



Terminology:
TGN = transgender and gender non-conforming
SDOH = social determinants of health

Implementation of Transgender and Gender Non-conforming Population and Community Health Clerkship for Nursing and Medical Students Promotes Confidence in Students' Ability to Advocate and Provide Culturally Competent Care

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Background

- Transgender and gender non-conforming (TGN) adults make up approximately 0.5% of the US population yet routinely face health-based discrimination and lack of access to safe and gender-affirming care (1).
- Insufficient data exist regarding the inclusion of TGN health topics in medical and nursing school curricula.
- The interprofessional clerkship was a 2-week course offered to medical and nursing students that included discussion-based lectures from TGN individuals, gender-affirming care experts, and community organizers, as well as tours with local healthcare organizations that serve the TGN population.
- The objectives of the clerkship were to (1) increase student engagement with and TGN patient populations and their health care needs and (2) encourage student-developed medical and nursing school curriculum innovation.

Research Purpose and Question

- If and to what degree the clerkship increased students' perceived knowledge, awareness, and competency in caring for the TGN population.
- The utility of implementing such a clerkship into medical and nursing school curricula and what changes would need to be made to the program prior to future implementation.

Program/Course Design

- The population and community health clerkship was a mandatory 2-week community clerkship for medical and nursing students at UMass Chan Medical School in which they engaged with community leaders and/or patient populations to gain relevant real-world context and expand their understanding of population health concepts.
- Features of the transgender and gender non-conforming population and community health clerkship included:
 - 9 medical and nursing students
 - Led by clinical and education specialist faculty with experience in transgender and gender-affirming care.
 - Included 3 community healthcare-related organizations that serve the TGN population and multiple open-discussion style lectures on various topics regarding the healthcare and advocacy of the TGN patient population.

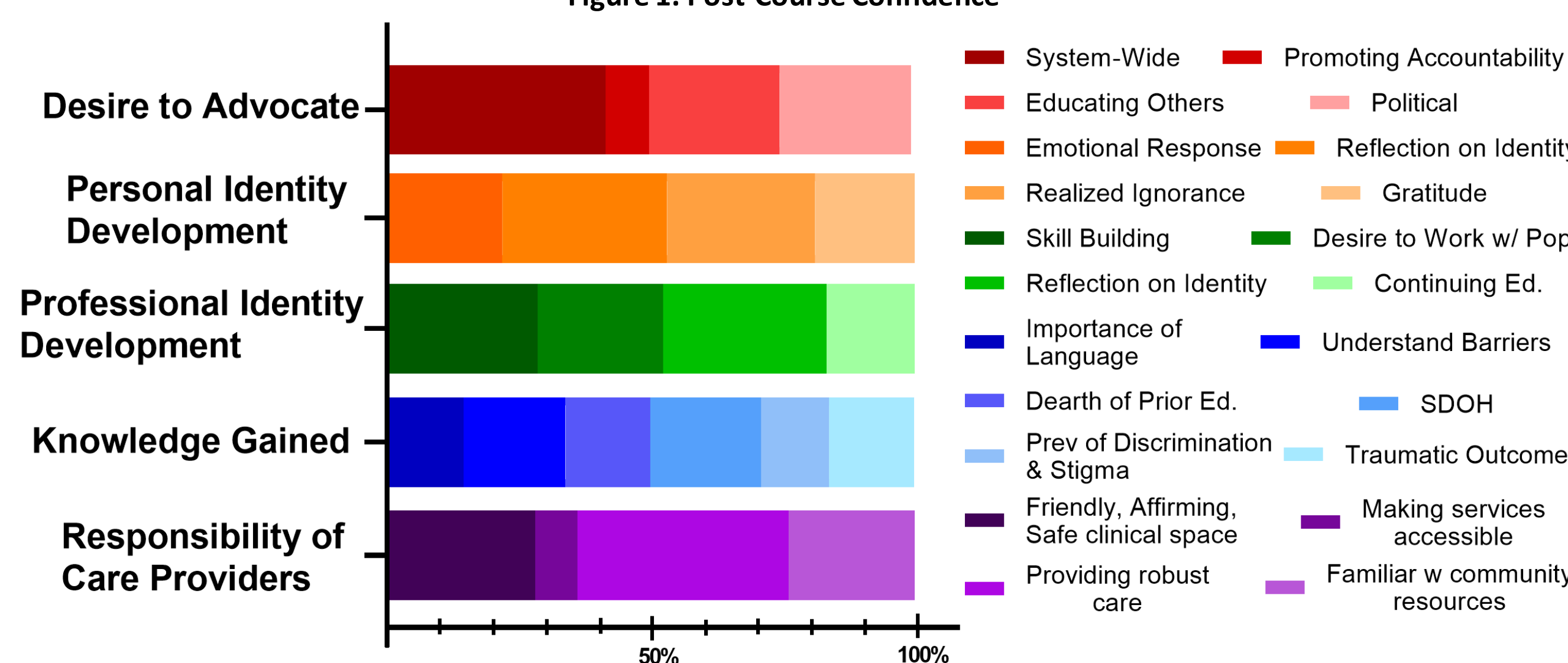
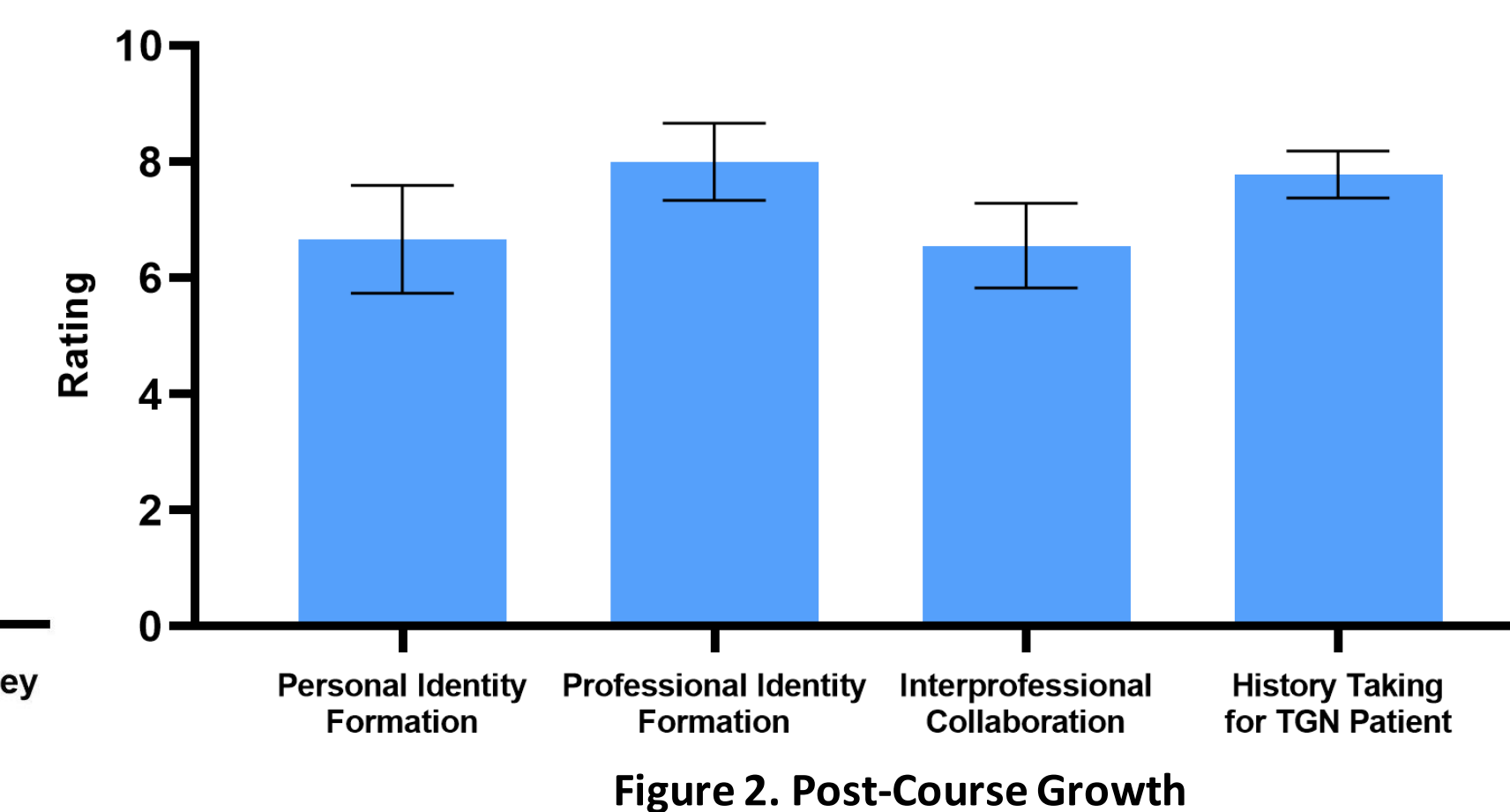
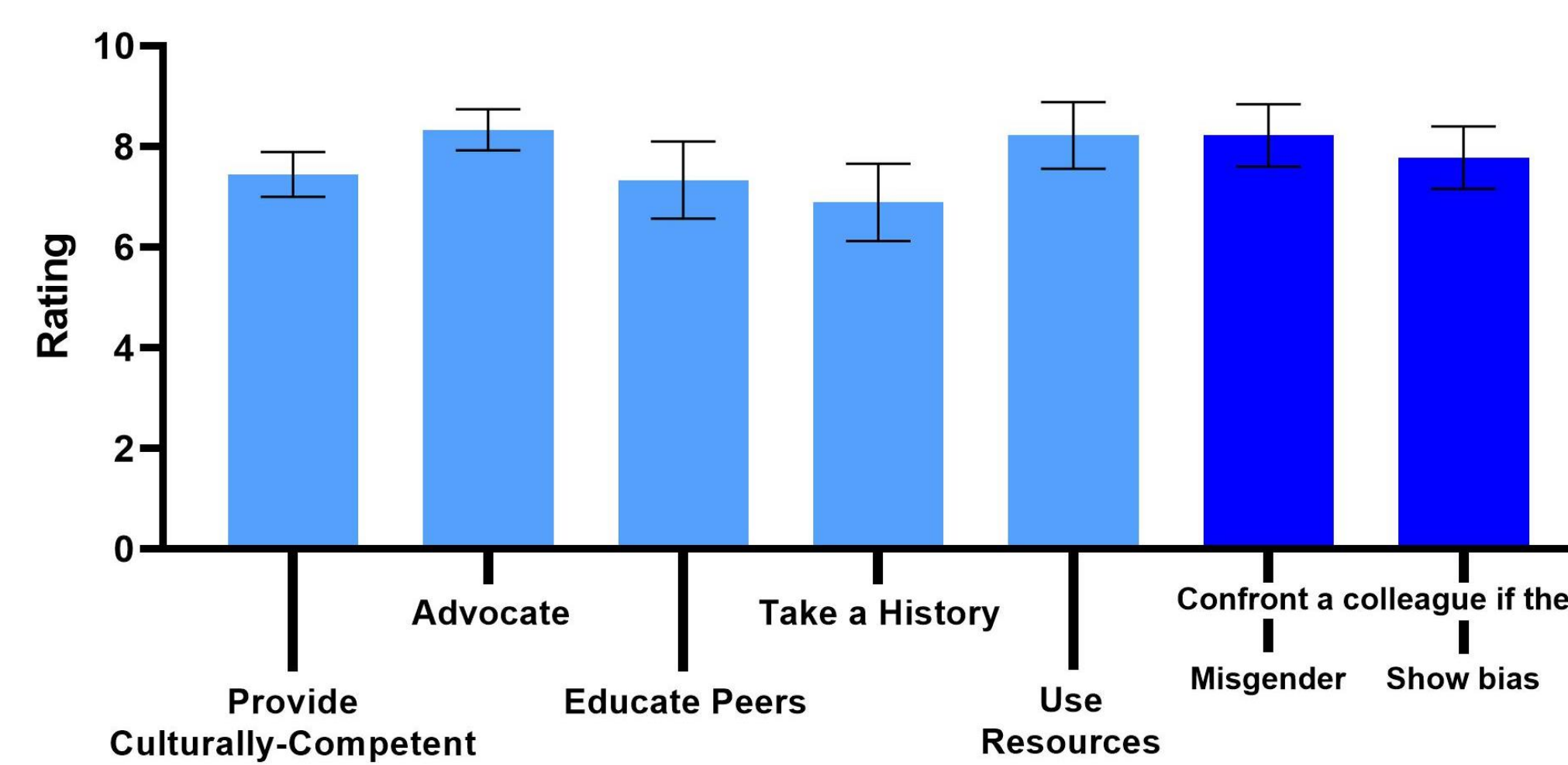
Research Methods

- Students were assessed via weekly reflective essays and were asked to anonymously complete a survey at the completion of the clerkship which obtained qualitative and quantitative data on their perceived confidence in their abilities and areas for improvement within the structure of the course
- Retrospective analysis of clerkship's ability to promote knowledge, awareness, and competency in caring for the TGN population was conducted via 1) a quantitative and qualitative feedback survey (table 1) to participatory students and 2) analysis of reflective essays submitted during clerkship.

Table 1. Survey Questionnaire	
How confident do you now feel in your ability to	
be a culturally-competent provider for trans and gender non-conforming patients?	
advocate for trans and gender non-conforming patients in the larger community?	
educate your peers and healthcare team members on trans and gender non-conforming health needs?	
take a complete history from a trans or gender non-conforming patient?	
refer patients to utilize the community resources introduced to you in this program?	
How comfortable would you now feel starting a conversation with a colleague if they	
misgendered a trans or gender non-conforming patient?	
demonstrated bias against a trans or gender non-conforming patient (i.e., they used outdated language that the trans community has rejected as harmful)?	
Reflecting on where you were in your education prior to the PCHC clerkship experience and upon completion of this program, rate your growth in the following area:	
personal identity formation	
professional identity formation	
interprofessional collaboration	
taking a history from a trans or gender non-conforming person	

Findings

- 5 of 9 students had prior experience hearing first-hand accounts of a TGN patient's experience in healthcare
- Students rated the impact of the experience as a 9.2/10 and the need for integration into formal curricula as a 9.4/10
- Students emphasized the value of a systemic approach to tackling health disparities, reflection on personal and professional identity, the responsibility of providers to offer robust care, and having a concrete understanding of SDOH



On the value of interprofessional teams: "It seems that, when done right, teams are completely synched in terms of mission and drive. Team members are but different limbs of the same body, working in a synchronized fashion to move closer to a shared goal."

On cultural humility and allyship: "Acknowledging that I still have learning to do is part of this humility, but I must be willing to engage in conversations in order to do this learning...Claiming to be an ally allows inaction, as one can say that they are an ally and stop at that sentiment...I have realized that my discomfort allows me to be a more active bystander. My discomfort arises from my knowledge that I still have more learning to do which allows me to prioritize and center the perspective of others and continue to challenge how I can be a better 'ally.'"

Discussion and Conclusions

Opportunities for Improvement

- Participants were a self-selected group of health care students with a prior interest advancing care for TGN populations
- 4 of 9 participants retrospectively led data collection and analysis
- Students were given free choice of reflection prompt
- Analysis of reflections were completed by different evaluators
- Overarching themes and subthemes were generated subjectively by evaluators
- There is lack of baseline confidence level data

Conclusions

- Students reported high levels of perceived ability to provide culturally competent care and advocate for TGN patient population.
- Students reported growth in all themes surveyed, with professional identity formation and history taking for TGN patient showing the most growth
- Students recommended integration of the clerkship into the formal medical and nursing school curriculum.

Next Steps/Future Directions

- Repeat program with larger cohort
- Addition to future programs, per student survey data:
 - Mental health care for TGN population
 - Guidance on how to have conversation with superior if they misgender a patient
- Advocate for the integration of TGN patient-centered content into formal medical and nursing school curricula



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References

1) James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). Executive Summary of the Report of the 2015 U.S. Transgender Survey. Washington, DC: National Center for Transgender Equality.