

Creating Accessible and Comprehensive Continuing Medical Education in Transgender/Nonbinary Healthcare

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Abstract—Every year medical providers are required to participate in Continuing Medical Education (CME) to maintain their licenses. Educational Technology is providing an avenue for delivering CME content effectively and efficiently. At the same time, the need for increased medical provider knowledge regarding both medical and cultural aspects of care for patients who are Transgender and/or Nonbinary has not been addressed. The goal of this project is to develop Transgender and Nonbinary CME content, utilizing Educational Technology to address a rapidly changing landscape of care for these patients as well as address key cultural knowledge that is often omitted from purely technical areas of education, improving overall provider knowledge and, as a result, quality of care.

Accompanying Video Presentation:

<https://youtu.be/HrNiHu7ULTw>

Web Application URL:

<https://cs6460-eshivers.herokuapp.com/>

1 INTRODUCTION

The transgender/nonbinary¹ community faces unique difficulties in accessing healthcare, often receiving poor quality care or even being denied care outright [1]. Researchers have indicated that the primary barriers to care are lack of

¹ “Transgender/Nonbinary” is not strictly representative phrasing and is only used in order to be succinct. Some nonbinary people identify as transgender, while some do not.

healthcare provider knowledge and transphobia² [2]. Many transgender/nonbinary patients have reported being forced to educate their primary care providers on the topic of transgender/nonbinary healthcare [1]. When faced with transphobia, patients have reported extraordinary levels of abuse, including verbal and physical attacks [1]. This also includes more subversive forms of transphobia, such as deadnaming³ or misgendering⁴ which have been proven to be traumatic to patients and severely undermine the patient-provider relationship [4].

Improved medical education has been identified as being the most effective way of dealing with transphobia and ignorance among healthcare providers [2][3]. Unfortunately, medical education in transgender/nonbinary care is relatively rare, and that which does exist is often severely outdated or inaccessible. And while some medical school curriculums have increasingly sought to create material to better represent care of the transgender/nonbinary community [3], this does not address currently practicing healthcare providers. Licensing requirements for continuing medical education provides an opportunity to address education on the topic to all providers. This is undermined however by the fact that most currently available comprehensive transgender/nonbinary CME offerings are typically restricted to larger conferences⁵. These conferences are not accessible for most practitioners, particularly those in rural/smaller areas, as they have limited space and occur in larger metro areas. Online CME can offer improved access over in-person conferences, providing education at scale that has been shown to be effective [8][9].

Studies have also shown that in order for CME discussing a marginalized community to truly improve quality of care, it should provide for building “cultural

² “Transphobia” is hateful or otherwise negative views towards transgender/nonbinary individuals, used in the same sense as the phrase “homophobia”.

³ “Deadnaming” is the use of a transgender/nonbinary person’s name given at birth which does not match their gender identity.

⁴ “Misgendering” is the use of pronouns which do not align with a transgender/nonbinary person’s proper pronouns (often referred to as preferred pronouns). Note that pronouns may not always align with normative expectations of usage relating to gender.

⁵ Three major conferences were identified and reviewed for this project. They are held by the Fenway Institute [5], Mayo Clinic [6], and UCLA [7]. Further information about them can be found in the references section of this document.

competency” [1]. In Luisa Kcomt’s systematic review of literature on the topic of transgender healthcare [1], she states the following:

“Researchers and practitioners have underscored the need to develop cultural competency and capacity building in serving LGBT clients in general and transgender individuals in particular.” [1]

Some conferences have begun to offer more robust topics providing social context⁶, but in none identified was this the primary focus. Additionally, material was never stated to be explicitly developed from a transgender/nonbinary community perspective and may often fail to be representative in nature. Given the history of animosity and distrust by transgender/nonbinary people of the medical community, after facing over a century of discrimination and bigoted, flawed research, it is important that transgender/nonbinary voices be given the opportunity to speak on their own behalf.

This project attempts to provide CME that meets all needs established in the research discussed above, in that it provides accessible (online and at scale), comprehensive education from a social context, tailored to the priorities and experiences of and written and reviewed by the transgender/nonbinary community.

2 COURSE DEVELOPMENT

2.1 Planning and Needfinding

Course development began by assembling a list of relevant content from academic research and transgender/nonbinary social spaces. The analysis of transgender/nonbinary spaces was informal, as due to issues relating to IRB approval and COVID-19, formal needfinding was unable to be carried out, though it will be revisited as part of future work. The approach to informal needfinding was standard naturalistic observation, without researcher interaction. Focus was on identifying complaints from transgender/nonbinary individuals as they sought to access healthcare or identified weaknesses in the available care provided, though larger context was gathered to support more explicitly social

⁶ “Social context” is considered here to be a summary of what would be required to provide Kcomt’s “cultural competency” [1], as per the provided quote.

material. All issues collected were publicly stated and general in nature, such that there was no risk involved.

All identified content was sorted into related categories, resulting in six major topic areas: general transgender issues (both binary and nonbinary), nonbinary specific issues, marginalization, sexuality, clinical concerns, and inclusivity. These categories became the overarching structure of the course's units, with the addition of an introduction unit. The details are located in the following section.

2.2 Content

2.2.1 Unit Structure

- Unit 1 – Introduction
 - This unit provides a general introduction to the material, such as foundational terminology, and attempts to establish need to the audience.
- Unit 2 – Transgender 101
 - Unit 2 provides general information about transgender issues and, despite the 101 in the unit title, insight into some more complex areas covering both medical and philosophical concepts. While this unit is not explicitly about binary transgender people, many of the concepts discussed are intended to provide a building block for improved understanding of nonbinary concepts presented in unit 3.
- Unit 3 – Nonbinary 101
 - Building on the concepts in the previous units, unit 3 discusses issues specific to the nonbinary experience. (Note: The placement of this unit after Transgender 101 is not intended to make a statement that nonbinary is less important of a topic, and it is ordered in this way simply to leverage unit 2's content for the purposes of the material.)
- Unit 4 – Society and Marginalization
 - Unit 4 covers a range of issues faced by transgender/nonbinary people in society, including issues such as poverty, hate crimes, and a small section about an area of discriminatory mental health research.
- Unit 5 – Gender Identity and Sexuality

- This unit attempts to place what it means to be transgender and/or nonbinary in the larger context of the LGBTQ+ community and provides information on sexual orientation within the transgender/nonbinary community.
- Unit 6 – Clinical Care
 - Unit 6 is focused on providing clinical information to healthcare providers in the care of transgender and/or nonbinary patients, with a focus on hormone replacement therapy. Additionally, it also includes other areas of explicitly clinical interest such as standards of care and the informed consent model.
- Unit 7 – Cultivating Inclusivity.
 - This unit offers recommendations on how to provide an inclusive environment for clinical spaces and general guidelines on how to be an ally to transgender and/or nonbinary patients even outside of those spaces.

2.2.2 Lessons Overview

For a complete list of lessons including brief summaries, please consult the Lesson Catalog in [Appendix 1](#).

Lessons were developed to consist of mixed text and video media and supplemented by quizzes. In JDF format, combined lesson length exceeds 75 pages of material. Individual lesson length varies heavily based on topic. Most lessons include a references section at the bottom of the page that provides links to cited academic papers and other resources on the topic.

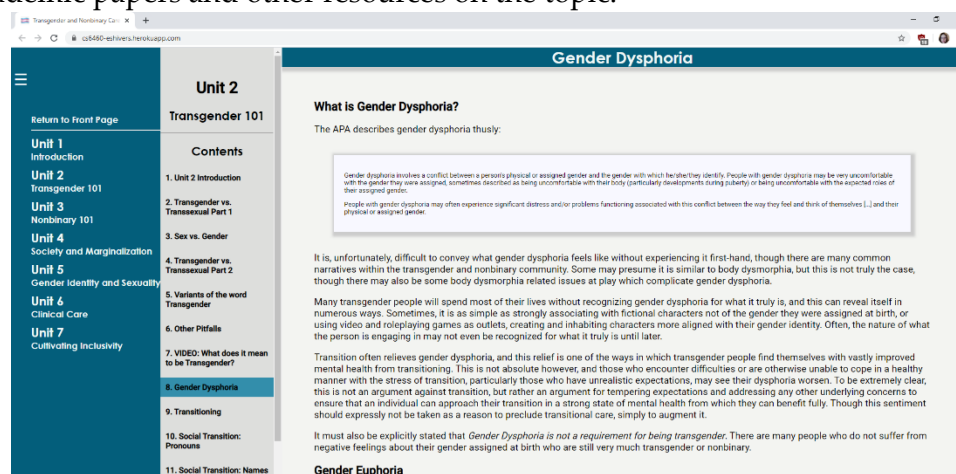


Figure 1 Text Lesson Example - Gender Dysphoria

There are 72 individual lessons over the 7 units. 65 lessons are text based, which may include supplemental images and tables. 2 lessons are video lessons that are several minutes long. 5 lessons, one per unit outside of units 2 and 3, are quizzes.

2.2.3 Text Lessons

Due to the need for consistent revisions, most material is intended explicitly to be text in order to be readily updated. Video lessons are intended to provide special lessons on select topics of importance that aren't expected to require notable revision which would necessitate the filming of a new video. These lessons are selected based on what topics would most benefit from the audience developing a more emotional connection to the material that text cannot convey on its own.

2.2.4 Video Lessons

Production

Video production was performed using Microsoft PowerPoint with some graphics created in GNU Image Manipulation Program. Production was limited to only two video lessons due to lack of project resources and time restrictions.

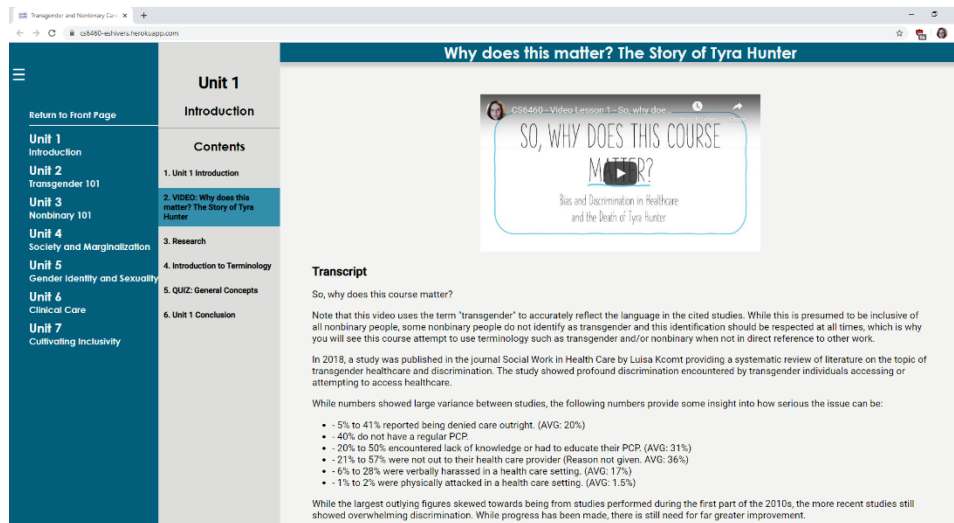


Figure 2 Video Lesson Example - Why does this course matter?

Available Video Lessons

The first video lesson is "Unit 1, Lesson 2: Why does this matter? The Story of Tyra Hunter". It provides an introduction to the course intended to establish the

need and importance. The first half of the video discusses the study by Luisa Kcomt [1] while the second half moves into relating the story of Tyra Hunter, a 24 year old transgender woman of color who was a passenger in a car accident and subsequently passed away due to preventable injuries due to being refused care both on scene by EMTs and at D.C. General Hospital by a physician.

The second video lesson is “Unit 2, Lesson 7: What does it mean to be transgender?”. This lesson is intended to provide voice to community experience and provide personal insights into what a small part of the myriad of ways that transgender/nonbinary people go through recognizing who they are.

COVID-19 Issues

Videos were originally intended to feature live recordings punctuated by supporting graphics or slides. Unfortunately, due to issues surrounding COVID-19 production was shifted. The equipment required to do live filming became unavailable due to the increase in demand for work from home teleconferencing and intended filming locations were shut down.

2.2.5 Quizzes

Quizzes are short and not graded, are only provide participants with testing their knowledge and receiving feedback that expands upon the concepts.

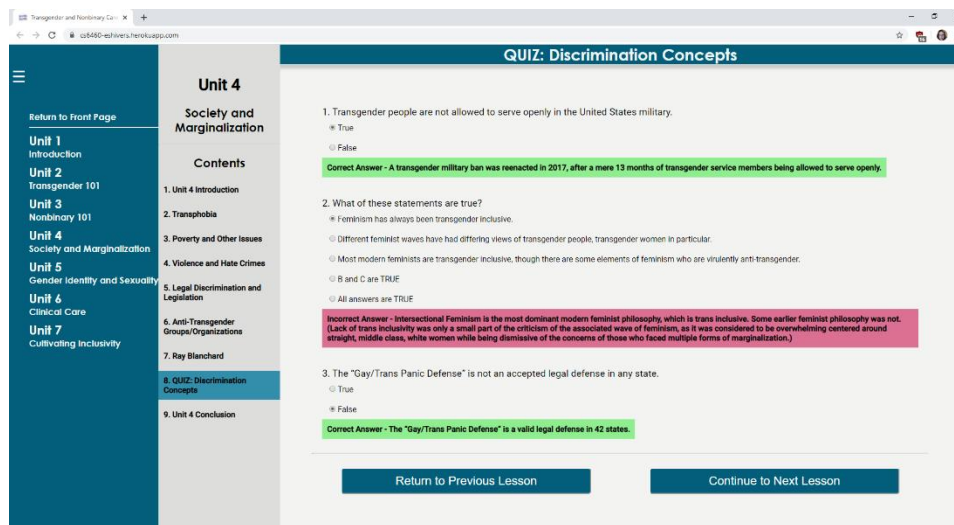


Figure 3 Quiz Lesson Example - Discrimination Concepts

2.3 Web Application Overview

In order to serve content, a web application was developed to address the specific needs of the lesson material, while providing a no cost environment for development phase distribution without restriction. This was necessitated by existing MOOCs being unsuitable for the intended nature of content delivery or inaccessible due to costs and lack of project resources. The application was designed to be easily expanded to reflect the needs of the course, and as the course evolves the application will be able to readily evolve along with it.

The application was developed in Angular and deployed via Heroku. As the full technical details of this application are not explicitly within the project scope, for more information please consult the documentation located on the live application found at <https://cs6460-eshivers.herokuapp.com/>.

3 DISCUSSION AND FUTURE WORK

3.1 Currently Scheduled Future Work

While this project iteration is complete and stands alone on its own merits, project development is scheduled to continue in Fall 2020 for “phase 2”. Phase 2 will focus on community evaluation and feedback cycles, refining content to ensure it is representative and complete. Additional evaluation will test if the material is accessible to cisgender audiences.

3.1.1 *Evaluation Overview*

There will be two primary evaluations performed with additional cycles of evaluation as required. During each of these evaluations respectively, feedback would be sought from two distinct cohorts for different purposes. The first cohort will be members of the transgender/nonbinary community, with the intent to ensure content is inclusive and representative. Due to the diversity in the community, including distinct philosophies and views on what transgender or nonbinary even mean, this first cohort will be the major focus in order to drive content revision, additions, and improvements. The second cohort will be people outside of the transgender/nonbinary community who have varying degrees of knowledge on the subject matter. The purpose of evaluation with this cohort is to improve content focus and clarity, evaluating whether the material provided is comprehensible to those without personal experience in the subject matter and which

topics may have been overlooked or can be deemed to be extraneous. This will not be limited to healthcare providers for logistics reasons.

The information provided below is a sample evaluation plan of the first cohort, with full evaluation plans to be finalized during the first week of phase 2.

3.1.2 Sample Evaluation Plan

Purpose

This study is intended to solicit feedback from the transgender/nonbinary community on the course content. The goal of this evaluation is to refine existing content and identify other areas of content that need to be addressed.

Method

To facilitate review, individual lessons will be categorized with the tags as required: “Contentious” and “Needs Expert Review”. These categorizations are not intended to denote importance of the content therein, but rather the relative nature of the content. The “Contentious” tag marks difficult to cite material or active debates, both philosophical and potentially medical. “Needs Expert Review” denotes content which requires additional attention from subject matter experts to ensure accuracy. Note that “expert” here includes personal experience. For example, sections relating to nonbinary identities will all be labeled as needing expert review. All lessons related to clinical care will be tagged as “Needs Expert Review”⁷.

A qualitative survey that allows for open ended feedback will be developed. After reviewing the course material, participants will submit their feedback via the survey.

Additionally, the survey will provide participants the option to enroll in an additional tier of evaluation if they are willing. The second tier will consist of synchronous (e.g. Slack) or asynchronous (e.g. email) interviews between the course author and the evaluation participant based on their feedback from the survey. The purpose of this tier of evaluation is to provide a more collaborative discussion and refine specifics.

⁷ These tags can be seen in the Lesson Catalog in Appendix 1.

Recruitment

Recruitment for this study will consist of posting invitations to participate in LGBTQ+ spaces and providing a link to the content and survey.

Limitations and Privacy Concerns

- Due to the nature of privacy concerns surrounding the LGBTQ+ community and transgender/nonbinary people in particular, no identifying information will be collected except for email address if the individual opts into the second tier of evaluation. The email address will *not* be provided as part of the study summary, though a text transcript of the interview will be available if the participant agrees. This limits the verifiability of the data collected.
- No recruitment will be performed in a private forum(ex: Facebook groups) without the explicit permission of the forum moderators. The project author has begun to reach out to private transgender/nonbinary groups, such as Facebook support groups, to seek permission to recruit in their space, though it is currently not possible to say whether this will pan out.
- While private forums whose members have already been controlled are preferable to ensure data integrity (that is to say, the feedback is from people who are transgender/nonbinary), if there not enough willing participants recruited through private forums a public approach will be undertaken. This should improve recruitment but risk exposure to those participating in bad faith. A contingency plan will be developed for this scenario to control for participation.
- Due to uncertainty surrounding COVID-19, there are no plans for offline recruitment at the moment. If circumstances allow, this will be readdressed during the fall semester when more is known.

Potential Bias and Bias Controls

There is a potential for heavy bias in the administration of this survey due to the wide variety of conflicting opinions within the transgender/nonbinary community, including who qualifies as part of the community in the first place. Given the contest of the project in arming medical providers with knowledge of potential patients, an explicit mission statement of inclusivity will be established such that participants know the topic is not debating these issues but making providers *aware* of these issues. While this does not directly account for bias, it places

expectations of the survey in the proper context and allows for participation of conflicting viewpoints.

3.2 Future Work Beyond 2020

Once the scheduled evaluation phase is complete at the end of the Fall 2020 semester, a draft submission of the project will be submitted to the Learning @ Scale 2021 conference. Development will continue however, and focus will shift to additional longer-term evaluation studies to study potential improvements in patient care quality and adoption rates of course recommendations, leading into a full conference submission in 2022. In addition, ongoing material updates and feedback/revision cycles are expected to continue indefinitely, ensuring the material is kept up to date and represents the active state of the transgender/nonbinary community. Once the course is deemed to reach an acceptable level of quality, official CME accreditation will be sought.

3.3 Discussion

This project sought to create a comprehensive and accessible continuing medical education course in transgender/nonbinary healthcare, and successfully completed content development meeting the goal. While the road does not end with this phase of the project, it can stand as is equivalent to any other transgender/nonbinary community-based education project that has been created over the years, of which there are a handful directed at various audiences. While it will take more time and work to make this course available to the target audience of healthcare providers, existing research points to that the material provided will make a difference in the quality of healthcare that transgender/nonbinary patients receive [1][2][3] and help to address a serious concern for a vulnerable community.

Evaluation by the transgender/nonbinary community will play a key role in the success of this project long term and will be given the full focus moving forward. Obtaining support from LGBTQ+ organizations will also be important for the success of the project, to provide much needed resources. As the author is not a clinician, this will include LGBTQ+ focused healthcare organizations to aid in refining clinical material and providing legitimacy for CME accreditation.

4 REFERENCES

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5 APPENDICES

5.1 Lesson Catalog

#	Lesson Name	Type	Description	Evaluation Tags
Unit 1 – Introduction				
1	Unit 1 Introduction	Text	Introduction to unit and course.	
2	Why does this matter? The Story of Tyra Hunter	Video	Need establishment, discussing Kcomt [1] and McPhail [2] studies as well as the death of Tyra Hunter in 1995.	
3	Research	Text	Additional research information.	
4	Introduction to Terminology	Text	Basic terminology.	
5	General Concepts	Quiz	Unit quiz.	
6	Unit 1 Conclusion	Text	Conclusion to unit.	
Unit 2 – Transgender 101				
7	Unit 2 Introduction	Text	Introduction to unit.	
8	Transgender vs. Transsexual Part 1	Text	Discusses the use of the term “transsexual” in modern context.	Contentious
9	Sex vs. Gender	Text	Discusses debates about the nature of sex and gender.	Contentious

10	Transgender vs. Transsexual Part 2	Text	Concludes discussion about the term “transsexual” in modern context based on previous lesson.	Contentious
11	Variants of the word Transgender	Text	Additional phrasing that may be offensive.	
12	Other Pitfalls	Text	Areas beyond terminology that relate to the previous discussion that should be avoided.	
13	What does it mean to be Transgender?	Video	General introduction to the topic of being transgender.	
14	Gender Dysphoria	Text	Defined and discusses gender dysphoria and gender euphoria.	
15	Transitioning	Text	Overview of what transitioning may entail.	
16	Social Transition: Pronouns	Text	Discusses changing the use of pronouns during transition and why it’s important, as well as misgendering.	

17	Social Transition: Names	Text	Discusses name changes are part of transition as well as deadnaming.	
18	Social Transition: Passing	Text	Discusses the concept of passing as cisgender, and why it is not always viewed as a good thing.	Contentious
19	Medical Transition: HRT	Text	General overview of hormone replacement therapy.	Needs Expert Review
20	Medical Transition: Surgery	Text	General overview of surgeries.	Needs Expert Review
21	Medical Transition: Other Procedures	Text	General overview of any topics not explicitly clinical in nature but still related, e.g. hair removal.	Needs Expert Review
22	Unit 2 Conclusion	Text	Conclusion to unit.	
Unit 3 – Nonbinary 101				
23	Unit 3 Introduction	Text	Introduction to unit.	Needs Expert Review
24	What does it mean to be Nonbinary?	Text	General overview of what a nonbinary identity means.	Needs Expert Review

25	Terminology	Text	General terminology related to nonbinary identities.	Needs Expert Review
26	Nonbinary people and Medical Transition	Text	Discussion of nonbinary people also seeking medical transition.	Needs Expert Review
27	Presentation	Text	The relationship between presentation and gender identity.	Needs Expert Review
28	Specific Nonbinary Identities	Text	Additional details on specific individual nonbinary identities.	Needs Expert Review
29	Pronouns	Text	Discussion of they/them and it pronouns.	Needs Expert Review
30	Neopronouns	Text	Discussion of neopronouns, e.g. Xe/Xir.	Needs Expert Review
31	Unit 3 Conclusion	Text	Conclusion to unit.	Needs Expert Review
Unit 4 – Society and Marginalization				
32	Unit 4 Introduction	Text	Introduction to unit.	
33	Transphobia	Text	Defines and discusses the nature of transphobia.	

34	Poverty and Other Issues	Text	<p>Discussion of poverty and sex work.</p> <p>** Needs additional research/material, some topics could not be adequately addressed with the project resources. **</p>	
35	Violence and Hate Crimes	Text	<p>** Needs additional research/material, some topics could not be adequately addressed with the project resources. E.g. the murder rate of trans women of color. **</p>	
36	Legal Discrimination and Legislation	Text	<p>Discusses ongoing legal attacks on transgender rights and existing laws that are discriminatory.</p>	
37	Anti-Transgender Groups/Organizations	Text	<p>Provides an overview of major political/social/etc. organizations that are hostile to transgender/nonbinary people and actively work against the community.</p>	

38	Ray Blanchard	Text	Uses Ray Blanchard as an example of destructive and transphobic research, which was largely accepted by academics initially but didn't hold up to real scrutiny long-term.	
39	Discrimination Concepts	Quiz	Quiz relating to unit concepts.	
40	Unit 4 Conclusion	Text	Conclusion to unit.	
Unit 5 – Gender Identity and Sexuality				
41	Unit 5 Introduction	Text	Introduction to unit.	
42	Defining Sexualities	Text	General definitions of common sexualities	
43	How the 'T' Fits In	Text	The relationship between transgender/nonbinary people and the rest of the LGBTQ+ acronym.	
44	The Nuance of Labeling Sexuality	Text	Additional details about sexualities including divergent romantic and sexual orientations and compound sexualities.	

45	Sexuality and being Transgender and/or Nonbinary	Text	Sexuality as it is defined relative to transgender/nonbinary identities.	
46	Discrimination and Sexuality	Text	Discrimination as it relates to sexuality directed towards transgender/nonbinary people.	
47	Inclusiveness	Text	Discussion about inclusiveness of sexualities in regards to nonbinary individuals, and debate surrounding bisexuality vs pansexuality inclusivity.	Contentious
48	Sexuality Quiz	Quiz	Quiz about sexuality-based concepts.	
49	Slurs and Offensive Terminology Usage	Text	Discussion of slurs directed towards the LGBTQ+ community, based around both sexuality in general and transgender/nonbinary identities specifically.	Contentious

50	Sexuality and Patient Care	Text	How to approach discussion of sexuality and sexual care (e.g. HIV prevention) with transgender/nonbinary patients.	
51	Unit 5 Conclusion	Text	Conclusion to unit.	
Unit 6 – Clinical Care				
52	Unit 6 Introduction	Text	Introduction to unit.	Needs Expert Review
53	Standards of Care	Text	Discusses the WPATH standards of care, including issues regarding gate-keeping identities.	Needs Expert Review
54	Informed Consent	Text	Discusses the informed consent model of patient care.	Needs Expert Review
55	Feminizing HRT	Text	Discusses feminizing hormone therapy.	Needs Expert Review
56	Masculinizing HRT	Text	Discusses masculinizing hormone therapy.	Needs Expert Review
57	“Top Surgery” and Binding	Text	Discusses “top surgery” (breast reduction/augmentation) and chest binding.	Needs Expert Review

58	“Bottom Surgery” Introduction	Text	Discusses general “bottom surgery” (Gender Confirmation Surgery/Sex Re-assignment Surgery) concepts.	Needs Expert Review
59	Feminizing “Bottom Surgery”	Text	Discusses vaginoplasties and related procedures.	Needs Expert Review
60	Masculinizing “Bottom Surgery”	Text	Discusses phalloplasties and related procedures.	Needs Expert Review
61	Clinical Care	Quiz	Quiz on clinical care concepts.	Needs Expert Review
62	Unit 6 Conclusion	Text	Conclusion to unit.	Needs Expert Review
Unit 7 – Cultivating Inclusivity				
63	Unit 7 Introduction	Text	Introduction to unit.	
64	A Welcoming Environment	Text	Defines what a “welcoming environment” consists of.	
65	Inclusive Messaging Examples	Text	Discusses examples of inclusive messaging to create a welcoming environment.	
66	Make Yourself Findable	Text	Discusses the need to make services visible to patients.	

67	Political and Religious Messaging	Text	Discusses the need to avoid political and religious messaging.	
68	Support Groups	Text	Discusses the need and value of support groups.	
69	Patient Interaction	Text	Discusses general concepts related to interacting with patients at all levels of administrative and clinical interaction.	
70	Out in the World	Text	Discusses that supporting transgender/nonbinary people should extend beyond one's professional experience.	
71	Reaching Understanding	Quiz	Quiz on inclusivity concepts.	
72	Unit 7 Conclusion	Text	Conclusion to unit and course.	