Promising Practices in Sexual Orientation and Gender Identity Curriculum Inclusion

Joanne Rolls, MEHP, MPAS, PA-C,[1] Mary Showstark, MPAS, PA-C,[2] Diane Bruessow MPAS, PA-C,[2] Quinnette Jones MSW, MHS, PA-C,[3] Jenny Kluznik, MPAS, MPH, PA-C[4]

[1]University of Utah, School of Medicine, PA Program; [2]Yale University, School of Medicine, PA Online Program,[3] Duke University PA Program, [4]Family Tree Clinic

BACKGROUND

Health disparities are well documented amongst sexual and gender minority (SGM) individuals across the lifespan. In 2021, United States medical education training programs lacked explicit accreditation standards pertaining to the provision of care with consideration for sexual orientation and gender identity (SOGI). Recent changes to Physician Assistant (PA) program accreditation standards require graduates to care for patients with consideration for SOGI.
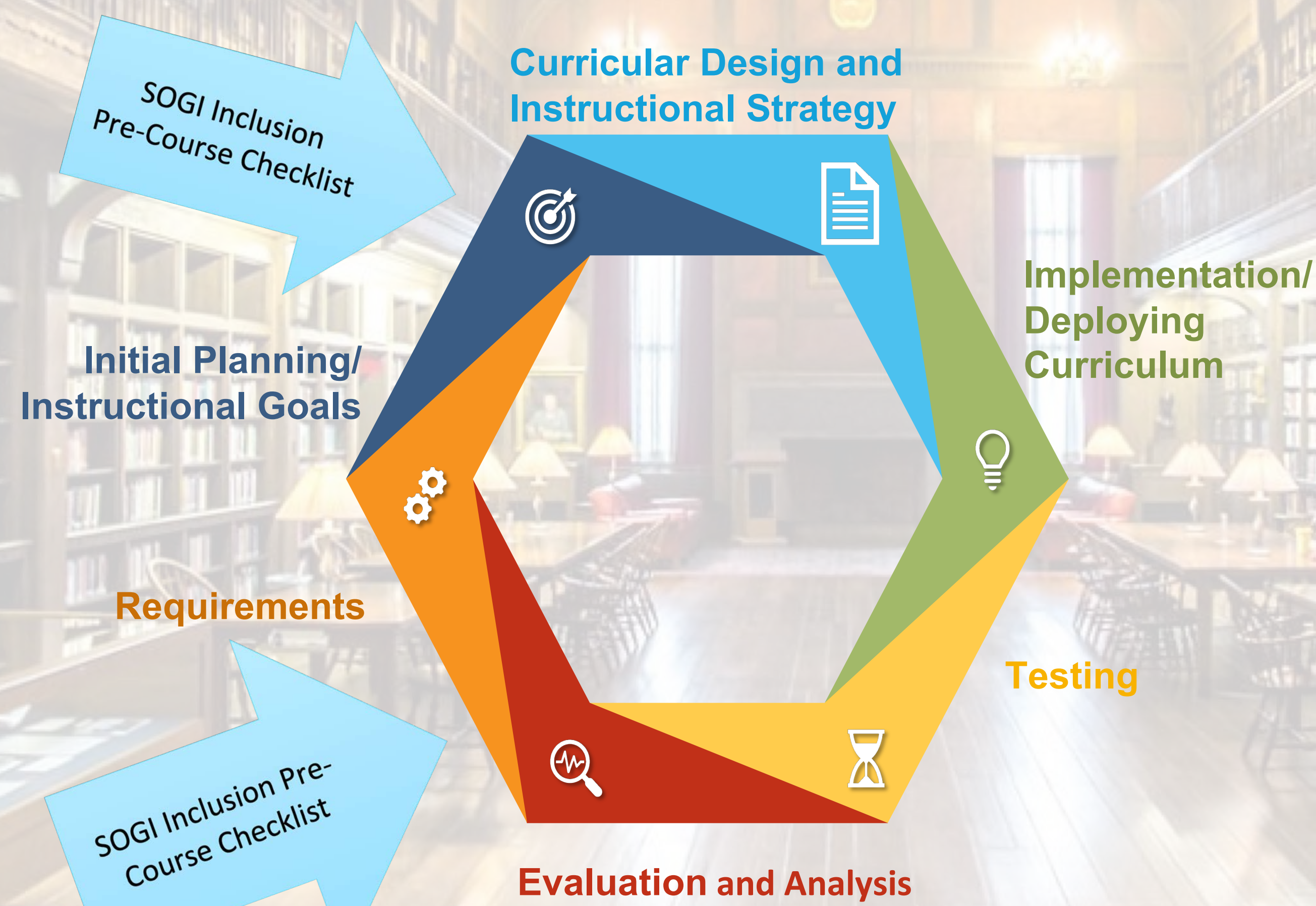
SPECIFIC AIM

This poster aims to give PA programs and educators insight into strategies for implementing SOGI content into both preclinical and clinical training for students based on experiences at three programs that are national leaders in SOGI curricular implementation.

DESCRIPTION AND METHODOLOGY

This work illustrates preclinical and clinical strategies, the timing of curricular delivery, instructor and facilitator coaching, tactics in interprofessional education, curriculum delivery, and evaluation in regards to SOGI. These case reports are derived from a convenience sample from 3 accredited PA programs. Descriptive statistics and qualitative analysis of subjective responses were used to describe program data and course evaluations. Authors explored each program's ability to meet ARC-PA diversity and inclusion standards, institutional diversity, equity, and inclusion (DEI) objectives, and revised 2019 NCCPA task area requirements regarding SOGI. Resources for program improvement, curricular development, and continuous curricular quality improvement are provided.

> "I feel I'll be more cognizant of the social barriers for the LGBTQ community. This rotation has also motivated me to seek a career at community centers with large LGBTQ populations in the future." – student

SOGI Inclusion Pre-Course Checklist

Curricular Design and Instructional Strategy

Implementation/ Deploying Curriculum

Initial Planning/ Instructional Goals

Requirements

Testing

SOGI Inclusion Pre-Course Checklist

Evaluation and Analysis

TERMINOLOGY & CITATIONS

Questions? Email joanne.rolls@hsc.utah.edu

RESULTS

Examples of curricular integration pertaining to sexual orientation and gender identity ranged from education on the patient-centered use of names and pronouns, lectures in clinical medicine, pharmacology, and patient assessment with respect to SOGI, patient panels, OSCEs, and community-engaged research, to a multi-institutional, virtual interprofessional education collaborative that spanned over 14 countries, 21 professions, and 27 universities. Over 5 years 764 students at 3 institutions received instruction on SGM care, 100 completed optional modules, and 36 completed clinical electives in SGM health. Student feedback is positive. Driving forces for curricular changes included patient and student demand, institutional policy, commitment to diversity, as well as clinical metrics. Restraining forces included faculty knowledge gap, lack of time, as well as cultural conflicts.

All participating programs are accredited and meet the new accreditation standards regarding diversity and inclusion as well as include curriculum required to meet SOGI associated NCCPA blueprint task areas.

Examples of Curricular Integration of Sexual and Gender Minority Content, 2015-2021

Program	Preclinical Phase	Clinical Phase	Additional Learning Opportunities
Duke PA Program	Session during initial orientation to PA school delivered by SGM health program including use of pronouns; lectures in clinical medicine, pharmacology, and patient assessment/counseling courses; inclusion in case-based learning examples	Optional LGBTQ+ modules in primary care clinical rotation; LGBTQ+ Health elective; sexual history practice with SP at onset of women's health clinical rotation	Interprofessional workshop series to support sexual & gender diversity
University of Utah	Integration and inclusion in multiple courses across the pre-clinical phase which includes; ascertaining preferred name and pronouns, understanding sex and gender, unconscious bias, health care and health access disparities, SGM and transgender patient panels, initiating and maintaining gender affirming hormone therapy, case-based learning, OSCEs, Community Engaged Master's Research Projects	Optional modules available throughout the clinical phase. Elective interprofessional transgender health rotation (primary care, plastic surgery, voice therapy, adolescent medicine). Plastic surgery elective with trans health focus. SGM data tracked via patient logging software.	SGM student scholarships awarded to attend GLMA. Grand Rounds. Transgender Health Journal Club
Yale School of Medicine PA Online Program	SGM health lectures in clinical medicine, pharmacology, and patient assessment, Problem-Based Learning cases. Interscholastic, Interprofessional Learning Activity involving an SGM patient scenario. The Yale PA Online Program created the Virtual Interprofessional Education (VIPE) collaborative, a multi-institutional VIPE initiative. It includes over 400 students, 27 universities, 21 professions in over 14 countries. The VIPE synchronous activity engages students on a video conferencing platform in interprofessional groups led by a facilitator who utilizes problem-based learning (PBL). The SGM VIPE case included multiple different medical and social elements to include all professions. Students discuss their roles in the care of the SGM patient.	Clinical Elective in SGM health which covers best practices in sexual history taking, gender identity and expression in children and adolescents, treatment goals, common interventions including suppression of natal puberty, masculinizing and feminizing hormone therapy, gender-affirming surgical procedures, anorectal health including anorectal exams, standard anoscopy, rectal STI screening, anal cytology and HPV, common anorectal diagnoses and clinical management, HIV epidemiology, HIV prevention technologies, primary care needs of MSM, extragenital STIs, advanced cases and reflections. OSCE utilized a transgender standardized patient scenario.	Opportunities to participate in clinical electives with member of the LGBT PA Caucus

CONCLUSION

The didactic and clinical approaches presented allowed each participating program to meet its goals in respect to ARC-PA, NCCPA, and DEI objectives. As PA programs continue or begin to implement SOGI curricula to meet ARC-PA standards and NCCPA content expectations, a focus on an iterative instructional design model to encourage inclusion of this content across didactic and clinical PA curriculum is crucial. A variety of curricular options that can be cultivated to individual programs can expedite curriculum integration. Educators should explore the potential of shareable SOGI health topic models across PA programs and assess longitudinal effectiveness of SOGI curricula.

Driving Forces

Students request it
Accreditation requires it (ARC-PA: A1.11, B2.06, Joint Commission)
Regulations require it (CMS)
Institutional Policy requires it
Increased Public Awareness

Restraining Forces

Faculty knowledge gap
Institutional Culture
(Federal DOE OCR exemptions)
Lack of Time/Compressed Curriculum
Social barriers/"culture wars"

ARC-PA Accreditation Standard, 5th Edition: Effective September 1, 2020

B2.06 The curriculum must include instruction to prepare students to provide medical care to patients with consideration for:
a) disability status or special health care needs,
b) ethnicity/race,
c) gender identity,
d) religion/spirituality,
e) sexual orientation, and
f) social determinants of health.

A1.11 The sponsoring institution must demonstrate its commitment to student, faculty and staff diversity and inclusion by:
a) supporting the program in defining its goal(s) for diversity and inclusion,
b) supporting the program in implementing recruitment strategies,
c) supporting the program in implementing retention strategies, and
d) making available, resources which promote diversity and inclusion.

> "I can't possibly fathom waking up one day or having known all my life, or being uncomfortable in my skin, I don't live that reality. So, hearing the different narratives, it helps me gain understanding, but it also stands out because it's never easy either, this is huge, people are making the choice to tell you their story and it is not an easy one . . . their level of suffering . . . it is humbling to hear the narratives." – student

Duke University School of Medicine
PHYSICIAN ASSISTANT PROGRAM

SCHOOL OF MEDICINE UNIVERSITY OF UTAH

Yale SCHOOL OF MEDICINE
Physician Assistant Online Program