

Annex 1: final coding protocol

I. Knowledge and stereotypes- shared knowledge and learnt attitude of the community at large toward people with cancer.	
	<p>Societal/cultural conceptions of what it means to be a person with cancer</p> <p>Stereotype – origin: genetic/hereditary, caused by sex, by medicine, by food, etc.</p> <p>Cultural belief – witchcraft</p> <p>Transmission – physical contagion</p> <p>Racial – “white people disease”</p> <p>Susceptibility - gender, sexuality, promiscuity</p> <p>Stereotype – peril: e.g. “cancer is contagious”</p> <p>Stereotype-course: fatal, painful, preventable/not, uncontrollable, concealable, curable, etc.</p> <p>Stereotype – race: typical for white people</p>
II a. Perceptions of devaluation and discrimination	
	<p>Status loss: downward placement of a person in a status hierarchy</p> <p>Discrimination individual: including denying an applicant a job, using offensive words towards person with cancer, person-to-person</p> <p>Discrimination structural: policies in place that deny equal opportunities</p>
II b. Other negative consequences for the individual. These may arise directly from one’s beliefs about community an attitude toward cancer (stereotypes), cognitive separation, labeled individual’s response (e.g. secrecy).	
III. Labeling – an official label of person with cancer through biomedical diagnosis, symptoms, or traditional healing. This is the point when the array of beliefs becomes applicable to a person who has cancer.	
	<p>Label – Biomedical diagnosis: receiving a diagnosis by a Western physician</p> <p>Label - signs/symptoms: having symptoms presumably typical to people having cancer</p> <p>Label –traditional healing: receiving a label through contact and/or treatment by traditional healers</p>
IV. Response – how labeled individuals respond to their stigmatizing status. This leads to certain behaviors: <u>emotional response</u> , <u>secrecy</u> , <u>withdrawal</u> (limiting social interactions to those who know and accept), <u>education</u> of others to ward off negative attitudes	
	<p>coping mechanism – secrecy</p> <p>coping mechanism – withdrawal/denial</p> <p>coping mechanism - openness, acceptance, and self-education</p>
V. Connection of beliefs about cancer with beliefs about HIV/TB	
	<p>Direct connections between cancer and HIV or TB</p> <p>Lessons from past HIV or TB campaigns</p>