

# Evaluating Lesbian, Gay, Bisexual, and Transgender (LGBT) Patient Representation in Pharmacy School Curricula

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## INTRODUCTION

### BACKGROUND

- The lesbian, gay, bisexual, and transgender (LGBT) community faces substantial health disparities including higher rates of certain cancers, depression, substance use, tobacco use, body dysmorphia, alcoholism and eating disorders<sup>1</sup>
- As health care providers it is important to address the specific health needs of LGBT communities and patients
- Previous research found that pharmacy schools dedicated less than 3 hours to LGBT-related content, and the most commonly discussed topic related to the LGBT community was HIV<sup>2</sup>

### PURPOSE

- To characterize LGBT-related curricula and associated curricular development practices within pharmacy schools across the United States (US)
- To determine curriculum chairs' perception of the quality of their institutions' LGBT-related educational content

## METHODS

- Between March 1 and May 1 of 2019, curriculum chairs (or equivalent) from accredited schools of pharmacy throughout the US were invited via email to complete a 14-item web-based questionnaire to capture quantity and quality of LGBT health curricular content at each school
- Schools were excluded from survey distribution if they were not ACPE accredited pharmacy schools located in US territories
- All responses were collected without individual names, and school identities were kept confidential
- This study was approved by the University of Arizona Human Subjects Protection Program
- The primary outcome was the number of LGBT-related content hours in pharmacy school curricula
- Secondary outcomes included frequency of institutional instruction in 15 different LGBT health areas, extent of coverage in each area, methods of evaluating LGBT-related content learning, and strategies for increasing LGBT-related content
- Final data were entered into an Excel spreadsheet for statistical analysis via SPSS version 24.0

## RESULTS

- Of the 137 accredited U.S. pharmacy schools a total of 21 (15.3%) completed the survey
- Mean reported time spent teaching LGBT-related content in the entire curriculum was 3.38 hours (SD=3.82)
- There was no difference in the total mean time spent teaching LGBT-related content between public institutions and private institutions (4.09 hours [SD=4.41] versus 2.60 hours [SD=3.09], p=0.38)
- LGBT-related topics most frequently taught by schools included:
  - Human immunodeficiency virus (HIV) (76.2%)
  - Barriers to accessing medical care (57.1%)
  - Gender transitioning (57.1%)
  - Sexually transmitted infections (non-HIV) (52.4%)
  - Sexual orientation (52.4%)
- Institutions self-rated their overall coverage of LGBT content as: "good" (4.8%, n=1), "fair" (33.3%, n=7), "poor" (28.6%, n=6), and "very poor" (19.0%, n=4)
- No school rated their coverage as "very good"
- Thirteen schools (61.9%) included LGBT-specific content in their required didactic curriculum, while seven did not (33.3%), and one school (4.8%) abstained from responding

### CHARACTERISTICS OF PHARMACY SCHOOL SURVEY RESPONDENTS

	Public	Private
Total number of participating pharmacy schools (%)	11 (52%)	10 (48%)
TOTAL number of students enrolled in institution's pharmacy program across ALL program years (Median)	240-640 (450)	216-1000 (350)

### AREAS OF LGBT CONTENT EDUCATION IN CURRICULA

Institution provided education for students in the following content areas at any point in the curriculum	Available N (%)	Not available N (%)	No Answer N (%)
Barriers to accessing medical care for LGBT people	12 (57.1)	6 (28.6)	3 (14.3)
Alcohol, tobacco, or other drug use among LGBT people	6 (28.6)	12 (57.1)	3 (14.3)
Safer sex for LGBT people	10 (47.6)	4 (19.0)	7 (33.3)
Sexually transmitted infections (not HIV) in LGBT people	11 (52.4)	7 (33.3)	3 (14.3)
HIV in LGBT people	16 (76.2)	1 (4.8)	4 (19.0)
Chronic disease risk for LGBT populations	6 (28.6)	9 (42.9)	6 (28.6)
Sexual orientation*	11 (52.4)	7 (33.3)	3 (14.3)
Coming out**	4 (19.0)	14 (66.7)	3 (14.3)
Gender identity†	9 (42.9)	9 (42.9)	3 (14.3)
Transitioning‡ (e.g. male-to-female, female-to-male)	12 (57.1)	9 (42.9)	0 (0)
Sex reassignment surgery¶	9 (42.9)	11 (52.4)	1 (4.8)
LGBT adolescent health	3 (14.3)	14 (66.7)	4 (19.0)
Mental health in LGBT people	7 (33.3)	10 (47.6)	4 (19.0)
Body image in LGBT people	7 (33.3)	11 (52.4)	3 (14.3)
Unhealthy relationships (e.g. intimate partner violence) among LGBT people	7 (33.3)	11 (52.4)	3 (14.3)

\* Sexual Orientation: An individual's self-identified state of physical and/or emotional attraction. "Heterosexual," "bisexual," and "homosexual" are all examples of sexual orientation.

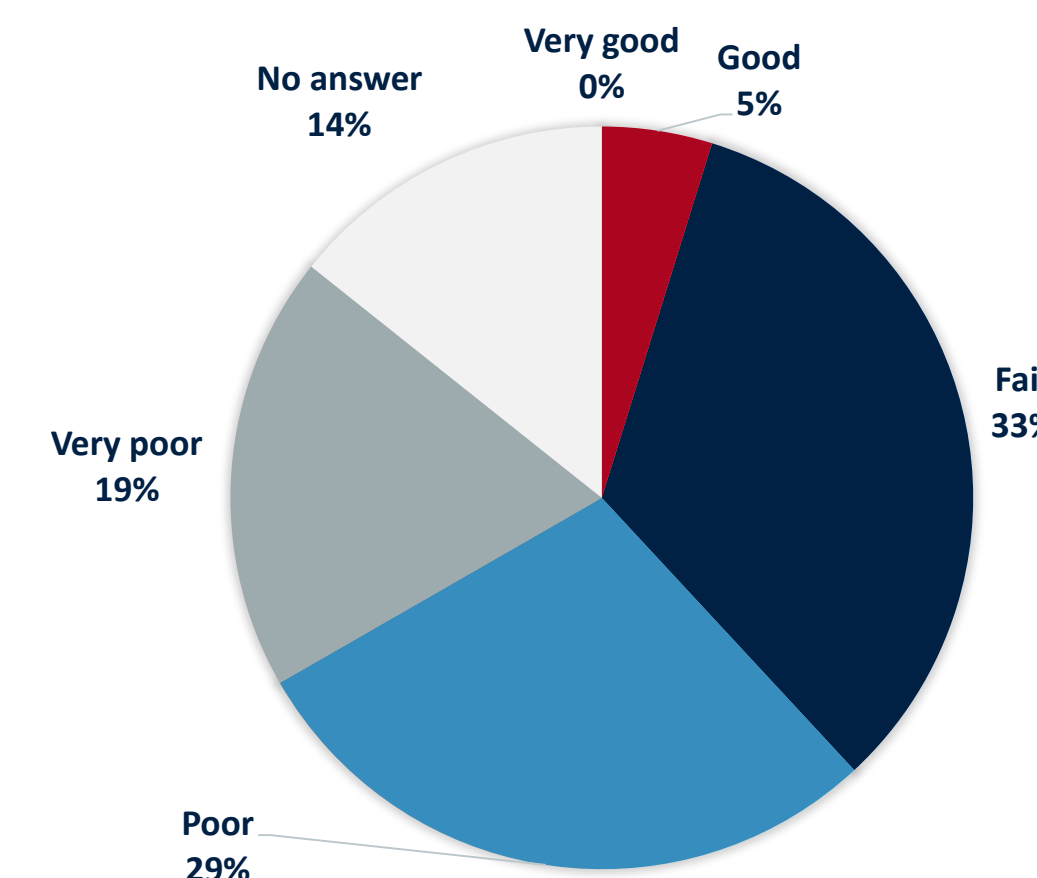
\*\* Coming Out: A process of disclosure of one's sexual orientation or gender identity to oneself and/or others.

† Gender Identity: A person's deeply felt psychological identification as male, female, transgender, no gender, or another gender which may or may not correspond to the person's body or designated sex at birth.

‡ Transitioning: The process through which a person modifies physical characteristics and/or manner of gender expression to be consistent with gender identity. This process, also referred to as "gender affirmation," may include hormone therapy, sex reassignment surgery, and/or other components and is generally conducted under medical supervision based on a set of standards developed by medical professionals.

¶ Sex Reassignment Surgery: The genital alteration surgery that transgender individuals sometimes undergo to change their physical bodies to match their gender identities. This was previously referred to as a "sex change operation." This process is also referred to as "sex affirmation treatment."

### CURRICULUM CHAIRS' SELF-RATING OF OVERALL LGBT CONTENT COVERAGE IN CURRICULUM



## DISCUSSION

### FINDINGS AND IMPLICATIONS

- The findings of this study are expected to have a meaningful impact by identifying gaps in pharmacy education and areas for potential improvement including, but not limited to, alcohol and drug use, chronic disease risk, coming out, adolescent health, mental health, and body image in LGBT people
- Improving health outcomes for LGBT patients by comprehensively educating healthcare professionals in the diverse needs of this population is imperative to ensure that health disparities are reduced and eventually eliminated

### LIMITATIONS

- Low response rate
- Short study duration
- Surveys were limited to ACPE accredited schools in the US
- Full knowledge of curriculum by respondents was assumed
- Truthful and unbiased responses were assumed

## CONCLUSIONS

- Further assessment of LGBT health content coverage in pharmacy curricula is needed, and expansion should be made as appropriate
- The mean reported time dedicated to LGBT-related content in pharmacy schools between March 1, 2019 and May 1, 2019 was 3.38 hours
- HIV in LGBT patients remains the most covered single topic
- A third of schools reported not including LGBT specific content in required didactic curriculum at all
- The perceived quality of instruction, as assessed by the Chair of the Curriculum Committee (or equivalent), varied substantially

## REFERENCES

- U.S. Department of Health and Human Services. Lesbian, Gay, Bisexual, and Transgender Health; Healthcare-Associated Infections. Healthy People 2020. Web. 19 Dec. 2018.
- Mandap M, Carillo S, Youmans SL. An Evaluation of Lesbian, Gay, Bisexual, and Transgender (LGBT) Health Education in Pharmacy School Curricula. Curr Pharm Teach Learn. 2014;6(6):752-58.

The authors have nothing to disclose. For more information, please contact:  
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