

Supplementary 1: Semi-structured Interview Guide for Clinicians

1. What is your understanding of
 - a) Sex
 - b) Gender, Probes: gender identity, gender roles
1. What were the primary motivations behind your decision to participate in this research?
Were these your own decisions or were you advised to do so by others? By whom?
 - Probes: What would you like to gain from this research? What specific topics would you like to learn about?
2. What do you know about discrimination in healthcare?
3. Do you consider sex or gender when selecting an approach to use with a client with TBI?
If yes, please describe.
4. Do you think there are (dis)-advantages for women with TBI compared to men? Please elaborate.
5. Do you think there are (dis)-advantages of being a woman (or man) when receiving acute care services? Rehabilitation services? Please elaborate.
6. Do you think there are (dis)-advantages of being a woman (or man) with TBI in a family? Society? Please elaborate
7. Do you think there are (dis)-advantages for women (or man) with regards to recovery after the injury? Please elaborate.
8. Based on your professional experience, what does being a woman (or man) living with TBI mean to you? How do you define and describe this?
9. Have you experienced sex or gender discrimination in your medical training?
 - Probes: Have you experienced gender discrimination in your professional experience/ care? Please describe this situation. What was your reaction? Why do you think it's important to reflect on gender biases and assumptions in clinical practice? How do you think gender biases and assumptions might impact client care?

10. What do you know about sex and gender privileges and oppression in traumatic brain injury as they concern pathophysiology, risk factors, clinical manifestations, and overall outcomes?

11. What are some good ways to deliver educational materials on the topics of sex and gender influences in TBI?

- Probes: In what format? By who? Where? When/what time? How can we promote learning for clinicians who work with TBI patients?

Themes	CL1	CL2	CL3	CL4	CL5	CL6	CL7	CL8	CL9	CL10	CL11	CL12	CL13	CL14	CL15	CL16
--------	-----	-----	-----	-----	-----	-----	-----	-----	-----	------	------	------	------	------	------	------

Themes	PM&R (n=4)	Other (n=1)	OT (n=4)	PT (n=3)	SLP (n=2)	Other (n=1)	Other (n=1)
Theme 1: Knowledge & evidence							
Lack of gender training & exposure to sensitive topics & diversity							
- Gender training	XXXX	X	XXX	XXX	XX	X	X
- Intimacy & sexuality	X		X	X		X	
- Diversity exposure	X			X	X	X	
Discordance between declarative & procedural knowledge							
- Goals in rehab			XXX	X			
- Differences in TBI	XXX		XX	X			X
- Man vs. woman with TBI	XX	X	XX	X	XX	X	
- Pre-injury duties & identity loss	XXXX	X	XXXX	X	X		X
- Social determinants of health	XXXX	X	XXX	X	XX	X	X
Evidence for clinical practice parameters							
- Learn more on sex & gender	XXXX	X	XX	XX	X	X	X
Theme 2: Gender & other aspects of recovery							
Clinician & patient collaboration through understanding							
- Patient relatability	XX		XX	XX	X		
- Personal biases	XXX	X	XX	XXX	X	X	X
Differential treatment due to social determinants of health							
- Differential treatment	XXXX	X	XX	XX	XX	X	X
Theme 3: Family caregiving							
Involvement of caregivers in clinical care							
- Family in therapy	X	X	XX		X	X	
- Gendered caregiving	XX	X	XXXX	X	X	X	X
Caregiving burden on partner relationship							
- Caregiving toll	X		X			X	
Time and caregiver health							
- Caregiver frustration		X					

Themes	3-10 yrs (n=5)	11-20 yrs (n=6)	21-30 yrs (n=3)	NA (n=2)
Theme 1: Knowledge & evidence				
Lack of gender training & exposure to sensitive topics & diversity				
- Gender training	XXXXX	XXXXX	XXX	XX
- Intimacy & sexuality	X	XX	X	
- Diversity exposure	X	X	XX	
Discordance between declarative & procedural knowledge				
- Goals in rehab	X	XX		X
- Differences in TBI	X	XXX	X	XX
- Man vs. woman with TBI	XX	XXXX	XX	X
- Pre-injury duties & identity loss	XXXXX	XXXX	X	XX
- Social determinants of health	XXX	XXXXX	XXX	XX
Evidence for clinical practice parameters				
- Learn more on sex & gender	XXXX	XXXX	XX	XX
Theme 2: Gender & other aspects of recovery				
Clinician & patient collaboration through understanding				
- Patient relatability	XX	XXX		XX
- Personal biases	XXX	XXXXXX	XX	X
Differential treatment due to social determinants of health				
- Differential treatment	XXXX	XXXXX	XXX	X
Theme 3: Family caregiving				
Involvement of caregivers in clinical care				
- Family in therapy	XXX	XX	X	
- Gendered caregiving	XXXX	XXX	XXX	X
Caregiving burden on partner relationship				
- Caregiving toll		XX	X	
Time and caregiver health				
- Caregiver frustration	X			

Themes	Man (n=4)	Woman (n=12)
Theme 1: Knowledge & evidence		
Lack of gender training & exposure to sensitive topics & diversity		
- Gender training	XXXX	XXXXXXXXXX
- Intimacy & sexuality	X	XXX
- Diversity exposure	X	XXX
Discordance between declarative & procedural knowledge		
- Goals in rehab		XXXX
- Differences in TBI	XXX	XXXX
- Man vs. woman with TBI	XXX	XXXXXX
- Pre-injury duties & identity loss	XXXX	XXXXXXXX
- Social determinants of health	XXXX	XXXXXXXX
Evidence for clinical practice parameters		
- Learn more on sex & gender	XXXX	XXXXXXXX
Theme 2: Gender & other aspects of recovery		
Clinician & patient collaboration through understanding		
- Patient relatability	XX	XXXXX
- Personal biases	XXXX	XXXXXXXX
Differential treatment due to social determinants of health		
- Differential treatment	XXXX	XXXXXXXX
Theme 3: Family caregiving		
Involvement of caregivers in clinical care		
- Family in therapy	XX	XXXX
- Gendered caregiving	XX	XXXXXXXX
Caregiving burden on partner relationship		
- Caregiving toll	X	XX
Time and caregiver health		
- Caregiver frustration	X	

Supplementary 2A: Themes, sub-themes and categories

Theme 1: Knowledge & evidence

Lack of gender training & exposure to sensitive topics & diversity

- Lack of gender training in professional curriculum (n=15)
- Clinical topics outside of the female-male binary, as well as, areas of intimacy and sexuality are sensitive (n=4)
- Exposure to different cultures, religions, personalities, and communities can enhance care (n=4)

Discordance between declarative & procedural knowledge

- Goals in rehab for men and women are different, women focus on both paid and unpaid work responsibilities (n=4)
- Biological sex and gender differences in TBI as described by clinicians (i.e., professional roles, responsibilities in child-bearing, symptom load and severity, emotional state post injury) (n=7)
- Clinicians did not articulate a difference between what it is like to be a man or a woman with a TBI (n=9)
- Patients' inability to perform pre-injury gendered duties and identity loss can affect recovery (n=12)
- Challenges related to other determinants of health or personal factors, affect recovery and outcome (n=13)

Evidence for clinical practice parameters

- Clinicians want to learn more about sex & gender and research regarding this topic in TBI for potential implementation in practice (n=12)

Theme 2: Gender & other aspects of recovery

Clinician & patient collaboration through understanding

- Patient-clinician relatability. Similarities between clinicians and patients results in better understanding of needs of patients for treatment and rehabilitation (n=7)
- Reflection on personal biases and assumptions are recognized (n=12)

Differential treatment due to social determinants of health

- Differential treatment not entirely due to sex & gender but other factors such as language barrier, socioeconomic status, access to facilities (n=13)

Theme 3: Family caregiving

Involvement of caregivers in clinical care

- Involvement of caregivers and family support is perceived to be important in therapy (n=6)
- Sex & gender and caregiving duties (i.e., culture in caregivers, duration of caregiving, time on relationship) (n=11)

Caregiving burden on partner relationship

- Caregiving puts a toll on partner relationship, especially if relationship is new or problematic prior to injury (n=3)

Time and caregiver health

- Caregiving for a longer period of time results in frustration and decreased patience (n=1)

Supplementary 2B: Patterns viewed from stratification

Stratification by man and woman yielded comparable results with the exception of:

- **Goals in rehabilitation** under subtheme **discordance between declarative and procedural knowledge**, men reported 0%.

Stratification by profession yielded overall comparable results with the exception of:

- **Goals in rehabilitation** under subtheme **discordance between declarative and procedural knowledge**, which were primarily reported by OT, which is expected according to their roles of profession.
- **Pre-injury duties and identity loss** under subtheme **discordance between declarative and procedural knowledge** were not recognized by ‘other’ and only 33% of PT despite the impact of functional loss and behavioral changes on gender roles and identity.
- **Differential treatment** under subtheme **differential treatment due to social determinants of health** was frequent in reporting among professions, However, only 50% of OT and 66% of PT spoke of it, which was less than all other professions, respectively.
- **Gendered caregiving** under subtheme **involvement of caregivers in clinical care** were reported the most by OTs, and ‘other(s)’ respectively, which again might speak to the profession, in which caregivers would be involved in goal setting and other avenues of life.

Stratification by years of experience yielded comparable results with the exception of:

- **Caregiving toll** under subtheme **caregiving burden on partner relationship, which** was only reported by clinicians with greater than 10 years of experience.
- **Pre-injury duties & identity loss** under **discordance between declarative and procedural knowledge** was reported the most by clinicians with 3-10 years of experience and less as more experience increases.
- **Personal biases** under subtheme **clinician & patient collaboration through understanding** was reported the most by clinicians with 11-20 years of experience.
- **Gendered caregiving** under subtheme **involvement of caregivers in clinical care** was reported the most by clinicians with 21-30 years of experience (100%) followed by 3-10 years of experience (80%).
- **Family in therapy** under subtheme **involvement of caregivers in clinical care** was reported the most by clinicians with 3-10 years of experience (60%) and only 33% for 11-20 and 21-30 years.