Increasing Transgender Cultural Competency Among Adolescent Inpatient Psychiatric Nurses
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Introduction
Background:
- Cultural competence: "efforts to reduce the cultural and linguistic barriers between patients and medical personnel that interfere with effective health care delivery"3
- Approximately 150,000 adolescents in the US identify as transgender7
- Transgender youth have an increased probability of receiving mental health diagnoses11
- Health professionals often lack cultural training to care for transgender patients, leading to negative attitudes, inappropriate care, hesitancy to deliver care5, 6, 10
- Negative experiences with health care providers can decrease health-seeking behaviors, leaving mental health concerns unaddressed5

Synthesis of Evidence:
- Scant research on culturally competent care of transgender patients in mental health settings9
- Themes in literature: lack of provider training, effect of provider attitudes towards transgender individuals, and importance of therapeutic relationship between provider and patient1, 4, 5, 6
- Trainings increase competence and confidence but infrequently impact provider attitudes towards transgender individuals8

Purpose & Aims
Purpose:
To evaluate the effectiveness of an educational intervention for psychiatric nurses intended to increase transgender cultural competency and self-rated clinical preparedness to provide culturally competent care for transgender patients

Aim 1:
To determine whether transgender cultural competency among adolescent inpatient psychiatric nurses increased from pre- to post-intervention

Aim 2:
To determine whether self-reported clinical preparedness to provide culturally competent care for transgender patients increased from pre- to post-intervention

Methods
Design: Pre/post-test educational intervention
Setting: Inpatient adolescent psychiatric units in a pediatric hospital in Midwestern U.S.
Inclusion Criteria: Nurses on adolescent inpatient psychiatry units
Exclusion Criteria: Nurses on child psych units, "float" nurses, travel nurses
Intervention: 20-minute online education module with content covering terminology, statistics, hospital policies and procedures
Data Collection: Pre/post-intervention, 12 week post-intervention; LGBT-DOCSS2 used as pre/post "survey"

Results
Findings for Aim 1
Outcome variable: difference between pre- and post-intervention summary scores (mean total score) for total transgender cultural competency
- 9 participants (52.9%) completed both pre- and post-intervention survey
- 9 participants completed 12 week post-intervention survey
- Pre-intervention: Mdn summary score= 5.29 (IQR .88)
- Post-intervention: Mdn summary score= 6.06 (IQR .71)
- 0.76-point improvement (p = .008)

Findings for Aim 2
Outcome variable: difference between pre- and post-intervention summary scores (mean total score) for self-reported clinical preparedness
- 10 participants (58.8%) completed both pre- and post-intervention survey
- 6 participants completed 12 week post-intervention survey
- Pre-intervention: Mdn summary score= 4.17 (IQR 1.67)
- Post-intervention: Mdn summary score= 5.33 (IQR 1.33)
- 0.83-point improvement (p < .007)

Discussion
Findings:
- Educational intervention increased transgender cultural competency and clinical preparedness
- Cultural competence training can positively impact attitudes

Strengths:
- Prior research has not explored transgender cultural competency in inpatient mental health settings
- Intervention: module-content specific and relevant to participants, minimal resources required to create and implement

Limitations:
- Small sample size
- Unexpected release of hospital-wide education on topic prior to implementation
- Transcription error when converting the LGBT-DOCSS to an electronic format

Recommendations:
- Explore most effective format and delivery methods for intervention
- Investigate link between cultural competency education and provider attitudes
- Examine impact of intervention on patient care, satisfaction, and outcomes

Conclusion
In health care providers, transgender cultural competency and clinical preparedness can be increased through brief educational modules.