

ACADEMIC POSTERS

Transgender and Gender Diverse Patients: A Pilot Program to Address Knowledge Gaps in Healthcare

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INTRODUCTION

The purpose of this project is to advance the structural competency of Nuvance Health in the care of transgender and gender diverse (TGGD) patients. TGGD patients face marginalization, discrimination, violence, and minority stress in day-to-day life.^{1,2,3,4} This population faces unique challenges with accessing high-quality, culturally competent, and personalized healthcare.^{3,3} In the medical setting, they report having to teach their providers, being refused care, facing harassment, and even being physically assaulted.^{3,5} The majority of medical training programs do not include formal education about caring for this patient population and if they do it is fairly limited.^{6,7,8} Health disparities stemming from these inequities can start to be addressed by educating staff taking care of TGGD patients in the Nuvance Health system.

Figure 3. Health and health care access among nonbinary LGBTQ adults.



Image Source: The Williams Institute, 2021.⁹

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Stress & Discrimination in Adulthood

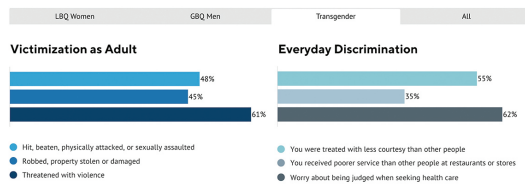


Image Source: The Williams Institute, 2021.¹⁰

OBJECTIVES

- Recognize general themes within TGGD patient care that can lead to poor experiences and further health inequities
- Examine identified gaps in healthcare providers' knowledge about serving this community
- Identify and appraise existing resources available to clinicians and staff within Nuvance Health
- Collect and analyze published resources available for student and employee training nationwide regarding TGGD healthcare
- Design educational materials to address educational gaps previously identified including confidently interacting with TGGD patients, asking pronouns and preferred name, and understanding the impact of structural determinants of health

METHODS

- An informal search of the Nuvance Health intranet (the HUB) and electronic education documentation system (eeds) using the keywords *transgender*, *gender diverse*, or *gender non-conforming* was conducted.
- A review of published resources on curricula available for continuing medical education, staff training, and medical school lectures for TGGD populations was conducted. The content published from large healthcare organizations nationwide was evaluated for applicability to this project.
- Educational lectures about key concepts for TGGD patients are being designed with the plan to provide tailored lectures to all staff members.
- A survey using Likert scale measurements will be administered before and after the lecture. These surveys will compare pre- and post-lecture knowledge and confidence regarding TGGD healthcare topics.
- Focus groups will be conducted to gather more qualitative data to identify emerging themes.
- A staff survey will be used to collect additional information regarding core knowledge regarding the TGGD community and identify additional education needs. Thematic analysis will be used to continue the process of lecture and educational content development.

RESULTS

There are no available education resources on the HUB on the topic of transgender and gender diverse healthcare. There are no enduring educational materials or scheduled lectures on the eeds.

The National LGBT Health Education Center, UCSF Transgender Center, Mayo Clinic School of Medicine, the World Professional Association for Transgender Health, and the University of Michigan have curricula available for staff and clinician trainings that can inform development of a training program within this institution. The Association of Medical Colleges has provided an extensive guide for curriculum development and changing institutional climate.

This project is the preliminary stage of longitudinal project designed to evaluate and address inequities leading to health disparities for TGGD patients. During this phase, the goal is to have the majority of those surveyed post-lecture to indicate on a Likert scale that they feel more confident or significantly more confident interacting with TGGD patients, asking pronouns, and using a patient's preferred name.

CONCLUSIONS

Nuvance Health does not currently offer any training or resources about caring for this vulnerable and marginalized population. Many employees have not undergone formalized training in their education programs either. This leaves a massive knowledge gap for many clinicians and staff responsible for the care of TGGD patients. A pilot program of educational lectures and employee engagement could bring staff to a common starting ground regarding TGGD-inclusive care. There are multiple models available to provide a framework for this curriculum.

The overarching objective is to reduce and remove barriers to care in an effort to improve health outcomes. Delivery of this education is anticipated to allow for integration of TGGD-respectful practices into daily workflow. It is expected that these trainings will foster a more welcoming and inclusive environment. This will improve interactions and genuine connections with patients in the TGGD community.

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