

# Systematic review of educational interventions on older LGBT+ adults: recommendations for practice, education and research

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## 1. BACKGROUND

- Research demonstrates that inequalities in outcomes on health and social wellbeing for LGBT+ older adults are perpetuated by the cumulative disadvantages from discrimination and social exclusion throughout the life course and a lack of culturally competent workforce.
- Gaps in knowledge and cultural competency of health and social care practitioners working with LGBT+ older adults needs attention but is yet to be prioritised.

## 2. AIM OF THE REVIEW

- The aim of this review was to describe the educational interventions used to educate health and social care practitioners on the needs of older LGBT+ adults.
- Its specific aims were to:
  - i. describe interventions used to educate the health and social care workforce on the experiences and needs of older LGBT+ adults (defined as aged 55 and older);
  - ii. describe the impact of these interventions on knowledge, attitudes and competence; and
  - iii. discuss the evaluation designs of interventions, including quality.

## 4. FINDINGS

- Positive outcomes were demonstrated across the studies, especially an increase in knowledge.
- Increases in skills and attitudes was less evident, especially in studies using shorter and less diverse intervention designs.
- Overall high satisfactions with the trainings were reported, although in rare cases signs of cultural blindness (e.g. reporting, “we treat everyone the same”) were reported as well.
- Findings suggest that interventions that incorporate diverse teaching strategies, especially interactive experiential activities such as:
  - Storytelling
  - Inclusion of LGBT+ older adults (using videos, panel discussions, vignettes)

## 5. CONCLUSIONS/IMPLICATIONS

- Professional and vocational education is an important tool to improve cultural competency.
- To have a positive impact on transfer of learning into practice and provide a more sustainable approach in addressing LGBT+ ageing inequalities educators need to:
  - diversify intervention contents, approach LGBT+ education from an interdisciplinary perspective and involve LGBT+ people in the design, delivery and evaluation of education.
- To improve the quality of study designs researchers need to:
  - develop more robust study designs such as randomized controlled trials and focus on the longitudinal effects of educational interventions.

## 3. SEARCH AND REVIEW METHODOLOGY

- A systematic review following PRISMA guidelines was used. The search of peer-reviewed papers published before February 2020 was conducted in the electronic databases MEDLINE, CINAHL, PsycINFO, EMBASE, ERIC, Social Sciences Full Text and Web of Science.
- The search resulted in a screening of 2509 papers with 25 assessed for eligibility and 9 matching the inclusion criteria (see Table 1).
- Papers were assessed using the medical education research quality instrument (MERSQI). The maximum possible score was 18.
- The range of scores for the included studies was 9 to 14.5. The main reasons for the low scoring were: the absence of randomised control studies; the non-use of objective measures; and the absence of measures to capture practice focused outcomes, such as change in the behaviour of participants.



higher engagement,  
increased awareness and  
empathy in participants

### CHALLENGES OF APPLICATION TO PRACTICE AND IMPROVING CARE:

- Prejudice of staff, residents or their families
- Conflict of values, often related to religion
- Rigid organizational systems
- Lack of training for all staff

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## FURTHER INFORMATION

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### INCLUSION CRITERIA WERE:

- i. empirical studies using any research design;
- ii. evaluated educational interventions focusing on the experiences and needs of older LGBT+ adults;
- iii. target population included health practitioners, social care practitioners or other staff working in aged care services - irrespective of educational level;
- iv. conducted in any setting (hospital, community);
- v. used any educational format (online, face-to-face); and
- vi. reported on any educational or practice outcomes.

### EXCLUSION CRITERIA WERE:

- i. studies focused exclusively on descriptions of an educational intervention without evaluation findings;
- ii. studies focused on evaluating educational interventions on sexuality but did not identify issues in relation to older LGBT+ adults.

Table 1: Inclusion/Exclusion criteria