

Questionnaire: English version

Evaluating The Knowledge of Breast Cancer Risk Factors and Screening Methods among Community Health Workers in Kicukiro District, Rwanda: A cross-sectional study

Section 1: Socio-demographic characteristics

1. Age

a) 18-25

b) 25-30

c) 30-35

d) above 35

2. Gender. M F

3. Health centers he /she is working in

a) Masaka Health Center

b) Gikondo Health Center

4. Which type of community health worker are you?

a) Binômes

b) ASM

c) C) Health promotion

5. What is your educational level?

a) Primary level

b) level

c) Diploma

d) Bachelor

6. Experience as a community health worker

- a) One-two years
- b) Two – four years
- c) Four-six years
- d) six-eight years
- e) eight-10 years
- f) above 10 years

7. Have you ever trained about the risks and prevention of breast cancer

a) yes

b) no

Section II. The level of knowledge about different breast cancer risk factors

8. Please identify the factors which you think is a potential risk factors for developing (more than one answer is acceptable)

a. Increasing age	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
b. Positive family history	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
c. High fat diet	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
d. Smoking	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
e. Alcohol consumption	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
f. First child at late age	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
g. Early onset of menarche	I. Yes <input type="checkbox"/>

	II. no <input type="checkbox"/>
h. Late menopause	I. Yes <input type="checkbox"/> II. <input checked="" type="checkbox"/> no
i. Stress	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
j. Larger breast	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
k. Use of oral contraceptive pills	I. Yes <input type="checkbox"/> II. no <input type="checkbox"/>
l. Physical inactivity	I. Yes <input type="checkbox"/> II. <input checked="" type="checkbox"/> no
m. Woman who do not breastfeed	I. Yes <input type="checkbox"/> II. <input checked="" type="checkbox"/> no
n. Obesity	I. Yes <input type="checkbox"/> II. <input checked="" type="checkbox"/> no
o. Radiation exposure (Specify) _____	I. Yes <input type="checkbox"/> II. <input type="checkbox"/>

Section II. The level of knowledge about different screening methods of breast cancer

9. From the following identify the methods used in breast cancer prevention

a.	Self-breast examination	I. Yes <input type="checkbox"/>
b.	Pathological examination of breast tissue by using FNAC (Fine Needle Aspiration Cytology)	I. Yes <input type="checkbox"/> II. No <input type="checkbox"/>
c.	Clinical Breast Examination by a doctor	I. Yes <input type="checkbox"/> II. No <input type="checkbox"/>
d.	Mammography	I. Yes <input type="checkbox"/> II. No <input type="checkbox"/>

10. Do you know how often SBE should be done (Tick the answer you think is right)

- a) monthly
- b) Twice a year
- c) Once a year
- d) Don't Know

11. Which of these methods use when you practicing Breast self- examination?

- a) In front of mirror
- b) During shower
- c) Lying down
- d) None of them

12. What motion do you use in examination of your breast?

a) Circular

b) Wedge

c) None

13. Do you know the recommended age for a mammography examination to start?

a) At the age of 30

b) At 35

c) At 45-year

d) Don't know

14. Do you often do/participate in some prevention methods for the people

a) yes

b) no

15. If yes which methods

a) Self-breast examination

b) Pathological examination of breast tissue by using FNAC (Fine Needle Aspiration Cytology)

c) Clinical Breast Examination by a doctor

d) Mammography

End!