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Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) Healthcare in Undergraduate Medical Education: Assessment and Focused Intervention for Medical Students Transitioning to the Wards

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Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) Healthcare in Undergraduate Medical Education: Assessment and Focused Intervention for Medical Students Transitioning to the Wards

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Challenges

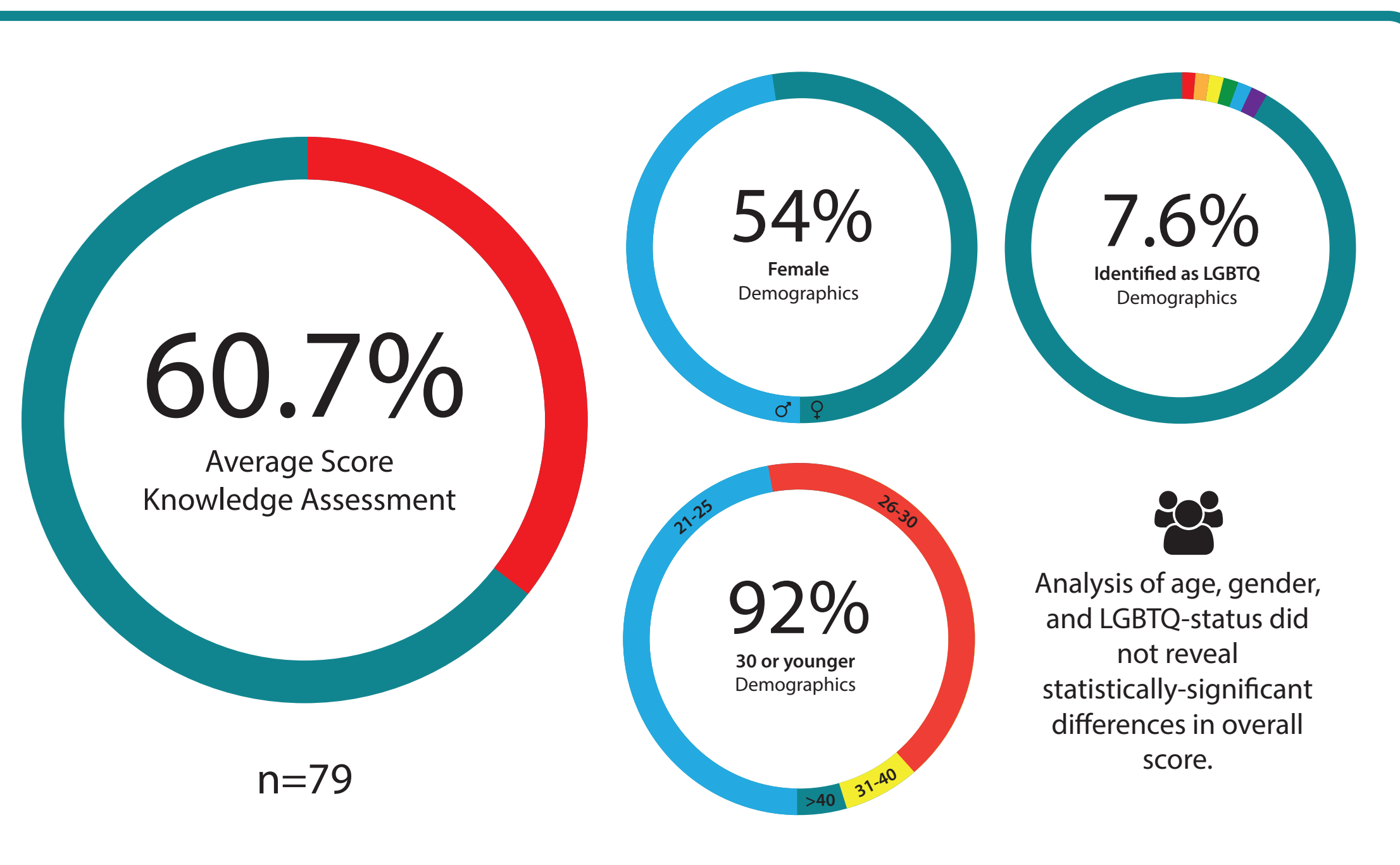
- The LGBTQ community continues to be underserved, despite recent progress.
- Most medical schools are unable to adequately address LGBTQ cultural and healthcare-related issues.
- Recent Association of American Medical Colleges (AAMC) guidance calls for significant expansion of competencies related to LGBTQ patients.

Objectives

- Understand the educational needs and attitudes of UNM medical students transitioning from basic sciences to the clinical years with respect to the LGBTQ community.
- Provide a case-based introduction to the LGBTQ community and its specific healthcare needs.

Intervention

- Medical students were given an assessment in a large-group setting during the "Transitions" block designed to assess attitudes and knowledge based on the AAMC competencies.
- A case-based socratic "Introduction to LGBTQ Patients" followed the assessment.



Sample Assessment Questions

Which of the following is not a term used to describe sexual orientation?

- a. Pansexual (n=14, 17.7%)
- b. Gay (0, 0%)
- c. **Transgender** (44, 55.7%)
- d. Asexual (4, 5.1%)
- e. Lesbian (1, 1.3%)
- f. Queer (16, 20.3%)

AAMC Competency Domain: Knowledge for Practice

Competency 1: Defining and describing the differences among: sex and gender; gender expression and gender identity; gender discordance, gender nonconformity, and gender dysphoria; and sexual orientation, sexual identity, and sexual behavior.

A 34-year-old man presents to primary care clinic to reestablish care. You recall from your previous encounters that he is gay and has been on pre-exposure prophylaxis (PrEP) with emtricitabine-tenofovir (Truvada) to reduce the risk of HIV infection. He indicates that he has had 2-3 sexual partners since he saw you last 6 months ago and has not used condoms. He has engaged in oral, and penetrative and receptive anal sex. He requests STI testing. Which of the following is **not** an important aspect of this patient's care?

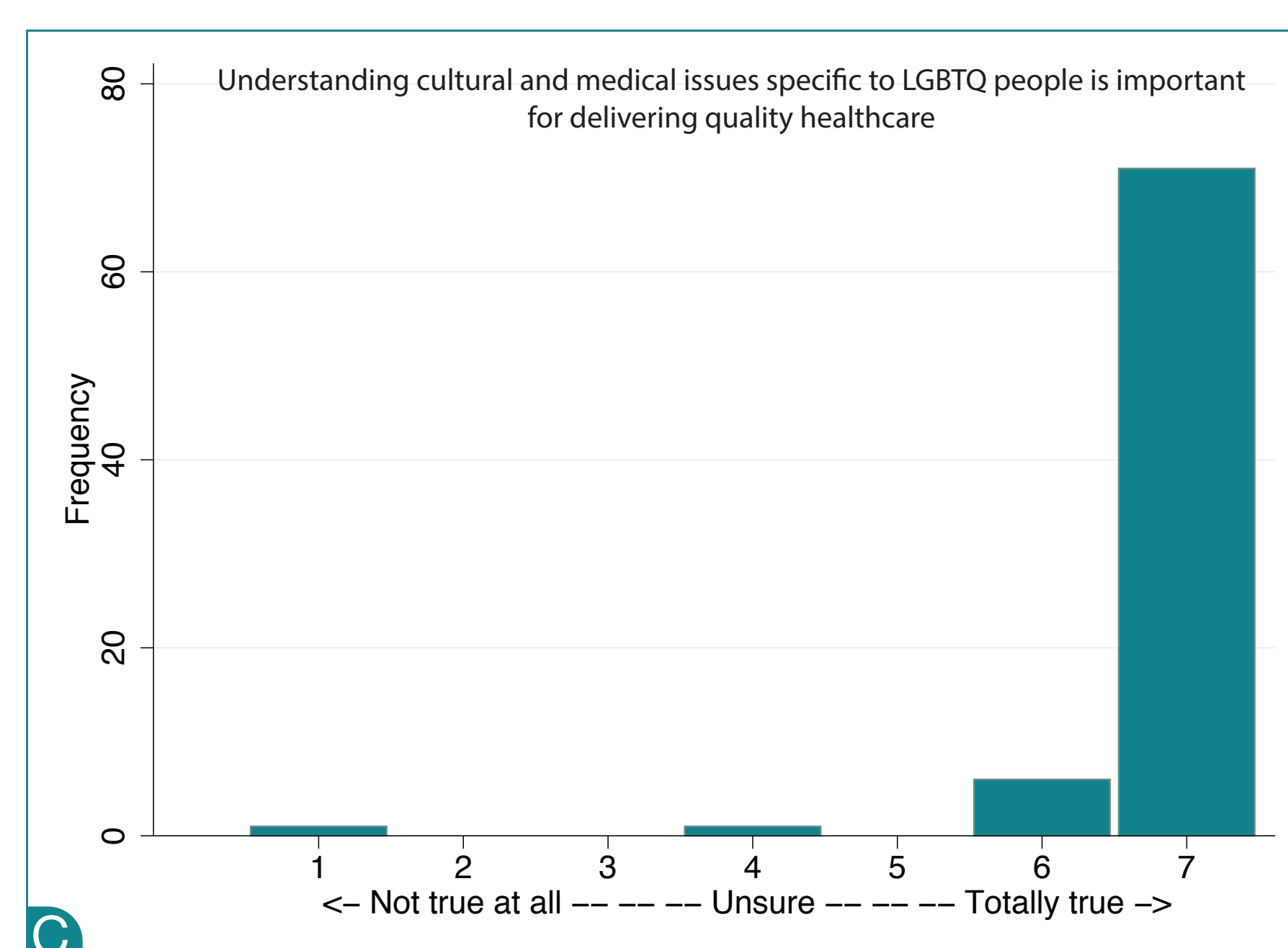
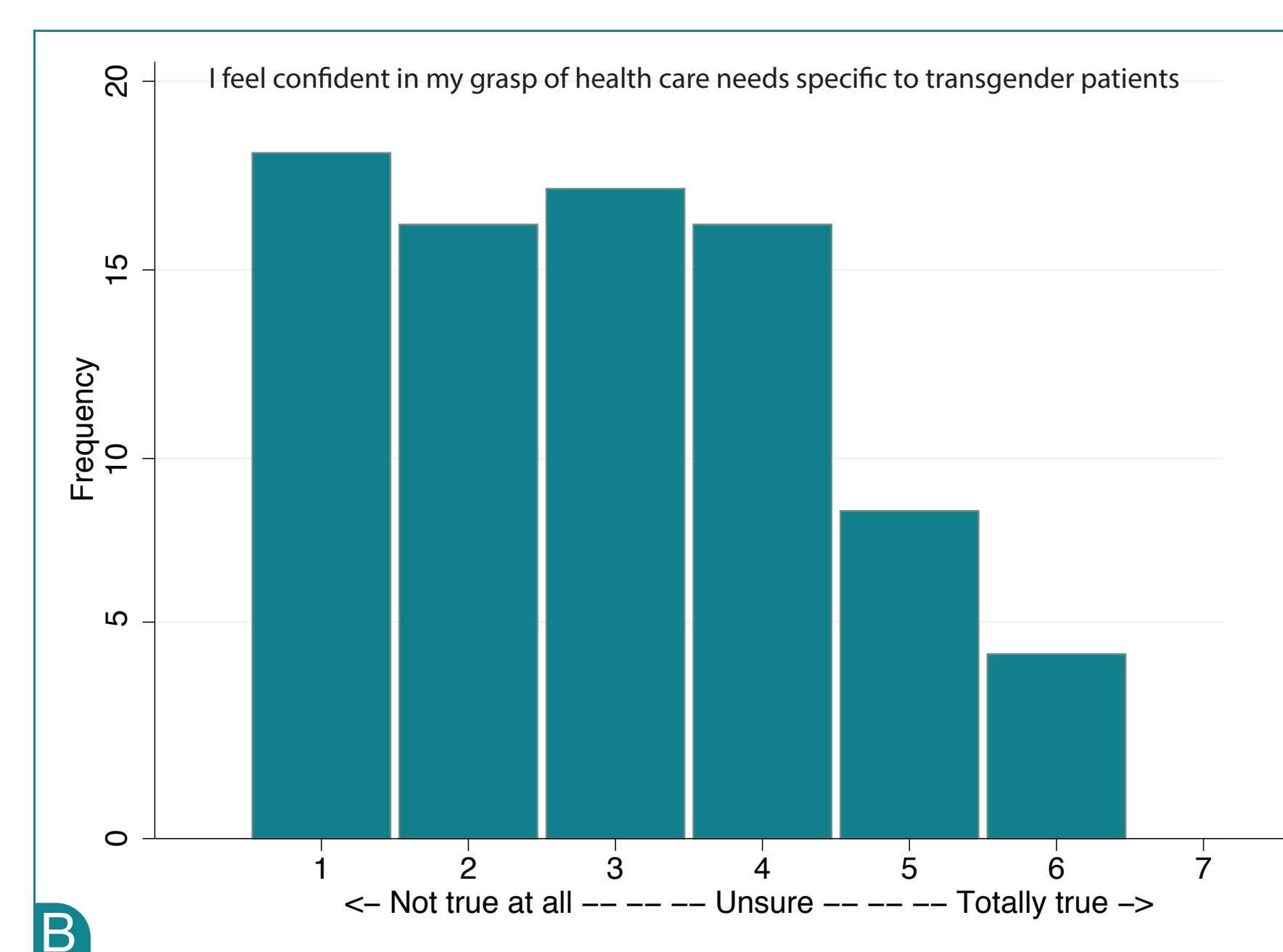
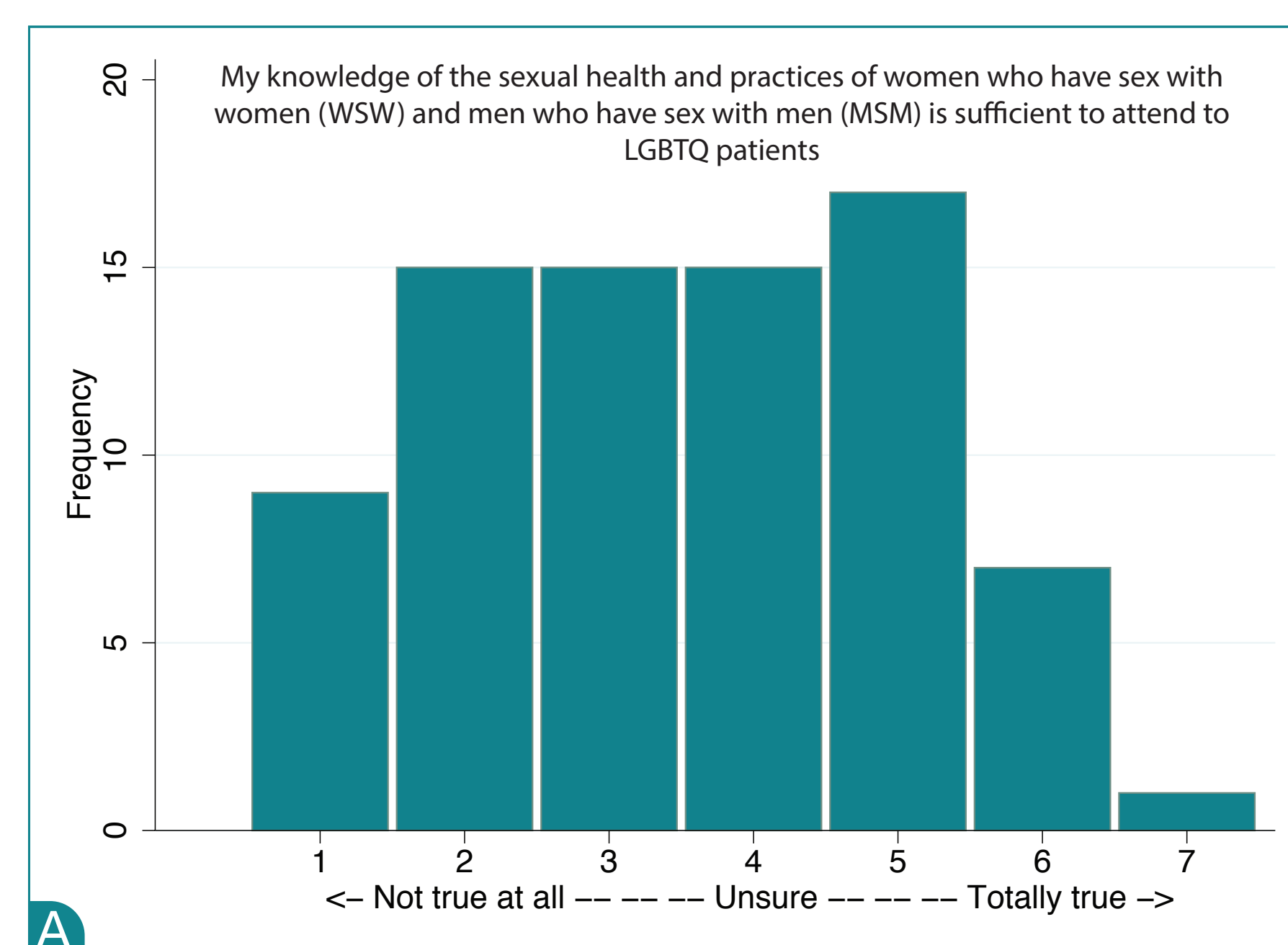
- a. Urine STI testing (3, 3.8%)
- b. Intimate partner violence screening (24, 30.4%)
- c. Complete social and sexual history (7, 8.9%)
- d. HIV testing (5, 6.3%)
- e. **Digital rectal screening for anal cancer** (35, 44.3%)
- f. Oral & rectal swab for STIs (5, 6.3%)

AAMC Competency Domain: Knowledge for Practice

Competency 4: Assessing unique needs and tailoring the physical exam and counseling and treatment recommendations to [LGBTQ people].

My knowledge of the sexual health and practices of women who have sex with women (WSW) and men who have sex with men (MSM) is sufficient to attend to LGBTQ patients.

Not true at all (1) (2) (3) (4) (5) (6) (7) Totally true



UNM medical students have a wide range of comfort with sexual health practices of MSM and WSW (A) and generally feel that they do not have an adequate understanding of transgender health (B). However, students do overwhelmingly feel that understanding cultural and medical issues facing LGBTQ people is important to delivering quality healthcare (C).

Knowledge for Practice

AAMC Competency Domain

Average performance = 67%

- No significant variation by age group
- LGBTQ students scored non-significantly better (66.2 v. 77.8, p=0.052)*
- No significant variation by gender

Patient Care

AAMC Competency Domain

Average performance = 69%

- No significant variation by age group
- LGBTQ students scored significantly better (68.5 v. 77.1, p=0.040)*
- Female students scored non-significantly better (66.4 v. 71.3, p=0.080)*

Terminology

Author-Defined Domain

Average performance = 59%

- No significant variation by age group
- No significant variation by LGBTQ-status
- No significant variation by gender

*Scores are displayed in percent correct

Lecture Slides

Johnny is a 7 year-old child who was born with anatomy consistent with the male sex. From a young age he preferred playing with dolls and wearing his older sister's dresses. As he turned five he would only play with female peers and threw tantrums when his parents tried getting him to play soccer with the other boys. Johnny's mother expresses to you that she is very worried he might be gay. What is an appropriate response to her concern?

- Reassure her that Johnny may be going through a phase and while he may go on to be gay, statistics show that he will likely be straight.
- Explain that it is too early to know what his sexual orientation will be and explore what this issue means to her and why she is concerned.**
- Reassure her that gender-discordance is common in young children and that intervention can help guide him to the development of an appropriate sexual orientation.
- Explain that sexual orientation is influenced by gender identity and explore what her main concerns are regarding homosexuality.
- Explain that this is adolescence.

Vignette-style cases presented as Socratic didactics with follow-up mini-lectures on the topic in question.

Conclusions

- Students at our institution do not meet the new AAMC competencies at baseline.
- Our students are not confident in their LGBTQ cultural and clinical skills, but feel that these skills are important to deliver high-quality care.
- Medical schools should develop curricula to address AAMC LGBTQ competencies.