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Original Research Paper

Exploring the Knowledge and Attitude of Nurses towards Lesbian, Gay, Bisexual, and Transgender (LGBT) Patients in a Hospital: A Cross-sectional Study

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ABSTRACT:

The lesbian, gay, bisexual, and transgender (LGBT) community constitutes a diverse group of individuals with varying sexual orientations and gender identities within the broader gay culture. Unfortunately, this group encounters a disproportionate level of anxiety, fear, stigma, and discrimination in healthcare settings. The aim of this study was to evaluate the knowledge and attitudes of nurses toward LGBT patients at Nepalgunj Medical College Teaching Hospital in Banke. A descriptive cross-sectional study was carried out using a quantitative approach among 56 participants, who were chosen through non-probability purposive sampling. Data was collected via a semi-structured questionnaire and analyzed using SPSS version 20. The results showed that the majority of participants (92.9%) had a satisfactory level of knowledge regarding LGBT patients, while only a small proportion (1.8%) had poor knowledge. With regards to attitudes, over half of the respondents (58.9%) demonstrated a positive attitude toward LGBT patients, whereas less than half (43.1%) exhibited a negative attitude. These findings highlight the significance of improving nurses' knowledge and competencies to deliver high-quality care to LGBT patients devoid of discrimination, decrease fear and uncertainty, and encourage positive behaviors among healthcare staff. Furthermore, addressing gaps in professional knowledge can assist in narrowing the disparities in healthcare that the LGBT community experiences.

Keywords: LGBT, Nurses, Knowledge, Attitudes, Healthcare settings, Discrimination

INTRODUCTION:

Background of the Study:

The LGBT (Lesbian, Gay, Bisexual, and Transgender) community constitutes a distinctive group within the realm of sexual orientation and gender identity. Due to their unique healthcare needs, LGBT individuals are vulnerable to healthcare disparities, necessitating advanced human rights protections prevent to discrimination and disparity. Despite the advent of technologies in healthcare institutions, there is still evidence of the development of homophobic attitudes among nurses, attributed to the lack of knowledge and negative attitudes towards the LGBT community. LGBT individuals experience higher rates of anxiety, fear, stigma, discrimination, and are susceptible to smoking, alcohol consumption, eating disorders, mental illness, and suicidal tendencies. According to research, 3.5% of the U.S. adult population identify as lesbian, gay, or bisexual, with 0.3% or 700,000 identifying as transgender. While Nepal, Pakistan, India, and Bangladesh legally recognize transgender people, homosexuality remains taboo in Nepal, where an estimated 900,000 LGBT individuals still face harassment and discrimination in various aspects of life.

Rational for the Study:

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LGBT individuals continue to face numerous challenges when accessing appropriate healthcare services, including limited availability of tailored healthcare options and a dearth of empathetic healthcare professionals, particularly nurses (Eliason, Dibble, & DeJoseph, 2010). A study of 824 nurses in Italy revealed that their attitudes towards lesbian and gay patients were only moderately positive, with women exhibiting more favorable attitudes than men. Nevertheless, male nurses displayed greater awareness of their preparedness to provide care for LGBT individuals (Pelle et al., 2018).

Research conducted in North America and Western Europe has demonstrated that medical students lack knowledge about the healthcare needs of LGBT individuals and do not feel sufficiently equipped to care for them. This includes discomfort in discussing sexual practices and obtaining a sexual history, with inadequate training being the primary barrier to acquiring adequate knowledge and skills (Wahlen et al., 2020). According to an online study conducted in California, an appropriate balance between negative attitudes and skills is necessary to ensure effective care for transgender patients (Tidwell, 2017). Similarly, a study of primary care practitioners (PCPs) within the Veterans community indicated that 51.1% of respondents felt competent in providing LGBT care, while 15.5% disagreed. Male PCPs reported lower levels of confidence in providing LGBT care compared to their female counterparts (Rowe, 2017). Healthcare and social care professionals, including direct care providers, have reported inadequate confidence in their ability to address the unique needs of LGBT service users due to factors such as a lack of professional knowledge, cultural competency, and affirming behaviors (Somerville, 2015).

The aforementioned studies indicate a notable deficit in professional knowledge among nurses regarding LGBT patients, with a significant proportion harboring negative attitudes towards this population due to a variety of factors, including limited competency, knowledge gaps, cultural insensitivity, fear, uncertainty, and a lack of affirmative behaviors. Despite the importance of this issue, there is a paucity of international research on LGBT healthcare, and no studies have been conducted to date regarding Nepalese nurses' knowledge and attitudes towards LGBT patients. Accordingly, the researcher aims to investigate this topic by examining the knowledge and attitudes of nurses towards LGBT patients in a selected hospital.

Objectives of the Research:

The primary aim of this research endeavor is to ascertain the extent of knowledge and attitudes among nurses towards individuals identifying as Lesbian, Gay, Bisexual, and Transgender (LGBT) receiving care at Nepalgunj Medical College Teaching Hospital in Banke, Nepal. To achieve this overarching objective, the study is designed to address two specific objectives:

- To evaluate the level of knowledge regarding LGBT patients possessed by nurses.
- To assess the attitudes exhibited by nurses towards LGBT patients.

Importance of the Study:

The present research endeavor is expected to contribute towards the identification of the prevailing level of knowledge and attitudes of nurses towards patients identifying as Lesbian, Gay, Bisexual, and Transgender (LGBT). Furthermore, this study is anticipated to serve as a valuable reference point for future scholars interested in this area of research.

Variables:

The current research aims to assess the knowledge and attitudes of nurses towards patients who identify as Lesbian, Gay, Bisexual, and Transgender (LGBT), which serve as the dependent variable. The independent variables that are to be considered for the analysis include age, religion, educational level, and working experience. Additionally, the sources of information that may potentially impact the dependent variable include prior exposure to LGBT patients during indoor work and mass media.

Research Questions:

The present study sought to answer the following research questions:

To what extent do nurses possess knowledge regarding LGBT patients?

What are the attitudes of nurses towards patients who identify as LGBT?

Scope and Limitations of the Study:

The scope of this study was limited to a specific hospital and did not encompass a broader range of healthcare settings.

Review of Literature:

According to a study conducted among 45 primary care providers (PCPs) in four community-based outpatient clinics affiliated with the Veterans Affairs (VA) healthcare system, it was discovered that 51.1% of the PCPs agreed that they were proficient in providing

LGBT care, whereas 15.5% disagreed. The proportion of male PCPs who acknowledged their competence (50%) was marginally lower than that of their female counterparts (51.8%) (Rowe et al., 2017).

A cross-sectional descriptive correlational study was conducted using pretest/posttest methodology, involving a convenience sample of 111 registered nurses who were currently employed in four different hospitals located in the Southwestern Pennsylvania metropolitan region. The primary objective of the study was to assess the knowledge and attitudes of registered nurses towards LGBTQ health and to evaluate the effectiveness of an educational intervention in improving their competency to care for LGBT individuals. The study found that, overall, registered nurses held a moderately positive attitude towards LGBT individuals and had a certain level of cultural competence in providing care for them. (Traister T., 2018)

A qualitative descriptive design was employed to conduct focused semi-structured interviews with eleven Nurse Practitioners (NPs) in the northeastern United States in 2016, aiming to explore their knowledge, attitudes, and beliefs when caring for transgender patients and describe their overall experiences in rendering care in the clinical setting. The study identified four main themes and six subthemes: personal and professional knowledge gaps, fear and uncertainty, caring with intention and pride, and creating an accepting environment. (Paradiso & Lally, 2018)

A cross-sectional study was conducted in Italy, which involved multiple centers and employed a data collection tool consisting of three validated questionnaires and a socio-demographic form to evaluate the knowledge and attitudes of Italian nurses towards LGBT individuals. The study involved 824 nurses, and the results showed that attitudes towards lesbian and gay patients were only moderately positive. Female nurses displayed a more favorable attitude towards LGBT patients compared to male nurses. Further analysis showed that greater knowledge of homosexuality was associated with female gender, moderate political affiliation, and affirmative behaviors, while male nurses were found to have a greater sense of preparedness to care for LGBT individuals. (Della Pietra et al., 2018)

A cross-sectional study was carried out in a hospital in the northern region of Turkey to investigate the attitudes of 358 nurses towards LGBT individuals. The study aimed to determine the extent of knowledge of LGBT

individuals among nurses and explore the relationship between knowledge, education, acquaintance, and homophobic attitude. The results revealed that a majority of nurses (70.1%) had insufficient knowledge about LGBT individuals, and a vast majority (80.7%) reported that their nursing education did not include any mention of LGBT individuals. The study concluded that the level of education, familiarity with LGBT individuals, and knowledge of LGBT individuals significantly impacted the homophobic attitudes of nurses. (Soner G. and Altay B., 2020). According to research conducted in North America and Western Europe, medical students exhibit regarding insufficient knowledge the healthcare requirements of LGBT individuals, do not feel completely prepared to provide care for them, and are uncomfortable discussing sexual practices and taking a sexual history. The primary obstacle to obtaining an adequate sexual history was deemed to be a lack of proper training. (Wahlen R., Bize R., Wang J., Merglen A., Ambresin A-E., 2020)

LGBT individuals require healthcare services that are provided with respect, equality, and without discrimination. However, studies have indicated that nurses may exhibit professional knowledge gaps, insufficient training on LGBT health, display homophobia, and harbor negative attitudes when providing nursing care to LGBT patients. Knowledge and attitudes towards LGBT patients are influenced by several factors including age, religion, educational level, working experience as a nurse, and sources of information. Although some nurses may demonstrate positive attitudes and adequate knowledge of LGBT patients, further training and educational interventions are necessary to increase their understanding and knowledge. Currently, no research has been conducted in Nepal to assess the knowledge and attitudes of nurses towards LGBT patients.

Research Methodology:

A descriptive cross-sectional study using a quantitative approach was conducted to examine the knowledge and attitudes of nurses towards LGBT patients. The research was performed at Nepalgunj Medical College's Teaching Hospital in Kohalpur, which is a 750-bed healthcare facility situated in Ward No. 11 of the Banke district in the Lumbini province. The study population included registered nurses employed at NGMC Kohalpur in Banke. Non-probability purposive sampling was utilized as the sampling method.

Based on the parameters of z=1.440, p=0.5, e=0.08, and N=182, a sample size of 56 was calculated using the formula for determining sample size in a finite population. The desired confidence level was set at 85%. The inclusion criteria for the study were the availability and willingness of respondents to participate during the data collection period. The sample was drawn from the nursing staff employed at NGMC Kohalpur in Banke. Non-probability purposive sampling was employed as the sampling method.

A semi-structured questionnaire was created for the research, utilizing input from subject matter experts, conducting a literature review, and analyzing comparable studies to establish the structure. The questionnaire, developed in English, was divided into three sections. Part I consisted of semi-structured inquiries regarding socio-demographic variables and sources of information. Part II included semi-structured questions to evaluate knowledge of LGBT patients, while Part III employed the modified semi-structured Likert Scale of ATPLS to determine nurses' attitudes towards LGBT patients.

To ensure content validity, the questionnaire was subjected to extensive review by subject matter experts, research advisors, statisticians, and peers, and modifications were made based on their valuable feedback. A pretest of the instrument was conducted on 6 respondents, which accounted for 10% of the total sample. The pretested respondent was excluded from the study, and the questionnaire was modified accordingly.

Ethical considerations were taken into account prior to data collection. Written approval was obtained from Nepalgunj Nursing Campus, and permission was granted by NGMC Kohalpur, Banke. Participants were informed of the study's objectives, and written informed consent was obtained before data collection. Participant anonymity was ensured by using code numbers instead

of participant names, and the data was only used for the study.

Data Collection Procedure:

After obtaining approval from the Nepalgunj nursing campus and formal permission from the relevant hospital authority, data collection was conducted. Informed consent was obtained from each participant after explaining the study's objectives. Participants were selected without discrimination based on ethnicity, location, education, marital status, socio-economic status, or religion. The researcher collected the data herself within a specific time frame, allocating 15-20 minutes to each participant.

Data Analysis Procedure:

After the data collection process, the collected data was reviewed for completeness and accuracy on a daily basis. Subsequently, it was edited, coded, categorized, and analyzed according to the research objectives. The Statistical Package for Social Sciences (SPSS 20 version) was used to analyze the data, and both descriptive and inferential statistical methods were employed for data interpretation. The study findings were presented in tabular form. Descriptive statistics such as frequency and percentage were utilized to describe the socio-demographic characteristics of the 56 respondents who participated in the study and their knowledge and attitudes towards LGBT patients among nurses in a specific hospital.

Interpretation and Analysis of Data:

The present section focuses on the analysis and interpretation of data collected from 56 respondents regarding their knowledge and attitudes towards LGBT patients among nurses in a specific hospital. The collected data was analyzed in accordance with the study's objectives. Descriptive statistics such as frequency and percentage were used to describe the participants' socio-demographic characteristics.

Table 1:Respondents' Socio-Demographic Characteristics

ondents' Socio-Demog	ndents' Socio-Demographic Characteristics	
Variables	Frequency(n)	Percentage (%)
Age(years)		(70)
20-25	26	46.4
25-30	26	46.4
30-35	2	3.6
35-40	2	3.6
Religion		
Hindu	54	96.4

Christians	2	3.6
Educational level		
ANM	2	3.6
PCL Nursing	49	87.5
Bachelors in Nursing	5	8.9
Working experiences		
0-3years	23	41.1
4-6years	25	44.6
7-10years	7	12.5
11oraboveyears	1	1.8

Table 1 shows nearly half (46.4%) of the respondent were 20-25 and 25-30 years and least (3.6%) of them were in the age of 30-35 and 35-40 years old. Majority (96.4%) respondent were followed Hindu religion and only (3.6%) respondent were Christian. Majority (87.5%) were PCL nursing and least (3.6%) of them were ANM and Bachelor in nursing. Almost half (44.6%) had 4-6 years working experience and least (1.8%) hadover11 years of working experience.

Table 2: Respondents' Sources of information

n=56

Responses	Frequency(n)	Percentage (%)
Provided care to		
LGBT patient previous	ly	
Yes	32	57.1
No	24	42.9
Sources of in formation		
Mass media		
(Television, Radio,		
Podcaster Movies)		_
Yes	43	76.8
No	13	23.2
Professional books or		
magazines		
Yes	5	8.9
No	51	91.1
Friends		
Yes	8	14.3
No	48	85.7

Table 2 illustrates above half (57.1%) of respondent had been provided care to LGBT patient previously and almost half (42.9%) were not provided care. Regarding sources of information mostly (76.8%) of respondent were informed from mass media (Television, Radio, Podcast or movie) and least(8.9%) of them were informed through a professional books or magazines.

Table 3 (a) Respondent's Knowledge Regarding LGBT Patient

n=56

Response		False
	n (%)	n (%)
LGBT refers to distinct group within the gay culture, which includes both	52(92.9)	4(7.1)
sexual orientation and gender identity.		
Lesbian is women who is emotionally and sexually attracted to other	10(17.9)	46(82.1)
men.		
Gay is a sexual orientation that describes a person who is emotionally or	47(83.9)	9(16.1)
sexually attracted to people of their own gender, commonly used to		

describe men.		
Bisexual is a person who is emotionally or sexually attracted with own	21(37.5)	35(62.5)
gender.		
Transgender is a person whose gender identity differs from the sex they	52(92.9)	4(7.1)
were assigned at birth.		
Sex and gender have a same meaning.	44(78.6)	12(21.4)
Sexual orientation is established at an early age.	32(57.1)	24(42.9)
Homosexuality is caused by a chromosomal abnormality.	33(58.9)	23(41.1)
Homosexual men always act and dress in a feminine way.	12(21.4)	44(41.1)
Homosexual women always dress and act in a masculine way.	25(44.6)	31(55.4)
Homosexual are usually identifiable by their appearance and mannerism.	44(78.6)	12(21.4)
Boys breast typically grow during puberty.	23(41.1)	12(21.4)
A transgender person should be addressed using pronouns of the	40(71.4)	16(28.6)
Preferred gender, rather than biological sex.		
LGBT patients do not seek medical treatment as early as heterosexuals	44(78.6)	12(21.4)
because of fear of discrimination.		

Table 3a presents the findings on the knowledge of respondents regarding LGBT patients. The majority (92.9%) of the respondents gave a true response that they knew about LGBT patients' distinct sexual orientation and gender identity, while only 7.1% of them gave a false statement. Additionally, the majority (82.1%) of the respondents knew that lesbian women are attracted to women, while 17.9% of them were not aware. Similarly, the majority (83.9%) of respondents knew that gay men are attracted to their own gender, while 37.5% of them were not aware that bisexuals are attracted to both sexes. Moreover, the majority (92.9%) of respondents knew that transgender is a gender identity that is assigned at birth, while 7.1% of them were not aware. Regarding knowledge about sex and gender, most (78.6%) of the respondents knew that sex and gender do not have the same meaning, while 21.4% of them were not aware. Moreover, more than half (57.1%) of the respondents believed that sexual orientation is

established at an early age, while almost half (42.9%) did not know. Additionally, more than half (58.9%) of respondents knew that chromosomal abnormality is the cause of homosexuality, while almost half (41.1%) were not aware. Regarding attitudes towards LGBT patients, most (78.6%) of respondents knew that homosexual men do not always act and dress in a feminine way, while 21.4% of them were not aware. Moreover, more than half (55.4%) of the respondents knew about the legal rights of LGBT patients, while almost half (44.6%) were not aware. Additionally, most (78.6%) of the respondents gave a true response that LGBT patients are identifiable by their appearance and mannerism, while a quarter (21.4%) of them were not aware. Regarding medical treatment seeking behavior, most (78.6%) of the respondents knew that LGBT patients do not seek medical treatment because of fear of discrimination, while a quarter (21.4%) of them gave a false statement.

Table 3 (b): R

): Respondents' Knowledge Regarding LGBT Patient	n=56	
Response	Truen	False
	(%)	n(%)
LGBT experience greater psychological distress with higher levels of	49(87.5)	7(12.5)
depression, anxiety, body image and debating disorders due to lack of		
social acceptance than the general population.		
LGBT are vulnerable to poor health and social outcomes because of	35(62.5)	21(37.5)
marginalization, stigma and normative pressure against sexual and		
gender minorities.		
LGBT patients experience barriers in access to adequate healthcare due	52(92.9)	4(7.1)
to a lack of specific knowledge and/or heterosexist attitudes on the part		
of health professionals.		
It is important to conduct a suicide assessment when working with	16(28.6)	40(71.4)
LGBT patients.		

In the world the most common mode of transmission of HIV is through	34(60.7)	22(39.3)
gay male sex.		
LesbianpatientdonotneedPAPsmearsasfrequentlyasheterosexualwomen.	44(78.6)	12(21.4)
LGBT adolescents are more likely to use alcohol, tobacco or other	18(32.1)	38(67.9)
psychoactive substances than other adolescents.		
Gay and lesbian people have a higher prevalence of anxiety and	48(85.7)	8(14.3)
depression compared to heterosexual people.		
Most health care providers automatically make the assumption that their	33(58.9)	23(41.1)
patient is heterosexual if they have not specifically addressed sexual		
orientation.		
Providers need to be sensitive and well informed regarding optimal	53(94.6)	3(5.4)
provision of health care and preventive services to sexual and gender		
minorities requires.		

Table 3b presents the findings related to respondents' knowledge and attitudes towards LGBT patients among nurses in a selected hospital. The majority (87.5%) of respondents had a true understanding that LGBT individuals experience greater psychological distress due to lack of social acceptance, while only a minority (12.5%) gave a false response. Over half (62.55%) of respondents truly understood that LGBT individuals are vulnerable to poor health due to normative pressure and gender minorities. The majority (92.9%) of respondents knew that LGBT patients face difficulties in accessing adequate healthcare due to a lack of specific knowledge among healthcare professionals, whereas only a minority (7.1%) disagreed. Most respondents (71.4%) did not know about conducting a suicide assessment, while a quarter (28.6%) agreed with this statement. Over half (60.7%) of the respondents gave a true response, while a quarter (39.3%) gave a false response regarding the common mode of transmission of HIV through gay male

sex. Only a minority (21.4%) of respondents knew that heterosexual women also need frequent PAP smears, while most (78.6%) were unaware. A quarter (32.1%) of respondents knew that LGBT adolescents mostly use alcohol, tobacco, and other psychoactive drugs compared to other adolescents, while most (67.9%) gave a false response. The majority (85.7%) of respondents gave a true response regarding LGBT individuals having a higher prevalence of anxiety and depression compared to heterosexuals, while only a minority (14.3%) gave a false response. Over half (58.9%) of respondents gave a response regarding healthcare providers true automatically assuming that all patients are heterosexual, while almost half (41.1%) gave a false response. The majority (94.6%) of respondents gave a true response that healthcare providers need to be sensitive and wellinformed regarding optimal provision of healthcare and preventive services to sexual and gender minorities, while only a minority (5.4%) gave a false response.

Table 4: Respondents' Level of Knowledge

n=56

Knowledge Level	Frequency(n)	Percentage (%)
Good knowledge (>75%)	3	5.4
Satisfactory knowledge (50-75%)	52	92.9
Poor knowledge (<50%)	1	1.8

Table 4 reveals majority (92.9%) of the respondents has satisfactory level of knowledge and only (1.8%) has poor knowledge.

Table 5 (a) Respondents' Attitude Regarding LGBT Patient

n=56

Response	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
	n (%)	n(%)	n(%)	n(%)	n(%)
Homosexuality is immoral.*	10(17.9)	37(66.1)	4(7.1)	5(8.9)	0(0)
Changing an individual's sex (hormones and/or surgery) is Against moral values.*	2(3.6)	33(58.9)	7(12.5)	6(10.7)	8(14.3)
LGBT patients do not have any specific health needs.*	30(53.6)	21(37.5)	0(0)	3(5.4)	2(3.6)

It is more challenging to conduct a physical examination with patient who identifies as LGBT than with a heterosexual patient.	3(5.4)	35(62.5)	9(16.1)	8(14.3)	1(1.8)
I feel I would be unable to talk with a patient who identifies asLGBTinasensitiveandappropriate manner.*	17(30.4)	18(32.1)	2(3.6)	19(33.9)	0(0)
I think nursing curriculum should include about LGBT's health and their needs.	5(8.9)	2(3.6)	4(7.1)	16(28.6)	29(51.8)
I would be comfortable telling my friends and family that I cared for LGBT patients.	2(3.6)	6(10.7)	2(3.6)	16(28.6)	30(53.6)
Identifying as transgender shouldbeconsideredapsychiatricillne ss.*	34(60.7)	15(26.8)	3(5.4)	3(5.4)	1(1.8)

* Indicate negative statement

Table 5(a) presents the results indicating that the majority (66.1%) of respondents disagreed with the statement that Homosexuality is immoral, and the least (7.1%) were neutral. More than half (58.9%) of the respondents disagreed strongly that Changing an individual's sex (hormones and/or surgery) is against moral values, and the least (3.6%) strongly disagreed. Similarly, more than half (53.6%) of the respondents strongly disagreed that LGBT patients do not have any specific health needs, and the least (5.4%) agreed. The majority (62.5%) of respondents disagreed with the statement that it is more challenging to conduct a physical examination on an LGBT patient than on a heterosexual patient, and the least (1.8%) strongly

agreed. A quarter (33.9%) of respondents agreed with the statement that they are unable to talk with a patient who identifies as LGBT in a sensitive and appropriate manner, and the least (3.6%) were neutral. More than half (51.8%) of the respondents strongly agreed that nursing curriculum should include information about LGBT health and their needs, and the least (3.6%) disagreed. More than half (53.6%) of the respondents strongly agreed that they are comfortable telling friends and family that they care for LGBT patients, and the least (3.6%) strongly disagreed or were neutral. The majority (60.7%) strongly disagreed with the statement that identifying as transgender should be considered a psychiatric illness, and the least (1.8%) strongly agreed.

Table 5 (b): Respondents' Attitude Regarding LGBT Patient

n=56

Response	Strongly	Disagree	Neutral	Agree	Strongly
	disagree				agree
	n(%)	n(%)	n(%)	n(%)	(%)
As a nurse, I think it is important	3(5.4)	11(19.6)	21(37.5)	11(19.6)	10(17.9)
to include questions about the					
personal and sexual life, sexual					
orientation and gender identity of					
patients.					
Being transgender is a natural	3(5.4)	4(7.1)	8(14.3)	29(51.8)	12(21.4)
expression of gender identity in					
men and women.					
LGBT people still need to protect	4(7.1)	4(7.1)	0(0)	15(26.8)	33(58.9)
for equal right.					
I would refuse to care for	37(66.1)	10(17.9)	3(5.4)	5(8.9)	1(1.8)
LGBTpatientsIfIwereawaretheyas					
LGBT.*					

^{*} Indicate negative statement

Table 5b displays the results of a survey in which respondents were asked questions related to personal and sexual life, sexual orientation, and gender identity of patients. Approximately 37.5% of the respondents reported feeling neutral towards these questions, while only 5.4% strongly disagreed. Regarding the natural expression of gender identity in men and women, more than half (51.8%) of the respondents agreed, and again only 5.4% strongly disagreed. In terms of the need for

protecting the equal rights of LGBT individuals, the majority (58.9%) of the respondents strongly agreed, with only 7.1% strongly disagreeing or disagreeing. Finally, a significant proportion (66.1%) of the respondents strongly agreed with the idea of refusing to care for LGBT patients if they were aware of their sexual orientation or gender identity, while only 1.8% strongly disagreed.

Table 6: Respondents' Level of Attitude

n=56

Attitude Level	Frequency(n)	Percentage (%)
Positive attitude (≥75%)	33	58.9
Negative attitude (<75%)	23	41.1

Table 6 presents data on the attitudes of respondents towards the care of LGBT patients. Specifically, the table indicates that more than half (58.9%) of the respondents reported having a positive attitude towards LGBT patient care, while nearly half (41.1%) reported having a negative attitude towards this type of care.

Discussion, Conclusion, Recommendations:

The discussion section of the research paper thoroughly analyzes all of the obtained results and draws conclusions from each finding. Additionally, the recommendation section provides guidance for future research and suggests ways to enhance the current study.

Discussion:

The term LGBT refers to a distinct group within the gay culture, encompassing both sexual orientation and gender identity. Individuals within this group have specific healthcare needs and are particularly vulnerable to healthcare disparities. Despite this, no research had been conducted in Nepal to explore the knowledge and attitudes of nurses towards LGBT patients prior to this study. A descriptive cross-sectional study conducted, utilizing a quantitative approach to investigate the existing knowledge and attitudes towards LGBT patients among 56 nurses at Nepalguni Medical College Teaching Hospital in Kohalpur, Banke. The study found that the majority of respondents had a satisfactory level of knowledge regarding LGBT patients. A similar study conducted with 358 nurses working in a hospital in the northern region of Turkey found that 70.1% of nurses did not have enough knowledge about LGBT individuals, and 80.7% of nurses reported no mention of LGBT individuals in their nursing education (Soner G. and Altay B., 2020). Another study was conducted in a VA community to assess the attitudes and knowledge of 45 primary care providers (PCPs) regarding LGBT patient health, based on outpatient clinics (CBOCs). The results revealed that 51.1% of PCPs agreed that they were competent to

provide LGBT care, while 15.5% disagreed (Rowe et al., 2017). Studies conducted in North America and Western Europe have shown that medical students lack knowledge of LGBT healthcare needs, do not feel fully prepared to care for these patients, and are less comfortable taking a sexual history and discussing sexual practices. Inadequate training has been identified as the primary barrier to taking an adequate sexual history (Wahlen R., Bize R., Wang J., Merglen A., Ambresin A-E., 2020). The present study reveals that more than half of the respondents have a positive attitude, while almost half of the respondents have a negative attitude towards LGBT patient care. Similarly, a study conducted in Italy among 824 nurses revealed only moderately positive attitudes towards lesbian and gay patients. Women displayed a more positive attitude compared to men, and men were found to have greater awareness of being prepared to care for LGBT individuals (Pelle C. D., Cerratti F., Giovanni P. D., Cipollone F. & Cicolini G., 2018). The results of an online study conducted in California suggested that the presence of negative attitudes, along with insufficient skills, may act as a barrier to care for transgender patients (Tidwell, 2017). Similarly, a study conducted in the Southwestern Pennsylvania metropolitan region aimed to investigate the attitudes and knowledge of LGBTO health among registered nurses and the impact of an educational intervention. The study found that the registered nurses had an overall moderately positive attitude towards LGBT people and cultural competence to care for them (Traister T., 2018).

Conclusion:

The results of the current study indicate that a significant proportion of the participants possess a satisfactory level of knowledge and a positive attitude towards the care of LGBT patients. This study could contribute towards enhancing the competency level of nurses by providing them with the necessary knowledge and skills to provide quality care to LGBT patients, without discrimination. Moreover, it could help in filling the gap in professional knowledge regarding LGBT healthcare needs, which could lead to less fear, uncertainty, and negative attitudes towards LGBT individuals among healthcare personnel. Ultimately, this could lead to affirmative behaviors and attitudes towards LGBT individuals, resulting in better healthcare outcomes for this population.

Implications:

The findings of the study would serve as a valuable contribution to the existing body of knowledge on the topic. This study would establish a baseline for future research in this area and serve as a reference source for researchers. Emerging students can effectively use the findings of this study as a resource for their own research purposes. The study's results provide nurses with valuable information about caring for LGBT patients, which can help change care providers' attitudes and promote best practices.

Limitations:

The study was conducted solely at Nepalgunj Medical College, limiting the generalizability of the findings to other settings. Furthermore, due to the limited time of the respondents, the data collection process posed difficulties for the researcher.

Recommendations:

Based on the study findings, the following recommendations are suggested: Development and implementation of educational programs on LGBT patient care should be considered for nurses to increase their knowledge and competence.

Further research on this topic with a larger and more diverse population should be conducted to increase the generalizability of the findings.

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