

INTRODUCTION OF GENDER AFFIRMING CARE TO THE APRN CURRICULUM

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## **Abstract**

The Advanced Practice Registered Nursing (APRN) curriculum is the source of a nationwide issue regarding its severe lack of education on gender affirming care. This research will be performed on those who are pursuing a degree in advanced practice registered nursing at a southeastern state university. A quality curriculum will be formulated and tested that goes over the information that is necessary to know for Gender Affirming Care. This includes how to address transgender patients, educating patients on pertinent health care screenings, and more. Attitudes from a pre- and post-survey will be compared.

## **Background**

The Advanced Practice Registered Nursing curriculum is the source of a nationwide issue regarding its severe lack of education on gender affirming care. The healthcare field is ever evolving, but the education for healthcare providers has not kept up. Providers report being comfortable doing more straight forward tasks that they already know, “58% were comfortable performing prostate exams, and 62% were comfortable performing pap smears on transgender patients,” (Qureshi, 2020). Healthcare providers lack the knowledge to be able to educate their patients on important topics. They are unable to talk about the unique screenings that are required for transgender patients. An example of this is whether a transgender female patient requires a breast cancer screening. The provider would need to know this answer in order to help the patient navigate their transition, and the future of their healthcare journey. Patients should not be required to spend extra money and time to be seen by a specialist. By integrating gender affirming care into the curriculum, it will eliminate that issue.

The problem shows itself especially regarding language to be used and the unique care that is required for patients in the LGBTQ+ community. According to a survey done at the

University of Louisville on how to address and provide gender affirming care to those in the LGBTQ community, “students correctly answered 69% or less of the knowledge questions at baseline.” (Sawning, 2017). This was after an intervention was put into place that educated the students on the basics of gender affirming care. There is very little education that is provided for healthcare professionals. By implementing basic healthcare needs of those in the LGBTQ community, it would increase the quality of care overall and eliminate the need for specialty clinic visits for these patients.

### **Literature synthesis**

Multiple categories of articles were found that will aid in the research for this project. Systematic reviews, surveys, viewer feedback, pre- and post-tests, and interviews were all methods that were found throughout the literature review. There were many recurring themes throughout all the articles that were found that highlight the dire need for change to be made regarding gender affirming care. There are too many negative attitudes, stigmas, and stereotypes about gender affirming care held by providers simply due to the lack of education that was provided to them during their education. This can be combatted from the results of the research in this project.

The systematic reviews that were conducted highlighted the inequalities that exist in healthcare regarding the LGBTQ community. The first article that I found written by Sekoni assessed the effect of educational curriculum for healthcare students on LGBT healthcare issues. This is a very similar project to what we are trying to accomplish with our own research. In this review, an electronic database compilation was utilized to test the hypothesis of whether the lack access to LGBT patients contributes to the lack of knowledge by providers. This gives a glimpse into the result of what occurs from a systematic review. They found that short-term improvement

was found in knowledge and attitudes for nursing students and providers regarding LGBTQ healthcare. This is a moderate article that provides good evidence that there is an issue surrounding gender affirming care. While it provided evidence that supplemental education on gender affirming care does create a positive change, it doesn't specify the methods that were used to teach this information to the students. It highlights that there is an issue and a solution to be made, but not necessarily how to go about doing so. The second systematic review that I found written by Lightfoot went deeper into what issue causes the lack of healthcare for transgender patients. It is stated that contemporary healthcare's issue is that transgender care is erased completely on the educational level, "contemporary healthcare exists within a cisnormative landscape which underpins the erasure of trans persons in healthcare, health research, and health education, and results in negative experiences and poorer outcomes" (Lightfoot, 2021). This spoke on many of the same ideas as the previous review, but it is a lot more in depth. Instead of using 16 articles for the review, this one used 136. It is also a moderate article because it again demonstrates the necessity for change in the nursing curriculum, but it doesn't discuss how to do this.

The strongest research that I found fell into the category of surveys, pre-posttests, and interviews. These were specific and provided solutions to the problem that surrounds gender affirming care in healthcare curriculums. The first main idea that was found surrounded the knowledge about health factors for the LGBTQ community. The article written by Qureshi discussed that nurses were more comfortable with performing physical exams, such as prostate and pap smears, but they didn't know as much about how to go about screening for these patients or for advocating for reforms in healthcare. It was conducted via an anonymous survey which encouraged honesty and transparency from the providers. This was a strong article that went into

detail on the questions asked and the knowledge, or lack thereof, that the nurses had to provide gender affirming care to patients. Sawning took a similar approach in the research conducted in a medical school. A pretest was administered to 39 medical students at the University of Louisville to assess the attitude surrounding gender affirming care. Following the pretest, an intervention was put into place that provided education on the LGBTQ community and the specific needs of these patients. The posttest that was administered showed a significant increase in the attitudes held by the students about their knowledge of gender affirming care. This was a very strong article for the research we are doing because it was an example of what we are trying to do. The main difference between this article and the project we are conducting is medical students versus advanced practice nursing students. In a similar article, specific tools such as the Gay Affirmative Practice Scale and the objective knowledge quiz were utilized by Schweiger-Whalen to assess the LGBTQ cultural competence of nursing students. The main idea that was found in this research was that self-awareness is an essential component that needs to be had by the provider. This article is also strong because it demonstrated another intervention that can be put into place to provide education. They used a four-hour pilot workshop that would educate nursing students on the attitudes surrounding gender affirming care. The conclusion made from the research in this article indicate that “Future educational efforts for sexual and gender minorities should strive to avoid inadvertent marginalization of LGBT people through integration of concepts with existing curricula and workplace training.” (Schweiger-Whalen, 2018). Primary health care improvement was found in the research performed by Ufomata. This is a strong article that demonstrated a way to implement education on gender affirming care without having to figure out a way to add it into the already full class day. This study used online modules to provide education on how to provide primary care to LGBTQ patients. Confidence

increased and the realization of how important this work is also increased by those who participated in the study. The articles by Webb, Wright, and Willis were all very similar. They conducted interviews to spark change in the healthcare field. The article by Webb assessed the Members of the QSEN National Academic Taskforce on the resources they thought existed for the LGBTQ community in healthcare. This again highlights the issue that occurs but does not go into detail on how to combat this issue. Willis and Wright both interviewed transgender patients themselves. This was a refreshing, but also saddening, interview outlook that I believe is very beneficial to our research. The individuals went into detail on the issues that they experience in healthcare. They feel as if healthcare is still very transphobic, and it makes it difficult to transition. Willis stated that not only does the lack of knowledge by the provider impede the ability to create a positive environment for the current visit, but “the transphobic practices and cisnormative assumptions encountered across health-care interactions and systems that impede their journey of transitioning in later life.” (Willis, 2020). The Wright article also discussed Gender Identity Clinics, which is something I was not familiar with before. The study performed by Klotzbaugh demonstrated some of the core contributors to the lack of knowledge on gender affirming care. These were area, role, location, and education. It was found that those graduating after 2011 were more likely to have received some education on LGBTQ healthcare.

There was one article that was found that may not be the strongest for research, but it was strong in providing examples for what would need to be included in the curriculum. It discusses that nurses need to keep in mind how their patient may be feeling. This will help provide a positive experience for the nurse and the patient. It highlighted many of the causes behind this lack of education for nurses, “Explanations for this deficit include time limitations,<sup>5</sup> adherence to accreditation and licensing standards that don't require or include TGD content,<sup>6</sup> and lack of

faculty engagement in and comfort with teaching TGD topics.” (Nye & Anderson, 2021). It then discussed how institutions can combat these issues. It first went into detail about pronouns and identity and that this is the first step in producing a safe and positive environment for patients. Another portion of this article that was unique was the included layout of a real-life situation and the language to be used for this type of occurrence. It discussed a new nurse that was meeting her patient. The patient wished to be addressed by a name that was different than listed in the chart and identified as he/they pronouns. The nurse quickly adapted and asked more questions to ensure that she maintained a trusting relationship with this patient. She then advocated for the patient during shift change and gave a detailed report to the nurse that would be taking over for the next shift.

Many other articles were found, but the ones I discussed in this section were the strongest related to our research. The primary issue that I found is that there is not a lot of literature out there specifically related to the contents of a curriculum that can be used to combat the lack of knowledge for gender affirming care. I found one article that went mainly into the basics of gender affirming care and defined key ideas related to the LGBTQ community. There was also a lack of research done on the graduate level nursing scale. The one article that I found on Advanced Practice Nursing was by Klotzbaugh. He identified the “distributional inadequacy of advanced practice nursing curriculum related to inclusion of considerations for the health care of TGD populations” (Klotzbaugh, 2022). Most articles were either on undergraduate nursing students or medical students.

### **Research questions**

This research will aid in implementing gender affirming care education for the advanced practice nursing curriculum at a southeastern state university. Throughout this research, a refined

curriculum will be created to best prepare students and eliminate the negative stigma around the LGBT community in healthcare. The goal is to increase the quality of care for all and create a positive and safe environment for every patient, no matter the differences. The discomfort and lack of confidence in nurses themselves will also be eliminated. This research will be performed on those who are pursuing a degree in Advanced Practice Registered Nursing at a southeastern state university.

The curriculum is the largest aim for this research. A quality curriculum will be formulated and tested that goes over the information that is necessary to know for gender affirming care. This includes how to address transgender patients, educating patients on pertinent health care screenings, the differences in performing pap smears and prostate exams for transgender patients, and more. The main goal of the curriculum is to institutionalize gender affirming care across the board. Transgender patients, for example, would be able to go to their primary care provider instead of seeking the help of a specialist.

The second aim of this project is to increase the overall care for each patient. This includes those who identify as being a part of the LGBTQ community. Each patient deserves an environment that they can feel safe and comfortable in. The research being done will identify the best ways to go about creating this positive healthcare space. This would include the portion of the curriculum that educates on addressing patients properly.

The third aim of this project works in conjunction with the other aims. The provider needs confidence in their capability to provide quality care to create the positive and safe environment that is required. The curriculum will allow this education to eliminate the issue that is “In spite of recent calls for patient-centered care and greater attention to the needs of lesbian, gay, bisexual, and transgender (LGBT) patients, nurses still lack basic education about LGBT



patient care and, as a result, may have negative attitudes, endorse stereotypes, and/or feel uncomfortable providing care.” (Carabez, 2015). The education will eliminate the negative stigmas and stereotypes that are had regarding gender affirming care. The provider must feel comfortable and confident in order to ensure the mutual feeling in their patients.

At the end of this research project, gender affirming care will be standard for all Advance Practice Registered Nursing Curriculums, and this question will be answered, “Among advanced practice nursing students, does inclusion of gender affirming care in the reproductive healthcare curriculum positively influence attitude toward providing gender affirming care in practice?”.

### **Methodology**

The data for this research will be obtained through quasi-experimental methods. A pre and post survey will be administered to advanced practice nursing students. The sample of students will have to be enrolled in the advanced practice registered nursing curriculum. The pre-survey will be conducted prior to the students being educated in gender affirming care during the reproductive curriculum. This survey will have questions that target the current attitudes towards gender affirming care and the LGBTQ community of the students. The data that will be acquired during this pretest will contain the baseline knowledge of the advanced practice nursing students on gender affirming care. The students will then complete the course including gender affirming care. This course will include instruction on the different pronouns and identities, the different screening exams that are necessary for each patient, how to educate patients on their unique needs, advocating for patients, how to ensure proper privacy with the patient, and how to communicate with the patient and other providers about the patient. Following the completion of this course, then will take a post-survey. They will be asked about their attitude and knowledge of gender affirming care. The data obtained from the pre- and post-survey will be compared to

evaluate the addition of this information to the curriculum. The goal would be an increase in knowledge and confidence held by the students. The weaker areas that showed less improvement can be edited to ensure a successful education for the students. This curriculum is to provide education on basic healthcare for LGBTQ patients, how to address patients, and preventative measures that need to be taught to patients. Participation in the surveys is voluntary and will not influence student grades. All students will receive the same curriculum regardless of participation in the study.

### **Design**

On April 5, 2023 a virtual meeting via Webex occurred with students and faculty of the Advanced Practice Registered Nursing and Midwifery programs at the East Carolina University College of Nursing. A four-question pre-survey was administered prior to the educational webinar. An 18-slide webinar on the basics of gender affirming care was then presented to the students. A three-question post survey was given to the students upon completion. The results of these were analyzed. The meeting consisted of 10 midwifery students and 33 advanced practice registered nursing students. A four-question pre-survey was administered. All 43 students completed the survey. Upon completion of the webinar, a three question post-survey was administered, and all 43 students completed.

### **Findings**

The results of the study were shocking. 42/43 students believed that the existing curriculum was enough to prepare them to adequately provide care to the LGBTQ+ population. This was the most shocking result from the pre-survey because the current curriculum has minimal information regarding gender affirming care. 37/43 students

answered that they were aware of the correct terms to use when communicating with the LGBTQ+ community. In the post-survey, improvement was shown. All respondents answered that following the Webex, they better understood the proper terminology to use when communicating with the LGBTQ+ population. 31/43 answered that case scenarios were the best way to learn about the LGBTQ+ population in the future. The next best way according to the students, would be in class discussions. Only one student that participated in the study answered that they would not be comfortable taking care of the LGBTQ+ population in their primary care practice.

### **Discussion**

Upon analysis of the results of the study, it seems that students in the APRN and Midwifery programs are unaware of what knowledge they do not know. The inadequacies in the curriculum at many universities has been highlighted, and the need for change is demonstrated through research. The students seem interested in learning more information and have discussed the best ways to get this information across to them.

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