Supplemental File 1 – Interview Guide and Excerpt from Treatment Protocol

Interview Guide

Thank you for speaking with me today. We'd like to hear about your experiences in the group treatment program for menstrual pain as well as how you are doing now. Your answers are confidential; we will never divulge your answers in connection with your name or any other identifying information. You do not have to answer any questions with which you feel uncomfortable.

So tell me about your experience in the group treatment.

Was it what you imagined it would be?

Did you find it helpful? If so, how (probe for details); Probe: What did you like about it?

When did you begin to notice any effects? How long (how many sessions) do you think the program have to be to experience effects?

If it wasn't helpful, why do you think it didn't help (probe for details)?

Did anything harmful happen to you during the program?

Was this type of treatment a good match for your pain? Why? How?

What did you learn about yourself having now completed the treatment? Was there anything you learned that surprised you?

Would you have wanted the group to continue? Do you think you would have liked to have follow-up sessions or some way of touching base with group leaders or members in the future (meetings in person, email exchanges, chat rooms, etc)?

If we do this again, how long (how many weeks) should the group be, how many times a week, how long each session, and what would be the best times to have the sessions (e.g. mornings, afternoons, evenings, weekends and which weekend day and when)?

What did you think about the materials (notebooks, handouts, homework forms)? Would you have liked more or fewer?

What would you tell other young people with menstrual pain about being involved in the group?

How did you feel about the traveling time/distance to classes? Did this affect your attendance?

Was there anything else that affected your attendance?

If you missed a class or two, tell me a bit about the reasons you missed classes/

Was there anything we could have done to make it easier for you to make it to each class?

Do you think the program would be good for younger adolescents who might have just started their periods and have pain; and if so, down to what age?

SYMPTOMS, AND MANAGEMENT

Tell me a little bit about your current period pain symptoms. Are they different than before you started the program?

What symptom currently bothers you the most?

What other things are you currently doing to help your symptoms? (probe for medical management, treatments)

Have you used any of the skills you learned in the group treatment (e.g., decatastrophizing skills, coping skills)? If so, which have been most helpful for you?

Do you feel that the program improved your symptoms? In what ways? (probe: which symptoms, to what extent)

If it was offered, would you want to continue meeting for more treatment?

Overall, how would you characterize your mood since having completed the program? Is this different than before you started the program? (probe for depression, anxiety, somatization)

Any changes in your pain?

Any changes at school, work, or other activities since doing the program?

Any other changes? Either better or worse?

Is there anything else you would like to share about your experiences in the program?

Excerpt from Treatment Protocol

Feedback about the group

1) The therapist will now solicit feedback from all participants about what they <u>liked</u> about the group, what they <u>didn't like</u> about the group, what they would <u>change</u> about the group, and anything they would <u>add or take away</u> to the group materials. The therapist will also spend some time talking with group members about what was important to each of them, specifically, about the group, group members, or information.