

Title:

Beliefs and Behavior of Nurses Providing Healthcare to Gay and Lesbian Individuals

Michelle Morgan, DNP

Graduate Nurse Education Demonstration Project, HonorHealth, Scottsdale, AZ, USA

Faye Gary, EdD

School of Nursing, Case Western Reserve University, Frances Payne Bolton School of Nursing,
Cleveland, OH, USA

Marilyn J. Lotas, PhD, MS, MEd, BSN

School of Nursing, Case Western Reserve University, Cleveland, OH, USA

Melanie Brewer, DNSc, MS, BSN

Center for Nursing Excellence, HonorHealth (formerly Scottsdale Lincoln Health Network), Scottsdale,
AZ, USA

Session Title:

Health Disparities in LGBTQ

Slot:

C 09: Sunday, 29 October 2017: 10:45 AM-11:30 AM

Scheduled Time:

11:05 AM

Keywords:

culturally competent nursing, health disparities and lesbian and gay individuals

References:

Healthy People. (2013). *Lesbian, gay, bisexual, and transgender health*. Washington, DC: U.S. Department of Health and Human Services.

Retrieved from <http://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health>

Institute of Medicine. (2011, March 31). *The health of lesbian, gay, bisexual, and transgender people: Building a foundation for better*

understanding [Report brief]. Washington, DC: National Academy of Sciences.

Lambda Legal. (2010). *When health care isn't caring: Lambda Legal's survey on discrimination against LGBT people and people living with HIV*.

Retrieved from <http://www.lambdalegal.org/health-care-report>

Sabin, J. A., Riskind, R. G., & Nosek, B. A. (2015). Healthcare providers' implicit and explicit

attitudes toward lesbian women and gay men. *American Journal of*

Public Health, 105(9), 1831–1844. doi:10.2105/AJPH.2015.302631

The Joint Commission. (2011). *Advancing effective communication, cultural competence, and patient- and family-centered care for the lesbian, gay,*

bisexual, and transgender (LGBT) community: A field guide. Oakbrook Terrace, IL: The Joint Commission.

Abstract Summary:

Nurses can have a positive impact on patient outcomes and in decreasing health disparities with lesbian and gay individuals by providing a safe and inclusive environment. To provide culturally competent care to lesbian and gay individuals and their families, first nurses need to assess their own beliefs and professional behavior.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
The learners will be able to list the benefits of cultural competence education to optimize providing healthcare services to gay and lesbian individuals	Explain the background and significance of this study to nurses. Review the literature. Synthesize findings of the study with the literature.
The learners will understand the future plans for culturally inclusive education for healthcare employees.	Discuss recommendations and curriculum planning.

Abstract Text:

Problem statement. The majority of persons who are lesbian, gay, bisexual, and transgender (LGBT) have experienced discrimination or fear discrimination from healthcare personnel and are therefore categorized collectively as a minority population with health disparities (Institute of Medicine, 2011; Healthy People, 2013; Lambda Legal, 2010; Sabin, Riskind, & Nosek, 2015).

Aim.To assess the beliefs and behavior of nurses when providing healthcare services to gay and lesbian individuals using the Gay Affirmative Practice (GAP) scale.

Methods. A convenience sampling of all inpatient registered nurses in a southwest urban and Magnet designated hospital system was conducted utilizing an anonymous Qualtrics survey, that included eleven demographic questions and the Gay Affirmative Practice (GAP) Scale. The Gay Affirmative Practice (GAP) Scale is a thirty-item avlid and reliable tool with a belief and a behavior domain using a five point likert scale. The GAP scale is a reflective tool of how own's beliefs can impact professional behavior. The highest possible GAP score is ond hundred and fifty. Imputations were used only if there was one or two missing data in a variable by imputing the mean. The survey results were analyzed using descriptive statistics.

Findings. Respondents were 89% female, 91% Caucasian, 90% heterosexual, and 84% Christian. Average age was 49; 76% had baccalaureate or master's degrees; 71% had a nursing certification; 86% had friends or family members who are gay or lesbian; and 61% believed a cultural competence course would benefit them professionally. The mean GAP score was 110. Belief scores were higher than behavior scores (63 and 49, respectively, of 75 total in each category), likely representing nurses' positive beliefs and their requirement for education to increase behavior scores.

Conclusions. Recommendations include development of a valid and reliable assessment tool that has language more reflective of nursing and is inclusive of bisexual and transgender individuals. Replicating the study with diverse nurses throughout the nation. Provide cultural competence courses with definitions of LGBT terminology and how to ask sexual orientation and gender identity questions in an inclusive and optimal manner.

