

## Appendix 1: Interview Guide (Patient)

### Welcome

Thank you for agreeing to participate in this interview. We appreciate you taking the time to help us with our research. This project is looking at the experience of women choosing bariatric surgery with respect to birth control counselling in the clinic. We are hoping to use the data to build tools and strategies that could make women's experience better.

The recording will begin when I start asking questions and we want to keep all personal identifying information, such as names, out of the recording.

We will begin with some questions on demographics and your pregnancy history, following this we will move on to more open ended questions about your experiences in the surgery clinic. You do not have to answer any questions that make you uncomfortable.

Do you have any questions?

I will now begin recording

(Provide options if participant is unsure of answer)

Demographic Survey – Women Choosing Bariatric Surgery

### Section A: Demographics

1. How old are you today? \_\_\_\_\_ years old
2. What type of bariatric surgery are you having? (choose one)
  - a. Sleeve gastrectomy/gastric sleeve
  - b. Roux-en-Y/gastric bypass
  - c. Biliopancreatic diversion with duodenal switch/duodenal switch
  - d. Gastric banding/lap band
  - e. I'm not sure/team hasn't decided yet
  - f. Other (please specify) \_\_\_\_\_
3. What is the highest level of education you have completed
  - a. Grade 8 or below
  - b. Grade 12 or below
  - c. University/college degree
  - d. Graduate/professional degree
4. What is your ethnicity? (enter free text)

### Section B: Obstetrics and Gynecology History

Patient Interview Guide

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Page 1 of 5

1. Have you ever been pregnant? (choose one)
  - a. Yes
  - b. No
  - c. Prefer not to answer
  - d. If yes – how many times?

Complete for each patient G\_T\_SA\_TA\_L\_

2. Do you currently have regular periods (menstrual cycles)? (choose one)
  - a. Yes
  - b. No
3. Are you currently sexually active? (choose one)
  - a. Yes
  - b. No
  - c. Prefer not to answer
4. A. Have you ever experienced infertility (problems with getting pregnant when you wanted to)? (choose one)
  - a. Yes
  - b. No
  - c. Prefer not to answer

B. If you answered yes, is this a reason why you are choosing bariatric surgery? (choose one)

  - a. Yes
  - b. No
  - c. Prefer not to answer
- 5A. Are you currently using birth control (i.e. birth control pill, intrauterine device [IUD])? (choose one)
  - d. Yes
  - e. No
  - f. Prefer not to answer

B. If you answered yes, what type of birth control are you using? (choose one)

  - a. Hormonal IUD
  - b. Copper IUD
  - c. Oral Contraceptive pills
  - d. Contraceptive ring
  - e. Contraceptive patch
  - f. Contraceptive injection
  - g. Condoms
  - h. Diaphragm
  - i. Cycle Awareness
  - j. Withdrawal method
  - k. Other: \_\_\_\_\_

## Interview Questions

1. Describe to me your experience with birth control counselling in the bariatric surgery clinic  
*Probing questions as needed*
  - a. Was it helpful?
  - b. Was it inclusive?
  - c. Were you allowed to make your own decisions about contraception?
  - d. Did they give you valuable information?
  - e. Was it easy to focus on this topic before your surgery?
  - f. Who did the counselling?
  
2. Describe to me if during your time in the bariatric surgery clinic you informed of certain types of birth control that should not be used following bariatric surgery  
*Probing questions as needed*
  - a. Can you tell me which ones?
  - b. Was the information clear and easy to understand?
  - c. Did you feel like the person who completed your counselling gave good reasons for not recommending certain methods?
  
3. Describe to me if during your time in the bariatric surgery clinic you were informed of the recommendation to delay pregnancy for 12-18 months?
  - a. How did that recommendation make you feel?
  - b. Was a clear reason given?
  - c. **When you were told this, did the provider talk to you about birth control options?**
  
4. Describe the things you want to know now or wanted to know pre-operatively about birth control?
  - a. How would you want someone to talk to you about birth control during your surgical journey?
  
5. If birth control counselling in the surgery clinic was done using a learning tool, what should it look like?
  - a. A video?
  - b. A handout?
  - c. A website?
  - d. Can you describe what you would think of a tool like that being part of your pre-operative care?
  
6. Describe what characteristics of a birth control method are most important to you?

- a. Some women might say that efficacy is most important, others might want it to control their periods or for the method they choose to be invisible. What is most important to you and why?
7. Describe to me how you would improve the birth control counselling experience of another woman who is choosing bariatric surgery
8. Are there any other topics that I didn't bring up that you were hoping to discuss today? OR what is the most important topic that we have discussed today?

If you are interested, the Society of Obstetricians and Gynecologists of Canada has a resource on contraception and sexual health, available at [www.sexandu.org](http://www.sexandu.org). This information is not designed specifically for women who have chosen bariatric surgery.

