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Timing and Delivery of Fertility Preservation Information to Transgender Youth and Their Parents

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**Timing and Delivery of Fertility Preservation Information to Transgender Youth and
Their Parents**

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Introduction: Despite clinical guidelines to counsel transgender youth on fertility preservation (FP), utilization rates are low. This report aims to identify transgender youths' and their parents' preferences about who should provide FP information and FP discussion timing.

Methods: Data derived from two separate studies: an online survey and semi-structured qualitative interviews. Eligible participants included transgender youth ages 14-24 years and their parents/guardians. Survey data were analyzed using descriptive statistics. Interview data were analyzed in Dedoose, an online qualitative analysis program, using conventional content analysis. Inter-rater reliability testing was performed on a subset of interview transcripts, with pooled Kappas ≥ 0.80 .

Results: Fifty-eight transgender youth (mean age=17 years, range: 14-22) and 38 parents participated in the survey. A separate group of 18 transgender youth (mean age=18 years, range: 15-24) and 13 parents participated in an interview. Most survey participants (youth: 91%,

parents: 92%) preferred that gender clinic physicians provide FP information, while nearly a third endorsed mental health professionals (youth: 29%, parents: 26%) and fertility experts (youth: 26%, parents: 29%) as preferred FP information sources. Interview participants' FP discussion timing preferences ranged from the first clinic visit, follow-up visits, prior to medical intervention, to mentioning FP early but deferring in-depth discussion to follow-up visits.

Conclusion: Gender clinic physicians, mental health professionals, and fertility specialists should be prepared to engage transgender youth and parents in FP discussions. Opinions about when to provide FP information varied; therefore, FP discussion timing may need to be individualized.