

FOR LGBTQ+ PATIENTS IN DFW, DOES HAVING ACCESS TO AN LGBTQ+ HEALTH CENTER AND HEALTHCARE PROVIDERS TRAINED IN LGBTQ+ HEALTH LEAD TO STRONGER PATIENT SATISFACTION, EDUCATION, AND HEALTH OUTCOME IN COMPARISON TO VISITING GENERAL PRIMARY CARE PHYSICIANS?

Vandana Garg, B.S., M.S, Burnett School of Medicine at TCU; Dr. Lisa McBride, PhD, Geisel School of Medicine at Dartmouth University

Research Question

- This research question (title) has two specific aims:
 - To view patients' perception of the impact of an LGBTQ+ clinic and focused healthcare.
 - To assess medical/healthcare students' perceptions of LGBTQ+ education at their institution.

Background

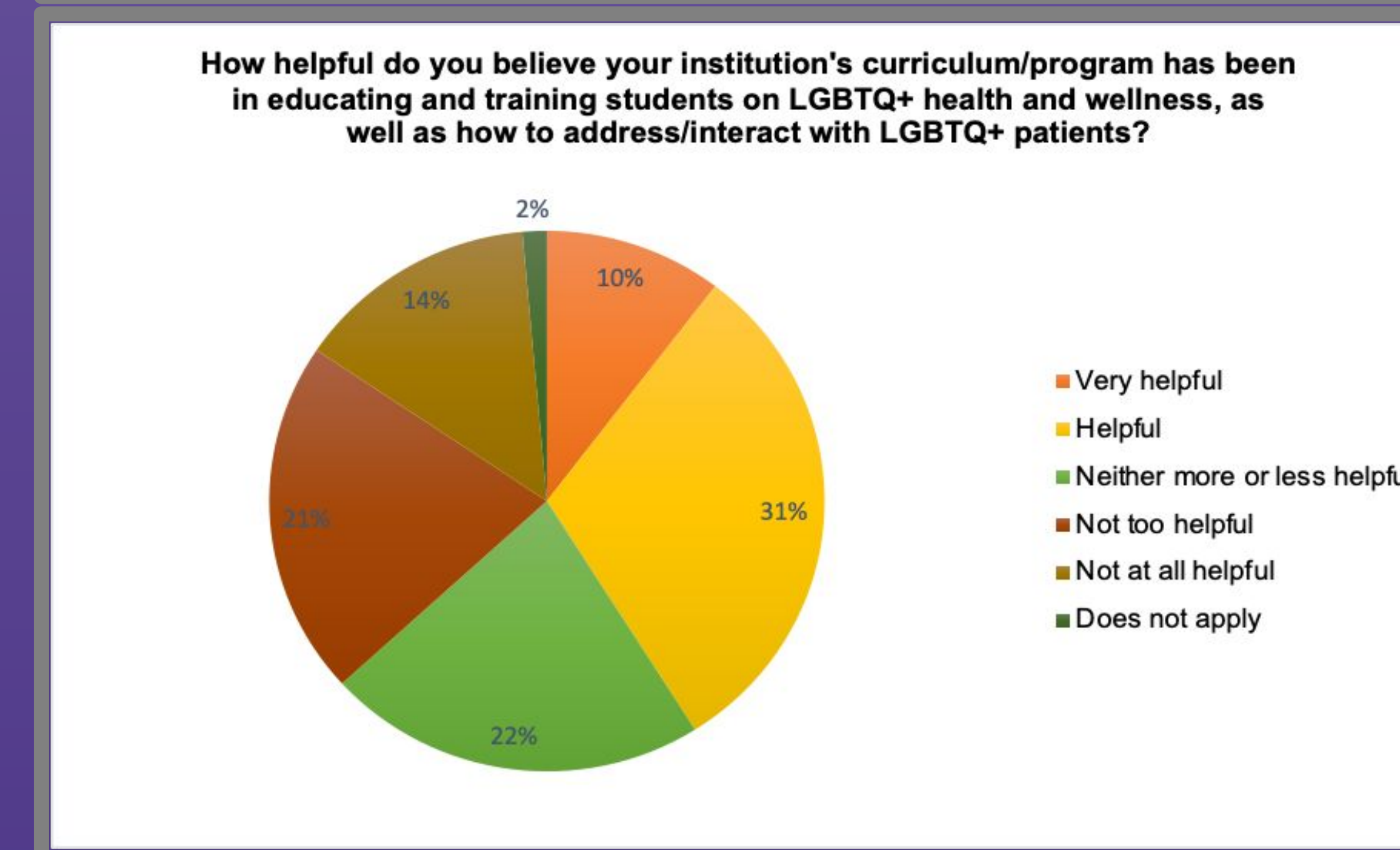
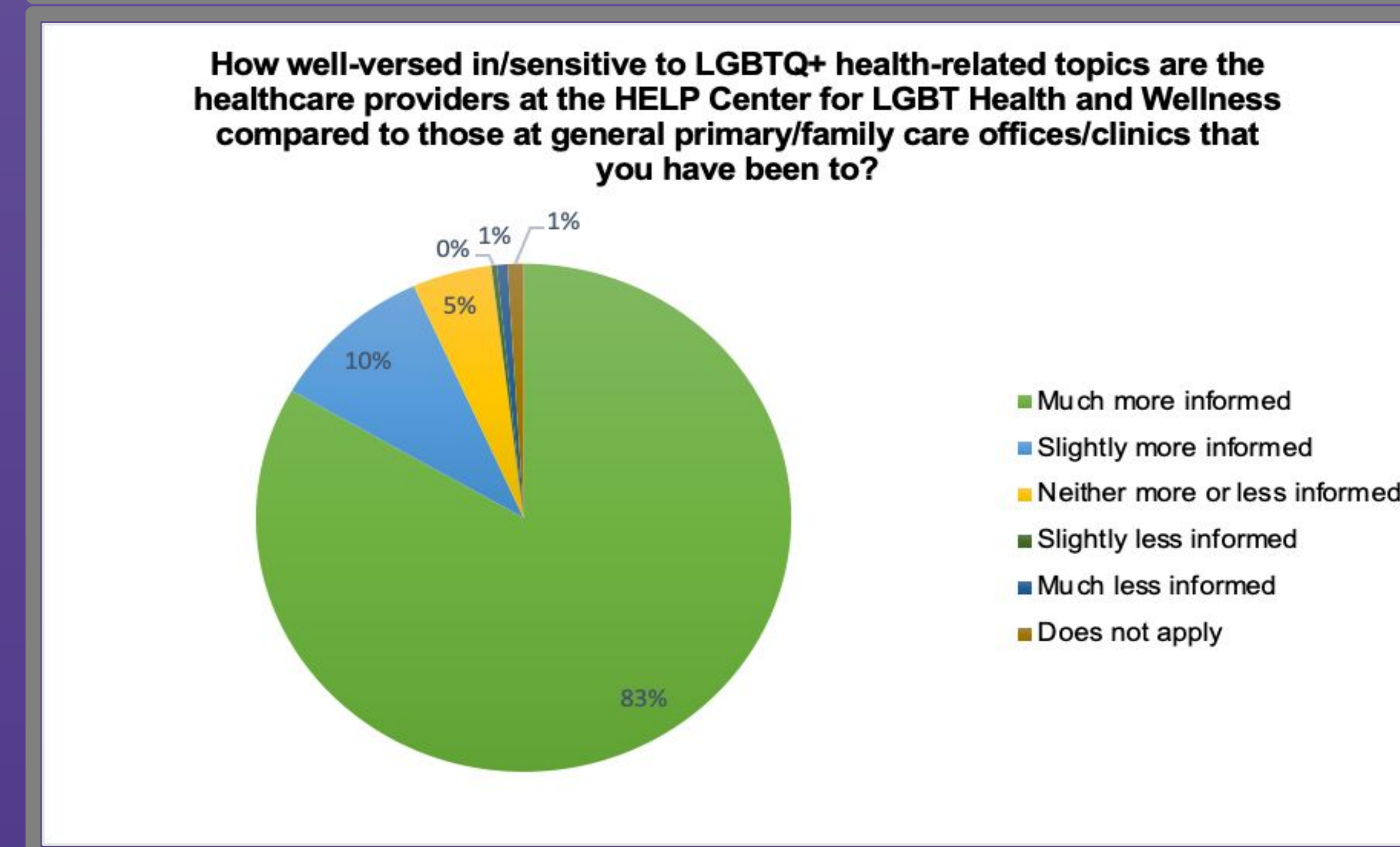
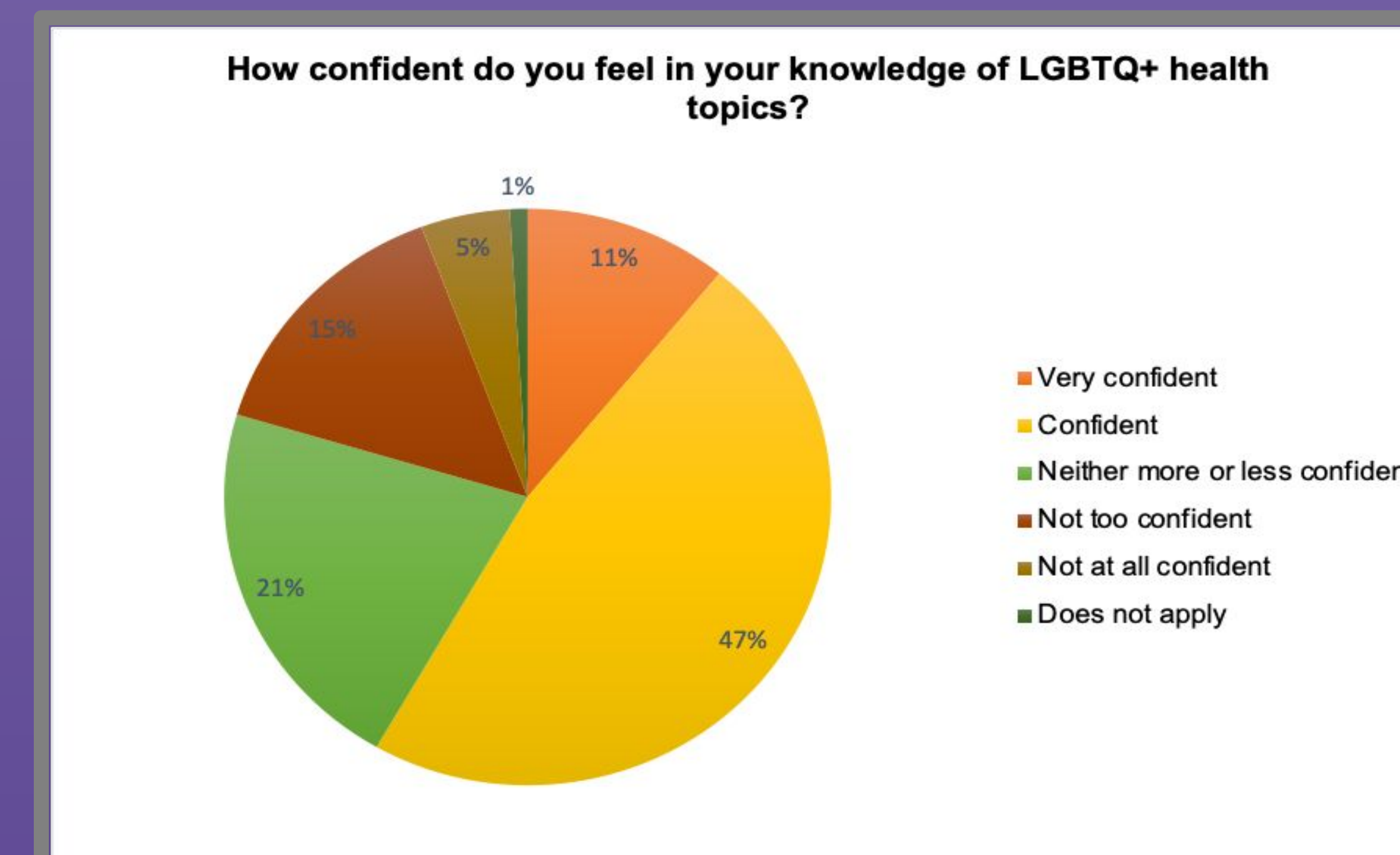
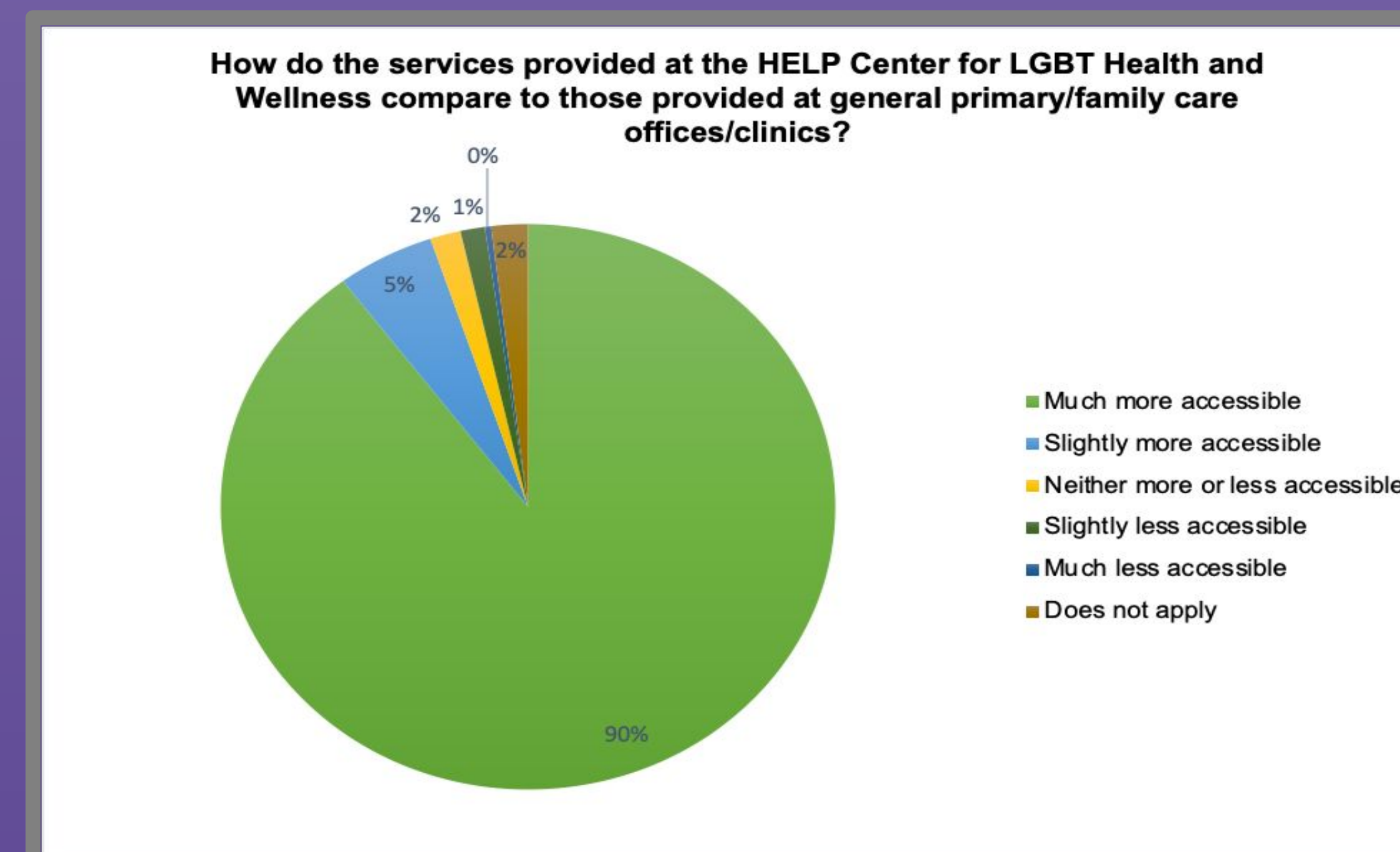
- Healthcare for LGBTQ+ individuals has vastly improved over the years. However, a patient may still feel their concerns unaddressed if the provider is untrained in LGBTQ+ health.
- Since Tarrant County is one of 57 HIV priority jurisdictions in the U.S., this study chose to focus on patients of the HELP Center for LGBT Health.
 - The center provides PrEP and HIV/STD testing free of charge to the North Texas LGBTQ+ community regardless of insurance status.
 - By surveying patients, our goal was to compare patient experiences and analyze the impact that an LGBTQ+ health center can have on an LGBTQ+ patient's overall healthcare.
- Additionally, previous studies have revealed that the amount of time spent on LGBT medical topics is less than 10 hours over 4 years of medical education.
 - Therefore health professions students in the DFW area were also surveyed of their perceived quality of LGBTQ+ education at their institution.
 - This was done to address any implicit biases future healthcare providers have that may serve as a barrier to care when treating patients.

Materials and Methods

- Patients of the HELP Center for LGBT Health and Wellness were surveyed of the care they received.
 - Patients were asked specifically about ease of access, providers' level of knowledge, and sense of security in comparison to previous general providers.
- Health professions students in the DFW area were also surveyed.
 - Students were asked about confidence and investment in LGBTQ+ health knowledge, as well as how helpful their institution's education was in LGBTQ+ topics.
- Via electronic Qualtrics surveys, questions measured responses via numerical scale (i.e. scale of 1-10) or by statements on a Likert scale.
- After 1 year of data collection, data was analyzed via SPSS Statistics software. All outcomes were descriptive analysis and statistics.

Conclusions

- Having access to healthcare that is specifically framed for LGBTQ+ identities may allow for more safe and productive healthcare visits for LGBTQ+ patients.
- Though LGBTQ+ health education in medical curricula has improved over the years, there's still work to be done regarding student confidence in treating this patient population.



Results -- HELP Center Patients

- 89.7% of responses said that HELP Center services were "much more accessible" than those provided at primary care clinics.
- 83.0% reported that the healthcare providers at the Center were "much more informed" than those of primary care offices.
- 73% perceived their safety/confidentiality as "much safer" in comparison to their experiences at primary care offices.
- 94.7% of the subjective commentary provided by patients described their experience at the center as a positive one.
 - Frequently-mentioned comments included receiving optimal care, patient appreciation for the care they received, and preferring more locations across the region.

Results -- Health Professions Students

- 47.0% reported feeling "confident" in knowledge of LGBTQ+ health.
- 31% believed their education was "helpful" in treating the LGBTQ+ community.
 - 10% reported "very helpful".
- 50.7% responded "Yes" when asked if curricula changes should be made to train students on LGBTQ+ health.
- When asked about potential changes that could be made in institutional curricula regarding LGBTQ+ health, subjective commentary varied, with some responses asking for more information during training, some saying there was more than enough training, and some potentially unsure responses about whether there was enough training.

Discussion

- Patient data may be impacted by the fact that the HELP center's services are provided free of charge.
 - However, the consistently positive feedback provided by patients suggest an acceptable level of quality of the services provided by the center.
- Although student survey findings were roughly equally split in qualitative sections, the most common qualitative responses and suggestive commentary suggest that though there have been improvements in LGBTQ+ health education in comparison to previous studies, there's still work to be done regarding student confidence in treating this patient population.
 - There are also improvements to be made in expanding and reviewing medical curricula nationally, as every institution is different in their training efforts, and environmental impact may influence trainee education.

Future Directions

- It may be more helpful to have LGBTQ+ centers in other HIV priority jurisdiction counties (as deemed by the CDC).
 - Having more LGBTQ+ centers available may help improve the quality of responses received from patients, with a wider variety of sexual/gender identities.
 - We also look forward to seeing how future studies with centers with varying degrees of service and expense accessibility may impact patient responses.
- Student evaluation results can form the basis to explore knowledge of students being trained in different aspects of healthcare (e.g., pharmacy, nursing).
 - Additionally, this provides future studies the ability to see if location and geographical politics can play a role in medical education.



Scan the QR code to see both surveys' full data and subjective commentary provided by respondents.
Or visit tinyurl.com/sptlgbtgarg

Key Literature Cited and Acknowledgements

"Ending the HIV Epidemic." Centers for Disease Control and Prevention, Centers for Disease Control and Prevention, 2020

Obedien-Maliver J et al. Lesbian, Gay, Bisexual, and Transgender-Related Content in Undergraduate Medical Education. *JAMA*. 2011

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