

# Secondary School Nurse as an information source for Finnish Sexual and Gender Minority Youth

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## 1 Introduction

Internet and other online resources are common in adolescents' lives. Previous literature shows that young people from sexual and gender minority backgrounds use online resources with several purposes: to seek information specific to their development of sexual orientation and gender identity, to find support for experiences of isolation, stigmatization and discrimination, and to connect with other sexual and gender minority people [1,2]. Sexual and gender minority (SGM) youth are adolescents whose sexual orientation is non-heterosexual and/or their gender identity cannot be defined within female/male binary [3].

Besides the online information sources, previous research indicates that SGM youth see health professionals as significant sources of information in their lives [4,5]. However, studies have also reported health professionals lacking knowledge about SGM youth, their health needs, and how to support SGM youth [6,7]. This may lead to SGM youth seeking for support and information elsewhere [2,4]. Finnish secondary school nurses meet SGM youth regularly [8], and nurses have opportunities to offer information that supports adolescents' sexual orientation and gender identity development. Previous studies indicate that Finnish SGM youth value school nurses from informational and supportive aspects [9,10], but SGM youth's experiences about secondary school nursing has not been studied thoroughly. The purpose of this study was to describe the perceptions of SGM youth about secondary school nurses as an information source for them.

## 2 Methods

A qualitative descriptive study was done to create an in-depth description of the topic [11,12]. Snowball sampling was used to reach Finnish GSM youth as a small and hard-to-reach group [13,14].

Eligibility criteria for participants were: self-identification as SGM youth, age 16-19 years, past experiences about the secondary school nursing, mother tongue Finnish or Swedish, and a voluntary participation.

Data collection method was a self-administrated online questionnaire with:

- **Demographic questions** (age, gender identity, identity as SGM youth)
- **Open-ended questions regarding I)** the competence and attitudes of secondary school nurses to meet SGM; **II)** given information about the development of gender identity and sexual orientation; **III)** desired information from the secondary school nurses.

### 3 Data collection

Data were collected in 2016 through social media of a national human rights organizations for sexual and gender minorities (SETA and Regnbåksankan) with Finnish and Swedish advertisements [15,16]. Participants were also encouraged to tell about the study to their peers [13,14]. Ethical approval was obtained from Turku University Research Ethics Committee. Participants received information about the study in the first page of the questionnaire, and the informed consent was defined as sending the final replies to the questionnaire. Parental consent was not requested from the participants under the age of 18 because of causing possible harm, if the participant was not out for their parents [17].

### 4 Data analysis

Data were analyzed inductively by following Braun & Clarke (2006) process of thematic analysis: 1) familiarization the data, 2) generation of codes, 3) interpretation and search for themes, 4) reviewing the initial themes, 5) defining and naming final themes and sub-themes, and 6) preparation of the final conceptual framework. [12] A conceptual framework was created to describe the significance of secondary school nurse as an informational source for SGM youth in discovering sexual orientation and/or gender identity.

### 5 Results

In total, 35 SGM youth completed the questionnaire. Participants' mean age was 17.2 years, and their identities were diverse e.g *genderfluid bisexual*.

During the development of sexual orientation and/or gender identity, GSM youth desired acceptance, support and information from secondary school nurses. For SGM youth, relevant topics of information to discuss with secondary school nurses were: **a.** *diversity in sexuality and gender and their development in adolescence*, **b.** *sexual health of SGM youth*, **c.** *the normality of SGM identities*, **d.** *places to meet other SGM youth*

(both physical and online), and e. *life as SGM people in Finland*. Furthermore, SGM youth mentioned that they desired secondary school nurses' guidance to relevant informational online sources and online places where to meet other SGM youth. The information SGM youth got from secondary school nurses did not always cohere with the topics relevant to them, since SGM youth described regularly that nurses lacked information about diversity in sexuality, the given information was heteronormative and awareness of gender minority youth was minimal. The relationship between SGM youth and secondary school nurses was sometimes imbalanced, because many participants felt receiving passive care, and secondary school nurses defined the information SGM youth needed.

## 6 Conclusions

Finnish SGM youth were sexually and genderly a diverse adolescent group, and they perceived secondary school nurses as a significant information source. SGM youth were willing to discuss about diversity in sexuality and gender and topics related to it with nurses. The secondary school nurses were also seen as a support to find relevant online information and online networking options. This may indicate that SGM youth do not always find the information they need from online by themselves, and secondary school nurses can support them through face-to-face discussion and guidance.

The results of this study strengthened previous understanding and indicated that secondary school nurses were not always acknowledged of diversity in sexuality and gender, and they encountered SGM youth with a heteronormative approach. Especially topics related to gender identity were uncommon for secondary school nurses, and SGM youth indicated they would like to get information from these topics from nurses.

More attention in research is needed to pay for what Finnish secondary school nurses know about diversity in sexuality and gender, and how they see this topic related to their work with adolescents' sexuality and gender development. More research is also needed to identify ways in which SGM youth can be best supported by secondary school nurses, since SGM youth did not always get desired information from nurses. It would also be interesting to explore how online sources of relevant information could support SGM youth and secondary school nursing with a conversation about diversity in sexuality and gender.

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