

Project: Let’s Connect

San Francisco Community Health Center



LOCATION

San Francisco, CA
SFCHC and the SF LGBT Center



GROUPS SERVED

- Folks holding it down in SF
- Historically swindled
- Limitedly housed or homeless
- Transitional Age Youth (TAY) who are TQBLG
- Trans and gender non-conforming (GNC) folks of all ages

CONTACTS

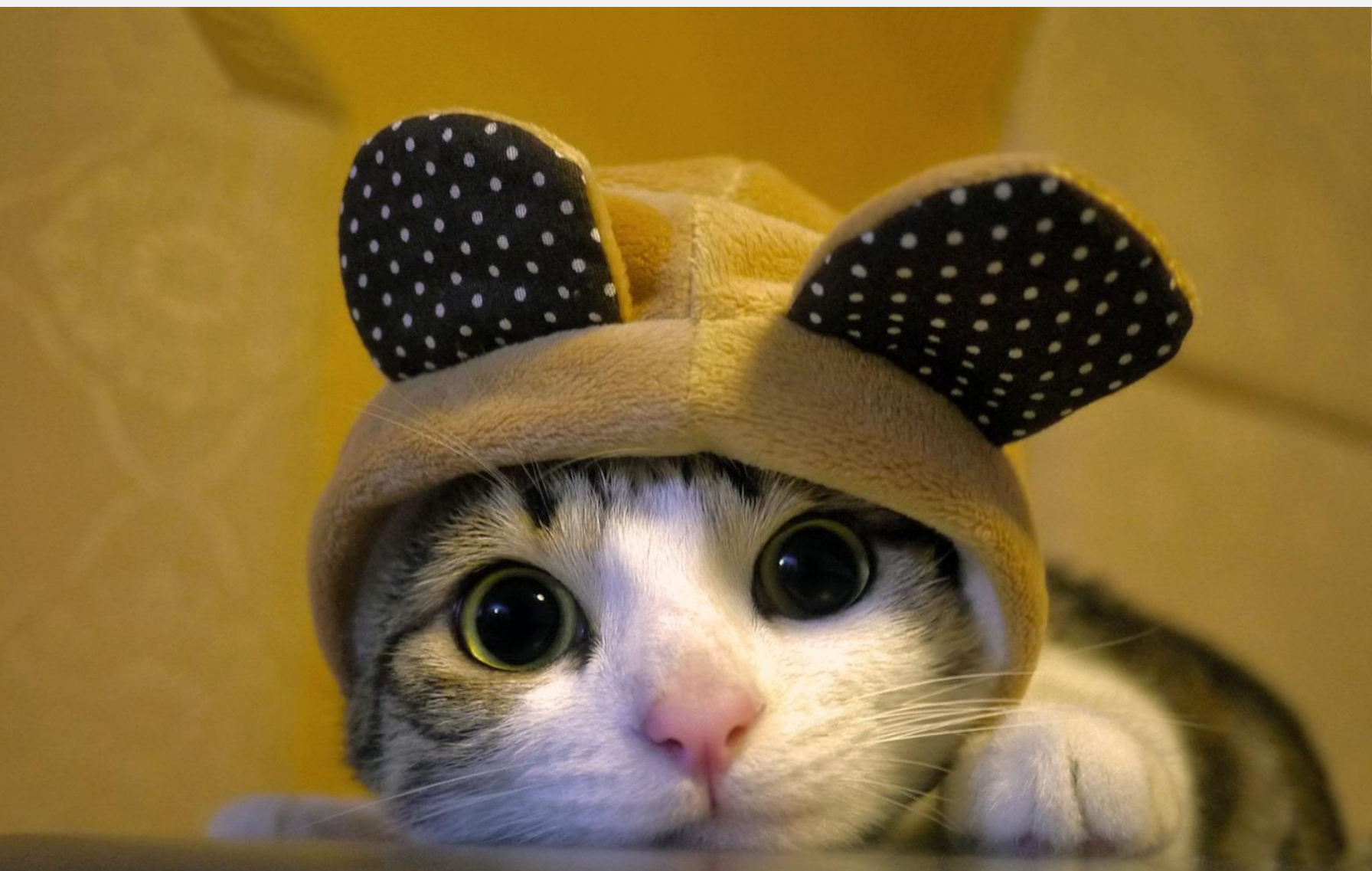
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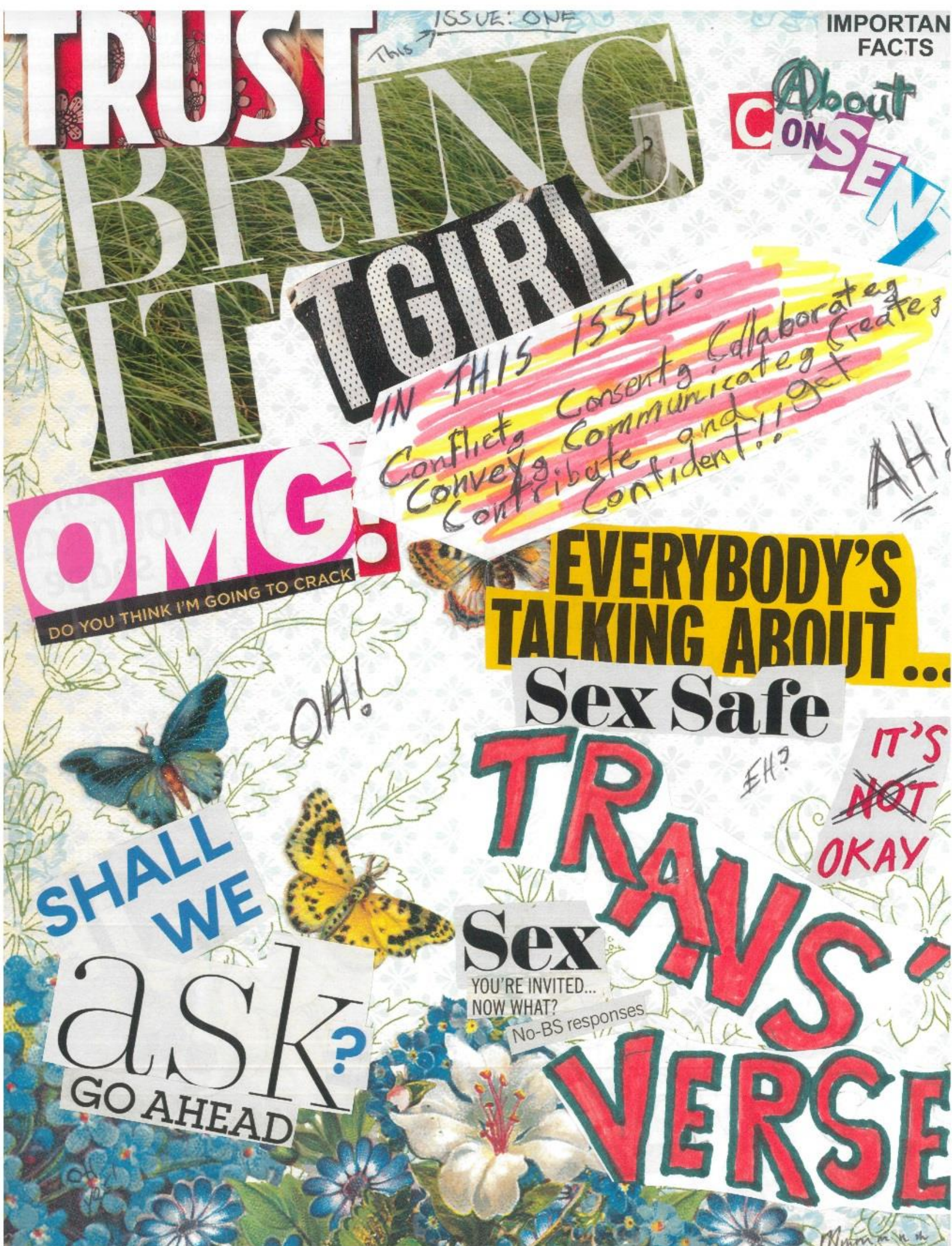
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OVERVIEW

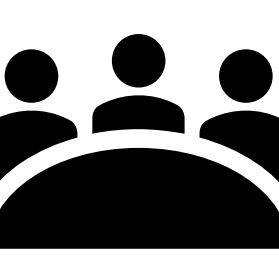
The California Reducing Disparities Project Strategic Plan to Reduce Mental Health Disparities (CRDP Strategic Plan) identifies the disparities experienced by the lesbian, gay, bisexual, transgender and queer (LGBTQ) population, including higher rates of stress/anxiety/depression and greater barriers to accessing care due to fear, stigma, discrimination, and inappropriate care by providers. These disparities are not equally distributed within the LGBTQ population. The transgender community and LGBTQ youth experience higher rates of mental health needs and negative outcomes than the LGBTQ community as a whole and most existing services are ill-equipped to meet their needs. SFCHC and the San Francisco LGBT Center adapted an evidence-based intervention originally developed by Asian Women’s Shelter, a domestic violence agency in San Francisco, that focused on communication skill development for queer and transgender women impacted by intimate partner violence. Our intervention, known as “Let’s Connect,” is a 6-week program designed to improve the social connections and mental health of trans and GNC people and TQBLG TAY in San Francisco.



GOALS



GOAL 1. Improve Mental Health for Trans and Gender Non-Conforming Folks : By teaching skills, providing education, bearing witness, and holding space for our participants, we work to empower them to take steps to improve their mental health and connectedness to those around them.



GOAL 2. Build Resilience and Social Support Networks for Trans and Gender Non-Conforming Folks: We do not stop with the traditional definition of mental health as measured by a number of validated tools, but also look at qualitative ways that this intervention can improve people’s lives.



GOAL 3. Evaluate the Impact of Let’s Connect and Drop-In Services on the Mental Health of Trans and Gender Non-Conforming Folks: Given the many factors that affect people’s willingness and ability to engage in support services, we plan to evaluate the role our intervention plays in improving mental health.

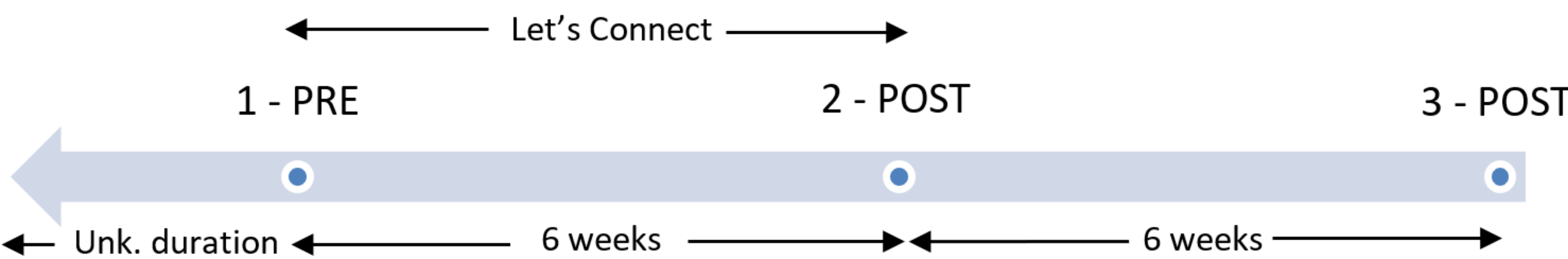
STRATEGIES

To adapt the original intervention, we took out the romantic and sexual context and replaced it with an intentional analysis of power dynamics in day-to-day interactions. Our adaptations were made with a focus on the needs and experiences of trans and GNC adults and youth, and grounded in the theory that people able to center their thoughts and feelings and openly express their wants and needs are more likely to engage in care, stay in services, and have less-explosive conflicts with faster resolution, therefore not losing access to vital resources such as housing or community centers.

Participation in Let’s Connect helps participants build new relationships, increase social support, reduce isolation and stigma, and increase confidence. Sharing of stories in broader community further increases social support and decreases stigma and isolation. Facilitation by a mental health provider increases early identification and linkage to mental health services. Provision of Let’s Connect within the context of safe and welcoming community-based drop-in centers amplifies the impacts of the intervention, encouraging participants to strengthen their relationships to staff and other clients of the drop-in centers and increase participation in other offered services. Addressing stigma, isolation and barriers to accessing services results in increased utilization of care and decreased negative mental health outcomes such as depression and suicidality. By focusing on the risk factors and needs of trans and GNC adults and TQBLG TAY, we aim to reduce the mental health disparities within the LGBTQ population as well as the disparities between the LGBTQ population and those with a normative gender or sexual orientation.

OUTCOMES

At this phase of the project, we have enrolled a total of 68 people in our local evaluation across 5 intervention cycles. 12 people enrolled in the Let’s Connect intervention have completed all three surveys (one on the first day of the program, one on the last day of the program, and one 6 weeks after program completion, see Figure below) – and 5 more have not yet reached their 12-week follow-up timepoint.



Our local evaluation is designed to answer two research questions:

- What is the association between participating in the Let’s Connect intervention and mental health outcomes for LGBTQ+ people in San Francisco? Is there an association between the frequency of drop-in services or type of services accessed and mental health outcomes at follow-up while study participants are enrolled in Let’s Connect:**
 - After 6 weeks (from the beginning of the Let’s Connect intervention until the end of the program)?
 - After 12 weeks (from the beginning of the Let’s Connect intervention until six weeks of follow-up)?

- What characteristics are associated with program attrition (loss to follow-up) for LGBTQ+ participants in the Let’s Connect intervention in San Francisco?**

Although we are still in the midst of data collection and do not have preliminary results to report at this time, anecdotally there has been a shift in the participants of Let’s Connect, who have been seen using the skills learned and have expressed a sense of having genuinely grown as a result of participation in the intervention.

NEXT STEPS

SFCHC is in the process of expanding our eligibility criteria in order to boost enrollment and improve retention throughout the 12-week follow-up period of the evaluation. We have also dropped a focus on additional research questions aimed at understanding the impact of “drop-in only” services (as a contrast to enrollment in the Let’s Connect cohort) so that we can improve enrollment and retention in the Let’s Connect arm. By the end of the project period we hope to complete at least 6 more cycles of Let’s Connect, ending up with a sample size of 77 people with a completed survey series (all three timepoints).

