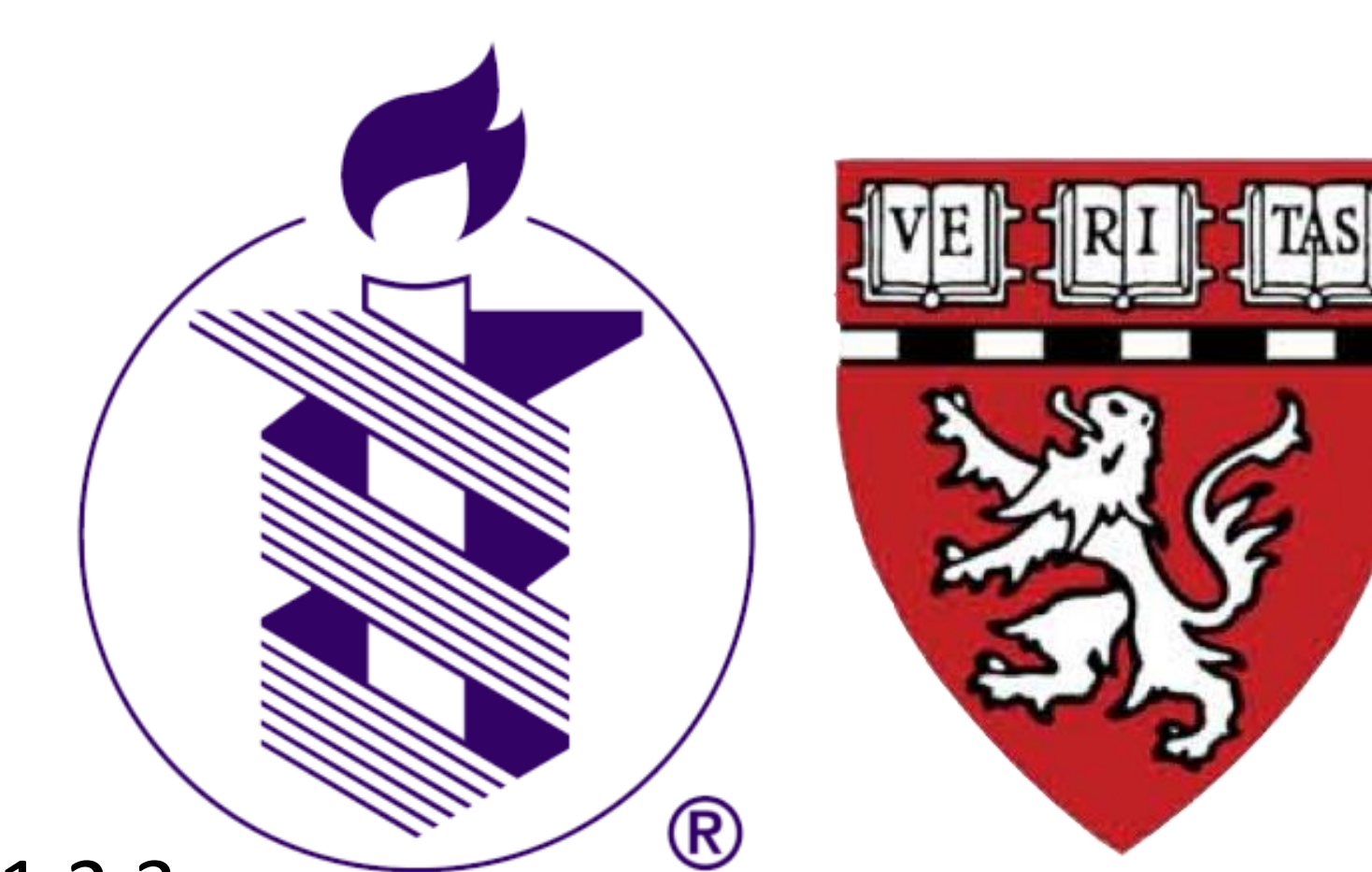


PSYCHIATRIC TREATMENT FOR GENDER MINORITIES DEPENDS UPON INTEGRATED TRANSGENDER EDUCATION IN PSYCHIATRY TRAINING



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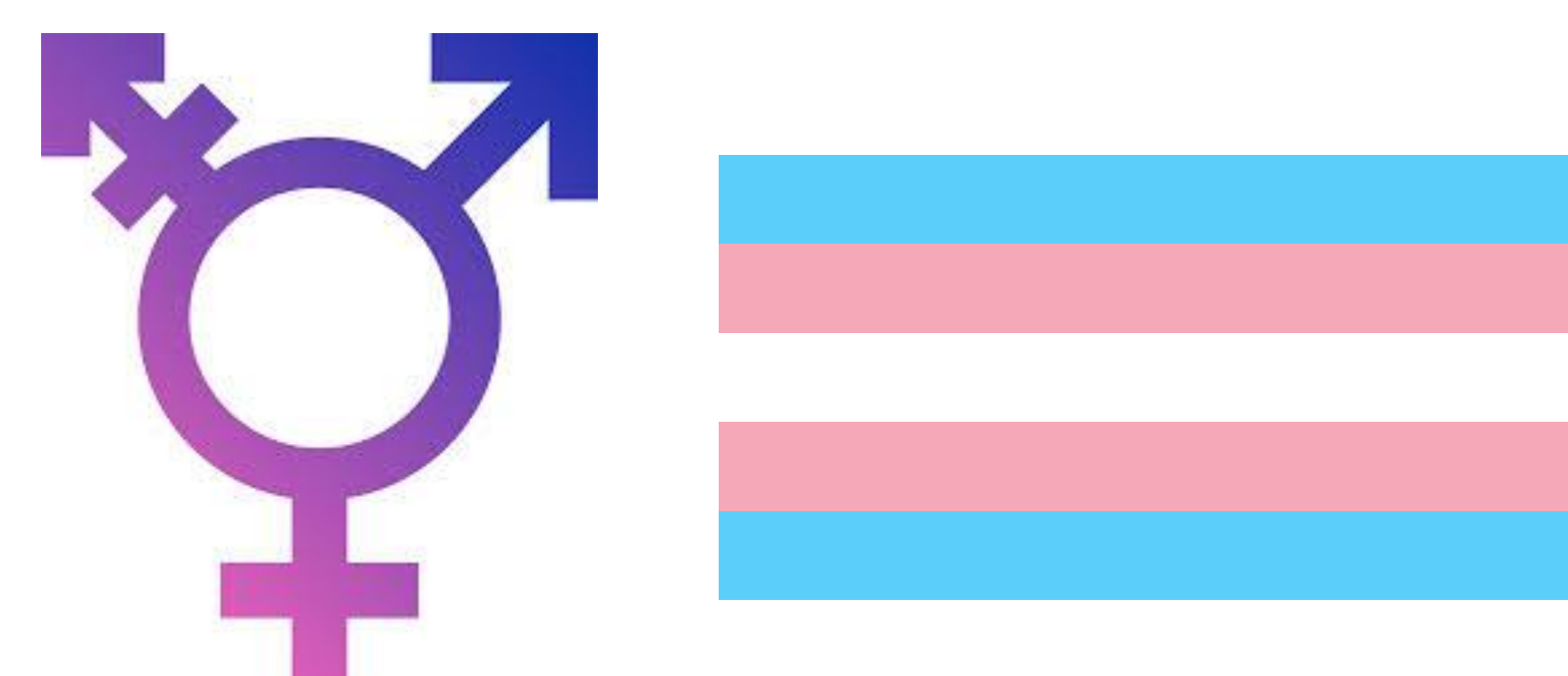
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Introduction

- Transgender individuals face multiple barriers to adequate treatment in a number of healthcare domains, including psychiatry.
- Stigma continues to exist in the general population, with less favorable self-reported attitudes towards transgender people.
- Transgender individuals face substantial mental health concerns, including high rates of suicidal ideation and attempts and completed suicide.
- Medical school curricula and other specialties have attempted to provide competent clinical care for this population. However, gaps continue to exist and this population also has unique psychiatric healthcare needs.
- In psychiatric treatment, inpatient units are often designed with heteronormative structures and gender-segregated layouts, presenting additional logistical challenges and the need for medical staff education regarding terminology, pronouns, and sensitivity elements for the transgender population.
- Within the healthcare system, surveys of transgender individuals highlight a lack of provider understanding of sexual and gender identity topics, poor treatment by medical providers, negative attitudes by clinicians, and disparities in health care for LGBT (lesbian, gay, bisexual, transgender) patients.
- Given these mental health issues and limited knowledge, skill, and attitudes of providers as reported by transgender patients, integrated education for psychiatry residents on transgender psychiatric topics is paramount.

Methods

- Literature review of current published models of training in transgender health within undergraduate and graduate medical school education including residency training programs was conducted.
- Educational models both outside and within psychiatry were examined as described in the literature.



Results

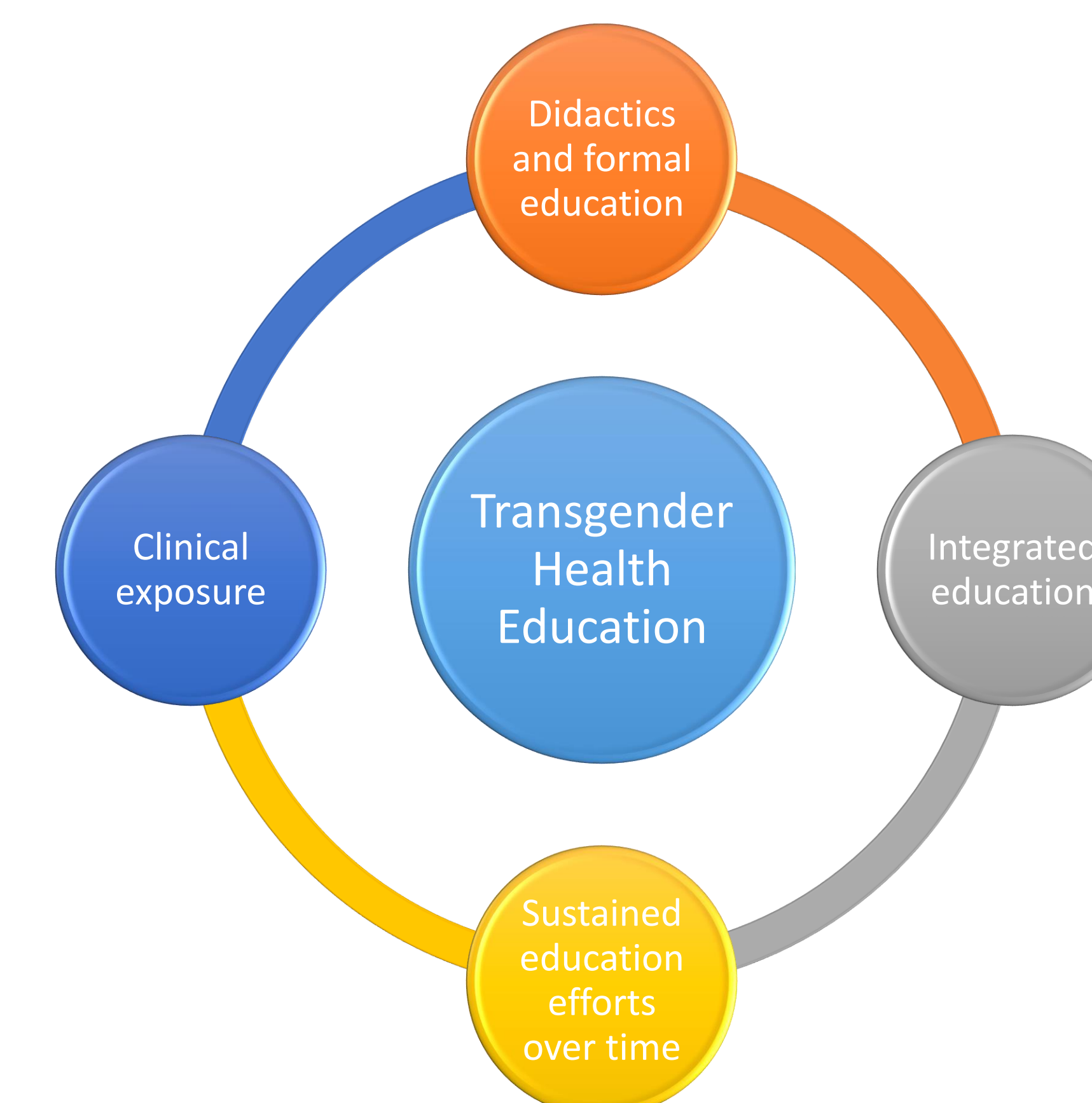
- Medical students are not satisfied with their transgender education
 - 2010 US and Canadian survey indicated a majority (70 percent) of graduate medical school students rated their LGBT education as fair, poor or very poor.
 - 2011 survey of 176 medical school deans indicated median of 5 hours of LGBT education across 4-year education.
- Given the high rates of psychiatric illness within gender non-conforming individuals, mandatory inclusion of education on transgender health is proposed in psychiatry.
 - Reduced negative attitudes correlated with clinical exposure
- Studies have emphasized the importance of clinicians developing cultural competence in transgender health including supervisory skills.
- Other specialties outside psychiatry also with increased need for education.
 - Across 160 Emergency Medicine residency programs, 26% had ever presented a specific LGBT lecture and 33% had incorporated LGBT topics in their didactic curriculum.

Conclusions

- Transgender patients in medical care should receive care provided by transliterate providers including psychiatrists.
- Education in transgender health is relevant throughout undergraduate and graduate medical education.
- Psychiatry residency has a unique need to integrate education into this domain given increased rates of psychiatric and substance use disorders.

Recommendations

- Medical education
 - Recruitment of sexual and gender minorities into the field.
 - Development of curriculum to integrate transgender education throughout lectures, small group discussions, case examples and interviewing skills.
 - Inclusion of LGBT topics in retreats.



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