BACKGROUND

- Existence of health disparities is still apparent in the lesbian, gay, bisexual, transgender, and queer (LGBTQ+) population despite an increase in visibility in recent years.
- Barriers to care include limited access, negative experiences in healthcare, and provider incompetence.
- Pharmacists are in a prime position to provide culturally-competent and inclusive care.
- The Accreditation Council for Pharmacy Education (ACPE) requires the incorporation of cultural sensitivity and awareness in the Pharm.D. curriculum.

OBJECTIVE

To assess the change in knowledge, perception, and motivation of pharmacy students to deliver culturally-competent and inclusive care to LGBTQ+ patients after completion of a cultural competency training.

METHODS

**Study Design:** Retrospective review of surveys administered pre and post LGBTQ+ cultural competency training.

**Inclusion Criteria:**

- 1st and 2nd year pharmacy student who attended LGBTQ+ Health and Cultural Competency training.
- Completion of pre-training and post-training surveys

**Outcomes Measured:** Changes in perception, willingness, and knowledge from baseline. Perception and willingness were assessed on a Likert Scale.

### RESULTS

| Knowledge regarding sexual orientation vs gender identity terminology | 1 |
| Knowledge of transgender- and nonbinary-specific terminology | 2 |
| Knowledge of health disparities in the LGBTQ+ community | 3 |
| Knowledge of social determinants of LGBTQ+ health | 4 |
| Knowledge of ways pharmacists can help reduce LGBTQ+ health disparities | 5 |
| Knowledge of using respectful, inclusive language for the LGBTQ+ community | 6 |
| Knowledge of strategies to create a welcoming environment for LGBTQ+ patients, families, and colleagues | 7 |

### DISCUSSION

Post-competency training, pharmacy students demonstrated:

- Enhancement in their perception of serving LGBTQ+ and mental health patients
- Improvement in recognition of potential barriers to care
- Increase in motivation to incorporate culturally-competent practices and provide inclusive care
- Minimal significant change in knowledge may be due to the lack of standardized cultural competency assessment tool

Limitations of the study include sample size, single-center, and the inability to assess the change in behavior.

### CONCLUSION

- Positive impact on insight and commitment to serving LGBTQ+ patients and families
- Integration of cultural competency to the current pharmacy curriculum
- Future research: Investigate the impact of competency training on the change of behavior as students progress to fourth year rotations

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### REFERENCES