

# Direct patient care experience necessary for better transgender care

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"There are simply not enough physicians comfortable with treating transgender patients," according to Joshua D. Safer, MD, FACP, associate professor of medicine at Boston University School of Medicine (BUSM). To begin to address this issue, BUSM has created a medical school elective that combines the standard approach of teaching about transgender medical topics with sensitivity and appropriate terminology with evidence-based hands-on patient care.

"We have seen that lack of knowledgeable medical providers remains the most reported barrier to good care for [transgender patients](#). Direct care experiences with transgender [patients](#) not only increases the confidence of medical providers in providing care, but more importantly provides the patient with a better experience," added Safer, who also is medical director of the Center for Transgender Medicine and Surgery at Boston Medical Center.

Transgender individuals are medically underserved in the U.S. and face many documented disparities in care due to the providers' lack of education, training and comfort. When educating medical professionals regarding transgender [medicine](#) much attention has focused on terminology and on health care disparities suffered by transgender individuals. Specific transgender medicine content in a medical school curriculum has demonstrated that it increases a students' willingness to treat transgender patients. Still, those same students are less comfortable with transgender care relative to care for lesbian, gay, and bisexual (LGB) patients.

BUSM students who participated in the standard transgender care curriculum were offered the opportunity to participate in a subsequent clinical elective providing direct care to transgender individuals. Students were surveyed before and after their elective experience regarding knowledge and comfort with transgender medical care.

After completing the elective, students who reported "high" comfort increased from 45 percent to 80 percent and students who reported "high" knowledge regarding management of transgender patients increased from 0 to 85 percent. Even motivated students who already were interested in transgender care and who already rated themselves well with transgender care saw large improvements in their scores after the direct patient care experience.

According to the researchers, it is insufficient to limit health care provider training to cultural sensitivity and to didactic teaching alone. Direct patient care experiences are necessary in transgender medicine.

"Previously, we have piloted and demonstrated the benefit of teaching transgender medicine in a format similar to how other medical topics are taught, that is, with the current science and evidence-based approaches. We have demonstrated that benefit above what is seen with students who only receive the standard teaching. The circumstance is improved further, when the students have direct care experiences," explained corresponding author Safer.

Safer believes the existing medical teaching model using evidence-based teaching along with direct patient care [experiences](#) works well for [transgender](#) medicine. "Opportunities to mandate such [teaching](#) should be sought for all medical schools."

These findings appear in the journal *Transgender Health*.

**More information:** Jason A. Park et al. Clinical Exposure to Transgender Medicine Improves Students' Preparedness Above Levels Seen with Didactic Teaching Alone: A Key Addition to the Boston University Model for Teaching Transgender Healthcare, *Transgender Health* (2018). [DOI: 10.1089/trgh.2017.0047](https://doi.org/10.1089/trgh.2017.0047)

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