



Why Not Us? Awareness, Inclusivity, and Improved Care for the LGBT Community

MARVIN ANDERSON

PUBLISHED
ABSTRACT



Statement of the Problem: Despite advances in equity for lesbian, gay, bisexual, transgender, and queer (LGBTQ) individuals in the United States, discrimination persists that continues to undermine the well-being of the community. LGBTQ community members consistently cope with this prejudice in the form of minority stressors, which impacts physical and psychological health.

Approach: We performed a quality improvement (QI) project to improve awareness of, and clinical care for, LGBTQ populations by providing education to nursing students and faculty. The intervention consisted of a digital simulation that included an LGBTQ educational perspective video and presentation. Efficacy of the intervention was measured with a pre and post survey, the Lesbian, Gay, Bisexual, and Transgender Development of Clinical Skills Scale (LGBT-DOCCS).

Findings: The sample included 35 students and faculty, with an age range from 22 to 55 and a mean age of 29.3 (SD = 8.2). Twenty-two participants were heterosexual, 12 were LGBTQ, and 1 individual preferred not to disclose their sexual preference. There was a statistically significant improvement between the pre and post LGBT-DOCCS subscale used to measure clinical preparedness ($p = .003$, $t(34) = 2.032$) and knowledge ($p = .003$, $t(34) = 2.032$) after completing the educational simulation. However, there was no statistically significant change in the attitudes subscale ($p = .351$, $t(34) = 2.032$). Qualitative data from participants revealed a range of attitudes toward LGBTQ patients. Some participants were supportive of the QI initiative and requested additional LGBTQ education with emphasis on transgender patients. Some participants acknowledged that their own beliefs play a role in their attitudes towards the LGBTQ community and their misbeliefs that identifying as transgender is a clinical mental disorder.

Conclusions and Implications: Educational simulation programs may improve LGBTQ knowledge and preparedness to manage patient needs. There is a need and desire for additional LGBTQ education to improve awareness and clinical preparedness. Using digital media with LGBTQ individuals' perspectives was an effective tool to improve awareness for LGBTQ care. More research and QI projects are warranted to identify if attitudes affect clinical outcomes and whether social factors (e.g., religion and culture) play a role in attitudes.

CORRESPONDING AUTHOR:
Marvin Anderson

ABSN Student, Phillips School of
Nursing at Mount Sinai, US
Marvin.Anderson@PSON.edu

TO CITE THIS ARTICLE:

Anderson, M. (2023). Why Not Us? Awareness, Inclusivity, and Improved Care for the LGBT Community. *Practical Implementation of Nursing Science*, 2(2), pp. 1–2. DOI: <https://doi.org/10.29024/pins.43>

COMPETING INTERESTS

The author has no competing interests to declare.

AUTHOR AFFILIATIONS

Marvin Anderson

ABSN Student, Phillips School of Nursing at Mount Sinai, US

Anderson
*Practical Implementation
of Nursing Science*
DOI: 10.29024/pins.43

2

TO CITE THIS ARTICLE:

Anderson, M. (2023). Why Not Us? Awareness, Inclusivity, and Improved Care for the LGBT Community. *Practical Implementation of Nursing Science*, 2(2), pp. 1–2. DOI: <https://doi.org/10.29024/pins.43>

Submitted: 08 November 2023

Accepted: 08 November 2023

Published: 21 December 2023

COPYRIGHT:

© 2023 The Author(s). This is an open-access article distributed under the terms of the Creative Commons Attribution 4.0 International License (CC-BY 4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See <http://creativecommons.org/licenses/by/4.0/>.

Practical Implementation of Nursing Science is a peer-reviewed open access journal published by Levy Library Press.