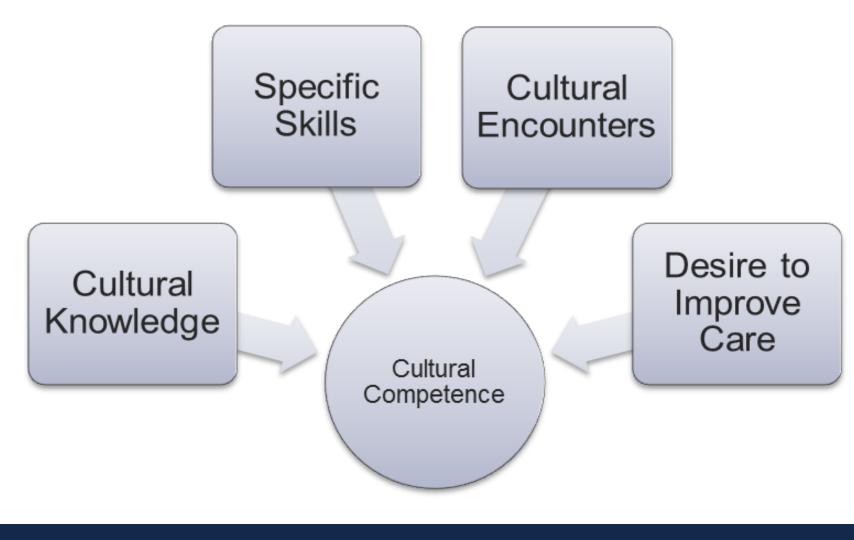
UC San Diego SCHOOL OF MEDICINE

Background



There is tremendous inadequacy in addressing LGBT health care in US medical education. In response, the UCSD School of Medicine created and institutionalized longitudinal LGBT health care curriculum. The LGBT Health

Immersion Day, the introduction to the curriculum, evolved from a LGBT didactic lecture to a full day multi-pronged educational intervention aimed at introducing LGBT health and disparities. Design of the LGBT Health Immersion Day curriculum was situated within a cultural competency lens, focusing on transitioning perceptions of LGBT health and health care issues into understanding of the diversity of LGBT health care needs, in an effort to deliver culturally responsive care.



Please indicate your level of knowledge of health risks that are faced by LGBT patients.

A paired samples t-test was conducted to compare second year medical students' mean knowledge levels of LGBT health risks prior to (Pre) and after (Post) the LGBT POM session. There was a statistically significant increase in the pre knowledge level (M=2.89, SD=.864) and post knowledge level (M=3.95 SD=.767); (t=13.675, p<.000).

Knowledge Level				
n=133	Pre (Percent)	Post (Percent)		
No Knowledge	3.0	0		
Little Knowledge	31.6	3.8		
Some Knowledge	40.6	20.3		
Knowledgeable	22.6	52.6		
Very Knowledgeable	2.3	23.3		
Total	100.0	100.0		

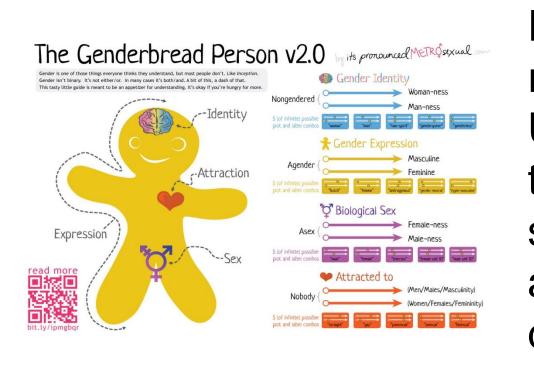
LGBT Health Immersion Day: Measuring the Impact of an LGBT Health **Education Intervention**

Ramon Hernandez, M.P.H.¹, Brian Nuyen, B.S., MS4¹, Robert Scholz, M.D.², Amanpreet Sandhu, M.S.¹, Frank Silva, M.P.H.¹, Nancy Graff, M.D.¹

1. Division of Academic General Pediatrics, Center for Community Health, UCSD School of Medicine, La Jolla, CA. 2. University of Chicago Medical Center, Department of Obstetrics and Gynecology, Chicago, IL. 3

Curriculum

The curriculum design team utilized a process oriented approach that incorporated feedback from community partners, faculty and students. Program content was assessed and modified through a series of workshops and focus groups. The goal of the LGBT Health Immersion Day is to develop a LGBT health care knowledge base through impact readings, concrete experience, simulation and reflection. The learning outcomes are: •Increase awareness of LGBT health and the health disparities that affect the LGBT community. Increase perceived level of comfort in engaging LGBT patients. •Increase awareness of LGBT health care providers and services.



Prior to the event, medical students are given selected readings related to LGBT health. The day begins with a lecture from the UCSD LGBT Resource Center director that introduces LGBT terminology featuring "The Genderbread Person" concept, which schematizes the separation of expression, attraction, identity, and sex. It is then followed by a moderated Q&A panel of six diverse LGBT community members.



The innovative aspect of the day is the small group problem based learning session based on actual medical cases. Students are engaged in scenarios that consist of high quality video vignettes, specifically designed for this generation of learners. The vignettes were created, evaluated and filmed with a group of community members from the San Diego LGBT and theatre communities. Three original videos were created on lesbian Latina health, transgender adolescent health, and older gay health. After watching the vignettes trained faculty lead small group discussions. The content of the afternoon programming provides the foundational knowledge and skills student need to complete second year LGBT Objective Structured Clinical Exams (OSCEs).

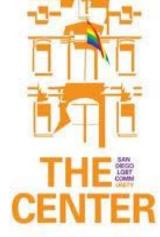
Results

Please indicate your level of comfort in engaging (e.g. establishing rapport with, interviewing) LGBT patients.

A paired samples t-test was conducted to compare the second year medical students' mean level of comfort in engaging LGBT patients prior to (Pre) and after (Post) the LGBT POM session. There was a statistically significant increase in the pre-confidence level (M=3.88, SD=.977) and post-confidence level (M=4.12, SD=.718) (t=3.283, p=.001).

Comfort Level			
n=133	Pre (Percent)	Post (Percent)	
Very Comfortable	3.0	0	
Uncomfortable	6.8	2.3	
Neutral	15.8	13.5	
Comfortable	48.1	54.1	
Very Comfortable	26.3	30.1	
Total	100.0	100.0	







Please indicate your level of confidence in connecting LGBT patients to LGBT friendly health care providers and services.

A paired samples t-test was conducted to compare the second year medical students' mean confidence level in connecting LGBT patients to LGBT friendly health-care providers and services prior to (Pre) and after (Post) the LGBT POM session. There was a statistically significant increase in the pre confidence level (M=2.80 SD=1.078) and post confidence level (M=3.84, SD=.074) (t=11.097, p<.000).

Confidence Level				
n=133	Pre (Percent)	Post (Percent)		
Very Unconfident	7.5	0.7		
Unconfident	40.6	6.0		
Neutral	23.3	22.6		
Confident	21.8	49.6		
Very Confident	6.8	21.1		
Total	100.0	100.0		

LGBT Health Immersion Day proved to improve students' self-reported knowledge level of LGBT health risks, level of comfort in engaging LGBT patients, and level of confidence in connecting LGBT patients to LGBT health care resources.

"Such an amazing session. This was definitely one of the most informative, interesting, and rewarding POM sessions yet."

This suggests that including more and higherquality hours of LGBT health instruction may be a solution to this education deficit; it appears to be a high-yield and successful endeavor. We feel that providing students with the opportunity to interact with and learn from LGBT-identified individuals directly is superior to a lecture-only curriculum at conveying the relevance of the topic, challenging false beliefs, and promoting dialogue.

The recent AAMC publication on LGBT medical school education spoke to the required direct curricular and institutional climate changes needed to address the needs of LGBT populations.¹ From the activities that we were engaged with in the implementation of the LGBT Health Immersion Day we drew the following implications for policy that support the findings of this report:

•Create innovative curricular programs utilizing student, faculty and community partners' input and experiences to address LGBT health challenges.

•Provide training opportunities to develop faculty competencies to implement effective teaching of students and quality care of LGBT patients.

 Integrate competencies (e.g. OSCEs) into medical school curricula to improve LGBT health care, knowledge and understanding.

•Expand campus efforts to connect with community organizations to provide experiential learning and training opportunities for students.

1. Association of American Medical Colleges. (2014). Implementing Curricular and Institutional Climate Changes to Improve Health Care for Individuals Who Are LGBT, Gender Nonconforming, or Born with DSD. Washington, DC: Andrew Hollenbach, Ph.D., Kristen Eckstrand, Ph.D., Alice Dreger, Ph.D.



Conclusions

Policy Implications

