

**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 1<sup>ST</sup> PERIOD CANNOT BE GREATER THAN CURRENT AGE.

ENTER AGE IN YEARS

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

<b>BOX 1</b>
<b>CHECK ITEM RHQ.015:</b>
<ul style="list-style-type: none"> <li>■ IF PERIODS HAVEN'T STARTED (CODED '0') IN RHQ.010 AND SP 12-13 YEARS OLD OR 50 YEARS OR OLDER, GO TO END OF SECTION.</li> <li>■ IF PERIODS HAVEN'T STARTED (CODED '0') IN RHQ.010 AND SP 14-49 YEARS OLD, GO TO RHQ.700.</li> <li>■ 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.</li> <li>■ OTHERWISE, CONTINUE WITH RHQ.020.</li> </ul>

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
- 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 years or 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.

RHQ.070 {Were you/Was SP} . . .

younger than 30,.....	1
30 to 34, .....	2
35 to 39, .....	3
40 to 44, .....	4
45 to 49, .....	5
50 to 54, or .....	6
55 or older? .....	7
REFUSED .....	77
DON'T KNOW .....	99

**BOX 3**

**CHECK ITEM RHQ.075:**

- IF SP HAD REGULAR PERIODS (CODED '1' IN RHQ.030) AND 12-60 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 12-60 YEARS OLD, CONTINUE WITH RHQ.080.
- OTHERWISE, GO TO BOX 4.

RHQ.080 What was the date that {your/SP's} last period started?

\_|\_|\_|/|\_|\_|  
ENTER DATE OF LAST PERIOD (MONTH, DAY)

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

**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.
- 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?

CODE "1" PER "MONTH" FOR LESS THAN 1 PER MONTH.

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 \*1RHQ.135:**

- IF SP HAD LAST PERIOD LESS THAN 6 MONTHS AGO AND NOT CURRENTLY MENSTRUATING (CODED '2', '3' IN RHQ.050) AND SP 12-59 YEARS OLD, CONTINUE WITH \*1RHQ.140.
- IF SP HAD REGULAR PERIODS (CODED '1' IN RHQ.030) AND SP 12-59 YEARS OLD, CONTINUE WITH \*1RHQ.140.
- OTHERWISE, GO TO RHQ.160.

\*1RHQ.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)

\*1RHQ.150 {The next questions are about {your/SP's} pregnancy history.}

Which month of pregnancy {are you/is she} in?

CAPI 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 births, miscarriages, stillbirths, tubal pregnancies, or abortions.)

|\_|\_|  
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?

**CAP I INSTRUCTION:**

IF SP HAD MORE THAN 1 LIVE BIRTH (CODED  $\geq 2$ ) 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, that is, surgery to **remove** {your/her} uterus or womb?

MARK IF KNOWN. OTHERWISE ASK.

YES ..... 1  
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 at least one of {your/her} ovaries removed (either when {you/she} had {your/her} uterus removed or at another time)?

YES ..... 1  
NO ..... 2 (BOX 14)  
REFUSED ..... 7 (BOX 14)  
DON'T KNOW ..... 9 (BOX 14)

RHQ.310 Were both ovaries removed or only one?

BOTH ..... 1  
ONE ..... 2 (RHQ.330)  
REFUSED ..... 7 (BOX 14)  
DON'T KNOW ..... 9 (BOX 14)

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

SAME TIME ..... 1  
DIFFERENT TIMES ..... 2 (RHQ.340)  
REFUSED ..... 7 (BOX 14)  
DON'T KNOW ..... 9 (BOX 14)

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

|\_|\_|\_|  
ENTER AGE IN YEARS

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

**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?

|\_|\_|\_|\_|  
ENTER AGE IN YEARS

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

**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:**

- IF SP HAS REGULAR PERIODS (CODED '1') IN RHQ.030 OR HAD LAST PERIOD LESS THAN 12 MONTHS AGO (CODED '1-5' OR '77-99') IN RHQ.050 OR HAS IRREGULAR PERIODS BECAUSE CURRENTLY PREGNANT, CURRENTLY BREASTFEEDING OR PREGNANT IN PAST YEAR (CODED '1', '2', '3') IN RHQ.040 AND IF SP HAS AT LEAST ONE OVARY (CODED '2', '7', '9') 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 BOX 17.
- 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} birth control history.

{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 (CODED '2') IN RHQ.140 OR MENOPAUSAL (CODED '6') IN RHQ.050 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, 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

**BOX 19**

**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.

|\_|\_|\_|  
ENTER NUMBER

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

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

**BOX 20**

**CHECK ITEM RHQ.535:**

- IF SP 20 YEARS OF AGE OR OLDER, CONTINUE WITH RHQ.540.
- OTHERWISE, SKIP TO BOX 24.

RHQ.540 {Have you/Has SP} **ever** used female hormones such as estrogen and progesterone? Please include any forms of female hormones, such as pills, cream, patch, and injectables, but **do not** include birth control methods or use for infertility.

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

RHQ.551 What are {your/SP's} reasons for having used estrogen or progesterone?

CODE ALL THAT APPLY

- MENOPAUSE-RELATED SYMPTOMS (HOT FLASHES, SWEATING, VAGINAL DRYNESS, BLADDER PROBLEMS ..... 1
- DEPRESSION, ANXIETY, EMOTIONAL DISTRESS ..... 2
- HYSTERECTOMY OR OOPHERECTOMY (OVARY REMOVAL)..... 3
- OSTEOPOROSIS, BONE LOSS/THINNING FRACTURE PREVENTION..... 4
- CARDIOVASCULAR DISEASE PREVENTION ..... 5
- IRREGULAR MENSTRUAL PERIODS, TO REGULATE PERIODS ..... 6
- OTHER REASONS ..... 7
- REFUSED ..... 77
- DON'T KNOW ..... 99

**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  
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

RHQ.568 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

|\_|\_|  
ENTER NUMBER

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

ENTER UNIT

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

RHQ.570 {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)

RHQ.572 How old {were you/was SP} when {you/she} **first** started taking pills containing both estrogen and progestin?

|\_|\_|\_|  
ENTER AGE IN YEARS

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

RHQ.574 {Are you/Is SP} taking pills containing both estrogen and progestin **now**?

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

RHQ.576 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.

RHQ.580 {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)

RHQ.582 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

RHQ.584 {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

|\_|\_|  
ENTER NUMBER

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?

|\_|\_|\_|  
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

ENTER NUMBER

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?

ENTER AGE IN YEARS

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, SUPPOSITORIES 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

|\_|\_|  
ENTER NUMBER

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

ENTER UNIT

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

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

|\_|\_|\_|  
ENTER AGE IN YEARS

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

RHQ.618 {Are you/Is SP} using creams, suppositories, or injections containing progesterin 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 progesterin 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 progesterin**?

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 progesterin**?

|\_|\_|\_|  
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 progesterin **now**?

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



RHQ.628 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 progesterin?

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

<p><b>BOX 24</b></p> <p><b>CHECK ITEM RHQ.640:</b></p> <ul style="list-style-type: none"> <li>■ IF SP CURRENTLY PREGNANT (CODED '1') IN RHQ.140, CONTINUE WITH FSQ.650.</li> <li>■ 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.</li> <li>■ IF SP CURRENTLY LACTATING (CODED '1') IN RHQ.200, CONTINUE WITH FSQ.650.</li> <li>■ IF SP 14-49 YEARS OLD, GO TO RHQ.700.</li> <li>■ OTHERWISE, GO TO END OF SECTION.</li> </ul>
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FSQ.650 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)

FSQ.660 {Are you/Is SP} **now** receiving benefits from the WIC Program?

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

FSQ.670 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?

CAPI INSTRUCTION:

IF SP CURRENTLY RECEIVING WIC BENEFITS (CODED '1') IN FSQ.660, DISPLAY {HAVE YOU BEEN RECEIVING/HAS SHE BEEN RECEIVING}.

OTHERWISE, DISPLAY {DID YOU RECEIVE/DID SHE RECEIVE}.

|\_|\_|

ENTER QUANTITY

REFUSED ..... 77

DON'T KNOW ..... 99

ENTER UNIT

MONTHS ..... 1

YEARS ..... 2

REFUSED ..... 7

DON'T KNOW ..... 9

FSQ.680 {Are you/Is SP} currently enrolled in the Early Head Start program?

YES ..... 1

NO ..... 2

REFUSED ..... 7

DON'T KNOW ..... 9

**BOX 25**

**CHECK ITEM RHQ.690:**

- IF SP 14-49 YEARS OLD, CONTINUE WITH RHQ.700.
- OTHERWISE, GO TO END OF SECTION.

RHQ.700 During the **past month**, {have you/has SP} used any of the following products for feminine hygiene?

HAND CARD RHQ1

YES ..... 1

NO ..... 2 (RHQ.720)

REFUSED ..... 7 (RHQ.720)

DON'T KNOW ..... 9 (RHQ.720)

RHQ.710 Which of these products did {you/SP} use?

CODE ALL THAT APPLY.

- TAMPONS..... 1
- SANITARY NAPKINS..... 2
- VAGINAL DOUCHES ..... 3
- FEMININE SPRAY ..... 4
- FEMININE POWDER ..... 5
- FEMININE CLEANSING WIPES/  
TOWELETTES ..... 6
- OTHER SPECIAL CLEANSING PRODUCTS. 7
- REFUSED ..... 77
- DON'T KNOW ..... 99

RHQ.720 During the **past 6 months**, did {you/SP} douche? By douching, we mean putting a substance into {your/her} vagina either for routine cleansing or for vaginal irritation or signs of infection?

- YES ..... 1
- NO ..... 2 (RHQ.740)
- REFUSED ..... 7 (RHQ.740)
- DON'T KNOW ..... 9 (RHQ.740)

RHQ.730 During the **past 6 months**, how often did {you/SP} douche? Would you say . . .

- 5 or more times a month, ..... 1
- 2 to 4 times a month, ..... 2
- once a month, or..... 3
- less than once a month?..... 4
- REFUSED ..... 7
- DON'T KNOW ..... 9

RHQ.740 During the **past month**, did {you/SP} have any of the following problems: vaginal itching, an unpleasant vaginal odor, or an unusual vaginal discharge?

- YES ..... 1
- NO ..... 2 (END OF SECTION)
- REFUSED ..... 7 (END OF SECTION)
- DON'T KNOW ..... 9 (END OF SECTION)

RHQ.750 Which of these problems did {you/SP} have?

CODE ALL THAT APPLY.

- VAGINAL ITCHING ..... 1
- UNPLEASANT VAGINAL ODOR ..... 2
- UNUSUAL VAGINAL DISCHARGE..... 3
- REFUSED ..... 7
- DON'T KNOW ..... 9