

# LGBTQ+ Barriers in Physical Therapy Education and Practice: A Qualitative Study from the Patients' Perspective

Authors: Hofmann M, Mulligan N, Stevens K, Klutz T, Liddell M, Saul C, Jenson G, Bell K, Condran C, Miller T

## INTRODUCTION

- The LGBTQ+ community faces barriers in seeking medical treatment
- Only two studies exist examining LGBTQ+ cultural competence among Physical Therapists
- Problem: Examine the patient experiences of the LGBTQ+ community

## METHODS

- Twenty-three subjects were sampled using convenience and snowball sampling through social media and contacting LGBTQ+ advocacy organizations.
- Exploratory Qualitative Study using semi-structured interview questions centered on experiences, thoughts, perceptions, and opinions
- Constant comparative process to gather common themes
- Analyst triangulation and reflexive member checking to ensure validity and credibility

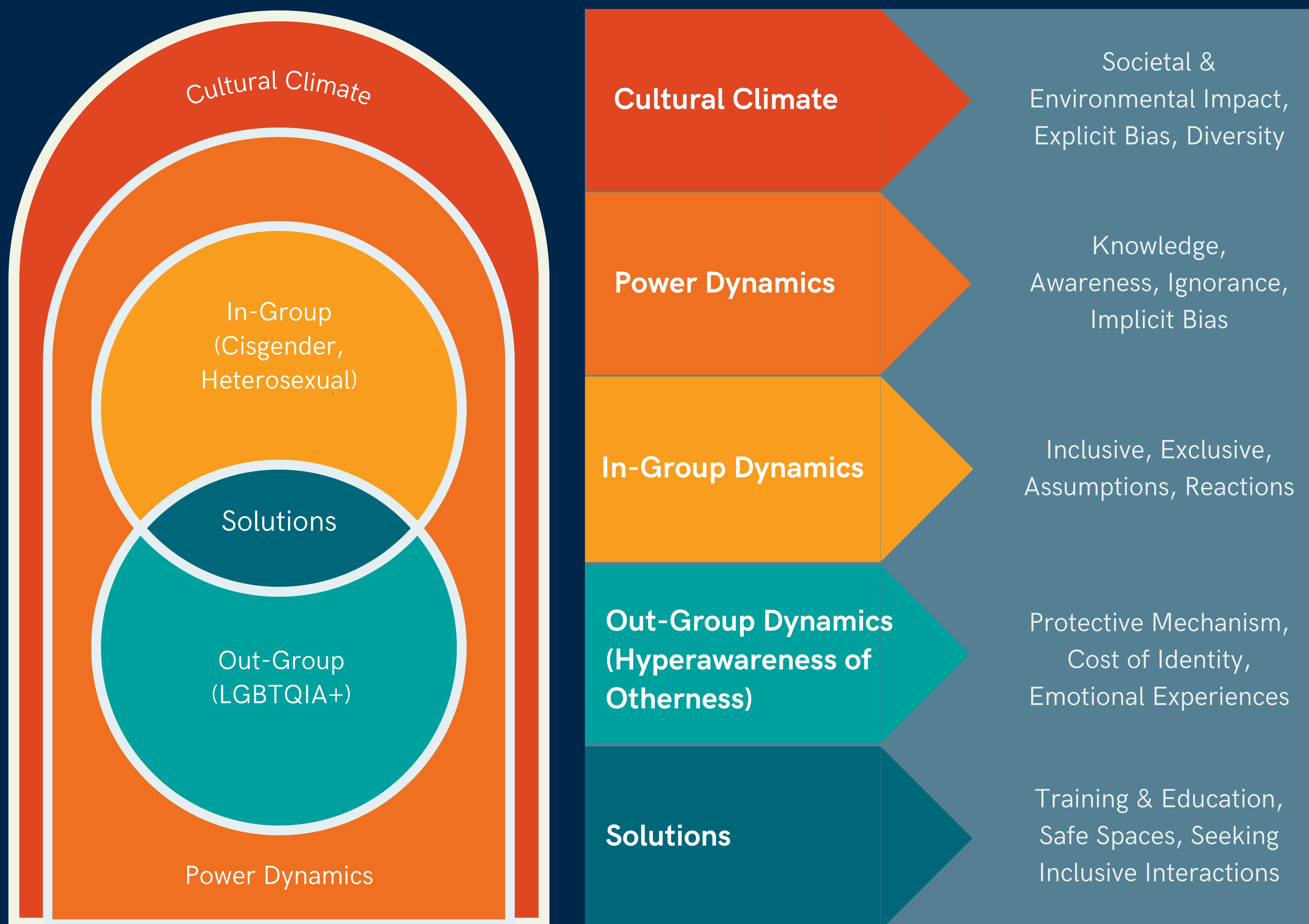
## INCLUSION/EXCLUSION CRITERIA:

- Identifies as a member of the LGBTQ+ community, over the age of 18, and has received physical therapy services

## LIMITATIONS

- Recruitment of vulnerable populations via snowball sampling provided a limited sample size
- Decreased geographical and racial diversity diminished the generalization of the results
- Inherent bias of facilitators due to personal relationships with the research content

# AWARENESS OF UNDERLYING ISSUES IN LGBTQ+ PATIENT EXPERIENCES WILL ASSIST IN THE DEVELOPMENT OF SOLUTIONS TO INCREASE CULTURAL COMPETENCE.



A physical therapist's level of cultural competence is influenced by the cultural climate, creating power dynamics that affect LGBTQ+ patients' comfort, trust, and perception of care.

## RESULTS

### Cultural Climate:

- "There isn't a desire to gain competency in that area because the values may not be aligned, where they feel like we should have certain rights, including the right to be treated well in a health care setting, unfortunately."

### Power Dynamics:

- "If you work in healthcare, it's your primary goal to serve other people, and it's not just other people with the same political views or sexual orientation or gender identity, just people."

### In-Group Dynamics:

- "I don't have to put your confusion on me. Your confusion is yours. And I get that you're confused, but I'm not going to feel bad because you're confused. That's yours to figure out."

### Out-Group Dynamics (Hyper-Awareness of Otherness):

- "In terms of touching my body, I could just sense the tension in them...it was centered around the fact that I would say my partner, and then they would make an assumption that would lead to them misgendering them."

### Solutions:

- "Not only is it physical care, seeing yourself present, seeing yourself on a list of options to be chosen from, I think that affects your mental health. It makes you feel seen and makes you feel, you know, more comfortable where you're at."

## DISCUSSION/CONCLUSION

- The literature supports proposed solutions by patients, including increased training, gender-inclusive forms, and bias-free language.
- Providers with education or experience with this community enhance the patient experience.
- Our study agrees with previous literature regarding minority stress and the use of coping strategies to regulate or modify socially unsafe experiences

## REFERENCES



## ADDITIONAL QUOTES

