

Title:

Improving Transgender and Gender-Diverse Barriers to Primary Care

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Abstract Text:

Background: Transgender and gender-diverse (TGD) people experience health disparities at higher rates than their cisgender counterparts, and they struggle to access affirming and safe primary care providers (PCPs) due to prior negative healthcare experiences and subsequent fear of mistreatment. Gender-affirming primary care, including hormone therapy access, significantly improves TGD patients' quality of life and mental health. Both national and international models for TGD primary care support hormone prescribing within the primary care setting. Little is known about PCP preparedness and willingness to meet TGD patient healthcare needs and how to improve knowledge on this topic.

Methods: A pre/post study design assessed changes in clinical and cultural knowledge, attitudes, and willingness to provide gender-affirming primary care in PCPs who received a trauma informed care module and either a clinical module or patient panel module. All modules were provided open source by The Fenway Institute.

Results: The findings suggest that targeted TGD clinical education improves clinical knowledge and overall comfort but does not impact PCP attitudes surrounding TGD folks or a willingness to provide gender-affirming care. Findings also suggest that TGD patient panel exposure decreases transphobia scores and improves comfort, but also does not lead to a willingness to engage in gender-affirming primary care.

Conclusion: This study highlights the importance of incorporating multi-modal teaching when targeting patient populations with health disparities and histories of medical stigmatization. Future research is needed to find ways to translate clinical knowledge and cultural humility into measurable competencies.

Implications: Diversity and inclusion trainings aimed at improving clinician knowledge are lackluster in creating measurable change in clinician behaviors. Shifting more focus to medical curricula as a means of establishing culturally and clinically competent care for diverse populations may be future targets of research.

Keywords: Diversity training, Primary Care, LGBTQ+, Clinical Competency, Primary Care Providers