Background
Experience working with the LGBTQ adolescent population led to identification of personal knowledge gaps in care of this population, specifically the needs of the population for education and how to approach their needs as a unique population-culture.

Discussions related to this population with other healthcare providers identified knowledge gaps in care of this population for other providers as well.

Awareness of suicide rates, mental health issues, and social isolation issues in this population led to a search in the healthcare literature about working with LGBTQ adolescents.

There is limited information/literature located specific to the needs and wants of this population.

Finally, there is a need for qualitative exploratory study to understand the needs of the LGBTQ population-culture as related to healthcare.

Methods
Phenomenological study design seeking to explore the experience of the LGBTQ population-culture. IRB approval from the PI’s university obtained.

Voluntary participants were recruited from across a small private university via flyers. Participants had to meet the following inclusion criteria:
1) Self-identify as LGBTQ
2) Age 18-22
3) Graduated from a United States high school
4) English speaking
5) Currently enrolled as a student at PI’s university

Participants (N=14) signed a consent to participate and a media release for audio recording.

Individuals participated in focus groups of 3 to 5 participants per focus group session lasting approximately 1 hour. Focus group interviews were audio recorded and transcribed with read back for accuracy. Transcripts were analyzed for themes and concepts using NVivo software.

Discussion
Make providers aware of needs in the LGBTQ adolescent which are different from the heterosexual adolescent, this is an imperative.

Engage in discussions with other providers to facilitate understanding the difference in culture and view of sexuality for the LGBTQ adolescent.

Be aware of sexuality and the importance of discussions with patients who are disclosing as LGBTQ.

Evaluate office and self for presentation of heteronormative environment, adapt to be open and accepting of the LGBTQ culture.

Offer confidential time with the LGBTQ adolescent during healthcare appointments.

Educate all adolescents on what can and cannot be disclosed to guardians in confidential discussions with providers.

Future Directions
Expand on this study to gather more data and questions on sexuality and self-identification as well as interviews with a larger number of participants to gain a broader understanding of the population-culture and their unique needs.

Assess provider knowledge of LGBTQ adolescents and sexuality in healthcare.

Develop educational modules for education credits on sexuality and the LGBTQ adolescent culture for healthcare providers.

Encourage all providers to offer confidential time for discussions with adolescents.

Contact Information
Stephanie C. Evans, PhD, APRN, CPNP-PC
E-Mail: S.C.Evans@TCU.EDU