Community-led Educational Model for Improved Volunteer Communication in Patient Outreach

Crystal Chen[1], Sophia Pribus[1], Dr. Tamara Montacute[1], Dr. Baldeep Singh[1]
[1] Cardinal Free Clinics, Stanford University School of Medicine, Stanford, CA, USA

Stanford MEDICINE | Cardinal Free Clinics

PACIFIC FREE CLINIC

ARBOR FREE CLINIC

Introduction

The Cardinal Free Clinics are a student-run free clinic offering culturally-sensitive, high-quality transitional medical care for under-resourced patient populations in the Bay Area. Each quarter, we conduct outreach events to share our resources with the community, including flyering, tabling at community organizations and local markets, and conducting blood pressure screenings. However, volunteers reported that they were often underprepared for these events, lacking in knowledge about community contexts and patient backgrounds, hindering informed and compassionate patient care.

With these issues in mind, we partnered with two local community organizations (LifeMoves and Buena Vista Mobile Home Park) and three Stanford-based organizations (The Bridge Peer Counseling Center, Sexual Health Peer Resource Center, and Peer Educators in the Office of Substance Use) to design a series of community-led education workshops for our undergraduate volunteers. Led by our community partners, these workshops focused on their extensive knowledge and expertise to highlight best practices in engaging their clients and community.

Curriculum Development

Workshop	Community Partner / Expert
Peer Counseling and Active Listening Workshop	Stanford Bridge Peer Counseling Center
TransTalks on Nonsurgical Options for Gender-Affirming Care	San Mateo County Pride Center
Mobile Home & Poverty in Santa Clara County Discussion	Dr. Amado Padilla & Buena Vista Mobile Home Park
Traditional Asian Medicine	Dr. Neela Gautam
Sexual Health	Stanford Sexual Health Peer Resource Center and CFC Sexual and Reproductive Health Clinic
Homeless Health and Communication Workshop	LifeMoves Homeless Shelter
Geriatric Care	Apoorva Rangan, Dr. Matthew Mesias, Dr. Marina Martin
TransTalks on Language to Use with Healthcare Providers when Navigating Gender Transition	San Mateo County Pride Center
Traditional Chinese Medicine	Dr. Lixing Lao
Communicating about Substance Abuse and Narcan Training	Stanford PEERs and SUPER

Results

Workshop	p-value *before/after workshop comfort discussing health with patients*
LifeMoves - Homeless Health	<0.001
The Bridge - Mental Health	<0.001
Stanford Physicians - Geriatrics	<0.001

Table 1: p-value of Before and After Workshop Discussion Comfort Ratings. We conducted pre- and post-workshop surveys at our three largest events - Homeless Health with LifeMoves, Mental Health with The Bridge, and Geriatric Health with Stanford Physicians. Questions assessed comfort discussing various health issues with patients (see figures 1-3 captions for specific questions) and students responded on a Likert Scale from 1-5, with 1 = Very Uncomfortable, 2 = Uncomfortable, 3 = Neutral, 4 = Comfortable, 5 = Very Comfortable. Paired two-sample t-test for means was used to compare pre- and post- average Likert responses and found significant increases in comfort across all three events.
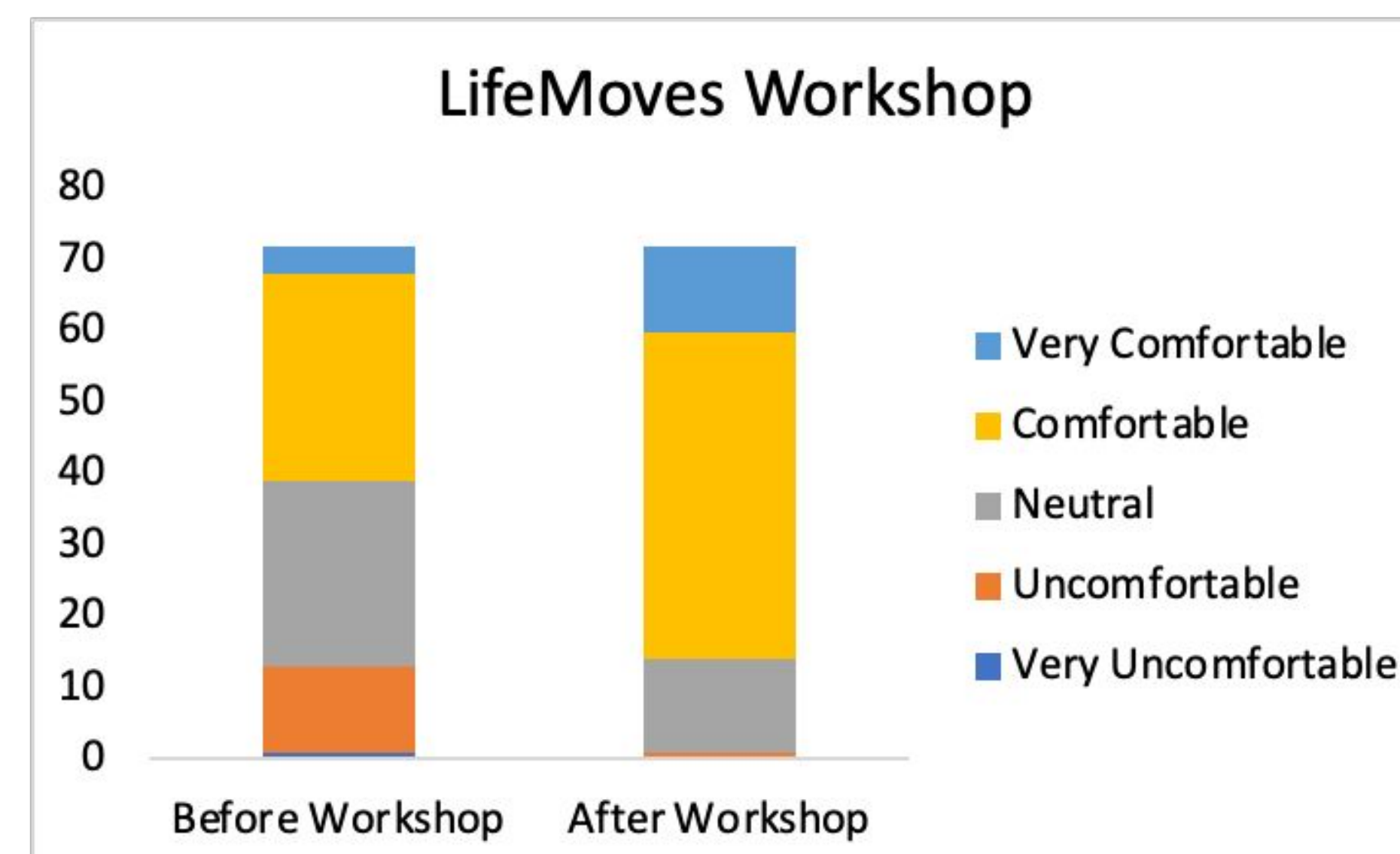

Figure 2: LifeMoves Workshop Responses. Shows grouped response quantities for questions asking how comfortable volunteers feel speaking with: 1) a patient experiencing homelessness, 2) a patient with a substance use disorder, 3) a patient with a mental health disorder.
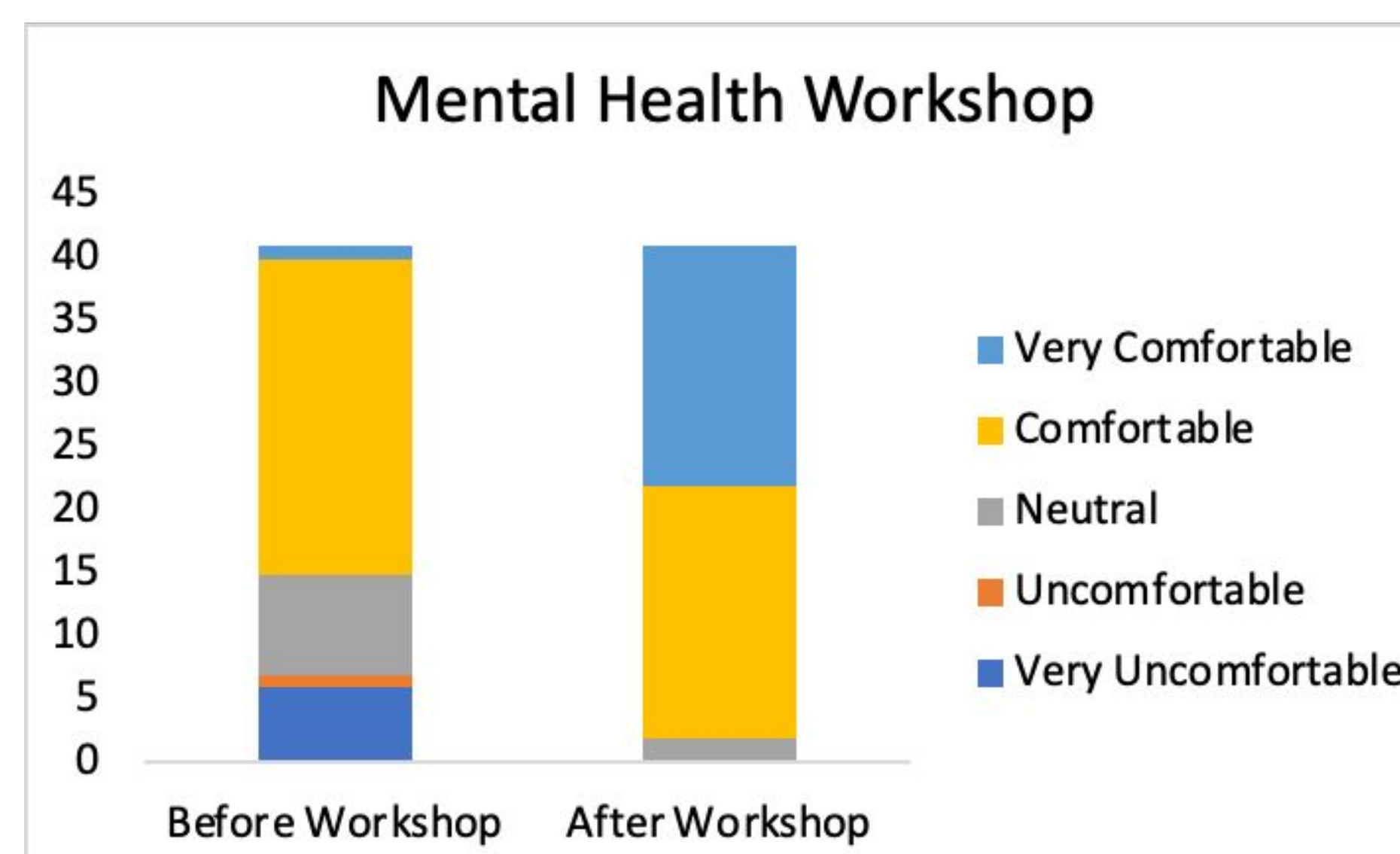

Figure 3: Mental Health Workshop Responses. Shows grouped response quantities for questions asking how comfortable volunteers feel: 1) having a conversation with a patient about ongoing mental health struggles or concerns, 2) encouraging autonomy in a patient's plans, 3) guiding a patient whose opinions/choices you disagree with.
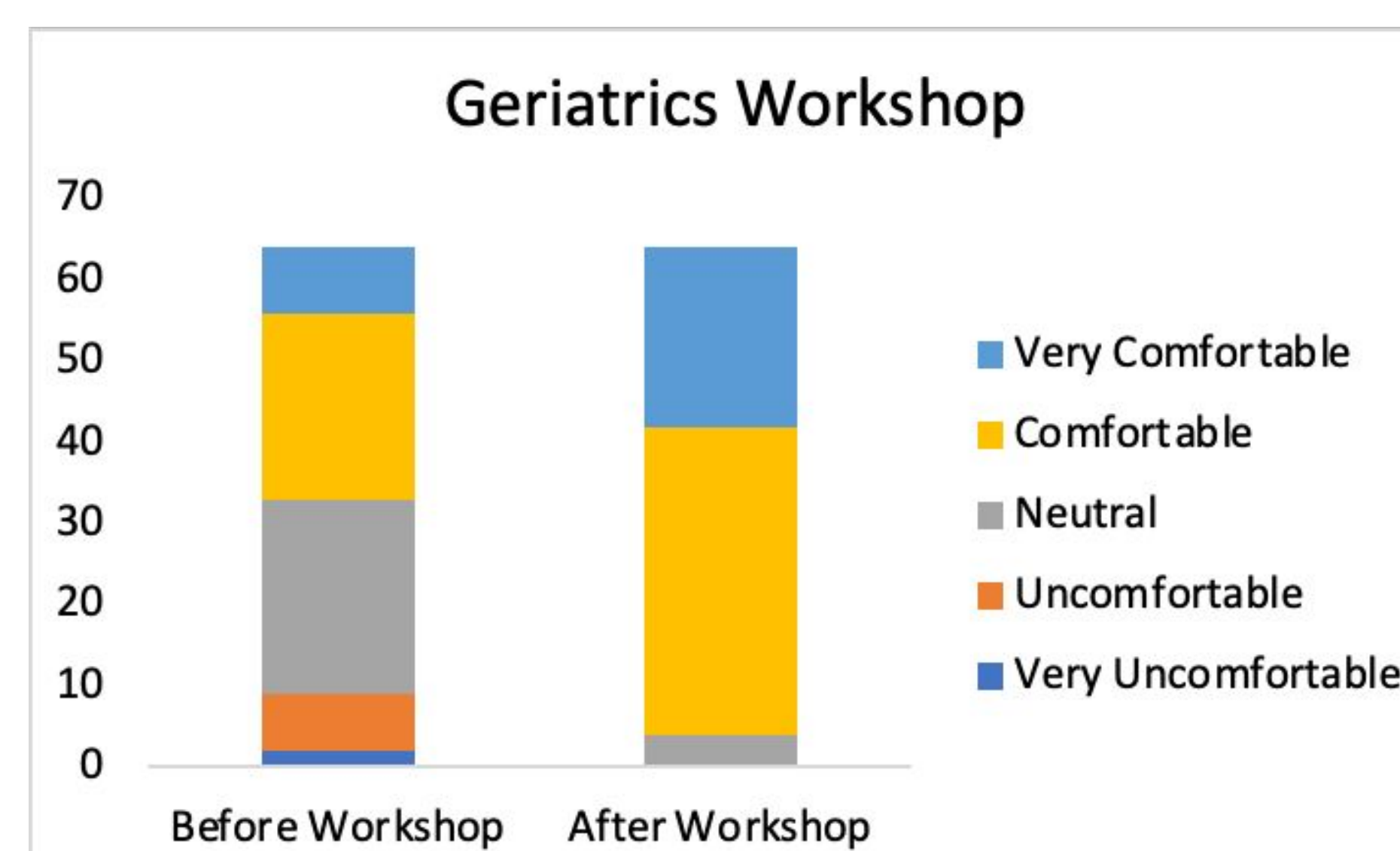

Figure 4: Geriatrics Workshop Responses. Shows grouped response quantities for questions asking how comfortable volunteers feel discussing the following with elderly patients: 1) falls, 2) medication management, 3) mental status exam, 4) activities of daily living.

Figure 1: Sample Slide on Specific Language from LifeMoves Workshop.

Stigmatizing vs. Supportive Language
Substance Use

Stigmatizing	Supportive
Dirty u-tox	U-tox shows presence of XWZ
Drug abuse or addiction	Substance use
Addict	Person with a substance use disorder
Tweaker/Junkie	Person with a substance use disorder/a person who injects drugs
Alcoholic	Person with alcohol use disorder
Relapse	Person who returned to use
Clean	A person in recovery from substance use
Failed their program/treatment	Client did not respond to program/treatment

Lessons Learned

By involving community partners in our efforts to educate volunteers about diverse patient experiences and patient communication skills, we were able to:
- Improve volunteer comfort in broaching difficult subjects with patients
- Establish long-term partnerships with community organizations
- Increased volunteer engagement at outreach events on-site

Future Directions

- Setting up consistent yearly educational trainings for volunteers
- Expand further opportunities for volunteers to provide health education for community members
- Develop specific training modules and handouts for volunteers serving different roles in clinic

Acknowledgments

We would like to thank:
- Jonathan Tang and Brandon Lieu for their support as Outreach Managers
- LifeMoves and Buena Vista Mobile Home Park
- Stanford collaborators Bridge Peer Counseling Center, SHPRC, PEERs
- All volunteers who make operations of the Cardinal Free Clinics possible and all patients who give the opportunity to participate in their care