Assessment of LGBTQ+ Cultural Competence: Phase 2, Part 1: Qualitative Assessment of Faculty and Student Perspectives

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INTRODUCTION:

- The LGBT community has experienced many health-related issues, disparities, and barriers to healthcare.¹⁻³ Factors related to healthcare disparity include depression and suicide, increased substance use, peer victimization, family rejection and lack of gender or sex specific healthcare for LGBT people.⁴
- The purpose of this research study is to promote education and awareness to the physical therapy community (students and educators) to enhance cultural competence within the LGBT community.
- **Research Question:** How cultural competence related factors identified through Qualitative analysis impact LGBT issues in the academic PT programs.
- **Hypothesis:** The PT profession will be better able to advocate for and implement change in the service to the LGBT community with information on current LGBT cultural competence that will enable specific efforts targeting cultural competence education, curriculum reform, and policy change at the local and state levels.

METHODS:

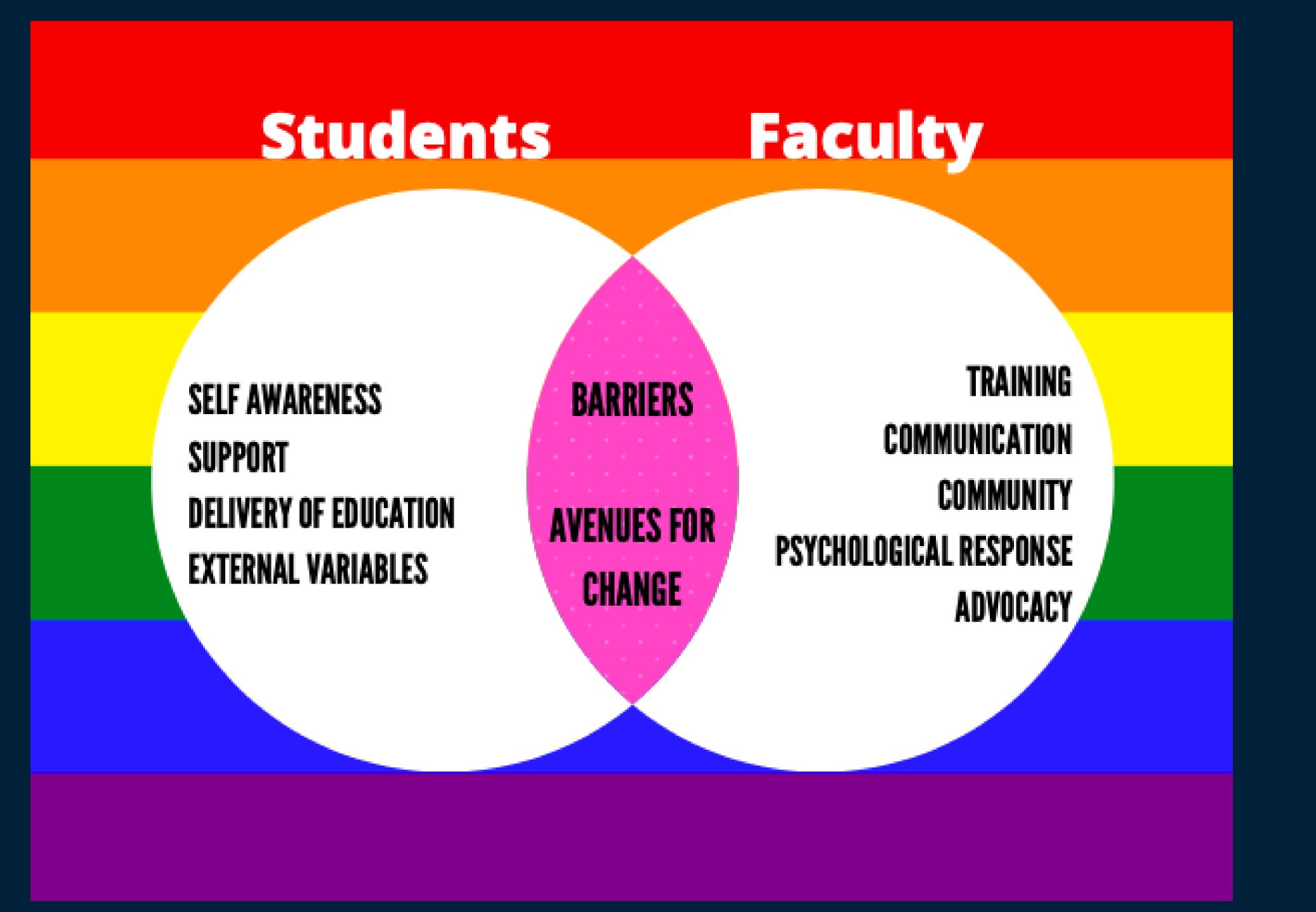
- Qualitative case study approach used to recruit schools. Sample included informed consent approved by the Regis University IRB
- Inclusion Criteria consisted of current student or faculty member from a US Doctor of PT program.
- Participants were interviewed using open ended questions that addressed the five domains of cultural competency.
- Data collection and analysis occurred simultaneously in which participant responses were analyzed for themes until data saturation was met.
- Qualitative expert reviewed data analysis to ensure themes were appropriate and effective in answering the research question.

RESULTS:

- Qualitative analysis revealed the following primary themes:
- Faculty themes: Training, Community, Communication,
 Psychological Response, Advocacy, Barriers, and Avenues for
 Change
- Student themes: Self Awareness, Support, Delivery of Education, Barriers, Avenues for Change, External Variables (faith, religion, age, geography)

Limitations:

 Because these focus groups were voluntary, only those willing to participate were involved. This means that the research only includes opinions and reactions from people who fall within the demographics of the school willing to participate Cultural competence in and around the LGBT community remains varied between faculty and students; however, both agree that there are barriers towards cultural competence and realistic avenues for change.



"Otherwise, the example you're setting for your students is people who are different are just problems without solutions" - Student

CONCLUSIONS:

Student Values:

- **Self-Awareness** theme identified a sensitivity to LGBTQ+ needs, but then failed to communicate adequate cultural competence.
- **Support** theme referred to family and friends who create safe spaces for members of the LGBTQ+ community.
- **Delivery of Education** themes emerged a lack of consistency or normalcy of LGBTQ+-related curriculum.
- **Barriers** theme highlighted threats to the LGBTQ+ community.
- Avenues for Change theme discussed policy changes to education and an openness of students and faculty to become more culturally competent.
- External Variables theme centered around factors such as faith or religion, family, geography that dictate feelings towards the LGBTQ+ community.

Faculty Values:

- **Training** theme identified a sensitivity to LGBTQ+ needs, but then failed to communicate adequate cultural competence.
- Community theme referred to various groups as well as the sense of belonging to various groups for those that identify as LGBTQ+.
- Communication and Advocacy emerged around the presence or lack of available LGBTQ+ education and how cultural competency is being facilitated currently.
- Barriers theme highlighted personal, political and regional beliefs.
- Avenues for Change theme identified the role of policies in determining LGBTQ+ patient access to PT.
- **Psychological Response** theme highlighted PT clinicians' fear, avoidance and internal conflict in working with LGBTQ+ patients.

FURTHER RESEARCH:

• Apply the insights/themes discovered through this qualitative research study to the development of a quantitative survey to administer to a broader and more generalized sample.

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