

Evaluation of an LGBTQ Cultural Sensitivity Presentation for Student Registered Nurse Anesthetists

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Problem

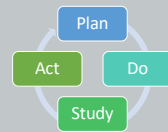
- There is a lack of LGBTQ content in nurse anesthesia curriculum, resulting in uninformed SRNAs who are not prepared to care for LGBTQ patients.
- LGBTQ patients face stigma and discrimination in the healthcare setting, resulting in delay or avoidance of seeking healthcare, thus increasing health disparities. Educating SRNAs can hopefully alleviate these barriers.

Literature Review

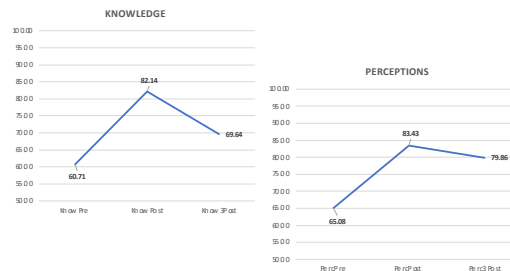
- There is currently a lack of LGBTQ education initiatives for emerging healthcare providers (across a multitude of specialties including student doctors, nurses, and other health professionals).
- Individualization of content and teaching modality according to curriculum needs, clinical area, and school resources highlights the flexibility of LGBTQ education initiatives.
- Cultural sensitivity and humility should be the central theme for educational initiatives.

Methods

Theoretical Framework
Plan-Do-Study-Act
Quality Improvement Cycle



- Convenience sampling AHU SRNAs (24 participants) through email recruitment
- Sixty-minute presentation via Zoom®
- Face-validated LGBTQ Knowledge test and validated Perception test (LGBT-DOCSS®) for pretests, immediate posttests, and 3-month posttests collected on SurveyMonkey®
- Comparison of score differences to assess for knowledge and perception change and/or retention
- Correlational analysis (Pearson R test) to assess for a relationship between change in knowledge and perception



Results

Knowledge

- Analysis of knowledge pretest/posttest scores: $t = -4.243$ and $p = 0.004$
- Analysis of immediate posttest/3-month posttest scores: $t = 1.594$ and $p = 0.155$

Perception

- Analysis of perception pretest and posttest scores: $t = -8.600$ & $p < 0.001$
- Analysis of immediate posttest and 3-month posttest scores: $t = 1.097$ & $p = 0.309$

Correlation

- Analysis between knowledge and perception pretest/posttest: $r = 0.113$; $p = 0.790$
- Analysis between knowledge and perception posttest/3month posttest: $r = -0.670$; $p = 0.069$
- No relationship between change in knowledge and change in perception

Discussion & Implications

- Results suggest knowledge and perception change and retention occurred.
- Small, final sample size ($n=8$) prevents true conclusions; instead, only suggestions and trends can be observed.
- Presentation was well-received by SRNAs, supporting implementation of LGBTQ education initiatives in nurse anesthesia curriculum with adjustments to increase or require participation.

Conclusions

- LGBTQ community is a fluid patient population, so it is imperative to ensure SRNAs enter the profession with a culturally sensitive attitude to help lessen the burden that LGBTQ patients face in healthcare settings.
- Education directed at SRNAs before entry into practice can impact the profession by upholding the AANA's and ANA's Code of Ethics.
- This project assisted in the required quality improvement that nurse anesthesia school curriculum must undergo. In this way, nursing values are upheld, and accreditation standards are fulfilled, supporting holistic care to patients of every background and lifestyle.
- Please visit the AHU Library Archives to access full paper, presentation, statistical analyses, and references.

Acknowledgements

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