

Knowledge, attitude and practice of cervical cancer/ reproductive cancer and its screening : a cross-sectional study

Questionnaire for women, version 06.02.2018

Questionnaire number:

HDSS Number:

Name of interviewer:

Date of interview:

District:

Kebele:

Start time:

Finish time:

Part 1: socio demographic characteristics of the respondents

| Number | questions | answers |
|---------------|---|--|
| 101 | what is your age? | ...years |
| 102 | What is your Religion? | 1.orthodox 2.muslim 3.protestant 4.catholic 5.other |
| 103 | what is your marital status? | 1.single 2.married 3.divorced 4.widowed 5.separated |
| 104 | what is your ethnicity? | 1.gurage 2.silite 3.hadiya 4.kambata 5.romo 6.amhara 7.Tigire 8.other |
| 105 | what is the level of school you attended? | ...years higher education |

| Number | questions | answers |
|--------|--|--|
| 106 | what is your occupation? | 1.housewife 2.private employee 3.farmer 4.government employee 6.daily laborer 7.merchant 8.student 9.others |
| 107 | what is your current residence area? | 1.city 2.village |
| 108 | do you have a monthly income? | 1.yes 2. no If no, skip question 109 |
| 109 | how much money do you have this month? | ..birr |
| 110 | do you have health insurance? | 1.yes <u>2.no</u> |

Part 2: respondents reproductive data

| number | questions | answers |
|--------|---|---|
| 201 | have you ever been pregnant? | 1.yes <u>2.no</u> if no, skip question 202 |
| 202 | if yes how many times have you been pregnant? | ...times |
| 203 | have you ever given birth? | 1.yes <u>2.no</u> if no, skip question 204 and 205 |
| 204 | how old were you when you first gave birth? | ...years |
| 205 | how many children do you have? | ... |
| 206 | how old were you when you first had sexual intercourse? | 1. ...years 2. I don't know 3. Never |
| 207 | did you use any contraceptive methods | 1.yes <u>2.no</u> |
| 208 | are you currently using contraceptive methods? | 1.yes <u>2.no</u> if no, skip question 209 |

| number | questions | answers |
|--------|--|--|
| 209 | if yes which method are you currently using? | 1.IUD 2.injectable 3.implants 4.pills 5.male condom 6.female condom 7.others |

Part 3 : general knowledge about cervical cancer/ reproductive cancer

| number | question | answer |
|--------|---|---|
| 301 | have you ever heard of cervical cancer/ reproductive cancer? | 1.yes 2. no 3. I don't know |
| 302 | Have you ever had contact with someone with cervical cancer/ reproductive cancer? | 1.yes 2.no 3. I don't know |
| 303 | Do you know symptoms of cervical cancer/ reproductive cancer? | 1.yes 2. no 3. I don't know if no/ I don't know skip question 304 |
| 304 | which symptoms do you know? | 1.abnormal bleeding 2.discharge 3.pelvic pain 4.bleeding after sex Participant can name more than one answer |
| 305 | do you think that there is a way to reduce the risk of developing cancer? | 1.yes 2. no 3. I don't know if no/ I don't know, skip question 306 |
| 306 | if yes how can you reduce your risk? | 1.modifying lifestyle 2.vaccine 3.screening 4.use of condom Participant can name more than one answer |
| 307 | Can you get vaccinated against cervical cancer/ reproductive cancer? | 1.yes 2. no 3. I don't know |
| 308 | is it possible to screen for cervical cancer/ reproductive cancer? | 1. yes 2. no 3. I don't know |

| number | question | answer |
|--------|--|---|
| 309 | do you know any women that have been screened? | 1. yes 2. no 3. I don't know |
| 310 | Do you know any method of screening? | 1. yes 2. no 3. I don't know |
| 311 | have you heard of VIA? | 1. yes 2. no 3. I don't know if no/ I don't know, skip question 315 |
| 312 | how often should a women go for VIA | 1.every year 2.every 3 year 3.every 5 years 4.every 10 years 5.only once Please take down only one answer |
| 313 | have you heard of HPV test? | 1. yes 2. no 3. I don't know |
| 314 | have you heard of the cytological examination? | 1.yes 2. no 3. I don't know |
| 315 | do you think early detection is helpful? | 1. yes 2. no 3. I don't know |

Part 4: participant's perception of risk factors of cervical cancer/ reproductive cancer

| number | question | responses |
|--------|--|---|
| 401 | Which age group has the highest risk of developing cervical cancer/ reproductive cancer? | 1. 15-30 2. 30-49 3. 50-70 4. >70 5. I don't know participant can name more than one answer |
| 402 | Is HPV infection a risk factor for cervical cancer/ reproductive cancer? | 1. yes 2. no 3. I don't know |
| 403 | Is HIV infection a risk factor for cervical cancer/ reproductive cancer? | 1. yes 2. no 3. I don't know |

| number | question | responses |
|--------|---|-----------------------------------|
| 404 | Is having multiple sexual partners a risk factor for cervical cancer/ reproductive cancer? | 1.yes 2. no 3. I don't know |
| 405 | Is early sexual intercourse a risk factor for cervical cancer/ reproductive cancer? | 1.yes 2. no 3. I don't know |
| 406 | Is a history of sexually transmitted diseases a risk factor for cervical cancer/ reproductive cancer? | 1.yes 2. no 3. I don't know |
| 407 | Are a large number of pregnancies and childbirths risks factors for cervical cancer/ reproductive cancer? | 1.yes 2. no 3. I don't know |
| 408 | Is hormonal contraception a risk factor? | 1.yes 2. no 3. I don't know |
| 409 | is occurrence of cervical cancer/ reproductive cancer in the family a risk factor? | 1.yes 2. no 3. I don't know |
| 410 | Is smoking a risk factor? | 1.yes 2. no 3. I don't know |

Part 5: attitude towards the disease and it's screening

| number | question | answer |
|--------|--|-----------------------|
| 501 | Cervical cancer/ reproductive cancer is a serious disease and can be deadly. | 1 2 3 4 5 |
| 502 | Cervical cancer/ reproductive cancer is a serious disease in my community | 1 2 3 4 5 |
| 503 | I can get cervical cancer/ reproductive cancer. | 1 2 3 4 5 |
| 504 | It is possible to screen for cervical cancer/ reproductive cancer. | 1 2 3 4 5 |

| number | question | answer |
|--------|--|-----------------------|
| 505 | I am scared of the screening process | 1 2 3 4 5 |
| 506 | I want to know if I have cervical cancer/ reproductive cancer. | 1 2 3 4 5 |
| 507 | Cervical cancer/ reproductive cancer can be treated. | 1 2 3 4 5 |
| 508 | I want to get treated, if I have cervical cancer/ reproductive cancer. | 1 2 3 4 5 |
| 509 | My husband allows me/ supports me to get tested for cervical cancer/ reproductive cancer. Skip question 509 and 510, if the woman is not married | 1 2 3 4 5 |
| 5010 | My husband allows me/ wants me to get treated if I have cervical cancer/ reproductive cancer. | 1 2 3 4 5 |
| 511 | I feel supportive and positive towards people with cervical cancer/ reproductive cancer in your community | 1 2 3 4 5 |
| 512 | My community feels supportive and caring for people with cervical cancer/ reproductive cancer. | 1 2 3 4 5 |

likert scale

1 for sure no

2 no

3 maybe

4 yes

5 for sure yes

Part 6: practice of cervical cancer/ reproductive cancer screening

| number | question | answer |
|--------|---|----------------------|
| 601 | Have you ever been screened for cervical cancer/ reproductive cancer? | 1.yes <u>2.no</u> |
| 602 | Do you want to get screened for cervical cancer/ reproductive cancer? | 1.yes <u>2.no</u> |
| 603 | Do you have access to cervical cancer/ reproductive cancer screening? | 1.yes <u>2.no</u> |

Part 7: sources of information

| number | question | answer |
|--------|---|--|
| 701 | Do you feel well informed about cervical cancer/ reproductive cancer? | 1.yes <u>2.no</u> |
| 702 | Do you want to learn more about cervical cancer/ reproductive cancer? | 1.yes <u>2.no</u> |
| 703 | What is your source of knowledge? Participant can name more than one answer | 1.none 2.newspaper/magazine 3.Radio 4.Television 5.Billboards, posters 6.brochures 7.health workers 8.family, friends, 9.neighbors, colleges 10.religious leaders 11.teachers 12.others |