

LGBTQ+ Allies Training:

A Quantitative Analysis of Curriculum Effectiveness

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Background

- Many physicians and health professions students state a **lack of comfort** when providing quality care to LGBTQ+ populations¹
- One study of US & Canadian medical schools found that 33% of medical schools **failed to cover any LGBTQ+ content** during clinical years and 7% in preclinical years²
- Medical students with increased exposure to LGBTQ+ patients tend to hold more positive attitudes toward LGBTQ+ patients and demonstrate **increased awareness to their specific needs**³

Research Purpose & Questions

- Provide education to students and faculty about LGBTQ+ health and increase **comfort and confidence** in treating LGBTQ+ patients
- **Pre- and post-training survey** of health professions students
 - Demographic information including program, education, sex, gender identity, and sexual orientation
 - Questions assessed comfort and confidence with the following LGBTQ+ health topics:
 1. Differentiating terminology (Q1-2)
 2. LGBTQ+ history and symbolism (Q3)
 3. Discussing safe sexual practices (Q4-5)
 4. Taking a sexual history (Q6-7)
 5. Managing sexual health issues (Q8-9)
 6. Gauging importance of sexual health (Q10)
 7. Comfort treating transgender and non-binary patients (Q13)
 8. Extent of previous training (Q11-12, 14)

Training Design

- **2-hour training session** containing lecture material, case scenarios, and interactive discussion
- Covering the following topics:
 - LGBTQ+ history, policy, and current legislation
 - Difference between sex, gender, sexual orientation, and gender identity
 - Defining transgender, intersex, proper pronoun usage, gender dysphoria, and minority stress
 - How to conduct an inclusive **sexual history**
 - Understanding **stigma, healthcare disparities, and provider discrimination** faced by LGBTQ+ individuals

Research Methods

Measuring Device: Prior and subsequent to training, 325 health profession students and faculty completed a 14-question 5-level Likert survey, which was administered electronically.

Data Analysis: A paired two-sample t-test was run on each question pre- and post-training, using a p-value of 0.05 to determine significance. Additionally, a paired two-sample t-test was run on the cumulative average of pre- and post-training responses using a p-value of 0.0001.

Results

Pre- and Post-Training Survey Means by Question



- When comparing the mean response values, each individual question had a **statistically significant difference** in confidence/comfort following the training session.
- The results from the pre-training survey (M=3.29, SD=0.571) and post-training survey (M=4.18, SD=0.204) indicate that the training increased student and faculty perceived comfort and confidence in various LGBTQ+ health topics.
- With a p-value < 0.0001, we are 95% confident that the true value of the difference of the pre- and post-training response means lie between 0.667 to 1.11 points on the Likert scale.

Discussion & Conclusion

- Overall, after completion of LGBTQ+ health training, attendees reported **improved confidence** in their understanding of **LGBTQ+ health**
 - The results display significant increases in individual responses when comparing pre- and post-training
- This format of training is beneficial to individuals in **multiple aspects of healthcare**
 - Expanded to include students from schools of physical therapy, occupational therapy, and nursing in addition to staff and faculty
 - Previously only provided to first-year medical students

Next Steps

Recommended next steps:

- Expand awareness and encourage standardized training across healthcare education and practice
- Provide ongoing training opportunities for healthcare providers, including medical students, nurses, therapists, and other health professionals, to ensure necessary knowledge and skills to provide quality care to LGBTQ+ patients
- Conduct further research to assess the efficacy of LGBTQ+ health educational programs in improving patient outcomes, reducing health disparities, and advancing health equity
- Perform longitudinal studies to evaluate provider attitude and knowledge, along with patient satisfaction and healthcare utilization

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References

