Appendix B: Affinity Diagramming. List of codes, categories, themes.

CODING SESSIONS (2 x 4 hours): AFFINITY DIAGRAMMING

One session leader, five researchers

*First session*

Step 1. All codes were written on sticky notes and spread out on a table. The researchers looked at the codes with open minds and grouped them into categories without speaking. Some codes were grouped and regrouped. If there was unresolved disagreement, the relevant codes were put aside.

Step 2. Each researcher individually labelled the categories.

Step 3. All codes and categories were put on large sheets of paper and hung on the wall.

Step 4. The grouping of the codes and the naming of the categories were discussed, and the discussion was recorded. If necessary, the codes were regrouped. The researchers finally agreed on the naming of the categories. Some left-over codes were assigned to the developed categories.

Twenty categories were formed from the 127 codes.

*Second session*

Step 1. The categories were grouped into themes by means of the same procedure used in step 1 in the first session.

Step 2. Each researcher individually labelled the themes.

Step 3. All themes and categories were put on sheets of paper and hung on the wall.

Step 4. The grouping of the categories and the naming of the categories was discussed, and the discussion was recorded. If necessary, the categories were regrouped. The researchers finally agreed on the naming of the themes. The categories “Demographical factors, Cancer characteristics, and Breast cancer treatment and physical consequences” were not grouped into a theme because these categories contained general or factual information instead of directly providing an answer to the research question. We had 19 formal categories and four themes at the end of this session.

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| CATEGORY | CODES |
|  |  |
| 1. Contact with fellow patients | Contact with fellow patients in hospital |
|  | Patient reaction to contact with fellow patients in hospital |
|  | Opinion of organised contact with fellow breast cancer patients |
|  | Organised contact with fellow breast cancer patients |
| 2. Received support | Support received from faith |
|  | Other sources of received support |
|  | Support received from professionals |
|  | Support received from close relatives |
|  | Experience with support received from other sources |
|  | Experience with support received from professionals |
|  | Experience with support received from close relatives |
| 3. Contact with professionals | Contact with specialist |
|  | Contact with primary physician |
|  | Contact with nurse |
|  | Care from the hospital |
| 4. Need for contact | Need for support |
|  | Need for contact with specialist |
|   | Need for contact with primary physician |
|  | Need for contact with nurse |
|  | Asking for support |
| 5. Opinion about received care | Degree of satisfaction with contact with specialist |
|  | Degree of satisfaction with care from the hospital |
|  | Degree of satisfaction with care from primary physician |
|  | Degree of satisfaction with care from nurse |
|  | Opinion about other sources of received support |
|  | Opinion about support received from close relatives |
|  | Opinion about care received from the hospital |
|  | Opinion about support received from other healthcare professionals |
| 6. Information about breast cancer | Patients’ searches for information |
|  | Close relatives’ searches for information |
|  | Received information |
|  | Degree of satisfaction with received information |
|  | Experience with received information |
|  | Need for information |
|  | Familiarity with breast cancer |
| 7. Breast prostheses | Obtaining a breast prosthesis |
|  | Experience with breast prosthesis |
|  | Utility of prostheses |
| 8. Experience with cancer in the environment | Patient’s reaction to cancer in the family / environment |
|  | Cancer in the family / environment |
|  | Previously experienced breast cancer |
|  | Genetic research |
| 9. Dealing with illness trajectory | Patient compliance / taking advice |
|  | Self-management |
|  | Coping |
|  | Character |
| 10. Decision-making | Refusing intervention |
|  | Patient’s considerations about decision-making |
|  | Decision-making |
|  | Breast-cancer treatment from the patient’s viewpoint |
|  | Involvement of close relatives in decision–making |
|  | Treatment consent |
|  | Denoting treatment wishes |
|  | Doubts about breast-cancer treatment |
| 11. Emotions | Regret |
|  | Sadness |
|  | Crying |
|  | Dread |
|  | Worry |
|  | Disbelief |
|  | Aversion |
|  | Disbelief of breast cancer (e.g. in old age) |
|  | Hope |
|  | Calmness |
|  | Exhilaration |
|  | Relief |
|  | Joy |
|  | Gratitude |
|  | Pride |
|  | Insecurity |
|  | Upset |
|  | Despondency |
|  | Gloominess |
|  | Fear |
|  | Guilt |
|  | Anger |
|  | Fright |
| 12. Changes in daily life | Changes in relationship with partner |
|  | Changes in daily life |
|  | Illness of partner |
|  | Patient’s provision of support to close relatives |
| 13. Demographic factors | Age |
|  | Occupation / activities |
|  | Date of birth |
|  | Abode of children and grandchildren |
|  | Great-grandchildren |
|  | Children |
|  | Grandchildren |
|  | Civil status |
|  | Education |
|  | Nationality |
|  | Residential situation |
| 14. Reaction and opinions about breast cancer | Reaction of patient to discovering breast cancer |
|  | Reaction of patient to treatment consequences |
|  | Reaction of patient to opinion of professional |
|  | Reaction of close relatives to breast cancer |
|  | Opinion of close relatives about treatment of breast cancer |
|  | Reaction of acquaintances to the discovery of breast cancer |
|  | Opinion of patient about reaction of close relatives to breast cancer |
|  | Opinion of patient about reaction of acquaintances to breast cancer |
|  | Opinion of primary physician about breast cancer |
|  | Opinion of specialist about breast cancer |
|  | Opinion of nurse about breast cancer |
|  | Reaction to other illnesses and ailments |
| 15. Discovering and reporting | Checking oneself for breast cancer |
|  | Suspicion of breast cancer |
|  | Discovering breast cancer |
|  | Telling close relatives about breast cancer  |
|  | Telling acquaintances about breast cancer |
| 16. Cancer characteristics | Characteristics of breast cancer and tumours |
|  | Development of breast cancer and tumour growth |
| 17. Getting to treatment location | Location of treatment |
|  | Transport |
| 18. Experiences of health status | Body image |
|  | Mental health |
|  | Physical health |
|  | Other illnesses and ailments |
|  | Opinion about one’s own health |
|  | Physical exercise |
|  | Fatigue |
|  | Feeling bad |
|  | Nausea |
|  | Pain |
|  | Headache |
| 19. Breast cancer treatment and physical consequences | Breast-cancer treatment |
|  | Consequences of breast-cancer treatment  |
|  | Treating the consequences of breast-cancer treatment |
|  |  |
| 19 categories | 127 codes |

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| --- | --- |
| THEME | CATEGORIES |
| 1. Living through and coping with breast cancer | 8. Experience with cancer in the environment |
|  | 9. Dealing with illness trajectory |
|  | 11. Emotions |
|  | 18. Experiences of health status |
|  |  |
| 2. Information exchange and informed choice | 6. Information about breast cancer |
|  | 10. Decision-making |
|  | 14. Reaction to and opinions about breast cancer |
|  |  |
| 3. Support experiences | 1. Contact with fellow patients |
|  | 2. Received support |
|  | 3. Contact with professionals |
|  | 4. Need for contact |
|  | 5. Opinion about received care |
|  | 15. Discovering and reporting |
|  |  |
| 4. Impact on daily life | 7. Breast prostheses |
|  | 12. Changes in daily life |
|  | 17. Getting to treatment location |
|  |  |
| Factual information | 13. Demographic factors |
|  | 16. Cancer characteristics |
|  | 19. Breast-cancer treatment and physical consequences |