

Designing an Online Sex Education Resource for Gender-Diverse Youth
Appendix C — Protocols for Disclosure of Self-Harm

This protocol is for use when a participant endorses a risk of self-harm during a focus group or interview

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(A) *For focus groups or interviews:*

If the participant endorses a risk of self-harm during the interview, the following question will be asked by the interviewer immediately:

“During the past 3 months, have you thought of killing yourself?”

If the participant responds YES, enact the Self-Harm Risk Protocol.

Rationale:

1. The interview/focus group guide does not have direct questions regarding suicidal ideation or self-harm, but transgender youth are at increased risk for these thoughts/behaviors so it is possible that a participant will mention them during a session. If a participant reports frequently contemplating suicidal ideation (“YES”), a clinical response is indicated.
2. The staff member conducting the interview may be a non-clinician.
3. Current suicidal ideation requires further clinical assessment and possible intervention.
4. This protocol refers to self-harm risk mentioned during a focus group or interview as follows:

Responding on the health screener that during the past 3 months, the youth has thought of killing himself or herself.

Procedure:

1. If a participant responds to the question above that over the last 3 months s/he has thought of killing him or herself, then the interviewer will inform the participant:

“I need to talk with you further about that. We can either stop the interview (or focus group) right now to discuss it, so we can wait until the end of the session. Which do you prefer?”

2. Either right then, or at the end of the session, the interviewer will follow up:

a. If interviewer is a clinician trained in assessing youth self-harm risk:
Conduct a self-harm risk assessment using clinical training and judgment.
Make a note of the conversation, including safety plan and any follow-up with parent or PCP if needed, in the patient’s medical record.

b. *If interviewer is not a clinician:*

i. The interviewer will inform the participant: *“Because you have had these thoughts, I’m going to let your Gender Clinic doctor and Care Navigator know about them. I am not a clinician and I am not qualified to evaluate these thoughts and feelings or provide treatment, but I will ask your clinician to call you..”*

May I have your phone number?

I’ve also been instructed to encourage you to discuss these thoughts and feelings with your parents or another adult you are comfortable talking to. I’d like to give you some telephone contact numbers in case these feelings and thoughts get worse and you need help immediately.”

King County Crisis Line (24 hours/day)	1-866-427-4747
Teen Link Help Line (6-10pm daily)	1-866-833-6546
Trans Lifeline	1-877-565-8860
The Trevor Project for LGBTQ youth	1-866-488-7386
Crisis Text Line	Text HOME to 741741

ii. The non-clinician interviewer will then complete the Self Harm Risk Email Template (see page 6), then notify via email the patient’s Gender Clinic clinician who will follow up with the participant for a clinical assessment.

iii. The clinician will attempt to contact the participant within 24 hours to conduct an assessment of current ideation for level of lethality and need for further referral. Clinicians may make multiple call attempts and leave up to 3 messages for participants to return their call. If after 3 messages have been left or contacts have been made or the participant seems unwilling to communicate with the clinician, the clinician will notify the IRB. In this case, no further attempts will be made to contact the participant.

iv. NOTE: The research team will defer to the patient’s Gender Clinic team of providers on how to best respond to their patient. These strategies could include prompt emergency intervention by mental health professionals when the immediate suicide risk is high and the participant has refused other interventions. It may also include

notifying the participant's parent/guardian, their primary care physician or responsible mental health provider.

3. The clinician (whether the clinician interviewer, or the clinician who is contacted by the non-clinician interviewer) will document their conversation in their patient's medical record and then send a brief email to the research study team indicating that they assessed the participant's self-harm risk and a safety plan is in place if needed.

Self-Harm Risk - Template for Email to Clinician

When a youth participant expresses self-harm risk during a survey, interview, or focus group, the research staff person will send an email to the participant's Gender Clinic Care Navigator and physician using the following format:

Hi [clinician name(s)],

A patient in our study reported thoughts of self harm.

[Include one of these two bullet points]

- **PHQ-9:** [list answer choice here, e.g., "1-Several days"]
- **During the interview, this participant expressed** [describe the self-harm risk]

MRN:

Study ID:

Preferred name:

Legal name:

Pronouns:

Patient e-mail:

Patient phone:

Parent name:

Parent phone:

Please follow up with your patient as needed (per our research protocol) for clinical assessment. Let me know if you need more information. Thank you,

[Research Associate name]

Self-Harm Risk - Template for Email to Participant

When a youth participant expresses self-harm risk during a survey, the research staff person will send an email to the participant to provide resources:

Dear [participant's preferred name]

In your recent research response, you indicated that [insert self-harm related response here, e.g., “you have had thoughts that you would be better off dead or of hurting yourself in some way”].

Your Gender Clinic provider is available to discuss these thoughts and feelings with you at any time. [Insert provide name and number here]

Here are some additional phone numbers you can call in case these feelings and thoughts get worse and you need help immediately.

King County Crisis Line (24 hours/day)	1-866-427-4747
Teen Link Help Line (6-10pm daily)	1-866-833-6546
Trans Lifeline	1-877-565-8860
The Trevor Project for LGBTQ youth	1-866-488-7386
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Sincerely,
[Name and role]