Abstract: This poster presents initial findings from an exploratory, qualitative study investigating the health information practices of LGBTQ+ communities in South Carolina (SC). Significant health disparities exist between LGBTQ+ people and their cisgender, heterosexual counterparts. An important but under-researched barrier producing disparities is informational, as LGBTQ+ people face challenges in learning about their healthcare needs, navigating the healthcare system, and overcoming barriers to care. This study addresses research gaps via the following questions: 1) How do LGBTQ+ communities create, seek, share, and use health information?, and 2) What social and structural factors affect these health-related information practices?

Findings are informed by ~30 ongoing individual, in-person interviews with SC LGBTQ+ community leaders using a semi-structured protocol. Sampling strategies align with those suggested for marginalized or “hidden” populations – purposive, snowball, and theoretical. We incorporate an intersectional lens in our methodology, sampling for maximal variation among salient identity categories like race/ethnicity, age, and education. Data include transcripts from audio-recorded interviews and results of a mapping exercise to triangulate data collection. Analysis is iterative and inductive, and uses the constant comparative method to generate open codes followed by organization into larger themes via axial and selective coding.

Preliminary findings uncovered themes of resilience, self-defensive information practices, and structural barriers to information access. Conceptual analysis of these themes using selective coding suggests SC LGBTQ+ communities are knowledgeable about their health information needs but perceive experts as uninformed. Further, participants often mistrust experts like medical practitioners, who often lack cultural competencies when facilitating use of services for LGBTQ+ communities. Participants navigate structural barriers to health information and resources by engaging in self-defensive practices and insulating health knowledge within their community. Findings show how health practitioners can improve care to LGBTQ+ patients and information centers like libraries can leverage knowledge of LGBTQ+ communities for health promotion.