

Cultural Competency of LGBTQ+ Healthcare Providers: A Dynamic Process, Requiring Ongoing Training

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INTRODUCTION

- The prevalence of many chronic medical and mental health conditions are higher in the LGBTQ+ population.
- ↑ LGBTQ+ education → ↓ Bias and negative attitudes AND ↑ Comfort and preparedness
- Rapid changes in both LGBTQ+ terminology and standards of care require providers to seek continued education.
- It is unclear if a once LGBTQ+-competent provider can still be considered competent in the future without continued education.



- Can providers who consider themselves LGBTQ+-competent further improve their competency via training?
 - Are competency changes from training retained long-term?

OBJECTIVES

Understand gaps in LGBTQ+ cultural competency among self-identified competent providers.



Quantify the changes in LGBTQ+ cultural competency as a result of training.



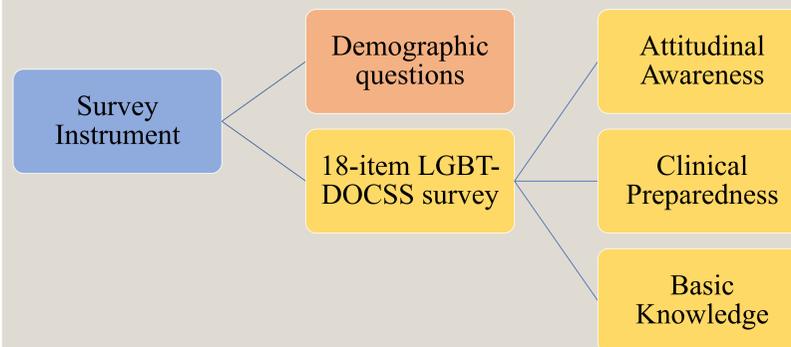
Determine if competency improvements have a lasting long-term benefit.



METHODS

Survey Instrument

- Self-identified LGBTQ+ culturally competent providers were identified via a public database.
- A live, online, one-hour LGBTQ+ training was delivered to providers who self-identified as LGBTQ+ culturally competent.
- Course content: sexual orientation and gender identity terminology, stigma, discrimination, disparities, microaggressions, how to create welcoming environments, public resource allocation and referral
- A survey measuring LGBTQ+ competency was given immediately prior and following training and at 3 months after training.



- Paired sample t-tests were conducted to assess changes in LGBT-DOCSS scores after training.

RESULTS

N = 123

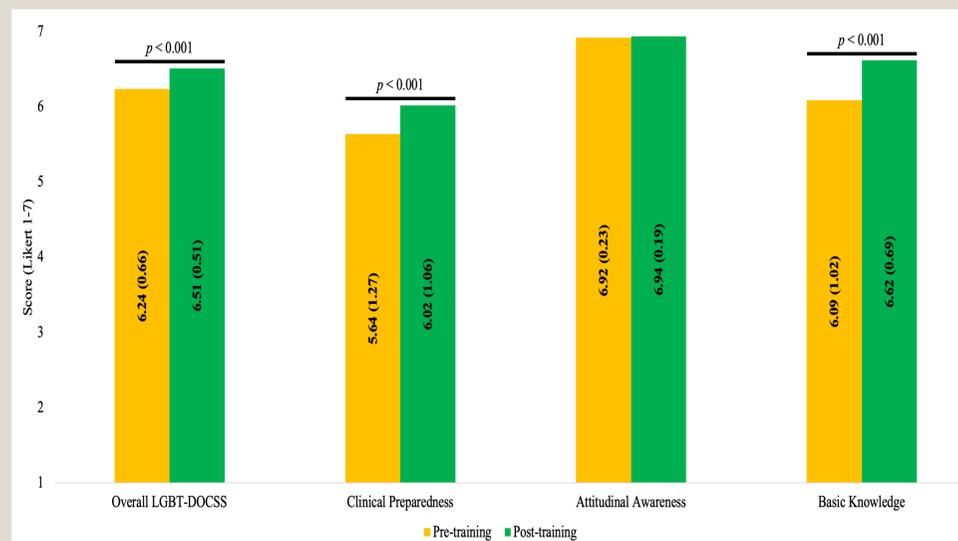


Fig. 1: Pre-training and post-training LGBT-DOCSS scores

N = 60

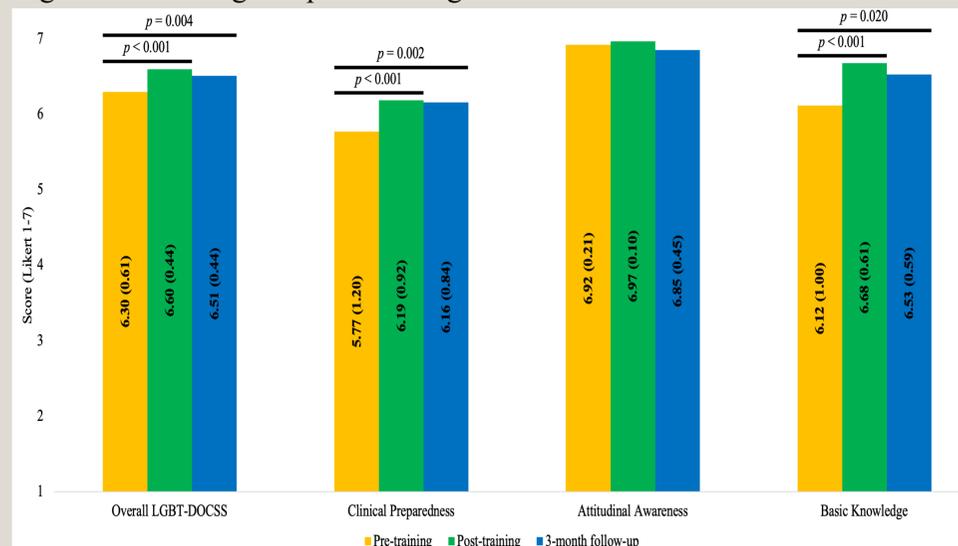


Fig. 2: Pre-training, post-training, and 3-month LGBT-DOCSS scores

CONCLUSIONS

Self-identified LGBTQ+ culturally competent healthcare providers had significant improvements in cultural competency following training.



Improvements in cultural competency were sustained in the long term.



IMPLICATIONS

LGBTQ+ culturally competent providers should prioritize continual learning in order maintain high levels of cultural competency in the rapidly evolving field of LGBTQ+ health.

