

Assessing the Need for Gender Diverse Education Amongst Practicing Community Pharmacists Phase I



Madilyn Eberle, PharmD Candidate 2022¹; Madison Modany, PharmD Candidate 2022¹; Amanda Huntsman, PharmD Candidate 2022¹; Jasmine D. Gonzalvo, PharmD, BC-ADM, CDCES, FADCES^{1,2}; Carol Ott, PharmD, BCPP^{1,2}

¹ Purdue University College of Pharmacy, West Lafayette, IN; ²Eskenazi Health, Indianapolis, IN

Background

- Gender diverse people represent a marginalized population who routinely encounter challenges obtaining adequate healthcare.
- Gender diversity is described as gender identities that demonstrate a diversity of expression beyond the female or male binary framework, including transgender, transexual, and gender nonconforming persons.
- The profession of pharmacy is uniquely positioned to provide members of the gender diverse community with equitable healthcare experiences.

Accessibility of pharmacists as healthcare providers sets a precedence for their role in addressing and diminishing barriers to care faced by this population. Despite this, most pharmacy schools as well as employers lack adequate training content with respect to both medical and social needs of the gender diverse community. Education initiatives must be implemented to support the provision of trans-inclusive care to gender diverse patients. Though the role of medication therapy for the treatment of transgender patients is well understood, data examining the role of pharmacists in providing care to gender diverse patients, as well as perceptions of community pharmacists is inadequate. Integration of gender diverse care education for pharmacists and pharmacy students alike is vital in order to alter potential unfavorable patient perceptions and ensure future pharmacists are better equipped to support and care for this population.

Objectives

This state-specific needs assessment explores: 1) the frequency of community pharmacists in Indiana who have received formal training in providing gender diverse care to the transgender, transsexual, and gender nonconforming community, 2) interest in such training programs, 3) and preferred delivery format for such training programs.

Methods

- Developed a telephone-based survey adapted from previously published research
- Assessed demographics, prior participation in gender diverse training programs, future interest in training, and preferred delivery format of said program
- Identified, randomized, and generated a list of 2 independent and 5 major chain community pharmacies across Indiana
- Recruited and trained Purdue University students across various college for administration of a telephone-based survey
- Offered each pharmacist a \$5 gift card as an incentive for survey completion

Results

Figure 1: Likert Scale Responses for Preferred Training Format

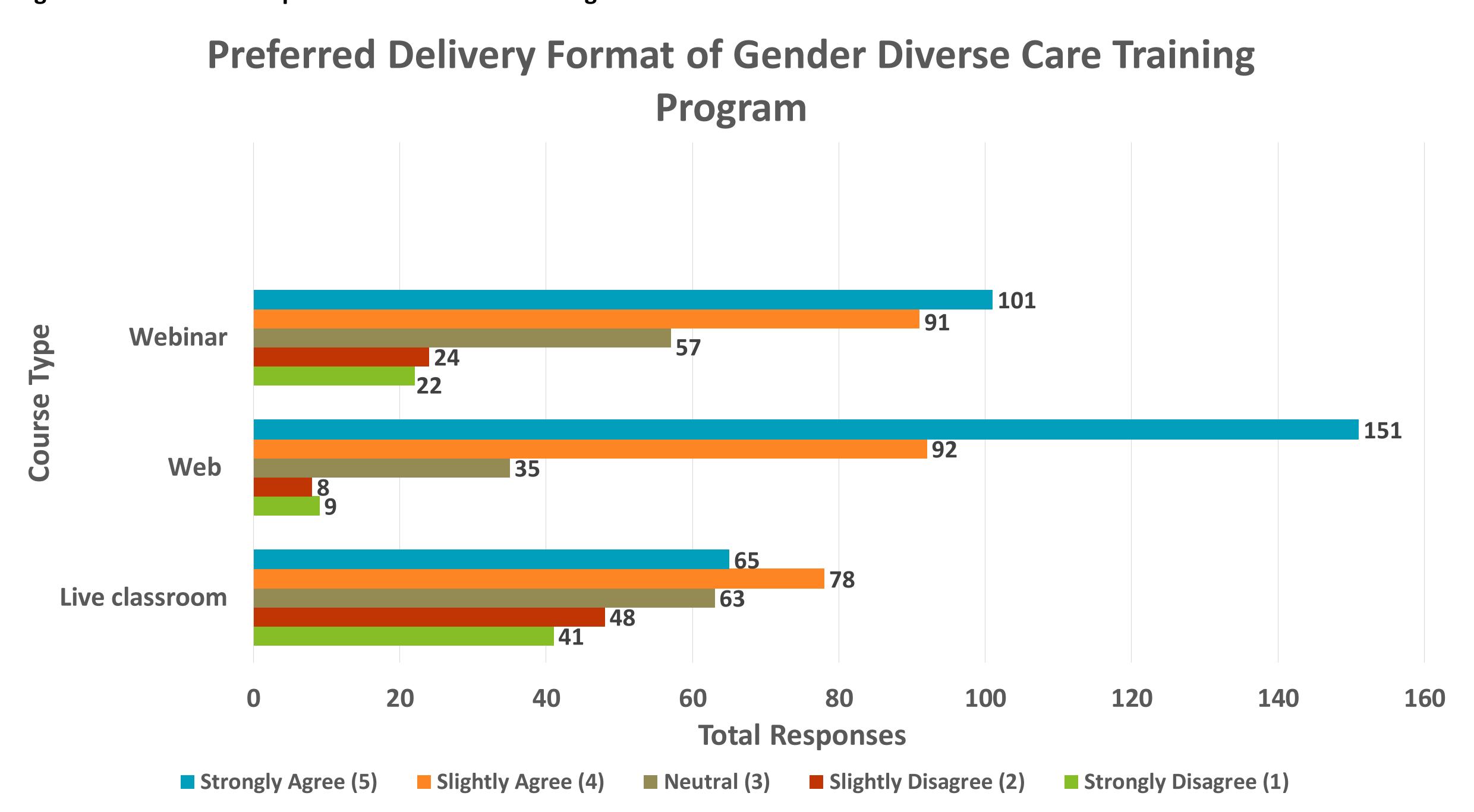


Table 1: Preferred Format of Delivery of Training

Total Participants	Web Based	Webinar Based	Live Classroom Based
300	82.4%	65.1%	47.7%

Discussion

- A total of 300 community pharmacists participated in the telephone-based survey with 183 (61%) reporting no previous engagement in formal gender diverse training program(s).
- Of respondents, 76% indicated they were interested in participating in a training program to learn basic gender diverse care terms related to healthcare and pharmacotherapy regimens.
- As shown in Table 1, pharmacists ranked their preferred format of delivery of such training in the following order: Web-based, live webinar, and a live classroom-based course.

If participants declined to respond, response was noted as "no." (296 of 300 total participants reported interest or not interested in training program)

Conclusion

- •By interviewing community pharmacists across the state of Indiana, the frequency of previous formal training(s) in gender diverse care, interest in such training programs, and preferred delivery format for such training programs will be established.
- •Currently, there is a lack of knowledge, engagement, and training surrounding gender diverse care.
- •Pharmacy schools and employers have a responsibility to develop curricula and training to support and optimize care for gender diverse individuals.

Acknowledgements

The investigators of this study received funding through the College of Psychiatric and Neurologic Foundation *Defining* the Future grant. This research was made possible by way of collaboration with LGBTQ+ organizations, in particular Transgender Resource, Education and Enrichment Service (TREES), and the Purdue University student chapter of the College of Psychiatric and Neurologic Pharmacists (CPNP).

References

Jodi Sperber MSW and MPH, Stewart Landers JD and MCP & Susan Lawrence MA (2005) Access to Health Care for Transgendered Persons: Results of a Needs Assessment in Boston, International Journal of Transgenderism, 8:2-3, 75-91, DOI: 10.1300/J485v08n02 08.

Lambda Legal. When health care isn't caring. Survey on discrimination against LGBT people and people living with HIV [document on the internet]. 2010 [cited 2013 May 15]. Kaigle A, Sawan-Garcia R, Firek A. Approach to the provision of transgender health care in a veteran population. Ment Health Clin. 2018;7:176–180.

Daniel H, Butkus R. Lesbian, gay, bisexual, and transgender health disparities: executive summary of a policy position paper from the American College of Physicians. Ann Intern Med. 2015;163:135–137.

Redfern, J. S., & Jann, M. W. (2019). The Evolving Role of Pharmacists in Transgender Health Care. *Transgender health*, 4(1), 118–130. https://doi.org/10.1089/trgh.2018.0038.