LGBTQ+ Health Coverage in the UWSMPH Phase 1 curriculum: A SWOT Analysis

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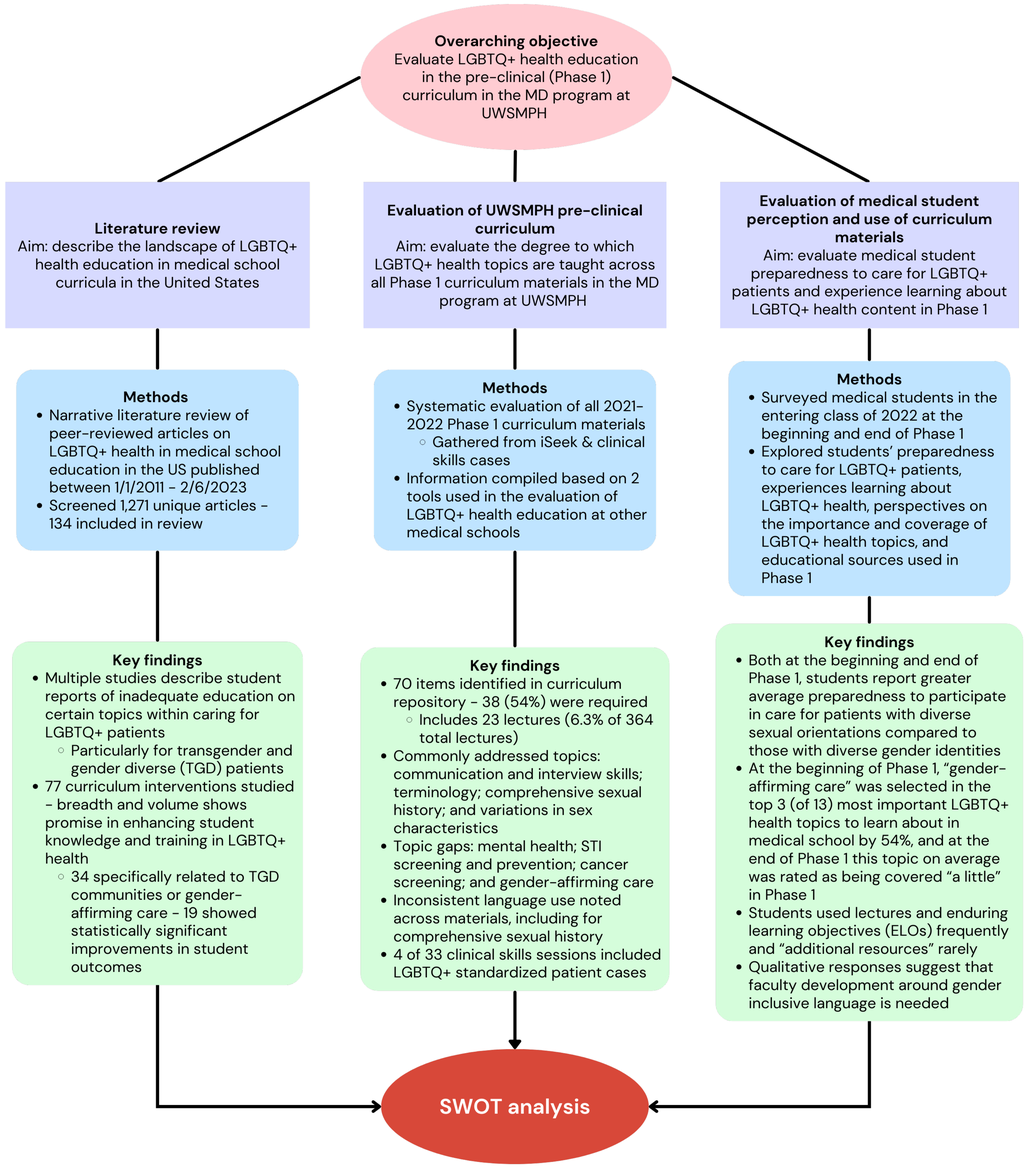
Introduction

Background
- People who identify as lesbian, gay, bisexual, transgender, queer/questioning, intersex, and other sexual/gender minorities (LGBTQ+) may experience discrimination when seeking healthcare[1]
- Medical students should be trained in inclusive and affirming care for LGBTQ+ patients[2]

Aim
- This study sought to assess the landscape of LGBTQ+ health education for pre-clinical (Phase 1) medical students at UWSMPH and consider opportunities for growth based on current literature

Methods and preliminary results



Discussion and summary

Strengths
- Content with comprehensive coverage: terminology and language use; variations in sex characteristics/differences in sex development
- Content spread across different learning formats (lectures, ELOs, clinical skills, reading materials)
- LGBTQ+ standardized patient representation
- UWSMPH pre-clinical curriculum coverage of LGBTQ+ health is comparable to findings from other MD programs

Weaknesses
- Lack of gender-affirming care content, identified through curriculum evaluation and student perspectives
- Lower student preparedness to engage in care for patients with diverse gender identities compared to diverse sexual orientations
- Inconsistent language use across materials
- Limited student engagement with "additional resources" in Canvas

S W O T

Opportunities
- Partnership with PRIDE in Healthcare student organization and LGBTQ+ Fellowship at UWSMPH
- Integrate content into public health longitudinal thread
- Integrate small additions of LGBTQ+ health content into existing materials (e.g., mental health in M&M)
- Leverage areas of research and innovation

Threats
- Politicized nature of gender-affirming care and LGBTQ+ communities
- Lack of standardized guidelines for medical student education on LGBTQ+ health
- Lack of longitudinal data on optimal education interventions to promote patient health outcomes
- Limited time to cover a large amount of information in medical school

Limitations:
- Curriculum evaluation only of materials used in 2021-2022
- Low response rate on surveys (27% and 25%)
- LGBTQ+ students were over-represented in the surveys (self-selection bias)
- Faculty input not solicited

Next steps:
- Focus groups completed with first through fourth year medical students at UWSMPH to further investigate student experiences learning about LGBTQ+ health across all phases of the curriculum → analysis in progress
- Share findings with block leaders and course directors to gather their input and feedback

Acknowledgements and references

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