HOWARD BROWN HEALTH'S CENTER FOR EDUCATION, RESEARCH & ADVOCACY

LGBTQ+ Older Adult Patient-Centered Comparative Clinical Effectiveness Research (CER) Capacity Building Tool Guide

Purpose – The purpose of this tool is to increase knowledge and comfort with LGBTQ+ Older Adult Patient-Centered CER, and to increase participants' motivation to participate in LGBTQ+ Older Adult Patient-Centered CER. Patient-Centered CER is research that centers the voices/needs of LGBTQ+ older adults and compares two or more treatment approaches to see which works better for this group of people.

Need – LGBTQ+ older adults face significant health disparities. Research, especially patient-centered CER, is a powerful tool to improve the healthcare LGBTQ+ older adults receive and the quality of LGBTQ+ older adults' lives.

Application – Three tools have been developed: one for LGBTQ+ older adults, one for providers and one for health professional students. These tools can be used for education, personal enrichment, or creating a pool of potential older adult CER participants.

Use – Each tool includes a power point training and discussion guide; the LGBTQ+ older adult version also includes two activity handouts. In addition, we've included our pre/post questions if you'd like to use them to assess impact. The LGBTQ+ older adult tool is designed to take 75 minutes and facilitates active discussion and sharing of personal experiences among a group of 5-7 LGBTQ+ older adults. The provider and health professional student tools are designed to take 30 minutes for groups of 5-7 participants.

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Logistics – The workshops can be offered on-line or in-person and runs 75 or 30 minutes. The workshops can be run by one facilitator. If offered in-person, schedule the LGBTQ+ older adult workshop during daytime hours to avoid evening travel and schedule the provider/health professional student workshops outside of clinic hours. In addition, we offered ride share transportation to and from in-person workshops and this was very appreciated by LGBTQ+ older adults.

Development – The tools were developed by cycles of piloting and revision with multiple diverse groups of LGBTQ+ older adults and with smaller groups of providers/health professional students. Piloting occurred in the city of Chicago and all the older adults we spoke to lived in urban environments and were white, Black or Latina/o. The health professional students only included medical students.

Effectiveness – We asked participants to answer four questions before and after each training to assess the training's effectiveness. We found consistent increases in participants' 1) knowledge about CER, 2) ability to explain CER to a friend or provider, 3) confidence in participating in CER in the future and 4) belief that their participation in CER would be impactful.

Adapting the Tools – The tools were developed with Midwest urban LGBTQ+ older adults, providers and health professional students. Use of the tools with different groups of participants might require adaptions to our content or approach. Feel free to adapt the tools to meet your community's needs with different images, wording or focus.

Share Your Experience with Us – We'd love to hear if you find the tools valuable, if you use them and how you chose to adapt/apply them. Tell us what you think by messaging us at **sbrrecruitment@howardbrown.org**.

PCORI ACKNOWLEDGEMENT/DISCLAIMER

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Disclaimer: The statements and opinions presented in this tool guide are solely the responsibility of the authors and do not necessarily represent the views of PCORI®.

SUGGESTED CITATION

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