BACKGROUND

In November 2010, AAMC leaders developed a subcommittee dedicated to encouraging medical schools to provide students with resources to foster a welcoming and equitable environment for Lesbian, Gay, and Bisexual or Transgender (LGBT) patients in health care settings. “Having LGBT instruction in the curriculum improves the social and educational climate through direct education,”

Directors for the MS-2 year Advanced Medical Interviewing (AMI) course and the SP Program Director undertook a case development project with a multi-perspective approach to meet this unique curricular need.

CASE CONTENT

“End of life care” and the unique issues faced by same-sex couples surrounding a situation when one partner is terminally ill with lung cancer was determined to be the setting for the case.

Cultural knowledge was gained by enlisting two members from the LGBT community with different backgrounds: an SP and a medical student.

This provided the case content with
• A multifaceted cultural perspective
• Realistic details and emotional direction to the SPs that would be otherwise difficult to reproduce with veracity

CONSTRUCT METHOD

The sequence in case development over a three-month period of time was as follows:
• Meeting with all parties involved to determine specific learning objectives and portraying issues related to case focus and materials deadlines
• Producing the case draft by medical student and SP
• Reviewing of draft by course directors and SP program director leading to case modifications
• Creating the “facilitator’s guide” to ensure understanding of defined learning objectives and portraying issues related to case focus and materials deadlines
• Conducting multiple role-play sessions with case writers, SPs, and faculty facilitators, resulting in important revisions to the case

RESULTS

This collaboration resulted in high quality instructional materials, the authenticity of which helped to increase buy-in from learners, SPs and faculty facilitators.

SP Comments (Case-Specific):
“The facilitator patiently persisted to lead each student to recognize and deal with the unspoken issue in the room - that we are a gay couple and this poses concerns and problems specific to gay couple in such circumstances.”

Faculty Comments (Case-Specific):
“extremely realistic and believable”
“fairly and emotionally well demonstrated relationship”
“believable portrayal without being a caricature or stereotype. Awesome.”

Course Director Comments (Case-Specific):
“Working with LGBT content experts exponentially enhanced the quality and validity of this case as an educational tool. The model of collaborating with those from the community (i.e. folks who have personal experience with the cultural context in which this case takes place) is one that we will use with other new cases we develop. After this experience, doing otherwise would seem sub-par.”

Student Comments (From Overall Course Evaluation):
“The cases were interesting and VERY realistic. They brought up interesting topics that my group actually discussed on our own outside of class like drug use, rape, confidentiality, end of life care etc…”

“Some of the cases were really good e.g. the rape case, STD, and breaking bad news”

CONCLUSIONS

This project produced a well-developed case that met a specific curricular need. It was reported to support realistic and accurate depictions of barriers same sex couples faced with end-of-life care and medical decision making.

Additionally, it satisfied important LCME imperatives for ED-22:
“Medical students in a medical education program must learn to recognize and appropriately address gender and cultural biases in themselves, in others, and in the process of health care delivery.”

Participants in this project discovered the benefits of involving medical students and other community members in the construction of engaging educational materials grounded in real life experiences.

We plan to continue this collaborative approach by developing a case with individuals from the deaf community for the 2013 Advanced Medical Interviewing class.

REFERENCES


For additional information contact:
valerie.fulmer@medschool.pitt.edu
412-648-6762