth services offered.<sup>59</sup>

**Methods for needs screening.** When and how health centers screen patients can impact the ability to address competing needs.<sup>60-62</sup>

**Ability to provide social support services.** How health centers provide service (internally, via referrals made to community organizations) can impact how health centers can help address needs identified during screening.<sup>63,64</sup>

### Societal factors impacting people experiencing homelessness

**Policies and norms about paid leave and taking time off work.** The ability to miss work for health care can lead to needing to decide between jobs or income and using health care services.<sup>65-67</sup>

**Discrimination by internet companies in the cost, location, and quality of internet provided (digital redlining).** Internet options available can impact the ability to attend synchronous telehealth visits.<sup>68,69</sup>



## Ways A Health Center Can Support People Experiencing Homelessness at This Step

### Provide resources to address the technology and internet needs of people experiencing homelessness

- Provide low or no-cost devices and internet directly (e.g., distribute donated devices with data plans).<sup>59</sup>
- Provide charging stations at the health center or distribute solar phone chargers.<sup>59,70</sup>

### Partner with organizations to address technology and internet needs of people experiencing homelessness

- Partner with other entities to provide low or no-cost devices and internet.<sup>71,72</sup>
- Provide referrals to locations that offer community charging stations.<sup>70</sup>

### Reach out to screen for and provide social support services in locations that people experiencing homelessness visit or live

- Provide screenings and services in different locations (e.g., use mobile units, outside venues, or spaces in shelters and other partner organizations) so people experiencing homelessness can engage with staff and providers outside the health center.<sup>59</sup>

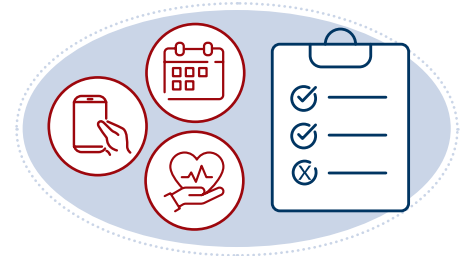




## Step 3 Preparing for a synchronous telehealth visit for the first time

In this step, people experiencing homelessness are preparing for their first synchronous telehealth visit. Part of this preparation is figuring out how to make an appointment for synchronous telehealth for primary care and fit the visit within their lives. Another part of the preparation is figuring out how, for the first time, to use technologies for the virtual visit.

During this step, the health center wants to help people experiencing homelessness address issues in making appointments and using technologies for synchronous telehealth visits.

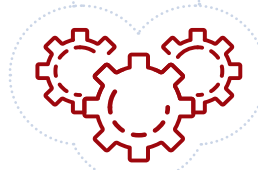


### Issues patients may face at this step

**Competing priorities.** Addressing basic needs or crises may be more important to address than attending a primary care visit or learning how to use a virtual care technology.<sup>73,74</sup>

**Discomfort, shame, or embarrassment in seeking care.** Discrimination faced when getting care can lead to negative feeling about care seeking.<sup>74,75</sup>

**Discomfort in using telehealth technology.** Not having previous virtual care experiences can lead to discomfort when using technology.<sup>76</sup>



### Health center activities that impact access to care

**Availability of appointments.** Ways appointments can be made and the times of day and locations available for visits.<sup>74</sup>

**Flexibility of appointments.** Adaptability of clinic policies to allow for late patient arrivals or to make up missed appointments.<sup>74,75</sup>

**Social norms about how care is provided.** Staff and clinician beliefs about and interactions with people experiencing homelessness can impact quality of care.<sup>74,75</sup>

### Societal factors impacting people experiencing homelessness

**Social norms and biases.** Stereotypes and preconceived ideas can influence support for social services and health care options available and relevant to people experiencing homelessness.<sup>75</sup>



## Ways A Health Center Can Support People Experiencing Homelessness at This Step

### Support basic needs and address competing priorities with dignity and respect

- Enable community health workers to screen people experiencing homelessness for competing priorities and connect them with programs or in-house services to address identified needs.<sup>77,78</sup>
- Provide resources or support to help address reasons for discomfort in seeking care, such as giving out hygiene kits.<sup>79</sup>

### Make telehealth appointments easy to schedule

- Work with health center staff to develop multiple modes to make appointments (e.g., schedule via phone or online, drop-in appointments, or open access scheduling), visit times outside business hours, and community-based visit options (e.g., at a shelter).<sup>76,80,81</sup>

### Help people experiencing homelessness build trust, confidence, and skills in using technology for virtual care

- Enable community health workers and digital navigators to go to places accessible to people experiencing homelessness to offer health and technology support.<sup>82,83</sup>

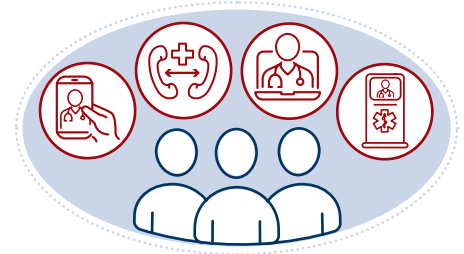




## Step 4 Having a synchronous telehealth appointment

In this step, people experiencing homelessness make an appointment for synchronous telehealth for primary care. To attend the visit, they need to get online using their personal device or go to a kiosk at a community site.

During this step, the health center wants to ensure they experiencing homelessness can connect and engage in the synchronous telehealth primary care visit.



### Issues patients may face at this step

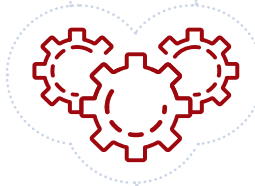
**Competing priorities.** Crises or other needs can take priority over a telehealth visit.<sup>84-88</sup>

**Safety of the visit.** Concerns about security and privacy of telehealth technology and where the visit happens can impact comfort during a visit.<sup>89</sup>

**Digital literacy and health literacy.** Knowledge and experience with health care and technology can impact comfort with and ability to use technology for telehealth.<sup>87</sup>

**Technology usability.** A device, telehealth platform, or kiosk can be designed in a way that makes it hard for some people with disabilities, including Veterans, to use.<sup>90-92</sup>

**Internet availability.** Cost and access to quality internet can impact visit attendance.<sup>93-95</sup>



### Health center activities that impact access to care

**Sending appointment information.** Methods for sending reminders and connection information can impact patients' ability to join the visit.<sup>88,96</sup>

**Mechanisms for late or missed appointments.** Whether there are accommodations for patients who cannot attend a visit as scheduled can impact their ability to seek care without delay.<sup>88</sup>

**Coordinated care.** Multidisciplinary providers attending visits and collaborating on care plans can help patients with multiple health needs.<sup>97,98</sup>

**Tech support.** Training for patients and providers on the telehealth platform or kiosk or having information technology (IT) available can help address technical issues before or during a visit.<sup>89</sup>

### Societal factors impacting people experiencing homelessness

**Ableism in technology design.** Bias and discrimination against those with disabilities can lead to people of diverse ability not being included in the technology design and selection process.<sup>99</sup>

**Discrimination in internet availability (digital redlining).** The differential availability of internet for low-income populations and neighborhoods limits access to affordable, quality internet.<sup>100,101</sup>



## Ways A Health Center Can Support People Experiencing Homelessness at This Step

### Help patients prepare for and attend their telehealth visit

- Use multiple ways to send visit reminders and provide connection information (e.g., email and text) in a way that meets patients' general literacy and digital literacy needs.<sup>96,97,102</sup>
- Collaborate with or refer Veterans to the Veterans Affairs (VA) telehealth services program.<sup>103</sup>

### Support technology needs and usability

- Assess usability of telehealth platforms and kiosks with patients of varied abilities.<sup>104-107</sup>
- Ensure kiosks are in a private and safe space at an accessible, trusted location.<sup>98</sup>
- Have digital navigators available at kiosk sites or via phone to provide practice opportunities before the visit or support technology needs during the visit.<sup>108</sup>
- Distribute smartphones with unlimited data plans to patients to support internet access and mitigate tech issues.<sup>109,110</sup>

### Make the most out of the telehealth visit

- Leverage synchronous telehealth and other virtual care technologies to engage multidisciplinary care team providers and case managers during and after the visit.<sup>111-114</sup>



## Step 5 Keep engaging in health care and telehealth

At this step, people experiencing homelessness are:

- Continuing to engage in synchronous telehealth for primary care.
- Following up on referrals for basic needs and appointments with the multidisciplinary care team for other health needs (e.g., behavioral health).
- Finding ways to start and sustain behavior changes, including monitoring their health.

During this step, the health center wants to support continuity of care for people experiencing homelessness by helping make follow-up appointments and helping patients access resources.

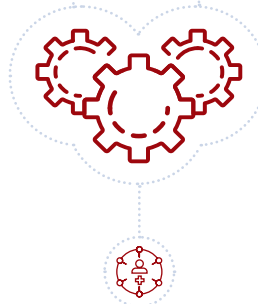


### Issues patients may face at this step

**Competing priorities and basic needs.** Being able to engage in health behaviors and monitor health can be hard when experiencing crises (e.g., losing housing) or other obligations (e.g., work) or basic needs (e.g., food) are not met.<sup>115-117</sup>

**Continued access to device and internet.** The ability to charge and secure devices or pay for internet can impact the ability to use telehealth services.<sup>118,119</sup>

**Desire to continue care seeking and telehealth.** Previous experience with synchronous telehealth can impact trust and comfort in continuing care.<sup>120,121</sup>



### Health center activities that impact access to care

**Patient retention and connectedness.** Expectations for providers for when and how they follow up with patients can impact connections to referrals.<sup>121-123</sup>

**Sustainability of telehealth program.** Reimbursement for services, cost of purchasing and maintaining technologies, and provider satisfaction affect feasibility of continuing a telehealth program.<sup>119,124</sup>

### Societal factors impacting people experiencing homelessness

**Social support system availability.** Beliefs and attitudes about people experiencing homelessness can impact policies regarding, funding for, and availability of social support systems.<sup>125,126</sup>

**Telehealth policies.** Federal and state policies regarding reimbursement for synchronous telehealth, including limitations on audio-only services, can limit telehealth options available.<sup>127</sup>



## Ways A Health Center Can Support People Experiencing Homelessness at This Step

### Continue to address competing priorities, basic needs, and technology needs

- Leverage virtual care to regularly screen patients in their everyday life (known as “ecological momentary assessments”), such as short screeners completed via text message or asynchronous telehealth.<sup>128</sup>
- Regularly review community-based partners to see if new partners are needed based on changing patient needs (e.g., patient need screening identifies an increase in Spanish-speaking patients and current partners support digital literacy or basic needs, but do not provide services in Spanish).<sup>129,130</sup>

### Promote touchpoints with health center, staff, and providers

- Create opportunities for patients to engage with the health center, community health workers, and digital navigators (e.g., create a community space for digital literacy and tech support with charging stations).<sup>118</sup>
- Establish ways to enact “warm handoffs” via telehealth and coordinate across providers from the multidisciplinary care team and with patients.<sup>131,132</sup>

### Facilitate access to and engagement in telehealth

- Individually tailor which types of care (e.g., primary care, behavioral health) are best served in-person, via telehealth, or hybrid based on patient needs.<sup>119,133,134</sup>
- Consider remote patient monitoring, mHealth, or other virtual care technologies to support health management.<sup>135,136</sup>

## Resources

Below are resources relevant to this journey map from U.S. government agencies or organizations funded by U.S. government agencies.

### Agency for Health Care Research and Quality (AHRQ)

- Information, tools and professional trainings on health literacy: <https://www.ahrq.gov/health-literacy/index.html>
- Report on “Accessibility and Beyond: Designing Consumer Health IT for Disabled Individuals”: <https://digital.ahrq.gov/ahrq-funded-projects/accessibility-and-beyond-designing-consumer-health-it-disabled-individuals#nav-publications>
- Report on “Developing Evidence-Based, User-Centered Design and Implementation Guidelines to Improve Health Information Technology Usability”: <https://digital.ahrq.gov/ahrq-funded-projects/developing-evidence-based-user-centered-design-and-implementation-guidelines>

### Benefits.gov

- Information about the Continuum of Care Homeless Assistance Program: <https://www.benefits.gov/benefit/5889>
- Information about Projects for Assistance in Transition from Homelessness (PATH): <https://www.benefits.gov/benefit/728>

### Centers for Disease Control and Prevention (CDC)

- Information and tools on health literacy research, practice and evaluation: <https://www.cdc.gov/healthliteracy/>
- Information about digital health literacy: <https://www.cdc.gov/healthliteracy/researchevaluate/eHealth.html>
- Information and resources about LGBTQI+ youth: <https://www.cdc.gov/lgbthealth/youth-resources.htm>

### Department of Health and Human Services (HHS)

- Guidance on Nondiscrimination in Telehealth: Federal Protections to Ensure Accessibility to People with Disabilities and Limited English Proficient Persons: [https://www.ada.gov/telehealth\\_guidance.pdf](https://www.ada.gov/telehealth_guidance.pdf)
- Healthy People 2030 information on housing instability: <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/housing-instability>
- Healthy People 2030 Objective on housing and homes: <https://health.gov/healthypeople/objectives-and-data/browse-objectives/housing-and-homes>
- Health literacy resources: <https://health.gov/our-work/national-health-initiatives/health-literacy/resources>
- Programs, research, and resources to support people experiencing homelessness: <https://www.hhs.gov/programs/social-services/homelessness/index.html>

### Department of Housing and Urban Development (HUD)

- Housing assistance resources for people experiencing homelessness: <https://www.hudexchange.info/housing-and-homeless-assistance/>

### Department of Veterans Affairs (VA)

- Information about the Homeless Veterans' Program: <https://www.benefits.gov/benefit/4767>
- Information about basic medical benefits package for Veterans: <https://www.benefits.gov/benefit/303>

### Equal Employment Opportunity Commission

- Information and policies about sexual orientation and gender identity discrimination: <https://www.eeoc.gov/sexual-orientation-and-gender-identity-sogi-discrimination>

### General Services Administration

- Usability toolkit: <https://digital.gov/topics/usability/>
- User-centered design toolkit: <https://digital.gov/topics/user-centered-design/>

### Interagency Council on Homelessness

- Tools for action to support people experiencing homelessness: <https://www.usich.gov/tools-for-action/>

**National Health Care for the Homeless Council (funded in part by the Health Resources and Services Administration [HRSA])**

- Online courses for healthcare for the homeless professionals: <https://nhchc.org/online-courses/>
- Resources for health center outreach for people experiencing homelessness: <https://nhchc.org/clinical-practice/homeless-services/outreach/>
- Resources for outreach to and enrollment of people experiencing homelessness into Medicaid: <https://nhchc.org/policy-issues/medicaid-outreach-and-enrollment/>
- Case studies in COVID-19, telehealth, and health care for the homeless centers: <https://nhchc.org/wp-content/uploads/2020/08/Telehealth-Case-Studies-Report-SemiFinalJD.pdf>

**Office of Disease Prevention and Health Promotion**

- Research-based guide for developing better health websites and digital tools that support health literacy online: <https://health.gov/healthliteracyonline/>

**Rural Health Information Hub (funded by a Federal Office of Rural Health Policy)**

- Toolkit for improving digital health literacy: <https://www.ruralhealthinfo.org/toolkits/health-literacy/2/digital-literacy>

**Substance Abuse and Mental Health Services Administration (SAMHSA)**

- List of behavioral health services for people who are homeless: [https://store.samhsa.gov/sites/default/files/SAMHSA\\_Digital\\_Download/PEP20-06-04-003.pdf](https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/PEP20-06-04-003.pdf)
- List of homelessness programs and resources: <https://www.samhsa.gov/homelessness-programs-resources>
- Employment services for people experiencing homelessness: <https://soarworks.samhsa.gov/article/finding-employment-services-for-people-experiencing-homelessness>
- Provider training modules on topics including homelessness, LGBTQI+ health, technology, and others: <https://www.samhsa.gov/practitioner-training>

**The MITRE Corporation (an operator of a federally funded research and development center)**

- Social justice platform: <https://sjp.mitre.org>