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## **Attachment 3f: Interview Guide Healthcare Providers**

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# Interview Guide: Healthcare Providers

Participant ID: \_\_\_\_\_ Data Collector ID: \_\_\_\_\_

Date: \_\_\_\_\_ Start time: \_\_: \_\_ am/pm End time: \_\_: \_\_ am/pm

## INTRODUCTION AND PURPOSE OF INTERVIEW

Hello my name is \_\_\_\_\_ and I work for [Atlas Research or Abt Associates]. My company was selected by the Centers for Disease Control and Prevention (CDC), Division of HIV/AIDS Prevention (DHAP) to conduct a study to better understand the current barriers and facilitators to HIV prevention, care, and treatment for transgender women.

We are doing this study because we want to learn about how transgender women protect themselves from HIV, and how they take care of themselves if they have HIV. As part of this study, we are asking 20 transgender women living with HIV, 20 HIV-negative transgender women, and 10 providers who see transgender women in their clinic or office, to take part in a one hour interview in three different cities. The conversations we have will help us understand how we can inform improvements in HIV prevention and care for transgender women.

This interview is going to include a mix of open-ended and close-ended questions. For any close-ended questions, we will point to a list of responses for you to choose from. Throughout our discussion, if there are any questions you would prefer not to answer, just let me know and we can skip to the next question. Do you have any questions before we begin?

## PROFESSION AND TRAINING

1. What, if any, **specific training or specialization** have you received that has prepared you to provide care to transgender women?
  - a. What **gaps have you observed in the availability and content** of training and specialization to help providers provide care to transgender women?
    - i. **What else** would you like to know?
  - b. What **strategies do you use to stay up-to-date**?

## EXPERIENCE PROVIDING CARE TO TRANSGENDER WOMEN

2. **How long have you been providing healthcare to transgender women?**

\_\_\_\_\_ years \_\_\_\_\_ months

[Type here]

3. For approximately how many transgender women do you currently provide healthcare services?

\_\_\_\_\_

4. For approximately how many transgender women have you provided healthcare services throughout your career?

\_\_\_\_\_

5. Tell me about your experiences providing care to transgender women.

- a. Have you seen any changes in the number of transgender women you serve over time?
- b. Have you seen any changes in the overall approach to providing care to transgender women since you began practicing healthcare? (e.g., medical advances, programmatic changes, administrative changes, etc.)

**HORMONE THERAPY**

6. Do you administer hormone therapy (HT) to transgender women?

- No  0
- Yes  1
- Don't know  77
- Refused  99

**IF ANSWERED 'NO', 'DON'T KNOW', OR 'REFUSED TO ANSWER' TO QUESTION 19, SKIP TO QUESTION 24**

7. How long have you administered HT to transgender women?

\_\_\_\_\_ years \_\_\_\_\_ months

8. For approximately what percentage of your transgender women patients do you currently prescribe HT?

\_\_\_\_\_

9. For approximately what percentage of your transgender women patients have you prescribed HT throughout your career?

[Type here]

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10. How does **hormone therapy (HT) relate to HIV prevention and care services** you provide transgender women?

- a. What **barriers**, if any, have you experienced related to prescribing and administering HT to transgender women?
- b. **[If applicable]** What **strategies** do you use to overcome those barriers?
- c. Do you have conversations with your patients about whether or not they are receiving or have received **hormones outside of a medical setting**?
  - i. How might your knowledge of patients use of hormones outside of a medical setting **impact your ability to provide care**?

<b>GENDER CONFIRMATION SURGERY</b>
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11. **Approximately what percentage of the transgender women patients have you served throughout your career that have had any type of gender confirmation surgery?** (e.g., penectomy, vaginoplasty, breast enhancement/augmentation, facial feminization surgery)

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a. Approximately what percentage of those patients had any type of **lower** gender confirmation surgery? (e.g., penectomy, vaginoplasty)

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b. Approximately what percentage of those patients had any type of **upper** gender confirmation surgery? (e.g., breast enhancement/augmentation, facial feminization surgery)

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12. How does **gender confirmation surgery relate to the HIV prevention and care services** you provide transgender women?

a. **What role** do you play in providing prevention and care services to your patients who are **contemplating gender confirmation surgery**?

i. Those who are undergoing it? Those who have completed it?

b. What **impact** (positive or negative) might gender confirmation surgery have on a transgender woman's **engagement** in HIV prevention and care activities?

[Type here]

- c. What **HIV risks should be considered** for transgender women who have had gender confirmation surgery?

**SEXUAL RISK AND TESTING**

**13. How do you assess sexual risk taking with transgender women?**

- a. What is your comfort level in discussing sexual risk reduction with transgender women?
- b. How do you **address sexual risk reduction with transgender women living with HIV**?
- c. Are these **strategies different for transgender women** than they are for other populations?

**14. What strategies do you use to talk with patients who are transgender women about **being tested for HIV** (e.g., during routine appointments)?**

- a. What challenges or barriers do you encounter when talking with transgender women about getting tested for HIV?

**PrEP**

**15. Are doctors in your clinic currently prescribing PrEP?**

- No  0
- Yes  1
- Don't know  77
- Refused  99

***IF ANSWERED 'NO', 'DON'T KNOW', OR 'REFUSED TO ANSWER' TO QUESTION 28, SKIP TO QUESTION 33***

**16. Are you currently prescribing PrEP?**

- No  0
- Yes  1
- Don't know  77
- Refused  99

***IF ANSWERED 'NO', 'DON'T KNOW', OR 'REFUSED TO ANSWER' TO QUESTION 29, SKIP TO QUESTION 33***

[Type here]

17. For approximately what percentage of patients are you currently prescribing PrEP?

\_\_\_\_\_

18. Of those, approximately what percentage of your transgender women patients are you currently prescribing PrEP?

\_\_\_\_\_

19. Do you recommend PrEP for you HIV-negative transgender women patients?

- a. If so, how do you approach the potential use of PrEP with your HIV-negative transgender women patients?
- b. What are some of the strategies you use that help keep transgender women adherent to PrEP?
- c. What barriers have you experienced engaging and retaining HIV-negative transgender women on PrEP?
- d. Are you aware of any specific considerations for transgender women when prescribing PrEP?

***IF CURRENTLY PRESCRIBING PREP, SKIP TO QUESTION 34***

20. Even though you don't prescribe PrEP yourself, do you recommend PrEP for your HIV-negative transgender women patients?

- a. If so, how do you approach the potential use of PrEP with your HIV-negative transgender women patients?
- b. Does your clinic have a preferred PrEP clinic or provider you refer patients to be prescribed PrEP?
  - i. How do you work with this clinic or provider to refer your transgender patients to them?
- c. Do you have concerns about PrEP and transgender women? If so, what concerns do you have?
  - i. Have you refrained from referring transgender women patients to a PrEP program? If so, why?

[Type here]

**HIV/AIDS CARE**

**21. How long have you been providing care for people living with HIV/AIDS (PLWH)?**

\_\_\_\_\_ years \_\_\_\_\_ months

**22. For approximately what percentage of your patients are you currently providing HIV/AIDS care?**

\_\_\_\_\_

**23. Approximately what percentage of your transgender women patients are living with HIV?**

\_\_\_\_\_

**24. For approximately what percentage of your transgender women patients are you currently providing HIV/AIDS care?**

\_\_\_\_\_

**25. How long have you been providing HIV/AIDS care for transgender women?**

\_\_\_\_\_ years \_\_\_\_\_ months

**26. What challenges and or barriers have you experienced when attempting to engage and retain transgender women living with HIV in HIV care and treatment?**

- a. What strategies do you use to overcome those challenges?
- b. Are these challenges different for transgender women than they are for other populations?

**27. What are some of the facilitators that have helped you to engage and retain transgender women living with HIV in HIV care and treatment?**

- a. Are these facilitators different for transgender women than they are for other populations?

**28. For approximately what percentage of your transgender women patients living with HIV do you currently prescribe antiretroviral therapy?**

\_\_\_\_\_

[Type here]

**IF NOT CURRENTLY PRESCRIBING ART, SKIP TO QUESTION 43**

**29.** What are some of the things you consider when prescribing ART for transgender women? (e.g., hormone therapy)

- a. How do you raise the issue of taking ART with transgender women who are not currently taking them?
- b. What strategies do you use to help transgender women remain adherent to ART?
- c. Have you encountered any challenges when trying to help transgender women adhere to ART?
- d. Have you encountered any situations where transgender women are concerned about the interactions of hormone therapy (HT) and ART?
  - i. If so, how do you address their concerns?

**IF CURRENTLY PRESCRIBING ART, SKIP TO QUESTION 44**

**30.** What has stopped you from prescribing ART?

**FACILITY PROGRAMS AND POLICIES**

**31.** Do you believe that the environment of the facility impacts your ability to engage and retain a transgender woman in HIV prevention, care, and treatment services? How so?

a. Does the facility offer any of the following services to transgender women?

- Gender-neutral bathrooms  1
  - Gender affirming materials  2
  - Transgender-identified staff  3
  - Practice/clinic staff that are knowledgeable about transgender health  4
  - Referrals to organizations that are transgender-friendly/competent  5
  - Other  6
- Please specify* \_\_\_\_\_

b. What impact do these supports have?

[Type here]

**32. What are some of the policy or structural barriers facing transgender women related to receiving healthcare?**

- a. What has been the impact of these barriers on your ability to provide HIV-related services? How have you addressed them?
- b. Has the gender identity of any of your transgender patients created barriers for you or the administrative staff at your facility? How so?
  - i. Has gender identity affected your clinic's ability to maintain accurate health records or EMR entries? How so?
- c. Have you experienced issues with insurance authorizations of prescriptions or treatments for your transgender female patients? How so?

<b>KEY PRACTICES AND CLOSING</b>
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**33. In your experience, are there any additional key practices that you see as critical to engaging transgender women in HIV prevention, care and or treatment?**

Is there anything else that you would like to share with us regarding HIV prevention, care or treatment for transgender women?

[Type here]