



OHS CONSUMER ADVISORY COUNCIL REPORT OF NEW LONDON HEALTH FORUM

AT NEW LONDON OPPORTUNITIES INDUSTRIALIZATION CENTER: JANUARY 22, 2020

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EVENT OVERVIEW

On January 22, 2020 at the New London Opportunities Industrialization Center – the Office of Health Strategy (OHS) Consumer Advisory Council (CAC) organized the New London Health Forum event to understand the community needs of a city most impacted by health disparities in our state. New London community members had the opportunity to share their stories and concerns with health care providers about access to primary care and behavioral health services. The event also opened the door to interaction between New London community members and the Consumer Advisory Council for future feedback. Dr. Wizdom Powell of the University of Connecticut Health Disparities Institute facilitated the event and centered the conversation around community voices. With her engaging fishbowl forum discussion format, Dr. Powell then asked health care providers to reflect on what they heard from community members. The fishbowl forum concluded with community members and health care providers discussing potential solutions together.



The event began with registration, a pre-event survey, and complimentary refreshments. Approximately 30 guests who came from diverse backgrounds and represented a range of age groups attended the event. Guests included Black and Latino community members, health care providers, the Mayor of New London Michael Passero, City Councilor Kevin Booker, Jr., and State Representative Anthony Nolan. To kick off the event, Terry Gerratana, OHS Senior Adviser, gave opening remarks. She described the importance of community listening sessions to OHS and set a welcoming tone for an engaging discussion. Next, Dr. Wizdom Powell facilitated an interactive discussion around access to primary care and behavioral health services for communities of color. Participants had the opportunity to share their personal health care stories and discuss what can be done to improve patient-provider relationships and address barriers to health care access.

The fishbowl forum began with only community members entering the center circle and sharing personal health stories to start the conversation on health care access. As the dialogues progressed, community members increasingly felt comfortable entering the circle and sharing their perspectives. Those who did not speak sat around the speakers and listened intently. After several community members spoke, Dr. Powell encouraged health care providers to enter the circle to share what they heard from community members. Then, health care providers reflected on how to improve health care access. Finally, community members, health care providers, and elected officials all joined the conversation to discuss ways to collaborate and improve health care together. OHS Consumer Advisory Council members participated in this event as listeners.

KEY FINDINGS:

- Community members encountered differential treatment based on health insurance. People described how health insurance can become a respect and dignity marker. When health access is based on insurance, people perceive this as discrimination.
- Teachers talked about how vision care and behavioral health supports are essential for school-aged children.
- School officials shared that in schools, symptoms of behavioral health concerns can present differently, especially among children of different racial and ethnic backgrounds.
- Community members agreed that people from certain socioeconomic backgrounds do not seek preventive care and thus postpone future medical problems.
- Community members struggle with unmet support needs and thus struggle to address chronic health and behavioral health issues.
- Black males acknowledged that they are afraid to go to the doctors due to historic issues and lack of trust.
- State employees expressed a concern that there is only one health insurer for state employees – Anthem.

RECOMMENDATIONS:

- Our state should offer health coaches or community health workers to ensure people have the support needed to address chronic health issues. People need help between doctors' visits to address chronic health concerns.
- Our health system needs to address the shortage of behavioral health providers.
- Health care providers should affirm the patient first and build trust, then share their knowledge.
- Health care providers should accept that what the patient says is real: "people's perception is reality."
- Patients should send signals to their doctors early, before things bubble over and become an emergency.
- Community members should reach out to state legislators to ensure that community voices are heard. They can share stories, visuals, and offer testimony at public hearings. Based on what policy makers hear from community members, state leaders can come up with ideas or solutions to address health issues.



EVENT DETAILS

CHALLENGES ABOUT HEALTH CARE:

The conversation regarding health care challenges circulated around three main barriers. The first barrier discussed was trust.

Another issue is health insurance coverage and health insurance literacy. Many New London community members do not earn enough money to invest in a health insurance plan or that their current insurance has a high deductible which makes preventive care impossible to afford. Moreover, even if they have health insurance, people shared that they lacked an understanding of what exactly they are paying for since health insurance is confusing.



The third barrier was health care navigation. Many aspects of health care are incredibly difficult to navigate, especially without the help of an advocate or a trusted advisor.

Trust:

Community members shared a variety of stories that illuminated how trust enabled or hindered their ability to access health care. In all these stories, the importance of trust between community members and health care providers was highlighted. These stories clarified that human relationships are needed to help address individual health concerns.

One person talked about how the front office staff treatment of patients was so important to establishing trust. Office staff can help empower community members seek care, or frustrate sick people and deter them from accepting health care.

Trust can sometimes be found with partners in schools. A teacher talked about access to eye care and ability to afford prescription glasses, and how significant it was for her students' ability to perform in school. This teacher also discussed the importance of preventive care and making healthy food available for children to succeed.

To improve access to health care and retention of services, community members suggested that health care providers start by listening to patients. People suggested that doctors need to hear what patients are saying. "When someone shares how they're feeling, believe them the first time! It takes a lot to disclose." Acknowledging the role of stress in people's lives and their concerns with health care will help patients feel heard.

An important part of establishing trust is acknowledging racism as a health care issue. Implicit bias impacts providers' ability to respond effectively to certain populations. One Black man said that perhaps doctors do not send someone like him in for certain tests because they might assume that he is genetically strong and doesn't struggle with mental health issues. Providers need to be aware of their own implicit biases and also to understand socioeconomic context. Telling a patient to go to the gym when they have limited income or recommending that patients go on daily walks when they live in an unsafe neighborhood means that the advice cannot be followed.

Community members urged health care providers to be culturally responsible and sensitive to their patients' life circumstances. Providers can support families who lack knowledge about what community members can do as an alternative to address health concerns. For example, instead of walking, encourage patients to do specific exercises in their homes. With a trusting relationship, providers can also coach patients who might need the reminder and support.

There are different levels to people's willingness to get involved with health care, depending on how much they trust the system or their doctor. On the other hand, health care providers complain that they do not hear about challenges until these issues bubble into something significant. Providers stressed the importance of patients sending signals earlier. Everyone also agreed that they need to talk to policy makers and others to inculcate more trust in the health care system.

Health Insurance Coverage and Literacy:

Information regarding payments and navigating the health insurance exchange is often difficult to understand. When visiting the doctor's office, community members worry about surprise medical bills. One person highlighted the differential treatment of patients based on their insurance. A person with Medicaid described feeling disregarded by their health care provider.



People are often choosing among complicated options for health care and health insurance. Community members are not aware of or do not understand their options – and they do not know they have a choice. This highlights communication and information gaps between providers, health insurance companies, and patients. Moreover, health insurance literacy was a concern. Many people do not understand what options were available to them based on their health insurance. They do not understand the difference between a co-insurance and a deductible.

Community members wanted to learn more about the health care system and about health insurance to help others. They wanted information to post in schools and faith communities.

Health Care Navigation:

With stigmatized health issues, such as mental health or addiction, navigation help is especially important to health care access. Health care navigation is especially difficult for school-aged children, who lack the transportation, means, and language to express their trauma and behavioral health struggles. Even after community members disclose mental health concerns, navigation of the health care system can be overwhelming and discouraging with long waitlists.

Community members felt passionate about addressing mental health issues. Educators in the discussion shared that there are currently not enough behavioral health supports in the school systems. This interferes with learning. When students struggle with behavioral health, they miss class and wander around the school without adequate supports.

Providers acknowledged that there is a shortage of behavioral health delivery services. For example, people acknowledged that the New London Community Health Center is losing behavioral health providers; this is problematic because there is already a shortage. Patients have to wait months until they can get an appointment. Therefore, we need to extend health care delivery to community members to help in community spaces. For example, peer advocates or recovery coaches can help someone struggling with a mental health or addiction issue.



Community members uplifted a concern that our system requires people to get sicker to get admitted to certain health services, especially for addiction. People talked about how they could not get the detox beds they needed unless they were actively using or had an intoxication level of a certain amount. Community members also talked about the long waitlists for preventive care, such as therapists or psychiatrists, compared with the quick access for emergency care if they presented with suicidal ideation. Therefore, alternative interventions should be considered to address health care issues. For example, instead of prescribing pills, community members and health care providers agreed that promoting exercise and volunteer activities can help alleviate loneliness and improve moods.

Community members also uplifted the importance of age-appropriate interventions. Seniors have health care issues and need age-appropriate strategies to access health care. Transportation may be a bigger concern for seniors, so homecare should be considered. Part of improving health care navigation is to make health care services more accessible to community members.

CONSUMER ADVISORY COUNCIL RECOMMENDATIONS:

OHS Consumer Advisory Council (CAC) members noted the event was a success. Many diverse perspectives informed the fishbowl forum and allowed for an honest and productive conversation. The discussion was further deepened by New London policy makers, who played an active role in the conversations.

Based on the pre-event and post-event survey results, it is clear that the community members involved in the listening session were eager to talk about their health care access experiences. They also shared what they thought can be done to improve health care for other community members.

It is imperative that in future listening sessions, the OHS Consumer Advisory Council continues to hear from communities most impacted by health disparities. Engaging the voices of these historically underrepresented consumers will give OHS a better understanding of the needs of these populations, and help our state address these barriers to health care. Underrepresented populations can speak to their individualized needs in a way that no one else can.

PRE SURVEY FEEDBACK

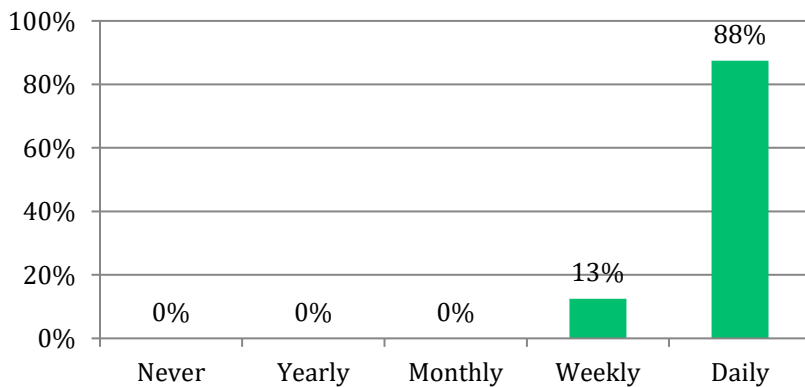
What is the best way of reaching you? (Mark one)		
Answer Choices	Responses	
Email	75%	6
Phone	38%	3
Knocking on your door	0%	0
School	0%	0
Reaching you through a trusted friend/family member	0%	0
Other (please specify)	0%	0
	Answered	8
	Skipped	0

What is NOT a good way of reaching you? (Mark one)		
Answer Choices	Responses	
Email	0%	0
Phone	0%	0
Knocking on your door	100%	7
School	0%	0
Reaching you through a trusted friend/family member	14%	1
Other (please specify)	0%	0
	Answered	7
	Skipped	1

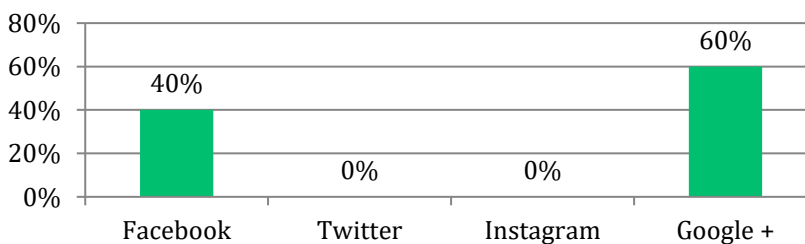
Would you be able to go to/be a part of: (Check all that apply)		
Answer Choices	Responses	
Online forums	57%	4
In person focus groups	57%	4
Social Media campaigns	29%	2
Community Education events	71%	5
Other (please specify)		0
	Answered	7
	Skipped	1

If you attend a forum/focus group/community discussion about healthcare, what do you want to get out of it?		
Answer Choices	Responses	
Listen/learn more	71%	5
Share my story	0%	0
Help my community	43%	3
Become an advocate	43%	3
Connect with people	29%	2
Meet others who need help with getting healthcare	14%	1
Other (please specify)		1
	Answered	7
	Skipped	1

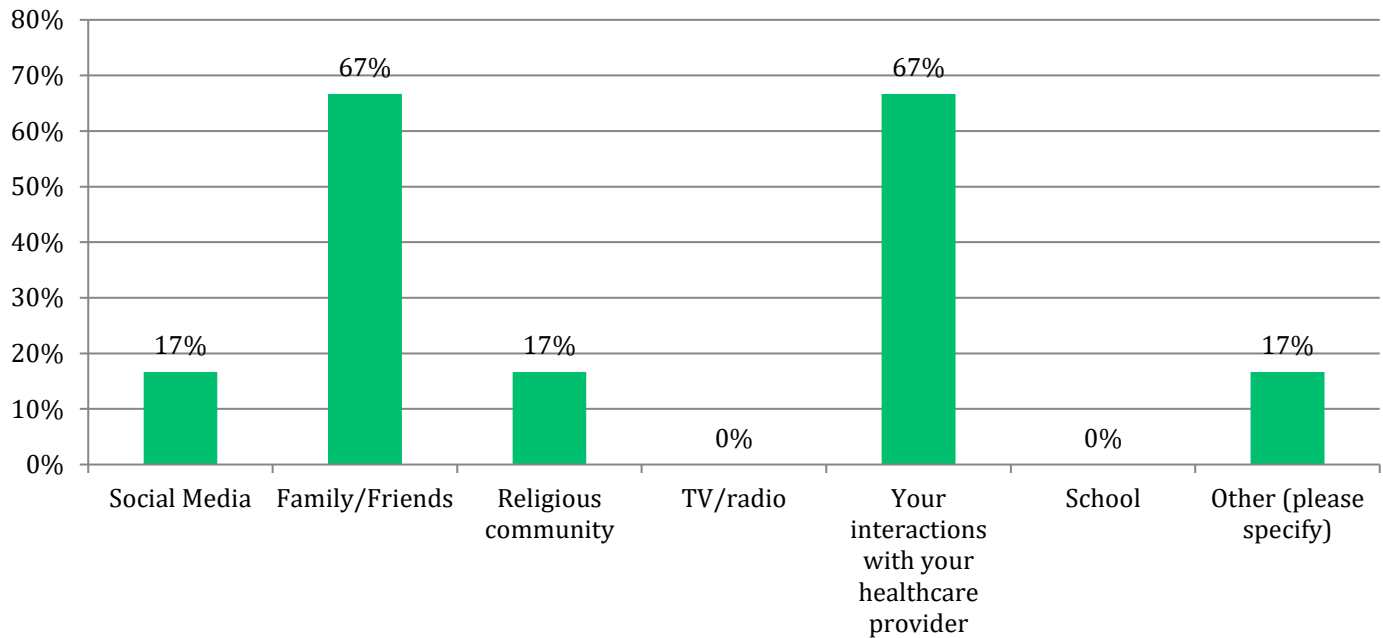
How often do you use social media?



What would you most likely use to learn about or talk about healthcare? (Mark one)



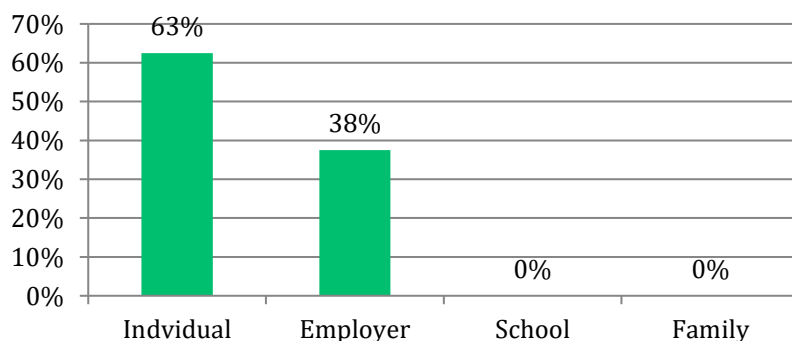
What affects your understanding of healthcare most?

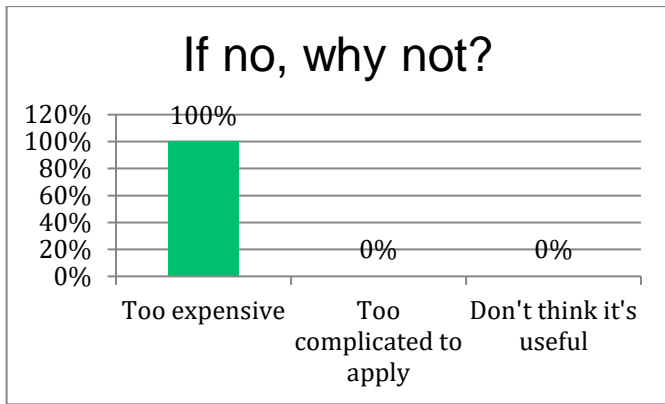


Do you currently have health insurance?

Answer Choices	Responses	
Yes	100%	8
No	0%	0
Don't know	0%	0
	Answered	8
	Skipped	0

If yes, what type of insurance to do you have?



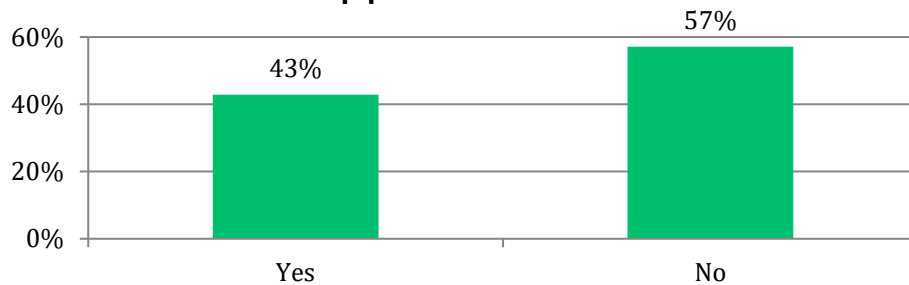


Do you have a relationship with your primary care provider?		
Answer Choices	Responses	
Yes	100%	8
No	0%	0
	Answered	8
	Skipped	0

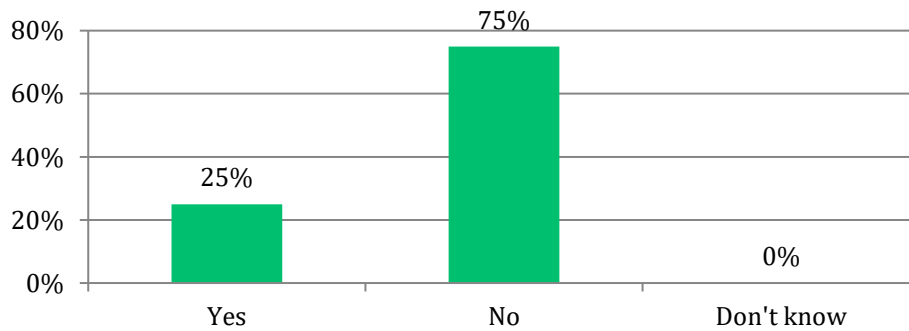
Are you in charge of your own health insurance?		
Answer Choices	Responses	
Yes	100%	7
No	0%	0
	Answered	7
	Skipped	1

Is English your first language?		
Answer Choices	Responses	
Yes	100%	8
No	0%	0
	Answered	8
	Skipped	0

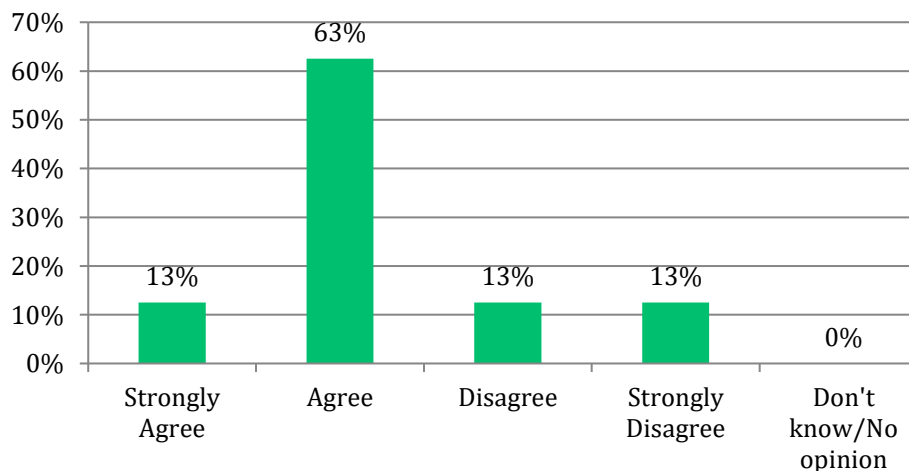
Did you know you can get a free interpreter for medical appointments?



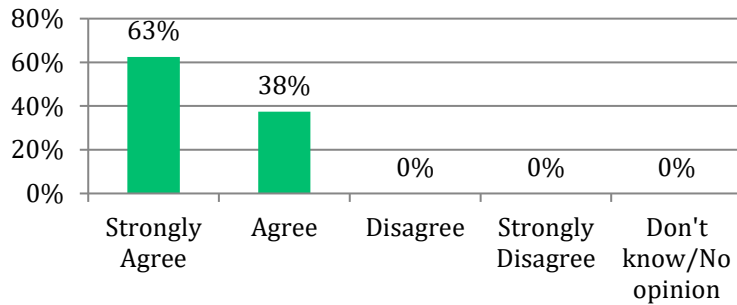
Have you ever used an interpreter for medical appointments?



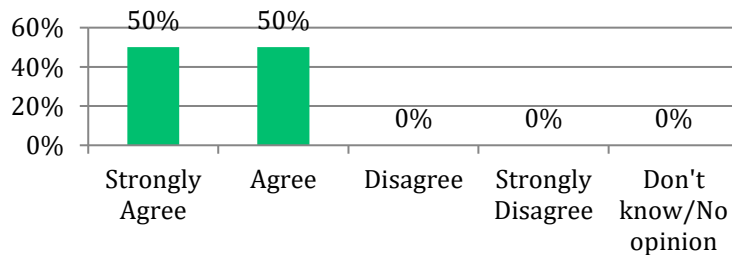
You know a lot about healthcare.



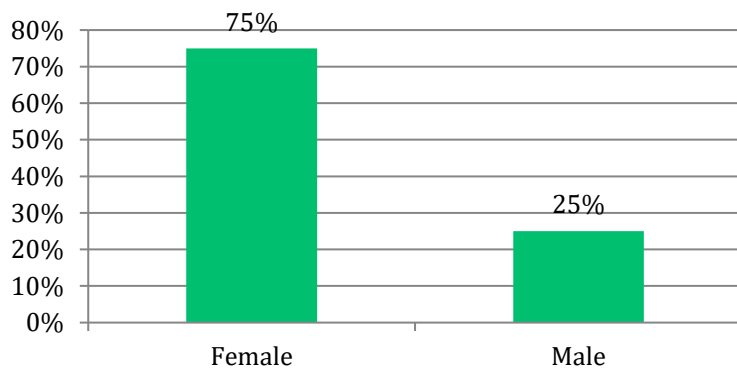
You are comfortable when visiting the doctor's office.



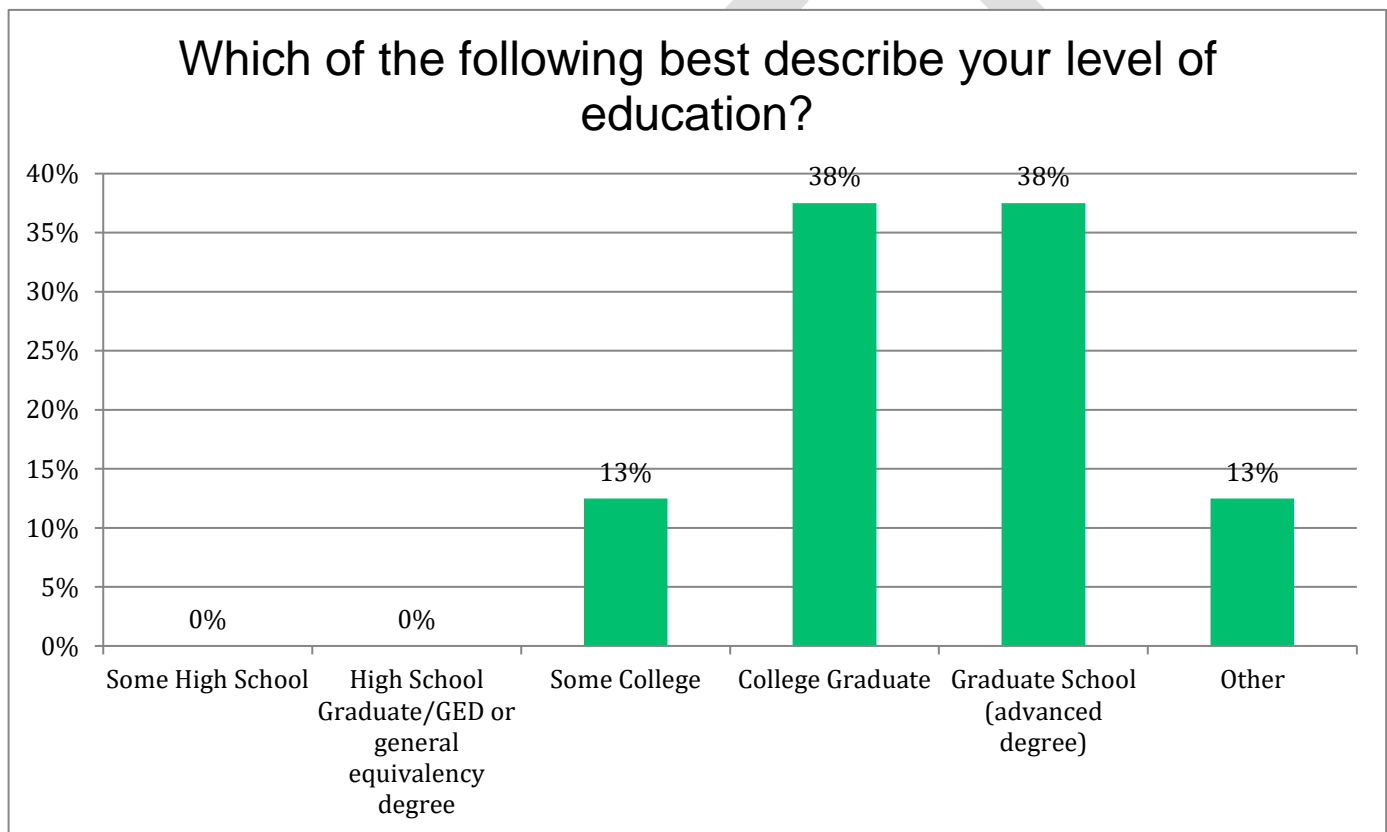
You feel that your doctor understands you and where you are coming from.



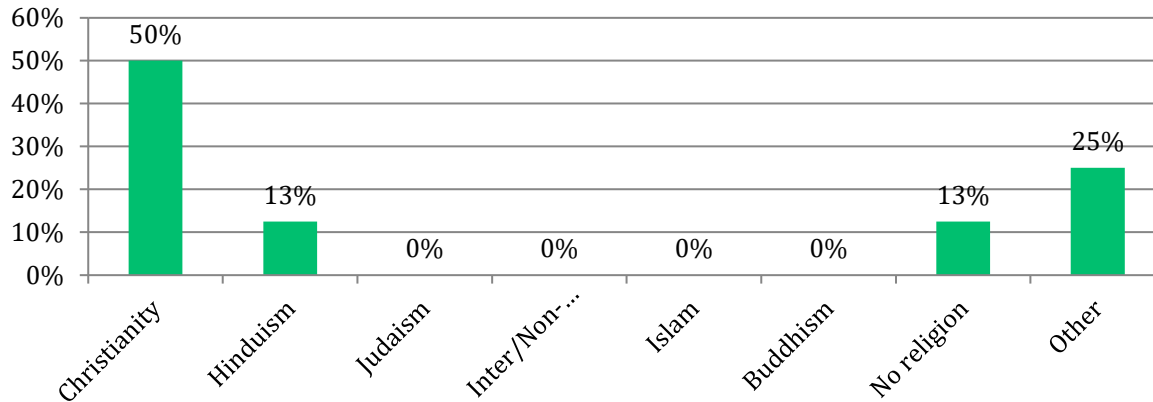
Gender:



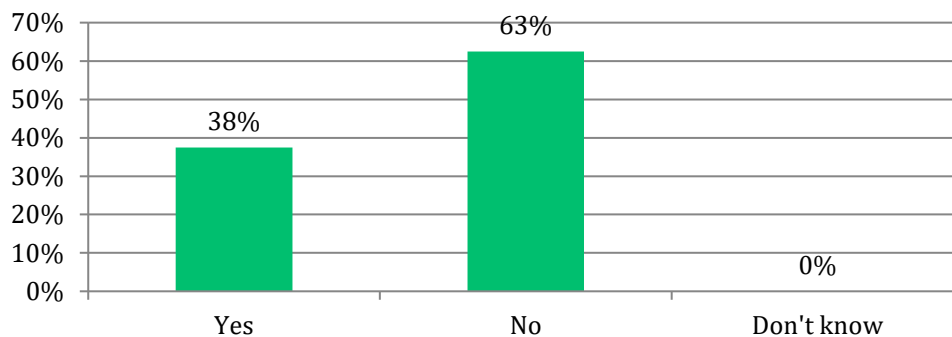
Which of the following best describes you?		
Answer Choices	Responses	
American Indian or Alaskan Native	0%	0
Asian / Pacific Islander	13%	1
Black or African American	25%	2
Hispanic / Latino	0%	0
White / Caucasian	50%	4
Multiple ethnicity / Other	13%	1
	Answered	8
	Skipped	0



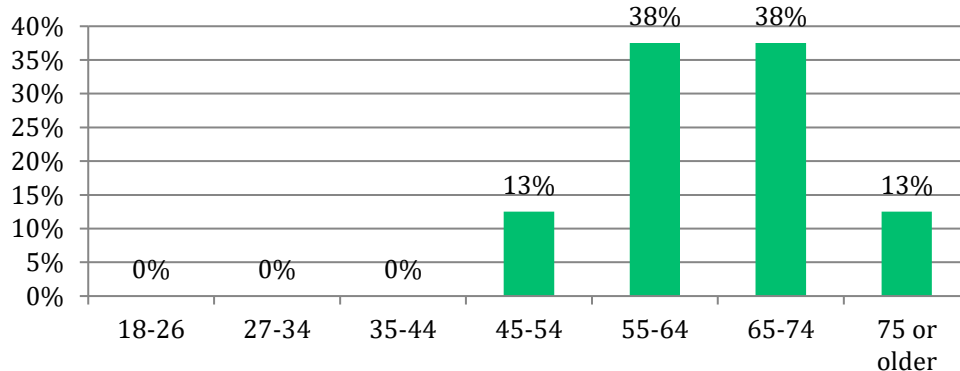
Do you identify with any of the following religions? (Please check all that apply)



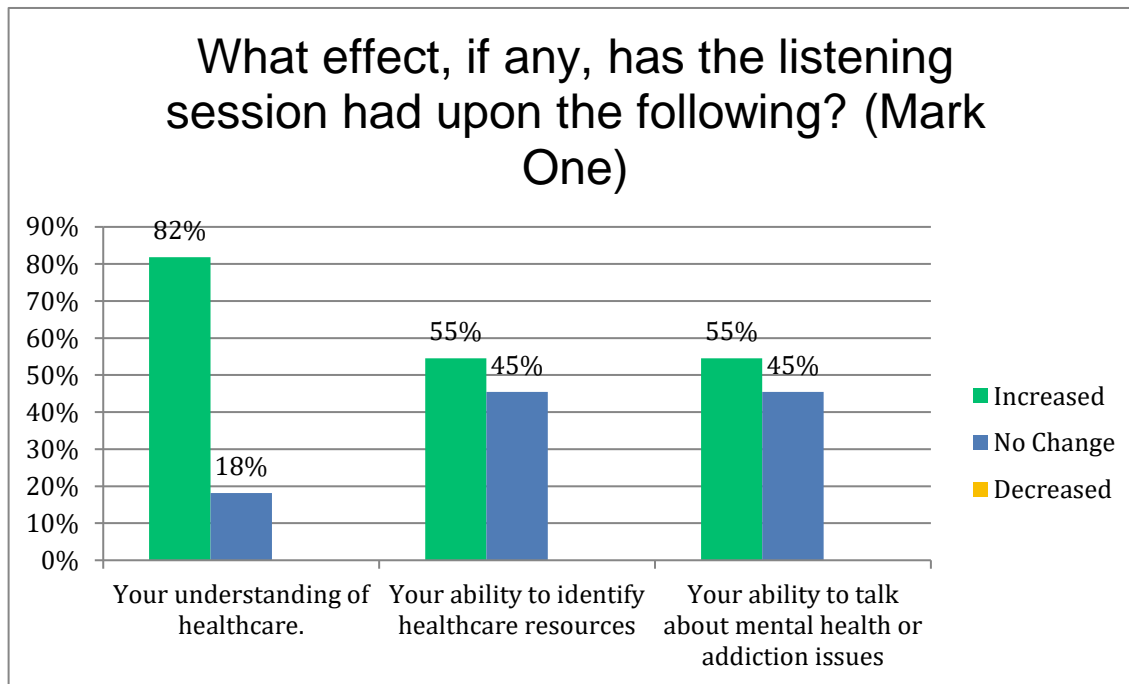
Do you think your religion affects how you view healthcare?



What is your age



POST SURVEY FEEDBACK



The listening session was easy to understand		
Answer Choices	Responses	
Strongly agree	73%	8
Agree	27%	3
Disagree	0%	0
Strongly disagree	0%	0
Don't know/No opinion	0%	0
	Answered	11
	Skipped	0

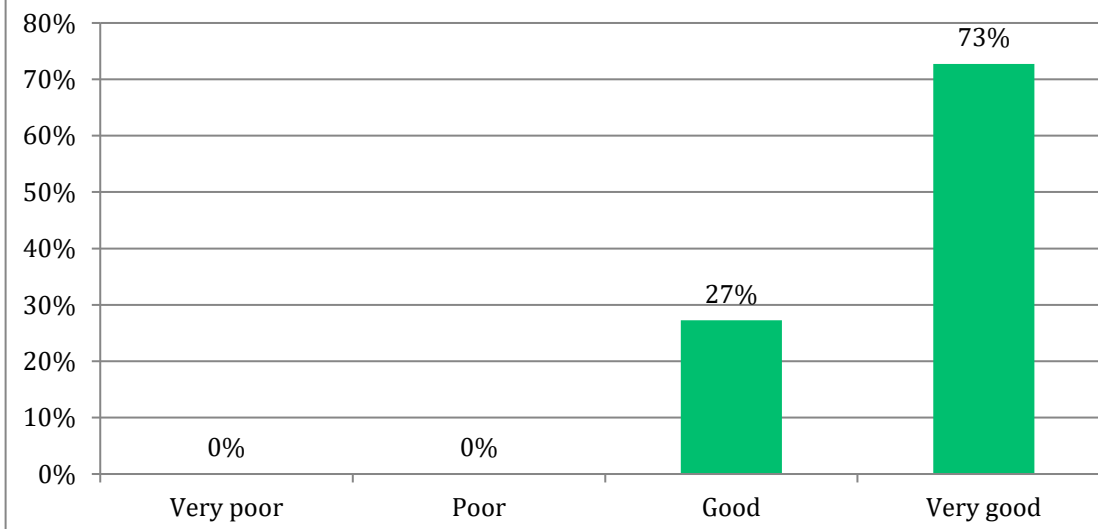
The listening session provided useful information about health care		
Answer Choices	Responses	
Strongly agree	55%	6
Agree	45%	5
Disagree	0%	0
Strongly disagree	0%	0
Don't know/No opinion	0%	0
	Answered	11
	Skipped	0

The listening session could be improved if...		
Answer Choices	Responses	
It was shorter	0%	0
There were more visuals	30%	3
The language was easier	0%	0
No improvement needed	60%	6
Other (please specify)		
• More community members		1
	Answered	10
	Skipped	1

Describe what you liked least about the listening session. (Mark all that apply)

Answer Choices	Responses	
It was too long	0%	0
Not enough information	40%	2
Too much information	0%	0
It did not feel useful to me	0%	0
I couldn't understand what was going on	0%	0
Other (please specify)		3
	Answered	5
	Skipped	6

Overall, I would rate the listening session as...



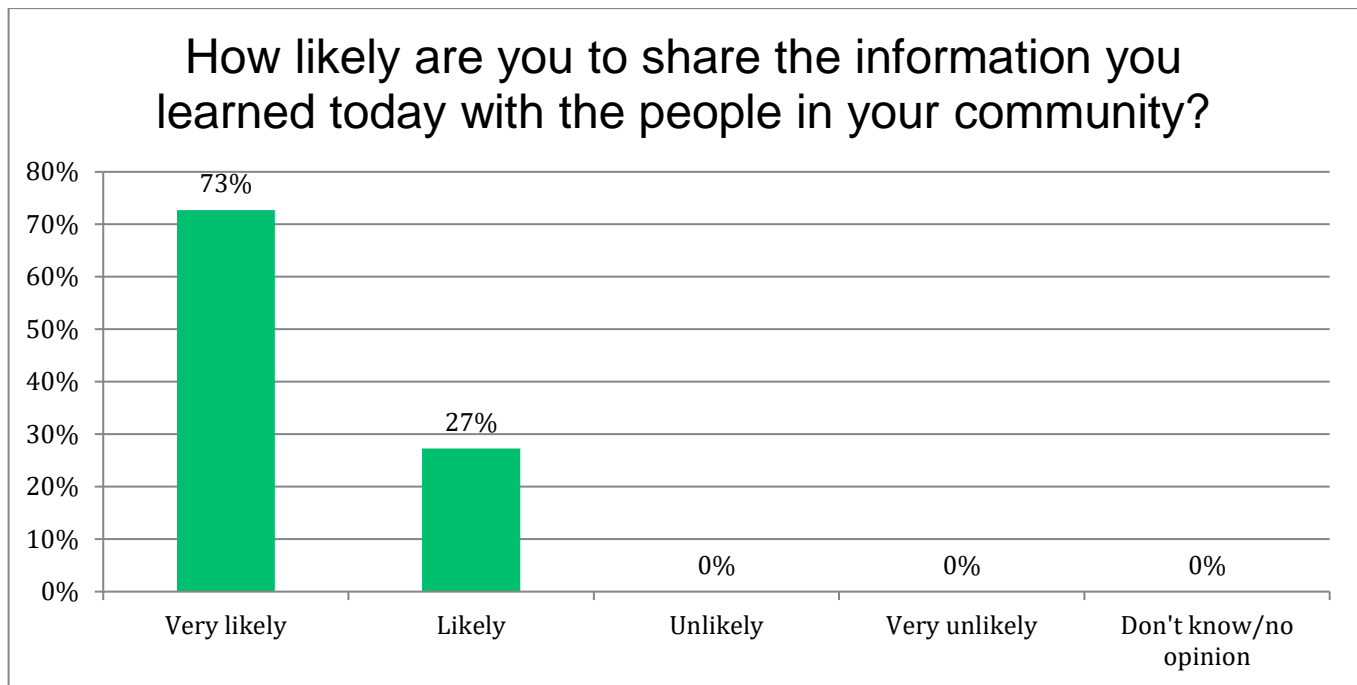
Describe what you liked most about the listening session. (Mark all that apply)		
Answer Choices	Responses	
Meeting new people	64%	7
Learning about this target group	36%	4
Hearing from healthcare experts	36%	4
Sharing my voice	55%	6
Taking action	27%	3
Other (please specify) <ul style="list-style-type: none"> letting community voices be heard, mixing in providers Learning about disparities and ways to enact change The format was comfortable 		3
	Answered	11
	Skipped	0

Do you think that the listening session was helpful for you? Why?

Respondents	Responses
1	lots of resources
2	Networking, re-energizing
3	Hearing about complexities and negative consequences of disparities
4	Yes- good info
5	Yes, very informative
6	I love the engagement of community and providers and hope the policy folk will listen
7	Yes
8	It allowed me to hear from others and to be heard
9	Yes, I loved the format and facilitation
10	Listening to the interactions of residents and providers

Please share your suggestions for future listening sessions:

Respondents	Responses
1	Rearrange Q 6 so that it goes from Very Good to Very Poor not the other way around, it was confusing
2	More exercises
3	A more appealing flyer
4	Publicize more- flyers through schools and etc to get more publicity
5	Summer sessions
6	None



What was the greatest takeaway from this forum?

Respondents	Responses
1	We have resilient people in the community, but we still have much work to be done
2	Speak up and speak often
3	following up with community members to push for better policy
4	Much work is yet to be done
5	That the health industry is open to thinking about healthcare differently
6	I am just pleased to know that the conversations are happening
7	That the providers and patients share the same frustrations

How can this particular forum be improved?

Respondents	Responses
1	contacts, who to follow up with on social media
2	Create policies that will help the community improve
3	More publicity
4	None
5	I wish we could cast a broader net