

CAFP Fresno Kings Madera

**Pre Med Students,
Med Students &
Residents**
share their advocacy
views

AMAM 2024

Lobby Day

CAFP Chapter Activities

MARCH- AUGUST
EDITION N° 2

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ADVOCACY ACTIVITIES

FROM THE EDITOR

THE POWER OF ADVOCACY IN FAMILY MEDICINE

As family physicians, we have the privilege of being at the forefront of patient care, addressing not just the physical, but also the emotional and social needs of our patients. However, our role extends beyond the exam room. We are also advocates, not just for individual patients, but for our communities and the healthcare system at large. The importance of advocacy in family medicine cannot be overstated, especially within our residency programs, where the next generation of physicians is molded.

Advocacy is the heart of family medicine. It is through advocacy that we can influence policies that affect the health of our patients and communities. As family physicians, we have a unique understanding of the needs of our patients and the challenges they face. This insight gives us a powerful voice in the legislative process, one that can bring about meaningful change.

This year's Lobby Day in Sacramento was a testament to the power of collective advocacy. Walking from our hotel to the Capitol, wearing our white coats with pride, we demonstrated our commitment to our patients and our profession. Introducing ourselves to our legislative representatives, we presented our resolutions with the passion and expertise that only family physicians can bring. The experience was not just empowering; it was a reminder of the critical role we play in shaping healthcare policy.

For our family medicine residency programs, advocacy should be an integral part of the curriculum. Residents can learn not only how to care for patients but also how to advocate for them. They need to understand the importance of engaging with the legislative process, building relationships with policymakers, and staying informed about the issues that affect our profession and our patients.

The Lobby Day experience was particularly meaningful for our residents. It was an opportunity for them to see firsthand the impact they can have beyond the clinic walls. They were able to witness the power of their collective voice and understand the importance of their role as physician advocates. This experience will undoubtedly shape their careers and reinforce the importance of advocacy in their professional lives.

As we move forward, let us continue to prioritize advocacy in our residency programs and in our professional lives. Let us continue to use our voices to advocate for our patients, our communities, and our profession. Together, we can make a difference.

In solidarity,

Secretary
CAFP Fresno Kings Madera Chapter

Diana Howard





SHRUTI JAVALI MD

PRESIDENT OF THE CAFP FRESNO KINGS MADERA CHAPTER

Dear Chapter Members,

I hope this message finds you well. I wanted to take a moment to reflect on our accomplishments and express my heartfelt gratitude for your dedication and hard work.

This year, we celebrated record attendance at CAFP's All Members Advocacy Summit in Sacramento. Our ongoing collaboration with the Tulare Chapter in the Resolution Writing Workshop for residents and students as been instrumental in ensuring that diverse perspectives are represented and addressed. This ongoing partnership has proven to be immensely valuable, fostering a spirit of cooperation and enabling us to craft impactful resolutions that drive meaningful change.

Our representation on the national stage has also been remarkable. We proudly participated as part of the California delegation to the National Conference of Constituency Leaders (NCCL) in Kansas City. I am privileged to have been elected as Co-convener for the International Medical Graduate (IMG) constituency for NCCL 2025 as well as being elected to be part of the NCCL delegation to the Congress of Delegates (COD) in September 2024. These roles provide a unique opportunity to bring our Central Valley perspectives to a broader audience and further advocate for the interests of family medicine.

I am also thrilled by the active participation of medical students and residents on our executive board. Their fresh perspectives and enthusiasm are vital in fostering a culture of inclusivity and ensuring that the voices of the next generation are heard and valued.

Looking to the future, I am looking at establishing a consistent schedule of events each year which will allow us to enhance participation, streamline planning, and ensure that our activities effectively meet the evolving needs of our members.

Thank you for your unwavering support and for being a vital part of our chapter. Together, we are making a difference, and I am honored to serve as your president.

Wishing you all continued success and fulfillment in your important work.

Warmest regards,

Shruti Javali MD
President, Fresno-Kings-Madera Chapter
California Academy of Family Physicians

Pre Med

Pre Med Student Column

THE PATHWAY TO MEDICAL SCHOOL

HOW RELIABLE TRANSPORTATION IMPACTS PRIMARY CARE?



SJV Med Bridge Pre-Med Student



Jovanpreet grew up in the Central Valley of California and is currently pursuing her studies with the ultimate goal to practice medicine in the place she grew up.

Education

Bachelor of Science (Biochemistry, Premed) Candidate, Class of 2025

Interest

Reading and creating artwork

Language

English

Punjabi

Jovanpreet K Panesar

Quality, accessible healthcare can be directly impacted by location. Residents of the Central Valley are all too familiar with the healthcare limitations of living in a rural community. Many of the residents are field workers, constrained by their jobs and unable to take days off for regular healthcare appointments that are essential for long term care.

Rural residents of the Central Valley should be able to regularly visit a medical professional, and find transportation to reach their appointments. Many rural hospitals operate in a deficit and some are forced to close. When hospitals close, the residents of the area have to travel even longer distances in order to receive critical care. While recent strides have been made with mobile health clinics and telehealth appointments, a more permanent solution is still needed to address this problem.

Regular doctor appointments are a way to educate patients regarding their health, their rights, and can catch the development of a serious ailment before it worsens. Alongside location, many other factors called the Social Determinants of Health affect the quality of life of a person.

To me, the role of the medical field is to provide people with relief from their ailments and increase their quality of life. As someone who hopes to work in the medical field and become a physician it is important for me to understand the issues that the community I wish to serve experiences. In educating myself and others around me in such issues I hope to take a step in the right direction.

A photograph of three medical students walking in a hallway. The student on the left is a woman wearing a white lab coat, a white hijab, and a white face mask. The student in the center is a woman with long dark hair, wearing a white lab coat, a blue face mask, and glasses. The student on the right is a man wearing a white shirt, a patterned tie, a dark jacket, and a blue face mask. The background is a brightly lit hallway with white walls and doors.

Medical Student Column

FEEL FOR ADVOCACY WORK

Connecting Underserved Communities of the San Joaquin Valley with Quality Healthcare

Maram Kiran wanted to pursue medicine in order to bridge the cultural divide and address health inequities around the world. At Fresno State, she started a student chapter of Doctors Without Borders and was a student researcher for the Chemistry Honors Program.



**MARAM KIRAN
MS2**

**UCSF SJV PRIME
CLASS OF 2027**



As the first in my family to be in the medical field, the hospital and the doctor's office were always places that felt unreachable. Growing up in Fresno, California, my family and I faced barriers to accessing medical care that helped us feel we were heard and understood. As a Yemeni Muslim woman who wears the hijab, I did not find anyone who looked like me or spoke our native language Arabic in any healthcare setting. I pursued medicine to bridge the gap between my community and the healthcare system, and to be the physician my family desperately needed.

As part of University of California San Francisco's San Joaquin Valley Program in Medical Education (UCSF SJV PRIME), medical students have the honor of working with the underserved communities of the San Joaquin Valley.

For my summer fellowship, I worked with communities I connected with through my identities as a Muslim, Yemeni, and Fresno native.

Along with my preceptor, Dr. Marlon Echaverry, in the Family Medicine Clinic at Family Healthcare Network, I saw patients with a variety of complex issues, from uncontrolled diabetes, hypertension, severe anxiety and depression, to substance use disorders in harm reduction clinic. I witnessed the interplay of structural factors, like insurance, housing, food insecurity, and working conditions, with patients' health and ability to access healthcare services. More powerfully, I saw how inquisitive, non-judgmental, compassionate, and culturally humble care can play a significant impact on patients' journeys to a healthy life.

To connect healthcare services with the larger Muslim community in Fresno County, I collaborated with UCSF Fresno's free mobile health clinic and MyDeen, a Muslim community-based organization, during the annual Unity Eid Carnival on June 23, 2024. Over 1,200 community members attended the Eid Carnival, and we provided preventive health screenings, including point-of-care blood glucose and pressure tests, to over a dozen patients.

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The lessons I learned during family medicine clinic, community engagement, and research this summer have shaped my perspective as a rising second-year medical student to consider all factors that affect patients' lives.

Providing Health Care Screenings with UCSF Fresno Mobile Heal

UCSF SJV PRIME medical students provided free health screenings for the Muslim community at the annual Unity Eid Carnival in Fresno, California.



MARAM KIRAN
MS2
UCSF SJV PRIME
CLASS OF 2027

In addition to direct clinical care and community engagement, I initiated a research project to study the health status and access to healthcare services of the Yemeni community in the San Joaquin Valley.

Yemenis have immigrated to the San Joaquin Valley in California looking for opportunities to achieve their own American Dream since the late 1960s. In addition to racism, discrimination, and police violence, the health burdens of living in crowded labor camps, arduous crop picking, and exposure to health irritants in the fields contributed to the poor health of the Yemeni farm workers. Although Yemenis have been living in the San Joaquin Valley for more than 50 years, Yemeni-American health status and healthcare access remain poorly understood with only minimal descriptive data available.

By utilizing validated surveys and one-on-one interviews, I hope to better understand and raise awareness for the health and healthcare access needs of the Yemeni community.



L to R: Maram Kiran, UCSF SJV PRIME student; Tim Nguyen, MD, UCSF SJV PRIME ASPIRE director; Sukhjit Dhillon, MD, UCSF Fresno Mobile Heal Assistant Medical Director

The lessons I learned during family medicine clinic, community engagement, and research this summer have shaped my perspective as a rising second-year medical student to consider all factors that affect patients' lives, to become a stronger advocate, and to continue to work toward becoming the best provider I can be for my patients and my community.

The most powerful phrase I heard during this summer was "Thank you." Every time patients, students, and community members showed interest or shared their gratitude for the projects I worked on, I was reminded of the reason I was there.



A recruitment flier used for the study, Assessing Health and Healthcare Access among Yemeni residents of the San Joaquin Valley.



LEARNING ABOUT CONTRACEPTION



**LASYA GUDIPUDI
(SHE/HER)**

**UCSF SJV PRIME
CLASS OF 2027**

My name is Lasya Gudipudi, and I am a 2nd-year medical student at UCSF as part of the SJV PRIME program. Being able to attend my dream medical school with a tailored program to increase medical professionals in the community I grew up in has been an incredible opportunity. One of the most valuable aspects of my first year has been the sense of community and support within the program. The faculty and staff have been incredibly supportive, offering guidance and mentorship throughout the year.

As I transition into my second year, I am excited about new challenges and opportunities. One area I am particularly passionate about is advocating for women's health. Women's health is a crucial part of healthcare that deserves focused attention. Unfortunately, many women still face disparities in access to care and health outcomes, especially in the central valley.

One significant issue in the Central Valley is the lack of information about contraception and birth control methods. Many women do not have access to comprehensive education on these topics, which can lead to unintended pregnancies, sexually transmitted infections, and other health complications.

Health Screening at The Unity Eid Carnival in Fresno



Additionally, the presence of numerous crisis pregnancy centers (CPCs), which often do not provide complete or medically accurate information, further complicates the situation. Ensuring that women have access to reliable information and resources is essential for improving health outcomes.

Throughout my first year, I worked with fellow medical students to raise awareness about CPCs by incorporating this topic into our abortion lecture in the reproductive health curriculum. We are aiming to educate our peers on the misinformation often provided by these centers and the importance of ensuring that women receive accurate and comprehensive reproductive health information.

Lasya shared her research project "Comparison of rates and clinical outcomes of patients treated for suspected versus confirmed intraamniotic infection,"

As I complete my pre-clinical curriculum over the next six months, I am excited to return to the Central Valley for my clinical rotations. I look forward to applying my knowledge and skills, taking initiative in advocacy efforts, and contributing to the improvement of health in our community



“GENDER AFFIRMING CARE EDUCATION AND ADVOCACY – FROM MEDICAL STUDENTS TO PHYSICIAN ADVOCATES”

UCSF SJV PRIME STUDENTS ADVOCATE FOR INCLUSIVE GENDER AFFIRMING CARE IN THE CENTRAL VALLEY



ALLI GOMEZ-OJEDA
(SHE/HER)

UCSF SJV PRIME
CLASS OF 2025

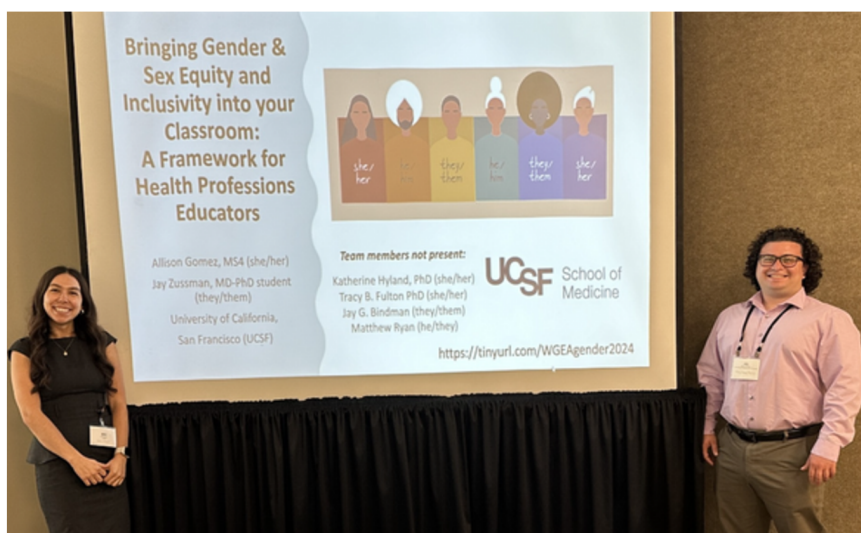
Alli Gomez-Ojeda is a 4th year medical student at UCSF in the SJV PRIME program. Alli has been a passionate advocate for the LGBTQ+ community in the medical education space, with presentations at multiple national and international conferences on inclusive curriculum design and anti-oppression in medical education. She recently returned from a year doing research in medical education at UCSF with the Anti-Oppression Curriculum Initiative, where she developed a small group, case-based learning session for first year medical students about gender affirming care and communication with LGBTQ+ patients.

The session reviewed the case of an adolescent patient seeking gender affirming care and gave students an introduction to the variety of pharmacological and non-pharmacological treatments available for gender affirming care, what community based resources exist for these patients, and how to improve communication skills specifically for adolescent and LGBTQ+ populations and parents of LGBTQ+ children.

This small group utilized a differentiated approach to determine what group each student participated in: before the session, each student took a self assessment that allowed them to reflect on their own prior knowledge about gender affirming care and LGBTQ+ health topics.

The assessment tool then recommended which of the three group levels might be the best fit for their learning goals. The session was offered for beginner/introductory level, intermediate level, or advanced level students.

The learning objectives of each group varied depending on the prior knowledge expected from each group - for example, the introductory level group spent most of their time focused on building a foundation of knowledge about what gender affirming care is, and what local resources exist for their patients, whereas the students in the the advanced group were expected to already have a good grasp on general LGBTQ+ terminology,



L: Alli Gomez- Ojeda (she/her) UCSF SJV Prime MS

R: Jay Zussman (they/them) MD/PhD student at UCSF

the basic tenets of gender affirming care, and some familiarity with the local community resources available for patients, so they were able to spend more of the session time engaging with the content that focused on advocacy efforts and building their communication skills.

Students in all levels researched a variety of local community and support resources available for LGBTQ+ populations during the session and practiced how they might introduce these resources to patients or their parents during a visit. All students also learned about the current political landscape of minors accessing gender affirming care. Currently, 26 U.S. states have enacted bans on best practice, evidence based care for LGBTQ+ minors, with language that mirrors many of the abortion restriction laws that came into place after the fall of *Roe v Wade*.

Like many states abortion restriction laws, these laws are in stark opposition to statements from nearly every major medical professional organization that support access to gender affirming care, including the American Medical Association, American Academy of Pediatrics, and American Academy of Child and Adolescent Psychiatry, among many others (GLAAD).

During the session, students used the Movement Advancement Project's interactive state map to understand which states across the country have enacted these care bans, and what specific types of care they ban (gender affirming hormones, surgery, etc). In the patient case, the family is considering moving to a different state that happens to have restrictive laws that would limit the patient's access to care

Students assessed what care the patient would be able to receive in that state and investigated alternatives for continuing to access care (such as continuing to receive care from a physician in a state with laws that do not ban gender affirming care) and what limitations those approaches might have (insurance coverage issues, limitations on accessing a provider from out of state, etc). Students concluded the session by brainstorming strategies that physicians could use to help advocate for the repeal of these care restrictions, and were encouraged to continue these advocacy efforts outside of the classroom. Overall, students felt that the session was extremely helpful for them to gain an introduction to gender affirming care, and many students appreciated the focus on local community resources they could provide to patients. The differentiated learning structure tailored the content to the students' individual knowledge level and fostered a sense of psychological safety within the groups.

Communication with LGBTQ+ patients of all ages is a skill that requires constant practice and a growth mindset - and we all can benefit from continuing to learn more about how to provide better care for these patients. Here are some resources to help you on your journey:



Introduction to gender-affirming care

- UCSF's Transgender Center for Excellence guidelines on gender affirming care
- Caring for Trans and Gender Diverse People - Evidence Based Medicine Across the Lifespan - UCSF FCM Lecture

Here are some resources to help Improving communication with LGBTQIA+ populations

- Engaging the Families of Transgender and Gender Diverse Children | 2021 » LGBTQIA+ Health Education Center
- Medical Trauma in LGBTQIA Youth: Adapting Trauma-Informed Affirming Clinical Practices - Ramos 2021
- National LGBTQIA+ Health Education Center - extensive library of webinars, publications, and other resources for providers

Local/community resources

- PFLAG National
- PFLAG Fresno
- Fresno EOC - LGBTQ+ Resource Center

Advocacy

- States are banning gender-affirming care for minors. What does that mean for patients and providers? | AAMC
- VICE News - Chase Strangio on Anti-Trans Attacks, Legislation and Hope - 9 min video
- UCLA's Williams Institute report on the impact of gender-affirming care restrictions for trans youth
- Policy Tracker: Youth Access to Gender Affirming Care and State Policy Restrictions | KFF



Resident Column

SUPPORTING RESIDENCY ADVOCACY

Jasleen Randhawa MD
PGY-I, UCSF Fresno

PROMOTING PREVENTIVE MEDICINE

My name is Jasleen Randhawa! I am a first-year family medicine resident at UCSF-Fresno. Growing up, I saw Punjabi immigrants in my community struggle with healthcare, often feeling “blindsided” by new diagnoses. More often than not, healthcare was sought after a problem existed, and the concept of primary prevention was nonexistent. This narrative continues to be true. Most patients visit their primary care provider to get help for a specific problem or to manage an already present disease. The idea of preventative medicine is almost foreign; it is either an unknown concept or it is viewed as unnecessary.

A significant moment for me was at a health fair where I was conducting blood pressure and blood sugar checks at the local Sikh Temple. At this event, we got to see all kinds of patients, including some who followed up with their doctor regularly and some that had not seen a provider since childhood, if at all. One of these patients included an elderly man who endorsed feeling “excellent” and stated, “nothing could be wrong.” As it turns out, he had a critically elevated blood pressure alongside a severely concerning blood sugar reading. Inevitably, the patient had to be sent to the emergency department immediately. This man, visiting a health fair at his local temple on a casual Sunday, truly had no idea how sick he was. If he had any symptoms, he may have been treated much earlier, but because he felt “fine,” healthcare was not sought.





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**WE STRIVE TO PREVENT PROBLEMS BEFORE THEY EVEN
EXIST.**

In family medicine, however, we strive to prevent problems before they even exist. Preventative medicine has been a passion of mine since prior to medical school due to my experiences as a second-generation Punjabi immigrant, where I witnessed the community struggle with what felt like unexpected diagnoses. I am incredibly excited to now have the privilege and opportunity to practice it as a first-year family medicine resident in Fresno, where there is a diverse population and a robust Punjabi community.

My experiences have truly emphasized the importance of preventative medicine as a family medicine physician. I strive to create a culture in medicine that encourages patients to seek healthcare prior to having any symptoms. I strive to educate people in the community that an official diagnosis is not the only reason to be established with a healthcare provider. Finally, I strive to normalize conversations about healthy living, including what encompasses a healthy diet and the importance of daily exercise. Preventative medicine is a joint effort between the community and us as family medicine providers, and the first step is promoting primary prevention wherever and whenever possible.



**JASLEEN
RANDHAWA MD**

**PGY-1
UCSF FRESNO**

UNVEILING THE PASSION AND PURPOSE OF THE 2024 ALL MEMBERS ADVOCATE MEETING



**EMANUEL
SALCEDO, MD**

**PGY-2
VALLEY HEALTH TEAM**

In the heart of Sacramento, California, a vital gathering recently unfolded—bringing together dedicated physicians and advocates committed to reshaping healthcare policies and championing the needs of underserved communities. The 2024 All Members Advocate Meeting (AMAM) provided a platform not only for collaboration but also for impassioned discussions that are shaping the future of healthcare advocacy.

For first-time attendees like myself, the AMAM exceeded expectations, offering a unique opportunity to collaborate with fellow physicians driven by a shared commitment to serving the underserved. Among the attendees were local doctors from Fresno, whose unwavering dedication to their patients shone brightly amidst the spirited discussions and policy initiatives.

Being able to attend this year has fueled my motivation to refine and present my project at the next meeting. Dr. Raul Ayala and the new president, Dr. Alex McDonald, epitomized leadership—approachable figures who warmly engaged and took the time to discuss not only our chapter's history but also the path they see us taking. They both took the time to discuss and answer any questions I may have.



“WE ARE FIRED U FOR FAMILY MEDICINE”



Your chance to make changes in
health care policy

To those who have yet to experience the AMAM, I extend an invitation. This gathering is not merely a seat at the table—it is an empowering opportunity to lend your voice to critical healthcare conversations. Whether you are a medical student, a seasoned practitioner, or a resident in family medicine, the AMAM beckons as an essential experience to learn, collaborate, and advocate for meaningful change.

Mark your calendars and prepare to engage next year. The All Members Advocate Meeting is not just an event; it's a catalyst for transformative action in healthcare advocacy. As we can all say after having experienced the 2024 AMAM, we are "Fired up for Family Medicine"!

Dr. Emanuel Salcedo





Attending the All Members Advocacy Meeting (AMAM) and participating in Lobby Day on April 15th in Sacramento was a deeply impactful experience, reinforcing the critical role that family physicians play in shaping healthcare policy. Alongside more than 200 members, including physicians, medical students, and residents, we came together as a powerful collective voice to advocate for issues that directly affect our profession, our patients, and the communities we serve.

This year's AMAM was particularly significant, not just because of the size of the gathering, but because of the passion and energy that filled the sessions and discussions. Participants engaged in meaningful conversations about important resolutions, sharing perspectives on healthcare access, affordability, and equity. The diversity of voices—ranging from seasoned physicians to medical students and residents—brought rich, varied insights into the discussions.



Representing The Central Valley during Lobby Day

AAFP National Conference



**CHRISTINE
NG, DO**

**PGY-3
UCSF FRESNO**

If I were to use one word to describe the 2024 AAFP National Conference, it would be “invigorating”. This year my co-resident and I were privileged to attend the conference with the goal of meeting interested students and providing exposure for our program. Both of us, having never attended, had no idea what to expect. Upon arrival, the convention center was teeming with hundreds of students from across the nation, over 600 residencies, hospitals, and physician groups eager to find the right fit. Over the course of the weekend, we met with dozens of amazing students, made friends with residents at neighboring booths, discovered many potential job opportunities, networked with CAFP members who attended, and, most importantly, played with the puppies at the Furry Friends station.

Additionally, as an alum of Kansas City University SOM, it was so nostalgic to return to the city and rediscover Kansas City’s bustling downtown, home to the Midland Theatre, which hosted the AAFP’s “Celebration”. This herald of conference’s end featured an amazing local band, a 360 spinning photobooth, plenty of snacks, and close to 300 party animals who just spent the whole day in business casual garb and attending workshops. After having attended, I would highly recommend any medical student or resident attend the conference. If not for the plethora of workshops, guideline updates, or exhibitors, or the fact that students can attend for free through the Family Medicine Leads scholarship, then for the amazing coffee, BBQ, and energetic vibe that Kansas City has to offer.

MOBILE CLINICS ARE A KEY PART OF RURAL MEDICINE

MOBILE CLINICS ALLOW PATIENTS TO RECEIVE CARE WITHOUT TRAVELING LONG DISTANCES



**ZINAH QADER,
MD**

**PGY-2
ADVENTIST HEALTH**



Participating in the Mobile Vane Clinic in Avenal, California, Central Valley, began with a drive from Hanford, about 30 miles away. Despite the distance, the journey was well worth it as we provided essential healthcare to around 50 to 60 patients. We worked in two teams, each consisting of one resident physician and nurses, while a receptionist team outside the mobile van prepared patients for their visits. The day was well-organized, and we checked patients' vitals, including heart rate, blood pressure, blood sugar, and HbA1c, reviewed their medications, and conducted physical exams. For those with high blood pressure or uncontrolled blood sugar, we made necessary referrals to primary care or emergency departments.

The mobile van was large and equipped with everything we needed for physical exams, vitals checks, and ambulatory labs. Patients were grateful and some even expressed their intent to continue their healthcare with the resident physicians they met. The experience was not only rewarding but essential, as many of these patients lived in areas where accessing primary care or hospital services regularly was a challenge. It was a remarkable and memorable experience for both providers and patients alike.

ADVOCATING FOR OUR GENDER DIVERSE PATIENTS: BRIDGING THE GAP IN THE CENTRAL VALLEY

“ Gender Affirming care belongs to Primary Care ”

In the heart of the Central Valley, access to inclusive healthcare for transgender and nonbinary individuals has historically been limited, particularly due to a shortage of physicians specializing in gender-affirming care. Recognizing this critical gap, our clinic decided to move forward and offer comprehensive gender-affirming care alongside primary care services.

Our clinic's mission is simple but powerful: to provide a safe, welcoming, and affirming environment where all patients, regardless of gender identity, can access the healthcare they need and deserve. By integrating gender-affirming care with primary care, we ensure that our patients receive holistic care that addresses their unique needs.



PICTURE: Rainbow Pride Parade, at Fresno City College. April 5th Fresno

The impact of this initiative has been profound. Not only are we helping to reduce healthcare disparities in our community, but we are also setting a new standard for inclusive healthcare in the Central Valley. Our clinic has become a beacon of hope for many who previously had to travel long distances or navigate unwelcoming healthcare environments to receive the care they need.

As one of the few clinics in the region with a focus on gender-affirming care, we are helping to fill a critical void. The demand for such services continues to grow, and we are committed to expanding our reach and impact. Our success is a testament to the importance of training and supporting more physicians in this field, ensuring that all individuals, regardless of gender identity, can access compassionate, affirming, and comprehensive healthcare close to home. Now, we have opportunities for our medical students and residents to rotate at our clinic and learn about Transgender and Nonbinary Health.

In a time when inclusive healthcare is more important than ever, our clinic is proud to stand at the forefront of this essential movement in the Central Valley. We remain dedicated to serving our community and advocating for the health and well-being of all our patients.

by Diana Howard MD AAHIVS (she/her)
Family Health Care Network FHCN at Fresno