**KINE 4353 Cumulative Experience**

**Stakeholder Interview Sample Questions**

**Please use these questions as a guide for your stakeholder interview. Some of these questions might not apply to your project, so it is acceptable to make changes to the questions as needed.**

1. What are the “best things” about your community? The best things about the women community in Euless, Texas is the support some of these women have regarding their health. It is rewarding to see our patients come in with their family or friends for moral support.

2. What are the major challenges facing your community? Some of the major challenges facing this community is the lack of education women have over their own body and women health.

3. Do you think the community as a whole is aware of these locally available services at our

clinic? I do not think the entire community is aware of the available services at our clinic. Some services like sonograms and Selene touch are often services our patients are unaware of when they come in. I can only assume how little the women who are not our patients know about our services.

4. What specific services, if any, do you think local Hospitals needs to add? Why? I would like there to be a blood drawing station in the clinic. Often, we send our patients out to get their blood done through a third party, but it would be nice if the women can get their blood drawn while they are already at the clinic.

5. What suggestions do you have for health-related organizations to work together to provide

better services and improve the overall health of the area population? It helps when health-related organizations provide the resources often suggested to their patients in clinic. such as a blood drawing stations. Often it can be difficult to have all these resources in house since a lot of the clinical machines are very expensive. Therefore, it can be helpful if the clinic can be near or at a reasonable distance from the diagnostic clinics or provide their patients with nearby addresses.

6. Where do people find out what health services are available in the area? Through the clinic or online.

7. Where do you think people turn for trusted health information? Their doctors specifically their primary care doctors, their family, and friends, and through google.

8. On a scale of 1 to 5, with 1 being no collaboration and 5 being excellent collaboration, how

would you rate the collaboration in the community among these various organizations?

a. Business and industry: 3

b. Clinics: 4

c. Economic development organizations: 3

d. Emergency services, including ambulance and fire: 2

e. Health and human services agencies (examples: mental health, human development

commission, area on aging, department of human services): 2

f. Hospital(s): 5

g. Indian Health Service and/or veterans affairs: 1

h. Law enforcement: 1

i. Long term care, including nursing homes and assisted living: 1

j. Other local health providers, such as dentists and chiropractors: 1

k. Pharmacies: 5

l. Public Health: 2

m. Schools: 1

10. What community health concerns do you perceive are top priority in your community? STDs, cervical, breast, and colon cancer.

11. Even though most insurance’s now cover basic preventive health services like wellness visits,

many people do not use those services. Why do you think that may be? The patients might be afraid that the services are not necessarily free, and they could be billed later. The patients might also not have the access to their free services as well as the appropriate transportation.

12. What would help to remove barriers that may be affecting the use of local health services by the

community as a whole? Something that could help is encouraging our patients to want to do all their preventative care and encourage their family and friends as well. Referring our patients to these local health services house helps a well.

13. What are some of the resources or assets that exist in the area that might be able to help meet

these needs and concerns? Our clinic can work as an asset to help refer and educate our patients to take control over their health. Google and your insurance can be a great resource to also looking for nearby health services.

14. What are the reasons that community members use our local Hospitals rather than providers

outside of their local community for health care needs? Community members use our local clinic rather than outside providers outside of the clinic due to it being near their home and they are often referred by their family or friends. Our clinic also takes many insurances therefore their insurance company refers them to us.

15. What are the reasons that community members use other health care providers rather than use

their local Hospital? Because other health providers are usually more affordable and insurances cover more of the services.

16. Are you aware of particular populations or groups in the area that are medically underserved?

a. If so, are there any health concerns of those groups? Yes, women in the community who are underserves typically deal with more STD diagnosis that have been unnoticed for a while. HPV for example is an STD that if gone unnoticed for a large amount of time can lead to cervical cancer.

b. Are there certain resources or assets currently available that could help meet these

particular needs? At our clinic we offer pap smears which are the surest way for HPV to be detected. We also offer all the follow up preventative measures that patients often need to take to help and suppress their HPV before any forms of cancers prevail.

17. How are low-income and/or minority populations in the community impacted differently by

these potential needs? Low-income and/or minority populations in the community are impacted differently by their need to manage their HPV or any other STDs they are diagnosed with since their insurance might to cover all the services needed. On the other hand though low-income patients often qualify for Medicaid or Healthy Texas Women which is a Medicaid type insurance to help women get most to full coverage on all their women needs and treatment.

18. If you were to give one piece of advice to improve the health of the community, what would it

be? Is there other advice you would offer? I would advise women to get their yearly well women’s exam with pap smears after age 21, mammograms after age 40, colonoscopies, and bone density exams after the age 45.

Stake Holder Interview

 After interviewing Doctor Pamela Asghar as my stakeholder, I learned several things about the Women's Health field. I learned that a lot of women are unaware of their own health and after doing my CE project through Women's Care of Mid Cities I was able to see first-hand how lost these women felt after they were diagnosed with different types of STD's or Women's Health issues. After seeing this in person it made me a little upset to know that there are so many other women out there that are unaware about the different things that could happen to their body and the consequences of them not using protection, not getting their yearly well women exams, not getting their yearly mammograms, and not getting the proper treatment that all women need from all different ages.

Another thing that I learned from my stakeholder interview is that socioeconomic status impacts these women health more than we think. Often these women’s insurance to cover their exam fees at the clinic but then they start to get the issue that their insurances do not want to cover the diagnostic exams recommended to their patients, such as mammograms and colonoscopies. They also run into the issue of insurance billing their patients for pap smears, swabs, and even biopsies that are sent to the third-party lab. These all make the patients hesitant to get these exams done in future years. This factor greatly influences whether women go to the gynecologist or go to any of their doctors to get treatment because they are in in fear that their insurance might say they cover something and then later do not. Another issue with women of lower socioeconomic factors is that they do not have insurance and a lot of the out-of-pocket fees for different types of exams and labs can be very expensive. Although, there are options for more affordable insurances such as Medicaid or Healthy Texas Women there are some patients that do not necessarily qualify for these insurances but does not mean that they are of high income. Healthy Texas Women is a great resource that I wish more women were aware of, it is a form of Medicaid which offers full coverage of all things women’s health. All of this has made me realize how much I want to go into the Women's Health field specifically in the Women's Health education side of it.

 My stakeholder interview helped me to realize that a lot of the lack of education these women have over their health does not all necessarily come from their lack of Women's Health classes in school but also in the socio-economic level that in which they live in. The social determinants of health greatly impact these women availability to get the proper treatment for their health.

Luckily, Women's Care of Mid Cities is in a busy area of Euless TX which I feel like puts a lot of the Euless population at a benefit because this clinic is at a nearby area for them to access. It is important for women to get yearly checkup and exams because there are several STD's and women's health issues that can get worse without the proper treatment. For example, the Human Papilloma Virus if left untreated and unnoticed for a large amount of time could potentially develop into cancer and by the time that it is recognized it is too late to do any of the preventative measures. That is why at Women's Care of Mid Cities they emphasize so greatly on the importance of yearly well women exams which include the pap smear.

Overall, I feel like through doing my internship and through this stakeholder interview I see that women's health is a great concern that I would like to advocate more for. I would like to hopefully make a difference in the future for women to feel more comfortable within their own bodies and their own health.