A Place for All: Educating Future LGBTQ Healthcare Providers to Enhance Health Related Outcomes - How One Academic Medical Center is Leading the Way

In the United States and Canada, medical and nursing students average only 5 hours of LGBTQ content in school. Gaps in LGBTQ related content create barriers, inhibiting a beneficial patient-provider relationship.

It is imperative to educate health professions students in specific healthcare issues to properly care for the LGBTQ population.

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**Background:**

Rush University Medical Center (RUMC) has continuously led the way in lesbian, gay, bisexual, transgender, and/or queer/questioning (LGBTQ) efforts, receiving the “Leader in LGBT Healthcare Equality” designation from the Human Rights Campaign’s Healthcare Equality Index annually since 2009. Despite this, it recently recognized that more could be done and has been actively working to bring about positive change for its internal and external LGBTQ communities. In 2014 Rush’s Diversity Leadership Council officially adopted the LGBTQ Health Committee and Advisory Panel, an interprofessional committee and steering group made up of individuals from all areas of the institution, including faculty, students, and staff, to bring the best LGBTQ practices to Rush. The initial objectives of the LGBTQ Health Committee and Advisory Panel center around five key areas – access, resources, electronic health records, transgender specific areas, and education.

**Problem:**

Many people who identify as LGBTQ face discrimination and sometimes even refusal of care by clinicians. Reasons for unequal care include an unfriendly healthcare environment and lack of education for providers.

**Goal:**

The Education Subcommittee of the Rush LGBTQ Health Committee, in conjunction with the Colleges of Medicine, Nursing, and Health Sciences is continuing to develop and integrate both education and training in LGBTQ practices across the curriculum for university students and faculty. In order to provide appropriate care, it is necessary to properly educate health professions students in the academic and clinical setting. Biases held by students must be addressed during their educational careers if these individuals are to become effective providers.

**Selected Educational Initiatives:**

- **College of Medicine LGBTQ Curriculum “Touches”**
  - M1 – “Transgender Tuesdays”; Simulated patient experience – teenager who identifies as bisexual and is experiencing homelessness; Intimate partner violence
  - M2 – Sexuality Course “Taking an Inclusive Sexual History”; Implicit Bias Course: “Before Stonewall” - historical context of LGBTQ civil rights movement in the United States; Interprofessional LGBTQ Panel

- **College of Nursing LGBTQ Content Integration**
  - Entry-level Masters – “Out” Faculty at orientation; Mental Health Nursing Course – HEALE curriculum; Community and Public Health Nursing Course – Population Panel and “Speed Dating”

**Outcomes:**

- Post-Interprofessional Implicit Bias Module, students responded as follows: 98% identified challenges in obtaining appropriate healthcare experienced by sexual minorities; 99% identified specific health related challenges faced by LGBT teens; 98% identified own “Implicit Bias”
- HEALE: 250 students and 8 cohorts have been educated and expressed increased confidence and ability to care for LGBTQ patients

**Future Initiatives:**

RUMC is working with the curricular recommendations of the AAMC and ANA to fully integrate LGBTQ content and strengthen interprofessional education. Planned content includes addressing LGBTQ military veterans and additional case studies in courses ranging from health promotion and pediatrics, to hospice and palliative care with interprofessional faculty and combined classes.

Healthcare professionals working together with a common set of knowledge, attitudes, and skills, are most able to provide the highest standard of care for the LGBTQ community and all patients alike.

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Contributors: Tanya Friese, DNP, RN, CNL; Jay M. Behel, PhD; LeManuel Lee Bitsos, EdD; Susanna Chubinskaya, PhD; Paul M. Kent, MD, FAAP; Christopher M. Nolan, MPA