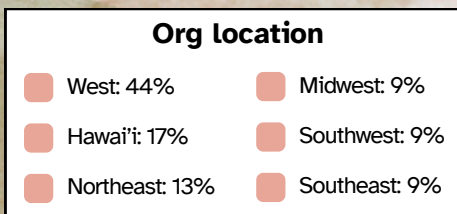
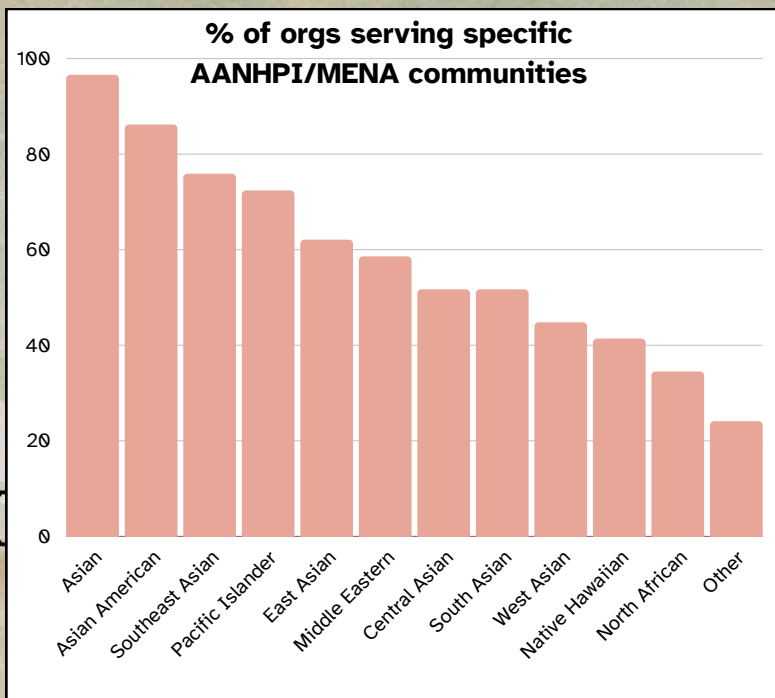


INSIGHTS FROM AANHPI & MENA-SERVING COMMUNITY HEALTH CENTERS

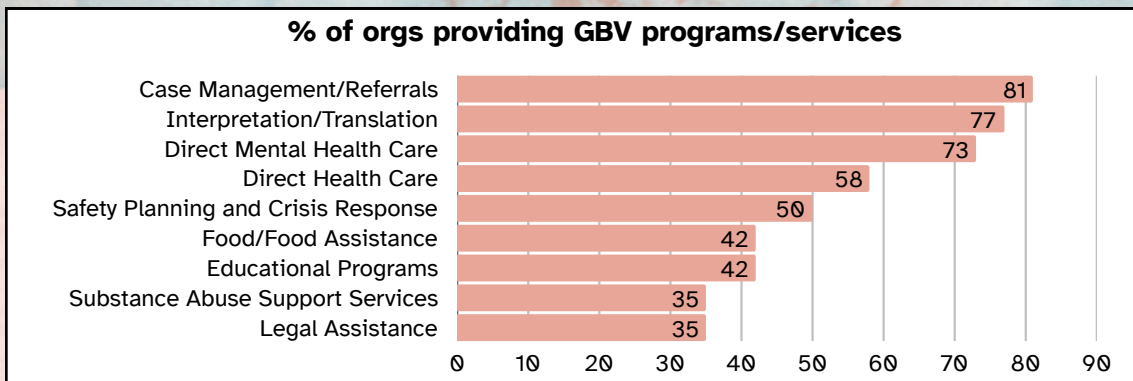
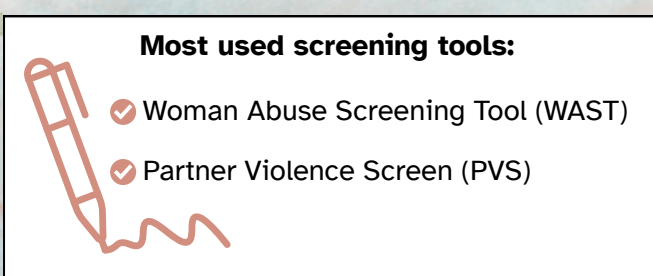
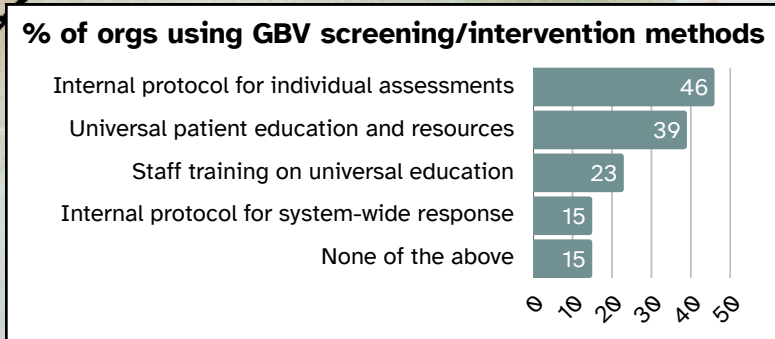
March 2026

Insights from a Needs Assessment of 23 Asian/Asian American, Native Hawaiian and Pacific Islander (AANHPI) and Middle Eastern or Northern African (MENA) serving community health centers (CHCs) and community-based organizations (CBOs) in 2024.









Org type (n=18)

Federally Qualified Health Center	83%
Community Health Center	39%
Mental Health Facility	11%
Family Planning Clinic	6%
School-Based Health Center	6%
Other: Community-Based/Community Service Non-profit Org	11%



Challenges and barriers

-  No screening or intervention protocol
-  Language and cultural differences or stigma
-  Limited capacity to discuss GBV during regular visits
-  Lack of staff training on patient education on GBV
-  Safety and confidentiality concerns
-  Social norms, fears, and stigma attached to GBV

Top patient needs related to GBV



Strengths

- Community partnerships
- Trauma-informed, patient centered care
- Culturally & linguistically rooted approaches
- Workflow & protocol standardization

Challenges

- Cultural norms & stigma
- Resource & funding constraints
- Workforce & documentation challenges
- Sustaining & expanding services and workforce

Opportunities

- Continuous education, skills-building, coaching
- Technical assistance
- Leadership buy-in
- Interagency cooperation, community networking, shared learning, convenings

“We adapt gender-based violence services by integrating cultural practices and community rituals, ceremonies, offerings, and programming in community languages, and employing staff from the Asian diaspora from similar cultural backgrounds as the youth/patients.”







*Program Manager,
Key informant interviewee*

In-person interactive workshops

 (42%)
and

online interactive workshops
(25%) were rated the most effective learning/communication methods

Key recommendations

-  1 Support future AANHPI/MENA serving CHC cohorts to receive GBV-related training and technical assistance
-  2 Emphasize partnership building between CHCs and culturally specific community-based organizations (CBOs) focused on GBV
-  3 Strengthen GBV prevention efforts
-  4 Support funding for culturally specific activities and staff well-being
-  5 Develop a resource repository
-  6 Next steps for future needs assessments

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