

# Adapting the Extension for Community Health Outcomes (ECHO) Educational Model to Support Interprofessional Education Experiences

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## BACKGROUND

**ACPE Standard 11: Interprofessional Education (IPE):** The curriculum prepares all students to provide entry-level, patient-centered care in a variety of practice settings as a contributing member of an interprofessional team. In the aggregate, team exposure includes prescribers as well as other healthcare professionals.

**CODA Accreditation Standards:** Comprehensive Patient Care

- Ensure that patients' preferences and their social, economic, emotional, physical, and cognitive circumstances are sensitively considered
- Teamwork and cost-effective use of well-training allied dental personnel are emphasized

**Healthy People 2030:** Emphasized the importance of inclusive health services for LGBTQ+ individuals, recognizing unique disparities in systemic and oral health care

### Extension for Community Outcomes (ECHO) Program

Educational model that helps to "reduce disparities in care by providing case-based learning to enhance mastery of complex information and increase practice impact."

## METHODS

### Four-Part LGBTQ+ Student Centric ECHO Series

- Session 1:** Social identity, determinants of health, and minority stress
- Session 2:** Emotional intelligence, language, and interpreting bias
- Session 3:** LGBTQIA+ communities and bias
- Session 4:** Trauma informed care, conflict, and hard conversations



### Student Centric ECHO Series (SCES)

## RESULTS

| Characteristic   | Doctor of Dental Surgery (DDS), N = 21 <sup>1</sup> | Doctor of Pharmacy (PharmD), N = 133 <sup>1</sup> |
|--|---|---|
| <b>Demographics</b>  |   |   |
| Age  | 25.00 (21.00, 32.00)                                | 22.00 (21.00, 28.00)                              |
| <b>Sexual orientation</b>  |   |   |
| Bisexual   | 4 (19%)   | 10 (7.5%)   |
| Gay (men who love men)   | 2 (9.5%)  | 2 (1.5%)  |
| Lesbian (women who love women)   | 0 (0%)  | 3 (2.3%)  |
| Pansexual  | 0 (0%)  | 1 (0.8%)  |
| Queer  | 1 (4.8%)  | 1 (0.8%)  |
| Straight (heterosexual)  | 14 (67%)  | 112 (84%)   |
| Prefer not to answer   | 0 (0%)  | 4 (3.0%)  |
| <b>Pronouns</b>  |   |   |
| He/Him   | 5 (24%)   | 43 (33%)  |
| He/Him, They/Them  | 0 (0%)  | 1 (0.8%)  |
| She/Her  | 15 (71%)  | 80 (61%)  |
| She/They   | 1 (4.8%)  | 0 (0%)  |
| Prefer not to answer   | 0 (0%)  | 7 (5.3%)  |
| <b>Gender identity</b>   |   |   |
| Cisgender Female   | 15 (71%)  | 82 (62%)  |
| Cisgender Male   | 5 (24%)   | 45 (34%)  |
| Nonbinary/ Genderfluid / Genderqueer   | 1 (4.8%)  | 0 (0%)  |
| Decline to answer  | 0 (0%)  | 6 (4.5%)  |
| <b>Sex assigned at birth</b>   |   |   |
| Female   | 16 (76%)  | 84 (64%)  |
| Male   | 5 (24%)   | 46 (35%)  |
| Decline to answer  | 0 (0%)  | 2 (1.5%)  |
| <b>LGBTQIA+ Content in the Curriculum</b>  |   |   |
| <b>How many total hours are dedicated to instruction on LGBTQIA+ specific content in the curriculum?</b> |   |   |
| Less than 1 hour   | 4 (25%)   | 4 (3.8%)  |
| 1-2 hours  | 8 (50%)   | 15 (14%)  |
| 3-5 hours  | 3 (19%)   | 42 (40%)  |
| 6-10 hours   | 1 (6.3%)  | 25 (24%)  |
| More than 10 hours   | 0 (0%)  | 18 (17%)  |
| <b>Please specify how the LGBTQIA+ specific content was covered in the curriculum.</b>                   |   |   |
| Case studies and scenarios   | 0 (0%)  | 31 (25%)  |
| Educational videos or multimedia   | 0 (0%)  | 3 (2.4%)  |
| Guest speakers from LGBTQIA+ community   | 3 (14%)   | 32 (26%)  |
| Lectures and presentations   | 11 (52%)  | 40 (33%)  |
| Small group discussions  | 1 (4.8%)  | 4 (3.3%)  |
| Other  | 1 (4.8%)  | 13 (11%)  |
| I don't know   | 5 (24%)   | 0 (0%)  |
| <b>Importance of learning more about the following topics in health equity</b>                           |   |   |
| <b>Stigma</b>  |   |   |
| Agree/Interested   | 18 (86%)  | 86 (65%)  |
| Disagree/Uninterested  | 2 (9.5%)  | 21 (16%)  |
| Neutral/Undecided  | 1 (4.8%)  | 26 (20%)  |
| <b>Cultural humility</b>   |   |   |
| Agree/Interested   | 18 (86%)  | 101 (76%)   |
| Disagree/Uninterested  | 2 (9.5%)  | 9 (6.8%)  |
| Neutral/Undecided  | 1 (4.8%)  | 23 (17%)  |

<sup>1</sup>Median (Minimum, Maximum); n (%)

## RESULTS COT'D

| Item  | Doctor of Dental Surgery (DDS), N = 21 <sup>1</sup> | Doctor of Pharmacy (PharmD), N = 133 <sup>1</sup> |
|---|---|---|
| <b>LGBTQIA+ inclusivity and education at the educational institution</b>  |   |   |
| <b>The school has any process/mechanism to address gender discrimination in-house and to help patients address gender discrimination experienced in general</b> |   |   |
| Agree   | 7 (33%)   | 75 (57%)  |
| Disagree  | 8 (38%)   | 5 (3.8%)  |
| Neutral/Undecided   | 6 (29%)   | 52 (39%)  |
| <b>LGBTQIA+ community is represented well at each table and a part of all conversations in my institution</b>   |   |   |
| Agree   | 1 (4.8%)  | 60 (45%)  |
| Disagree  | 11 (52%)  | 17 (13%)  |
| Neutral/Undecided   | 9 (43%)   | 55 (42%)  |
| <b>My institution has an explicit mission (with objectives) on serving gender minority people</b>   |   |   |
| Agree   | 4 (19%)   | 74 (56%)  |
| Disagree  | 5 (24%)   | 14 (11%)  |
| Neutral/Undecided   | 12 (57%)  | 44 (33%)  |
| <b>My school has physical spaces and information/materials affirming to LGBTQIA+ people</b>   |   |   |
| Agree   | 4 (19%)   | 100 (76%)   |
| Disagree  | 6 (29%)   | 4 (3.0%)  |
| Neutral/Undecided   | 11 (52%)  | 28 (21%)  |
| <b>I have received specific training or education on providing care to LGBTQIA+ patients</b>  |   |   |
| Agree   | 4 (19%)   | 94 (71%)  |
| Disagree  | 7 (33%)   | 8 (6.1%)  |
| Neutral/Undecided   | 10 (48%)  | 30 (23%)  |
| <b>There are specific elective courses or modules dedicated to LGBTQIA+ related topics at my educational institution</b>  |   |   |
| Agree   | 10 (48%)  | 70 (53%)  |
| Disagree  | 3 (14%)   | 8 (6.1%)  |
| Neutral/Undecided   | 8 (38%)   | 53 (40%)  |

## CONCLUSIONS

Comparison of LGBTQIA+ inclusivity and education between the Doctor of Dental Surgery (DDS) and Doctor of Pharmacy (PharmD) programs reveals significant differences in several areas. Notable differences between the two programs include:

- Available processes/mechanisms to address gender discrimination
- LGBTQIA+ community being included in important institutional conversations
- Structure and time for how LGBTQIA+ content is covered in the curriculum
- Having received specific training or education on providing care to LGBTQIA+ patients

Notable similarities include their agreement on the importance of learning about LGBTQIA+ Stigma and Cultural Humility

Regardless of the differences for how LGBTQIA+ content is covered in DDS and PharmD curricula, the Student Centric ECHO Series can play an important role for providing or supplementing student learning related to the LGBTQIA+ community