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Attachment 3: Qualitative In-Depth Interview Guide

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SECTION 1: INTRODUCTION

Thank you so much for participating in this research study today. Your participation may contribute to a better understanding of the health and wellbeing of transgender and other gender non-binary youth. By doing this interview, you will help us understand how we can support young people who are transgender or gender non-binary in being happy, strong, and healthy. I want to begin by reminding you that everything we talk about today is confidential or private. During the interview, I will not ask you to tell me any personal information about your friends, family members, romantic partners or anyone else you know- and please just use their first names or a nickname if you talk about them. Also, remember that your participation today is completely voluntary, meaning that it is your choice. You can skip any question that you do not want to answer and you can stop the interview at any time for any reason. Before we begin, do you have any questions for me?

[ANSWER ANY PARTICIPANT QUESTIONS]

SECTION 2: BUILDING RAPPORT

To begin, we will start with some questions to help me learn a little bit more about you.

- 1. Tell me a little about yourself. What would you like me to know about you as we begin this interview?
- 2. What interested you about this project? What made you want to come talk to us today?

SECTION 3: DEFINING GENDER

In this next section, we are going to talk a bit about gender.

| 1. | How do you identify your gender? By that I mean, how do you define your gender? |
|----|---|
| | Note gender identity |

a. [IF PARTICIPANT DESCRIBES THEIR GENDER IDENTITY AT LENGTH] In our interview today, what word or words would you like me to use when we talk about your gender? *Note preferred terms above.*

- 2. What pronouns should people use when referring to you? *Note pronouns* ______
- 3. When you say you identify as [INSERT GENDER IDENTITY], what does that mean to you?
- 4. Some people who identify as [GEN ID] do things to live their gender. They might dress a certain way, take hormones, or even have surgery. On the other hand, some people prefer not to do any of those things. What, if anything, have you done to live your gender?
 - b. What, if anything, helps you to [TRANSITION ACTIVITIES]?
 - c. How have people responded to [TRANSITION ACTIVITIES]?
 - d. Is there anything you would like to do to live your gender that you are not doing right now?
 - i. [IF YES] What things? What is standing in your way?
- 5. People sometimes have a lot of different views about how people who identify as [GEN ID] should walk, talk, and act. What type of views have you heard?
 - e. From whom/ where?
 - f. How do you feel when you hear these views?

SECTION 4: DEFINING HEALTH

One of the most important reasons we are doing this interview today is to better understand what makes youth like you feel happy, strong, and healthy. Before I ask you questions about that, I'd like to hear a bit about what those words mean to you.

- 1. For you what does it mean to be happy?
 - a. When in your life do you feel most happy? When in your life do you feel least happy?
- 2. What does it mean to be strong?
 - a. When in your life do you feel the strongest? When in your life do you feel the least strong?
- 3. What does it mean to be healthy? [PROBES] Physically healthy? Emotionally healthy?
 - a. When in your life do you feel the healthiest? When in your life do you feel the least healthy?

Thanks for explaining what those words mean to you. Moving forward in the interview, whenever I talk about "health" or "healthiness," I am talking about these three things: happiness, strength, and being physically and emotionally well. Another way to think about it might be health in mind, body, and soul. Does that make sense? [BE SURE PARTICPANT UNDERSTANDS BEFORE CONTINUING]

4. Thinking about health in this way, in terms of happiness, strength, and being physically and emotionally well, how healthy would you say you are today? How so?

SECTION 5: INDIVIDUAL LEVEL PROTECTIVE FACTORS (I.E., ASSETS)

Now we are going to move into some more questions about you and your life.

- 1. What do you think are some of the positive things about being [GEN ID]?
 - a. [PROBE] What do you like about being [GEN ID]?
- 2. What, if anything, about being [GEN ID] motivates you to be healthy?
- 3. In general, what things about you help you be the healthiest version of yourself? How so?
- 4. What things do you do that help you be the healthiest version of yourself? How do they help?

SECTION 6: INTERPERSONAL LEVEL PROTECTIVE FACTORS (I.E., RELATIONAL RESOURCES)

Excellent. Next we are going to talk a bit about the important relationships in your life.

| 1. | Which | people in your life help you be the healthiest version of yourself? |
|-------------|----------------|--|
| | Note p | eople |
| | [PROF | BE IF NEEDED] Who were the first three people that came to mind when I asked this |
| | questic | on? |
| | | [FOR EACH] |
| | a. | Tell me what I should know about [PERSON]? |
| | b. | What is your relationship to [PERSON]? |
| | с. | How long have you known each other? |
| | d. | In what ways do they help you be the healthiest version of yourself? What types of things happen with [PERSON] that make you feel like the healthiest version of yourself? How do these things about [PERSON] help you to be the healthiest version of yourself? |
| <u>PARE</u> | NTS | |
| 2. | raised aunt, o | 'd like to ask you a few questions about your parents. By parents, I mean the people that you. For some people, this could be a mom or dad, for others this might be a grandparent, or other adult. For you, who are your parents? |
| | | Tell me what I should know about [PARENTAL FIGURE(S)]. |
| | | KIP SUBQUESTION b AND SUBQUESTION c IF YOUTH REJECTED BY PARENTS] |
| | _ | In what ways, if any, do your [PARENTAL FIGURES] help you be the healthiest version of yourself? How so? |
| | c. | In what ways, if any, do your [PARENTAL FIGURES] get in the way of you being the healthiest version of yourself? How so? |
| | [F0 | OR ALL YOUTH] |
| | d. | What, if anything, do you wish your [PARENTAL FIGURE] would do/ had done |

[IF YOUTH TALK ONLY ABOUT CHOSEN FAMILY]

e. I notice you did not discuss the person who raised you for these questions about parents. Can you tell me a bit about why that is?

differently? If they did/ had done these things, how would it affect your health, strength, or

ROMANTIC PARTNERS

3. Are you currently romantically involved with anyone?

[IF YES]

happiness?

[IF MORE THAN ONE, ASK Q5a-b FOR EACH; SOLICIT NAMES OR INITIALS FOR EACH TO ORGANIZE DISCUSSION]

- a. Tell me about this person.
 - i. [PROBES] Who are they? How did you meet? How do you usually spend your time together? What do you like about them? How would you describe your relationship with this person (examples if needed: dating, boyfriend/ girlfriend, etc.)
- b. How, if at all, do they help you be the healthiest version of yourself? What, if anything specifically, do they do that helps you be healthy?

Thank you for your answers to these questions. We have reached the half way mark of the interview. I wanted to check in with you now to see whether you need a break to grab a drink of water, stretch your legs, or use the bathroom. [PAUSE OR PROCEED DEPENDING ON PARTICIPANT NEED]

SECTION 7: COMMUNITY LEVEL PROTECTIVE FACTORS (I.E., COMMUNITY RESOURCES)

Great – thanks for sharing that with me. Next I am going to ask you about different places, activities, or events that you believe help you be the healthiest version of yourself.

SCHOOL

1. I like to start off this section by talking about school. Are you currently in school?

[IF NO, ASK ALL OF THE FOLLOWING]

Note activities

- a. Tell me a bit about your reasons for not currently being in school.
 - i. [PROBES] Do you work? Did you finish school? Are you on break? Do you intend to go back?
- b. Tell me a bit about how school was for you before you stopped attending. How you feel when you were there? How safe did you feel at school? What made you feel these ways?
- c. What, if anything, about your school helped you to be the healthiest version of yourself?
 - i. Were there specific groups or activities within your school that helped you be the healthiest version of yourself?

| | [IF YES] How so? |
|-----|--|
| ii. | Were there any school rules or policies that helped you be the healthiest version of |
| | yourself? |
| | Note rules/ policies |
| | [IF YES] How so? |

- d. What, if anything, about your school got in the way of you being the healthiest version of yourself?
- e. What, if anything, did you wish was different about your school? If your school could have made these changes, how would it have affected your health, strength, and happiness?

[IF YES, ASK ALL THE FOLLOWING:]

a. What year are you in? [CLARIFY IF IN HS, COLLEGE, OR SOMETHING ELSE]

| b. Tell me a bit about your school. How you feel when you are there? How safe do you school? What makes you feel these ways? c. What, if anything, about your school helps you be the healthiest version of yourself? i. Are there specific groups or activities within your school that help you be the healthiest version of yourself? 1. Note activities | n of |
|--|--------|
| c. What, if anything, about your school helps you be the healthiest version of yourself? i. Are there specific groups or activities within your school that help you be the healthiest version of yourself? 1. Note activities 2. [IF YES] How so? ii. Are there any school rules or policies that help you be the healthiest version of yourself? 1. Note rules/policies 2. [IF YES] How so? d. What, if anything, about your school gets in the way of you being the healthiest version yourself? e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| i. Are there specific groups or activities within your school that help you be the healthiest version of yourself? 1. Note activities 2. [IF YES] How so? ii. Are there any school rules or policies that help you be the healthiest version of yourself? 1. Note rules/ policies 2. [IF YES] How so? d. What, if anything, about your school gets in the way of you being the healthiest version yourself? e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| healthiest version of yourself? 1. Note activities 2. [IF YES] How so? ii. Are there any school rules or policies that help you be the healthiest version of yourself? 1. Note rules/ policies 2. [IF YES] How so? d. What, if anything, about your school gets in the way of you being the healthiest version yourself? e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| Note activities [IF YES] How so? Are there any school rules or policies that help you be the healthiest version of yourself? Note rules/ policies [IF YES] How so? What, if anything, about your school gets in the way of you being the healthiest version yourself? What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| 2. [IF YES] How so? ii. Are there any school rules or policies that help you be the healthiest version of yourself? 1. Note rules/ policies 2. [IF YES] How so? d. What, if anything, about your school gets in the way of you being the healthiest version yourself? e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| ii. Are there any school rules or policies that help you be the healthiest version of yourself? 1. Note rules/ policies | |
| yourself? 1. Note rules/ policies 2. [IF YES] How so? d. What, if anything, about your school gets in the way of you being the healthiest version yourself? e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| Note rules/ policies | |
| 2. [IF YES] How so? d. What, if anything, about your school gets in the way of you being the healthiest version yourself? e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| d. What, if anything, about your school gets in the way of you being the healthiest version yourself? e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| yourself? e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | |
| e. What, if anything, do you wish was different about your school? If your school could these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | nake |
| these changes, how would it affect your health, strength, and happiness? TEACHERS AND OTHER SCHOOL STAFF | nake |
| TEACHERS AND OTHER SCHOOL STAFF | |
| | |
| [IF STILL IN SCHOOL, ASK ALL THE FOLLOWING:] | |
| [,, | |
| a. Do you have any teachers or other adults at your school (like a coach, school nurse, or | |
| guidance counselor) that help you be the healthiest version of yourself? | |
| Note professional position of adult in school | |
| i. Tell me about this person/ people. What do they do to help you be the healthic | st |
| version of yourself? | |
| b. Do you have any teachers or other adults at your school that get in the way of you bein | g the |
| healthiest version of yourself? Note professional position of adult in | |
| school | |
| ii. Tell me about this person/ people. What do they do that gets in the way of you | being |
| healthy? How have you responded when they do these things? | |
| c. What, if anything, do you wish teachers or adults at your school would do differently? | If the |
| did these things, how would it affect your health, strength, or happiness? | |
| [IF NO LONGER IN SCHOOL, ASK ALL THE FOLLOWING:] | |
| d. When you were in school, did you have any teachers or other adults at your school (like) | e a |
| coach, school nurse, or guidance counselor) that helped you be the healthiest version of | |
| yourself? | - |
| Note professional position of adult in school | |
| iii. Tell me about this person/ people. What did they do to help you be the healthi | est |
| version of yourself? | -50 |
| e. Did you have any teachers or other adults at your school that got in the way of you be | ng the |
| healthiest version of yourself? <i>Note professional position of adult in</i> | |
| school | 0 - |

- iv. Tell me about this person/ people. What did they do that got in the way of you being the healthiest version of yourself?
- f. What, if anything, did you wish teachers or adults at your school had done differently? If they did these things, how would it have affected your health, strength, or happiness?

SEXUAL HEALTH EDUCATION

Now we're going to move to a specific school topic and talk about the sexual health education class you may have had in middle and/or high school.

- a. Have you had /did you have sexual health education or "sex ed" in middle or high school? [IF YES, ASK i-v]
 - i. What did you think of your sex ed class?
 - ii. What, if anything, did you learn in sex ed that helps you be the healthiest version of yourself? How so?
 - iii. What, if anything, about your sex ed class got in the way of you being the healthiest version of yourself? How so?
 - iv. [IF NOT ALREADY COVERED] To what extent was gender discussed in your sex ed class? Gender identity or transgender issues? Gender expression? Sexual orientation?
 - i. [IF INCLUDED] What was said about [TOPIC]?
 - v. [IF NOT ALREADY COVERED] How did your sex ed class make you feel? What about it made you feel this way?
- b. If you could design your dream sex ed class, what would it look like? [PROBE]
 - i. What topics would it cover? Who would teach it?
 - ii. If your sex ed class looked this way, how could it help you be the healthiest version of yourself?
- c. Where else do you get information about sexual health? How useful has this information been for you?

MEDICAL CARE

Next, I'd like to ask you a few questions about your experiences with medical care.

- 2. When was the last time you received medical care?
 - a. Tell me a bit about this experience. [PROBE AS NEEDED] Why were you there? Who, if anyone, went with you?
 - i. How was your experience with the doctor or medical provider who took care of you during your visit? What made it that way?

- ii. How did you feel during this appointment? What made you feel this way? [PROBE AS NEEDED] How was your experience with the office staff who checked you in for the visit? How was your experience with the nurse or medical attendant who assisted you during the visit? What made it that way?
- iii. How typical was this experience receiving medical care for you? Another way to think about this is, have you had any other experiences like this one or different from this one?
- iv. What, if anything, do you wish had been done differently during this visit? If these things had been different, how would it have affected your health, strength, or happiness?

OTHER INSTITUTIONS/ EVENTS

| 1. | What other places or groups help you to be the healthiest version of yourself? These might be places |
|----|--|
| | like cultural centers, churches, LGBT organizations, youth drop in centers, or the house and ball |
| | scene. Note places |
| | [FOR EACH ONE, ASK Q1a & Q1b] |

- a. What specifically about [PLACE] helps you be the healthiest version of yourself? How so?
- b. What specific groups or activities within [PLACE] are helpful? How so?
- 2. What, if any, events in your area help you be the healthiest version of yourself? Events might include cultural events, parades, fairs, etc. How do they do this?

SECTION 8: SOCIETAL LEVEL PROTECTIVE FACTORS (I.E., SOCIAL MEDIA)

We talked about places and groups in real life that help you be the healthiest version of yourself; however, a lot of people also spend time online looking at websites or using phone apps.

| 1. | What, if any, websites or phone apps do you use the most? These might include things like |
|----|---|
| | Snapchat, Instagram, Facebook, YouTube, or any other website or phone app. |
| | Note sites/ apps |
| | [FOR EACH] |

- a. What, if anything, about [SITE/ APP] helps you be the healthiest version of yourself? How so?
- b. What, if anything, about [SITE/APP] gets in the way of you being the healthiest version of yourself? How so?

SECTION 9: WRAP UP

Is there anything else you would like me to know about what helps you feel healthy, happy, or strong?

Well, we've reached the end of our interview! Thank you so much for your time. I really appreciate the thought you put into your responses today. Before you go, I'd just like to get a few final facts about you, and then check in about what you thought about our conversation.

| 1. | How old are you? <i>Please note age</i> : |
|----|--|
| 2. | What is the sex on your birth certificate? <i>Note sex</i> |
| 3. | Are you Hispanic or Latino? Circle Yes or No |
| 4. | How would you identify your race? <i>Note race</i> |
| 5. | How would you identify your sexual orientation? <i>Note sexual orientation</i> |

- 6. What, if anything, should I have asked you today that wasn't part of this interview?
- 7. What, if anything, did you think should have been asked about in a different way?
- 8. Any other questions or comments?

Thank you so much for your time today. I've really enjoyed speaking with you.

[GIVE PARTICIPANT INCENTIVE]

If you know of any friends who might be interested in doing an interview like this one, please feel free to take some of these palm cards and pass them along.

Also, if you have any questions or thoughts about this interview that you want to share with me after today, or feel in need of further information or support in response to the topics we discussed, please do not hesitate to call us on the study phone. The number is listed on these palm cards, and someone from our study team will be able to respond.

Thanks again and have a nice day!