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Supplementary Files

Supplement 1

Table S1. Standard CHP *vs.* Elimisha-HPV training modules

Standard training-extracted from the Ministry of Health of Kenya CHP curriculum (Control group)	Distinctive components in Elimisha (Intervention group)
Module 1: Introduction to HPV and cervical cancer prevention	
Components: 1. Introduction to HPV and cervical cancer 2. Cervical cancer burden in Kenya 3. Basic anatomy of the cervix 4. Relationship between HPV, HIV, and cervical cancer-emphasis on prevention and the fact that every one of HPV is at risk at some point in their lives 5. Myths and misconceptions 6. Screening and treatment guidelines 7. HPV self-sampling 8. Sample handling and infection prevention 9. Role of CHPs in cervical cancer prevention	Additional distinctive elements in Elimisha • Streamlined training materials reviewed for stigmatizing language • Peer education using a video testimonial of a woman sharing her story overcoming her fears and successfully undergoing screening Elements excluded in Elimisha • Risk factors for HPV and cervical cancer • Signs and symptoms of HPV and cervical cancer
Module 2: Client-centered approaches in cervical cancer prevention (Intervention group only) Components: • Effective communication in the delivery of HPV and cervical cancer prevention services • Understanding and addressing stigma in HPV and cervical cancer prevention • Using motivational interviewing to educate and counsel women about HPV and cervical cancer • Ethical and professional responsibility in cervical cancer prevention (privacy, confidentiality, respect, and professionalism)	
Module 3: Counselling and follow-up in HPV and cervical cancer service delivery	
Components: • Introduction to counseling and follow-up in cervical cancer prevention • Pre-screening counseling • Pre-treatment, post-treatment counseling and follow-up	Additional Distinctive Components in Elimisha • Use of Motivational interviewing to counsel hesitant women • Stigma-sensitive approaches in counseling and follow-up of HPV/cervical cancer positive woman • A video of how to use motivational interviewing for pre-and post-screening counselling

Supplement 2

R Model Code Used to Fit Constrained Longitudinal Linear Mixed Effects Model

```
did <- lmer(mean_score ~ Time_num + Arm:Time_num + Rural + SubCounty + (1 | Cluster) + (1 | Record_Id), data = data_frame)
```

Supplement 3

Table S2. Linear mixed effects regression models measuring the effect of Elimisha-HPV training on CHP confidence scores[1]

Variable	Confidence[2]	*p*-value[3]
Time	0.33 (0.19, 0.47)	< 0.001
Rural		> 0.9
Rural	—	
Urban	0.0054 (–0.17, 0.18)	
County		0.11
Kisumu	—	
Nyando	0.15 (–0.04, 0.35)	
Main Effect[4]	0.01 (–0.09, 0.11)	0.8

[1] Composite confidence scores sample excludes observations with "Don't know" or "Prefer not to answer" responses (n = 5), yielding a reduced sample size (n = 248 – 5 = 243).
[2] β (95% CI)
[3] Two-tailed tests
[4] *Main Effect* coefficient represents the interaction of the *Time* and *Arm* coefficients, reflecting the effect of being in the intervention arm in the post-intervention period.
Reference categories: for the "Rural" variable, "Rural" represents the reference category; for the "County" variable, "Kisumu" represents the reference category.
Abbreviations: CHP, community health promoter; HPV, human papillomavirus.