



Utilizing Interdisciplinary Partnerships to Address Curriculum Gaps in Lesbian, Gay, Bisexual, and Transgender-related Content: The University of Louisville LGBT Health and Wellness Competency Certificate Program

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PROBLEM

- ❖ LGBT individuals have specific health care needs and face significant health disparities including discrimination and bias.¹
- ❖ The Institute of Medicine, The Joint Commission, and the U.S. Department of Health and Human Services all have recently highlighted the need for provider education on LGBT health.
- ❖ The median reported time dedicated to LGBT-related topics is relatively small across US and Canadian medical schools. Median reported time dedicated to teaching LGBT-related content in the entire curriculum was 5 hours.¹
- ❖ LGBT patients cite lack of provider education as a barrier to care.²
- ❖ The AAMC LGBT & DSD-Affected Patient Care Advisory Committee will present revised competencies in November 2014 that call schools to address existing gaps; however, addressing gaps in an already crowded curriculum and among faculty who may lack expertise can prove challenging.

INNOVATIVE APPROACH

U of L's LGBT Center and School of Medicine partnered to develop the *LGBT Health and Wellness Competency Certificate* consisting of six interprofessional sessions of Medical, Dental, Nursing, and Public Health students. Sessions included LGBT health topics modeled after the Fenway Institute's National LGBT Health Education Center:

- 1) Culturally Competent Care for LGBT Patients;
- 2) Health Promotion and Disease Prevention;
- 3) Taking an Inclusive History and Risk Reduction Counseling;
- 4) Understanding the T in LGBT;
- 5) LGBT Patient Mental Health; and
- 6) HIV Epidemiology.

Leveraging the positive community relationships of the LGBT Center, local health providers with LGBT health expertise were willing to donate time to teach the sessions rather than receive monetary payment; thus, content was taught to students in four health professional schools without adding further responsibilities to existing faculty. Students were required to attend four lunch time sessions to be eligible for the certificate or complete Fenway online modules. An average of seventy students voluntarily took time to attend each session.

LESSONS LEARNED

- ❖ A certificate series, in our experience, constitutes a positive and realistic first step in integrating LGBT content into medical school curriculum.
- ❖ While voluntary in its first year, the program built momentum for future collaborations between the Center and UME Office for significant curriculum integration of LGBT topics.
- ❖ All students need access to this content, a point driven home by students in their program evaluations indicating that 90% of students either "strongly agreed" or "agreed" that sessions should be required.
- ❖ The pilot year confirmed strong medical school student interest with an average of 65 attending each session with over 200 attending at least 3 sessions, and that students are learning much of this information for the first time.

SIGNIFICANCE

Medical educators can no longer sideline LGBT health issues.

Our voluntary Certificate Program set the stage for the LGBT Center and Undergraduate Medical Education Office to develop a strong partnership resulting in a master curriculum plan to map AAMC competencies across the undergraduate curriculum in collaboration with a national partnership with expertise in the 2014 competencies from the AAMC LGBT & DSD-Affected Patient Care Advisory Committee.

REFERENCES

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2. Moll J, Krieger P, Moreno-Walton L, Lee B, Slaven E et al. The prevalence of lesbian, gay, bisexual, and transgender health education and training in emergency medicine residency programs: what do we know? *Acad Emerg Med*. 2014 May;21(5):608-11.