Supplementary Appendix S1: Interview Guide

<u>GUIDE FOR SEMI-STRUCTURED INTERVIEWS (HEALTHCARE/AGING,</u>

<u>FIREARMS COMMUNITY)</u>

PROMPT: Many older adults in this country own firearms. Not much is known about when (or

if) they plan for what to do with their firearms should they develop physical or cognitive

impairments. The objective of these interviews is to learn more from various stakeholders about

how we can best understand how these decisions are made, and what future resources might look

like to help older adults make them.

- Before we get started, could you please tell me a little more about yourself – your

  background, occupation, experience, interests in participating in this research?

In order to understand more about how older adults might think about these issues, and what

resources might be beneficial for those making such decisions, I'd like for you to think about any

older adult firearm owners that you encounter in your job or volunteer activities. These could be

patients, customers, program participants, or older adults you care for, or anyone else who you

might have insights about. I'll let you think for a moment about who some of these people might

be.

Driving/Firearm Retirement Comparisons

- Thinking about this question, what kinds of interactions do you have with older adults

  who own firearms? [probe: as clinician, as firearm retailer/instructor, as someone from

  aging organization)

- What do you think firearms mean to this person/older adults? (Probe: reason for

  ownership, usage, meaning)

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449 • We oftentimes frame decisions about when to stop accessing firearms in parallel with

450 decision about when to stop driving. Thinking about this, have you heard older adults you

451 know express any thoughts about how, when, or why they might stop driving? Who do

452 you think they would want involved in that decision?

453 • Now let's think about the firearms: have they thought about how, when, or why older

454 adults might stop using these firearms? Who do you think they would want involved in

455 that decision?

456 • How might these decisions be similar? Does this person have a similar plan for how they

457 would come to these decisions? In what ways do you think they are similar?

458 • How might these decisions be different? What differences might exist between this

459 decision to stop driving versus stop using firearms? (as probe: Are there different people

460 involved?)

461 • People sometimes think of the decision to stop driving as "retiring from driving". Does a

462 similar idea with respect to decisions to stop using firearms make sense to you?

463   o What would you think of if you saw a reference to "retiring from firearms"? What

464   are some of your reactions to that idea? Does that make sense to you? Do you

465   think it would make sense to older adults?

466   o What are some other ways to talk about this topic that make more sense to you?

467   How else could you frame this decision to stop using firearms?

468 *Firearm Retirement - Conversations*

469 • Our team wants to learn how to help people plan for what they want done with their

470 firearms to help prevent firearm injuries as they get older, including accidents and

471 suicide:

472   o   What are your thoughts about how to help people have these conversations?

473   o   How would you go about starting this conversation?

474   o   Who would be the best to initiate this conversation?

475   o   What would be the best way to approach this topic?

476   o   When would these conversations need to happen?

477   o   Who should be involved in these conversations?

478   o   What information would be useful to have in order to help make decisions about

479   what to do with firearms? (probes here ?)

480   •   What are your thoughts about the idea of older adult firearm owners making plans for

481   what they want to have happen to their firearms?

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483   *Theme: i-PARIHS "context"*

484   •   What kinds of factors or experiences do you think influence how older adults think about

485   their firearms?

486   o   Probe 1 – External factors: laws that affect sales or transfer; political views;

487   "cultural norms" about firearm ownership

488   o   Probe 2 – Internal factors: personal views about wanting or needing a firearm in

489   the home, family traditions, life experiences that highlight firearms

490   •   This is a difficult but important topic; if it makes you uncomfortable, we can move on.

491   We've heard from some older adults that they want to hold onto their firearms so that

492   they could potentially use them to kill themselves if their health got to the point where

493   they felt hopeless. Have you heard such things from older adults? If so, under what

494   circumstances have they described such a scenario?

495   *Theme: i-PARIHS "innovation" / intervention development*

496   • Where do you think older adults would go to find information they trust if they wanted to

497   know more about firearm retirement? (Probe: internet; newsletters from trusted

498   organizations; healthcare provider; attorney; advanced planning sessions)

499   • What kind of materials would be useful for older adults in thinking about firearm

500   retirement? (Probe: general education; examples of what others have done; "advanced

501   directive" template; legal advice)

502   *Theme: i-PARIHS "recipient" / intervention dissemination*

503   • Who do you think older adults would consider a "credible source" for information about:

504   o Driving safety or driving retirement?

505   o Firearm safety or firearm retirement?

506   • If there was information or an educations tool about firearm retirement, who would you

507   trust to deliver it? (Probe: firearm organization; aging organization; healthcare providers)

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Topic	Item No.	Guide Questions/Description	Response
Domain 1: Research team and reflexivity			
Personal characteristics			
Interviewer/facilitator	1	Which author/s conducted the interview or focus group?	LP/ EP
Credentials	2	What were the researcher's credentials? E.g. PhD, MD	PhD/ MA
Occupation	3	What was their occupation at the time of the study?	Faculty/ Professional Staff
Gender	4	Was the researcher male or female?	Female/ Male
Experience and training	5	What experience or training did the researcher have?	Training in public health, suicide prevention & qualitative approaches.
Relationship with participants			
Relationship established	6	Was a relationship established prior to study commencement?	None
Participant knowledge of the interviewer	7	What did the participants know about the researcher? e.g. personal goals, reasons for doing the research	Research objectives and goals, in recruitment email and consent documents which were verbally introduced and sent to participants.
Interviewer characteristics	8	What characteristics were reported about the inter viewer/facilitator? e.g. Bias, assumptions, reasons and interests in the research topic	Institutions, position, focus areas, and overall research goals.
Domain 2: Study design			
Theoretical framework			
Methodological orientation and Theory	9	What methodological orientation was stated to underpin the study? e.g. grounded theory, discourse analysis, ethnography, phenomenology, content analysis	Thematic analysis consistent with Qualitative Description.
Participant selection			
Sampling	10	How were participants selected? e.g. purposive, convenience,	Convenience and snowball sampling.

				consecutive, snowball	
Method of approach	11	How were participants approached? e.g. face-to-face, telephone, mail, email	Email recruitment.
Sample size	12	How many participants were in the study?	13
Non-participation	13	How many people refused to participate or dropped out? Reasons?	None
Setting			
Setting of data collection	14	Where was the data collected? e.g. home, clinic, workplace	Interviews were done over Zoom, some in clinical settings, some in offices and others at home.
Presence of non-participants	15	Was anyone else present besides the participants and researchers?	No.
Description of sample	16	What are the important characteristics of the sample? e.g. demographic data, date	Interviews occurred from November 2020 to May 2021. Demographic variables are outlined in Table 1 in the manuscript.
Data collection			
Interview guide	17	Were questions, prompts, guides provided by the authors? Was it pilot tested?	The guides are provided as an appendix. The questions were developed from prior research, but allowed for additional exploration of concepts to emerge, as the interviews were semi-structured.
Repeat interviews	18	Were repeat inter views carried out? If yes, how many?	No
Audio/visual recording	19	Did the research use audio or visual recording to collect the data?	Interviews were recorded with Zoom recording feature and transcribed into deidentified transcripts.
Field notes	20	Were field notes made during and/or after the interview or focus group?	Structured notes were made after each interview, with group debrief sessions on weekly team calls.
Duration	21	What was the duration of the inter views or focus group?	30-60 minutes.
Data saturation	22	Was data saturation discussed?	Yes
Transcripts returned	23	Were transcripts returned to participants for comment and/or correction?	No
Domain 3: analysis and findings			

Data analysis			
Number of data coders	24	How many data coders coded the data?	Four
Description of the coding tree	25	Did authors provide a description of the coding tree?	Yes
Derivation of themes	26	Were themes identified in advance or derived from the data?	Both
Software	27	What software, if applicable, was used to manage the data?	Dedoose
Participant checking	28	Did participants provide feedback on the findings?	No, but later interviews were able to comment on early themes for validation and expansion of emergent concepts.
Reporting			
Quotations presented	29	Were participant quotations presented to illustrate the themes/findings? Was each quotation identified? e.g. participant number	Yes
Data and findings consistent	30	Was there consistency between the data presented and the findings?	Yes
Clarity of major themes	31	Were major themes clearly presented in the findings?	Yes
Clarity of minor themes	32	Is there a description of diverse cases or discussion of minor themes?	Yes

Supplementary Appendix S3: Structured Debrief Form

Interview Debriefing Form
This form can be used to guide a debriefing discussion following the conclusion of an interview.
The conversation could be recorded.

Interview:

Context:

Date interview conducted:

Today's date:

1. **What were the main issues or themes that struck you during this interview?**

2. **What information seemed <u>consistent</u> with what you have learned from other focus groups, interviews or data sources?**

3. **What information seemed to <u>contradict</u> what you have learned from other focus groups, interviews or data sources?**

4. **What new questions emerged for you during this interview that you might want to explore with other participants, key informants/ data sources?**

5. **Did the interview seem to flow well? In what areas? How could this be improved?**

6. **What else is important to capture about this interview?**

Other Notes:

Supplementary Appendix S4. Additional Details on Methods

The study team included physicians and researchers experienced in firearm safety, aging, veteran health, driving, and injury prevention. Interviewers (one female, one male) had advanced credentials (LP: PhD, MPH, MHA; EP: MA) in conducting public health research. Introduction to the researchers and their areas of expertise was reviewed with participants prior to beginning the interview. Participants were recruited through social media, professional networks representing health care providers who care for older adults, personal networks and institutional email listervs. Snowball sampling allowed for the recruitment of eligible providers from interviewee personal and professional networks. Participants were introduced to the study goals and objectives in a recruitment email and consent documents which were verbally introduced and e-mailed to all participants prior to interviews.

The interview guide was formed based on prior research and allowed for additional exploration of emergent concepts. Interviews were 30-60 minutes in length and conducted over Zoom sessions, during which verbal consent was obtained prior to initiating the recording feature. Team-based discussion was facilitated by a structured debriefing template (Supplementary Appendix S4) and occurred at weekly team meetings. Recorded sessions were sent to a professional transcription service, where interviews were transcribed into deidentified documents. The transcription service indicated areas of low confidence in transcription, all of which were cross-checked with the recording by a member of the research team (EP), to verify accuracy. Data analysis followed an inductive/deductive approach to thematic analysis; we coded for a priori defined concepts and for newly emergent themes.