



Presidential Memorandum

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Announcing a New Resource to Improve Health Care for People Who Are LGBT, Gender Nonconforming, or Born with Differences of Sex Development

I am pleased to announce the publication of [*Implementing Curricular and Institutional Climate Changes to Improve Health Care for Individuals Who Are LGBT, Gender Nonconforming, or Born with DSD: A Resource for Medical Educators*](#). This groundbreaking publication represents a major step forward in giving medical schools, academic medical centers, and other health organizations a roadmap for improving care for people who are lesbian, gay, bisexual, transgender (LGBT), and those with differences in gender identity, gender expression, and sex development. The product of nearly three years of intense work by the AAMC Advisory Committee on Sexual Orientation, Gender Identity, and Sex Development, the publication outlines a set of competency guidelines that address health-related issues of gender identity, gender expression, sexual orientation, and sex development. To reduce health disparities and improve the health of our patients and students, all providers must address the specific needs of these populations, and health care institutions must promote a climate that supports, values, and includes individuals in these populations. Training in these areas will help ensure that physicians have the knowledge, skills, and attitudes necessary to care for these populations. This training also will create an atmosphere where patients can talk about their complete health and history comfortably and honestly, opening the door to more comprehensive care for all.

To download the publication, please visit <http://offers.aamc.org/lgbt-dsd-health> (print copies of the publication will be available in early 2015). To watch a video of project highlights, please visit www.vimeo.com/111221510.

Next Steps: The Road Ahead

While this document represents the culmination of many minds and years of study, analysis, and consensus-building, it is not an end product in itself. It is just one step on a long road to a more inclusive health care system and better patient care for all.

The AAMC remains committed to this ongoing work. In January 2015, the AAMC will launch a faculty development video series on providing high-quality care to individuals who are LGBT,

gender nonconforming, or born with DSD. This series will give medical school faculty the specific skills needed to teach students the relevant competencies involved in providing appropriate, effective care.

The advisory committee will continue to meet the needs of these patient populations and develop new tools and programs to help care for them. Plans for curricular workshops, outreach to other professional organizations, and a second edition of this publication already are underway. Other important goals for the future include extending these competencies to graduate medical education and allied professions, promoting interprofessional learning, and developing innovative curricular programs that incorporate patients' voices.

We make the most progress when we work together to share ideas and innovations. I encourage each and every member institution to take a careful look at this document to see how they can use it as a platform for institutional change.

I also encourage member institutions to share their expertise and experience in several ways:

- Contributing to the three sections of the [MedEdPORTAL® LGBT and DSD Health Project](#)
- Sharing ideas for the second edition of this publication
- Participating in the many programs and committees that make up the AAMC
- Encouraging qualified institutional champions and student leaders to apply for open positions on the advisory committee or specific ad-hoc committees

This publication represents an enormous step toward achieving more patient-centered and inclusive care for patients who identify as members of these groups, as well as more effective and compassionate care for every patient. When we as institutions produce physicians who can demonstrate competency in sensitively, effectively, and efficiently meeting the health care needs of individuals who are or may be LGBT, gender nonconforming, and/or born with DSD, we can be confident that our graduates will be competent to treat all patients with the respect and dignity they deserve.

If you would like to explore partnerships, please contact Marc A. Nivet, Ed.D., M.B.A., chief diversity officer, at diversity@aamc.org or 202-741-6478. To learn about advisory committee projects, share promising practices or thoughts for the second edition, or inquire about committee membership, please contact Tiffani St.Cloud, C.P.C., lead program management specialist, at tstcloud@aamc.org or 202-828-0891.

Background: The Need for Change

An estimated 11 million Americans identify as LGBT. Another 500,000 to 1 million are born with differences of sex development (DSD). These individuals face a host of challenges when seeking medical care. Fifty-six percent of lesbian, gay, and bisexual patients and nearly 70 percent of transgender patients report experiencing discrimination when seeking care in our nation's hospitals, doctor's offices, emergency departments, and other health care settings. Patients born with DSD often receive excessive medical treatment—often based on incomplete evidence or provider bias. These negative experiences lead patients to avoid health care providers, even when they desperately need medical care.

As a result, people in these populations are more likely to suffer from poor physical, mental, and behavioral health. They have higher rates of clinical depression, suicide, cardiovascular disease, obesity, addiction disorders, and some forms of cancer.

We also see evidence of this in our own medical student populations. Data from AAMC medical student surveys show that one-fifth of medical school students know of discrimination against or mistreatment of LGBT students at their own institutions. These same surveys reveal that lesbian, gay, and bisexual medical students themselves report experiencing discrimination as well as higher rates of emotional distress and social isolation than other students.

The Beginnings of Progress

The AAMC has long recognized the need to provide appropriate care for these populations:

- From 2005 to 2006, the AAMC Organization of Student Representatives (OSR) and Group on Student Affairs (GSA) conducted a survey of medical school students and student affairs deans on the institutional culture and educational environment related to LGBT health. The survey found that 50 percent of medical school students felt their training did not prepare them to care for LGBT patients.
- In 2007, based upon the findings of the OSR and GSA surveys, I issued a presidential memo on behalf of the AAMC Board of Directors calling for member institutions to ensure that faculty and new medical school graduates “treat each patient with dignity and respect, regardless of the patient’s sexual orientation or gender identity,” and to “respond effectively, compassionately, and professionally to the needs of all patients.”
- In 2012, with funding from the Josiah Macy Jr. Foundation, the AAMC convened an Advisory Committee on Sexual Orientation, Gender Identity, and Sex Development comprising medical education experts to develop a set of consensus-driven educational goals to directly address the clinical care of these populations.

In addition, several of our member institutions have made great progress toward creating inclusive climates and curricula to more closely meet the needs of students, faculty, staff, and patients alike.

However, until this publication, there had been no comprehensive set of competencies and guidelines for medical education as a whole to address these concerns. As such, our member institutions have lacked guidance to direct curricular and institutional climate changes that will result in meeting the appropriate care needs specific to these populations.

Implementing Curricular Change

The AAMC’s groundbreaking publication fills this gap by building on solid educational and assessment practices and theories. As the health professions in general move toward a more accountable competency-based system of education, the guidance set forth in the document is based on the 58 competencies in eight domains outlined by Robert Englander, M.D., M.P.H. and colleagues in *Academic Medicine* in 2013.

The advisory committee examined these competencies through the lens of LGBT, gender nonconforming, and DSD health to formulate 30 new competency examples within a curricular framework to illustrate the knowledge, skills, and attitudes medical students must demonstrate in order to provide safe, effective, patient-centered care to all people, regardless of their sexual orientation, gender identity, gender expression, or sex development.

In addition, the publication assists institutions in implementing curricular and climate change in medical education institutions or programs by:

- Providing background information about the health needs of individuals who are LGBT, gender nonconforming, and/or born with DSD, and the role of academic medicine and the health care system in supporting these populations
- Discussing how to integrate this content into medical education, with a focus on the role of institutional climates
- Suggesting frameworks to facilitate assessment of learners, curricula, and institutions
- Highlighting national resources and curricular innovations within academic medicine

Media Coverage

To read preliminary media coverage of this project, please visit:

- [Slate](#): Doctor, Let's Talk about Sex ... and Gender
- [The Atlantic](#): What Doctor's Don't Know About LGBT Health
- [NPR](#): Training the Next Generation of Doctors to Get LGBT Health Right
- [Fierce Healthcare](#): AAMC: Integrate Training on Treating LGBT Patients into Med School Classes
- [Becker's Hospital Review](#): 5 Ways for Physicians to Be More LGBT-friendly
- [MEDCITY News](#): The Association of American Medical Colleges Says LGBT Curricula is a Must

For media or press-related inquiries, please contact Brooke Bergen, public relations manager, at bbergen@aamc.org or 202-828-0419.

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