

APPENDIX: QUESTIONNAIRE FOR DATA COLLECTION ON KNOWLEDGE, PERCEPTION AND PRACTICE OF SCREENING FOR CERVICAL CANCER

SECTION A: PERSONAL DATA

Mark (v) in the spaces provided, where appropriate. Only one tick is required per question.

Research Identification number:-

1. Age at last birthday
2. Marital status
 - a. Married []
 - b. Never married []
 - c. Divorced/Separated []
 - d. Widowed []
 - e. Living with partner/Co-habiting []
3. Tribe
 - a. Igbo []
 - b. Yoruba []
 - c. Hausa []
 - d. Other, please specify
4. Religion
 - a. Christianity []
 - b. Islam []
 - c. Traditional []
5. Highest level of education
 - a. No formal education []
 - b. Primary school: completed [] Not completed []
 - c. Secondary school: completed [] Not completed []
 - d. Tertiary school: completed [] Not completed []
6. Employment status
 - a. Employed []
 - b. Self employed []
 - c. Unemployed []
 - d. Student []
7. Number of children
 - a. One []
 - b. Two []
 - c. Three []
 - d. Four []
 - e. Above four []

SECTION C: PERCEPTION AND ATTITUDE TO CERVICAL CANCER AND CERVICAL CANCER SCREENING

1. Have you ever heard of cervical cancer or cancer of the cervix?
Yes [] No []
2. How serious is cervical cancer compared to other forms of cancer
 - a. More severe than other cancers []
 - b. Same as other cancers []
 - c. Less severe than other cancers []
 - d. Don't know []
3. Is cancer of the cervix curable?
 - a. Never []

- b. Yes, if detected early []
 - c. Always []
 - d. Don't know []
4. Is there any possibility that you could have cancer of the cervix?
- a. Yes []
 - b. Maybe []
 - c. No []
 - d. Don't know []
5. How would you judge your risk of developing cervical cancer?
- a. High risk []
 - b. Low risk []
 - c. No risk []
 - d. Don't know []
6. What do you think about screening for cervical cancer?
- a. It is not important []
 - b. It is very important []
 - c. It is important []
 - d. I feel indifferent about it []
 - e. I don't have any opinion about it []
7. What do you think about screening regularly for cervical cancer?
- a. It is always necessary []
 - b. It is only necessary if there was a bad result []
 - c. It is not necessary []
 - d. I feel indifferent about it
 - e. I don't have any opinion about it []
8. What are the benefits of screening for cervical cancer? (*you can choose more than one answer*)
- a. It can detect cervical cancer early []
 - b. It gives me a sense of control []
 - c. There are no benefits []
 - d. I don't know of any benefits []
 - e. Others (*please specify*)
9. Would you accept to screen for cervical cancer if the services are available?
- a. Yes []
 - b. No []
 - c. Maybe []
 - d. Never []
10. If you ticked "Maybe", what conditions would make you accept it or not accept it?
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SECTION D: UTILIZATION OF CERVICAL CANCER SCREENING SERVICES AND DETERMINANTS

1. Have you ever screened for cervical cancer?
- a. Yes []
 - b. No []

If you answered No to question 1, move to question 6. If Yes, continue with question 2.

2. When was the last time you screened for cervical cancer?
- a. < 1 year []
 - b. Over a year ago, but not up to 3 years ago []
 - c. More than 3 years ago []

- d. More than 10 years ago []
 - e. Can't remember []
3. How often do you screen for cervical cancer?
- a. Regularly, every 1-3 years []
 - b. Anytime I remember []
 - c. Whenever I hear someone died of cancer []
 - d. Whenever my doctor says so []
 - e. Don't know []
 - f. Others, *(please specify)*.....
4. What method did you use the last time you screened for cervical cancer?
- a. Pap smear test []
 - b. Visual Inspection with Lugol's Iodine (VILI) []
 - c. Visual Inspection with Acetic Acid (VIA) []
 - d. Don't know the name []
 - e. Others, *(please specify)*
5. Why do you screen for cervical cancer? *(you can choose more than one answer)*
- a. I can afford the cost of screening []
 - b. Because if it is detected early, it can be cured []
 - c. Because I could have the disease []
 - d. Because my doctor recommends it []
 - e. Because cervical cancer kills and I don't want to die from it []
 - f. My family encourages me too []
 - g. My friend died of cervical cancer []
 - h. A close relation died of cancer []
 - i. Others *(please specify)*
6. Why don't you screen for cervical cancer? *(you can choose more than one answer)*
- a. I don't know any screening tests []
 - b. Because I can't have cervical cancer []
 - c. I am scared of receiving a bad result []
 - d. I don't have any symptoms []
 - e. It's a waste of money []
 - f. It is against my faith []
 - g. It is expensive []
 - h. There is no screening center near my house []
 - i. Our culture forbids it []
 - j. I will become infertile []
 - k. I hear it is painful []
 - l. Others *(please specify)*
7. Could you suggest ways of improving women's knowledge of cervical cancer and screening for cervical cancer.
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