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### **Supplementary Material**

Primary healthcare providers' knowledge, practices and beliefs relating to preventive sexual and reproductive health care for women from refugee and asylum-seeking backgrounds in Australia: a national cross-sectional survey

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## Supplementary File S1 How the evidence informed survey items

Evidence	Factors impacting preventive SRH care access	Related survey items
Davidson, N et al. 2022	Interpersonal and patient/HCPs encounter factors	
	<ul> <li>refugee women's knowledge, awareness of preventive SRH care;</li> </ul>	<ul> <li>"In your experience, how aware are women from refugee-like backgrounds of",</li> </ul>
	<ul> <li>perceived need for and use of preventive SRH care;</li> </ul>	"In your experience, how often do women from refugee-like backgrounds ask you for information about"
	<ul> <li>language and communication barriers between women and their HCPs.</li> </ul>	"Would you like to receive further training specifically in relation to women from refugee-like backgrounds on".
	Health system factors	
Davidson, N et al. 2022	financial barriers;	<ul> <li>"In your experience, how many women from refugee-like backgrounds see out of pocket financial cost as a barrier to"</li> </ul>
	availability of female providers;	"Do women have a choice about seeing a female practitioner in the practice you work in?"
		<ul> <li>"Do women who need an interpreter have access to a female interpreter when discussing preventive SRH care?"</li> </ul>
	Sociocultural factors	
Davidson, et al. 2022	women's religious beliefs;	<ul> <li>"In your experience, does a woman's religious beliefs reduce her uptake of SRH care with regard to"</li> </ul>
	<ul> <li>influence of women's family or partner;</li> </ul>	<ul> <li>"In your experience, how often do women face coercion from husband/intimate partner that limits their autonomy or ability to make decisions about"</li> </ul>
	cultural factors;	"In your experience, does being unmarried reduce a woman's ability to make decisions about"
Davidson, et al. 2024	Prevention, knowledge and awareness	
	<ul> <li>women's limited awareness of prevention and benefits of preventive SRH care;</li> </ul>	"Who initiates conversations with women from refugee-like backgrounds about the following"

•	recognition of pre-arrival
	experiences of women from
	refugee backgrounds;

- importance of HCPs proactively initiating conversations with women about preventive SRH.
- "Do you bring up preventive SRH care opportunistically when women from refugee-like backgrounds present with other health concerns?"

### Supplementary File S2 Original survey questions, response categories and corresponding dichotomised categories

Original survey questions	Survey response categories	Corresponding classification of categories	Corresponding dichotomised categories
How often do you see women from	less than every 2 months	• >every 2 months	>every 2 months
refugee-like backgrounds in your practice?	every 2 months	≤every 2 months	
	every month	<ul> <li>≤every 2 months</li> </ul>	≤every 2 months
At least once	every week	≤every 2 months	
Which of the following best describes your fee-for-service billing arrangements for	I bulk bill all patients	No out of pocket financial cost for patient	No out of pocket financial cost
women from refugee-like backgrounds? Please select one option	I bulk bill depending of eligibility	No out of pocket financial cost for patient	for patient
	I don't bulk bill patients	Out of pocket financial cost for patient	Out of pocket financial cost for patient
	Not applicable, I don't have a     Medicare provider number	Removed for analysis	
Do you offer fee-free healthcare to asylum seekers with no access to Medicare?	• No	• No	• No
	• Yes	• Yes	• Yes
Please select one option	I don't see asylum seekers	<ul> <li>Removed for analysis</li> </ul>	
	Don't know or unsure	<ul> <li>Removed for analysis</li> </ul>	
Do women who need an interpreter have	All the time	• Yes	
access to a female interpreter when	Most of the time	• Yes	• Yes
discussing preventive sexual and	Some of the time	• Yes	
reproductive health care?	None of the time	• No	• No
	Don't know or unsure	Removed for analysis	
Do women have a choice about seeing a	All the time	• Yes	
female practitioner in the practice you work in?	Most of the time	• Yes	• Yes
	Some of the time	• Yes	
	None of the time	• No	• No
	Don't know or unsure	Removed for analysis	

Would you like to receive further cultural	• Yes	• Yes	• Yes
awareness training in relation to women	• No	• No	• No
from refugee-like backgrounds?	Don't know or unsure	Removed for analysis	
What is your gender?	Male	Male	• Male
	Female	Female	Female
	Non-binary / third gender	Removed for analysis	
	Prefer not to say	Removed for analysis	
How old are you (in years)?	Age in years		<ul><li>≤45</li><li>&gt;45</li></ul>
Do you speak a language other than	• No		• No
English?	• Yes		• Yes
What is your country of birth?	Individual countries were selected		<ul><li>Australia</li><li>Other country</li></ul>
What is your profession?	Individual professional groups were selected		<ul><li>Registered Nurse</li><li>General Practitioner</li></ul>
In which country did you obtain your medical or nursing qualification?	Individual countries were selected		<ul><li>Australia</li><li>Other country</li></ul>
How many years have you been practicing	Less than 5 years	• ≤10	410
in Australia? (In years)	• 5-10 years	• <10	• ≤10
	• 11-20 years	• >10	
	More than 20 years	• >10	• >10
What is the geographical location of your	Metropolitan	Metropolitan	<ul> <li>Metropolitan</li> </ul>
main work setting?	Regional	Regional/rural/remote	
	Rural	Regional/rural/remote	Regional/rural/remote
	• Remote	Regional/rural/remote	
What is the type of organisation of your	General Practice	General Practice	General Practice
main employment?	Community Health	Other health service	
	Hospital	Other health service	
	Regional Health Service	Other health service	Other health service
	Remote Health Service	Other health service	
	Family planning organisation	Other health service	

	Sexual and Reproductive     Health Service	Other health service	
	Refugee Health Service	Other health service	
	Other, please specify	Other health service	
On average, how many hours do you	<ul> <li>Casual (less than 4 hours)</li> </ul>	Part-time ≤32 hours	Part-time ≤32 hours
practice per week?	Part-time (less than 32 hours)	Part-time ≤32 hours	Part-time 552 mours
	• Full-time (32 hours and more)	Full-time >32 hours	Full-time >32 hours

### **Supplementary File S3**

# **HCPs Survey**

1.1 Thank you for responding to the invitation to complete this anonymous survey of primary health care professionals.

This study is part of a Doctor of Philosophy Degree and was approved by XXXXXXXXXXXXXX Committee.

If you want to read more about this research, click here to read the **Explanatory statement**.

Thank you again for your time and interest. If you would like any further information about this survey please contact XXXXXXXXX by email (XXXXXXXXXXXXXX).

XXXXXXXXXXXXX
(Chief Investigator)
XXXXXXXXXXXXXX
(Co-investigator)
XXXXXXXXXXXX
Student researcher)

By clicking the 'Go to survey' arrow below you confirm you have read and understood the information above and agree to take part.

1.2 In this survey, 'women from refugee-like backgrounds' refers to women on Humanitarian Visas, Women at Risk Visas, seeking asylum, non-Humanitarian Visa holders from humanitarian entrant source countries

Do you provide clinical care to women from refugee-like backgrounds in the practice you work in?

$\bigcirc$	Yes	(1)
$\bigcirc$	No	(2)

1.3

In this survey preventive sexual and reproductive health care refers to providing: contraceptive care

cervical screening tests (including self-collection)

breast awareness (such as ability to notice breast changes)

breast screening *(mammography)* information including women 40-49 yrs with a family history of breast cancer

human papillomavirus vaccination information for women and girls <20 yrs

2.1 **Section 1** In order to improve use of preventive sexual and reproductive health care by women from refugee-like backgrounds in Australia, we want to understand the barriers they might experience.

We have completed a systematic review of the literature, most of it reporting research from countries other than Australia. We learnt that factors such as women's limited knowledge, low perceived need for preventive care, language and communication barriers, and navigating a new health system impact on access to care.

We have also completed interpreter-assisted interviews with women from refugee-like backgrounds from Myanmar, Syria and Iraq. We found shyness, women's partners, financial barriers and religious beliefs all influence access to care.

We know that women from refugee-like backgrounds come from different countries and have different experiences. When moving through the survey questions if you could think of the ethnicity of women you see most often and answer with respect to that group.

1.a. How often do you see women from refugee-like backgrounds in your practice?
At least once
O less than every 2 months (1)
O every 2 months (2)
O every month (4)
O every week (3)
2.2 1.b. Which of the following best describes your fee-for-service billing arrangements for women from refugee-like backgrounds? Please select one option
I bulk bill all patients (1)
I bulk bill depending of eligibility (2)
O I don't bulk bill patients (3)
O Not applicable, I don't have a Medicare provider number (4)
2.3 1.c. Do you offer fee-free healthcare to asylum seekers with no access to Medicare? Please select one option
○ Yes (1)
O No (2)
O I don't see asylum seekers (3)
Opon't know or unsure (4)

### 3.1 **Section 2**

In this section we are seeking your views about how aware women from refugee-like backgrounds are about preventive sexual and reproductive health care.

2.a. In your experience, how aware are women from refugee-like backgrounds of...

, ,	Not at all aware (1)	Somewhat aware (2)	Moderately aware (3)	Very aware (4)	Don't know or unsure (5)
Contraceptive care (1)	0	0	0	0	0
Cervical screening (2)	0	$\circ$	$\circ$	$\circ$	$\circ$
Breast awareness (3)	0	$\circ$	$\circ$	0	$\circ$
Breast screening (4)		$\bigcirc$	$\bigcirc$	$\circ$	$\circ$
HPV vaccination (5)	0	0	0	0	0

3.2 2.b. In your experience, how often do women from refugee-like backgrounds ask you for information about...

	Never (1)	Sometimes (2)	Often (3)	All the time (4)	Don't know or unsure (5)
Contraceptive care (1)	0	0	0	0	0
Cervical screening (2)	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
Breast awareness (3)	$\circ$	$\circ$	0	0	$\circ$
Breast screening (4)	0	$\circ$	$\circ$	$\circ$	$\circ$
HPV vaccination (5)	$\circ$	0	$\circ$	0	0

3.4 2.c. In your experience, how many women from refugee-like backgrounds see out of pocket financial cost as a barrier to...

	None (1)	Some (2)	Most (3)	All (4)	Don't know or unsure (5)
Contraceptive care (1)	0	0	0	0	0
Cervical screening (2)	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
Breast awareness (3)	0	$\circ$	0	$\circ$	0
Breast screening (4)	$\circ$	$\bigcirc$	$\circ$	$\circ$	$\circ$
HPV vaccination (5)	0	$\circ$	0	0	$\circ$

### 4.1 **Section 3**

In this section we are interested to learn how women from refugee-like backgrounds access information and what information they need. We would also like to ascertain your views about any professional development needs primary care professionals might have in this field.

3.a. Who initiates conversations with women from refugee-like backgrounds about the following...

Tollowing	In most cases I do (1)	In most cases women do (2)	It's rarely discussed (3)	It's never discussed (4)
Contraceptive care (1)	0	0	0	0
Cervical screening (2)	0	$\circ$	$\circ$	$\circ$
Breast awareness (3)	0	$\circ$	$\circ$	$\bigcirc$
Breast screening (4)	0	$\circ$	$\circ$	$\circ$
HPV vaccination (5)	0	$\circ$	0	$\circ$

4.2 3.b. Do you bring up preventive sexual and reproductive health care opportunistically when
women from refugee-like backgrounds present with other health concerns? For example
diabetes, joint pain, skin conditions or other chronic diseases.

	Yes (1)	Sometimes (4)	No (2)	Don't know or unsure (3)
Contraceptive care (1)	0	0	$\circ$	0
Cervical screening (2)	$\circ$	$\circ$	$\circ$	$\circ$
Breast awareness (3)	$\circ$	$\circ$	$\circ$	$\circ$
Breast screening (4)	$\circ$	0	$\circ$	$\circ$
HPV vaccination (5)	0	0	$\circ$	0
All the time  Most of the to Some of the None of the Don't know of  4.4 3.d. Do women in?  All the time Most of the to	time (1) time (5) time (6) or unsure (3) have a choice abo (4) time (1)	out seeing a female pra	actitioner in the	practice you work
Some of the	, ,			
O None of the	time (5) or unsure (3)			

4.5 3.e. Please rate your level of knowledge in relation to the following...

	No knowledge (1)	Limited knowledge (2)	Moderate knowledge (3)	Very good knowledge (4)	Don't know or unsure (5)
Contraceptive care (1)	0	0	0	0	0
Cervical screening (2)	$\circ$	$\circ$	$\circ$	$\bigcirc$	$\circ$
Breast awareness (3)	$\circ$	$\circ$	$\circ$	0	$\circ$
Breast screening (4)	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
HPV vaccination (5)	0	0	0	0	0

4.6 3.f. Would you like to receive further training specifically in relation to women from refugee-like backgrounds on....

inc backgrounds on			
	Yes (1)	No (2)	Don't know or unsure (3)
Contraceptive care (1)	0	0	0
Cervical screening (2)	0	0	$\circ$
Breast awareness (3)	0	$\circ$	$\circ$
Breast screening (4)	0	0	$\circ$
HPV vaccination (5)	$\circ$	$\circ$	$\circ$

### 5.1 **Section 4**

Cultural competence is the common term used to refer to our abilities to provide care to patients from different cultural backgrounds (eg diverse values, beliefs and behaviours), and includes meeting patients' social, cultural, and linguistic needs. In this section we are interested to hear about your experiences of caring for women from culturally diverse backgrounds.

4.a. How comfortable are you in providing culturally competent care to women from refugee-like backgrounds when discussing...

	Not comfortable (1)	Somewhat comfortable (2)	Moderately comfortable (3)	Very comfortable (4)	Don't know or unsure (5)
Contraceptive care (1)	0	0	0	0	0
Cervical screening (2)	$\circ$	$\circ$	$\circ$	$\circ$	$\bigcirc$
Breast awareness (3)	0	$\circ$	$\circ$	0	$\circ$
Breast screening (4)	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
HPV vaccination (5)	0	0	0	0	0

5.2 4.b. Would you like to receive further cultural awareness training in relation to women from refugee-like backgrounds?
○ Yes (1)
○ No (2)
O Don't know or unsure (3)

### 6.1 **Section 5**

In this section we ask you about your views on how religious beliefs and family factors influence uptake of preventive sexual and reproductive health care of women from refugee-like backgrounds.

6.1.5.a. In your experience, does a woman's *religious beliefs* reduce her uptake of health care with regard to...

	Does not reduce uptake (1)	Sometimes reduces uptake (2)	Often reduces uptake (3)	Reduces uptake all the time (4)	Don't know or unsure (5)
Contraceptive care (1)	0	0	0	0	0
Cervical screening (2)	$\circ$	$\circ$	$\circ$	$\circ$	$\bigcirc$
Breast awareness (3)	$\circ$	$\circ$	0	$\circ$	0
Breast screening (4)	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
HPV vaccination (5)	$\circ$	0	$\circ$	0	0

6.2 5.b. In your experience, how often do women face coercion from *husband/intimate partner* that limits their autonomy or ability to make decisions about....

	Never (1)	Sometimes (2)	Most of the time (3)	Always (4)	Don't know or unsure (5)
Contraceptive care (1)	0	0	0	0	0
Cervical screening (2)	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
Breast awareness (3)	$\circ$	0	0	0	$\circ$
Breast screening (4)	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
HPV vaccination (5)	0	0	0	$\circ$	$\circ$

6.3 5.c. If a wom conduct appointr Please tick all the						
Never wit	th husband/int	timate partner pr	esent (1	)		
Sometime	es with husba	nd/intimate partı	ner prese	nt (2)		
Always w	ith the husba	nd/intimate partr	ner prese	nt (3)		
ask the	women what	she wants (4)				
contraceptives is	e cultures, being sexually active prior to marriage is shamed and the use of is taboo and stigmatised. Being unmarried can also be a barrier to undergoing east screening. In your experience, does <b>being unmarried</b> reduce a woman's					
·	Does not reduce uptake (1)	Sometimes reduces uptake (2)		Often reduces uptake (3)	Reduces uptake all the time (4)	Don't know or unsure (5)
Contraceptive care (1)	0	$\circ$	0	0	0	0
Cervical screening (2)	$\bigcirc$	$\bigcirc$	$\circ$	$\circ$	$\circ$	$\circ$
Breast awareness (3)	$\circ$	$\circ$	0	0	$\circ$	$\circ$
Breast screening (4)	$\bigcirc$	$\bigcirc$	0	$\circ$	$\circ$	$\circ$
HPV vaccination (5)	0	0	0	0	0	0

6.5 5.e. In your experience, which of the following are <b>barriers</b> to providing preventive sexual and reproductive services to women from refugee-like backgrounds? Please tick all that apply
limited time during the appointment (1)
women's lack of preventive sexual and reproductive health knowledge (4)
women's religious beliefs (9)
women's cultural beliefs (12)
women's limited English language skills (5)
interpreters don't understand medical terms used (6)
availability of interpreter services (11)
presence of husband/intimate partner (7)
seeing a male practitioner (10)
my own discomfort with the subject matter (2)
Other, please specify (8)
7.1 <b>Section 6</b>
6.a In order to ensure we have a broad group of respondents; please could you provide us with some information about yourself? What is your gender?
○ Male (4)
O Female (5)
O Non-binary / third gender (6)
O Prefer not to say (7)
7.2 6.b How old are you (in years)?

7.3 6.c. Do you speak a language other than English
O No (1)
O Yes (2)
7.4 6.d. What other language do you speak?
7.4 6.e. What is your country of birth?
7.5 6.f. What is your profession? Please tick all that apply
Registered Nurse (1)
Registered Midwife (2)
General Practitioner (3)
Nurse Practitioner (4)
Community Health Nurse (5)
Practice Nurse (6)
Refugee Health Nurse (7)
Sexual and Reproductive Health Nurse (8)
Other, please specify (9)
7.6 6.g. In which country did you obtain your medical or nursing qualification?
7.7 6.h. What year were you first registered as a clinician in Australia?
7.8 6.i. How many years have you been practicing in Australia?
O Less than 5 years (1)
O 5-10 years (2)
O 11-20 years (3)
○ More than 20 years (4)

7.12 6.m. On average how many hours do you practice per week?
Casual (less than 4 hours) (1)
O Part-time (less than 32 hours) (2)
O Full-time (32 hours and more) (3)
7.13 6.n. What are the main countries of origin of the women from refugee-like backgrounds you see in your practice? Please tick all that apply
Afghanistan (1)
Iran (2)
Myanmar (3)
Iraq (4)
Sri Lanka (5)
India (6)
China (7)
Indonesia (8)
Pakistan (9)
Vietnam (10)
Sudan (11)
Ukraine (12)
Other, please specify (13)
<del></del>

7.14 Thank you for taking the time to participate in the survey. Your responses have been recorded.

If you would like to enter the prize draw to win a \$50 gift card, please  $\frac{\text{click here}}{\text{draw}}$  to submit your email address.

Please note: This link will open a separate webpage, and your email address will not be linked to any of the responses that you have provided in this survey.

If you do not wish to enter the prize draw click on the 'next page' arrow below to close the survey.