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Primary Care Providers' Attitudes, Practices, and Knowledge in Treating LGBTQ Communities

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Background

- Barriers to health care access for LGBT population
 - Lower rates of health insurance¹
 - Limited number of culturally competent providers²
 - Lack of nondiscriminatory policies and refusal of care^{3,4}
- Health care disparities
 - LGBT individuals are 1.5x more likely to suffer from anxiety/depression⁵
 - Higher rates of substance abuse disorders among gay and lesbian populations⁵
 - 40% of transgender adults have attempted suicide⁴
- Lack of medical education
 - Medical schools in 1991 provided an average of 3.5 hours of LGBT-specific education over 4 years of undergraduate medical training compared to 5 hours given in 2011⁶

Aims

- Cultural competency in the context of health care
 - Having the awareness and knowledge of how cultural factors affect health and includes the ability to provide informed, educated care to patients regardless of race, religion, sexual orientation, gender identity, socioeconomic status, or other social classifications.
- How well are providers able to provide this environment for all patients?
- Prior studies
 - 28% of oncology providers said that they were informed on the health needs of LGBT patients⁷
 - Only 29% of clinicians interviewing sexually active adolescents regularly asked questions about sexual orientation while taking sexual histories⁸
- **To acquire a broader understanding of primary care providers' baseline competency in LGBT health care, this study focuses on providers' attitudes, practices, and knowledge concerning this topic across medical specialties.**

Design

- A lesbian, gay, bisexual, transgender, and queer (LGBTQ)-specific survey was developed and distributed electronically to primary care providers (internal medicine, obstetrics-gynecology, family medicine) throughout Indiana
- Survey breakdown
 - **Demographics**
 - **Attitudes** – 5 questions
 - Ex. “I am comfortable treating LGBTQ patients.”
 - **Practice** – 10 questions
 - Ex. “It is important to know the gender identity of my patients to provide the best care.”
 - **Knowledge** – 12 questions
 - Ex. “Rates of attempted suicide among transgender people are higher than those of lesbian, gay, and bisexual people.”

Results

- **Demographics** – (n = 127)
- Specialties
 - Family medicine - 40.2%
 - Internal medicine - 21.3%
 - OB/GYN - 16.5%
 - Other – 22.0%
- Gender identity
 - Male 47.2%
 - Female 52.8%
- Sexual orientation
 - Straight 90.6%
 - LGB 9.4%
- Percent LGBTQ patients seen in practice
 - 0% - 4
 - 1-10% - 110
 - 11-25% - 11
 - 26 – 50% - 2
 - > 51% - 0

Results

Attitude

Table 3. Statistically significant differences in item response frequencies across medical specialty^a, *n* (%).

	Overall	Family medicine	Internal medicine	OB/GYN ^b	Other	p-value ^c
Q11. I am comfortable treating LGBTQ ^d patients.						0.001
Strongly disagree	1 (0.7)	0 (0.0)	1 (3.7)	0 (0.0)	0 (0.0)	
Disagree	12 (9.4)	5 (9.8)	4 (14.8)	1 (4.8)	2 (7.1)	
Neither agree nor disagree	15 (11.8)	10 (19.6)	0 (0.0)	2 (9.5)	3 (10.7)	
Agree	67 (52.8)	30 (58.8)	7 (25.9)	13 (61.9)	17 (60.7)	
Strongly agree	32 (25.2)	6 (11.8)	15 (55.6)	5 (23.8)	6 (21.4)	
Q13. There should be more education in health professional schools on LGBTQ health.						0.001
Strongly disagree	3 (2.4)	1 (2.0)	2 (7.4)	0 (0.0)	0 (0.0)	
Disagree	2 (1.6)	0 (0.0)	2 (7.4)	0 (0.0)	0 (0.0)	
Neither agree nor disagree	20 (15.7)	8 (15.7)	7 (25.9)	1 (4.8)	4 (14.3)	
Agree	64 (50.4)	34 (66.7)	8 (29.6)	6 (28.6)	16 (57.1)	
Strongly agree	38 (29.9)	8 (15.7)	8 (29.6)	14 (66.7)	8 (28.6)	

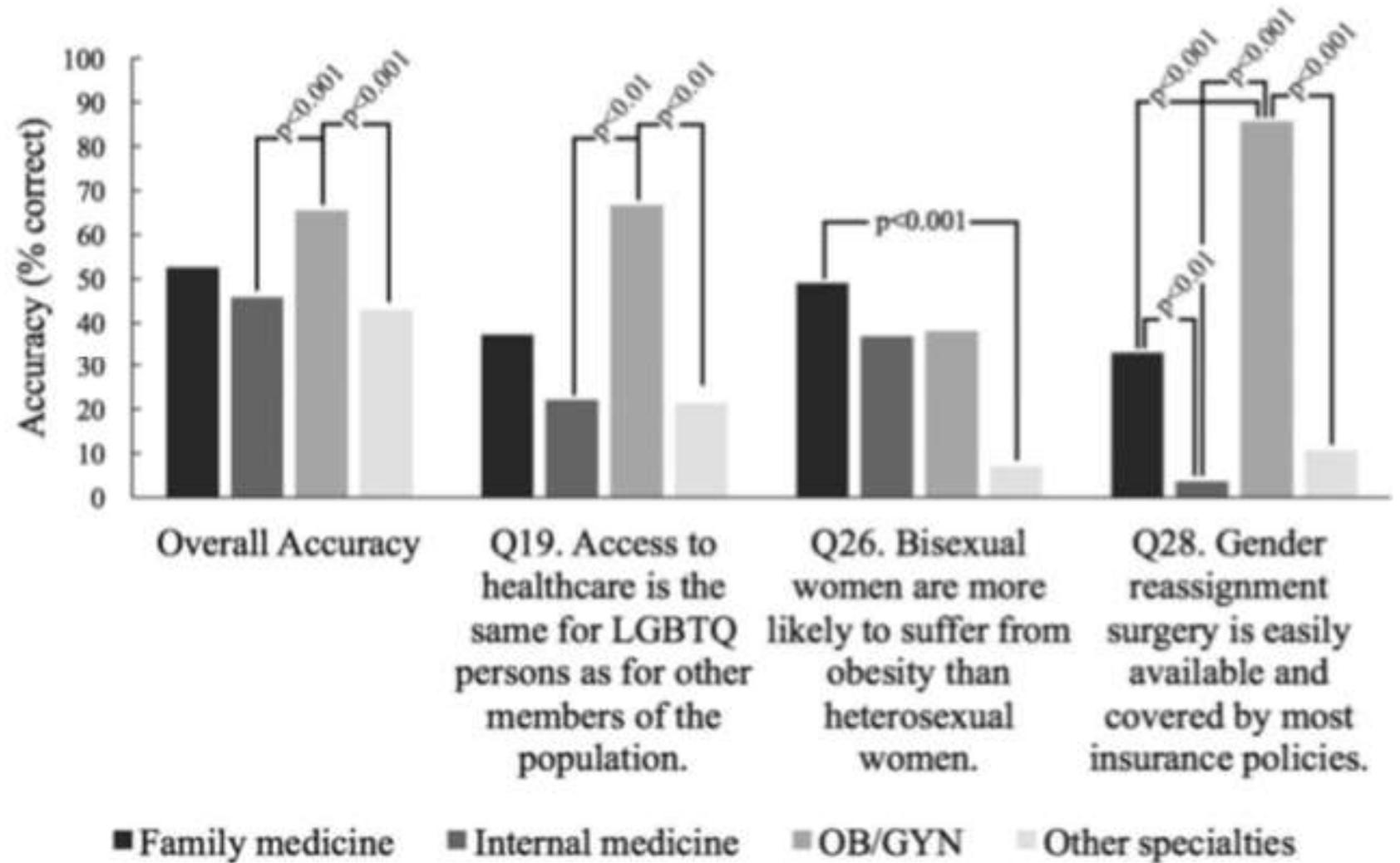
Results

Practice

	Overall	Family medicine	Internal medicine	OB/GYN ^b	Other	p- value ^c
Q32. It is important to know the sexual orientation of my patients to provide the best care.						0.003
Strongly disagree	1 (0.7)	0 (0.0)	1 (3.7)	0 (0.0)	0 (0.0)	
Disagree	8 (6.3)	1 (2.0)	4 (14.8)	0 (0.0)	3 (10.7)	
Neither agree nor disagree	12 (9.4)	4 (7.8)	3 (11.1)	0 (0.0)	5 (17.9)	
Agree	80 (63.0)	40 (78.4)	13 (48.1)	11 (52.4)	16 (57.1)	
Strongly agree	26 (20.5)	6 (11.8)	6 (22.2)	10 (47.6)	4 (14.2)	

Results

Knowledge



Discussion

- This study reveals significant disparities between providers' attitudes, clinical practices, and knowledge base concerning the LGBTQ community
 - Providers report that they feel comfortable treating LGBTQ patients (78.0%), and recognized that LGBTQ populations have unique health risks and needs (90.6%), they did not feel well informed on specific LGBTQ health needs (70.1%), on clinical management of LGBTQ care (74.8%), or on referring patients with LGBTQ issues (78.7%)
- A disconnect between intention and practice was illustrated by providers' responses
 - Disparity between understanding importance of sexual orientation/gender identity information gathering and acquisition of this data in practice
- There is a general lack of provider knowledge concerning LGBTQ health care
 - Overall accuracy for the 12 knowledge items was low at 51.0%
 - Eight questions had accuracies less than 50% (six under 40%)
- An increase in time dedicated to LGBTQ-specific education throughout all levels of training may improve cultural competency and improve health disparities in this population

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