

Supplemental materials for:

Morenz AM, Goldhammer H, Lambert CA, Hopwood R, Keuroghlian AS. A blueprint for planning and implementing a transgender health program. *Ann Fam Med.* 2020;18(1):73-79.

Supplemental Appendix 1. Transgender Health Needs Assessments

Published Community & Patient Needs Assessments

1. Hinrichs A, Link C, Seaquist L, Ehlinger P, Aldrin S, Pratt R. Transgender and gender nonconforming patient experiences at a family medicine clinic. *Acad Med.* 2018;93(1):76-81.
2. Johnson AH, Gibson-Hill I, Beach-Ferrara J. The report of the 2018 Southern Trans Health Focus Group Project. Asheville, NC: Campaign for Southern Equality; 2018.
<https://southernequality.org/transhealthfocusgroupproject/>
3. Reisner SL, Randazzo RK, White Hughto JM, et al. Sensitive health topics with underserved patient populations: methodological considerations for online focus group discussions. *Qual Health Res.* 2017;28(10):1658-1673.
4. Snyder BK, Burack GD, Petrova A. LGBTQ youth's perceptions of primary care. *Clin Pediatr (Phila).* 2017;56(5):443-450.

Sample Needs Assessment Questions

The following series of questions, though not comprehensive, provides options to add to surveys, focus groups, town forums, etc. Questions may be open-ended or closed-ended (e.g., multiple choice), depending on the assessment's format. It is recommended to involve transgender and gender-diverse community members in developing and reviewing the assessment questions and methods.

Demographics:

- What is your current gender identity?
- What are your pronouns?
- What is your age?
- How do you identify your race and/or ethnicity?

- Approximately how far do you live from [name of your organization]?
- What kind of health insurance do you have?

Health Priorities:

- What are your top three health priorities?
- Do you currently take hormones for gender affirmation?
 - If yes, where do you get your hormone medication? (e.g., primary care, endocrinologist, friends, internet, other _____)
 - If no, are you interested in accessing gender-affirming hormone therapy in the future?
- Which of the following types of care and services would you be interested in accessing at our organization? Please check all that apply. (e.g., hormone therapy, surgical referral, legal assistance, mental health counseling, substance use disorder treatment, smoking cessation, violence/trauma recovery, obstetrics and gynecology, HIV/STI testing, HIV medication, sexual risk reduction counseling, fertility services, peer support groups, none of the above, other _____)

Services:

- What helps you feel welcome when you enter a health care facility?
- What helps you feel safe?
- What hours and days of the week are you most likely to access care?
- Are you currently a patient at [name of your organization]?
 - If yes, what do we do well? What could we do better?

If no, what do you like/dislike about your current health care facility?