Study number



# Comprehensive Prevention of Cervical Cancer in Tanzania



Study site: ORCI	
Date	Study number
Health Provider Initials	Participant initials

### BACKGROUND

1.	How old are you?	years	

#### 2. Are you:

Married, monogamous	1
Married, polygamous	2
Cohabiting	3
Single, with regular partner	4
Single, no regular partner	5
Divorced/ Widow	6

## How long have you known your husband / cohabiter / regular partner?

## \_\_\_\_\_years

\_\_\_\_ months

## 3. With whom are you presently living?

Husband / cohabiter	1
Parents	2
Parents in law	3
Other relatives	4
Friends	5
Nobody	6

### 4. What is the highest level of formal education you have completed?

No formal education	1
Standard 1-4	2
Standard 5-7	3
Form 1-4	4
Form 5-6	5
University/college	6
Other Specify	8

#### 5. What is your religion?

Christian		1
Muslim		2
Other	Specify	3

#### LIFESTYLE HABITS AND HEALTH

#### 6. Do you smoke cigarettes?

Yes, every day	1
Yes, at least once a week	2
Yes, but less than once a week	3
No, but I previously smoked	4
No, never $\rightarrow$ (go to question 11)	5

-	

### . How old were you, when you started to smoke cigarettes regularly?

(i.e. at least once a week)

age \_\_\_\_\_ years

8. How many years have you smoked cigarettes regularly? (subtract periods of smoking cessation)

number of years: \_

9.

If you are a <u>current</u> smoker, how much do you smoke on an average day?

number of cigarettes: \_\_\_\_\_

10.	If you <u>no longer</u> smoke cigarettes, how old were you when you stopped smoking?				
	age years				

# 11. Have you ever drunk alcohol and if yes, how old were you when you started drinking alcohol?

Have never been	12 years or	13-14	15-16	17-18	19-20	21 years or
drinking	younger	years	years	years	years	older
Go to question 14)	□ <sub>2</sub>	□ <sub>3</sub>	4	5	6	7

#### 12. How much per week do you usually drink of the following types of alcohol?

Beer	No. of glasses per week on average	
Wine	No. of glasses per week on average	
Liquor	No. of <u>drinks</u> per week on average	

(1 bottle of vine = 6 glasses, 1 bottle of liquor = 20 drinks, 1 bottle of beer = 2 glasses)

# 13. How many times per month on average do you have more than <u>6 drinks on the same</u> <u>occasion</u>?

Never	Less than once a	1-3 times per	4-8 times per	<u>&gt;</u> 9 times
	<u>month</u>	<u>month</u>	<u>month</u>	per <u>month</u>
□ 1	□ <sub>2</sub>	□ <sub>3</sub>	4	5

#### 14. How do you regard your own health?

Excellent	Very good	Good	Less good	Bad
□ <sub>1</sub>		3	4	5

3

#### 15. How do you perceive your body size?

Much too thick	A little too thick	Good	A little too thin	Much too thin
□ <sub>1</sub>	□ <sub>2</sub>	□ <sub>3</sub>	4	5

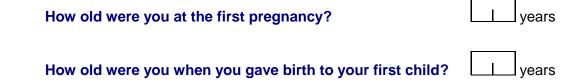
#### **REPRODUCTIVE HEALTH and SEXUAL HABITS**

#### 16. Have you ever been pregnant?

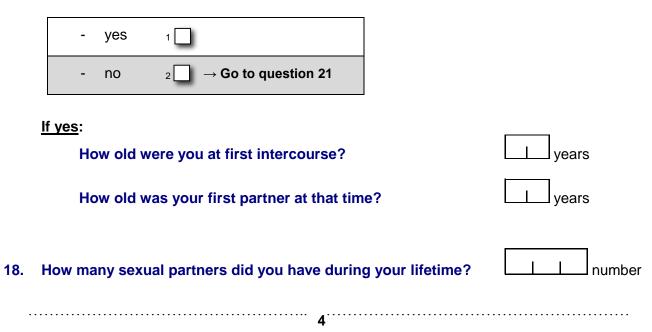
- y	/es	
- n	י סו	$_2 \square \rightarrow$ Go to question 17

#### If yes:

Total number of pregnancies	1
Total number of births	2



#### 17. Did you ever have a sexual partner?



### 19. Did you have sexual intercourse within the last 12 months?

- y	/es	1
- r	סו	2

#### <u>If yes</u>:

How often have you used condoms during the last 12 months?

At every sexual intercourse	1
Frequently but not at every intercourse	2
Rarely	3
Only sexual intercourse without condoms	4

#### 20. Is your husband / cohabiter / regular partner circumcised?

Yes	1
No	2
No husband / cohabiter / regular partner	3

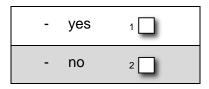
# 21. Has a doctor or other health care provider told you that you had genital warts (condyloma)?



#### If yes:

How old were you when you had genital warts for the first time?

### Have you had genital warts in the last 12 months?



22. Has a doctor or other health care provider told you that you had precancerous lesions on the cervix?

-	yes	1
-	no	2

If yes:

When did you have your last diagnose of precancerous lesions?



calendar month calendar year

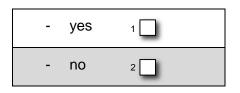
#### Which treatment did you receive?

- Cryo therapy	1
- LEEP	2
- Don't know	3

# 23. Has a doctor or other health care provider told you that you had one of the following sexually transmitted diseases?

Chlamydia	₁ □ Yes	₂□ No	If yes	Age at first episode Years
Gonorrhea	₁ □ Yes	₂□ No	If yes	Age at first episode Years
Syphilis	₁ □ Yes	₂□ No	If yes	Age at first episode Years

#### 24. Have you ever been tested for HIV?



### <u>If yes:</u>

### Have you ever tested positive?

-	yes	1
-	no	2

#### If yes:

When did you test positive?	calendar month	calendar year
When did you have your last CD4 c (If more than 6 months ago $\rightarrow$ refer th		<i>test)</i> calendar year

What was the result of the CD4 count? \_\_\_\_\_number

### Have you ever been started on ARV treatment?

First line	₁ □ Yes	₂□ No	lf yes	calendar month	calendar year
Second line	₁□ Yes	2 🗌 No	lf yes	calendar month	calendar year
Third line	₁□ Yes	₂□ No	lf yes	calendar month	calendar year

What is your CTC card number?	Clinic name	Card number
If you do not know, can we call you	u and get the number	•

- no

2

## KNOWLEDGE OF CERVICAL CANCER

# 25. Here are some statements about cervical cancer. I will ask you to answer which are true and which are false.

Malaria (mosquito) causes cervical cancer	True	False	
Pain during urination can be a sign of cervical cancer	True	False	
Cervical cancer is the most commen cancer disease among Tanzanian women	True	False	
You can get cervical cancer from deep kissing	True	False	
It is possible to prevent cervical cancer	True	False	
Vaginal bleeding is the most common sign of cervical cancer	True	False	
Too much sun can lead to cervical cancer	True	False	
A cervical infection will always turn into cancer	True	False	
HIV-positive women have higher risk of developing cervical cancer	True	False	
Cervical cancer is often found at an early stage due to obvious symptoms	True	False	
You can get cervical cancer from unprotected sexual intercourse	True	False	
Screening can detect cervical infections so they do not develop into cancer	True	False	
Cervical cancer is the main cause of cancer-related death among Tanzanian women	True	False	
Cervical cancer is most common for women in their 20's	True	False	
Itchiness in the vaginal area can be a sign of cervical cancer	True	False	
A virus called "Humanpapiloma virus" (HPV) causes cervical cancer	True	False	

### ACCEPTANCE OF MOBILE MESSAGES

#### Introduction:

Women who may have precancerous lesion will usually get a new appointment at the clinic after around 12 months. In this study, some women will also receive health information and reminders of their appointment via sms. Here are some questions about mobile messages.

# 26. How do you feel about receiving health information and reminders of your appointment via sms on your or your family's mobile phone?

(Choose the one smiley that best shows how you feel)



.....

# 27. How do you feel about receiving health information and reminders of your appointment via sms on your or your family's mobile phone?

(Make one vertical mark on the line similar to how you feel)

0	10
I do not like it at all	I like it very much

## Thanks a lot for your help

If there are any comments to add, please write them below