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Addressing Lapses in Medical Education in Relation to LGBTQIA+ Healthcare Disparities

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Addressing Lapses in Medical Education in Relation to LGBTQIA+ Healthcare Disparities

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Introduction

- A national survey showed 65% of LGBTQIA+ physicians reported hearing colleagues make discriminatory comments towards LGBTQIA+ patients, with 34% witnessing discriminatory care given to LGBTQIA+ patients.
- The Medical Journal “Family Medicine” published a study showing that the discomfort and bias medical professionals have with LGBTQIA+ patients was combated with increased clinical exposure and awareness.
- In 2011, over one-third of current US medical schools reported no integration of LGBTQIA+ healthcare in their medical curriculum. Schools that did claim competence reported under 5 hours of education devoted to LGBTQIA+ healthcare over a 4 year curriculum.
- Currently there is no standard healthcare training regarding the needs of LGBTQIA+ patients across medical school curricula.

Methods

- An anonymous 24-item survey was utilized to assess perceptions of knowledge and attitudes of medical students toward LGBTQIA+ patients and their healthcare needs based on their years of medical training.
- In addition to assessing comfort level in providing for LGBTQIA+ patients in a clinical setting, questions also ranged from familiarity with LGBTQIA+ terminology to awareness of current LGBTQIA+ healthcare needs.
- The survey, utilizing Qualtrics, was distributed to medical students at both Rowan University School of Osteopathic Medicine and Cooper Medical School of Rowan University.
- Participation in the survey was voluntary and anonymous with no identifying information collected.

Results

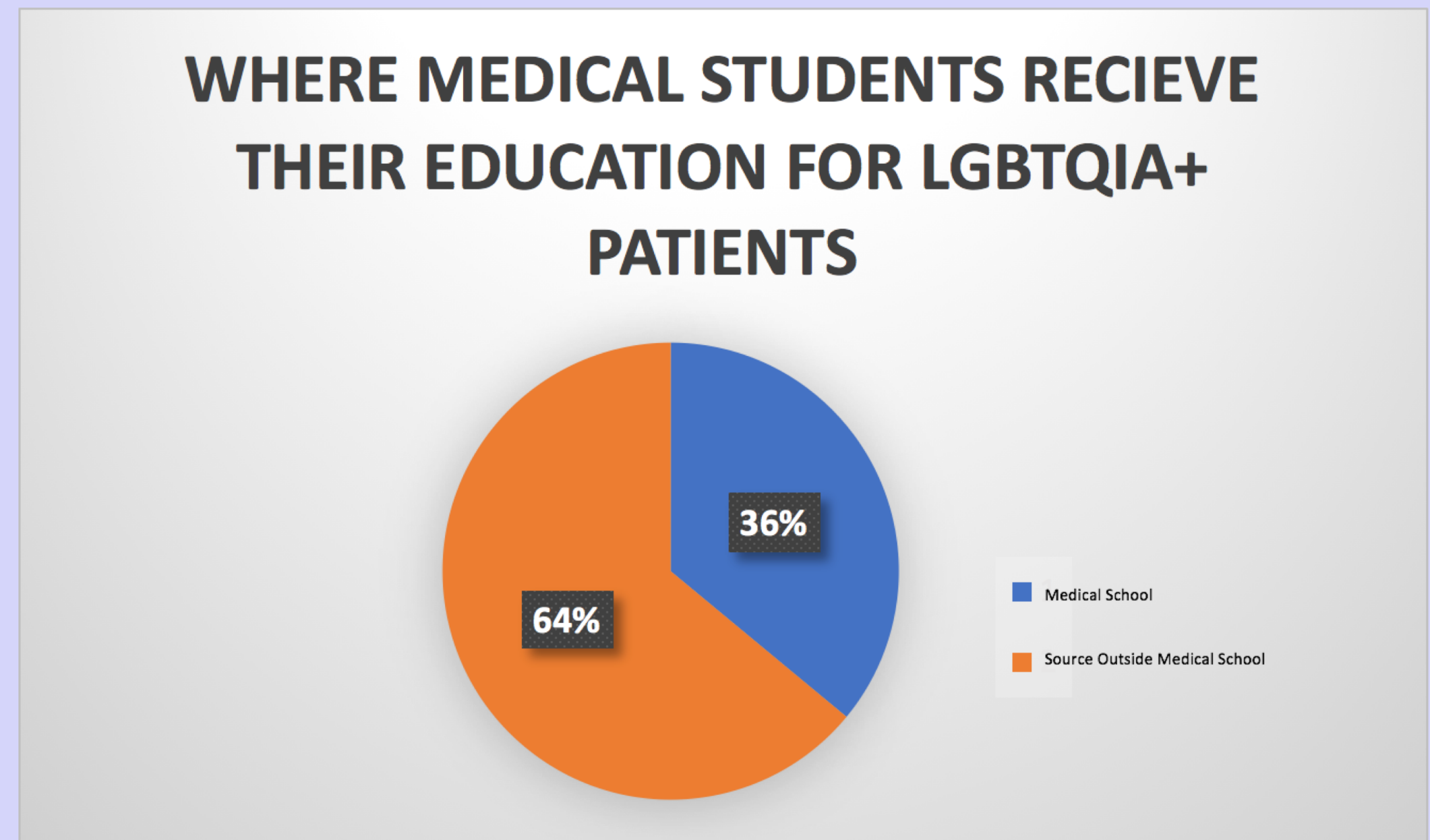


Figure 1: When asked, 64% of Medical Students reported receiving their understanding of LGBTQIA+ healthcare topics from resources outside of Medical School.

- 102 medical students responded to this survey. 59 identified as females, 34 identified as males, and 1 identified as agender. 81% identified as heterosexual.
- 10.7% of survey respondents admitted they were uncomfortable around LGBTQIA patients as a whole.
- 39% did not know about Pre-exposure Prophylaxis “PrEP” and its use in medicine.
- 49.5% did not know about Post Exposure Prophylaxis “PEP” and its use in medicine.
- 14% would not feel comfortable prescribing PrEP/PEP for their patients.
- 27.4% were uncomfortable providing or referring transgender patients for hormone replacement therapy
- 18% felt uncomfortable using patient’s pronouns over birth sex pronouns

Figure 2: What Studies Would You Order for a Transwoman (MTF)?

Screening	Percent Correct
Colonoscopy	66.7%
Prostate Exam	61.3%
Check Hormone Levels	63.4%
Mammogram	26.9%

Figure 3: What Studies Would You Order for a Transman (FTM)?

Screening	Percent Correct
Colonoscopy	45.2%
Pap Smear	49.5%
Check Hormone Levels	51.6%
Mammogram	54.8%

Figures 2 and 3: When given clinical vignettes concerning trans patients at least one-third of respondents did not know the appropriate tests to order for MTF and FTM patients.

What Does This Mean?

- While most respondents were comfortable having LGBTQIA+ patients, the survey showed most were ill-prepared to address the needs of the LGBTQIA+ Community.
- More than half of survey respondents received their education for treating LGBTQIA+ patients from sources outside of medical school curricula.
- Medical education is lacking with regard to teaching students the appropriate screening tests required for transgender patients.
- A fair amount of medical students did not know the uses of HIV preventative medication such as PrEP and PEP.

Where Do We Go From Here?

- The results of this survey will be used as an assessment for lapses in LGBTQIA+ healthcare in current Medical Education curriculums.
- In the future we plan to survey additional medical students and healthcare practitioners at all levels of practice and education across the country.
- Our goal is to gain further understanding of the gaps in knowledge of LGBTQIA+ healthcare and develop an educational plan to address these deficiencies in the medical school curriculum.

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