

The Q Card: A Feasibility Study of a Patient-Initiated Communication Tool for Sexual Minority Youth and their Healthcare Providers

Executive Summary

Background

As a result of cultural homophobia and stigma, lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ) youth are at increased risk for suicide, depression, bullying, and homelessness. However, few studies have suggested patient-centered ideas for improved communication between these youth and their health care providers. Many LGBTQ youth report awkward or uncomfortable interactions with providers. We explored whether a simple, patient-initiated communication tool (The Q Card) could promote improved communication and better health for sexual minority youth.

The Q Card

The Q Card is a tri-fold business card designed to simultaneously empower LGBTQ youth and educate their healthcare providers. The Card offers a series of questions and prompts to guide youth through a structured conversation on privacy and confidentiality, sexual orientation and gender identity, and their unique healthcare needs. The bottom panel is perforated for easy tear-off, and includes tips and best practices for providers treating LGBTQ youth. A Quick Response code on the front panel will take users to a website with local resources, a feedback survey, and more information about the project.

Methods

We conducted five focus groups using a convenience sample of LGBTQ-identified youth in community settings in the Seattle area, along with 23 key informant interviews of local health care and service providers who work with LGBTQ youth, including physicians, school nurses, community leaders and youth organizers.

All study procedures received approval from the University of Washington's Human Subjects Division.

Results

Quantitative data included demographic information for both groups. Qualitative data from both groups emphasized the role of health care providers in the lives of LGBTQ youth, tips for providers, and feedback on a prototype of the Q Card itself. Youth in five focus groups were supportive of the Q Card idea, and believed it would help facilitate open dialogue with providers. Key informants indicated they saw the utility of a patient-initiated tool and were interested in better ways to serve LGBTQ youth. Specifically, health care providers suggested the Q Card would both empower patients and educate providers.

Discussion

In addressing health disparities among LGBTQ youth, it is important to consider the role of patient empowerment and patient-provider communication in improving health outcomes and building self-efficacy in sexual minority youth. Youth and providers gave valuable suggestions for improving communication, as seen in the figure below. The Q Card is designed to facilitate many of these steps, and is worth further exploration and possible piloting.

