

## **Transgender Youth Fertility Attitudes Questionnaire (TYFAQ) – Youth Self-Report and Parent Report**

The 16-item youth and parent report Transgender Youth Fertility Attitudes Questionnaire (TYFAQ) is intended for transgender youth contemplating medical supports that could affect fertility. The TYFAQ is designed for both research and clinical applications: as a research instrument for studies of transgender youth fertility attitudes and as a clinical instrument to facilitate youth/parent conversations with clinicians regarding fertility preservation.

Fifteen of the items (items 1-15) were derived through an iterative participatory process with transgender youth, their parents, and providers. Question #16 was added following the participatory process.

Each TYFAQ item is intended to measure an individual theme, and therefore no summary score is calculated. However, researchers may wish to compare parallel youth and parent responses psychometrically, in which case we recommend the following item-level scoring schema for items 1-2 and 4-15:

Strongly Agree = 4

Agree = 3

I don't know = 2

Disagree = 1

Strongly Disagree = 0

Items 1-4 and 6-16 have parallel themes between youth and parent. Find the attached "TYFAQ Youth – Parent Comparison Chart" to compare responses between youth and parent report.

Publications employing the TYFAQ should cite the original TYFAQ study:

### APA Style:

Strang, J.F., Jarin, J., Call, D., Clark, B., Wallace, G.L., Anthony, L.G., Kenworthy, L., & Gomez-Lobo, V. (2017). Transgender Youth Fertility Attitudes Questionnaire: Measure Development in Non-autistic and Autistic Transgender Youth and Their Parents. *Journal of Adolescent Health*.

### AMA Style:

Strang JF, Jarin J, Call C, Clark B, Wallace GL, Anthony LG, Kenworthy L, Gomez-Lobo V. Transgender Youth Fertility Attitudes Questionnaire: Measure Development in Non-autistic and Autistic Transgender Youth and Their Parents. *J Adolescent Health*. 2017.

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## TYFAQ - Youth Self Report

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Please answer the following questions. Please note: "Biological children" means children born with your eggs or sperm.

**1. It is important to learn about how hormone treatment might affect my ability to have my own biological children.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**2. I am aware that hormone treatment could cause issues with my ability to have my own biological children.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**3. How did you learn that hormone treatment could make it difficult to have your own biological children? (Check as many as are true)**

- Doctor
- The internet
- Parent or guardian
- Peers (other young people your age)
- Other (fill in the blank): \_\_\_\_\_
- I did not know that hormone treatment could make it difficult to have my own biological children prior to this questionnaire

**4. I feel I have people to talk to (like my doctor or therapist) about how hormone treatment could affect my ability to have my own biological children.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

TYFAQ - Youth Self Report

**5. I feel I have people to talk to (like my doctor or therapist) about what I can do to have my own biological children if I'm taking hormones.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**6. I want to have kids someday. (This could be either your own biological kids or adopted kids).**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**7. If I have kids, it would be important to me that they are my biological kids.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**8. I would consider adoption someday.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**9. My feelings about wanting my own biological child might change when I'm older.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**10. I would be angry if the doctor didn't tell me that hormone treatment could affect my ability to have my own biological children.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**11. I am aware that there are options that would allow me to have my own biological child even if I'm on hormones.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**12. I feel pressured by my family to have my own biological child someday.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**13. I would feel that I'm disappointing my family if I could not have my own biological child.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**14. I would consider medical procedures that would allow me to preserve my eggs or sperm to be able to have my own biological children in the future.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**15. My family wants me to preserve my eggs or sperm.**

- My family hasn't talked about this
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**16. Is there anything that would get in the way of your preserving your eggs or sperm? (Check as many as are true)**

- I don't have enough information to know how to preserve eggs or sperm
- Cost of preserving eggs or sperm
- Scheduling the appointment could slow down starting puberty blockers, hormones, or other medical treatments
- The procedure of preserving eggs or sperm would make me feel uncomfortable or embarrassed
- Other (please describe):

TYFAQ – Parent Report

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Please answer the following questions. Please note: "Biological children" means children born with your child's own eggs or sperm.

**1. It is important to learn about how hormone treatment might affect my child's ability to have biological children.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**2. I am aware that hormone treatment could cause issues with my child's ability to have their own biological children.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**3. How did you learn that hormone treatment could make it difficult for your child to have their own biological children? (Check as many as are true)**

- Doctor
- The internet
- Other parents
- Other (fill in the blank): \_\_\_\_\_
- I did not know that hormone treatment could make it difficult for my child to have their own biological children prior to this questionnaire

**4. I feel I have people to talk to (like a doctor or therapist) about how hormone treatment could affect my child's ability to have biological children.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**5. I would like to talk to someone about what my child can do to be able to have biological children if they are taking hormones.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**6. I want my child to have kids someday. (This could be either their own biological kids or adopted kids)**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**7. If my child has kids, it is important to me that they are my child's biological kids.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**8. I am open to my child adopting someday.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**9. My child's feelings about wanting their own biological child might change in the future.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**10. I would be angry if the doctor didn't tell me that my child's treatment could affect their ability to have biological children.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**11. I am aware that there are options that would allow my child to have biological children in the future (even if on hormones).**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**12. I would like my child to have their own biological child someday.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**13. I would be disappointed if my child could not have their own biological child.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**14. I want my child to consider medical procedures that would allow them to preserve their eggs or sperm to be able to have their own biological children in the future.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know



**15. I want my child to preserve eggs or sperm.**

- Strongly agree
- Agree
- Disagree
- Strongly disagree
- I don't know

**16. Is there anything that would get in the way of your child preserving their eggs or sperm? (Check as many as are true)**

- I don't have enough information to know how to help my child preserve eggs or sperm
- Cost of preserving eggs or sperm
- Scheduling the appointment could delay my child starting puberty blockers, hormones or other medical treatments
- The procedure of preserving eggs or sperm would make my child feel uncomfortable or embarrassed
- Other (please describe):

TYFAQ Youth – Parent Comparison Chart

Question	Youth	Response	Parent	Response
1	It is important to learn about how hormone treatment might affect my ability to have my own biological children.		It is important to learn about how hormone treatment might affect my child's ability to have biological children.	
2	I am aware that hormone treatment could cause issues with my ability to have my own biological children.		I am aware that hormone treatment could cause issues with my child's ability to have their own biological children.	
3	How did you learn that hormone treatment could make it difficult to have your own biological children? ( <u>Check as many as are true</u> )		How did you learn that hormone treatment could make it difficult for your child to have their own biological children? ( <u>Check as many as are true</u> )	
4	I feel I have people to talk to (like my doctor or therapist) about how hormone treatment could affect my ability to have my own biological children.		I feel I have people to talk to (like a doctor or therapist) about how hormone treatment could affect my child's ability to have biological children.	
5	I feel I have people to talk to (like my doctor or therapist) about what I can do to have my own biological children if I'm taking hormones.		Parent and youth questions are not parallel for question #5	
5	Parent and youth questions are not parallel for question #5.		I would like to talk to someone about what my child can do to be able to have biological children if they are taking hormones.	
6	I want to have kids someday. (This could be either your own biological kids or adopted kids).		I want my child to have kids someday. (This could be either their own biological kids or adopted kids).	
7	If I have kids, it would be important to me that they are my biological kids.		If my child has kids, it is important to me that they are my child's biological kids.	
8	I would consider adoption someday.		I am open to my child adopting someday.	
9	My feelings about wanting my own biological child might change when I'm older.		My child's feelings about wanting their own biological child might change in the future.	
10	I would be angry if the doctor didn't tell me that hormone treatment could affect my ability to have my own biological children.		I would be angry if the doctor didn't tell me that my child's treatment could affect their ability to have biological children.	

11	I am aware that there are options that would allow me to have my own biological child even if I'm on hormones.		I am aware that there are options that would allow my child to have biological children in the future (even if on hormones).	
12	I feel pressured by my family to have my own biological child someday.		I would like my child to have their own biological child someday.	
13	I would feel that I'm disappointing my family if I could not have my own biological child.		I would be disappointed if my child could not have their own biological child.	
14	I would consider medical procedures that would allow me to preserve my eggs or sperm to be able to have my own biological children in the future.		I want my child to consider medical procedures that would allow them to preserve their eggs or sperm to be able to have their own biological children in the future.	
15	My family wants me to preserve my eggs or sperm.		I want my child to preserve eggs or sperm.	
16	Is there anything that would get in the way of your preserving your eggs or sperm? (Check as many as are true)		Is there anything that would get in the way of your child preserving their eggs or sperm? (Check as many as are true)	