

Developing a Needs Assessment to Guide Care and Resource Development for LGBTQ+ Individuals at a Student-Run Free Clinic

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Introduction

- Many student-run free clinics lack the relevant resources to address LGBTQ+ medical and social needs, which may be due to major disparities in health data recorded from LGBTQ+ populations.¹
- Although data collection has been incomplete, 9% of patients at our clinic over the last 10 years have marked that they have sex with same sex partners.



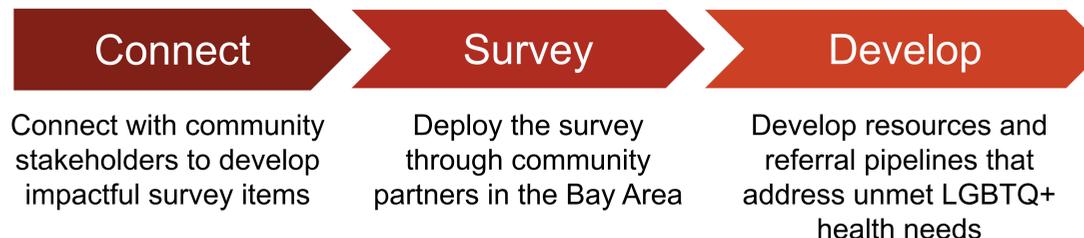
"Gender of sexual partners?"
501 patients over 10 years,
Men: 247, Women: 242, Both: 12,
Same-sex: 33

- Data for LGBTQ+ patients is lacking at Cardinal Free Clinics, as are specific medical and social resources.
- Students, residents, and medical attendings may rely on outdated and harmful stereotypes and generalizations towards SGM populations and needs assessment and resource development are needed to address health disparities.²
- SGM individuals have higher self reported rates of many acute and chronic illnesses including cancer, kidney disease, COPD, heart disease, diabetes, hypertension, and stroke.³

Community Partner

Design a regional needs assessment survey by working with the PRIDE Study⁴, which is the first longitudinal, national healthcare study of LGBTQ+ individuals. Collect relevant data through deploying the survey at LGBTQ+ community centers in the Bay Area so that CFC can develop targeted and consistent care, health education, and resources for LGBTQ+ patient populations.⁶

Project Description



Survey Items

Sociodemographics	<ul style="list-style-type: none"> • Confirming respondent is a Bay Area resident • Identifying gender identity, sexual orientation, sex assigned at birth • Identifying racial identity • Employment status
Social Needs Assessment	<ul style="list-style-type: none"> • Access and ability to pay for food, shelter, utilities, legal services, prescription medications, dental care, health insurance
Healthcare Access and Provision	<ul style="list-style-type: none"> • Respondent's rating of their physical health and mood • Access to preventative care, flu vaccines, and primary care providers • Reasons for delaying care or treatments
LGBTQ+ Regional Health Needs	<ul style="list-style-type: none"> • Access to LGBTQ+ social spaces and clinics • HIV status, access to HIV prevention and treatment • Concern regarding access to gender-affirming related, sexual-health related, mental healthcare
Impact of COVID-19	<ul style="list-style-type: none"> • Concerns regarding COVID-19 exposure • COVID-19-related financial impact and healthcare access

Lessons Learned and Recommendations

- Regional survey items are often not open source but national surveys and work with community partners can help with needs assessment development.
- Logistics for funding and IRB approval may be difficult if research participants are from the local community and not patients.
- Involving local community partners can both strengthen the quality of survey questions and develop local relationships for later deployment.

Future Directions

- Attain IRB non-medical Human Subjects approval from Stanford.
- Secure funding source to offer compensation for survey participation.
- Deploy survey in conjunction with local community partners.
- Analyze data to identify needs and trends.

Acknowledgments

We would like to thank the qCFC team for their help, guidance, and support throughout this project, as well as the PRIDE Study for their feedback on the survey. We would also like to thank Jiwoo Lee for the data and Dr. Michell for his assistance in designing the survey.

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