

Supplementary Table 1

**COREQ checklist of 32 items**

Tong A, Sainsbury P, Craig J. Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. *International Journal for Quality in Health Care*. 2007. Volume 19, Number 6: pp. 349 – 357

**Title: A qualitative exploration of patient’s preference for breast cancer treatment in New Zealand: Insights from focus group discussions and individual interviews.**

No. Item	Guide questions/description	Reported on Page #
<b>Domain 1: Research team and reflexivity</b>		
<i>Personal Characteristics</i>		
1. Interviewer/facilitator	Which author/s conducted the interview or focus group?	Page 5-6, Line 139-143
2. Credentials	What were the researcher’s credentials? E.g. PhD, MD	Page 5, Line 140
3. Occupation	What was their occupation at the time of the study?	Page 5, Line 140
4. Gender	Was the researcher male or female?	Page 5, Line 140
5. Experience and training	What experience or training did the researcher have?	Page 6, Line 143-145
<i>Relationship with participants</i>		
6. Relationship established	Was a relationship established prior to study commencement?	Page 5, Line 128-136
7. Participant knowledge of the interviewer	What did the participants know about the researcher? e.g. personal goals, reasons for doing the research	Page 5, Line 128-136
8. Interviewer characteristics	What characteristics were reported about the interviewer/facilitator? e.g. Bias, assumptions, reasons and interests in the research topic	N/A
<b>Domain 2: study design</b>		
<i>Theoretical framework</i>		
9. Methodological orientation and Theory	What methodological orientation was stated to underpin the study? e.g. grounded theory, discourse analysis, ethnography, phenomenology, content analysis	Page 6-7, Line 167-184
<i>Participant selection</i>		
10. Sampling	How were participants selected? e.g. purposive, convenience, consecutive, snowball	Page 5, Line 124
11. Method of approach	How were participants approached? e.g. face-to-face, telephone, mail, email	Page 5, Line 128-129
12. Sample size	How many participants were in the study?	Page 7, Line 194-197
13. Non-participation	How many people refused to participate or dropped out? Reasons?	Page 7, Line 194-196
<i>Setting</i>		
14. Setting of data collection	Where was the data collected? e.g. home, clinic, workplace	Page 6, Line 145-147
15. Presence of non-participants	Was anyone else present besides the participants and researchers?	Page 5-6, Line 141-143

16. Description of sample	What are the important characteristics of the sample? e.g. demographic data, date	Page 7, Line 194-201 and Table 1 (page 25)
<i>Data collection</i>		
17. Interview guide	Were questions, prompts, guides provided by the authors? Was it pilot tested?	Page 6, Line 148-154 and Supplementary Table 2.
18. Repeat interviews	Were repeat inter views carried out? If yes, how many?	N/A
19. Audio/visual recording	Did the research use audio or visual recording to collect the data?	Page 6, Line 156
20. Field notes	Were field notes made during and/or after the interview or focus group?	Page 5-6, Line 141-142
21. Duration	What was the duration of the interviews or focus group?	Page 6, Line 154-156
22. Data saturation	Was data saturation discussed?	Page 6, Line 163-165
23. Transcripts returned	Were transcripts returned to participants for comment and/or correction?	Page 6, Line 157-162
<b>Domain 3: analysis and findings</b>		
<i>Data analysis</i>		
24. Number of data coders	How many data coders coded the data?	Page 7, Line 175-184
25. Description of the coding tree	Did authors provide a description of the coding tree?	N/A
26. Derivation of themes	Were themes identified in advance or derived from the data?	Page 7, Line 175-179
27. Software	What software, if applicable, was used to manage the data?	Page 6, Line 167
28. Participant checking	Did participants provide feedback on the findings?	Page 6, Line 157-162
<i>Reporting</i>		
29. Quotations presented	Were participant quotations presented to illustrate the themes/findings? Was each quotation identified? e.g. participant number	Page 8-16, Line 205-410
30. Data and findings consistent	Was there consistency between the data presented and the findings?	N/A
31. Clarity of major themes	Were major themes clearly presented in the findings?	Page 8-16, Line 219-414
32. Clarity of minor themes	Is there a description of diverse cases or discussion of minor themes?	Page 8-16, Line 219-414

*Supplementary Table 2*

**Planned questions and prompts used in focus group discussions and individual interviews.**

<b>Planned order</b>	<b>Question</b>
1	What are the 5 features about breast cancer treatment that are important to you? Take a moment and write these down for discussion.
2	Can you please think back to a cancer treatment that you felt was especially good. What made it so good?
3	Think back to a cancer treatment that was not good for you. What made it undesirable?
4	How do you find the method of taking your current cancer treatment? Is there anything you would like to change about the way you take it?
5	Thinking about your life at the moment, how often do you see a doctor or nurse about your treatment? (Prompt: waiting time for an appointment)
6	Going back to question 1, why do these attributes matter to you?
7	When deciding on starting or switching a cancer treatment, which treatment feature would you consider to be the most important or least important? Why?
8	Have any of you ever had adverse effects from any of your breast cancer treatments? If yes, what happened?
9	What adverse effects worry you the most? Why is that so?
10	Do you do anything to try and prevent adverse effects? If yes, what did you do?
11	Do these treatments affect your daily life – in what ways? (Prompt: eating, washing yourself, family life, social activities, financial hardship)
12	What aspects of breast cancer treatment are most challenging to deal with – why and how do you cope with it?
13	Do you think your oncologist should discuss the potential cost incurred or eligibility for funded treatment with you?
14	If there were a treatment with better outcomes and/or lesser adverse effects, but it will not be funded by the government, would you be willing to pay for it out of pocket? Why yes/no?