

## SUPPLEMENTARY MATERIAL 1

### Questionnaire (English version)

Assessment of the level of knowledge of parents/legal guardians of children under 17 years of age about HPV-related cancers

The questionnaire aims to assess the level of knowledge of parents/legal guardians of children aged 8–17 regarding HPV-related cancers, including knowledge about HPV, forms of diseases caused by this virus, routes of virus transmission, availability of preventive vaccinations, and awareness of the risk of developing HPV-related cancers. The obtained results will allow identification of areas where additional educational and preventive actions are needed among parents/legal guardians of children under 17 years of age.

The questionnaire is fully anonymous, voluntary, and the results will be used exclusively for scientific purposes.

Completion of the questionnaire is considered as provision of informed consent to participate in the study.

The questionnaire is intended for parents/legal guardians of children under 17 years of age.

We sincerely thank you for completing the survey.

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1. What is the age of your child/children? \*

Select all applicable answers.

- under 1 year
- 1 year
- 2 years
- 3 years
- 4 years
- 5 years
- 6 years

- 7 years
- 8 years
- 9 years
- 10 years
- 11 years
- 12 years
- 13 years
- 14 years
- 15 years
- 16 years
- 17 years

2. What is the sex of your child/children? \*

Select all applicable answers.

- female
- male
- other

3. Place of residence: \*

Select one answer.

- Village (less than 1,000 inhabitants)
- Small town (1,000–10,000 inhabitants)
- Medium town (10,001–100,000 inhabitants)
- Large city (more than 100,000 inhabitants)

4. Gender: \*

Select one answer.

- Male
- Female
- Other

5. Your age: \*

Select one answer.

- 18-20
- 21-30
- 31-40
- 41-50
- 51-60
- 60+

6. Your education: \*

Select one answer.

- Primary
- Secondary
- Higher

7. Employment status: \*

Select one answer.

- Employed and studying (Bachelor's degree)
- Employed and studying (Master's/long-cycle studies)
- Employed, not studying
- Unemployed and studying (Bachelor's degree)

- Unemployed and studying (Master's/long-cycle studies)
- Temporarily unemployed, not studying
- Permanently unemployed, not studying

8. Do you or a member of your immediate family work or study in a healthcare-related field? \*

Select one answer.

- Yes
- No

9. Have you ever heard of HPV? \*

Select one answer.

- Yes
- No
- I am not sure

10. HPV is: \*

Select one answer.

- A bacterium that can cause cancer
- A fungus that can cause cancer
- A virus that can cause cancer
- A parasite that can cause cancer
- I do not know

11. Do you agree with the following statement: "Diseases caused by HPV affect only women"? \*

Select one answer.

- Yes

- No

12. Which of the following diseases can, in your opinion, be caused by HPV? \*

Select all applicable answers.

- Herpes simplex

- Genital herpes

- Genital warts

- Cervical cancer

- Throat cancer

- Warts and skin lesions

- Penile cancer

- Vaginal and vulvar cancer

- Anal cancer

- Skin cancer

- Weakening of the immune system

- Urinary bladder inflammation

- Meningitis

13. What are, in your opinion, the main routes of HPV transmission? \*

Select all applicable answers.

- Skin-to-skin contact with an infected person

- Vaginal intercourse

- Anal intercourse

- Oral intercourse

- During childbirth

- During kissing
- Using the same toothbrush
- Using the same towel
- Airborne transmission

14. What, in your opinion, increases the risk of HPV infection? \*

Select all applicable answers.

- Visiting public swimming pools
- Kissing random people
- Frequent change of sexual partners
- Poor hygiene of intimate areas
- Not washing hands before eating

15. Are you aware that vaccines against HPV exist? \*

Select one answer.

- Yes
- No

16. Have you vaccinated your child against HPV? \*

Select one answer.

- Yes
- No
- I am considering it
- My child has already been vaccinated

17. Please justify your answer to question 17 (optional)

18. Who, in your opinion, can be vaccinated against HPV? \*

Select one answer.

- Only girls under 14 years of age
- Both boys and girls under 14 years of age
- Only girls above 8 and under 18 years of age
- Both boys and girls above 8 and under 18 years of age
- Only women, regardless of age
- Both women and men, regardless of age

19. Who, in your opinion, can receive fully funded HPV vaccination? \*

Select one answer.

- Only girls under 14 years of age
- Both boys and girls under 14 years of age
- Only girls above 8 and under 18 years of age
- Both boys and girls above 8 and under 18 years of age
- Only women, regardless of age
- Both women and men, regardless of age

20. Should HPV vaccines, in your opinion, be repeated? \*

Select one answer.

- Yes, every year
- Yes, three doses should be taken
- Yes, the number depends on the vaccine
- No
- There are no HPV vaccines

21. Are you vaccinated against HPV? \*

Select one answer.

- No
- Yes, with a bivalent vaccine
- Yes, with a 9-valent vaccine
- Yes, with a 4-valent vaccine
- Yes, but I do not know which vaccine