

Supplemental Appendix for:
 Perspectives of Screening-eligible Women and Male Partners on Benefits of and Barriers to Treatment for Precancerous Lesions and Cervical Cancer in Kenya
 Kathleen R. Ragan et al.

**Appendix S1. Questions Assessing Benefits and Barriers to Cervical Cancer Treatment, Kenya
 Qualitative Assessment Study, 2012-2015**

Questions	Type	Source
QC4: What do people in your community know about cancer? <ul style="list-style-type: none"> • QC4a: What do they say about people who have it? • QC4b: What happens to people who get it? • QC4c: Are there ways to treat or cure it? What are they? 	Barriers	M
QD1: If a woman received an abnormal cervical cancer screening test and told her husband (or male family member if unmarried) about it, how would he react? Would he be: concerned, worried, angry, frustrated, calm, unconcerned? Would he believe the test results? Would he blame the woman for getting screened or having cervical cancer?	Benefits/ Barriers	M
QD2: What do people in your community know about what can be done to help women who receive an abnormal cervical cancer screening test result? <ul style="list-style-type: none"> • QD2a: Have they heard of treatment available after a woman receives an abnormal cervical cancer screening test result?^a • QD2b: Do people talk openly about it? Why/why not? • QD2c: Do women who have had treatment talk openly about it? • QD2d: What do they say about treatment? Is treatment painful? Is treatment disruptive to family life? Is treatment disruptive to a woman's relationship with her husband? • QD2e: Do men want their wives to get treatment? • QD2f: Is it easy for women to get treatment for cervical cancer? • QD2g: Where do women go to get treatment? 	Benefits/ Barriers	M
QD3: Would a man encourage his wife/partner (or female family member if unmarried) to get treatment if she receives an abnormal cervical cancer screening test result?	Benefits/ Barriers	M
QD4: Would a man provide help with transportation and paying for treatment? Why or why not?	Benefits/ Barriers	M
QD5: Can you look at a woman and tell if she has been treated after receiving an abnormal cervical cancer screening test result? How?	Barriers	M
QD6: If a woman needed treatment, where could she go to consult with/visit for her treatment? (e.g., medical doctor, nurse, traditional healer, community health worker, etc.)	Barriers	M
QD7: Often when a woman is treated after receiving an abnormal cervical cancer screening test result, she must not have sex for a number of weeks. If a	Benefits/ Barriers	M

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woman in your community needed treatment, would abstaining from sex be accepted by her husband (and/or family)?		
QD8: If a doctor thinks a woman needs to be treated, should he or she talk with the woman's husband about it? If so, what kinds of information do you think the husband would like to know?	Barriers	M
QD10: Do you know how long it takes for women to heal after treatment?	Barriers	M
QD13: Do you have family members or friends that have been treated after receiving an abnormal cervical cancer screening test result?	Barriers	M
QD14: What are the benefits for women to get treatment?	Benefits	M
QD15: What are the reasons why a woman's husband would not want his wife to be treated? Are there reasons that a woman's husband would not want her to receive treatment from a male provider or doctor?	Barriers	M
QD16: Do women make decisions about getting treatment on their own, or would they consult with someone else? Whom? (e.g., family, friends)	Barriers	M
QE1: Please describe what you think happens after a woman receives an abnormal cervical cancer screening test result?	Benefits/ Barriers	F
QE2: What do people in your community know about treatment for women who have received an abnormal cervical cancer screening test? ^a	Benefits/ Barriers	F
<ul style="list-style-type: none"> • QE2a: Have they heard of treatment available for women who have received an abnormal cervical cancer screening test? • QE2b: What do they say about treatment? Is treatment painful? Is treatment disruptive to family life? • QE2c: Do women want treatment after they find out their screening test was abnormal? • QE2d: Is it easy for women to get treatment? 		
QE5: Where would a woman want to go to get treatment if she needed it? (e.g., Medical doctor, nurse, traditional healer, community health worker, etc.)	Barriers	F
QE9: Can you look at a woman and tell if she has been treated after receiving an abnormal cervical cancer screening test result? How? (e.g., She has pain, she stays at home)	Benefits/ Barriers	F
QE10: Often when a woman is treated after receiving an abnormal cervical cancer screening test result, she must not have sex for a number of weeks. If a woman in your community needed treatment, could she abstain from sex? Why or why not?	Benefits/ Barriers	F
QE11: What are the benefits for women to get treatment after receiving an abnormal cervical cancer screening test result? Can they expect to be healed	Benefits/ Barriers	F

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from cancer? Improvement of any symptoms?

QE12: What are the reasons why women would not want to be treated after receiving an abnormal cervical cancer screening test result?	Barriers	F
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QE13: Are there any reasons why a woman would not be able to get treatment? (e.g., cost, time, travel, inconvenience, other?)	Barriers	F
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Abbreviations: F = female focus group guide; M= male focus group guide

^aIf participants asked for treatment definitions, they were provided with the following:

1. Loop electrosurgical excision procedure (LEEP) is a procedure which uses electrical currents to remove abnormal cells and tissue from the cervix to determine if the abnormal cells are cancerous.
2. Cryotherapy is a treatment used to destroy abnormal tissue on the cervix by freezing it with liquid carbon dioxide (CO₂).
3. Surgery: Doctors remove cancer tissue in an operation.
4. Chemotherapy: Chemotherapy involves the use of drugs to stop or slow the growth of cancer cells. Chemotherapy may cause side effects, but these often get better or go away when chemotherapy is over. Chemotherapy drugs may be given in several forms, including pills or through an IV (intravenous) injection.
5. Radiation: Radiation uses high-energy rays (similar to X-rays) to try to kill the cancer cells and stop them from spreading. The rays are aimed at the part of the body where the cancer is.