

BACKGROUND

- Implicit bias towards LGBTQ+ patients can result in increased health disparities and negatively impact provider-patient interactions for this marginalized group¹.
- According to a 2015 national survey of medical students, only 31.1% answered yes when asked about the inclusion of sex and gender-based curriculum in their medical education².
- Undergraduate medical education continues to fall short of providing adequate training for students to acknowledge and address their implicit biases regarding patients and colleagues in the LGBTQ+ community.
- By providing a case-based workshop, students can gain experience addressing their implicit biases regarding LGBTQ+ patients thereby increasing cultural competency and inclusivity among future physicians.

OBJECTIVES

After the workshop, we expect learners to understand the effects of implicit bias within the LGBTQ+ community in the clinical training environment, the importance of addressing these biases at an early stage of training, how to apply the CHARGE2 framework, and how to analyze implicit biases within the LGBTQ+ community with particular attention to the role that implicit biases can play in power dynamics amongst the patient population, trainees, and providers.

CHARGE2 Framework

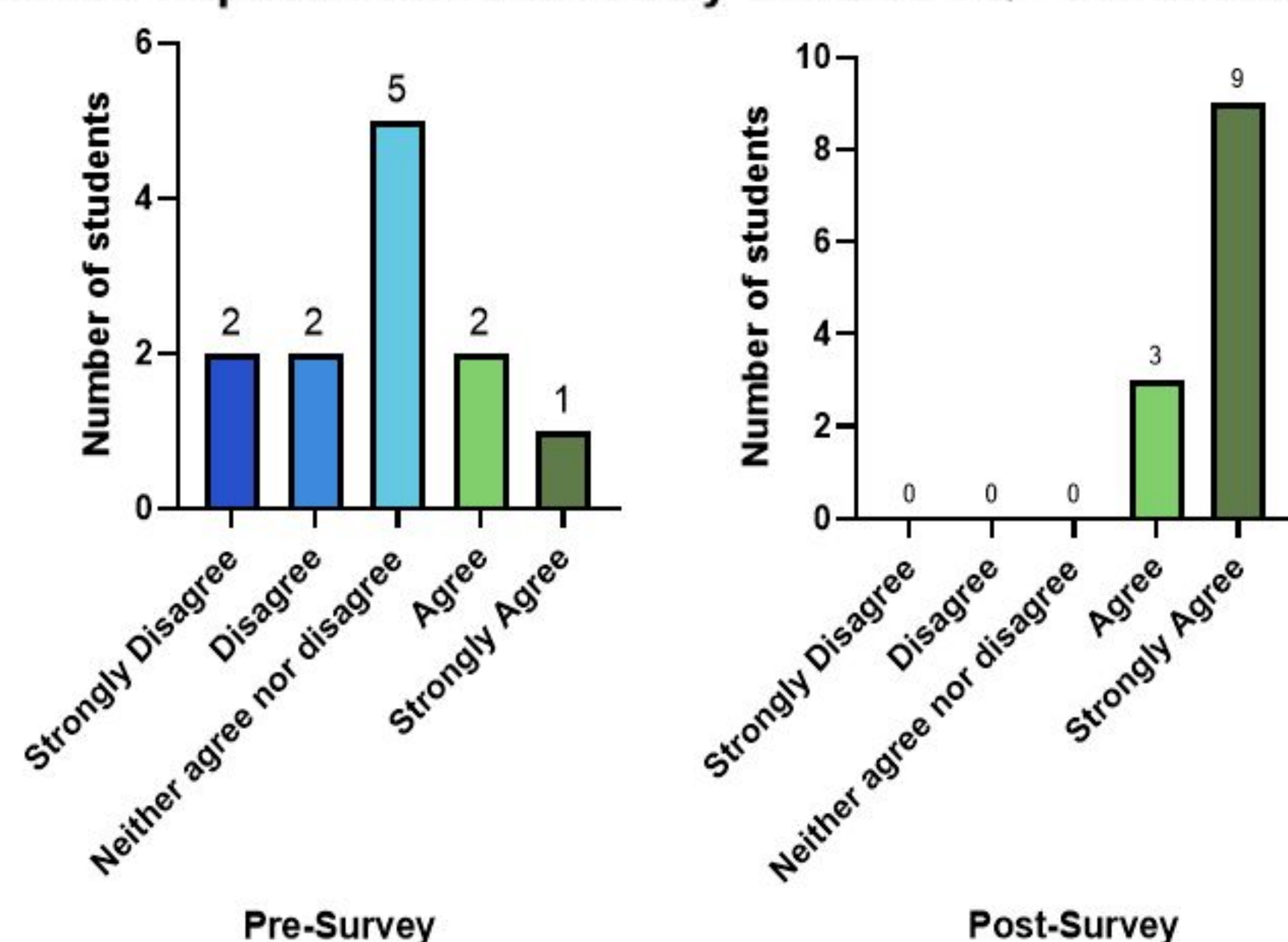
- C—Change your context: Is there another perspective that is possible?
- H—Be Honest: With yourself, acknowledge and be aware.
- A—Avoid blaming yourself: Know that you can do something about it.
- R—Realize when you need to slow down.
- G—Get to know people you perceive as different from you.
- E—Engage: Remember why you are doing this.
- E—Empower patients and peers.

MATERIALS AND METHODS

- 90-minute workshop to analyze the effects of implicit bias within the LGBTQ+ community run by two student facilitators.
- 20 minutes was devoted to a mini-lecture that introduced CHARGE2 framework and the rest of the time was used towards collaboratively working through case studies entailing how power dynamics can affect the LGBTQ+ community to elucidate implicit biases.
- Participants were encouraged to complete the post-survey at the end of the workshop. The New York Medical College IRB exempted this study.

RESULTS

I feel comfortable using the CHARGE2 framework to address implicit biases faced by the LGBTQ+ community



Practitioners should recognize the prevalence and impact of power dynamics in issues that affects the LGBTQ+ community and provide the sensitivity and use of inclusive language needed to their professionalism.

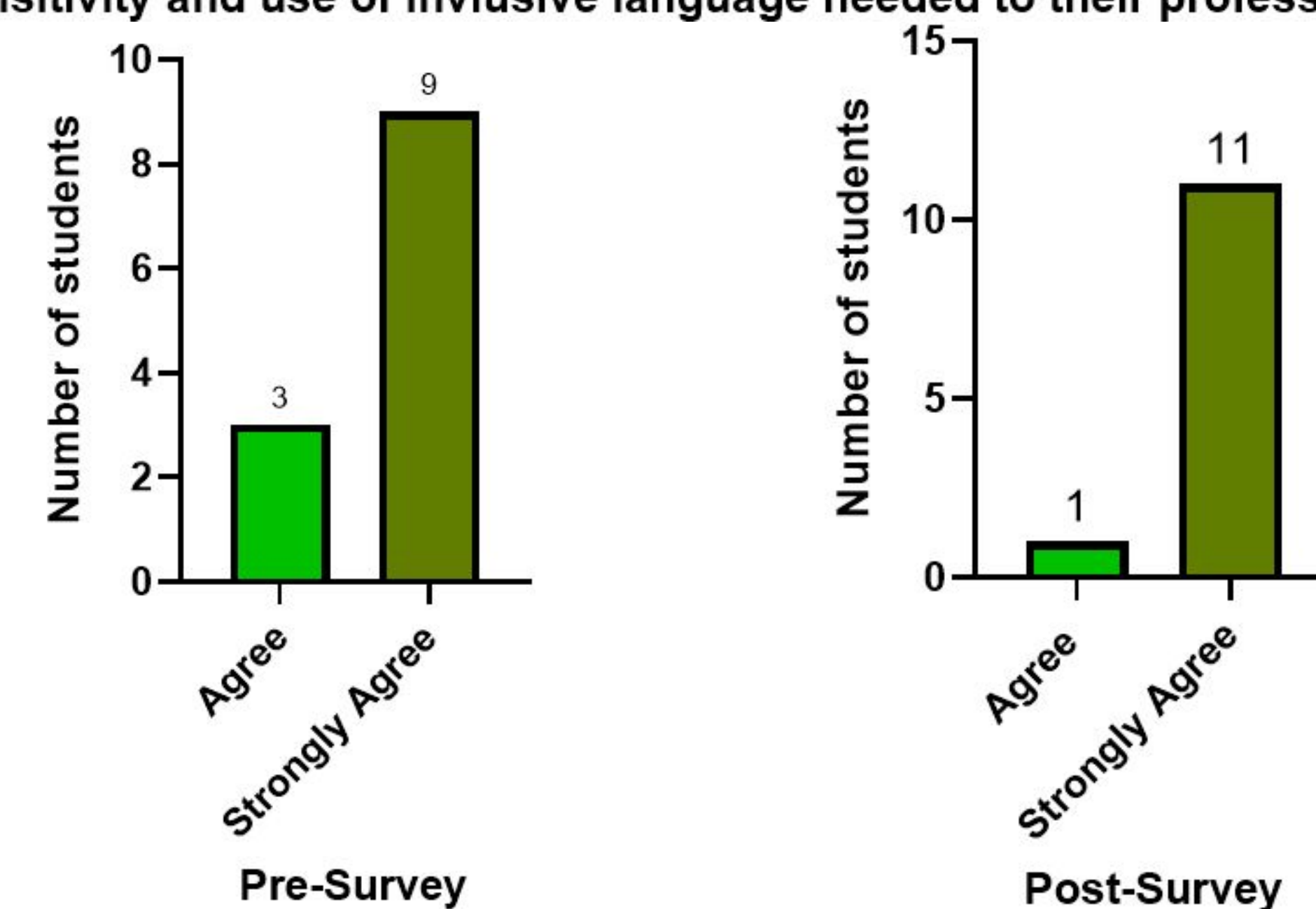


Figure 1: Participants' pre- (left) and post-right) survey responses to the statements reflected in the title.

Demographic Distribution of Workshop Participants

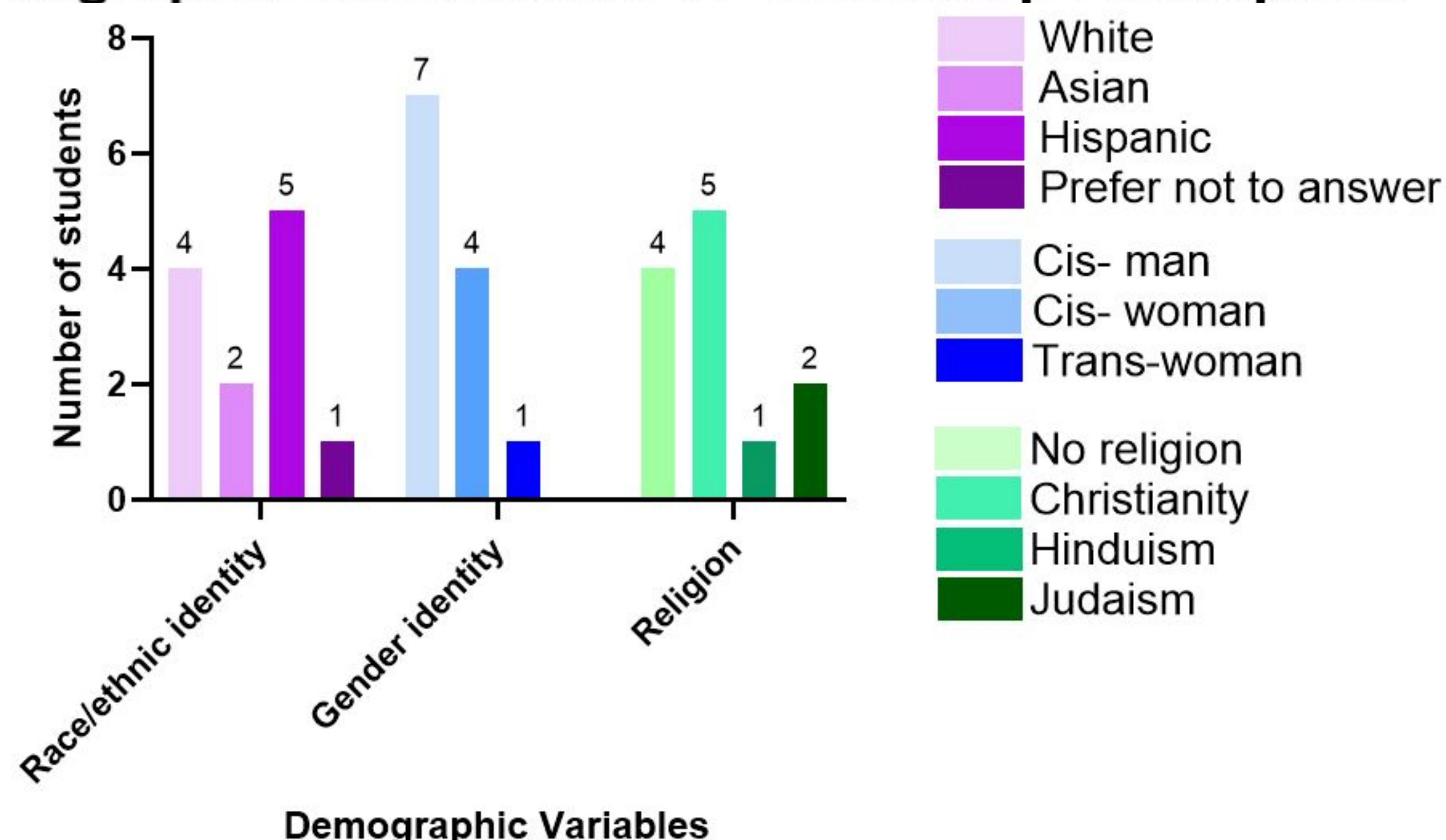


Figure 2: Demographic distribution of those that attended the workshop by racial/ethnic identity, gender identity, and religion.

CONCLUSIONS

- A total of 12 pre-clerkship New York Medical College students volunteered to participate in the 90-minute workshop.
- When participants responded to the statement “I feel comfortable using the CHARGE2 framework to address implicit biases faced by the LGBTQ+ community” in the pre-survey, 2 (16.7%) participants responded strongly disagree, 2 (16.7%) disagreed, 5 (41.7%) neither agree nor disagree, 2 (16.7%) agree, and 1 (8.3%) strongly agree. When posed the same question in the post survey, 3 participants (25%) agreed and 9 (75%) strongly agreed (Figure 1).
- Using the Wilcoxon Signed Ranks Test, the workshop had a statistically significant impact on participants’ perception of the statement “I feel comfortable using the CHARGE2 framework to address implicit biases faced by the LGBTQ+ community,” as more students agreed or strongly agreed with the statement after the workshop than before the workshop ($Z = -2.831, p < 0.005$).
- When asked if students have experienced or witnessed a microaggression in the LGBTQ+ community, students reflected that they have witnessed “trans colleagues be misgendered.”

FUTURE STEPS

One limitation is the scope of the workshop, as the lived experiences of members of the LGBTQ+ community are not homogenous and vary depending on their sexual or gender identity, their environment, and the level of support system available to them when sharing their experiences.³ Therefore, future workshops will explore implicit biases across multiple demographics to gain a better understanding of how intersectionality factors into participant experiences and survey results.

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