LGBTQ Baseline Knowledge and Attitudes

Approximate time: 10 min

Surveys were administered on optical answer sheets (i.e. bubble sheets), were completed anonymously, and were administered as part of the Introduction to Clinical Medicine (ICM) course curriculum. Please find the question set on the next page.

1. How old are you?
   1. <20
   2. 20-24
   3. 25-29
   4. 30-34
   5. 35+
2. What sex were you assigned at birth, on your original birth certificate?
   1. Male
   2. Female
   3. Other
3. What is your current gender identity?
   1. Male
   2. Female
   3. Transmale/Transman
   4. Transfemale/Transwoman
   5. Genderqueer/Other
4. What racial group do you consider yourself to be in?
   1. Black or African American
   2. Native American or Alaskan Native
   3. Asian or Asian American
   4. White
   5. Another race or multiple races
5. Do you identify as Latina/o/x or Hispanic?
   1. Yes
   2. No
6. What is your current sexual orientation?
   1. Heterosexual
   2. Bisexual
   3. Lesbian/Gay
   4. Queer
   5. Other
7. What is your current religious identity? (None/Atheist/Agnostic, leave blank):
   1. Christian
   2. Jewish
   3. Hindu
   4. Islam
   5. Other
8. Undergraduate Major Category:
   1. STEM (Science, Technology, Engineering, Mathematics, etc)
   2. Humanities (Language, Art, Art History, Music, etc.)
   3. Social Sciences (Psychology, Sociology, Anthropology, etc.)
   4. Both STEM and Humanities/Social Sciences
   5. Other
9. Have you earned any of the following degrees beyond the baccalaureate level?
   1. Masters, STEM (Science, Technology, Engineering, Mathematics, etc)
   2. Masters, Humanities (Language, Art, Art History, Music, etc.)
   3. Masters, Social Sciences (Psychology, Sociology, Anthropology, etc.)
   4. Masters, Public Health or Social Work
   5. Other
10. How many of your close friends or family members are members of the LGBTQ (lesbian, gay, bisexual, transgender, and queer) community?
    1. None
    2. 0-5
    3. 5-10
    4. 10+

**Please make your best guess if you are not sure.**

1. Birth Sex is defined as:
   1. One’s internal sense of being male, female, neither of these, both, or other gender(s).
   2. The physical manifestation of one’s gender identity through clothing, hairstyle, voice, body shape, etc. (typically referred to as masculine or feminine).
   3. **The classification of people as male, female, intersex, or another sex, often based on physical anatomy and/or genetic testing.**
   4. A person’s physical, romantic, emotional, aesthetic, and/or other form of attraction to others.
2. Gender Identity is defined as:
   1. The assignment and classification of people as male, female, intersex, or another sex assigned at birth often based on physical anatomy at birth and/or genetic testing.
   2. **One’s internal sense of being male, female, neither of these, both, or other gender(s).**
   3. The physical manifestation of one’s gender identity through clothing, hairstyle, voice, body shape, etc. (typically referred to as masculine or feminine).
   4. A person’s physical, romantic, emotional, aesthetic, and/or other form of attraction to others.
3. Gender Expression is defined as:
   1. The assignment and classification of people as male, female, intersex, or another sex assigned at birth often based on physical anatomy at birth and/or genetic testing.
   2. One’s internal sense of being male, female, neither of these, both, or other gender(s).
   3. A person’s physical, romantic, emotional, aesthetic, and/or other form of attraction to others.
   4. **The physical manifestation of one’s gender identity through clothing, hairstyle, voice, body shape, etc. (typically referred to as masculine or feminine).**
4. Sexual Orientation is defined as:
   1. The assignment and classification of people as male, female, intersex, or another sex assigned at birth often based on physical anatomy at birth and/or genetic testing.
   2. One’s internal sense of being male, female, neither of these, both, or other gender(s).
   3. **A person’s physical, romantic, emotional, aesthetic, and/or other form of attraction to others.**
   4. The physical manifestation of one’s gender identity through clothing, hairstyle, voice, body shape, etc. (typically referred to as masculine or feminine).
5. In federally funded medical settings, a patient’s right to be addressed by the name and pronoun they currently use is protected by law.
   1. **True**
   2. False

**Please indicate to what degree you agree or disagree with the following:**

**A. Strongly Disagree B. Disagree C. Neutral D. Agree E. Strongly Agree**

1. Same-sex and same-gender attraction are natural variants of human attraction.
2. Discordance between birth sex and gender identity is a natural human phenomenon.
3. I feel comfortable with the idea of treating lesbian, gay, and bisexual people.
4. I would prefer not to treat patients with minority sexual orientation.
5. I feel comfortable with the idea of treating transgender (ie. transmen, transwomen, non-binary, genderqueer, etc.) patients.
6. I would prefer not to treat patients with gender identity or expression that is discordant from birth sex.
7. When meeting a patient for the first time, I feel comfortable asking what pronoun they use.
8. I am able to empathize with the life experience of an LGB/T patient.
9. LGB/T populations have unique health risks and health needs.
10. LGB/T patients deserve the same level of quality care from medical institutions as heterosexual patients.
11. Physicians in all settings have a responsibility to treat LGB/T patients.
12. As a future physician, I feel it is important for me to know about my patients’ sexual orientation, sexual practices, and gender identity.
13. There are legitimate and acceptable reasons for a patient to choose NOT to disclose certain gender or sexuality information.
14. I feel I would speak up for colleagues who identify as LGBTQ in order to cultivate an inclusive workplace (ie. employee nondiscrimination clauses, comprehensive domestic partner benefits, trans-inclusive health insurance coverage).
15. I am motivated to seek out opportunities to learn more about LGBTQ-specific health care issues.

Sources:

Questions: 16, 17, 25, 26, 28

Sanchez, N. F., Rabatin, J., Sanchez, J. P., Hubbard, S., & Kalet, A. (2006). Medical students' ability to care for lesbian, gay, bisexual, and transgendered patients. Family Medicine, *38*(1), 21.

Questions 18-21, 24, 27

Kelley, L., Chou, C. L., Dibble, S. L., & Robertson, P. A. (2008). A critical intervention in lesbian, gay, bisexual, and transgender health: knowledge and attitude outcomes among second-year medical students. *Teaching and learning in medicine*, *20*(3), 248-253.

Questions 23, 30

Kidd, J. D., Bockting, W., Cabaniss, D. L., & Blumenshine, P. (2016). Special-“T” training: extended follow-up results from a residency-wide professionalism workshop on transgender health. *Academic Psychiatry*, *40*(5), 802-806.

Questions 25, 26, 28

Yedidia, M. J., Berry, C. A., & Barr, J. K. (1996). Changes in physicians' attitudes toward AIDS during residency training: a longitudinal study of medical school graduates. *Journal of health and social behavior*, 179-191.