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Supplementary Material

Awareness and attitudes towards the revised National Cervical Screening Program amongst women in rural New South Wales: a cross-sectional study

Elizabeth Gosbell^A, Alisha Panambalana^A, Annabelle Stephenson^A, Carissa Vici^A, Tegan Dutton^A, and Jannine Bailey^{A,}*

^ABathurst Rural Clinical School, School of Medicine, Western Sydney University, Bathurst, NSW 2795, Australia.

*Correspondence to: Jannine Bailey Bathurst Rural Clinical School, School of Medicine, Western Sydney University, Bathurst, NSW 2795, Australia Email: jannine.bailey@westernsydney.edu.au

Supplemental File 1 – Survey Instrument

1. How old are you?

- | | | | | |
|----------------------|---|----------------------|----|----------------------|
| DEL 18-19 | 7 | DEL 40-49 | 10 | DEL 60-69 |
| DEL 20-29 | 8 | DEL 50-59 | 11 | DEL >69 |
| DEL 30-39 | 9 | | | |

2. What country have you lived most of your life in? _____

3. What is your home postcode? _____

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

- | | | | | | | |
|------------------------------|------------------|-----------------------|------------------|-----------------------|------------------|----------|
| DEL Below Year 10 | $\frac{1}{2\pi}$ | Year 10 or equivalent | $\frac{1}{2\pi}$ | Year 12 or equivalent | $\frac{1}{2\pi}$ | Tertiary |
|------------------------------|------------------|-----------------------|------------------|-----------------------|------------------|----------|

5. Have you had the full course of HPV vaccinations?

- | | | | | | |
|------------------|-----|------------------|----|------------------|--------|
| $\frac{1}{2\pi}$ | Yes | $\frac{1}{2\pi}$ | No | $\frac{1}{2\pi}$ | Unsure |
|------------------|-----|------------------|----|------------------|--------|

6. Have you ever had a pap smear or cervical screening test?

- | | | |
|--------------------|------------------|--|
| DEL Yes | $\frac{1}{2\pi}$ | No → if no, skip to question 10 |
|--------------------|------------------|--|

7. Please identify which screening tests you have had?

- | | | |
|--|----|-----------------------|
| DEL Pap smear | 32 | DEL Unsure |
| DEL Cervical screening test | 33 | DEL Both |

8. What year was your last pap smear/cervical screening test? _____

9. Have you had an **abnormal result** on either of these tests which required more frequent testing or further investigation?

- | | | |
|--------------------|------------------|----|
| DEL Yes | $\frac{1}{2\pi}$ | No |
|--------------------|------------------|----|

The next series of questions seeks to understand how much knowledge women have about the new cervical cancer screening program.

It's okay if you don't know the answers, please answer as best you can with the knowledge that you have - it's not a test.

10. Were you aware that there had been a change to the National Cervical Screening Program?

- | | | |
|--------------------|------------------|--|
| DEL Yes | $\frac{1}{2\pi}$ | No → if no, skip to question 18 |
|--------------------|------------------|--|

11. Were you aware that the Pap test is now replaced by the Cervical Screening Test?

~~Yes~~ $\frac{1}{2\pi}$ No → **if no, skip to question 18**

12. How did you find out about the change? If multiple ways, please list all.

13. What was the **old test** was looking for? _____

14. What is the **new test** looking for? _____

15. Under the **new Cervical Screening Test**, you should **first** be screened at what age? _____

16. Under the **new Cervical Screening Test**, at what age should you **stop** being screened? _____

17. Under the **new Cervical Screening Test**, how **often** should you be screened? _____

Before answering the next few questions, please read the brief overview of the changes to the cervical screening program on the top of the next page.

- The old program (**Pap Smear**) looked for **cancerous cell changes** in the cervix. Pap smears were performed **every 2 years** from the age of **18**, or 2 years after first becoming sexually active, until the age of **69**.
- The new program (**Cervical Screening Test**) looks for **HPV**, a virus which causes most cervical cancers. The test process is exactly the same (i.e. taking a swab from the cervix). In most cases, one needs to have had untreated HPV for more than 10 years before cancer develops. Therefore, screening should only be performed **every 5 years** from ages **25-74**, unless you get an abnormal result (in which case you would get screened more frequently).

The next questions seek to understand your feelings towards the new cervical screening test.

18. How do you feel about each of the following? (tick the appropriate box)

	Very unhappy	Unhappy	Neutral	Happy	Very happy
Delayed start of screening program (25 years instead of 18)					
Increased length of time between screenings (5 years instead of 2)					
Screening for HPV instead of cancer cells					

19. Overall, how do you feel about the change in the program? (tick the appropriate box)

Very unhappy	Unhappy	Neutral	Happy	Very happy

20. Why did you select your previous answer? _____

21. How likely were you to go and get screened with the **old test**?

$\frac{1}{2\pi}$ Never $\frac{1}{2\pi}$ Unlikely $\frac{1}{2\pi}$ Maybe $\frac{1}{2\pi}$ Likely $\frac{1}{2\pi}$ Definitely

22. How likely are you to go and get screened with the **new test**?

$\frac{1}{2\pi}$ Never $\frac{1}{2\pi}$ Unlikely $\frac{1}{2\pi}$ Maybe $\frac{1}{2\pi}$ Likely $\frac{1}{2\pi}$ Definitely

23. Do you feel that changes to the Cervical Screening Program were promoted enough?

$\frac{1}{2\pi}$ Yes $\frac{1}{2\pi}$ No $\frac{1}{2\pi}$ Undecided

24. What would be the best avenue(s) for informing women about these changes? (please tick all that apply)

- | | | |
|--|----|---|
| <input type="checkbox"/> GPs | 18 | <input type="checkbox"/> Social Media |
| <input type="checkbox"/> Advertisements (e.g posters, TV ads, newspaper) | 19 | <input type="checkbox"/> Other (please specify) |
| | 20 | _____ |

25. Which of the following do you feel are a barrier to you participating in the **new** cervical screening program? (please tick all that apply)

- Lack of education about the new program
- Lack of knowledge about cervical cancer
- Dissatisfaction with the changes in the program
- Other _____
- None of the above

26. Is there anything else about the new Cervical Screening Test that concerns you or would stop you from getting screened ?

Thank you for your time!