

Just Ask! The Primary Care Pediatrician's Role in Adolescent Disclosure of Gender Identity and Sexual Orientation

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Background

- Lesbian, gay, bisexual, transgender, queer/questioning (LGBTQ+) youth experience worse healthcare outcomes attributable to stigma, discrimination, and barriers to care.¹
- Social support is crucial to reducing these health disparities.²
- Primary care providers (PCPs) can promote inclusive environments and safe spaces for LGBTQ+ youth through asking about sexual orientation (SO) and gender identity (GI).
- We aimed to (1) determine if there is an association between PCP asking and adolescent disclosure, (2) assess patient perspectives on barriers and facilitators of disclosure, and (3) identify provider-initiated actions associated with disclosure.

Methods

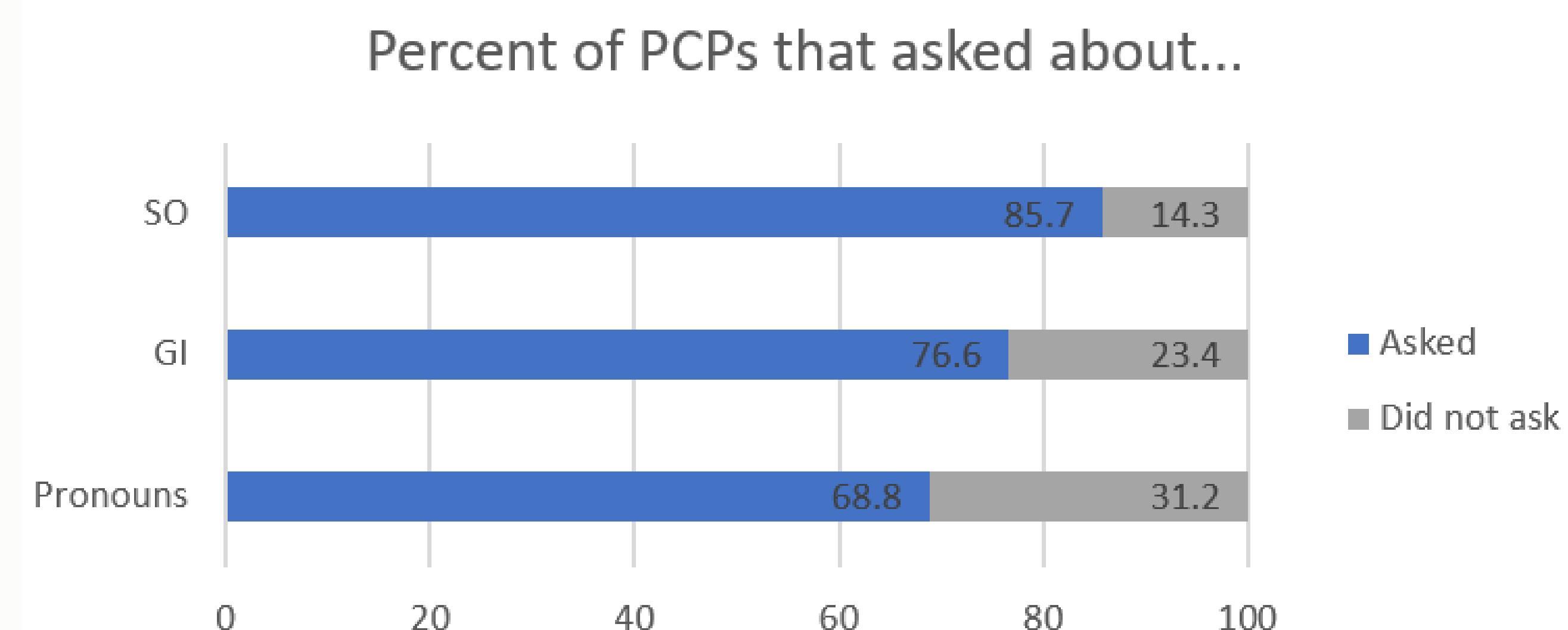
- Anonymous surveying of adolescents 13-17 at a large pediatric, federally-qualified health center from June-Sept 2023 after their annual physicals
- Questions asked about demographics, SOGI, prior disclosure, and barriers and facilitators to disclosure
- Distributed through personal email via Qualtrics and completed within the following month

Demographics

	N	%
Age		
13	15	19.5%
14	10	13.0%
15	25	32.5%
16	12	15.6%
17	15	19.5%
Race/Ethnicity		
Asian	3	3.9%
Black or African American	16	20.8%
Hispanic, Latino, or Spanish	37	48.1%
White	4	5.2%
Multiple Ethnicities	13	16.9%
Prefer Not to Say	3	3.9%
Gender Diverse Identity		
Transgender	3	3.9%
Nonbinary	2	2.6%
Cisgender	21	27.3%
None of the Above	51	66.2%
Sexual Orientation		
Straight	54	70.1%
Gay	1	1.3%
Bisexual	11	14.3%
Pansexual	3	3.4%
Queer	1	1.3%
Asexual	1	1.3%
Omnisexual	1	1.3%
Unsure or Questioning	4	5.2%
Other	1	1.3%

- 56.7% of surveys were completed (77 of 136)
- 31.2% identify as LGBTQ+
- 29.9% represent sexual minority groups (with some overlap)
- 6.5% represent gender minority groups

Results



PCP Asking vs Adolescent Disclosure

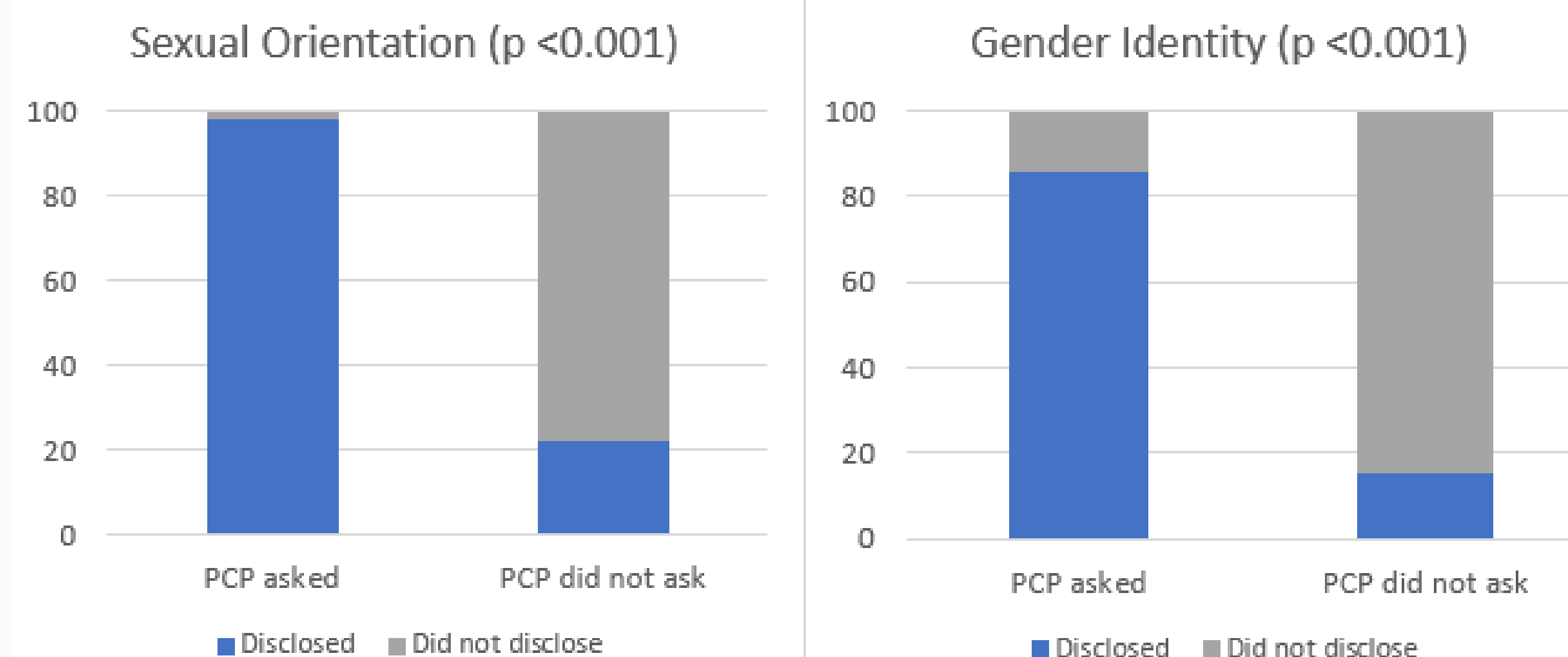
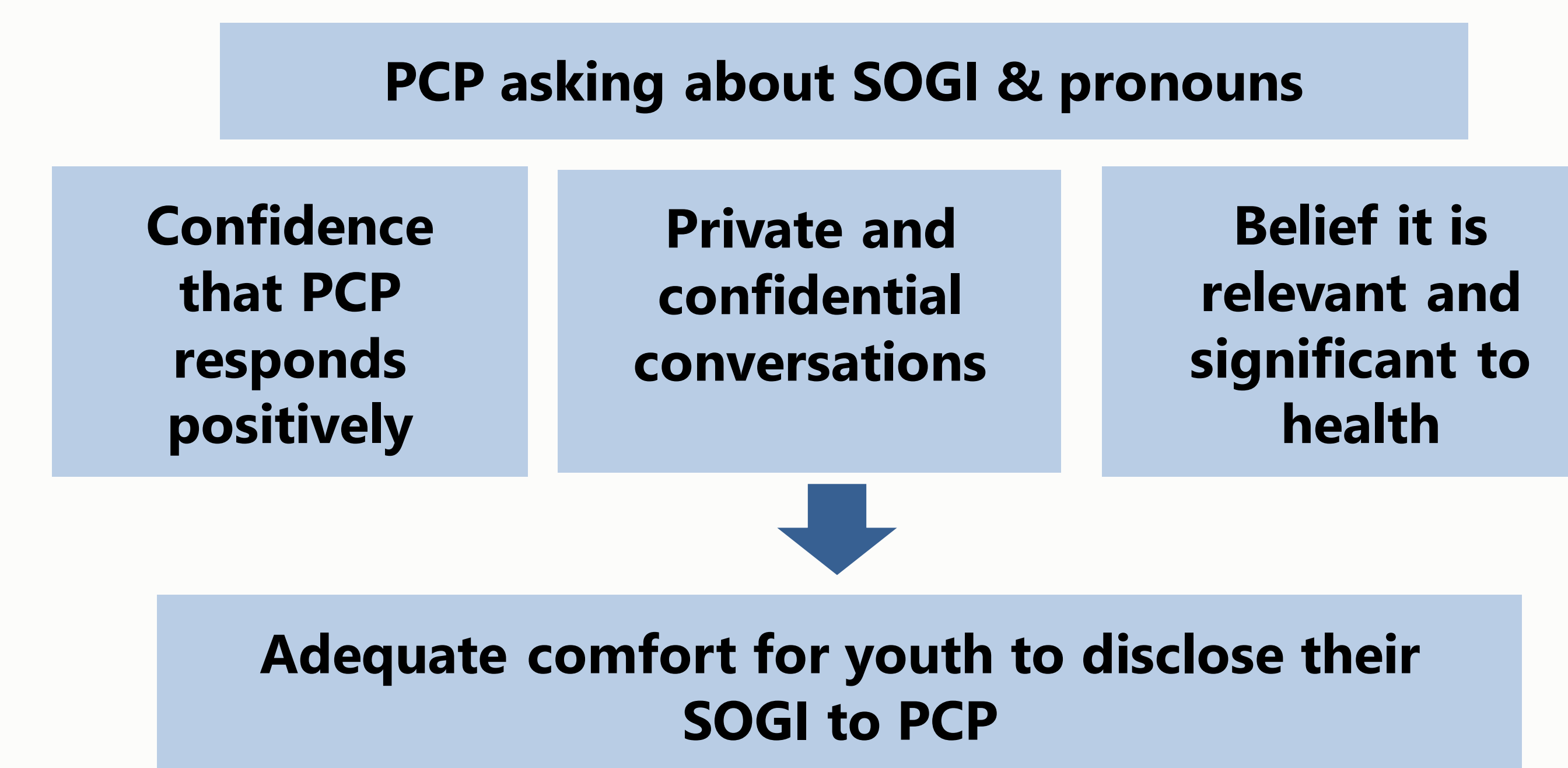


Figure 1. Most adolescents have disclosed their GI (74.0%) and SO (84.2%) to their PCP. Patients who were asked were significantly more likely to disclose their SO (98% vs. 22%, p<0.001) and GI (86% vs. 15%, p < 0.001).

"If you have not told your pediatrician your sexual orientation/gender identity, why not?"

66.7% did not disclose their **sexual orientation**
73.3% did not disclose their **gender identity**
because they were not asked

Important Promoters of Disclosure



- Most adolescents expressed that feeling comfortable with their physicians was an important factor when it came to disclosure of their SOGI.

Discussion

- Some limitations include sample size, selection bias, and self-reported results.
- PCPs asking their patients about SOGI can increase disclosure, improving trust between the patient and the provider → increased likelihood that LGBTQ+ youth receive appropriate care, improving health outcomes.
- Integral to incorporate into future patient care to optimize pediatric healthcare.
- Future steps include further analyses of demographics and how they relate to disclosure, as well as further data collection to increase our sample size.

Acknowledgements & References

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1. Kann L, McManus T, Harris WA. Youth Risk Behavior Surveillance — United States, 2017. MMWR Surveill Summ; 2018. p. 1-114.
 2. The Trevor Project. (2022). 2022 National Survey on LGBTQ Youth Mental Health. New York, New York: The Trevor Project. For additional information please contact: Research@TheTrevorProject.org