REPRODUCTIVE HEALTH - RHQ

RHQ.010 The next series of questions are about (your/SP's) reproductive history. I will begin by asking some questions about (your/SP's) period or menstrual cycle.

How old (were you/was SP) when (you/she) had (your/her) first menstrual period?

CODE "0" IF HAVEN'T STARTED YET.

CAPI INSTRUCTION:
SOFT EDIT VALUES: 8-25 YEARS.
HARD EDIT VALUES: AGE OF 1ST PERIOD CANNOT BE GREATER THAN CURRENT AGE.

<table>
<thead>
<tr>
<th></th>
<th>ENTER AGE IN YEARS</th>
</tr>
</thead>
<tbody>
<tr>
<td>77</td>
<td>REFUSED</td>
</tr>
<tr>
<td>99</td>
<td>DON'T KNOW</td>
</tr>
</tbody>
</table>

BOX 1

CHECK ITEM RHQ.015:
- IF PERIODS HAVEN'T STARTED (CODED '0') IN RHQ.010, GO TO END OF SECTION.
- IF PERIODS HAVE STARTED AND SP REPORTS AGE (CODED '1' - '76') IN RHQ.010, OR
- IF SP REFUSES AGE (CODED '77') IN RHQ.010, GO TO RHQ.030.
- OTHERWISE, CONTINUE WITH RHQ.020.

RHQ.020 (Were you/Was SP) . . .

- younger than 10, .................. 1
- 10 to 12, .......................... 2
- 13 to 15, or ......................... 3
- 16 or older? ........................ 4
- REFUSED ............................ 7
- DON'T KNOW .......................... 9

RHQ.030 (Have you/Has SP) had regular periods in the past 12 months? (Please do not include bleedings caused by medical conditions or surgeries.)

- YES ................................. 1 (BOX 3)
- NO ................................. 2
- REFUSED ............................ 7 (RHQ.050)
- DON'T KNOW .......................... 9 (RHQ.050)
RHQ.040  What is the reason that (you have/SP has) not had regular periods in the past 12 months?

CAPI INSTRUCTION:
IF SP CURRENTLY PREGNANT (CODED ‘1’ IN RHQ.040), MARK AS PREGNANT (CODE ‘1’) IN RHQ.140.

PREGNANT NOW ................... 1 (BOX 3)
BREAST FEEDING .................. 2 (BOX 3)
PREGNANT IN PAST YEAR .......... 3 (BOX 3)
PERIODS USUALLY IRREGULAR ...... 4 (BOX 3)
GOING/GONE THROUGH MENOPAUSE . 5
MEDICAL CONDITIONS/TREATMENTS .. 6
REFUSED ............................ 77
DON'T KNOW ........................ 99

RHQ.050  When did (you/SP) have (your/her) last period?

PROBE: How many months ago was (your/SP’s) last period?

HAVING IT NOW .................... 1 (BOX 3)
LESS THAN 2 MONTHS AGO ........ 2 (BOX 3)
3-5 MONTHS AGO ................. 3 (BOX 3)
6-8 MONTHS AGO ................. 4 (BOX 3)
9-11 MONTHS AGO ............... 5 (BOX 3)
12 OR MORE MONTHS AGO ....... 6
REFUSED ........................... 77 (BOX 3)
DON'T KNOW ........................ 99 (BOX 3)

RHQ.060  About how old (were you/was SP) when (you/she) had (your/her) last menstrual period?

|___|___|
ENTER AGE IN YEARS

REFUSED ............................ 77
DON'T KNOW ........................ 99

BOX 2

CHECK ITEM RHQ.065:
■ IF SP DOESN’T KNOW AGE AT LAST MENSTRUAL PERIOD (CODED ‘99’) IN RHQ.060, CONTINUE WITH RHQ.070.
■ OTHERWISE, GO TO BOX 3.
BOX 3

CHECK ITEM RHQ.075:
- IF SP HAD REGULAR PERIODS (CODED ‘1’ IN RHQ.030) AND 35-60 YEARS OLD, CONTINUE WITH RHQ.080.
- IF SP HAD LAST PERIOD BETWEEN 0-2 MONTHS AGO (CODED 1-2 IN RHQ.050) AND NOT CURRENTLY PREGNANT (CODED ‘2-9’ IN RHQ.040) AND 35-60 YEARS OLD, CONTINUE WITH RHQ.080.
- OTHERWISE, GO TO BOX 4.

BOX 4

CHECK ITEM RHQ.085:
- IF SP HAD REGULAR PERIODS (CODED ‘1’ IN RHQ.030) AND 35-60 YEARS OLD, CONTINUE WITH RHQ.090.
- IF SP HAD LAST PERIOD 0-11 MONTHS AGO (CODED 1-5 IN RHQ.050) AND NOT CURRENTLY PREGNANT OR BREAST FEEDING OR PREGNANT IN PAST YEAR (CODED 4-6, 77, 99 IN RHQ.040) AND 35-60 YEARS OLD, CONTINUE WITH RHQ.090.
- IF SP HAD LAST PERIOD 12+ MONTHS AGO (CODED ‘6’ IN RHQ.050) AND THE DIFFERENCE BETWEEN CURRENT AGE AND AGE AT LAST PERIOD IN RHQ.060 IS LESS THAN 5 YEARS, CONTINUE WITH RHQ.090.
- OTHERWISE, GO TO BOX 5.

RHQ.090 The next questions are about symptoms that can be associated with menopause.

During the last 5 years, have (your/SP's) menstrual cycles become...

more regular, ...................... 1
less regular, or ...................... 2
about the same? ..................... 3
REFUSED .......................... 7
DON'T KNOW ...................... 9
RHQ.100  During the last 5 years, has (your/SP's) menstrual flow or bleeding become . . .

- heavier, .................................... 1
- lighter, or .................................. 2
- about the same? .......................... 3
- REFUSED ................................. 7
- DON'T KNOW ............................. 9

RHQ.110  In the last 6 months, (have you/has SP) had hot flashes or night sweats?

- YES ....................................... 1
- NO ......................................... 2 (BOX 5)
- REFUSED ................................. 7 (BOX 5)
- DON'T KNOW ............................. 9 (BOX 5)

RHQ.120  In the last 6 months, how often (have you/has SP) had hot flashes or night sweats?

[___][___]
ENTER NUMBER

- REFUSED ................................. 77
- DON'T KNOW ............................. 99

ENTER UNIT

- DAY ....................................... 1
- WEEK ...................................... 2
- MONTH .................................... 3
- REFUSED ................................. 7
- DON'T KNOW ............................. 9

BOX 5

CHECK ITEM RHQ.125:
- IF SP CURRENTLY PREGNANT (CODED ‘1’) IN RHQ.040, GO TO RHQ.150.
- OTHERWISE, CONTINUE WITH RHQ.130.

RHQ.130  The next questions are about (your/SP's) pregnancy history.

(Have you/Has SP) ever been pregnant? Please include current pregnancy, live births, miscarriages, stillbirths, tubal pregnancies and abortions.

MARK IF KNOWN. OTHERWISE ASK.

- YES ....................................... 1
- NO ......................................... 2 (BOX 12)
- REFUSED ................................. 7 (BOX 12)
- DON'T KNOW ............................. 9 (BOX 12)
BOX 6

CHECK ITEM RHQ.135:
- IF SP HAD LAST PERIOD LESS THAN 6 MONTHS AGO AND NOT CURRENTLY MENSTRUATING (CODED '2', '3' IN RHQ.050) AND SP 18-45 YEARS OLD, CONTINUE WITH RHQ.140.
- IF SP HAD REGULAR PERIODS (CODED '1' IN RHQ.030) AND SP 18-45 YEARS OLD, CONTINUE WITH RHQ.140.
- OTHERWISE, GO TO RHQ.160.

RHQ.140 {Do you/Does SP} think {you are/she is} pregnant now?

YES .............................. 1
NO .............................. 2 (RHQ.160)
REFUSED ........................ 7 (RHQ.160)
DON'T KNOW ........................ 9 (RHQ.160)

RHQ.150 {The next questions are about {your/SP's} pregnancy history.}
Which month of pregnancy {are you/is she} in?

CAPÍ INSTRUCTION:
IF CODED '1' IN RHQ.040, DISPLAY BRACKETED TEXT.

|___|___|
ENTER NUMBER OF MONTHS
REFUSED ........................ 77
DON'T KNOW ........................ 99

RHQ.160 How many times {have you/has SP} been pregnant? {Again, be/Be} sure to count all {your/her} pregnancies including current pregnancy, live birth, miscarriage, stillbirth, tubal pregnancy, or abortion.

|___|___|
ENTER NUMBER OF PREGNANCIES
REFUSED ........................ 77
DON'T KNOW ........................ 99

BOX 7

CHECK ITEM RHQ.165:
- IF SP ONLY HAD ONE PREGNANCY (CODED '1') IN RHQ.160 AND CURRENTLY PREGNANT (CODED '1') IN RHQ.140, SKIP TO RHQ.300.
- OTHERWISE CONTINUE WITH RHQ.170.
RHQ.170 How many of (your/her) pregnancies resulted in a live birth?

COUNT THE NUMBER OF TOTAL PREGNANCIES, NOT NUMBER OF LIVE-BORN CHILDREN. FOR EXAMPLE, IF SP HAD TWINS OR OTHER MULTIPLE BIRTH, COUNT AS A SINGLE PREGNANCY.

|___|___|
ENTER NUMBER OF PREGNANCIES

REFUSED ............................. 77
DON'T KNOW ............................. 99

BOX 8

CHECK ITEM RHQ.175:
- IF SP HAD NO PREGNANCIES THAT RESULTED IN A LIVE BIRTH (CODED '0') IN RHQ.170, GO TO BOX 12.
- IF SP HAD ONE PREGNANCY THAT RESULTED IN A LIVE BIRTH (CODED '1') IN RHQ.170, GO TO RHQ.190.
- OTHERWISE, CONTINUE WITH RHQ.180.

RHQ.180 How old (were you/was SP) at the time of (your/her) first live birth?

|___|___|
ENTER AGE IN YEARS

REFUSED ............................. 77
DON'T KNOW ............................. 99

RHQ.190 How old (were you/was SP) at the time of (your/her) last live birth?

CAPI INSTRUCTION:
IF SP HAD MORE THAN 1 LIVE BIRTH (CODED >= 2) IN RHQ.170, DISPLAY (LAST).

|___|___|
ENTER AGE IN YEARS

REFUSED ............................. 77
DON'T KNOW ............................. 99

BOX 9

CHECK ITEM RHQ.195:
- IF DIFFERENCE BETWEEN AGE AT TIME OF LAST LIVE BIRTH IN RHQ.190 AND CURRENT AGE IS ZERO OR 1, CONTINUE WITH RHQ.200.
- OTHERWISE, GO TO RHQ.210.

RHQ.200 (Are you/Is SP) now breast feeding a child?

YES ............................. 1 (BOX 10)
NO ............................. 2
REFUSED ............................. 7
DON'T KNOW ............................. 9
RHQ.210  Did (you/SP) breast feed (your/her) child/any of (your/her) children?

CAPI INSTRUCTION:
IF SP HAD ONE LIVE BIRTH (CODED '1') IN RHQ.170, DISPLAY (YOUR CHILD).
IF SP HAD MORE THAN ONE LIVE BIRTH (CODED >= 2) IN RHQ.170, DISPLAY (ANY OF YOUR CHILDREN).

YES .............................. 1 (BOX 10)
NO .............................. 2 (RHQ.240)
REFUSED ......................... 7 (BOX 11)
DON'T KNOW ...................... 9 (BOX 11)

BOX 10

CHECK ITEM RHQ.215:
- IF SP HAD ONE PREGNANCY THAT RESULTED IN A LIVE BIRTH (CODED '1') IN RHQ.170,
  CONTINUE WITH RHQ.220.
- OTHERWISE, GO TO RHQ.230.

RHQ.220  Did (you/SP) breast feed (your/her) child for at least 1 month?

YES .............................. 1 (BOX 11)
NO .............................. 2 (RHQ.240)
REFUSED ......................... 7 (BOX 11)
DON'T KNOW ...................... 9 (BOX 11)

RHQ.230  How many of (your/SP's) children did (you/she) breast feed for at least 1 month?

|___|___|
ENTER NUMBER OF CHILDREN

REFUSED ......................... 77
DON'T KNOW ...................... 99

BOX 10A

CHECK ITEM RHQ.235:
- IF NUMBER OF BREASTFED CHILDREN REPORTED IN RHQ.230 IS LESS THAN NUMBER
  OF LIVE BIRTHS REPORTED IN RHQ.170, CONTINUE WITH RHQ.240.
- OTHERWISE, GO TO BOX 11.
RHQ.240  What were {your/SP’s} reasons for {not breast feeding?/not breast feeding {your/her} child at least 1 month?/not breast feeding all of {your/her} children at least 1 month?}

CODE ALL THAT APPLY.

CAPI INSTRUCTION:
IF SP DIDN’T BREASTFEED (CODED ‘2’) IN RHQ.210, DISPLAY {NOT BREASTFEEDING?}.
IF SP HAD ONE LIVE BIRTH AND DIDN’T BREASTFEED AT LEAST ONE MONTH (CODED ‘2’) IN RHQ.220, DISPLAY {NOT BREASTFEEDING YOUR CHILD AT LEAST 1 MONTH?}.
OTHERWISE, DISPLAY {NOT BREASTFEEDING ALL OF YOUR CHILDREN AT LEAST 1 MONTH?}.

| JOB/SCHEDULING DIFFICULTIES ............. 1 |
| MOTHER’S PHYSICAL/MEDICAL DIFFICULTIES ................................................. 2 |
| CHILD’S PHYSICAL/MEDICAL DIFFICULTIES .................................................... 3 |
| PREFERRED BOTTLE FEEDING ..................... 4 |
| DIDN’T KNOW HOW TO BREAST-FEED ..................... 5 |
| OTHER REASONS .................................... 6 |
| REFUSED ...................................... 7 |
| DON’T KNOW .................................... 9 |

BOX 11

CHECK ITEM RHQ.245:
- IF SP HAD AT LEAST ONE PREGNANCY THAT RESULTED IN A LIVE BIRTH (NOT CODED ‘0’) IN RHQ.170, CONTINUE WITH RHQ.250.
- OTHERWISE, GO TO RHQ.280.

RHQ.250   (Did {your/SP’s} child/Did any of {your/SP’s} children) weigh less than 5 ½ pounds (2500 g) at birth?

CAPI INSTRUCTION:
IF SP HAD ONE LIVE BIRTH (CODED ‘1’) IN RHQ.170, DISPLAY {YOUR CHILD}.
IF SP HAD MORE THAN ONE LIVE BIRTH (CODED >= 2) IN RHQ.170, DISPLAY {DID ANY OF YOUR CHILDREN}.

CAPI INSTRUCTION:
IF YES (CODED ‘1’) IN RHQ.250 AND SP HAD ONLY ONE LIVE BIRTH (CODED ‘1’) IN RHQ.170, ENTER ‘1’ IN RHQ.260.

| YES ............................................ 1 |
| NO ............................................ 2 (BOX 12) |
| REFUSED .................................... 7 (BOX 12) |
| DON’T KNOW .................................... 9 (BOX 12) |

RHQ.260   How many of {your/her} children weighed less than 5 ½ pounds (2500 g) at birth?

ENTER NUMBER OF CHILDREN

REFUSED ........................................ 77
DON’T KNOW ..................................... 99
BOX 11A

CHECK ITEM RHQ.262:
■ IF SP HAD ONLY ONE LIVE BIRTH (CODED '1') IN RHQ.170, CONTINUE WITH RHQ.264.
■ OTHERWISE, GO TO RHQ.270.

RHQ.264 Was this baby born preterm? A preterm delivery is one that occurs at 36 weeks or earlier in pregnancy.

CAPI INSTRUCTION:
IF YES (CODED '1') IN RHQ.264, ENTER 1 IN RHQ.270.

YES .............................. 1 (BOX 12)
NO .............................. 2 (BOX 12)
REF .............................. 7 (BOX 12)
DK ............................... 9 (BOX 12)

RHQ.270 How many of these babies were born preterm? A preterm delivery is one that occurs at 36 weeks or earlier in pregnancy.

|___|___|
ENTER NUMBER OF CHILDREN
REFUSED ......................... 77
DON'T KNOW ...................... 99

BOX 12

CHECK ITEM RHQ.275:
■ IF SP < 20 YEARS OLD, GO TO RHQ.420.
■ IF SP CURRENTLY PREGNANT (CODED '1') IN RHQ.140 OR HAD PERIOD IN LAST 2 MONTHS (CODED '1' OR '2') IN RHQ.050, GO TO RHQ.300.
■ IF SP HAD REGULAR PERIODS (CODED '1' IN RHQ.030), GO TO RHQ.300.
■ OTHERWISE, CONTINUE WITH RHQ.280.

RHQ.280 (Have you/Has SP) had a hysterectomy including a partial hysterectomy, that is surgery to remove (your/her) uterus or womb?

YES .............................. 1 (RHQ.300)
NO .............................. 2 (RHQ.300)
REFUSED .......................... 7 (RHQ.300)
DON'T KNOW ...................... 9 (RHQ.300)

RHQ.290 How old (were you/was SP) when (you/she) had (your/her) (hysterectomy/uterus removed/womb removed)?

|___|___|___|
ENTER AGE IN YEARS
REFUSED ......................... 777
DON'T KNOW ...................... 999
RHQ.300  Have you/Has SP had one or both of your/her ovaries removed (either when you/she had your/her uterus removed or at another time)?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>7</td>
<td>9</td>
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RHQ.310  Were both ovaries removed or only one?

<table>
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<tr>
<th>BOTH</th>
<th>ONE</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
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<tr>
<td>1</td>
<td>2</td>
<td>7</td>
<td>9</td>
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</table>

RHQ.320  Were both of your/SP's ovaries removed at the same time or at different times?

<table>
<thead>
<tr>
<th>SAME TIME</th>
<th>DIFFERENT TIMES</th>
<th>REFUSED</th>
<th>DON'T KNOW</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>7</td>
<td>9</td>
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</table>

RHQ.330  How old were you/was SP when you/she had your/her ovary/ovaries removed?

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<tr>
<th>ENTER AGE IN YEARS</th>
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<tr>
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</tr>
<tr>
<td>777</td>
</tr>
<tr>
<td>DON'T KNOW</td>
</tr>
<tr>
<td>999</td>
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BOX 13

CHECK ITEM RHQ.335:
GO TO BOX 14.

RHQ.340  How old were you/was SP when you/she had the second ovary removed?

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<th>ENTER AGE IN YEARS</th>
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<tr>
<td>REFUSED</td>
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<tr>
<td>777</td>
</tr>
<tr>
<td>DON'T KNOW</td>
</tr>
<tr>
<td>999</td>
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BOX 14

CHECK ITEM RHQ.345:
- IF SP CURRENTLY PREGNANT (CODED '1') IN RHQ.140, GO TO BOX 15.
- OTHERWISE, CONTINUE WITH RHQ.350.

RHQ.350  Have you/Has SP ever had both of your/her (Fallopian) tubes tied, cut, or removed?  This procedure is
often called a tubal ligation.

YES ........................................... 1  
NO ............................................. 2  
REFUSED ...................................... 7  
DON'T KNOW ............................... 9

**BOX 15**

**CHECK ITEM RHQ.355:**
- IF SP 20-54 YEARS OLD, CONTINUE WITH RHQ.360.
- OTHERWISE, GO TO BOX 16.

**RHQ.360** Has a doctor or other health professional **ever** told {you/SP} that {you/she} had endometriosis? (Endometriosis is a disease in which the tissue that forms the lining of the uterus/womb attaches to other places, such as the ovaries, fallopian tubes, or abdominal cavity.)

   YES ........................................... 1  
   NO ............................................. 2  (RHQ.380)  
   REFUSED ...................................... 7  (RHQ.380)  
   DON'T KNOW ............................... 9  (RHQ.380)

**RHQ.370** How old {were you/was SP} when {you were/she was} **first** told {you/she} had endometriosis?

   |   |   |   |   |
---|---|---|---|---|
ENTER AGE IN YEARS

   REFUSED ...................................... 777  
   DON'T KNOW .................................. 999

**RHQ.380** Has a doctor or other health professional **ever** told {you/SP} that {you/she} had uterine fibroids? (Uterine fibroids are benign (not cancerous) tumors growing in various locations on or within the uterus/womb.)

   YES ........................................... 1  
   NO ............................................. 2  (BOX 16)  
   REFUSED ...................................... 7  (BOX 16)  
   DON'T KNOW ............................... 9  (BOX 16)

**RHQ.390** How old {were you/was SP} when {you were/she was} **first** told {you/she} had uterine fibroids?

   |   |   |   |   |
---|---|---|---|---|
ENTER AGE IN YEARS

   REFUSED ...................................... 777  
   DON'T KNOW .................................. 999
BOX 16

CHECK ITEM RHQ.392:
- OTHERWISE, GO TO RHQ.420.

BOX 17

CHECK ITEM RHQ.394:
- IF SP CURRENTLY PREGNANT (CODED ‘1’) IN RHQ.140, SKIP TO RHQ.410.
- OTHERWISE, CONTINUE WITH RHQ.400.

RHQ.400  Some women are not physically able to have children. As far as you know, is it physically possible for {you/SP} to have another baby/to have a baby?

CAPI INSTRUCTION:
IF SP HAD AT LEAST ONE LIVE BIRTH (CODED >= 1) IN RHQ.170, DISPLAY {TO HAVE ANOTHER BABY}.
OTHERWISE, DISPLAY {TO HAVE A BABY}.

YES ............................................. 1
NO ............................................. 2 (RHQ.420)
REFUSED ..................................... 7 (RHQ.420)
DON’T KNOW ............................... 9 (RHQ.420)

RHQ.410  Some women are physically able to have (a baby/another baby), but have difficulty getting pregnant or carrying the baby to term. As far as you know, would {you/SP}, {yourself/herself} have difficulty getting pregnant or carrying (a baby/another baby) to term (after this pregnancy)?

CAPI INSTRUCTION:
IF SP HAD AT LEAST ONE LIVE BIRTH (CODED >= 1) IN RHQ.170, DISPLAY {ANOTHER BABY}.
IF SP HAD NO LIVE BIRTHS (CODED 0 OR BLANK) IN RHQ.170, DISPLAY {A BABY}.
IF SP CURRENTLY PREGNANT (CODED ‘1’) IN RHQ.140, DISPLAY {AFTER THIS PREGNANCY}.

YES ............................................. 1
NO ............................................. 2
REFUSED ..................................... 7
DON’T KNOW ............................... 9

RHQ.420  Now I am going to ask you about {your/SP’s} past and current use of some forms of contraception.

{Have you/Has SP} ever taken birth control pills for any reason?

YES ............................................. 1
NO ............................................. 2 (RHQ.510)
REFUSED ..................................... 7 (RHQ.510)
DON’T KNOW ............................... 9 (RHQ.510)
RHQ.430  How old {were you/was SP} when {you/she} began using birth control pills?

|___|___|
ENTER AGE IN YEARS

REFUSED ............................ 77
DON'T KNOW .......................... 99

BOX 18

CHECK ITEM RHQ.435:

- IF SP IS NOT PREGNANT OR MENOPAUSAL (NOT CODED ‘1’ OR ‘5’) IN RHQ.040 AND IF SP HAS AT LEAST ONE OVARY (NOT CODED ‘1’) IN RHQ.310, AND IF SP HAS UTERUS (CODED ‘2’, ‘7’, ‘9’) IN RHQ.280, AND IF SP HASN’T HAD TUBAL LIGATION (CODED ‘2’, ‘7’, ‘9’ OR ‘BLANK’) IN RHQ.350, CONTINUE WITH RHQ.440.
- OTHERWISE, GO TO RHQ.450.

RHQ.440  {Are you/Is SP} taking birth control pills now?

YES .............................. 1 (RHQ.460)
NO .............................. 2
REFUSED ............................ 7 (RHQ.510)
DON'T KNOW .......................... 9 (RHQ.510)

RHQ.450  How old {were you/was SP} when {you/she} stopped taking birth control pills?

|___|___|
ENTER AGE IN YEARS

REFUSED ............................ 77
DON'T KNOW .......................... 99

RHQ.460  Not counting any time when {you/SP} stopped taking them, for how long altogether {have you taken/did you take/has she taken/did she take} birth control pills?

CODE “1” FOR LESS THAN ONE MONTH.

|___|___|
Enter number

REFUSED ............................ 77
DON'T KNOW .......................... 99

ENTER UNIT

MONTHS ............................... 1
YEARS ................................. 2
REFUSED ............................ 7
DON'T KNOW .......................... 9
CHECK ITEM RHQ.465:

- IF SP CURRENTLY TAKING BIRTH CONTROL PILLS (CODED '1') IN RHQ.440, OR SP STOPPED TAKING THEM IN PAST 12 MONTHS (SP CURRENT AGE MINUS AGE IN RHQ.450 IS ZERO OR 1), CONTINUE WITH RHQ.470.
- OTHERWISE, GO TO RHQ.510.

RHQ.470  Please look at this chart and show me the brand of pills that (you/SP) (currently use/uses)/(were using/was using) when (you/she) stopped taking birth control pills).

PRESS BACKSPACE KEY TO START THE LOOKUP. ASK RESPONDENT TO IDENTIFY PILL TYPE FROM ORAL CONTRACEPTIVE WALL POSTER (RHQ1). PROBE FOR SPECIFIC TYPE AND DOSAGE AND SELECT PILL FROM CAPI ORAL CONTRACEPTIVE PRODUCT LIST.

CAPI INSTRUCTION:
DISPLAY ORAL CONTRACEPTIVE PRODUCT LIST. INTERVIEWER SHOULD BE ABLE TO SELECT ONE PRODUCT NAME FROM LIST. IN ADDITION, INTERVIEWER SHOULD BE ABLE TO USE THE F5 AND F6 KEYS FOR DON'T KNOW AND REFUSED.

<table>
<thead>
<tr>
<th>ENTER NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON'T KNOW ............... 77</td>
</tr>
<tr>
<td>REFUSED ................. 99</td>
</tr>
</tbody>
</table>

RHQ.510  {Have you/Has SP} ever used Depo-Provera or injectables to prevent pregnancy?

YES .............................. 1
NO .............................. 2 (BOX 20)
REFUSED ............................ 7 (BOX 20)
DON'T KNOW ........................ 9 (BOX 20)

RHQ.520  {Are you/Is SP} now using Depo-Provera or injectables to prevent pregnancy?

YES .............................. 1
NO .............................. 2
REFUSED ............................ 7
DON'T KNOW ........................ 9

CHECK ITEM RHQ.535:

- IF SP DID NOT HAVE REGULAR PERIODS (CODED '2', '7', '9' IN RHQ.030) AND REASON FOR IRREGULAR PERIODS NOT BECAUSE CURRENTLY PREGNANT, BREAST FEEDING, PREGNANT IN PAST YEAR, OR PERIODS ALWAYS IRREGULAR (CODED '5-6', '77' OR '99' IN RHQ.040), CONTINUE WITH RHQ.540.
- OTHERWISE, SKIP TO BOX 24.
RHQ.540  Female hormones, such as estrogen and progestin, may be taken after a hysterectomy or during or after menopause. (Have you/Has SP) ever used female hormones? Please include any forms of female hormones, such as pills, cream, patch, and injectables, but do not include birth control methods.

YES ......................................... 1
NO ............................................ 2 (BOX 24)
REFUSED ..................................... 7 (BOX 24)
DON’T KNOW ............................... 9 (BOX 24)

RHQ.541  Which forms of female hormones (have you/has SP) used?

CODE ALL THAT APPLY

PILLS ....................................... 1
PATCHES ..................................... 2
CREAM/SUPPOSITORY/INJECTION .... 3
REFUSED ..................................... 7
DON’T KNOW ............................... 9

RHQ.550  At the time (you/SP) started using female hormones or hormone replacement therapy, (were you/was she) still having (your/her) periods or had (you/she) completely stopped having (your/her) periods?

STILL HAVING PERIODS ................. 1
COMPLETELY STOPPED HAVING PERIODS ................. 2
REFUSED ..................................... 7
DON’T KNOW ............................... 9

BOX 21

CHECK ITEM RHQ.552:

■ IF SP USED FEMALE HORMONE PILLS (CODE '1') IN RHQ.541, CONTINUE WITH RHQ.554.
■ OTHERWISE, GO TO BOX 22.

RHQ.554  (Have you/Has SP) ever taken female hormone pills containing estrogen only (like Premarin)? (Do not include birth control pills.)

YES ......................................... 1
NO ............................................ 2 (RHQ.562)
REFUSED ..................................... 7 (RHQ.562)
DON’T KNOW ............................... 9 (RHQ.562)

RHQ.556  How old (were you/ was SP) when (you/she) first started taking pills containing estrogen only?

| | | |
ENTER AGE IN YEARS

REFUSED ..................................... 777
DON’T KNOW ............................... 999
RHQ.558  {Are you/Is SP} taking pills containing estrogen only now?

YES ........................................... 1  
NO .............................................. 2  
REFUSED ........................................ 7  
DON'T KNOW ................................. 9  

RHQ.560  Not counting any time when {you/SP} stopped taking them, for how long altogether {have you taken/did you take/has she taken/did she take} pills containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|___|
ENTER NUMBER

REFUSED ...................................... 77  
DON'T KNOW ................................. 99  

ENTER UNIT

MONTHS ....................................... 1  
YEARS ....................................... 2  
REFUSED ...................................... 7  
DON'T KNOW ................................. 9  

RHQ.562  {Have you/Has SP} taken female hormone pills containing progestin only (like Provera)?  (Do not include birth control pills.)

YES ........................................... 1 (RHQ.570)  
NO .............................................. 2 (RHQ.570)  
REFUSED ...................................... 7 (RHQ.570)  
DON'T KNOW ................................. 9 (RHQ.570)  

RHQ.564  How old {were you/was SP} when {you/she} first started taking pills containing progestin only?

|___|___|___|___|
ENTER AGE IN YEARS

REFUSED ...................................... 777  
DON'T KNOW ................................. 999  

RHQ.566  {Are you/Is SP} taking pills containing progestin only now?

YES ........................................... 1  
NO .............................................. 2  
REFUSED ........................................ 7  
DON'T KNOW ................................. 9
Not counting any time when {you/SP} stopped taking them, for how long altogether {have you taken/did you take/has she taken/did she take} pills containing progestin only?

CODE "1" FOR LESS THAN 1 MONTH

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REFUSED ........................................ 77
DON'T KNOW ...................................... 99

ENTER UNIT

MONTHS ........................................... 1
YEARS ............................................. 2
REFUSED .......................................... 7
DON'T KNOW ................................. 9

(Have you/Has SP) taken female hormone pills containing both estrogen and progestin (like Prempro, Premphase)? (Do not include birth control pills.)

YES .............................................. 1
NO ................................................. 2 (BOX 22)
REFUSED .......................................... 7 (BOX 22)
DON'T KNOW ................................. 9 (BOX 22)

How old {were you/was SP} when {you/she} first started taking pills containing both estrogen and progestin?

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ENTER AGE IN YEARS

REFUSED .......................................... 777
DON'T KNOW ...................................... 999

(Are you/Is SP) taking pills containing both estrogen and progestin now?

YES .............................................. 1
NO ................................................. 2
REFUSED .......................................... 7
DON'T KNOW ................................. 9
Not counting any time when {you/SP} stopped taking them, for how long altogether {have you taken/did you take/has she taken/did she take} pills containing both estrogen and progestin?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED .................................. 77
DON'T KNOW ............................. 99

ENTER UNIT

MONTHS .................................... 1
YEARS ..................................... 2
REFUSED ................................. 7
DON'T KNOW ............................. 9

BOX 22

CHECK ITEM RHQ.578:
- IF SP USED PATCHES (CODE '2') IN RHQ.541, CONTINUE WITH RHQ.580.
- OTHERWISE, GO TO BOX 23.

(Have you/Has SP) ever used female hormone patches containing estrogen only?

YES ....................................... 1
NO .......................................... 2 (RHQ.588)
REFUSED ................................. 7 (RHQ.588)
DON'T KNOW ............................. 9 (RHQ.588)

How old {were you/was SP} when {you/she} first started using patches containing estrogen only?

|___|___|___|
ENTER AGE IN YEARS

REFUSED ................................. 777
DON'T KNOW ............................. 999

(Are you/Is SP) using patches containing estrogen only now?

YES ....................................... 1
NO .......................................... 2
REFUSED ................................. 7
DON'T KNOW ............................. 9
RHQ.586  Not counting any time when {you/SP} stopped using them, for how long altogether (have you used/did you use/has she used/did she use) patches containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

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REFUSED ........................................ 77
DON'T KNOW ................................. 99

ENTER UNIT

MONTHS ........................................ 1
YEARS .......................................... 2
REFUSED ........................................ 7
DON'T KNOW ................................. 9

RHQ.588  {Have you/Has SP} used female hormone patches containing progestin only?

YES ............................................. 1
NO ............................................. 2 (RHQ.596)
REFUSED ........................................ 7 (RHQ.596)
DON'T KNOW ................................. 9 (RHQ.596)

RHQ.590  How old {were you/was SP} when {you/she} first started using patches containing progestin only?

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ENTER AGE IN YEARS

REFUSED ........................................ 777
DON'T KNOW ................................. 999

RHQ.592  {Are you/Is SP} using patches containing progestin only now?

YES ............................................. 1
NO ............................................. 2
REFUSED ........................................ 7
DON'T KNOW ................................. 9
RHQ.594  Not counting any time when {you/SP} stopped using them, for how long **altogether** {have you used/did you use/has she used/did she use} patches containing progestin only?

**CODE "1" FOR LESS THAN 1 MONTH**

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REFUSED .................................. 77
DON'T KNOW ............................... 99

**ENTER UNIT**

MONTHS .................................... 1
YEARS ...................................... 2
REFUSED ................................. 7
DON'T KNOW .............................. 9

RHQ.596  {Have you/Has SP} used female hormone **patches** containing both **estrogen and progestin**?

YES ....................................... 1
NO ......................................... 2 (BOX 23)
REFUSED ................................. 7 (BOX 23)
DON'T KNOW .............................. 9 (BOX 23)

RHQ.598  How old {were you/was SP} when {you/she} **first** started using patches containing both estrogen and progestin?

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RHQ.600  {Are you/Is SP} using patches containing both estrogen and progestin **now**?

YES ....................................... 1
NO ......................................... 2
REFUSED ................................. 7
DON'T KNOW .............................. 9
RHQ.602  Not counting any time when {you/SP} stopped using them, for how long altogether (have you used/did you use/has she used/did she use) patches containing both estrogen and progestin?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
Enter number

Refused ......................... 77
Don't know ...................... 99

Enter unit

MONTHS .......................... 1
YEARS ........................... 2
Refused ........................ 7
Don't know ...................... 9

BOX 23

CHECK ITEM RHQ.604:
- IF SP USED VAGINAL CREAM, SUPPOSITORYS OR INJECTIONS (CODE '3') IN RHQ.541, CONTINUE WITH RHQ.606.
- OTHERWISE, GO TO BOX 24.

RHQ.606  {Have you/Has SP} ever used female hormone creams, suppositories, or injections containing estrogen only?

Yes .............................. 1
No .............................. 2 (RHQ.614)
Refused ........................ 7 (RHQ.614)
Don't know ...................... 9 (RHQ.614)

RHQ.608  How old {were you/was SP} when {you/she} first started using creams, suppositories, or injections containing estrogen only?

|___|___|___|
Enter age in years

Refused ........................ 777
Don't know ...................... 999

RHQ.610  {Are you/Is SP} using creams, suppositories, or injections containing estrogen only now?

Yes .............................. 1
No .............................. 2
Refused ........................ 7
Don't know ...................... 9
RHQ.612 Not counting any time when {you/SP} stopped using them, for how long altogether {have you used/did you use/has she used/did she use} creams, suppositories, or injections containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

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RHQ.614 {Have you/Has SP} used female hormone creams, suppositories, or injections containing progestin only?

YES ......................... 1
NO ........................... 2 (RHQ.622)
REFUSED ...................... 7 (RHQ.622)
DON'T KNOW ................... 9 (RHQ.622)

RHQ.616 How old {were you/was SP} when {you/she} first started using female hormone creams, suppositories, or injections containing progestin only?

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RHQ.618 {Are you/Is SP} using creams, suppositories, or injections containing progestin only now?

YES .............................. 1
NO .............................. 2
REFUSED .......................... 7
DON'T KNOW ....................... 9
RHQ.620 Not counting any time when {you/SP} stopped using them, for how long altogether {have you used/did you use/has she used/did she use} creams, suppositories, or injections containing progestin only?

CODE "1" FOR LESS THAN 1 MONTH

______
ENTER NUMBER

REFUSED ......................... 77
DON'T KNOW ....................... 99

ENTER UNIT

MONTHS .......................... 1
YEARS ............................ 2
REFUSED .......................... 7
DON'T KNOW ....................... 9

RHQ.622 {Have you/Has SP} used female hormone creams, suppositories or injections containing both estrogen and progestin?

YES .............................. 1
NO .............................. 2 (BOX 24)
REFUSED .......................... 7 (BOX 24)
DON'T KNOW ....................... 9 (BOX 24)

RHQ.624 How old {were you/was SP} when {you/she} first started using creams, suppositories, or injections containing both estrogen and progestin?

______
ENTER AGE IN YEARS

REFUSED .......................... 777
DON'T KNOW ....................... 999

RHQ.626 {Are you/Is SP} using creams, suppositories, or injections containing both estrogen and progestin now?

YES .............................. 1
NO .............................. 2
REFUSED .......................... 7
DON'T KNOW ....................... 9
Not counting any time when {you/SP} stopped using them, for how long altogether {have you used/did you use/has she used/did she use} creams, suppositories, or injections containing both estrogen and progestin?

CODE "1" FOR LESS THAN 1 MONTH

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BOX 24

CHECK ITEM RHQ.640:
- IF SP CURRENTLY PREGNANT (CODED '1') IN RHQ.140, CONTINUE WITH FSQ.650.
- IF THE AGE DIFFERENCE BETWEEN SP's CURRENT AGE AND AGE AT LAST LIVE BIRTH IN RHQ.190 IS ZERO OR 1, CONTINUE WITH FSQ.650.
- IF SP CURRENTLY LACTATING (CODED '1') IN RHQ.200, CONTINUE WITH FSQ.650.
- OTHERWISE, GO TO END OF SECTION.

These last questions are about participation in programs for women with young children.

Did {you/SP} personally receive benefits from WIC, that is, the Women, Infants, and Children Program, in the past 12 months?

YES .......................... 1
NO ............................ 2 (FSQ.680)
REFUSED ........................ 7 (FSQ.680)
DON'T KNOW .................... 9 (FSQ.680)

{Are you/Is SP} now receiving benefits from the WIC Program?

YES .......................... 1
NO ............................ 2
REFUSED ........................ 7
DON'T KNOW .................... 9
Thinking about \{your/SP's\} most recent pregnancy or delivery, how long \{did you receive/have you been receiving/did she receive/has she been receiving\} benefits from the WIC Program?

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Are you/Is SP currently enrolled in the Early Head Start program?

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