

Winter Term 2009

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The Women's Community Clinic: Ideology, Activism, and Health Care

This Winter Term I was an intern and volunteer at the Women's Community Clinic, a non-profit clinic in San Francisco that provides free and confidential sexual and reproductive health care services to uninsured and underinsured women in the Bay Area community. It is a space where health care is provided for women, by women. I was able to shadow the various volunteer positions, interact with and aid the staff on various projects, and participate in the Outreach program.

The Clinic has about fifteen core staff members and over one hundred volunteer clinicians and health workers. Despite this large number of motivated volunteers coming and going, the Clinic runs extremely smoothly and is very well organized. There is a certain structure to the volunteer system, and I had the opportunity to shadow most of the volunteer positions. When volunteers start, they begin at the front desk as a Client Services Coordinator, scheduling appointments, finding files, learning the Clinic system, and being the first ones to interact with the clients. After six months at this position, the volunteer can then train to be a Health Educator. Health Educators get to run tests on urine samples, interact with the clinicians, and talk with each client one-on-one before the client sees the clinician. After volunteering as a Health Educator, one can train to be an HIV Counselor and/or a Pregnancy Counselor. The Women's Community Clinic is a pro-choice clinic and is willing to refer a woman to whatever resource she feels is most suitable to her needs. The Clinic also has a colposcopy clinic once a week, which involves a follow-up procedure for an abnormal pap smear.

The Clinic fosters a community where the approach to health care is very important; quality care, a respectful atmosphere, and ample time spent with each client are all key components. One important ideology is client-centeredness, where it is not the Clinic's role to impose any certain viewpoints or health standard on the clients. Instead, it is a space for women to make educated decisions about their own bodies and health. In essence, the Clinic makes sure services are available, and the women choose what they want out of their appointment and what works best for them. Another key ideology is harm reduction. This is about meeting women where they are at considering health and positionality. The focus is more about engaging in harm reducing activities with regard to health rather than totally eliminating an action. It is important to recognize where each woman is coming from and to acknowledge her unique life experiences.

There are many other roles and energies important in running a community clinic, and I had the opportunity to participate in many tasks. I got to write an article about alumnae volunteers for the Communications Director, take notes at a Board meeting for the Executive Director, enter Outreach data to be used for writing grants, and help lead a clean-up of the new facility for the Obama Day of Service. I researched drug labels, cleaned up and organized spaces in the Clinic, mailed very personalized thank-you letters to donors, and explored the districts of San Francisco while hanging up volunteer recruitment flyers.

Specifically, I worked closely with the Outreach department. The Outreach program was initiated in 2001 because the Clinic felt that it needed to reach a wider range of women. On

Monday and Tuesday evenings, two to three volunteers do outreach on the street and at single room occupancy (SRO) hotels in the Mission District. We pass out requested supplies such as food bags, safer sex supplies, tampons and pads, first aid items, safer drug use supplies, and hygiene supplies. Many of these items represent harm reduction. Dental dams and condoms reduce the risk of contracting sexually transmitted infections. Sterile tourniquets, gauze pads, antibiotic ointment, and alcohol pads reduce the risk of getting infected wounds from drug use. This is also client-centered, as it was the initiative and choice of the women to make decisions about their health, as each woman would specify what particular items she did or did not prefer.

The other main part of the Outreach program is Ladies' Night, a Thursday evening event held in collaboration with the Mission Neighborhood Resource Center (MNRC), a space for homeless individuals in the Mission District. Ladies' Night is the only time during the week where the space is reserved for those who identify as female only. The Women's Community Clinic sets up a table and hands out supplies similar to those provided during street outreach. The event also includes a hot meal, a needle exchange, and programming such as a clothing closet, a tenant's rights workshops, or bingo. There is also a therapist and volunteer masseuses. I attended and worked several Ladies' Nights and got to hang out with wonderful women from the community, both worker volunteers and Ladies' Night attendees.

I love the Women's Community Clinic, the vibe, passion and energy of the volunteers and staff community, and the genuine commitment in advocating for women's health. Throughout the month, I was consistently reminded of the financial struggles of the organization in this current economic situation. However, there were also constant activist energies. The Clinic is in the middle of a Capital Campaign, as it hopes to be moving to a larger facility within the year. Right now they service about 4000 women, and they hope to at least double this figure with the move. This is a huge fundraising project, but they have made substantial strides. The Clinic also is active in commenting on changing policies, as they organized a forum with Planned Parenthood and wrote up ideas about what they would like health care to look like in the future. They sent this to the new administration. Also, during my last week at Ladies' Night we learned that the city had cut Ladies' Night funding. Instead of quietly taking this economic blow, MNRC volunteers as well as Ladies' Night attendees attended a hearing and advocated for the continuation of the program. It shows that the event is a worthwhile and successful program when it is those who are served who are becoming advocates and activists.

Without the support of the Winter Term office, this project would not have been possible. Oberlin's resources and networks allowed me to make an idea a reality. I networked to find housing through an Oberlin alumna via the OBIEweb alumni network, and the Winter Term office enabled my actions with a much-appreciated grant. After arriving at the Women's Community Clinic, I was delighted to learn that two Oberlin alumnae worked at the Clinic. I love finding connections to Oberlin outside of Oberlin.

This experience has given me insight into a specific way that a health-oriented organization, a non-profit community clinic, can approach health care: a dedicated approach that involves respecting and acknowledging the body, mind, and positionality of each client. I fully appreciate the exposure I've had to the many life situations and challenges women face with regard to health. Overall, this volunteer and intern experience has reinforced my passion to continue my studies in Biology and Gender, Sexuality, and Feminist Studies here at Oberlin, with hopes to go into a women's health-related career. I continue to be interested in the scientific research, clinical, social and cultural aspects of healthcare and medicine.