

Master of Public Health

Applied Practice Experience

Evaluating experiences of health care providers and administrators for LGBTQ+ inclusive care and affirmative practices + International agricultural service-learning experience in Guatemala

by

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submitted in partial fulfillment of the requirements for the degree

MASTER OF PUBLIC HEALTH

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Chapter 1 - Portfolio Products

I completed my Applied Practice Experience (APE) with the Wichita LGBT+ Health Coalition. The Wichita LGBT+ Health Coalition is a non-profit established to help LGBTQA+ Kansans connect to safe, knowledgeable, and affirming healthcare. The LGBT Health Coalition is a program of The Center and was founded in 2011 by health professionals and community partners to improve access to existing health services and providers who serve LGBT clients and their respective needs. Their mission is “to develop a network of advocates and healthcare professionals looking to enhance all areas of lesbian, gay, bisexual and transgender health in Sedgwick County.” The coalition has been successful in improving access to existing health services and creating a community of local listing of healthcare providers who deliver competent services and understand the unique health concerns of the lesbian, gay, bisexual, and transgender community. My role with the coalition included attending coalition meetings, conducting research, developing a survey development, data collection, data analysis, evaluation, and presenting. The products produced through my time with the coalition include facilitating meetings for research input, creating a survey instrument, performing data analysis, creating a flyer for social media recruitment, and presentations discussing the research.

Additionally, I completed an international service-learning experience in Guatemala where I served as an intern with an extension group from Earth University. Earth University is a private, non-profit university based in Costa Rica that offers an undergraduate degree in agricultural sciences. The extension group that I had the pleasure of working with for six weeks works from Panajachel, Guatemala where they currently have three farmer-producing organizations (FPO) that they collaborate with to bridge the gap between academia and the community. These FPOs are local community members primarily women that grow and sell produce. Their work with the FPOs consists of developing a new support model for small farmers (6 – 20 hectares) that can help 1) improve the sustainable management of their farms and 2) increase access to local markets as a means of strengthening overall livelihoods for participating farmers and their families. The mission of Earth University is to prepare agriculture leaders to integrate ethics and human values into community development, environmental management, innovation, research, and agribusiness to construct a prosperous and just society. The products produced during my time with this organization include conducting community leader interviews, creating a nutrient database, and conducting research to find solutions to some of their pressing challenges such as maintaining filters for clean water.

Table 1.1 Summary of Portfolio Products

Portfolio Product		Description
	Affirmative and Inclusive Care Evaluation Survey Instrument	I created this survey tool is an online questionnaire that included questions for evaluating health care providers and administrators on inclusive and affirming care practices.
	Data Analysis of Results from Survey Instrument	I analyzed quantitative and qualitative data using biostatistics, informatics, computer-based programming, and software, as appropriate.
	Social Media Recruitment Flyer	I developed a flyer for recruiting health care providers and administrators to complete the survey and provide their feedback.
	Inclusive and Affirming Care Practice Research Proposal Presentation	I presented to members of the coalition and those engaged in the research about the purpose of the survey and gained valuable feedback from what they would like to see included or feel should be included based on their experience.
	Kansas LGBTQ Leadership Conference Panel Presentation	This was a panel to discuss best practices for inclusion of LGBTQ+ people in healthcare settings in Kansas. My role as a part of this panel was to discuss my research and the importance of it.
	National Public Health Week – Health Equity Presentation	I presented during National Public Health Week on the topic of accessibility closing the health equity gap.
	Guatemala International Service-Learning Experience - Nutrient database, information cares & research	As a part of my international experience working with Earth University, I created a nutrient database to keep track of the produce their farmer producer

		organizations (FPOs) are growing and to help keep track of the nutrients that their products have in them. I created and designed information cards for each of their FPOs to help market their products and business. I also conducted research on ways to help market their products and sustainable solutions to help the farmers grow their products.
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Table 1.2 Portfolio Products and Competency Addressed

Portfolio Product		Number and Competency Addressed	
	Survey instrument	2, 9	Select quantitative and qualitative data collection methods appropriate for a given public health context Design a population-based policy, program, project, or intervention
	Data Analysis & Report	3, 4	Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate Interpret results of data analysis for public health research, policy or practice
	Research Proposal & Kansas LGBTQ+ Leadership Conference Panel Presentation, Social Media Recruitment Flyer	19, 21	Communicate audience-appropriate public health content, both in writing and through oral presentation Perform effectively on interprofessional teams
	Health Equity Presentation	6	Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels

Chapter 2 - Competencies

Table 2.1 Summary of MPH Foundational Competencies

Number and Competency		Description
2	Select quantitative and qualitative data collection methods appropriate for a given public health context	I created an original survey instrument based on a literature review and input from collaborating with health professionals and ultimately selected a mixed methods approach for the survey to best collect data. The survey was piloted for two weeks and sent out to a few health care providers for feedback then data was collected for 1 month online via Qualtrics.
3	Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	After data collection, I downloaded compatible files to analyze the survey results using Excel, IBM SPSS statistics, and Qualtrics. I worked collaboratively with my principal investigator to keep a steady pace of review and receive feedback from findings.
4	Interpret results of data analysis for public health research, policy, or practice	I developed an analysis report of the research to be presented and used by coalition members to communicate between their existing listing of health care providers and network of organizations.
6	Discuss the means by which structural bias, social inequities, and racism undermine health and create challenges to achieving health equity at organizational, community, and societal levels	My research focused on inclusive and affirming practices for the LGBTQ+ population. I presented during National Public Health week a lecture alongside one of my research mentors from the coalition on how to close the health equity gap. I also presented at the Kansas LGBTQ+ Leadership Conference as a member of a panel where we discussed the inclusion of LGBTQ+ people in health care settings.
9	Design a population-based policy, program, project, or intervention	This competency was achieved by designing a survey specifically for health care providers and administrators to share their experiences of working with the LGBTQ+ population, and how organizations can transition to provide more of an inclusive and affirming health care experience for this population.
21	Perform effectively on interprofessional teams	I collaborated with various coalition members and attended meetings regularly throughout each stage of the process including research, survey development,

		and data analysis. I worked closely with my preceptor Hope Krebill who is a nurse. As well as Tori Gleason who is a member of the coalition. Judi Brown and Dawna Raehpour who are leaders in the coalition. I also presented my research proposal and received questions and feedback from the coalition members. Also, worked closely with Susan Rensing who served as my principal investigator.
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Competency 2 – One of the large projects I was able to work on during my time with the coalition was creating a survey using a detailed literature review, feedback from coalition members, and the Wichita LGBTQ+ health needs assessment report. After completing a pilot test of the survey instrument for two weeks, minor changes were made to the survey such as adjusting skip logic and adding in an option to put “I Don’t Know”. After these changes were made, I submitted another IRB application and then data was collected online via Quartics from January 28, 2022 – February 25, 2022. I also created the recruitment flyer and shared via email and social media platforms to get health care providers and administrators to complete the survey.

Competency 3 – A large part of my experience was completing the data analysis and interpreting the findings into actionable and sustainable recommendations. After data collection, I downloaded compatible files from Qualtrics to analyze the survey results using Excel, and IBM SPSS statistics. I worked collaboratively with my principal investigator to keep a steady pace of review and receive feedback on findings. Qualitative data were analyzed using Excel because it was easier to keep track of the open-ended responses and determine common themes. Quantitative data was mostly analyzed within the Qualtrics software and then SPSS for more complex analyses.

Competency 4 – One aspect that I wanted to focus on was sharing experiences of health care providers and administrators on how their organizations have transformed or have adopted an LGBTQ+ inclusive and affirming healthcare facility. The coalition was especially interested in learning ways to become more affirming and share with their network of providers and administrators. I developed an analysis report of the research to be presented and used by coalition members to communicate between their existing listing of health care providers and network of organizations. This report serves as actionable and sustainable recommendations from key findings from the research.

Competency 6 – Another product I created was a health equity presentation. This presentation was presented during National Public Health Week and during this presentation I went into detail about some of the challenges to achieving health equity, specific to the LGBTQ+ community. Additionally, I presented at the Kansas LGBTQ+ Leadership conference in Fall 2021 where myself along with members of the coalition discussed best practices for the inclusion of LGBTQ+ people in healthcare settings in Kansas. Our panel discussed rural outreach and access for LGBTQ+ people in Kansas, a mental health “bill of rights” for queer patients, and the importance of affirmative care in healthcare settings.

Competency 9 – My primary focus on the project was to design a way for healthcare providers and administrators to share their experiences. This competency was achieved by designing a survey specifically for health care providers and administrators to share their experiences of working with the LGBTQ+ population, and how organizations can transition to provide more of an inclusive and affirming healthcare experience for this population.

Competency 21 – This competency was achieved by working with various coalition members and attending meetings regularly throughout each stage of the process including research, survey development, and data analysis. I worked closely with my preceptor Hope Krebill who is a nurse. As well as Tori Gleason, DC, DACBSP who is a member of the coalition. Judy and Donna who are leaders in the coalition. I also presented my research proposal and received questions and feedback from the coalition members. Also, worked closely with Susan Rensing who served as my principal investigator.

Table 2.2 MPH Foundational Competencies Course Mapping

22 Public Health Foundational Competencies Course Mapping	MPH 701	MPH 720	MPH 754	MPH 802	MPH 818
Evidence-based Approaches to Public Health					
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	x		x		
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	x	x	x		
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	x	x	x		
4. Interpret results of data analysis for public health research, policy or practice	x		x		

Public Health and Health Care Systems					
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings		x			
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels					x
Planning and Management to Promote Health					
7. Assess population needs, assets and capacities that affect communities' health		x		x	
8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs					x
9. Design a population-based policy, program, project or intervention			x		
10. Explain basic principles and tools of budget and resource management		x	x		
11. Select methods to evaluate public health programs	x	x	x		
Policy in Public Health					
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence		x	x	x	
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes		x		x	x
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations		x			x
15. Evaluate policies for their impact on public health and health equity		x		x	
Leadership					
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making		x			x
17. Apply negotiation and mediation skills to address organizational or community challenges		x			
Communication					
18. Select communication strategies for different audiences and sectors	DMP 815, FNDH 880 or KIN 796				
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	DMP 815, FNDH 880 or KIN 796				
20. Describe the importance of cultural competence in communicating public health content		x			x
Intreprofessional Practice					
21. Perform effectively on interprofessional teams		x			x
Systems Thinking					
22. Apply systems thinking tools to a public health issue			x	x	

Chapter 3 - Information Needed if Completing a Thesis Only

Table 3.1 Summary of MPH Emphasis Area Competencies

MPH Emphasis Area: Public Health Nutrition		
Number and Competency		Description
1	Information literacy of public health nutrition	Inform public health practice through analysis of evidence-based policy, systems, and environmental change.
2	Compare and relate research into practice	Examine chronic disease surveillance, policy, program planning and evaluation, and program management, in the context of public health nutrition.
3	Population-based health administration	Critically examine population-based nutrition programs.
4	Analysis of human nutrition principles	Examine epidemiological concepts of human nutrition in order to improve population health and reduce disease risk.
5	Analysis of nutrition epidemiology	Describe criteria for validity in nutritional epidemiological methodology.

The table (above) must be included in the ILE report (either a chapter in the thesis or left in the APE report) and presentation.

Competency 1 – As a component of my internship with Earth University in Guatemala, I was tasked with researching solutions to some of the challenges that the farmers face in their communities. A few of the solutions that came out of my research include literature and community research on how to improve their irrigation systems and maintenance of water filters.

Competency 2 – I went to visit community leaders in their communities where the farmers live and grow their produce and had the opportunity to conduct short interviews concerning what products they grow, how they grow, and who they sell to. Out of these interviews came an evaluation and suggested solutions to help sustain their produce such as removing access moisture.

Competency 3 – I critically examined three population-based agriculture programs and provided suggestions on how to sustain and get the most nutrients out of their produce. I also

created a nutrient profile database to serve as a foundation to keep track of the products and various nutrients found in the items that are sold by the farmers.

Competency 4 – The farmers are testing the soil to determine the nutrient level or if any toxicity of the soil is due to unclean water. My contribution was researching various options that could be useful in this process.

Competency 5 – Criteria for validity in nutritional epidemiology is how well does the instrument assess the characteristic, construct, or behavior the user desires to measure? To determine validity the following can be used: Face, Construct, Content, and Criterion. This concept is more relevant and addressed with my survey instrument.