NSFG Cycle 6 Main Study MALE Questionnaire

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SECTION A

Demographic characteristics; Household roster; Childhood background; Marital/cohabiting status

INTRO_1
AA_0. Now we can begin.

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I’ll begin with some basic questions about your background.

(Note:
{ FOR EVERY ITEM IN THE QUESTIONNAIRE, RESPONDENTS CAN REFUSE TO ANSWER OR CAN ANSWER AS “DON’T KNOW.” THE INTERVIEWER ENTERS “Control-R” FOR A REFUSAL AND “Control-D” FOR A “DON’T KNOW” RESPONSE.

Age and Date of Birth (AA)

AGE A
AA-1. First, I’d like to know your age and date of birth. How old are you?

ENTER age at last birthday in years ________

BIRTHDAY
AA-2. What is the date of your birth?

ENTER MM/DD/YYYY, with or without dividers ___________

(This is the only date in the interview that is asked for as month/day/year. All others are asked for only as month & year.)
{ IF R IS BETWEEN THE AGES OF 15 and 44, GO TO AB SERIES

TERMINATION SCRIPT:
TERM
In this survey we are only interviewing men who are between the
ages of 15 and 44. Therefore, that's all the questions I have for
you. Thank you for your time.

ENTER [1] TO EXIT INTERVIEW

Marital/Cohabiting Status (AB)

INTROCARD
AB-0. For many questions on this survey, I’ll ask you to look at numbered
cards that list answer choices. After you’ve read the choices on the
card, you can tell me your answer or, if you prefer, you can just tell
me the number next to the answer you choose.

MARSTAT
AB-1. Now I’d like to ask about your marital status. Please look at Card
1. What is your current marital status?

Married .................................1
Not married but living together with a partner
of the opposite sex .........................2
Widowed ..................................3
Divorced ..................................4
Separated, because you and your spouse are
not getting along ..........................5
Never been married ......................6

(FASKED IF COHABITING
FMARSTAT
AB-2. What is your formal marital status? That is, are you widowed,
divorced, separated, or have you never been married?

Widowed.................................3
Divorced .................................4
Separated, because you and your spouse are
not getting along ..........................5
Never been married ......................6

Hispanic Origin and Race (AC)

HISP
AC-1. Now I have some questions about your ethnic background and your
race. (You may have already told me this, but) Are you Hispanic or
Latino, or of Spanish origin?

Yes....................1
No......................5

(AASKED IF HISPANIC
HISPGRP
AC-2. Are you Puerto Rican, Cuban, Mexican, or a member of some other
group?

Puerto Rican..........................1
Cuban.................................2
Mexican...............................3
Member of some other group..........4
RRACE
AC-3. Which of the groups on Card 2 describe your racial background? Please select one or more groups.

ENTER all that apply

NOTE: If R reports a mixture of several races (biracial, mixed, mulatto, etc.), ENTER all groups that are part of the mixture.

American Indian or Alaska Native ..........1
Asian......................................2
Native Hawaiian or Other Pacific Islander..3
Black or African American .................4
White .....................................5

(ASKED ONLY IF MULTIPLE RACE GROUPS MENTIONED)

RACEBEST
AC-4. Which of these groups, that is (RACE GROUPS SELECTED ABOVE) would you say best describes your racial background?

(DISPLAY ONLY THOSE GROUPS MENTIONED IN RRACE AC-3)

(ASKED ONLY IF R REFUSED OR DIDN’T KNOW RACE)

OBSERVE
AC-5. ENTER race of respondent by observation

Black............1
White............2
Other............3

Household Roster (AD)

(THE BELOW TABLE WILL BE PRE-FILLED (EXCEPT FOR “Relar” and “RowDone”) WITH INFORMATION ON EACH HOUSEHOLD MEMBER MENTIONED IN THE SCREENER.)

(QUESTIONS AD-0 THROUGH AD-6 APPEAR WHEN THE CURSOR IS IN THE CORRESPONDING CELL OF THE TABLE.)


<table>
<thead>
<tr>
<th>Verify</th>
<th>Name</th>
<th>UsualRes</th>
<th>Sex</th>
<th>Age</th>
<th>Relar</th>
<th>RowDone</th>
</tr>
</thead>
<tbody>
<tr>
<td>HHL[1]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>HHL[2]</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>HHL[3]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HHL[4]</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>HHL[5]</td>
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<td></td>
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<tr>
<td>HHL[6]</td>
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<td></td>
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</tr>
<tr>
<td>HHL[7]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HHL[8]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
HHL[9]  

(ASKED OF ALL RESPONDENTS:
Verify[X]  
AD-0. I would like to get some additional information about the people in this household. / I would like to go over the information that I have about the people in this household.

There’s you and you are [AGE_R] years old. / There’s [Name[X]] and [he/she] is (less than 1 year old/1 year old/[Age[X]] years old). (Is this correct?)

If information is not correct, PROBE if necessary:
(What should be changed?)

(IF THE RESPONDENT HAS GOTTEN TO AN EMPTY ROW (THE END OF THE ROSTER)
Is there anyone else who lives here?

If no, GO TO AD-7 ENDROSTER
If yes, CONTINUE

{ IF THE ROW IS NON-EMPTY, AND IF THE INFORMATION IS CORRECT OR IF RESPONDENT
{ IS THE SCREENER INFORMANT,
{ GO TO AD-5 RELAR

Name[X]
AD-1. Enter name or initials of person who usually lives here.

Name or initials ___________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

UsualRes[X]
AD-2. Is this address considered to be (NAME[X])’s usual residence?

Yes .............1
No .............5

Sex[X]
AD-3. If necessary, ASK: (Is (NAME) a male or female?)

Male ...............1
Female .............2

Age[X]
AD-4. How old is (Name[X])?

If necessary, ASK: (How old was (Name[X]) on (his/her) last birthday?)

Age ____________

Relar[X]
AD-5. Please look at Card (3/4). What is (Name[X])’s relationship to you?

NOTE: If R says “child”, PROBE for whether he means biological child or something else.

(IF HOUSEHOLD MEMBER IS MALE, DISPLAY:)

Husband .............................................1
<table>
<thead>
<tr>
<th>Relationship</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male partner</td>
<td>2</td>
</tr>
<tr>
<td>Biological son</td>
<td>3</td>
</tr>
<tr>
<td>Step-son (son of spouse)</td>
<td>4</td>
</tr>
<tr>
<td>Adopted son</td>
<td>5</td>
</tr>
<tr>
<td>Legal ward</td>
<td>6</td>
</tr>
<tr>
<td>Foster child</td>
<td>7</td>
</tr>
<tr>
<td>Partner’s son</td>
<td>8</td>
</tr>
<tr>
<td>Grandson</td>
<td>9</td>
</tr>
<tr>
<td>Nephew</td>
<td>10</td>
</tr>
<tr>
<td>Biological father</td>
<td>11</td>
</tr>
<tr>
<td>Step-father (husband of mother)</td>
<td>12</td>
</tr>
<tr>
<td>Adoptive father</td>
<td>13</td>
</tr>
<tr>
<td>Legal guardian</td>
<td>14</td>
</tr>
<tr>
<td>Foster parent</td>
<td>15</td>
</tr>
<tr>
<td>Your parent’s male partner</td>
<td>16</td>
</tr>
<tr>
<td>Grandfather</td>
<td>17</td>
</tr>
<tr>
<td>Uncle</td>
<td>18</td>
</tr>
<tr>
<td>Brother</td>
<td>19</td>
</tr>
<tr>
<td>Other male relative</td>
<td>20</td>
</tr>
<tr>
<td>Roommate (male)</td>
<td>21</td>
</tr>
<tr>
<td>Tenant or boarder (male)</td>
<td>22</td>
</tr>
<tr>
<td>Other male nonrelative</td>
<td>23</td>
</tr>
</tbody>
</table>

*(IF HOUSEHOLD MEMBER IS FEMALE, DISPLAY:)*

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wife</td>
<td>1</td>
</tr>
<tr>
<td>Female partner</td>
<td>2</td>
</tr>
<tr>
<td>Biological daughter</td>
<td>3</td>
</tr>
<tr>
<td>Step-daughter (daughter of spouse)</td>
<td>4</td>
</tr>
<tr>
<td>Adopted daughter</td>
<td>5</td>
</tr>
<tr>
<td>Legal ward</td>
<td>6</td>
</tr>
<tr>
<td>Foster child</td>
<td>7</td>
</tr>
<tr>
<td>Partner’s daughter</td>
<td>8</td>
</tr>
<tr>
<td>Granddaughter</td>
<td>9</td>
</tr>
<tr>
<td>Niece</td>
<td>10</td>
</tr>
<tr>
<td>Biological mother</td>
<td>11</td>
</tr>
<tr>
<td>Step-mother (wife of father)</td>
<td>12</td>
</tr>
<tr>
<td>Adoptive mother</td>
<td>13</td>
</tr>
<tr>
<td>Legal guardian</td>
<td>14</td>
</tr>
<tr>
<td>Foster parent</td>
<td>15</td>
</tr>
<tr>
<td>Your parent’s female partner</td>
<td>16</td>
</tr>
<tr>
<td>Grandmother</td>
<td>17</td>
</tr>
<tr>
<td>Aunt</td>
<td>18</td>
</tr>
<tr>
<td>Sister</td>
<td>19</td>
</tr>
<tr>
<td>Other female relative</td>
<td>20</td>
</tr>
<tr>
<td>Roommate (female)</td>
<td>21</td>
</tr>
<tr>
<td>Tenant or boarder (female)</td>
<td>22</td>
</tr>
<tr>
<td>Other female nonrelative</td>
<td>23</td>
</tr>
</tbody>
</table>

**RowDone[X]**

AD-6. **ENTER [1] to VERIFY next row or to add additional HH members**

**ENDROSTER**

AD-7. **You have reached the end of the roster, ENTER [1] when ready to proceed.**
ASKED IF R IS MARRIED/COHABITING BUT WIFE/PARTNER NOT LISTED IN HH ROSTER

WPLOCATN
AD-8. Please look at Card 4. Where is your (wife/partner) currently living?

Friend’s home..............................1
Relative’s home............................2
College/university........................3
Armed forces..............................4
Employed in another city..................5
Medical institution (hospital, rehabilitational facility)...............6
Correctional institution (jail, prison)...7
Other .....................................8

ASKED IF THERE IS A WIFE/PARTNER AND CHILD/REN IN HOUSEHOLD

RELWOM
AD-9. I need to find out about [WIFE/PARTNER’S NAME]’s relationship to the children who live here. Please look at Card 5. What is [WIFE/PARTNER’S NAME]’s relationship to [CHILD’S NAME]?

If [WIFE/PARTNER] is a foster parent or a legal guardian for this child, ENTER [4].

Biological mother .........................1
Stepmother ..................................2
Adoptive mother ...........................3
Some other relation .......................4
Not related ..................................5

Regular school and GED (AE)

GOSCHOL
AE-1. I'd like to talk about your education. I'd like to talk only about regular school. By regular school I mean elementary, junior high, high school, college, or graduate school.

Are you now going to, or on vacation from, regular school?

ENTER "No" if R says he is taking GED courses now.

Yes ...............................1
No ...............................5 (GO TO HIGRADE AE-3)

VACA
AE-2. Are you currently on vacation from regular school?

Yes ...............................1
No ...............................5

HIGRADE
AE-3. Please look at Card A 3. What (is the highest grade or year of (regular) school you have ever attended?) /(grade or year of school are you in/were you in before vacation began)?

No formal schooling ...........................0
1st grade ..................................1
2nd grade ..................................2
3rd grade ..................................3
4th grade ..................................4
5th grade ..................................5
6th grade ...............................6
7th grade ...............................7
8th grade ...............................8
9th grade ...............................9
10th grade ..............................10
11th grade ..............................11
12th grade ..............................12
1 year of college or less .................13
2 years of college .......................14
3 years of college .......................15
4 years of college/grad school ..........16
5 years of college/grad school ..........17
6 years of college/grad school ..........18
7 or more years of college and/or grad school ...19

(If highest grade attended is 0, don’t know, or refused, go to AE-5 HAVEDIP)

(Asked if highest grade attended is 1 through 19)

COMPGRD
AE-4. (Did you complete/have you completed) (that/your highest) (grade/year) of school?

Yes .......................1
No .......................5

(If R is in school and highest grade <= 12, and hasn’t completed 12th, go to AE-8 HISCHGRD)

(Asked if R has completed 12 years or is not in school and has not completed 12 years)

HAVEDIP
AE-5. Do you have either a high school diploma or a GED certificate, or both?

Yes .......................1
No .......................5 (Go to AE-8 HISCHGRD)

DIPGED
AE-6. (Which one do you have?)

High school diploma ...1
GED ...................2 (Go to AE-8 HISCHGRD)
Both ..................3

EARNHS_M, EARNHS_Y
AE-7. In what month and year did you get your high school diploma?

(Asked if R does not have a high school diploma and highest grade is > 12)

HISCHGRD
AE-8. (Not counting your GED classes,) what is the highest grade of elementary, junior high, or high school you have ever attended?

1st grade ...............................1
2nd grade ...............................2
3rd grade ...............................3
4th grade ...............................4
5th grade ...............................5
6th grade ...............................6
7th grade ...............................7
8th grade ...............................8
9th grade ...............................9
10th grade ..........................................................10
11th grade ..........................................................11
12th grade ..........................................................12

(ASKED IF R’S HIGHEST GRADE IS 1-12, HE IS NOT IN SCHOOL, AND DOES NOT HAVE
H.S. DIPLOMA, OR R’S HIGHEST GRADE IS 13-19, AND HE DOES NOT HAVE A DIPLOMA
MYSCHOL_M, MYSCHOL_Y

AE-9. In what month and year did you last attend ((HIGHEST H.S. GRADE)
grade/regular school)?

(ASKED IF HIGHEST GRADE >12

HAVEDEG

AE-10. Do you have any college or university degrees?

Yes ....................1
No .....................5 (GO TO AF SERIES)

(ASKED IF R HAS A COLLEGE DEGREE

DEGREES

AE-11. Please look at Card 7. What is the highest college or university
degree you have?

Associate’s degree .............1
Bachelor’s degree ..............2
Master’s degree ...............3
Doctorate degree .............4
Professional School degree ..5

Childhood background (AF)

AFINTRO

AP-0. Now I have a few questions about your parents or parent-figures.

(IF R IS UNDER 18 AND HAS NO PARENT OR PARENT-LIKE PEOPLE IN THE HOUSEHOLD, GO
TO AF-1 INTACT

(IF R NEVER LIVED AWAY FROM PARENT(S), IS UNDER AGE 18, AND IS LIVING IN
NONINTACT FAMILY HH, GO TO PARMARR AF-2

INTACT

AP-1. Between your birth and (the present time/the time you first
started living on your own/your 18th birthday), (have you always
lived/did you always live) with both your (biological/adoptive)
mother and (biological/adoptive) father?

If R volunteers that he never lived on his own, ask him whether he
has always lived with both parents between his birth and
present time.

Yes.......1
No.........5

PARMARR
AF-2. Were your biological parents married to each other at the time you were born?

Yes.......1
No.........5

{ASKED IF R DID NOT LIVE WITH BOTH PARENTS WHILE GROWING UP
LVSIT14F
AF-3. Now, think about when you were 14 years old. Looking at Card 9, what female and male parents or parent-figures were you living with at age 14?

ENTER female adult first

No female parent or parent-figure present...1
Biological mother..........................2
Stepmother..................................3
Adoptive mother...........................4
Father's girlfriend..........................5
Foster mother...............................6
Grandmother.................................7
Aunt..........................................8
Other female..................................9

{ASKED IF R DID NOT LIVE WITH BOTH PARENTS WHILE GROWING UP
LVSIT14M
AF-4. Ask if necessary:

Now tell me the male parent or parent-figure you were living with when you were 14 years old.

ENTER male adult

No male parent or parent-figure present....1
Biological father..........................2
Stepfather..................................3
Adoptive father...........................4
Mother's boyfriend........................4
Foster father...............................5
Grandfather.................................7
Uncle......................................8
Other male ..................................9

{ASKED IF R DID NOT LIVE WITH BOTH PARENTS WHILE GROWING UP
WOMRASDU
AF-5. Who, if anyone, do you think of as the woman who mostly raised you when you were growing up?

Biological mother........1
Adoptive mother..........2
Step-mother..............3
Father's girlfriend.......4
Foster mother............5
Grandmother..............6
Other female relative....7
Female non-relative.....8
No such person ............. 9
Other .................. 10

(If R did not have a mother or mother figure, go to AF-8 MOMCHILD)

MOMDEGREE
AP-6. Please look at Card 17. What is the highest level of education (she/your mother) completed?

Less than high school ......................... 1
High school graduate or GED .................... 2
Some college but no degree .................... 3
2-year college degree (e.g., Associates degree).... 4
4-year college graduate (e.g., BA, BS) ........... 5
Graduate or professional school.................. 6

MOMWORKD
AP-7. During most of the time you were growing up, that is between the ages of 5 and 15, did she usually work full-time, part-time or did she not work for pay at all?

Full-time .................................. 1
Part-time................................. 2
Equal amounts full time and part time ....... 3
Not at all (for pay)......................... 4

MOMCHILD
AP-8. (Including yourself/Altogether), how many children did (she/your mother/your biological mother) have who were born alive to her?

Number of children

(Asked if R’s mother/mother-figure had at least one child)

MOMFSTCH
AP-9. How old was (she/your biological mother) when she had her first child who was born alive?

Age

(Asked if R’s mother/mother-figure had at least one child and R doesn’t know age at first birth)

MOM18
AP-10. Was she under 18, 18 to 19, 20 to 24, or 25 or older?

Under 18 ...... 1
18-19 ........ 2
20-24 .......... 3
25 or older ...... 4

(Asked if R did not live with both parents while growing up)

MANRASDU
AP-11. Who, if anyone, do you think of as the man who mostly raised you when you were growing up?

Biological father ...... 1
Adoptive father .......... 2
Step-father ............ 3
Mother’s boyfriend ....... 4
Foster father .......... 5
Grandfather ............ 6
Other male relative .... 7
Male non-relative ....... 8
No such person........9
Other .................10

(If r did not have a father or father figure, go to ag series)

DADDEGREE
AF-12. Please look at Card 17. What is the highest level of education (he/your father) completed?

Less than high school .........................1
High school graduate or GED ...................2
Some college but no degree ....................3
2-year college degree (e.g., Associates degree) ..4
4-year college graduate (e.g., BA, BS) ........5
Graduate or professional school..............6

Marriage and Cohabitation (AG)

AGINTRO
AG-1. Now I have some questions about marriage and cohabitation.

(If r has never been married, go to ag-5 evcohab2)

{asked if ever married}

TIMESMAR
AG-2. (Including your present marriage,) how many times have you been married?

Number ______________

(If r is cohabiting, go to numcoh1 ag-4)

{asked if ever married}

EVCOHAB1
AG-3. Not including the (woman/women) you married, have you ever lived together with any other female sexual partner? By living together, I mean having a sexual relationship while sharing the same usual residence.

IF NECESSARY SAY: Remember, do not include the woman/women who you married.

Yes...............1
No.................5

(If r never cohabited, go to section b)

{asked if ever married and ever cohabited with any other women}

NUMCOH1
AG-4. Not including the (woman/women) you married, how many other female sexual partners have you lived together with in your life? (Please include the woman you live with now.)

Number ______________ (go to section b)

(If r is cohabiting, go to numcoh2 ag-6)

(asked if never married and not currently cohabiting)

EVCOHAB2
AG-5. Have you ever lived together with a female sexual partner? By living together, I mean having a sexual relationship while sharing the same usual residence.
Yes............1
No...............5

(IF R NEVER COHABITED, GO TO SECTION B)

(IF ASKED IF NEVER MARRIED AND EVER COHABITED)

NUMCOH2

AG-6. (Including the woman you live with now,) How many female sexual partners have you lived with in your life?

Number ___________
SECTION B

SEX COMMUNICATION, EVER SEX, NUMBER OF SEXUAL PARTNERS

Sex Communication (BA)

{ IF AGE AT SCREENER > 19, GO TO EVEROPER BB-1

{ ASKED IF AGE AT SCREENER <= 19

TALKPAR
BA-1. IF AGE AT INTERVIEW >= 18, SAY:
The next questions are about how you learned about sex and birth control. Before you were 18 years old, which, if any, of the topics shown on Card 23 did you ever talk with a parent or guardian about?

IF AGE AT INTERVIEW < 18, SAY:
The next questions are about how you learned about sex and birth control. Which, if any, of the topics shown on Card 23, have you ever talked with a parent or guardian about?

ENTER all that apply.

   How to say no to sex ............1
   Methods of birth control ........2
   Where to get birth control ......3
   Sexually transmitted diseases ...4
   How to use a condom .............5
   None of the above ...............6

{ ASKED IF AGE AT SCREENER <= 19

SEDNO
BA-2. IF AGE AT INTERVIEW < 18, SAY: Now I’m interested in knowing about formal sex education you may have had. Have you ever had any formal instruction at school, church, a community center or some other place about how to say no to sex?

ELSE IF AGE AT INTERVIEW >= 18, SAY: Now I’m interested in knowing about formal sex education you may have had. Before you were 18, did you ever have any formal instruction at school, church, a community center or some other place about how to say no to sex?

   Yes.............1
   No.............5 (GO TO BA-4 SEDBC)

{ ASKED IF AGE AT SCREENER <= 19 AND SEDNO = YES

SEDNOG
BA-3. What grade were you in when you first received instruction on how to say no to sex?

  1st grade .......................................1
  2nd grade .......................................2
  3rd grade .......................................3
  4th grade .......................................4
  5th grade .......................................5
  6th grade .......................................6
  7th grade .......................................7
  8th grade .......................................8
  9th grade .......................................9
  10th grade .....................................10
  11th grade .....................................11
12th grade ......................................12
1st year of college .............................13
2nd year of college .............................14
3rd year of college .............................15
4th year of college .............................16
Not in school at the time of instruction ........96

{ ASKED IF AGE AT SCREENER <= 19

SEDBC

BA-4. IF AGE AT INTERVIEW < 18, ASK:
Have you ever had any formal instruction at school, church, a community
center or some other place about methods of birth control?

ELSE IF AGE AT INTERVIEW >= 18, ASK:
Before you were 18, did you ever have any formal instruction at school,
church, a community center or some other place about methods of birth
control?

Yes...........1
No.............5 (GO TO BA-6 PLEDGE)

{ ASKED IF AGE AT SCREENER <= 19 AND SEDBC = YES

SEDBCG

BA-5. What grade were you in when you first received instruction on methods of
birth control?

1st grade .......................................1
2nd grade .......................................2
3rd grade .......................................3
4th grade .......................................4
5th grade .......................................5
6th grade .......................................6
7th grade .......................................7
8th grade .......................................8
9th grade .......................................9
10th grade ....................................10
11th grade ....................................11
12th grade ....................................12
1st year of college .............................13
2nd year of college .............................14
3rd year of college .............................15
4th year of college .............................16
Not in school at the time of instruction ........96

{ ASKED IF AGE AT SCREENER <= 19

PLEDGE

BA-6. (Did you ever take / Have you ever taken) a public or written pledge to
remain a virgin until marriage?

Yes ............1
No .............5

Vasectomy/other sterilizing operations; Ability to reproduce (BB)

( ASKED OF ALL

EVEROPER

BB-1. Some men have operations that make it impossible for them to father a
child.

Have you ever had a vasectomy or any other operation that makes it
impossible for you to father a child?
ENTER [1] if the respondent had a vasectomy for any reason.
ENTER [1] if respondent says he had a vasectomy and had a reversal.

Yes........1
No.........5 (GO TO FATHPOSS BB-8)

( ASKED IF HAD OPERATION

TYPEOPER

BB-2. What type of operation did you have? Was it a vasectomy or some other operation?

Vasectomy........................................1 (GO TO BB-4 YRVASEC)
Other operation .................................2
Vasectomy failed...............................3 (GO TO BB-4 YRVASEC)
Vasectomy already surgically reversed......4 (GO TO BB-4 YRVASEC)

( ASKED IF HAD OTHER OPERATION OR DK/RF TO TYPE OF OPERATION

STEROPER

BB-3. As far as you know, are you completely sterile from this operation; that is, does it make it impossible for you to father a baby in the future?

Yes ...........1
No ............5 (GO TO FATHDIFF BB-9)

( ASKED IF HAD VASECTOMY OR HAD OTHER OPERATION THAT MADE IMPOSSIBLE TO FATHER

VASECM/VASECY

BB-4. In what month and year did you have your (vasectomy / sterilizing operation)?

( ASKED IF VASECTOMY/STERILIZING OPERATION WAS IN LAST FIVE YEARS

PLCSTROP

BB-5. Please look at Card 25 and tell me where (the operation for your vasectomy / your sterilizing operation) was performed.

Private doctor's office........................1
HMO facility ......................................2
Community health clinic, community clinic, public health clinic ..................3
Family planning or Planned Parenthood clinic ....4
Employer or company clinic ......................5
School or school-based clinic ...................6
Hospital outpatient clinic ......................7
Hospital emergency room ......................8
Hospital regular room ..........................9
Urgent care center, urgi-care, or walk-in facility ..10
Some other place ................................20

( IF R HAD OPERATION OTHER THAN VASECTOMY, GO TO SECTION BC

( ASKED IF R HAD VASECTOMY

RVRSVAS

BB-6. (Have you ever had surgery to reverse your vasectomy? / You said that you had surgery to reverse your vasectomy, is that right?)

Yes...........1
No.........5 (GO TO SECTION BC)

( ASKED IF R HAD VASECTOMY AND REVERSAL

VASREV_M/VASREV_Y
BB-7. In what month and year did you have the reversal?

(ASKED IF R DID NOT HAVE STERILIZING OPERATION OR HAD A VASECTOMY THAT FAILED
FATHPOSS

BB-8. Some men are not physically able to father children. As far as you
know, is it physically possible for you, yourself to biologically father
a child in the future?

Yes ............1
No ............5 (GO TO BC SERIES)

(ASKED IF R DID NOT HAVE STERILIZING OPERATION AND PHYSICALLY POSSIBLE
(OR DK/RF) TO FATHER CHILD OR HAD OTHER STERILIZING OPERATION BUT NOT
IMPOSSIBLE TO HAVE CHILD
FATHDIFF

BB-9. Some men are physically able to father a child, but would have
difficulty doing so. As far as you know, would you have any difficulty
fathering a child?

Yes ............1
No ............5

Ever Had Sex: Number of Sexual Partners (BC)
(IF R EVER MARRIED OR EVER COHABITED, GO TO EVRCHIL BC-4

(ASKED IF R NEVER MARRIED, NEVER COHABITED
EVERSEX

BC-1. The next section is about relationships with females.

Have you ever had sexual intercourse with a female (sometimes this is
called making love, having sex, or going all the way)?

Yes........1
No........5 (GO TO YNOSEX BC-3)

(ASKED IF R NEVER MARRIED, NEVER COHABITED BUT HAD SEX
SXMTONCE

BC-2. Have you had sexual intercourse more than once?

Yes ................1
No ................5

(ASKED IF R NEVER MARRIED AND NEVER COHABITED AND SAID HE NEVER HAD SEX
YNOSEX

BC-3. As you know, some people have had sexual intercourse by your age and
others have not. Please look at Card 13 which lists some reasons that
people give for not having sexual intercourse.

What would you say is the most important reason why you have not had
sexual intercourse up to now?

Against religion or morals.................................1
Don’t want to get a female pregnant....................2
Don’t want to get a sexually transmitted disease....3
Haven’t found the right person yet......................4
In a relationship, but waiting for the right time.....5
Other ..........................................................6

(IF R NEVER HAD SEX, GO TO SECTION F
(ASKED IF R EVER MARRIED, EVER COHABITED OR EVER HAD SEX (OR EVERSEX=DK/RF)

EVRCHIL

BC-4. Now I’ll ask you about biological children. By this I mean any children that you ever fathered, even if they don’t live with you now or if they died or were adopted by someone else.

(Have you ever had any biological children?)

NOTE: Only include children that R biologically fathered. Do not include children to whom R was a foster father or adoptive father.

Yes ............1
No .............5 (GO TO BC-6 LIFEPRT)

(ASKED IF R HAD BIOLOGICAL CHILDREN

EVRCHILN

BC-5. How many biological children have you ever had?

Number of children __________

(ASKED IF R EVER MARRIED, EVER COHABITED, OR EVER HAD SEX

LIFEPRT

BC-6. The next questions are about relationships with females.

Please look at Card 14. How many different females have you ever had intercourse with? This includes any female you had intercourse with, even if it was only once or if you did not know her well.

One ...............1
Two ...............2 (GO TO BC-8 MON12PRT)
Three ...............3 (GO TO BC-8 MON12PRT)
Four ...............4 (GO TO BC-8 MON12PRT)
Five ...............5 (GO TO BC-8 MON12PRT)
Six ...............6 (GO TO BC-8 MON12PRT)
7 or more ............7 (GO TO BC-8 MON12PRT)

(ASKED IF R HAD ONLY ONE SEXUAL PARTNER IN LIFETIME

SXMON12

BC-7. (The next questions are about relationships with females. You said that you had sexual intercourse with a female once in your life. Was that in the last 12 months? Have you had sexual intercourse with this female in the last 12 months, that is, since (INTERVIEW MONTH, 2001)?

Yes............1
No.............5 (GO TO SECTION BD)

(ASKED IF R HAD MORE THAN ONE LIFE PARTNER

MON12PRT

BC-8. Please look at Card 15. How many different females have you had sexual intercourse with in the past 12 months, that is, since (INTERVIEW MONTH, 2001)?

None ...............0 (GO TO SECTION BD)
One ...............1
Two ...............2
Three ...............3
Four ...............4
Five ...............5
Six ...............6
7 or more ............7

( IF R NEVER HAD SEX, GO TO SECTION F
( IF R DIDN’T HAVE SEX IN THE LAST 12 MONTHS, GO TO SECTION BD)

(SEXFREQ)

BC-9. Now please think about the last four weeks. How many times have you had sexual intercourse with a female in the last four weeks?

Number of times ________

(CONFREQ)

BC-10. And, in the last four weeks, how many of the times that you had sexual intercourse with a female did you use a condom?

Number of times ________

Enumeration of recent sex partners (BD)

(ASKED OF ALL WHO HAD SEX, EVEN IF MORE THAN 12 MONTHS AGO)

(F1NAME)

BD-1. So, that I can refer to her in the interview, please give me the name or initials of the female with whom you (most recently) had sexual intercourse.

Name/initials ________  (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

(P1RLTN1)

BD-2. Were you ever married to (PARTNER’S NAME)?

Yes ..................1
No ...................5

(P1CURRWIFE)

BD-3. If necessary, ASK: (Is she your current wife?)

Yes ..............1
No ...............5

(P1CURRSEP)

BD-4. If necessary, ASK: (Is she the woman you are separated from now?)

Yes ............1
No ..........5

(P1RLTN2)

BD-5. Did you ever live together with (PARTNER’S NAME)?

Yes ............1
No ..........5

(P1COHABIT)

BD-6. If necessary, ASK: (Is she the woman you live with now?)
Yes ............1
No .............5

{ IF R HAD NONE OR ONE PARTNER IN LAST 12 MONTHS, GO TO END OF SECTION B

P2NAME
BD-7. Now think of the last female with whom you had sexual intercourse before (LAST PARTNER’S NAME). Please give me her name or initials.

Name/ initials __________  (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

P2RLTN1
BD-8. Were you ever married to (PARTNER’S NAME)?

Yes ............1
No .............5

( ASKED IF R CURRENTLY MARRIED AND CURRENT WIFE NOT YET IDENTIFIED)

P2CURRWIFE
BD-9. If necessary, ASK: (Is she your current wife?)

Yes ............1
No .............5

( ASKED IF R CURRENTLY SEPARATED AND THAT WIFE NOT IDENTIFIED YET)

P2CURRSEP
BD-10. If necessary, ASK: (Is she the woman you are separated from now?)

Yes ............1
No .............5

( ASKED IF R WAS NEVER MARRIED TO THIS PARTNER BUT HE EVER COHABITED)

P2RLTN2
BD-11. Did you ever live together with (PARTNER’S NAME)?

Yes ............1
No .............5

( ASKED IF R WAS NEVER MARRIED TO THIS PARTNER AND HE IS CURRENTLY COHABITING AND THIS COHABITING PARTNER NOT YET IDENTIFIED)

P2COHABIT
BD-12. If necessary, ASK: (Is she the woman you live with now?)

Yes ............1
No .............5

{ IF R HAD 2 SEXUAL PARTNERS IN THE LAST 12 MONTHS, GO TO END OF SECTION B

P3NAME
BD-13. Think of the last female with whom you had sexual intercourse before (2ND TO LAST PARTNER’S NAME). Please give me her name or initials.

Name/ initials __________  (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

P3RLTN1
BD-14. Were you ever married to (PARTNER’S NAME)?

Yes ............1
No ..............5

(ASKED IF R CURRENTLY MARRIED AND CURRENT WIFE NOT YET IDENTIFIED)

P3CURRWIFE
BD-15. If necessary, ASK: (Is she your current wife?)

Yes ...........1
No .............5

(ASKED IF R CURRENTLY SEPARATED AND THAT WIFE NOT IDENTIFIED YET)

P3CURRSEP
BD-16. If necessary, ASK: (Is she the woman you are separated from now?)

Yes ...........1
No .............5

(ASKED IF R WAS NEVER MARRIED TO THIS PARTNER BUT HE EVER COHABITED)

P3RLTN2
BD-17. Did you ever live together with (PARTNER’S NAME)?

Yes ...........1
No .............5

(ASKED IF R WAS NEVER MARRIED TO THIS PARTNER AND HE IS CURRENTLY)

( COHABITING AND THIS COHABITING PARTNER NOT YET IDENTIFIED)

P3COHABIT
BD-18. If necessary, ASK: (Is she the woman you live with now ?)

Yes ...........1
No .............5

(ASKED IF TWO OR THREE PARTNERS IN LIFETIME AND IN THE LAST 12 MONTHS)

FIRST
BD-19. Was (PARTNER’S NAME) the first female with whom you ever had
sexual intercourse?

Yes ...........1
No .............5

(ASKED IF TWO OR THREE PARTNERS IN LIFETIME AND IN THE LAST 12 MONTHS)

FIRST2
BD-20. So that I can refer to her in the interview, please tell me the
name or initials of the first female with whom you ever had sexual
intercourse.

Name or initials __________ (NO NAMES OR INITIALS ARE PLACED ON
THE DATA FILE.)
SECTION C

CURRENT WIFE OR COHABITING PARTNER

{ IF MARRIED OR COHABITING, CONTINUE WITH CA SERIES
{ ELSE GO TO SECTION D

Key Dates in Current Marriage or Cohabitation (CA)

CAINTRO
CA-0. Now I have some questions about your relationship with your (wife/partner).

{ ASKED IF SHE WAS NOT NAMED IN SECTION B
CA NAME
CA-1. Please tell me her name or initials so that I can refer to her during the interview.

Name/ initials ___________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

[IF COHABITING, GO TO CA-5 STRTWFCP_M]

MARRDATE_M/MARRDATE_Y
CA-2. In what month and year were you and (WIFE/PARTNER) married?

(ASKED IF R DOESN’T KNOW THE DATE OF MARRIAGE
HISAGEM
CA-3. How old were you when you and (WIFE/PARTNER) got married?

Age in years __________

{ ASKED IF R MARRIED TO THIS WOMAN
LIVTOGWF
CA-4. Some couples live together without being married. By living together, we mean having a sexual relationship while sharing the same usual address. Did you and your wife live together before you got married?

Yes ........1
No ........5 (GO TO SECTION CB)

{ ASKED IF R [IS MARRIED TO AND DID COHABIT WITH] OR [IS COHABITING WITH] THIS WOMAN
STRTWFCP_M/STRTWFCP_Y
CA-5. In what month and year did you and (WIFE/PARTNER) first start living together?

(ASKED IF R [IS MARRIED TO AND DID COHABIT WITH] OR [IS COHABITING WITH] THIS WOMAN AND START DATE OF COHABITATION = DK/RF
HISAGEC
CA-6. How old were you when you and (WIFE/PARTNER) first started living together?

Age in years __________

{ ASKED IF R [IS MARRIED TO AND DID COHABIT WITH] OR [IS COHABITING WITH] THIS WOMAN
ENGATHEN
CA-7. At the time you began living together, were you and she engaged to be married or did you have definite plans to get married?

Yes ........1
No ........5

{ ASKED IF R IS COHABITING WITH THIS WOMAN

WILLMARR

CA-8. Please look at Card 21. What is the chance that you and (WIFE/PARTNER) will marry each other?

No chance .......................1
A little chance ....................2
50-50 chance .....................3
A pretty good chance ...........4
An almost certain chance .....5

Characteristics of Wife/Partner (CB)

CWPDOB_M/CWPDOB_Y

CB-1. In what month and year was she born?

{ ASKED IF R DOESN’T KNOW HER BIRTH DATE

CWPAGE

CB-2. How old is (WIFE/PARTNER) now?

Age in years at last birthday ________

CWPHISP

CB-3. Is your (wife/partner) Hispanic or Latino, or of Spanish origin?

Yes ........1
No ........5

CWPRACE

CB-4. Which of the groups shown on Card 2 describes (WIFE/PARTNER)’s racial background? Please select one or more groups.

NOTE: If the respondent mentions a mixture of multiple races (e.g. biracial, mixed, mulatto), probe for and code all racial groups that are part of the mix.

American Indian or Alaska Native .............1
Asian ........................................2
Native Hawaiian or Other Pacific Islander .....3
Black or African American .....................4
White .......................................5

{ ASKED IF MORE THAN ONE RACE GROUP MENTIONED

CWPRACEB

CB-5. Which of these groups, that is (responses from CWPRACE), would you say best describes your (wife/partner)’s racial background?

{ DISPLAY THOSE GROUPS MENTIONED IN CWPRACE CB-4

CWPEDUCN

CB-6. Please look at Card 11. What is the highest level of education (WIFE/PARTNER) has completed?

Less than high school ......................1
High school graduate or GED .................2
Some college but no degree ....................3
2-year college degree (e.g., Associate’s degree) 4
4-year college graduate (e.g., BA, BS) ..........5
Graduate or professional school ................6

CWPBORN
CB-7. Was (WIFE/PARTNER) born outside the United States?

   Yes ........1
   No ........5

CWPMARBF
CB-8. (At the time you and she were married, had / Has) (WIFE/PARTNER) been married before?

   Yes ........1
   No ........5

First Sex with Current Wife/Partner (CC)

CWPSX1WN_M/CWPSX1WN_Y
CC-1. Now I have some questions about the beginning of your relationship with your (wife/partner).

   Think back to the very first time that you had sexual intercourse with your (wife/partner). In what month and year was that?

( ONLY ASKED IF DK/RF DATE OF FIRST SEX

CWPSX1AG
CC-2. The very first time that you had sexual intercourse with your (wife/partner), how old were you?

   Age in years __________

( ONLY ASKED IF THIS WOMAN IS FIRST SEX PARTNER EVER

CWPSX1RL
CC-3. Please look at Card 44. At the time you first had sexual intercourse with (WIFE/PARTNER), how would you describe your relationship with her?

   Married to her .......................................1
   Engaged to her ......................................2
   Living together in a sexual relationship, but not engaged ....3
   Going with her or going steady ......................4
   Going out with her once in a while ...................5
   Just friends ...........................................6
   Had just met her ......................................7
   Something else .........................................8

CWPFUSE
CC-4. Please look at Card 45, which lists methods some people use to prevent pregnancy and sexually transmitted disease.

   That first time that you had sexual intercourse with (WIFE/PARTNER), did you or she use any methods to prevent pregnancy or sexually transmitted disease?

   Yes ........1
   No ........5 (GO TO SECTION CD)
ASKED IF METHODS WERE USED
CWPFMET
CC-5. Still looking at Card 45, that first time, what methods did you and she use to prevent pregnancy or sexually transmitted disease?

ENTER all that apply.

Condom or rubber ..........................1
Withdrawal or pulling out ....................2
Vasectomy or male sterilization ...............3
Pill .............................................4
Tubal ligation ("tubes tied") or female sterilization ..........5
Injection (Depo-Provera or Lunelle) ............6
Spermicidal foam/jelly/cream/film/suppository ..........7
Hormonal implant (Norplant™) ....................8
Rhythm or safe period ........................9
Something else ............................10

Sterilization and Impaired Fecundity (CD)

ASKED IF THEY DID NOT USE FEMALE STERILIZATION AT FIRST SEX
CWPOPSTR
CD-1. As far as you know, has your (wife/partner) ever had an operation that made it impossible for her to have a baby?

Yes .........1
No .........5 (GO TO CWPPOSS CD-5)

CWPTYPOP
CD-2. (You said that your (wife/partner) has had a sterilizing operation.) Which of these types of sterilizing operations did she have? Did she have a tubal ligation or tubal sterilization, a hysterectomy, or something else?

ENTER all that apply.

Tubal ligation or tubal sterilization ......1
Hysterectomy ...............................2
Something else .............................3

ASKED IF STERILIZING OPERATION WAS "SOMETHING ELSE"
CWPMTST
CD-3. As far as you know, did the operation make your (wife/partner) completely sterile, that is, is it completely impossible for her to have a baby?

Yes .........1
No .........5

ASKED IF R’S W/CP HAD TUBAL AND NO OTHER STERILIZING OPERATION
CWPREVST
CD-4. Has your (wife/partner) ever had surgery to reverse her tubal ligation?

Yes .........1 (GO TO SECTION CE)
No .........5 (GO TO SECTION CE)

ASKED IF W/CP DID NOT HAVE STERILIZING OPERATION
CWPPOSS
CD-5. Some women are not physically able to have children. As far as you know, is it physically possible for (WIFE/PARTNER) to have a baby?
Yes .................1
No ..................5 (GO TO SECTION CE)

{ ASKED IF W/CP DID NOT HAVE OPERATION AND IS PHYSICALLY ABLE TO HAVE CHILDREN (OR DK/RF TO CWPOSSB) OR IF W/CP HAD OPERATION THAT DID NOT MAKE IT COMPLETELY IMPOSSIBLE FOR HER TO HAVE CHILDREN

CWPDIFF
CD-6. Some women are physically able to have another baby, but have difficulty getting pregnant or carrying the baby to term. As far as you know, would (WIFE/PARTNER) have any difficulty getting pregnant or carrying a baby?

Yes ............1
No ............5

**Most Recent Sex with Current Wife/Partner (CE)**

CWPLSTSX
CE-1. When was the most recent time you had sexual intercourse with (WIFE/PARTNER)? Was it within the last week, within the last four weeks, or more than four weeks ago?

- Within the last week .............1
- Within the last four weeks .......2
- More than four weeks ago ........3

{ ASKED IF LAST SEX WAS MORE THAN 4 WEEKS AGO

CWPLSXWN_M/CWPLSXWN_Y
CE-2. Think back to the most recent time that you had sexual intercourse with your (wife/partner). In what month and year was that?

{ EXPERIMENT: IF R IS IN FIRST HALF-SAMPLE, ASK...

CWPLUSE
CE-3. Please look at Card 45. That last time that you had sexual intercourse with your (wife/partner), did you or she use any methods to prevent pregnancy or sexually transmitted disease?

Yes ............1
No ............5 (GO TO CF SERIES)

{ EXPERIMENT: IF R IS IN FIRST HALF-SAMPLE, AND USED METHOD AT LAST SEX, ASK...

CWPLMET
CE-4. Still looking at Card 45, that last time, what methods did you and she use?

ENTER all that apply.

- Condom or rubber .................................1
- Withdrawal or pulling out ..........................2
- Vasectomy or male sterilization .................3
- Pill ..................................................4
- Tubal ligation ("tubes tied") or female sterilization .....5
- Injection (Depo-Provera or Lunelle) ..............6
- Spermicidal foam/jelly/cream/film/ suppository ...7
- Hormonal implant (Norplant™) ....................8
- Rhythm or safe period .............................9
- Something else ....................................10

{ IF RESPONDENT IS IN FIRST HALF-SAMPLE, GO TO CF SERIES
(EXPERIMENT: IF R IS IN SECOND HALF-SAMPLE, ASK...)

**CWPLUSE1**

CE-5. Please look at Card 46. That last time that you had sexual intercourse with your (wife/partner), did you, yourself use any methods to prevent pregnancy or sexually transmitted disease?

Yes ..........1
No ...........5 (GO TO CE-7 CWPLUSE2)

(EXPERIMENT: IF R IS IN SECOND HALF-SAMPLE, AND HE USED METHOD AT LAST SEX, ASK...)

**CWPLMET1**

CE-6. Still looking at Card 46, that last time, what methods did you use?

ENTER all that apply.

- Condom or rubber ..............................................1
- Withdrawal or pulling out ....................................2
- Vasectomy or male sterilization .............................3
- Something else ...............................................10

(EXPERIMENT: IF R IS IN SECOND HALF-SAMPLE, ASK...)

**CWPLUSE2**

CE-7. Please look at Card 47. That last time that you had sexual intercourse with your (wife/partner), did she use any methods to prevent pregnancy or sexually transmitted disease?

Yes ..........1
No ...........5 (GO TO CF SERIES)

(EXPERIMENT: IF R IS IN SECOND HALF-SAMPLE, AND WIFE/PARTNER USED METHOD AT LAST SEX, ASK...)

**CWPLMET2**

CE-8. Still looking at Card 47, that last time, what methods did she use?

ENTER all that apply.

- Pill ..........................................................4
- Tubal ligation (“tubes tied”) or female sterilization .......5
- Injection (Depo-Provera or Lunelle) ........................6
- Spermicidal foam/jelly/cream/film/suppository ..............7
- Hormonal implant (Norplant™) ..............................8
- Rhythm or safe period .......................................9
- Something else .............................................10

**Methods Used in the Last 12 Months (CF)**

**CFINTRO**

CF-0. Now I have some questions about methods that you and (WIFE/PARTNER) used in the past 12 months, that is since (INTERVIEW MONTH, 2001), to prevent pregnancy or sexually transmitted disease.

(If you were not involved with her for the whole 12 months, please think of only that time that you were involved with her during the past 12 months.)

(ASKED IF CAN’T TELL IF THEY USED A METHOD IN LAST 12 MONTHS)

**CWPRECBC**

CF-1. Please look at Card 19. During the last 12 months, did you or your (wife/partner) use any methods to prevent pregnancy or sexually
transmitted disease when you had intercourse together? Please answer yes if you used a method even once.

Yes ........1
No ........5 (GO TO SECTION CG)

CWPALLBC
CF-2. Please look at Card 45. Including any methods you may have already told me about and methods you may have used only once, during the last 12 months, which of these methods did you and she use to prevent pregnancy or sexually transmitted diseases?

ENTER all that apply.

Condom or rubber ..............................................1
Withdrawal or pulling out .....................................2
Vasectomy or male sterilization ...............................3
Pill ..........................................................4
Tubal ligation (“tubes tied”) or female sterilization ....5
Injection (Depo-Provera or Lunelle) .........................6
Spermicidal foam/jelly/cream/film/suppository ...............7
Hormonal implant (Norplant™) ...............................8
Rhythm or safe period .........................................9
Something else ................................................10

{ ASKED IF MORE THAN ONE METHOD USED IN THE LAST 12 MONTHS

CWPBCMST
CF-3. During the last 12 months, when you and your (wife/partner) had sex together, which method did you and she use most of the time?

{ DISPLAY ONLY THOSE METHODS MENTIONED IN CWPALLBC CF-2

{ ASKED OF ALL WHO USED ANY METHOD IN 12 MONTHS EVEN IF CONDOM NOT LISTED

CONDFREQ
CF-4. During the last 12 months, what percent of the times that you and she had sex together did you use a condom?

Percentage __________ (IF 100%, GO TO SECTION CG)

{ ASKED OF ALL WHO USED ANY METHOD IN 12 MOS, EXCEPT 100% CONDOM USERS

CWPNOFRQ
CF-5. Please look at Card 48. During the last 12 months, that is since (INTERVIEW MONTH, 2001), how often did you or she use any method when you had sex together?

Every time .............................................1
Most of the time .......................................2
About half of the time ...............................3
Some of the time .................................4
None of the time ....................................5

Biological Children (CG)

CWPBIOKD
CG-1. Now I have some questions about children that you and your (wife/partner) may have had together. By this I mean, you were the biological father and she was the biological mother.

Have you and (WIFE/PARTNER) ever had a child together?

Yes ........1
CWPNUMKD
CG-2. Altogether, how many children have you had together?

Number of children ________

CWPCHNAM
CG-3. IF NUMBER OF CHILDREN =1, ASK:
What is the child’s first name or initials?

IF NUMBER OF CHILDREN >1, ASK:
What is the first name or initials of each of the children?

Name or initials __________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

{ BEGIN LOOP TO ASK ABOUT EACH CHILD

{ ASKED IF MORE THAN ONE CHILD

TALKBC
CG-4. Let’s talk about [CHILD].

CWPCHSEX
CG-5. If necessary, ASK: (Is this child male or female?)

Male .......1
Female .....2

CWPCHDOB_M/CWPCHDOB_Y
CG-6. In what month and year was (CHILD) born?

{ ASKED IF DOB OF THIS CHILD = DOB OF CHILD DESCRIBED EARLIER

MULTBIRT
CG-7. The birthday of this child is the same as (CHILD[X-n]). Was this a multiple birth?

Yes ............1 (GO TO CWPCHLIV CG-11)
No .............5

{ ASKED IF R MARRIED AND CAN’T TELL FROM DATES WHETHER MARRIAGE OR CHILDBIRTH CAME FIRST

CWPCHMAR
CG-8. Were you married to (WIFE/PARTNER) at the time of the birth?

Yes ............1 (GO TO CWPCHLIV CG-11)
No .............5

{ ASKED IF COHABITING WITH THIS WOMAN NOW OR (IF MARRIED TO HER NOW) NOT MARRIED TO HER AT CHILDBIRTH, BUT HAD PREMARITALLY COHABITED

CWPCHRES
CG-9. Were you living together with (WIFE/PARTNER) at the time of the birth?

Yes ............1 (GO TO CWPCHLIV CG-11)
No .............5

{ ASKED IF NOT MARRIED TO OR LIVING WITH WOMAN AT TIME OF BIRTH

CWPCHLRN
CG-10. When did you find out that (WIFE/PARTNER) was pregnant? Was it during the pregnancy or after the child was born?
During the pregnancy ........1
After the child was born ......2

(ASKED ABOUT ALL CHILDREN)

CWPCHLIV
CG-11. Please look at Card 57. Where does (CHILD) usually live now?

ENTER all that apply.

If child lives with R part-time, PROBE: Where else does this child live?

In this household full-time .........................1
In this household part-time ..........................2
Away at school or college ............................3
Living on own .........................................4
Living with other relatives ...........................5
Deceased ..................................................6
Placed for adoption or adopted .......................7
Placed in foster care ....................................8
Someplace else .........................................9

RANGE CHECK: 1,6,7,8, DK/RF CANNOT BE COMBINED WITH ANY OTHER RESPONSES.

(ASKED IF CHILD’S DATE OF BIRTH IS MISSING)

CWPCHAGE
CG-12. How old is (CHILD) now? Is [he/she] less than 5 years old, 5 to 18 years old, or 19 years or older?

Less than 5 years old ...............1
5-18 years old .........................2
19 years or older ......................3

(ASKED IF CHILD <19 AND BORN OUT OF WEDLOCK, BUT NOT DEAD, ADOPTED, OR IN FOSTER CARE)

CWPCHLEG
CG-13. Has your legal paternity been established? That is, did you sign any document that identifies you as the legal father of (CHILD)? Or has a court ruled that you are the father?

Yes .................................................1
No ....................................................5 (GO TO CG-15 CWPCHEV)

(ASKED IF CHILD <19 AND PATERNITY ESTABLISHED)

CWPCHHOP
CG-14. Did you establish paternity at the hospital when (CHILD) was born?

Yes .............1
No .............5

(IF RESPONDENT LIVES WITH CHILD, GO TO CWPCHWNT CG-17)

(ASKED IF CHILD < 19 AND NOT DEAD, ADOPTED, OR IN FOSTER CARE AND R DIDN’T LIVE WITH CHILD AT BIRTH AND DOESN’T LIVE WITH CHILD NOW)

CWPCHEV
CG-15. Did you ever live with (CHILD)?

Yes ............1
No ............5

(ASKED IF CHILD < 19 AND NOT DEAD, ADOPTED OR IN FOSTER CARE AND}
{ DOESN’T LIVE WITH R NOW

CWPCHFAR
CG-16. About how many miles away from here does (CHILD) live?

Number of miles
ENTER 0 if less than 1 mile

{ IF CHILD BORN MORE THAN 5 YEARS BEFORE INTERVIEW, GO TO END OF SECTION CG

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

CWPCHWNT
CG-17. Please look at Card 58. Right before (WIFE/PARTNER) became pregnant with [CHILD], did you, yourself, want to have a child at some time in the future?

NOTE: If R says that he already had a child, SAY: Right before she became pregnant, did you, yourself, want to have another child at some time in the future.

Definitely yes ....................1
Probably yes ....................2
Probably no ....................3 (GO TO CG-19 CWPCHHPY)
Definitely no ....................4 (GO TO CG-19 CWPCHHPY)

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

CWPCHSON
CG-18. Would you say that the pregnancy came sooner than you wanted, at about the right time, or later than you wanted?

Too soon ....................1
Right time ....................2
Later ....................3
Didn’t care ....................4

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

CWPCHHPY
CG-19. Please look at Card 59. On this scale, a one means that you were very unhappy about that pregnancy, and a ten means that you were very happy about that pregnancy. Tell me which number on the card best describes how you felt when you found out that your (wife/partner) was pregnant that time.

Number from 1 to 10 __________

{ RETURN TO BEGINNING OF LOOP TO ASK ABOUT NEXT CHILD, IF ANY

Current Pregnancy (CH)

{ IF SHE IS STERILE, GO TO SECTION CI

{ ASKED IF W/CP NOT STERILE AND R HAD SEX WITH HER IN LAST 12 MOS

CWPPRGNW
CH-1. Is your (wife/partner) pregnant with your child now?

Yes ............1 (GO TO CH-4 CWPCPWNT)
No ........5

{ ASKED IF R’S W/CP NOT PREGNANT NOW

CH-2. Are you and your (wife/partner) currently trying to get pregnant?

Yes ........1
No ........5 (GO TO SECTION CI)

{ ASKED IF R’S W/CP NOT PREGNANT NOW AND THEY’VE BEEN TRYING TO GET PREGNANT

CH-3. How long have you and she been trying to get pregnant?

Number of months ________ (GO TO SECTION CI)

{ ASKED IF R’S W/CP IS PREGNANT NOW

CH-4. Please look at Card 58. Right before (WIFE/PARTNER) became pregnant, did you, yourself, want to have a child at some time in the future?

NOTE: If R says that he already had children, say “Right before she became pregnant, did you, yourself, want to have another child at some time in the future?”

Definitely yes ..............1
Probably yes ..............2
Probably no ..............3 (GO TO CH-6 CWPCPHPY)
Definitely no ..............4 (GO TO CH-6 CWPCPHPY)

{ ASKED IF R’S W/CP IS PREGNANT NOW AND R DEFINITELY OR PROBABLY WANTED CHILD

CH-5. Would you say that the pregnancy came sooner than you wanted, at about the right time, or later than you wanted?

Too soon .....................1
Right time .....................2
Later .........................3
Didn’t care ...................4

{ ASKED IF R’S W/CP IS PREGNANT NOW

CH-6. Please look at Card 59. On this scale, a one means that you were very unhappy about that pregnancy, and a ten means that you were very happy about that pregnancy. Tell me which number on the card best describes how you felt when you found out that your (wife/partner) was pregnant that time.

Number from 1 to 10 ____________

Other Children – Wife/Partner’s Children (CI)

CH-1. Now I would like to ask you about any other children, whether biological, adopted, foster or legally guarded children, that (WIFE/PARTNER) may have had. Please be sure to include all of her children, even if they never lived with you.

When you began living with (WIFE/PARTNER), did she have any other children?

Yes ........1
No ........5 (GO TO SECTION CJ)

**CWPOKNUM**

CI-2. How many children did she have?

Number of children _________

**CWPOKAD**

CI-3. Did you legally adopt (this child / any of these children)?

Yes .............1

No .............5 (GO TO SECTION CJ)

**CWPOKADN**

CI-4. How many of these children did you legally adopt?

Number of children _________

{ ASKED IF R ADOPTED ANY OF HER CHILDREN

**CWPOKNAM**

CI-5. What is the first name or initials of (this child/ each of these children)?

Name/ initials _________

(NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

{ SET UP LOOP TO ASK ABOUT EACH ADOPTED CHILD

{ ASKED IF R ADOPTED ANY OF HER CHILDREN

**CWPOKSEX**

CI-6. (Thinking now of (CHILD), is / Is) this child male or female?

Male ........1

Female .......2

{ ASKED IF R ADOPTED ANY OF HER CHILDREN

**CWPOKLIV**

CI-7. Please look at Card 60. Where does [CHILD] usually live now?

ENTER all that apply

If child lives with R part-time, PROBE: Where else does this child live?

In this household full-time ...............1

In this household part-time ...............2

Away at school or college ..................3

Living on own ..................................4

Living with other relatives ...............5

Deceased .....................................6

Someplace else ..............................7

RANGE CHECK: 1,6 CANNOT BE COMBINED WITH ANY OTHER RESPONSES

{ ASKED IF R ADOPTED ANY OF HER CHILDREN AND CHILD NOT DEAD AND DOES NOT LIVE WITH R NOW

**CWPOKFAR**

CI-8. About how many miles away from here does (CHILD) live?

Number of miles _________

ENTER 0 if less than 1 mile
(ASKED IF R ADOPTED ANY OF HER CHILDREN AND CHILD NOT DEAD)

CWPOKAGE
CI-9. And how old is [CHILD] now?

   Age in years at last birthday _________
   ENTER 0 if less than 1 year

(RETURN TO BEGINNING OF LOOP TO ASK ABOUT NEXT CHILD, IF ANY)

Other Children (CJ)

CWPNBENV
CJ-1. Besides any children that we may have talked about already, have you and your (wife/partner) ever had any other children live with you under your care and responsibility?

   If necessary, SAY: (By this I mean that you or your (wife/partner) served as a formal or informal guardian to the child or that you were chiefly responsible for the child's care.)

   Do not include R’s own biological children from a previous relationship, which includes any biological child that he had with a former wife, cohabiting partner, girlfriend, etc.

   Yes ...........1
   No ............5 (GO TO SECTION D)

CWPNBNUM
CJ-2. How many children?

   Number of children _________

(ASKED IF ANY CHILD/REN UNDER CARE)

CWPNBREL
CJ-3. When (this child/the children) began living with you, was (he or she/any of them) the child of a relative by blood or by marriage?

   Yes ...........1
   No ............5

(ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY RELATED BY BLOOD/MARRIAGE)

CWPNBRL
CJ-4. How many were children of a relative by blood or by marriage?

   Number of children _________

(ASKED IF ANY CHILD/REN UNDER CARE)

CWPNBFOS
CJ-5. Was (this child/any of the children) a foster or related child who was placed in your home by a court, child welfare department, or social service agency?

   Yes ............1
   No .............5

(ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY PLACED BY SOCIAL SERVICES)

CWPNBFS
CJ-6. How many?

   Number of children _________
{ ASKED IF ANY CHILD/REN UNDER CARE
CWPNBAD
CJ-7. Did you legally adopt (this child / any of the children under your care and responsibility)?

Yes ........1
No ...........5 (GO TO SECTION D)

{ ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY ADOPTED
CWPNBADN
CJ-8. How many children did you legally adopt?

Number of children __________

{ ASKED IF ANY ADOPTED CHILD UNDER CARE
CWPNBAM
CJ-9. What is the first name or initials of (this child / each of these children)?

Name/ initials __________________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

{ SET UP LOOP TO ASK ABOUT EACH ADOPTED CHILD

{ ASKED IF ANY ADOPTED CHILD UNDER CARE
CWPNBSEX
CJ-10. (Thinking now of (CHILD), is / Is) this child male or female?

Male ............1
Female ..........2

{ ASKED IF ANY ADOPTED CHILD UNDER CARE
CWPNLIV
CJ-11. Please look at Card 60. Where does (CHILD) usually live now?

ENTER all that apply

If child lives with R part-time, PROBE: Where else does this child live?

In this household full-time .................1
In this household part-time .................2
Away at school or college ..................3
Living on own ..................................4
Living with other relatives ..................5
Deceased .....................................6
Someplace else ..................................7

RANGE CHECK: 1,6 CANNOT BE COMBINED WITH ANY OTHER RESPONSES

{ ASK IF ADOPTED CHILD NOT DECEASED AND NOT IN R’S HH
CWPNFAR
CJ-12. About how many miles away from here does [CHILD] live?

Number of miles __________
ENTER 0 if less than 1 mile

{ ASKED ABOUT ALL ADOPTED CHILDREN NOT DECEASED
CWPNBAGE
CJ-13. And how old is [CHILD] now?

Age in years at last birthday ________
ENTER 0 if less than 1 year
SECTION D

RECENT SEXUAL PARTNERS AND FIRST SEXUAL PARTNER

Screener to identify partner (DA)

LISTPR
DA-0. DO NOT READ to R (this screen is for your reference).

Summary of R’s Recent Sexual Partners

(LAST PARTNER) is the last partner and R (has been married to her/ has never been married to her, but has lived with her/has never been married to her and has never lived with her).

(2ND TO LAST PARTNER) is the 2nd to last partner and R (has been married to her/ has never been married to her, but has lived with her/has never been married to her and has never lived with her).

(3RD LAST PARTNER) is the 3rd to last partner and R (has been married to her/ has never been married to her, but has lived with her/has never been married to her and has never lived with her).

{ SET UP LOOP TO ASK ABOUT EACH RECENT PARTNER

{ ASKED IF A WIFE OR PARTNER WAS DISCUSSED IN SECTION C
THISWOM
DA-1. IF NECESSARY, ASK: (PARTNER’S NAME) is (your current wife/the woman you live with now), is that right?

   Yes ..................1
   No .................5

{ ASKED IF THIS WOMAN WAS NOT DISCUSSED IN SECTION C
PXRELAT
DA-2. Now I have some questions about your relationship with (PARTNER). You have said that you (were married to/lived with/were never married to and never lived with) (PARTNER). Is that right?

   Yes .....................1 (GO TO SECTION DB)
   No .....................5

{ IF PXRELAT = NO (NOT RIGHT)
PXRELAT2
DA-3. Were you ever married to or did you ever live together with (PARTNER’S NAME)?

   ENTER [1] if R says "both".

   Yes, married to ......................1
   Yes, lived together with .............2
   No ....................................5

Key Dates for Former Wives & Cohabiting Partners (DB)

{ ASKED IF R EVER MARRIED TO THIS WOMAN
MARDATEN_M/MARDATEN_Y
DB-1. In what month and year were you and she married?
(ASKED IF R EVER MARRIED TO THIS WOMAN BUT MARRIAGE DATE = DK/RF

AGEMARR

DB-2. How old were you when you and (PARTNER’S NAME) got married?

Age in years _______

(ASKED IF R EVER MARRIED TO THIS WOMAN

LIVTOGN

DB-3. Some couples live together without being married. By living together, we mean having a sexual relationship while sharing the same usual address. Did you and (PARTNER’S NAME) live together before you got married?

Yes ...........1
No ............5 (GO TO MARREND DB-7)

(ASKED IF R EVER COHABITED WITH THIS WOMAN

STRTLIVE_M/STRTLIVE_Y

DB-4. In what month and year did you and she first start living together?

(ASKED IF R EVER COHABITED WITH THIS WOMAN, BUT START DATE = DK/RF

AGELIV

DB-5. How old were you when you and (PARTNER’S NAME) first started living together?

Age in years _________

(ASKED IF R EVER COHABITED WITH THIS WOMAN

ENGAGTHN

DB-6. At the time you first started living together, were you and she engaged to be married or did you have definite plans to get married?

Yes ...........1
No ............5

(ASKED IF R EVER MARRIED TO THIS WOMAN

MARREND

DB-7. How did your marriage end?

Death of wife ............1
Divorce ..................2 (GO TO DIVORFIN DB-9)
Annulment ...............3 (GO TO DIVORFIN DB-10)
Separation ..............4 (GO TO DIVORFIN DB-11)

(ASKED IF R EVER MARRIED TO THIS WOMAN AND MARRIAGE ENDED BY HER DEATH

WIFEDIED_M/WIFEDIED_Y

DB-8. In what month and year did (WIFE/PARTNER) die?

ENTER DATE, THEN GO TO PXMOLAST DD-2

(ASKED IF R EVER MARRIED TO THIS WOMAN AND MARRIAGE ENDED BY DIVORCE

DIVORFIN_M/DIVORFIN_Y

DB-9. In what month and year did your divorce become final?

ENTER DATE, THEN GO TO STOPLIVE DB-11

(ASKED IF R EVER MARRIED TO THIS WOMAN AND MARRIAGE ENDED BY ANNULMENT

ANNULLED_M/ANNULLED_Y

DB-10. In what month and year did your annulment take place?
Stability of Relationship with Current Partner (DC)

(ASKED FOR ALL R’s WHO HAD AT LEAST 1 PARTNER IN THE LAST 12 MONTHS AND ABOUT ALL PARTNERS, EXCEPT IF SHE WAS A WIFE AND SHE DIED)

PXCURR
DC-1. Do you consider (PARTNER’S NAME) a current sexual partner?

Yes ............1
No ............5 (GO TO PXLAST DD-1)

(ASKED IF R WAS NEVER MARRIED TO THIS WOMAN AND SHE IS A CURRENT PARTNER)

PXMARRY
DC-2. Please look at Card 21. What is the chance that you and (PARTNER’S NAME) will marry each other?

No chance .................1
A little chance .............2
50-50 chance ..............3
A pretty good chance ......4
An almost certain chance ..5

Last Sex with Recent Partner (DD)

(ASKED ABOUT ALL RECENT PARTNERS EXCEPT IF SHE WAS WIFE AND SHE DIED)

PXLAST
DD-1. Now please think about the last time that you had sexual intercourse with (PARTNER’S NAME). Was that within the last week, within the last four weeks, or more than four weeks ago?

Within the last week ...............1
Within the last four weeks ..........2
More than four weeks ago ..........3

(ASKED ABOUT ALL PARTNERS)

PXSXLAST_M/PXSXLAST_Y
DD-2. (The next questions are about your relationship with your wife. Please think of the/ The) last time that you had sexual intercourse with ((PARTNER) /her). In what month and year was that?

(ASKED OF 1ST RANDOM SUBSAMPLE)

PXLUSE
DD-3. Please look at Card 45. That (last) time that you had sexual intercourse with (PARTNER’S NAME), did you or she use any methods to prevent pregnancy or sexually transmitted disease?

Yes ............1
No ............5 (GO TO DD-9 PXLSXPRB)

(ASKED OF 1ST RANDOM SUBSAMPLE)

PXLMETH
DD-4. Still looking at Card 45, that (last) time, what methods did you and she use?
ENTER all that apply.

Condom or rubber ..............................................1
Withdrawal or pulling out ....................................2
Vasectomy or male sterilization ...............................3
Pill ..........................................................4
Tubal ligation (“tubes tied”) or female sterilization .......5
Injection (Depo-Provera or Lunelle) ...........................6
Spermicidal foam/jelly/cream/film/suppository ...............7
Hormonal implant (Norplant™) ................................8
Rhythm or safe period .........................................9
Something else ................................................10

{ IF IN FIRST HALF SAMPLE, GO TO PXLSXPRB DD-9

( ASKED OF 2ND RANDOM SUBSAMPLE

PXLRUSE
DD-5. Please look at Card 46. That (last) time that you had sexual intercourse with (PARTNER’S NAME), did you, yourself, use any methods to prevent pregnancy or sexually transmitted disease?

Yes .................1
No .................5 (GO TO DD-7 PXLPUSE)

( ASKED IF HE USED METHOD AT LAST SEX

PXLMETH
DD-6. Still looking at Card 46 that (last) time, what methods did you, yourself, use to prevent pregnancy or sexually transmitted disease?

ENTER all that apply.

Condom or rubber ..............................................1
Withdrawal or pulling out ....................................2
Vasectomy or male sterilization ...............................3
Something else ................................................10

( ASKED OF 2ND RANDOM SUBSAMPLE

PXLPUSE
DD-7. Please look at Card 47. That (last) time that you had sexual intercourse with (PARTNER’S NAME), did she use any methods to prevent pregnancy or sexually transmitted disease?

Yes .................1
No .................5 (GO TO DD-9 PXLSXPRB)

( ASKED IF SHE USED A METHOD AT LAST SEX

PXLPMETH
DD-8. Still looking at Card 47, that (last) time, what methods did she use to prevent pregnancy or sexually transmitted disease?

ENTER all that apply.

Pill ..........................................................4
Tubal ligation (“tubes tied”) or female sterilization .......5
Injection (Depo-Provera or Lunelle) ...........................6
Spermicidal foam/jelly/cream/film/suppository ...............7
Hormonal implant (Norplant™) ................................8
Rhythm or safe period .......................................9
Something else .............................................10

{ ASKED IF NEVER MARRIED TO OR LIVED WITH THIS PARTNER AND
( NO METHOD OR ONLY A MALE METHOD REPORTED AT LAST SEX)

**PDLSXPRB**

DD-9. That (last) time, could [PARTNER’S NAME] have used a method that you didn’t know about?

Yes ............1  
No ..............5

( ASKED IF R NEVER MARRIED TO OR COHABITED WITH THIS WOMAN AND IF R HAD MORE THAN ONE PARTNER IN LIFE)

**PXMNTONCE**

DD-10. Have you had (did you have) sexual intercourse with (PARTNER’S NAME) more than once?

Yes .............1  
No ...............5

( IF AGE <18, GO TO PXFRLTN DD-14)

( ASKED IF R IS 18 OR OLDER OR IF R IS <18 AND PARTNER NOT CURRENT.)

**PXPAGE**

DD-11. How old was (PARTNER’S NAME) when you last had sex with her?

Age in years ________

( ASKED IF R DIDN’T KNOW HER AGE AT LAST SEX)

**PXRELAGE**

DD-12. Is she older than you, younger than you, or about the same age?

Older...............1  
Younger...............2  
About the same age...3

( ASKED IF R DIDN’T KNOW HER AGE AT LAST SEX AND SHE WAS OLDER OR YOUNGER)

**PXRELYRS**

DD-13. By how many years?

1-2 years............1  
3-5 years............2  
6-10 years...........3  
More than 10 years...4

( ASKED IF R NEVER MARRIED TO AND NEVER LIVED WITH THIS PARTNER)

**PXFRLTN**

DD-14. Please look at Card 44. At the time you (first / last) had sexual intercourse with (PARTNER’S NAME), how would you describe your relationship with her?

Married to her ..............................................1  
Engaged to her ..............................................2  
Living together in a sexual relationship, but not engaged ..3  
Going with her or going steady ..........................4  
Going out with her once in a while ......................5  
Just friends ................................................6  
Had just met her .......................................7  
Something else.........................................8

( ASKED OF CURRENT PARTNERS, MOST RECENT PARTNER, AND OF FORMER WIFE/COHAB)

**PXHISP**

DD-15. Is (PARTNER’S NAME) Hispanic or Latino, or of Spanish origin?

Yes ............1
No ...........5

(ASKED OF CURRENT PARTNERS, MOST RECENT PARTNER, AND OF FORMER WIFE/COHAB

PX RACE

DD-16. Which of the groups shown on Card 2 describes (PARTNER’S NAME)’s
racial background? Please select one or more groups.

ENTER all that apply.

NOTE: If the respondent mentions a mixture of multiple races (e.g.
  biracial, mixed, mulatto), probe for and code all racial groups
  that are part of the mix.

American Indian or Alaska Native....................1
Asian....................................................2
Native Hawaiian or other Pacific Islander........3
Black or African American..........................4
White....................................................5

(ASKED IF MULTIPLE RACE GROUPS SELECTED

PX BEST

DD-17. Which of these groups, that is (RESPONSES TO DD-16), would you say
  best describes (PARTNER’S NAME)’s racial background?

  {ONLY DISPLAY RESPONSES FROM DD-16.

(IF NEVER MARRIED TO OR LIVED WITH THIS PARTNER AND
(PARTNER IS NOT CURRENT OR MOST RECENT, GO TO SECTION DF.

Other Characteristics of Current or Most Recent Partner or Former Wife/Cohab
(DE)

(ASKED IF EVER MARRIED TO OR EVER LIVED WITH THIS WOMAN

PX DOB M/PXD OB Y

DE-1. In what month and year was (PARTNER’S NAME) born?

(ASKED THIS PARTNER IS CURRENT OR THE MOST RECENT

PX EDUC

DE-2. Please look at Card 11. What is the highest level of education she has
  completed?

  Less than high school ......................... 1
  High school graduate or GED ..................... 2
  Some college but no degree ..................... 3
  2-year college degree (e.g., Associate’s degree).4
  4-year college graduate (e.g., BA, BS) ......... 5
  Graduate or professional school ............. 6

(ASKED IF EVER MARRIED TO OR COHABITED WITH THIS PARTNER OR IF SHE IS
( CURRENT OR THE MOST RECENT

PX MAR BF

DE-3. (Has (PARTNER) ever been married/ At the time you and (PARTNER) (were
married/started living together), had she been married before?

  Yes ...... 1
  No ...... 5

(ASKED IF NEVER MARRIED TO OR LIVED WITH THIS PARTNER AND SHE IS CURRENT
( OR MOST RECENT

PX ANY CH
DE-4. When your relationship with (PARTNER’S NAME) began, did she have any biological, adopted, or foster children?

Yes ..................1
No ..................5 (GO TO DE-6 PXABLECH)

{ ASKED IF NEVER MARRIED TO OR LIVED WITH THIS PARTNER AND SHE IS CURRENT OR MOST RECENT AND SHE HAD CHILD/REN PXANYCHN

DE-5. Altogether, how many children did she have?

Number of children __________

{ ASKED IF PARTNER IS CURRENT AND NO METHOD USE AT LAST SEX OR METHOD WAS NOT FEMALE STERILIZATION PXABLECH

DE-6. Some women are not physically able to have children. As far as you know, is it physically possible for (PARTNER’S NAME) to have a baby?

Yes ..................1
No ..................5

{ IF R HAD SEX WITH THIS PARTNER ONLY ONCE, GO TO SECTION DH

First Sex with Recent Partner (DF)

{ ASKED IF R HAD SEX WITH THIS WOMAN MORE THAN ONCE PXSXFRST_M/PXSXFRST_Y

DF-1. Now I have some questions about the very first time that you had sexual intercourse with (PARTNER’S NAME).

That very first time, in what month and year was that?

{ ASKED IF DATE OF FIRST SEX MISSING PXAGFRST

DF-2. The very first time that you had sexual intercourse with (PARTNER’S NAME), how old were you?

Age in years __________

{ ASKED IF SHE IS HIS FIRST SEX PARTNER EVER AND R HAD SEX WITH HER MORE THAN ONCE AND PXFRLTN2

DF-3. Please look at Card 44. At the time you first had sexual intercourse with (PARTNER’S NAME), how would you describe your relationship with her?

Married to her ..............................................1
Engaged to her ..............................................2
Living together in a sexual relationship, but not engaged ...3
Going with her or going steady ................................4
Going out with her once in a while ..........................5
Just friends ................................................6
Had just met her ............................................7
Something else...............................................8

{ ASKED IF R HAD SEX WITH THIS WOMAN MORE THAN ONCE PXFUSE

DF-4. Please look at Card 45. That first time that you had sexual intercourse with (PARTNER’S NAME), did you or she use any methods to prevent pregnancy or sexually transmitted disease?
Yes ..............1
No ...............5 (GO TO SECTION DG)

( ASKED IF R HAD SEX WITH THIS WOMAN MORE THAN ONCE AND USED METHOD AT 1ST SEX

PXFMETH

DF-5. Still looking at Card 45, that first time, what methods did you and she use to prevent pregnancy or sexually transmitted disease?

ENTER all that apply.

Condom or rubber ..............................................1
Withdrawal or pulling out .....................................2
Vasectomy or male sterilization ...............................3
Pill ..............................................................4
Tubal ligation (“tubes tied”) or female sterilization .......5
Injection (Depo-Provera or Lunelle) ..........................6
Spermicidal foam/jelly/cream/film/suppository .................7
Hormonal implant (Norplant™) ..................................8
Rhythm or safe period .........................................9
Something else ..................................................10

( IF NO SEX WITH THIS PARTNER IN LAST 12 MONTHS, GO TO SECTION DH

Methods Used in Past 12 Months (DG)

( ASKED IF R HAD SEX WITH THIS PARTNER IN LAST 12 MONTHS AND HAD SEX MORE THAN ONCE WITH PARTNER

DGINTRO

DG-0. Now I have some questions about methods that you and (PARTNER’S NAME) used in the past 12 months, that is since (INTERVIEW MONTH, 2001), to prevent pregnancy or sexually transmitted disease.

(If you were not involved with her for the whole 12 months, please think of only that time that you were involved with her during the past 12 months.)

( ASKED OF CURRENT OR MOST RECENT PARTNER AND IF CAN’T TELL IF THEY USED

PXANYUSE

DG-1. Please look at Card 45. During the past 12 months, did you or she use any methods to prevent pregnancy or sexually transmitted disease when you had intercourse together? Please answer yes if you used a method even once.

Yes ..............1
No ...............5 (GO TO SECTION DH)

( ASKED OF CURRENT OR MOST RECENT PARTNER IF USED ANY METHOD IN LAST 12 MONTHS

PXMETHOD

DG-2. Please look at Card 45. Including any methods you may have already told me about and methods you may have used only once, during the past 12 months, which of these methods did you and she use to prevent pregnancy or sexually transmitted diseases?

ENTER all that apply.

Condom or rubber ..............................................1
Withdrawal or pulling out .....................................2
Vasectomy or male sterilization ...............................3
Pill ..............................................................4
Tubal ligation (“tubes tied”) or female sterilization .......5
Injection (Depo-Provera or Lunelle) .........................6
Spermicidal foam/jelly/cream/film/suppository ..............7
Hormonal implant (Norplant™) ..................................8
Rhythm or safe period .........................................9
Something else ................................................10

( ASKED IF MORE THAN ONE METHOD USED IN THE LAST 12 MONTHS

PXSTUSE

DG-3. During the past 12 months, when you had sex together which method did
you and she use most of the time?

( DISPLAY ONLY METHODS REPORTED IN PXMETHOD DG-2

( ASKED OF ALL WHO USED ANY METHOD IN 12 MONTHS EVEN IF CONDOM NOT LISTED

PXCONFRQ

DG-4. During the past 12 months, what percent of the times that you and she
had sex together did you use a condom?

Percent from 0 to 100 ____________________ (IF 100%, GO TO SECTION DH)

( ASKED OF ALL WHO USED ANY METHOD IN 12 MOS, EXCEPT 100% CONDOM USERS

PXNOFREQ

DG-5. Please look at Card 48. During the last 12 months, that is since
(INTERVIEW MONTH, 2001), how often did you or she use any method to
prevent pregnancy or disease when you had sex together?

Every time .........................1
Most of the time ...................2
About half of the time ...........3
Some of the time ..................4
None of the time ..................5

Biological Children with Recent Partner or Last Partner (DH)

PXCHILD

DH-1. Now I have some questions about children that you and (PARTNER’S NAME)
may have had together. By this I mean that you were the biological
father and she was the biological mother.

(Have you and (PARTNER’S NAME) ever had / Did you and (PARTNER’S NAME)
ever have) a child together?

Include all children R and his wife/partner have had together,
regardless of whether they were married at the time or whether
they are raising the child(ren) themselves or have placed the
child(ren) for adoption.

Yes ......................1
No ......................5 (GO TO SECTION DI)

PXCHILDN

DH-2. Altogether, how many children have you had together?

Number of children ________

PXCNAM

DH-3. What is the first name or initials of (this child/each of these
children)?

Name/ initials ________ (NO NAMES OR INITIALS ARE PLACED ON
THE DATA FILE.)

{ SET UP LOOP TO ASK ABOUT EACH CHILD

{ SAID IF MORE THAN ONE CHILD

DHINTRO2
DH-4. Let’s talk about (CHILD)

PXCTXSEX
DH-5. If necessary, ASK: (Is (CHILD) male or female?)

Male...................1
Female.................2

PXCTXBORN_M/PXCTXBORN_Y
DH-6. In what month and year was (CHILD) born?

{ ASKED IF DOB OF THIS CHILD = DOB OF CHILD DESCRIBED EARLIER

MULTBIRT
DH-7. The birthday of this child is the same as (CHILD[X-n]). Was this a multiple birth?

Yes ..........1
No ..........5

{ ASKED IF R MARRIED AND CAN’T TELL FROM DATES WHETHER MARRIAGE OR (CHILDBIRTH CAME FIRST

PXCTXMARB
DH-8. Were you married to (PARTNER’S NAME) at the time of the birth?

Yes ......1 (GO TO DH-11 PXXLIV)
No ......5

{ ASKED IF COHABITING WITH THIS WOMAN OR (IF MARRIED) NOT MARRIED TO HER AT CHILDBIRTH, BUT HAD PREMARITALLY COHABITED

PXCTXRES
DH-9. Were you living together with (PARTNER’S NAME) at the time of the birth?

Yes ......1 (GO TO DH-11 PXXLIV)
No ......5

{ ASKED IF NOT MARRIED TO OR LIVING WITH WOMAN AT TIME OF BIRTH

PXCTXKNOW
DH-10. When did you find out that (PARTNER’S NAME) was pregnant? Was it during the pregnancy or after the child was born?

During the pregnancy.............1
After the child was born..........2

PXXLIV
DH-11. Please look at Card 61. Where does (CHILD) usually live now?

ENTER all that apply.

If child lives with R part-time, PROBE: Where else does this child live?

In this household full-time ..................1
In this household part-time ..................2
With his/her mother .........................3
Away at school or college ..................4
Living on own ...............................5
Living with other relatives ...............6
Deceased ....................................7
Placed for adoption or adopted ..........8
Placed in foster care .....................9
Someplace else ..........................10

RANGE CHECK: 1,7,8,9 CANNOT BE COMBINED WITH ANY OTHER RESPONSES.

{ IF CHILD IS ALIVE, BUT CHILD’S DATE OF BIRTH IS MISSING

PXCXAGE
DH-12. How old is (CHILD) now? Is [he/she] less than 5 years old, 5 to
18 years old, or 19 years or older?

Less than 5 years old ...............1
5-18 years old ......................2
19 years or older ..................3

{ ASKED IF CHILD <19 AND BORN OUT OF WEDLOCK, BUT NOT DEAD, ADOPTED,
{ OR IN FOSTER CARE

PXCXLAW
DH-13. Has your legal paternity been established? That is, did you sign
any document that identifies you as the legal father of (CHILD)?
Or has a court ruled that you are the father?

Yes ..................1
No ..................5 (GO TO DH-15 PXCXEVER)

{ ASKED IF CHILD <19 AND PATERNITY ESTABLISHED

PXCXHOP
DH-14. Did you establish paternity at the hospital when (CHILD) was born?

Yes .............1
No .............5

{ IF RESPONDENT LIVES WITH CHILD, GO TO PXRWANT DH-17

{ ASKED IF CHILD <19 AND NOT DEAD, ADOPTED, OR IN FOSTER CARE AND
{ R DIDN’T LIVE WITH CHILD AT BIRTH AND DOESN’T LIVE WITH CHILD NOW

PXCXEVER
DH-15. Did you ever live with (CHILD)︖

Yes .................1
No .................5

{ ASKED IF CHILD <19 AND NOT DEAD, ADOPTED OR IN FOSTER CARE AND
{ DOESN’T LIVE WITH R NOW

PXCXFAR
DH-16. About how many miles away from here does (CHILD) live?

Number of miles
ENTER 0 if less than 1 mile

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

PXRWANT
DH-17. Please look at Card 58. Right before (PARTNER’S NAME) became
pregnant, did you, yourself, want to have a child at some time in
the future?

NOTE: If R says that he already had a child, SAY “Right before she
became pregnant, did you, yourself, want to have another child at some time in the future?"

Definitely yes .................1
Probably yes ..................2
Probably no ...................3 (GO TO DH-19 PXHPYPG)
Definitely no ..................4 (GO TO DH-19 PXHPYPG)

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH
{ AND R DEFINITELY OR PROBABLY WANTED A CHILD
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

PXSOON
DH-18. Would you say that the pregnancy came sooner than you wanted, at about the right time, or later than you wanted?

Too soon ......................1
Right time ......................2
Later ..........................3
Didn’t care ........................4

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

PXHPYPG
DH-19. Please look at Card 59. On this scale, a one means that you were very unhappy about that pregnancy, and a ten means that you were very happy about that pregnancy. Tell me which number on the card best describes how you felt when you found out that (PARTNER’S NAME) was pregnant that time.

Number from 1 to 10 __________

{ RETURN TO BEGINNING OF LOOP TO ASK ABOUT ANOTHER CHILD, IF ANY

Current Pregnancy (DI)

{ IF PARTNER STERILE, GO TO END OF SECTION DI

{ ASKED IF PARTNER IS CURRENT, IS ABLE TO HAVE CHILDREN (OR DK/RF),
{ HAD SEX WITH R IN LAST YEAR, AND DID NOT USE “TUBAL” AT LAST SEX

PXCPREG
DI-1. Is (PARTNER’S NAME) pregnant with your child now?

Yes .....................1 (GO TO DI-4 PXRWANT)
No ......................5

PXTRYING
DI-2. Are you and (PARTNER’S NAME) currently trying to get pregnant?

Yes .....................1
No ......................5 (GO TO END OF SECTION DI)

PTRYLONG
DI-3. How long have you and she been trying to get pregnant?

Number of months ______________ (GO TO END OF SECTION DI)

PXRWANT
DI-4. Please look at Card 58. Right before (PARTNER’S NAME) became pregnant, did you, yourself, want to have a child at some time in the future?
If R says that he already had a child, SAY “Right before she became pregnant, did you, yourself, want to have another child at some time in the future?”

Definitely yes ..................1
Probably yes ..................2
Probably no ..................3 (GO TO DI-6 PXCPFEEL)
Definitely no ..................4 (GO TO DI-6 PXCPFEEL)

{ IF R DEFINITELY OR PROBABLY WANTED A CHILD PXSOON
DI-5. Would you say that the pregnancy came sooner than you wanted, at about the right time, or later than you wanted?

Too soon ........................1
Right time ........................2
Later .............................3
Didn’t care ........................4

PXCPFEEL
DI-6. Please look the scale on Card 59. On this scale, a one means that you were very unhappy about this pregnancy, and a ten means that you were very happy about this pregnancy. Please tell me which number on the card best describes how you felt when you found out that (PARTNER’S NAME) was pregnant this time.

Number from 1 to 10 ____________

{ IF R WAS NEVER MARRIED TO AND NEVER LIVED WITH THIS PARTNER, { GO TO SECTION DL

Other Children -- Former Wife/Partner’s Children (DJ)

{ ASKED IF R EVER MARRIED TO OR LIVED WITH THIS PARTNER PXOTKID
DJ-1. Now I would like to ask you about any other children, whether biological, adopted, foster or legally guarded children, that (PARTNER’S NAME) may have had. Please be sure to include all of her children, even if they never lived with you.

When you began living with (PARTNER’S NAME), did she have any children?

Yes ........1
No ........5 (GO TO SECTION DK)

PXOKNUM
DJ-2. How many children did she have?

Number of children ____________

PXOKAD
DJ-3. Did you legally adopt (this child/any of these children)?

Yes ...........1
No ...........5 (GO TO SECTION DK)

PXOKADN
DJ-4. How many of these children did you legally adopt?

ENTER number of children ____________
PXOKNAM
DJ-5. What is the first name or initials of (this child/each of these children)?

Name/ initials _____________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

{ SET UP LOOP TO ASK ABOUT EACH ADOPTED CHILD

PXOKSEX
DJ-6. (Thinking now of (CHILD), is / Is) this child male or female?

Male ........1
Female ......2

PXOKLIV
DJ-7. Please look at Card 62. Where does this child usually live now?

ENTER all that apply

If child lives with R part-time, PROBE: Where else does this child live?

In this household full-time .................1
In this household part-time .................2
With his/her mother .........................3
Away at school or college ...................4
Living on own ...............................5
Living with other relatives .................6
Deceased ....................................7
Someplace else ..............................8

RANGE CHECK: 1,7 CANNOT BE COMBINED WITH ANY OTHER RESPONSES

{ ASK IF CHILD ADOPTED, NOT DECEASED, DOES NOT LIVE IN R’S HH

PXOKFAR
DJ-8. About how many miles away from here does (CHILD) live?

Number of miles _____________

ENTER 0 if less than 1 mile

{ ASKED ABOUT ALL ADOPTED CHILDREN NOT DECEASED

PXOKAGE
DJ-9. And how old is (CHILD) now?

Age in years at last birthday ____________

ENTER 0 if less than 1 year

Other Nonbiological Children (DK)

{ ASKED IF R EVER MARRIED TO OR LIVED WITH THIS WOMAN

PXNBEVR
DK-1. Besides any children that we may have talked about already, did you and your (wife/partner) ever have any other children live with you under your care and responsibility?

Please do not include R’s own biological children from any other relationship.

If necessary, SAY: (By this I mean that you or your (wife/partner)
served as a formal or informal guardian to the child or that you were chiefly responsible for the child's care.)

Yes .........1
No ...........5 (GO TO SECTION DL)

PXNBNUM
DK-2. How many children?

Number of children ________

( ASKED IF ANY CHILD/REN UNDER CARE
PXNBREL
DK-3. When the (child/children) began living with you, was (he or she(any of them) the child of a relative by blood or by marriage?

Yes ...........1
No ............ 5 (GO TO DK-5 PXNBFOS)

( ASKED IF MORE THAN ONE CHILD UNDER Care AND ANY RELATED BY BLOOD/MARRIAGE
PXNBRL
DK-4. How many were children of a relative by blood or by marriage?

Number of children ________

( ASKED IF ANY CHILD/REN UNDER CARE
PXNBFOS
DK-5. Was (this child(any of the children) a foster or related child who was placed in your home by a court, child welfare department, or social service agency?

Yes ............ 1
No .............. 5 (GO TO DK-7 PXNBAD)

( ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY PLACED BY SOCIAL SERVICES
PXNBFS
DK-6. How many?

Number of children __________

( ASKED IF ANY CHILD/REN UNDER CARE
PXNBAD
DK-7. Did you legally adopt (this child / any of the children under your care and responsibility)?

Yes ............ 1
No .............. 5 (GO TO SECTION DL)

( ASKED IF MORE THAN ONE CHILD UNDER CARE AND ADOPTED ANY
PXNBADN
DK-8. How many children did you legally adopt?

Number of children __________

( ASKED IF R ADOPTED ANY OF THE CHILDREN UNDER HIS CARE
PXNBAN
DK-9. What is the first name or initials of (this child / each of these children)?

Name/ initials __________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)
{ SET UP LOOP TO ASK ABOUT EACH ADOPTED CHILD

{ ASKED IF R ADOPTED CHILD UNDER CARE

PXNBSEX

DK-10. (Thinking now of (CHILD), is /Is) this child male or female?

Male ..........1
Female ..........2

{ ASKED IF R ADOPTED CHILD UNDER CARE

PXNBLIV

DK-11. Please look at Card 62. Where does (CHILD) usually live now?

ENTER all that apply

If child lives with R part-time, PROBE: Where else does this child live?

In this household full-time .................1
In this household part-time .................2
With his/her mother ..........................3
Away at school or college ....................4
Living on own ...............................5
Living with other relatives ..................6
Deceased .....................................7
Someplace else ..............................8

RANGE CHECK: 1,7 CANNOT BE COMBINED WITH ANY OTHER ANSWERS

{ ASKED IF ADOPTED CHILD NOT DECEASED AND NOT IN R’S HH

PXNBFAR

DK-12. About how many miles away from here does (CHILD) live?

Number of miles ______________
ENTER 0 if less than 1 mile

{ ASKED ABOUT ALL ADOPTED CHILDREN NOT DECEASED

PXNBAGE

DK-13. And how old is (CHILD) now?

Age in years at last birthday __________
ENTER 0 if less than 1 year

{ RETURN TO BEGINNING OF SECTION D TO DISCUSS NEXT PARTNER, IF ANY

First sex ever (DL)

{ IF FIRST PARTNER ALREADY DISCUSSED, GO TO END OF SECTION D

{ ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER

FPFIRST_M/FPFIRST_Y

DL-1. The next section is about your first sexual experience with a female.

Please think back to the very first time in your life that you ever had
sexual intercourse with a female. In what month and year was that?

{ ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER

FPAGE

DL-2. That very first time that you had sexual intercourse with a female, how
old were you?
Age in years ___________ (GO TO FPNAME DL-6)

(ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER AND R DOESN’T KNOW HIS AGE AT FIRST SEX)

FPAGE18
DL-3. Were you less than 18 or were you 18 years old or older?

Less than 18.........1
18 years or older.....2 (GO TO FPAGE20 DL-5)

FPAGE15
DL-4. Were you less than 15 or were you 15 years old or older?

Less than 15 ...........1 (GO TO FPNAME DL-6)
15 years or older ......2 (GO TO FPNAME DL-6)

FPAGE20
DL-5. Were you less than 20 or were you 20 years old or older?

Less than 20 ............1
20 years or older ......2

(ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER)

FPNAME
DL-6. Please tell me the name or initials of your first sexual partner so that I can refer to her during the interview.

Name or initials ___________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

(ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER)

FPAGE
DL-7. How old was (FPNAME) when you had sexual intercourse with her that first time?

Age in years ___________ (GO TO FPRLTN DL-10)

(ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER AND R DOESN’T KNOW HER AGE AT FIRST SEX)

FPRELAGE
DL-8. Was she older than you, younger than you or the same age?

Older ............1
Younger ............2
About same age ...3 (GO TO FPRLTN DL-10)

FPRELYRS
DL-9. By how many years?

1-2 years.............1
3-5 years.............2
6-10 years..........3
More than 10 years....4

(ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER)

FPRLTN
DL-10. Please look at Card 44. At the time you first had sexual intercourse with (FIRST PARTNER/your first partner), how would you describe your relationship with her?

Married to her ..............................................1
Engaged to her ..............................................2
Living together in a sexual relationship, but not engaged ...3
Going with her or going steady ..............................4
Going out with her once in a while ..........................5
Just friends ................................................6
Had just met her ............................................7
Something else...............................................8

( ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER
FPUSE
DL-11. Please look at Card 45. That first time that you had sexual intercourse with (PARTNER), did you or she use any methods to prevent pregnancy or sexually transmitted disease?

Yes ..............1
No ...............5 (GO TO DL-13 FPPROBE)

( ASKED IF VERY FIRST SEX PARTNER WAS NOT A RECENT PARTNER AND METHOD
{ USED AT FIRST SEX
FPMETH
DL-12. Still looking at Card 45, that first time, what methods did you and she use to prevent pregnancy or sexually transmitted disease?
ENTER all that apply

Condom or rubber ..............................................1
Withdrawal or pulling out .....................................2
Vasectomy or male sterilization ...............................3
Pill ..........................................................4
Tubal ligation ("tubes tied") or female sterilization ........5
Injection (Depo-Provera or Lunelle) ..........................6
Spermicidal foam/jelly/cream/film/suppository ..........7
Hormonal implant (Norplant™) ..............................8
Rhythm or safe period .........................................9
Something else ................................................10

( ASKED IF NO METHOD USED OR ONLY MALE METHOD USED AT FIRST SEX
FPPROBE
DL-13. That first time, could (PARTNER) have used a method that you didn’t know about?

Yes ............1
No .............5

( IF NEVER MARRIED OR COHABITED, GO TO SECTION F.
SECTION E

FORMER WIVES AND FIRST COHABITING PARTNER

Enumeration of former wives and first cohabiting partner (EA)

{ IF NO FORMER WIVES OR FIRST COHABITING PARTNER TO DISCUSS HERE,
  { GO TO SECTION F

{ ASKED IF R HAS AT LEAST ONE FORMER WIFE AND/OR ONE FORMER COHAB

EAINTRO1
EA-0. You’ve said that you have been married to one woman. In this section,
I’ll ask you about your former wife.

{ THIS INTRO HAS MANY OTHER VARIANTS BASED ON THE NUMBER OF FORMER WIVES OR
{ COHABITING PARTNERS R HAS HAD.
{ IF R HAS HAD MORE THAN 1 FORMER COHABITING PARTNER, HE WILL BE ASKED ONLY
{ ABOUT THE FIRST ONE.

{ ASKED IF R HAS AT LEAST ONE FORMER WIFE

FWNAME[X]
EA-1. So that I can refer to her in the interview, please tell me the first
name or initials of your (former wife / wife / (first/second/third/etc)
wife).

Name/ initials__________________ (NO NAMES OR INITIALS ARE PLACED ON
THE DATA FILE.)

{ ASKED IF R HAS AT LEAST ONE FORMER WIFE AND NONE DISCUSSED IN SECTION D
{ AS A “RECENT SEXUAL PARTNER”

FWVERIFY[X]
EA-2. I need to check whether we’ve already talked about (WIFE). We talked
about (your recent / some of your recent) sexual partners, that is,
women you had sex with in the past 12 months. Is (WIFE) one of your
recent sexual partners that we already talked about?

Yes ............1
No .............5

{ ASKED IF R HAS AT LEAST ONE FORMER COHABITING PARTNER

FCNAME
EA-3. You may have already told me this, but please tell me the first name or
initials of (first of the other women / other woman / first of the women
/ woman) you lived with.

Name or initials _________________

{ ASKED IF R HAS AT LEAST ONE FORMER COHABITING PARTNER AND
{ NONE DISCUSSED IN SECTION D

FCVERIFY
EA-4. I need to check whether we’ve already talked about (PARTNER). We talked
about (your recent / some of your recent) sexual partners, that is,
women you had sex with in the past 12 months. Is (PARTNER) one of your
recent sexual partners that we already talked about?

Yes ............1 (GO TO SECTION F)
No .............5

{ IF THERE ARE ANY FORMER WIVES OR FIRST COHABITING PARTNER TO DISCUSS HERE
Key Dates for Former Wives & First Cohabiting Partner (EB)

EBINTRO
EB-1. Now I’ll ask you about your relationship with (WIFE/PARTNER).

( ASKED IF R WAS EVER MARRIED TO THIS WOMAN
FWMAREND_M/FWMAREND_Y
EB-2. In what month and year were you and she married?

( ASKED IF R EVER MARRIED TO THIS WOMAN BUT MARRIAGE DATE = DK/RF
AGEMARRN
EB-3. How old were you when you and (WIFE/PARTNER) got married?

   Age in years _______

( ASKED IF R EVER MARRIED TO THIS WOMAN
LIVTOGN
EB-4. Some couples live together without being married. By living together, we mean having a sexual relationship while sharing the same usual address. Did you and (WIFE/PARTNER) live together before you got married?

   Yes ........1
   No ........5 (GO TO EB-8 MARREN)

( ASKED IF R EVER COHABITED WITH THIS WOMAN
STRTLIVE_M/STRTLIVE_Y
EB-5. In what month and year did you and she first start living together?

( ASKED IF R EVER COHABITED WITH THIS WOMAN, BUT START DATE = DK/RF
AGELIV
EB-6. How old were you when you and (WIFE/PARTNER) first started living together?

   Age in years _______

{ COMPARE DATES OF FIRST MARRIAGE AND FIRST COHABITATION. IF RESPONDENT NEVER
{ MARRIED OR IF FIRST COHABITATION CAME BEFORE FIRST MARRIAGE, GO TO ENGAGTHN
{ EB-7. ELSE, IF FIRST COHABITATION CAME AFTER FIRST MARRIAGE, GO TO SECTION
{ F. ELSE, IF CAN’T TELL, ASK FSTUNION EB-6a.

FSTUNION
EB-6a. Who did you live with first, [NAME OF COHABITING PARTNER] or your (first) wife?

   First cohab ..............1
   First wife ..............2 (GO TO SECTION F)

( ASKED IF R EVER COHABITED WITH THIS WOMAN
ENGAGTHN
EB-7. At the time you first started living together with [WIFE/PARTNER], were you and she engaged to be married or did you have definite plans to get married?

   Yes ........1
   No ........5
( IF NEVER MARRIED TO THIS WOMAN, GO TO STOPLIVE EB-12)

( ASKED IF R EVER MARRIED TO THIS WOMAN)

MARREND

EB-8. How did your marriage end?

Death of wife ..........1
Divorce ................2 (GO TO EB-10 DIVORFIN)
Annulment ..............3 (GO TO EB-11 ANNULLED)
Separation .............4 (GO TO EB-12 STOPLIVE)

( ASKED IF R EVER MARRIED TO THIS WOMAN AND MARRIAGE ENDED BY HER DEATH)

WIFEDIED_M/WIFEDIED_Y

EB-9. In what month and year did (WIFE/PARTNER) die?

ENTER DATE, THEN GO TO EC SERIES

( ASKED IF R EVER MARRIED TO THIS WOMAN AND MARRIAGE ENDED BY DIVORCE)

DIVORFIN_M/DIVORFIN_Y

EB-10. In what month and year did your divorce become final?

ENTER DATE, THEN GO TO STOPLIVE EB-12

( ASKED IF R EVER MARRIED TO THIS WOMAN AND MARRIAGE ENDED BY ANNULMENT)

ANNULLED_M/ANNULLED_Y

EB-11. In what month and year did your annulment take place?

( ASKED IF [R EVER MARRIED TO THIS WOMAN AND [[MARRIAGE ENDED IN DIVORCE OR
( ANNULMENT] OR [R IS CURRENTLY SEPARATED FROM HER]]] OR IF R NEVER MARRIED
( TO THIS WOMAN BUT DID COHABIT WITH HER)

STOPLIVE_M/STOPLIVE_Y

EB-12. In what month and year did you and (WIFE/PARTNER) last stop living together?

Characteristics Wife/Partner (EC)

( ASKED IF R EVER MARRIED TO OR LIVED WITH THIS WOMAN)

FWPDDB_M/FWPDDB_Y

EC-1. Now I have some more questions about (WIFE/PARTNER).

( ASKED IF R EVER MARRIED TO OR LIVED WITH THIS WOMAN AND
( HER BIRTH DATE = DK/RF)

FWPAGE

EC-2. How old was (WIFE/PARTNER) when (she died/ your divorce became
final/your annulment took place/ you and she last stopped living
together)?

Age in years _______

( ASKED IF THIS WOMAN WAS R’S FIRST WIFE OR COHABITING PARTNER)

FWPHISP

EC-3. (Was/Is (WIFE/PARTNER) Hispanic or Latino, or of Spanish origin)?

Yes ....1
No ....5

( ASKED IF THIS WOMAN WAS R’S FIRST WIFE OR COHABITING PARTNER)

FWPRACE

56
EC-4. Which of the groups shown on Card 2 describes (WIFE/PARTNER)’s racial background? Please select one or more groups.

ENTER all that apply.

NOTE: If the respondent mentions a mixture of multiple races (e.g. biracial, mixed, mulatto), PROBE for and CODE all racial groups that are part of the mix.

American Indian or Alaska Native ...............1
Asian ..........................................2
Native Hawaiian or Other Pacific Islander ......3
Black or African American ......................4
White ..........................................5

(ASKED IF THIS WOMAN WAS R’S FIRST WIFE OR COHABITING PARTNER AND MORE THAN ONE RACE GROUP MENTIONED)

FWPRACER

EC-5. Which of these groups, that is (RESPONSES IN FWPRACE), would you say best describes your (WIFE/PARTNER)’s racial background?

(DISPLAY ONLY CATEGORIES MENTIONED FROM FWPRACE EC-4)

(ASKED IF R EVER MARRIED TO OR LIVED WITH THIS WOMAN)

FWPMARB

EC-6. At the time you and she (were married/ started living together), had she ever been married?

Yes .......1
No .......5 (GO TO SECTION EE)

Biological Children with Former Wife/Cohabiting Partner (ED)

FWPBIOKID

ED-1. Now I have some questions about children that you and (WIFE/PARTNER) may have had together. By this I mean that you were the biological father and she was the biological mother.

Did you and (WIFE/PARTNER) ever have a child together?

Include all children R and his former wife/partner had together, regardless of whether they were married at the time or whether they raised the child(ren) themselves or placed the child(ren) for adoption.

Yes .......1
No .......5 (GO TO SECTION EE)

(ASKED IF THEY HAD CHILD/REN)

FWPNUMKID

ED-2. Altogether, how many children did you have together?

Number of children ________

FWPCHNAM

ED-3. What is the first name or initials of (this child/each of these children)?

Name or initials ____________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)
{SET UP LOOP TO ASK ABOUT EACH CHILD

(SAID IF MORE THAN ONE CHILD
EDINTRO2
ED-4. Let’s talk about (CHILD).

FWPCHSEX
ED-5. If necessary, ASK: (Is (CHILD) male or female?)

   Male ......1
   Female ....2

FWPCHDOB_MO/FWPCHDOB_YR
ED-6. In what month and year was (CHILD) born?

(ASKED IF BIRTHDAY OF THIS CHILD IS SAME AS PREVIOUSLY MENTIONED CHILD
MULTBIRT
ED-7. The birthday of this child is the same as (CHILD[X-n]), was this a multiple birth?

   Yes ................1 (GO TO ED-11 FWPCHLIV)
   No ................5

(ASKED IF THEY WERE MARRIED AND CAN’T TELL FROM DATES WHETHER MARRIAGE OR
CHILD BIRTH CAME FIRST
FWCHMAR B
ED-8. Were you married to (WIFE/PARTNER) at the time of the birth?

   Yes ......1 (GO TO ED-11 FWPCHLIV)
   No ......5

(ASKED IF COHABITED WITH THIS WOMAN OR (IF MARRIED) NOT MARRIED TO
HER AT CHILD BIRTH, BUT HAD PREMARITALLY COHABITED
FWPCHRES
ED-9. Were you living together with (WIFE/PARTNER) at the time of the birth?

   Yes ......1 (GO TO ED-11 FWPCHLIV)
   No ......5

(ASKED IF NOT MARRIED TO OR LIVING WITH WOMAN AT TIME OF BIRTH
FWPCHLRN
ED-10. When did you find out that (WIFE/PARTNER) was pregnant? Was it during the pregnancy or after the child was born?

   During the pregnancy ............1
   After the child was born ........2

(ASKED ABOUT ALL CHILDREN
FWPCHLIV
ED-11. Please look at Card 61. Where does (CHILD) usually live now?

   ENTER all that apply.

   If child lives with R part-time, PROBE: Where else does this child live?

   In this household full-time ...............1
   In this household part-time ...............2
   With his/her mother ......................3
   Away at school or college ...............4
   Living on own ............................5
Living with other relatives ..................6
Deceased ....................................7
Placed for adoption or adopted ..............8
Placed in foster care ..........................9
Someplace else ...............................10

{ ASKED IF CHILD IS ALIVE AND CHILD’S DATE OF BIRTH IS MISSING

FWPCHAGE
ED-12. How old is (CHILD[X]) now? Is [he/she] less than 5 years old, 5 to 18 years old, or 19 years or older?

Less than 5 years old ..............1
5-18 years old ..................2
19 years or older ..................3

{ ASKED IF CHILD <19 AND BORN OUT OF WEDLOCK, BUT NOT DEAD, ADOPTED,
{ OR IN FOSTER CARE

FWPCHEVR
ED-15. Did you ever live with (CHILD)?

Yes .........1
No .........5

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH;
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

FWPRWANT
ED-17. Please look at Card 58. Right before (WIFE/PARTNER) became pregnant, did you, yourself, want to have a child at some time in the future?

NOTE: If R says that he already had a child, SAY Right before she became pregnant, did you, yourself, want to have another child at some time in the future?
Definitely yes ................1
Probably yes ................2
Probably no ..................3 (GO TO ED-19 FWPHYPYG)
Definitely no ................4 (GO TO ED-19 FWPHYPYG)

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH
{ AND R DEFINITELY OR PROBABLY WANTED A CHILD
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE
FWPSOON
ED-18. Would you say that the pregnancy came sooner than you wanted, at
about the right time, or later than you wanted?
Too soon ......................1
Right time .....................2
Later ...........................3
Didn’t care ....................4

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED
{ TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE
FWPHYPYG
ED-19. Please look at Card 59. On this scale, a one
means that you were
very unhappy
about that pregnancy, and a ten
means that you were
very happy
about that pregnancy. Tell me which number on the card
best describes how you
felt when you found out that (WIFE/PARTNER)
was pregnant that time.

Number from 1 to 10 __________________

{ RETURN TO BEGINNING OF LOOP TO ASK ABOUT NEXT CHILD, IF ANY

Other Children -- Former Wife/Partner’s Children (EE)
FWPOTKID
EE-1. Now I would like to ask you about any other children, whether
biological, adopted, foster or legally guarded children, that
(WIFE/PARTNER) may have had. Please be sure to include all of her
children, even if they never lived with you.

When you began living with (WIFE/PARTNER), did she have any children?

Yes ..........1
No ..........5 (GO TO SECTION EF)

FWPOKNUM
EE-2. How many children did she have?

Number of children __________

FWPOKAD
EE-3. Did you legally adopt (this child / any of these children)?

Yes ............1
No ............5 (GO TO SECTION EF)

FWPOKADN
EE-4. How many of these children did you legally adopt?

Number of children ________
FWPOKNAM
EE-5. What is the first name or initials of (this child/ each of these children)?

Name or initials ____________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

{ SET UP LOOP TO ASK ABOUT EACH ADOPTED CHILD

FWPOKSEX
EE-6. (Thinking now of (CHILD), is /Is) this child male or female?

   Male .......1
   Female ......2

FWPOKLIV
EE-7. Please look at Card 62. Where does this child usually live now?

   ENTER all that apply

   If child lives with R part-time, PROBE: Where else does this child live?

   In this household full-time ...............1
   In this household part-time ...............2
   With his/her mother .......................3
   Away at school or college ...............4
   Living on own ............................5
   Living with other relatives .............6
   Deceased ................................7
   Someplace else ...........................8

   RANGE CHECK: 1,7 CANNOT BE COMBINED WITH ANY OTHER RESPONSES

{ ASK IF ADOPTED CHILD NOT DECEASED AND NOT IN R’S HH

FWPOKFAR
EE-8. About how many miles away from here does (CHILD) live?

   Number of miles __________
   ENTER 0 if less than 1 mile

{ ASK ABOUT ALL ADOPTED CHILDREN NOT DECEASED

FWPOKAGE
EE-9. And how old is (CHILD) now?

   Age in years at last birthday .............
   ENTER 0 if less than 1 year old.

{ RETURN TO BEGINNING OF LOOP TO ASK ABOUT NEXT CHILD, IF ANY

Other Nonbiological Children (EF)

FWPNBEVR
EF-1. Besides any children that we may have talked about already, did you and your (wife/partner) ever have any other children live with you under your care and responsibility?

   IF NECESSARY, SAY: By this I mean that you or your (wife/partner) served as a formal or informal guardian to the child or that you were chiefly responsible for the child's care.
Yes ........1
No ........5 (GO TO SECTION F)

FWPNBNUM
EF-2. How many children?

Number of children ________

(ASKED IF ANY CHILD/REN UNDER CARE

FWPNBREL
EF-3. When the (child/children) began living with you, was (he or she/any of them) the child of a relative by blood or by marriage?

Yes ............. 1
No ............. 5 (GO TO EF-5 FWPNBFOS)

(ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY RELATED BY BLOOD/MARRIAGE

FWPNBRL
EF-4. How many were children of a relative by blood or by marriage?

Number of children ______

(ASKED IF ANY CHILD/REN UNDER CARE

FWPNBFOS
EF-5. Was (this child/any of the children) a foster or related child who was placed in your home by a court, child welfare department, or social service agency?

Yes ................. 1
No ................. 5 (GO TO EF-7 FWPNBAD)

(ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY PLACED BY SOCIAL SERVICES

FWPNBFS
EF-6. How many?

Number of children ______

(ASKED IF ANY CHILD/REN UNDER CARE

FWPNBAD
EF-7. Did you legally adopt (this child / any of the children under your care and responsibility)?

Yes ................. 1
No ................. 5 (GO TO SECTION F)

(ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY ADOPTED

FWPNBADN
EF-8. How many children did you legally adopt or become legal guardian to?

Number of children _________

(ASKED IF R ADOPTED CHILD UNDER CARE

FWPNBNAM
EF-9. What is the first name or initials of (this child/each of these children)?

Name/ initials ___________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

(SET UP LOOP TO ASK ABOUT EACH ADOPTED CHILD

(ASKED IF R ADOPTED CHILD UNDER CARE
FWPNBSEX
EF-10. (Thinking now of (CHILD), is/Is) this child male or female?
   Male ...........1
   Female ...........2

( ASKED IF R ADOPTED CHILD UNDER CARE
FWPNBLIV
EF-11. Please look at Card 62. Where does (CHILD) usually live now?
   ENTER all that apply
   If child lives with R part-time, PROBE: Where else does this child live?
   In this household full-time .................1
   In this household part-time .................2
   With his/her mother ..........................3
   Away at school or college ...................4
   Living on own ...............................5
   Living with other relatives ..................6
   Deceased ....................................7
   Someplace else ..............................8

RANGE CHECK: 1,7 CANNOT BE COMBINED WITH ANY OTHER RESPONSES

( ASK IF ADOPTED CHILD NOT DECEASED AND NOT IN R’S HH
FWPNBFR
EF-12. About how many miles away from here does (CHILD) live?
   Number of miles ______________
   ENTER 0 if less than 1 mile

( ASK OF ALL ADOPTED CHILDREN NOT DECEASED
FWPNBAGE
EF-13. And how old is (CHILD) now?
   Age in years ___________
   ENTER 0 if less than 1 year old.

{ RETURN TO BEGINNING OF LOOP TO DISCUSS NEXT CHILD, IF ANY.
( RETURN TO BEGINNING OF SECTION EB TO DISCUSSION NEXT WIFE OR COHABITING
( PARTNER, IF ANY.
SECTION F

OTHER BIOLOGICAL CHILDREN, OTHER ADOPTED CHILDREN, OTHER PREGNANCIES

{ IF ALL SEXUAL PARTNERS OF THE RESPONDENT HAVE BEEN DISCUSSED ALREADY AND:
 {  AGE < 18, GO TO SECTION FC
 {  AGE >= 18, GO TO SECTION FB
 { IF NEVER HAD SEX AND:
 {  AGE < 18 GO TO SECTION H
 {  AGE >=18 GO TO SECTION FB

Other biological children with nonmarital partners (FA)

OTBCHIL
FA-1. You told me that you have had (no biological children with the women/ one biological child with one of the women /[NUMBER] biological children with the women) we already talked about. Now, please think of other sexual partners you have had in your life. (As far as you know / Not counting the child we already talked about, as far as you know / Not counting the children we already talked about, as far as you know), did you ever have any (biological/ other biological) children with any of them?

Yes ...............1
No ...............5 (GO TO FA-3 OTBCHILN)

{ ASKED IF OTBCHIL=NO OR DK/RF

OTBPROBE
FA-2. Could you have fathered a child with any of these women that you don’t know about?

Yes ...............1 (GO TO SECTION FB)
No ...............5 (GO TO SECTION FB)

OTBCHILN
FA-3. How many (biological/ other biological) children have you had?

Number of children __________

OTBCHNAM
FA-4. What is the first name or initials of (this child/each of these children)?

Child’s name/initiuls ___________ (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

{ ASKED IF MORE THAN ONE CHILD

OTBSAME
FA-5. Do these children have the same biological mother?

Yes.................1
No.................5

OTBMOMX
FA-6. What is the first name or initials of (CHILD’S /THEIR) biological mother?

Mother’s name/initiuls ___________ (NO NAMES OR INITIALS ARE
{ SET UP LOOP TO ASK ABOUT EACH CHILD

DISPLAY FOR INTERVIEWER:

These children are displayed for the interviewer’s reference only.

{CHILD’S NAME} is the child of {MOTHER’S NAME}

FAINTRO
FA-7. Let’s talk about (CHILD)

OBCSEXX
FA-8. If necessary, ASK: (Is (CHILD) male or female?)

Male.............1
Female...........2

OBCDOB_M/OBCDOB_Y
FA-9. In what month and year was (CHILD) born?

{ ASKED IF BIRTHDAY OF THIS CHILD SAME AS PREVIOUS CHILD

MULTBIRT
FA-10. The birthday of this child is the same as (ANOTHER CHILD). Was this a multiple birth?

Yes .............1 (GO TO FA-13 OBCLIVE)
No .............5

OBCMAGEX
FA-11. When (CHILD) was born, how old was (MOTHER’S NAME)?

Age in years ________

OBCMLIV
FA-12. Were you living together with (MOTHER’S NAME) at the time of the birth?

Yes .............1 (GO TO FA-14 OBCLIVEX)
No .............5

{ ASKED IF NOT LIVING WITH WOMAN AT TIME OF BIRTH

OBCKNOWX
FA-13. When did you find out that (MOTHER’S NAME) was pregnant with (CHILD)? Was it during the pregnancy or after (CHILD) was born?

During the pregnancy.........1
After the child was born......2

{ ASKED ABOUT ALL CHILDREN

OBCLIVEX
FA-14. Please look at Card 61. Where does (CHILD) usually live now?

ENTER all that apply.

If child lives with R part-time, PROBE: Where else does this child live?

In this household full-time .................1
In this household part-time ..................2
With his/her mother ........................3
Away at school or college ...................4
Living on own ..............................5
Living with other relatives ...................6
Deceased ....................................7
Placed for adoption or adopted ..............8
Placed in foster care ........................9
Someplace else .............................10

RANGE CHECK: 1,7,8,9 CANNOT BE COMBINED WITH ANY OTHER RESPONSES.

{ ASKED IF CHILD ALIVE AND CHILD’S DATE OF BIRTH MISSING

OBCAGE
FA-15. How old is (CHILD[X]) now? Is [he/she] less than 5 years old, 5 to 18 years old, or 19 years or older?

   Less than 5 years old .................1
   5-18 years old ........................2
   19 years or older .....................3

{ ASKED IF CHILD <19 AND NOT DEAD, ADOPTED, OR IN FOSTER CARE

OBCLAWX
FA-16. Has your legal paternity been established? That is, did you sign any document that identifies you as the legal father of (CHILD)? Or has a court ruled that you are the father?

   Yes ....................................1
   No ....................................5 (GO TO FA-18 OBCEVERX)

{ASKED CHILD <19 AND PATERNITY ESTABLISHED

OBCHOPX
FA-17. Did you establish paternity at the hospital when [CHILD] was born?

   Yes ...............1
   No ...............5

{ IF RESPONDENT LIVES WITH CHILD, GO TO OBCRWANX FA-20

{ ASKED IF CHILD < 19 AND NOT DEAD, ADOPTED, OR IN FOSTER CARE AND
{ R DIDN’T LIVE WITH CHILD AT BIRTH AND DOESN’T LIVE WITH CHILD NOW

OBCEVERX
FA-18. Did you ever live with (CHILD)?

   Yes............................1
   No............................5

{ ASKED IF CHILD < AND NOT DEAD, ADOPTED OR IN FOSTER CARE AND
{ DOESN’T LIVE WITH R NOW

OBCFAR
FA-19. About how many miles away from here does (CHILD) live?

   Number of miles _____________

   ENTER 0 if less than 1 mile

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS LIVING
{ WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH;
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

OBCRNANX
FA-20. Please look at Card 58. Right before (PARTNER) became pregnant, did you, yourself, want to have a child at some time in the future?
NOTE: If R says that he already had a child, SAY: Right before she became pregnant, did you, yourself, want to have another child at some time in the future?

Definitely yes ..................1
Probably yes ...................2
Probably no ....................3 (GO TO FA-22 OBCHPY)
Definitely no ..................4 (GO TO FA-22 OBCHPY)

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH AND R DEFINITELY OR PROBABLY WANTED A CHILD ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

OBCSOONX

FA-21. Would you say that the pregnancy came sooner than you wanted, at the right time, or later than you wanted?

Too soon .....................1
Right time ....................2
Later ..........................3
Didn’t care ....................4

{ ASKED IF R CHILD BORN IN 5 YEARS BEFORE INTERVIEW AND R WAS MARRIED TO/LIVING WITH MOTHER OR KNEW ABOUT PREGNANCY BEFORE THE BIRTH ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

OBCHPYX

FA-22. Please look at Card 59. On this scale, a one means that you were very unhappy about that pregnancy, and a ten means that you were very happy about that pregnancy. Tell me which number on the card best describes how you felt when you found out that (MOTHER’S NAME) was pregnant that time.

Number from 1 to 10 ______________

{ RETURN TO BEGINNING OF LOOP TO DISCUSS NEXT CHILD, IF ANY

Other Nonbiological Children (FB)

OTACHIL

FB-1. The next question is about (children/other children) who may have lived with you under your care and responsibility. By this I mean that you served as a formal or informal guardian to the child or that you were chiefly responsible for the child's care. (Besides any children that we may have talked about already, have / Have) you ever had any (children/other children) like this under your care and responsibility?

Yes ....................1
No .....................5 (GO TO SECTION FC)

OTACHILN

FB-2. (Besides any children that we may have talked about already, how / How) many (children/other children) have ever lived with you under your care and responsibility?

Number of children __________

{ ASKED IF ANY CHILD/REN UNDER CARE

OTNBREL

FB-3. When (this child/the children) began living with you, was (he or she/any of them) the (child/children) of a relative by blood or by marriage?
Yes ........... 1  
No ............ 5  (GO TO FB-5 OTNFOS)

(ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY RELATED BY BLOOD/MARRIAGE OTNBRL
FB-4. How many were children of a relative by blood or by marriage?

Number of children ____________

(ASKED IF ANY CHILD/REN UNDER CARE OTNFOS
FB-5. Was (this child/any of the children) a foster or related child who was placed in your home by a court, child welfare department, or social service agency?

Yes .............. 1  
No ............... 5  (GO TO FB-7 OTNABD)

(ASKED IF MORE THAN ONE CHILD UNDER CARE AND ANY PLACED BY SOCIAL SERVICES OTNBFS
FB-6. How many?

Number of children ________

(ASKED IF ANY CHILD/REN UNDER CARE OTNABD
FB-7. Did you legally adopt (this child / any of these children under your care and responsibility)?

Yes ................. 1  
No ................. 5  (GO TO SECTION FC)

(ASKED IF MORE THAN ONE CHILD UNDER CARE AND ADOPTED ANY OTNBNAM
FB-8. How many children did you legally adopt?

Number of children ________

(ASKED IF R ADOPTED ONE OR MORE CHILDREN UNDER HIS CARE OTNBNAM
FB-9. What is the first name or initials of (this child/each of these children)?

Child’s name/ initials ____________  (NO NAMES OR INITIALS ARE PLACED ON THE DATA FILE.)

{SET UP LOOP TO ASK ABOUT EACH ADOPTED CHILD

(ASKED IF R ADOPTED CHILD UNDER CARE OTNBSEX
FB-10.  (Thinking now of (CHILD), is/ Is) this child male or female?

Male ........... 1  
Female .......... 2

(ASKED IF R ADOPTED CHILD UNDER CARE OTNBLIV
FB-11. Please look at Card 62. Where does (CHILD) usually live now?

ENTER all that apply
If child lives with R part-time, PROBE: Where else does this child live?

In this household full-time .................1
In this household part-time .................2
With his/her mother ..........................3
Away at school or college .....................4
Living on own ..................................5
Living with other relatives .................6
Deceased ......................................7
Someplace else ...............................8

RANGE CHECK: 1,7 CANNOT BE COMBINED WITH ANY OTHER RESPONSES

( ASK IF ADOPTED CHILD NOT DECEASED AND NOT IN R’S HH

OTNBFR

FB-12. About how many miles away from here does (CHILD) live?

Number of miles ______________________
ENTER 0 if less than 1 mile

( ASKED ABOUT ALL ADOPTED CHILDREN NOT DECEASED

OTNBAGE

FB-13. And how old is [OTNBNAME] now?

Age in years ______________________
ENTER 0 if less than 1 year

( RETURN TO BEGINNING OF LOOP TO ASK ABOUT NEXT ADOPTED CHILD, IF ANY

Other Pregnancies, Total Pregnancies, and Number of Sexual Partners (FC)

{ IF R NEVER HAD SEX, BUT DOES HAVE ADOPTED CHILD/REN GO TO SECTION G
{ ELSE GO TO SECTION H

OTPREG

FC-1. Sometimes pregnancies do not result in a live birth, but end in miscarriage, stillbirth, or abortion. As far as you know, have you ever had a pregnancy with a woman that ended in miscarriage, stillbirth, or abortion?

Yes .........................1 (GO TO FC-3 OTPRGN)
No .........................5

( ASKED IF OTPREG= NO OR DK/RF

OTPRGPRB

FC-2. Could you have ever had a pregnancy like this with a woman that you didn’t know about?

Yes .........................1 (GO TO FC-8 TOTPRG)
No .........................5 (GO TO FC-8 TOTPRG)

OTPRGN

FC-3. How many pregnancies?

Number of pregnancies __________

( ASKED IF ONLY ONE PREGNANCY

OTPRGEND

FC-4. Please look at Card 63. In which of the ways shown on this card did
that pregnancy end?

Miscarriage..........1 (GO TO FC-8 TOTPRG)
Stillbirth...........2 (GO TO FC-8 TOTPRG)
Abortion.............3 (GO TO FC-8 TOTPRG)

{ ASKED IF MORE THAN ONE PREGNANCY

OTMSN

FC-5. How many pregnancies ended in miscarriage?

   Number of pregnancies _____________

{ ASKED IF MORE THAN ONE PREGNANCY

OTSTN

FC-6. How many pregnancies ended in stillbirth?

   Number of pregnancies _____________

{ ASKED IF MORE THAN ONE PREGNANCY

OTABN

FC-7. How many pregnancies ended in abortion?

   Number of pregnancies _____________

TOTPRG

FC-8. Altogether, including pregnancies that ended in live birth, pregnancies that ended in miscarriage, stillbirth, or abortion, and pregnancies that are ongoing, as far as you know, how many times have you ever made someone pregnant?

   Number of pregnancies _____________

{ IF RESPONDENT HAD FEWER THAN 7 SEX PARTNERS IN HIS LIFE, GO TO SECTION G

{ ASKED IF RESPONDENT HAD 7 OR MORE SEXUAL PARTNERS IN HIS LIFETIME

NUMLIFE

FC-9. Altogether, how many different females have you ever had intercourse with? This includes any female you had intercourse with, even if it was only once or if you did not know her well.

   Number of partners _____________

{ IF RESPONDENT HAD FEWER THAN 7 SEXUAL PARTNERS IN THE LAST 12 MONTHS, { GO TO SECTION G

{ ASKED IF RESPONDENT HAD 7 OR MORE SEXUAL PARTNERS IN LAST 12 MONTHS

NUM12MO

FC-10. Altogether, how many different females have you had sexual intercourse with in the past 12 months, that is, since (INTERVIEW MONTH, 2001)?

   Number of partners _____________
SECTION G

FATHERING

{ IF RESPONDENT HAS NO CHILDREN UNDER AGE 19 IN HIS HH AND NO BIOLOGICAL
{ OR ADOPTED CHILDREN UNDER AGE 19 WHO LIVE ELSEWHERE, GO TO SECTION H

{ IF RESPONDENT HAS NO CHILDREN UNDER AGE 19 IN HIS HH, BUT HAS BIOLOGICAL
{ OR ADOPTED CHILDREN UNDER AGE 19 WHO LIVE ELSEWHERE, GO TO SECTION GB

Coresidential Children (GA)

GAINTRG
GA-0. I’d like to ask some questions about the children who may live in your
household. There’s …

READ list

(NAME and (he/she) is (less than 1 year old / 1 year old / AGE years old)
(NAME and (he/she) is (less than 1 year old / 1 year old / AGE years old)
(NAME and (he/she) is (less than 1 year old / 1 year old / AGE years old)
(NAME and (he/she) is (less than 1 year old / 1 year old / AGE years old)
(NAME and (he/she) is (less than 1 year old / 1 year old / AGE years old)

NOTE: Brothers, sisters, and other relatives such as step-sisters, step-brothers, and cousins are not included.

{ if 2 or more kids listed above have the same sex and age
GAVERIFY
GA-0a. These are children that may have been listed more than once.
There’s …

(CRNAM[X]) and (CRSEX_FILL[X]) is (CRAGE_FILL[X])
(CRNAM[X]) and (CRSEX_FILL[X]) is (CRAGE_FILL[X])
(CRNAM[X]) and (CRSEX_FILL[X]) is (CRAGE_FILL[X])

ALLOW AS MANY ENTRIES AS THERE ARE DUPLICATE CHILDREN

Have we listed any of these children more than once?

Yes ........1
No ........5 (GO TO GA-1 CROUTG)

GADEL
GA-0b. Which child has been listed more than once?

ENTER all that apply.

1. (CRNAM[X]) and (CRSEX_FILL[X]) is (CRAGE_FILL[X])
2. (CRNAM[X]) and (CRSEX_FILL[X]) is (CRAGE_FILL[X])
3. (CRNAM[X]) and (CRSEX_FILL[X]) is (CRAGE_FILL[X])

{ ASKED IF THERE ARE ANY CHILDREN LIVING WITH R
CROUTG
GA-1. Please look at Card 64. In the last 12 months, that is, since (INTERVIEW
MONTH, 2001), how often would you say you spent time with (this child/ either of these children/ any of these children) on an outing away from
the home to places such as museums, zoos, movies, sports, etc.?
Not at all ........................... 0
Once or twice during the year .... 1
Several times during the year .... 2
One to three times a month ....... 3
About once a week .................. 4
Several times a week .............. 5
Every day ........................... 6

{ IF RESPONDENT HAS NO CHILDREN AGED 5 TO 18 WHO LIVE IN HIS HH,
{ GO TO INTROGA9

{ ASKED IF THERE ARE ANY CHILDREN AGED 5-18 LIVING WITH R

CRRELG
GA-2. Please look at Card 64. (Thinking about (the child age 5 to 18 who lives / the children age 5 to 18 who live) in your household), in the last 12 months, how often did you go to religious services with (him/her/any of them)?

Not at all ......................... 0
Once or twice during the year .... 1
Several times during the year .... 2
One to three times a month ....... 3
About once a week .................. 4
Several times a week .............. 5
Every day ........................... 6

{ ASKED IF THERE ARE ANY CHILDREN AGED 5-18 LIVING WITH R

CRPTA
GA-3. In the last 12 months, did you go to a parent-teacher conference or PTA meeting at (this child’s school/either of the children’s schools/ any of the children’s schools)?

Yes............................... 1
No................................. 5

{ ASKED IF THERE ARE ANY CHILDREN AGED 5-18 LIVING WITH R

INTROGA4
GA-4. Please look at Card 65. (Still thinking about the (child age 5 to 18 / children age 5 to 18), in the last four weeks, how often did you do the following things with (him/her/any of them)?

ENTER "96" if R says he didn’t have any contact with any of the children in the last four weeks.

{ ASKED IF THERE ARE ANY CHILDREN AGED 5-18 LIVING WITH R AND
{ CODE 96 WAS NOT ENTERED FOR INTROGA4.

CRHELP
GA-5. (In the last four weeks, how often did you...)

Help with homework or check that (he/she/they) did (his/her/their) homework?

If necessary, SAY: If your (child is/children are) on vacation from school, please think of the last four weeks that (he was/she was/they were) in school.

Not at all ......................................... 1
Less than once a week .................... 2
About once a week .......................... 3
Several times a week .................... 4
Every day (at least once a day) ........... 5
(ASKED IF THERE ARE ANY CHILDREN AGED 5-18 LIVING WITH R AND CODE 96 WAS NOT ENTERED FOR INTROGA4.

CRTALK
GA-6. (In the last four weeks, how often did you ... )

Talk with (him/her/any of them) about things that happened during the day?

Not at all .........................................1
Less than once a week ..............................2
About once a week ..................................3
Several times a week ...............................4
Every day (at least once a day) ....................5

(ASKED IF THERE ARE ANY CHILDREN AGED 5-18 LIVING WITH R AND CODE 96 WAS NOT ENTERED FOR INTROGA4.

CRTAKE
GA-7. (In the last four weeks, how often did you... )

Take (him/her/any of them) to or from (his/her/their) activities?

Not at all .........................................1
Less than once a week ..............................2
About once a week ..................................3
Several times a week ...............................4
Every day (at least once a day) ....................5

(ASKED IF THERE ARE ANY CHILDREN AGED 5-18 LIVING WITH R AND CODE 96 WAS NOT ENTERED FOR INTROGA4.

CRMEAL
GA-8. (In the last four weeks, how often did you... )

Eat meals with (him/her/any of them)?

Not at all .........................................1
Less than once a week ..............................2
About once a week ..................................3
Several times a week ...............................4
Every day (at least once a day) ....................5

( IF RESPONDENT HAS NO CHILDREN UNDER AGE 5 WHO LIVE IN HIS HH,
GO TO CRGOOD GA-14

(ASKED IF R HAS ANY CHILDREN UNDER AGE 5 LIVING WITH HIM
INTROGA9
GA-9. (Now I’d like to ask some questions about (the child under age 5 who lives / the children under age 5 who live) in your household.)

Please look at Card 65. In the last four weeks, how often did you do the following things for (him/her/either of them/either of them)?

ENTER "96" if R says he didn’t have any contact with any of the children in the last four weeks.

(ASKED IF THERE ARE ANY CHILDREN UNDER AGE 5 LIVING WITH R AND CODE 96 WAS NOT ENTERED FOR INTROGA9.

CRFEED
GA-10. (In the last four weeks, how often did you... )

Feed (him/her/either of them/either of them) or eat meals with (him/her/either of them/either of them)?
Not at all .........................................1
Less than once a week ..............................2
About once a week ................................3
Several times a week ...............................4
Every day (at least once a day) ....................5

{ ASKED IF THERE ARE ANY CHILDREN UNDER AGE 5 LIVING WITH R AND
{ CODE 96 WAS NOT ENTERED FOR INTROGA9.
CRBATH
GA-11. (In the last four weeks, how often did you...)
Bathe, diaper, or dress (him/her/either of them/any of them) or
help (him/her/either of them/any of them) to bathe, dress, or use
the toilet?
Not at all .........................................1
Less than once a week ..............................2
About once a week ................................3
Several times a week ...............................4
Every day (at least once a day) ....................5

{ ASKED IF THERE ARE ANY CHILDREN UNDER AGE 5 LIVING WITH R AND
{ CODE 96 WAS NOT ENTERED FOR INTROGA9.
CRPLAY
GA-12. (In the last four weeks, how often did you...)
Play with (him/her/either of them/any of them)?
Not at all .........................................1
Less than once a week ..............................2
About once a week ................................3
Several times a week ...............................4
Every day (at least once a day) ....................5

{ ASKED IF THERE ARE ANY CHILDREN UNDER AGE 5 LIVING WITH R AND
{ CODE 96 WAS NOT ENTERED FOR INTROGA9.
CRREAD
GA-13. (In the last four weeks, how often did you...)
Read to (him/her/either of them/any of them)?
Not at all .........................................1
Less than once a week ..............................2
About once a week ................................3
Several times a week ...............................4
Every day (at least once a day) ....................5

{ ASKED IF THERE ARE ANY CHILDREN LIVING WITH R
CRGOOD
GA-14. Please look at Card 66. (All/ Thinking of both of the children
who live with you, all/ Thinking of all of the children who live
with you, all) in all, how good a job do you think you do as a
father to (this child / these children)?
A very good job............1
A good job.................2
An okay job................3
Not a very good job........4
A bad job..................5

{ IF R HAS NO BIOLOGICAL OR ADOPTED CHILDREN LIVING ELSEWHERE (NOT IN THE HH),
{ GO TO SECTION H
Noncoresidential Children -- Visitation and Activities (GB)

GBINTRO
GB-0. Now I have some questions about your (child who is under age 19 and does/not live with you). There’s ...

READ list

(NAME) and (he/she) is (less than 1 year old/1 year old /AGE years old)
(NAME) and (he/she) is (less than 1 year old/1 year old /AGE years old)
(NAME) and (he/she) is (less than 1 year old/1 year old /AGE years old)
(NAME) and (he/she) is (less than 1 year old/1 year old /AGE years old)
(NAME) and (he/she) is (less than 1 year old/1 year old /AGE years old)

NCVISIT
GB-1. Please look at Card 64. During the last 12 months, that is, since (INTERVIEW MONTH, 2001), about how often did you see or have a visit with (this child/ these children)?

Not at all .........................0
Once or twice during the year ....1
Several times during the year ....2
One to three times a month ........3
About once a week ...............4
Several times a week ............5
Every day ........................6

NCSATVIS
GB-2. Please look at Card 67. On this scale, 1 means very dissatisfied and 10 means very satisfied. Overall, how satisfied are you with how often you see or have a visit with (this child / these children)?

Number from 1 to 10

{ IF R HAS NOT SEEN OR VISITED CHILD/REN IN LAST 12 MONTHS,
{ GO TO NCGOOD GB-16

( ASKED IF R HAS SEEN OR VISITED IN THE LAST YEAR ANY OF THESE BIO/ADOPTED KIDS 18 OR YOUNGER WHO LIVE ELSEWHERE

NCOUTG
GB-3. Please look at Card 64. In the last 12 months, how often would you say you spent time with (this child/ these children) on an outing away from the home to places such as museums, zoos, movies, sports, etc.?

Not at all .........................0
Once or twice during the year ....1
Several times during the year ....2
One to three times a month ........3
About once a week ...............4
Several times a week ............5
Every day ........................6

{ IF RESPONDENT HAS NO BIO/ADOPTED CHILDREN AGED 5 TO 18 WHO LIVE ELSEWHERE,
{ GO TO INTROGB11

( ASKED IF R HAS BIO/ADOPTED KIDS 5-18 LIVING ELSEWHERE AND HE HAS SEEN OR VISITED THEM IN PAST YEAR
NCRELG

GB-4. Please look at Card 64. (Thinking about the (the child age 5 to 18 who does/ the children age 5 to 18 who do) not live with you), in the last 12 months, how often did you go to religious services with (him/her/either of them/any of them)?

Not at all ..........................0
Once or twice during the year ....1
Several times during the year ....2
One to three times a month ........3
About once a week .................4
Several times a week ..............5
Every day ........................6
No contact in 12 months ..........96

{ ASKED IF R HAS BIO/ADOPTED KIDS 5-18 LIVING ELSEWHERE AND HE HAS SEEN OR VISITED THEM IN PAST YEAR

NCPTA

GB-5. In the last 12 months, did you go to a parent-teacher conference or PTA meeting at (this child’s school/ either of the children’s schools / any of the children’s schools)?

Yes .........................1
No .......................5

{ ASKED IF R HAS BIO/ADOPTED KIDS 5-18 LIVING ELSEWHERE AND HE HAS SEEN OR VISITED THEM IN PAST YEAR

INTROGB6

GB-6. Please look at Card 65. (Still thinking about the (the child age 5 to 18 who does / the children age 5 to 18 who do) not live with you.) In the last four weeks, how often did you do the following things with (him/her/either of them/any of them)?

ENTER "96" if R says he didn’t have any contact with any of the children in the last four weeks.

{ ASKED IF R HAS BIO/ADOPTED KIDS 5-18 LIVING ELSEWHERE AND HE HAS HAD CONTACT WITH THEM IN PAST 4 WEEKS (CODE 96 NOT ENTERED FOR INTROGB6)

NCHELP

GB-7. (In the last four weeks, how often did you... )

Help with homework or check that (he/she/they) did (his/her/their) homework?

If necessary, SAY: If your (child is/children are) is on vacation from school, please think of the last four weeks that (he was/she was/ they were) in school.

Not at all .........................................1
Less than once a week ..........................2
About once a week ............................3
Several times a week ..........................4
Every day (at least once a day) ..............5

{ ASKED IF R HAS BIO/ADOPTED KIDS 5-18 LIVING ELSEWHERE AND HE HAS HAD CONTACT WITH THEM IN PAST 4 WEEKS (CODE 96 NOT ENTERED FOR INTROGB6)

NCTALK

GB-8. (In the last four weeks, how often did you... )

Talk with (him/her/either of them/any of them) about things that happened during the day?
Not at all .........................................1
Less than once a week ................................2
About once a week ...................................3
Several times a week ................................4
Every day (at least once a day) ....................5

{ ASKED IF R HAS BIO/ADOPTED KIDS 5-18 LIVING ELSEWHERE AND HE HAS HAD CONTACT
( WITH THEM IN PAST 4 WEEKS (CODE 96 NOT ENTERED FOR INTROGB6)

NCTAKE
GB-9. (In the last four weeks, how often did you...)

Take (him/her/either of them/any of them) to or from (his/her/their) activities?

Not at all .........................................1
Less than once a week ................................2
About once a week ...................................3
Several times a week ................................4
Every day (at least once a day) ....................5

{ ASKED IF R HAS BIO/ADOPTED KIDS 5-18 LIVING ELSEWHERE AND HE HAS HAD CONTACT
( WITH THEM IN PAST 4 WEEKS (CODE 96 NOT ENTERED FOR INTROGB6)

NCMEAL
GB-10. (In the last four weeks, how often did you...)

Eat meals with (him/her/either of them/any of them)?

Not at all .........................................1
Less than once a week ................................2
About once a week ...................................3
Several times a week ................................4
Every day (at least once a day) ....................5

{ IF RESPONDENT HAS NO BIO/ADOPTED CHILDREN UNDER AGE 5 WHO LIVE ELSEWHERE,
{ GO TO NCGOOD GB-16

{ ASKED IF R HAS ANY BIO/ADOPTED CHILDREN UNDER AGE 5 WHO LIVE ELSEWHERE
INTR0GB11
GB-11. (Now I’d like to ask some questions about (the child under age 5
who does/the children under age 5 who do) not live with you.

Still looking / Please look) at Card 65, in the last four weeks,
how often did you do the following things for (him/her/either of
them/any of them)?

ENTER 96 if R says he did not have any contact with any of the
children in the last four weeks

{ ASKED IF R HAS ANY BIO/ADOPTED CHILDREN UNDER AGE 5 WHO LIVE ELSEWHERE
( AND R HAD CONTACT WITH THEM IN LAST 4 WEEKS
NCFEED
GB-12. (In the last four weeks, how often did you...)

Feed (him/her/either of them/any of them) or eat meals with
(him/her/either of them/any of them) ?

Not at all .........................................1
Less than once a week ................................2
About once a week ...................................3
Several times a week ................................4
Every day (at least once a day) ....................5
(ASKED IF R HAS ANY BIO/ADOPTED CHILDREN UNDER AGE 5 WHO LIVE ELSEWHERE AND R HAD CONTACT WITH THEM IN LAST 4 WEEKS)

**NCBATH**

GB-13. (In the last four weeks, how often did you...)

Bathe, diaper or dress (him/her/either of them/any of them) or help (him/her/either of them/any of them) to bathe, dress, or use the toilet?

Not at all ........................................1  
Less than once a week ..........................2  
About once a week ................................3  
Several times a week ...........................4  
Every day (at least once a day) ...............5

(ASKED IF R HAS ANY BIO/ADOPTED CHILDREN UNDER AGE 5 WHO LIVE ELSEWHERE AND R HAD CONTACT WITH THEM IN LAST 4 WEEKS)

**NCPLAY**

GB-14. (In the last four weeks, how often did you...)

Play with (him/her/either of them/any of them)?

Not at all ........................................1  
Less than once a week ..........................2  
About once a week ................................3  
Several times a week ...........................4  
Every day (at least once a day) ...............5

(ASKED IF R HAS ANY BIO/ADOPTED CHILDREN UNDER AGE 5 WHO LIVE ELSEWHERE AND R HAD CONTACT WITH THEM IN LAST 4 WEEKS)

**NCREAD**

GB-15. (In the last four weeks, how often did you...)

Read to (him/her/either of them/any of them)?

Not at all ........................................1  
Less than once a week ..........................2  
About once a week ................................3  
Several times a week ...........................4  
Every day (at least once a day) ...............5

(ASKED IF R HAS ANY BIO/ADOPTED CHILDREN 18 OR YOUNGER WHO LIVE ELSEWHERE)

**NCGOOD**

GB-16. Please look at Card 66. (All/ Thinking of both of the children who live with you, all/ Thinking of all of the children who live with you, all) in all, how good a job do you think you do as a father to (this child/these children)?

A very good job..............1  
A good job.......................2  
An okay job......................3  
Not a very good job.........4  
A bad job.......................5

( GC SERIES ASKED ONLY IF R HAS ANY BIOLOGICAL OR ADOPTED CHILDREN AGED 18 OR YOUNGER WHO LIVE ELSEWHERE)

**Noncoresidential children -- Financial Support (GC)**

**NCMONEY**

GC-1. Now I have a few questions about your financial support of (this child/these children).
In the last 12 months, that is, since (INTERVIEW MONTH, 2001), did you contribute money or child support for (this child/ either of the children/any of the children)’s upbringing?

Yes....1
No.....5 (GO TO SECTION H)

NCREG
GC-2. Did you do this on a regular basis, or once in a while?

Regular basis .....1
Once in a while ....2

NCAMOUNT
GC-3. In the last 12 months, how much did you give?

R can report weekly, monthly, or yearly amount.

If R says that the payments are not always the same, SAY:
How much do you “usually” give? OR How much did you give total?

Amount in dollars __________
ENTER "0" for none

{ IF HE GAVE NO MONETARY SUPPORT (NCAMOUNT = 0), GO TO SECTION H

NCUNIT
GC-3. (In the last 12 months, how much did you give?)

CHOOSE weekly, monthly, or yearly

Weekly ........1
Monthly ........2
Yearly ........3

NCAGREE
GC-4. Was any of (this/the) amount paid as the result of a child support order?

Yes ............1
No .............5 (GO TO SECTION H)

NCAGREEN
GC-5. For how many children is there a legal agreement about child support?

Number of children __________
SECTION H

Desires and Intentions for Future Children

Desires Series (HA)

HCINTR
HA-1. Now, I would like to know your feelings about having (a/another) child, whether or not you are able to, or plan to have one.

By “having a child,” I mean that you are the biological father of that child.

RWANT
HA-2. (Looking to the future, do / If it were possible, would) you, yourself, want to have (a/another) child at some time in the future (after this pregnancy is over)?

Yes ..........................1
No ..........................5

{ IF R SAYS ANYTHING BESIDES “DON’T KNOW” TO RWANT, GO TO HB SERIES
{ ASKED IF R SAYS “DON’T KNOW” TO RWANT
PROBWANT
HA-3. (If it were possible, do you think you would / Do you think you) probably want or probably not want to have (a/another child) at some time (in the future / after this pregnancy is over)?

Probably want .......................1
Probably do not want ..............2
If R insists: Don’t know/not sure....3

{ HB SERIES IS ASKED ONLY IF R IS CURRENTLY MARRIED OR COHABITING AND
{ HE AND HIS WIFE/PARTNER ARE BOTH ABLE TO HAVE CHILDREN.

Joint Intention Series (HB)

{ IF R IS NOT MARRIED OR COHABITING AND:
{ IF R IS ABLE TO HAVE CHILDREN, GO TO THE HC SERIES.
{ ELSE IF R IS UNABLE TO HAVE CHILDREN, GO TO SECTION I.

{ ELSE IF R IS MARRIED OR COHABITING AND:
{ IF BOTH HE AND HIS WIFE/PARTNER ARE ABLE TO HAVE CHILDREN,
{ CONTINUE WITH THE HB SERIES.
{ ELSE IF R IS ABLE TO HAVE CHILDREN BUT HIS WIFE/PARTNER IS UNABLE,
{ GO TO THE HC SERIES.
{ ELSE IF NEITHER R NOR HIS WIFE/PARTNER IS ABLE TO HAVE CHILDREN,
{ GO TO SECTION I.

HCINTRO2
HB-1. Sometimes what people want and what they intend are different because they are not able to do what they want. The next questions are about your and (WIFE/PARTNER)’s intentions to have (a/another) child in the future.

By “have a child”, I mean that you are the biological father and she is the biological mother of that child.
JINTEND
HB-2. Do you and (CWPNAME) intend to have (a/another) child at some time (in the future/after this pregnancy is over)?

   If Necessary, SAY: (Intend refers to what you and she are actually going to try to do.)

   Do not count intended adoptions or stepchildren.

   Yes ..........................1
   No ..........................5

{ IF JINTEND = “DON’T KNOW” GO TO HB-5 JEXPECTL.
{ IF JINTEND = “REFUSED” GO TO SECTION I.

{ ASKED IF JINTEND = YES OR NO

JSUREINT
HB-3. Of course, sometimes things do not work out exactly as we intend them to or something makes us change our minds. In your case, how sure are you that you and (WIFE/PARTNER) will (not) have (a/another) child (after this pregnancy is over)? Would you say very sure, somewhat sure, or not sure at all?

   Very sure ....................1
   Somewhat sure .................2
   Not at all sure ...............3

{ IF R INTENDS NO OR NO MORE CHILDREN, GO TO SECTION I.

JINTENDN
HB-4. (Not counting her current pregnancy, how / How) many (more) children do you and (CWPNAME) intend to have?

   If Necessary, SAY: (Intend refers to what you and she are actually going to try to do.)

   Number of children ________ (IF A NUMBER GIVEN, GO TO SECTION I)

{ ASKED IF R DOESN’T KNOW THE NUMBER OF CHILDREN THEY INTEND

JEXPECTL
HB-5. Many people aren’t sure, but still have some idea about the future. As you expect things to work out for you and (WIFE/PARTNER), what is the largest number of (additional) children you and she expect to have (after this pregnancy is over)?

   Number of children___________ (IF ZERO, GO TO SECTION I)

JEXPECTS
HB-6. What is the smallest number of (additional) children you and (WIFE/PARTNER) expect to have (after this pregnancy is over)?

   Number of children _________ (GO TO SECTION I)

{ HC SERIES IS ASKED:
{   IF R IS ABLE TO HAVE A CHILD AND HE IS NOT MARRIED OR COHABITING
{ OR IF R IS MARRIED OR COHABITING, BUT ONLY HE IS ABLE TO HAVE CHILDREN (HIS
{   WIFE OR PARTNER CANNOT HAVE CHILDREN)

Individual Intention for Future Children (HC)

HCINTRO3
HC-1. Sometimes what people want and what they intend are different because they are not able to do what they want.

The next questions are about your intentions to have (a/another) child in the future.

By “have a child”, I mean that you are the biological father of that child.

**INTEND**

HC-2. Please look at Card 58. Looking to the future, do you intend to have (a/another) child at some time (after this pregnancy is over)?

If necessary, SAY: (Intend refers to what you are actually going to try to do.)

Please do not count intended adoptions or stepchildren.

Definitely Yes ..........................1
Probably Yes .............................2
Probably No ..............................3 (GO TO SECTION I)
Definitely No .............................4 (GO TO SECTION I)

**INTENDN**

HC-3. (Not counting the current pregnancy, how / How) many (more) children do you intend to have?

If Necessary, Say: (Intend refers to what you are actually going to try to do.)

Do not count intended adoptions or stepchildren.

Number of children____________ (IF A NUMBER IS GIVEN, GO TO SECTION I)

(ASKED IF R DOESN’T KNOW THE NUMBER OF CHILDREN HE INTENDS)

**EXPECT**

HC-4. Many people aren’t sure, but still have some idea about the future. As you expect things to work out for you, what is the largest number of (additional) children you, yourself, expect to have (after this pregnancy is over)?

Number of children____________ (IF ZERO, GO TO SECTION I)

**EXPECTS**

HC-5. What is the smallest number of (additional) children you, yourself, expect to have (after this pregnancy is over)?

Number of children____________ (GO TO SECTION I)
SECTION I

HEALTH CONDITIONS AND HEALTH SERVICES

INTRO_I1
IA-0. The next questions are about your experiences with health care providers, health insurance, and health problems.

Access to Health Care (IA)

USUALCAR
IA-1. Is there a place that you usually go to when you are sick or need advice about health?

Yes .............1
No .............5 (IA-3 COVER12)

USLPLACE
IA-2. Please look at CARD 25. What kind of place is it?

Private doctor's office.............................................1
HMO facility .............................................................2
Community health clinic, community clinic,
    public health clinic ...........................................3
Family planning or Planned Parenthood clinic .........4
Employer or company clinic .......................................5
School or school-based clinic ..................................6
Hospital outpatient clinic .....................................7
Hospital emergency room ......................................8
Hospital regular room ...........................................9
Urgent care center, urgi-care, or walk-in facility ..10
Some other place ..................................................20

COVER12
IA-3. Card 75 lists some examples of types of health care coverage. In the past 12 months, that is, since (INTERVIEW MONTH, 2001), was there any time that you did not have any health insurance or coverage?

Yes .............1
No .............5 (IA-5 COVERHOW)

NUMNOCOV
IA-4. In how many of the past 12 months were you without coverage?

Number of months _________ (IF 12, GO TO IB SERIES)

{ ASKED IF HAD INSURANCE COVERAGE FOR ANY OF THE PAST 12 MONTHS

COVERHOW
IA-5. Card 76 shows different types of health care coverage. In the past 12 months, that is, since (INTERVIEW MONTH, 2001), which of these were you covered by?

ENTER all that apply

A private health insurance plan .................................1
(from employer or workplace; purchased directly;
through a state or local government program
or community program)
Medicaid ..............................................................2
additional name(s) for Medicaid in this state: [name(s)]
Medicare .................................................................3
Medi-Gap .................................................................4
Military health care, including: .....................................5
the VA, CHAMPUS / TRICARE / CHAMP-VA
Indian Health Service ......................................................6
CHIP (Children’s Health Insurance Program) .......................7
additional name(s) for CHIP in this state: [name(s)]
Single-service plan (e.g. dental, vision, prescriptions) ..............8
State-sponsored health plan ............................................9
(such as [state program fill])
Other government health care ..........................................10

{ ASKED IF R LACKED COVERAGE AT ANY TIME IN LAST 12 MONTHS OR
{ R HAS MORE THAN ONE TYPE OF COVERAGE
NOWCOVER
IA-6. Which of these, if any, are you covered by now?

READ list and ENTER all that apply

[SCREEN DISPLAYS RESPONSES FROM IA-3 COVERHOW]
Not covered by any insurance............11

Use of Family Planning Clinic (IB)

{ IF R’S AGE >= 25, GO TO IB-3 YOUGOFPC.

{ ASKED ONLY IF R IS UNDER AGE 25
GOFPCWGF
IB-1. Please look at Card 68, which shows various types of family planning and
health services. Have you ever gone with a female partner or girlfriend
to a family planning clinic or Planned Parenthood clinic when she
received services such as these?

Yes .............1
No ..............5 (IB-3 YOUGOFPC)

WHENGOGF
IB-2. When was the last time you went with a female partner or girlfriend to a
family planning clinic or Planned Parenthood clinic? Was it within the
last 12 months, that is, since (INTERVIEW MONTH, 2001), or more than 12
months ago?

In the last 12 months ...............1
More than 12 months ago .............2

YOUGOFPC
IB-3. Now please look at Card 69, which shows some family planning and health
services. Have you, yourself, ever received services such as these from
a family planning clinic or Planned Parenthood clinic?

Yes .............1
No ..............5 (IC-1 LIMITED)

WHENGOFF
IB-4. When was the last time you received services from a family planning
clinic or Planned Parenthood clinic? Was it within the last 12 months,
that is, since (INTERVIEW MONTH, 2001), or more than 12 months ago?

In the last 12 months ...............1
More than 12 months ago .............2 (IC-1 LIMITED)
YOUFPSVC

IB-5. Please look again at Card 69. Which of these services did you receive at that visit?

ENTER all that apply

Physical exam ....................................................1
Birth control counseling or methods, including condoms ...........2
Testing or treatment for sexually transmitted infection other than HIV .............................................3
HIV testing ......................................................4
Abortion advice or counseling ............................................................5
Other ........................................................................6

{ IC SERIES ASKED FOR ALL RESPONDENTS

Health Problems or Impairments (IC)

LIMITED

IC-1. The following 2 questions are about health problems or impairments you may have.

Are you limited in any way in any activities because of physical, mental, or emotional problems?

Yes ....................................................1
No ....................................................5

EQUIPMNT

IC-2. Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?

ENTER [Yes] for occasional use or use in certain circumstances.

Yes ....................................................1
No ....................................................5

Health Services (ID)

{ ASKED FOR ALL

PHYSEXAM

ID-1. Now I’d like to ask you about health services you may have received in the past 12 months, that is, since (INTERVIEW MONTH, 2001).

In the past 12 months, have you had a routine physical examination?

Yes .............1
No ..............5

{ ASKED FOR ALL

TESTICHK

ID-2. (In the past 12 months, have you...)

Had your testicles examined by a doctor or other medical care provider?

Yes .............1
No ..............5

{ ASKED FOR ALL

BCADVICE
ID-3. (In the past 12 months, have you...)  
Received advice or counseling from a doctor or other medical care provider about using methods of birth control, including condoms?  
Yes .............1  
No .............5  

{ ASKED FOR ALL  
STERADVIC  
ID-4. (In the past 12 months, have you...)  
Received advice or counseling from a doctor or other medical care provider about getting surgically sterilized?  
Yes .............1  
No .............5  

{ ASKED FOR ALL  
STDADVIC  
ID-5. (In the past 12 months, have you...)  
Received advice or counseling from a doctor or other medical care provider about sexually transmitted infections other than HIV, such as gonorrhea, chlamydia, syphilis, or genital herpes?  
Yes .............1  
No .............5  

{ ASKED FOR ALL  
HIVADVIC  
ID-6. (In the past 12 months, have you...)  
Received advice or counseling from a doctor or other medical care provider about HIV or AIDS?  
Yes .............1  
No .............5  

{ IF R REPORTED NONE OF THE ABOVE (ID SERIES) SERVICES IN THE LAST 12 MONTHS,  
{ GO TO IE SERIES.  
{ ELSE IF R HAS REPORTED ONLY ONE SERVICE, GO TO ID-9 PLACEVIS.  
{ ELSE IF R HAS REPORTED MORE THAN ONE SERVICE, GO TO ID-7 ONEVISIT.  

ONEVISIT  
ID-7. You have reported that you had the following services in the last 12 months: (LIST THEM)  
Did you have (both/all) of these services at the same visit to a doctor or other medical care provider, or did you have more than 1 visit?  
At a single visit ......................1 (PLACEVIS ID-9)  
More than 1 visit .....................2  

NUMVISIT  
ID-8. How many visits did you have in the last 12 months in order to receive all of these services from a doctor or other medical care provider?  
Number of visits _________  

{ IF R IS 25 OR OLDER, GO TO IE SERIES.  
{ ASKED IF R IS UNDER AGE 25
PLACEVIS

ID-9. Please look at Card 25. At what kind of place did you have (your (FILL IN NAME OF SERVICE)/these services)?

- Private doctor’s office..........................1
- HMO facility .....................................2
- Community health clinic, community clinic,
  public health clinic ............................3
- Family planning or Planned Parenthood clinic ........4
- Employer or company clinic ..........................5
- School or school-based clinic ..........................6
- Hospital outpatient clinic ............................7
- Hospital emergency room ..............................8
- Hospital regular room ................................9
- Urgent care center, urgi-care, or walk-in facility .10
- Some other place ..................................20

{ ASKED IF R IS UNDER AGE 25

SVCPAY

ID-10. Please look at Card 16. In which of the ways shown on this card was the bill for ((FILL IN NAME OF SERVICE)/these services) paid?

ENTER all that apply.
PROBE 'Any other ways?'

- Insurance ........................................1
- Co-payment or out-of-pocket payment ......2
- Medicaid ........................................3
- No payment required ............................4
- Some other way .................................5

{ IE SERIES ONLY ASKED IF R HAS EVER HAD SEX WITH A FEMALE.
{ IF R HAS NEVER HAD SEX, GO TO IF SERIES.

Infertility Services (IE)

INFHELP

IE-1. (Did you or your wife ever go / Have you or your wife ever been / During any of your relationships, have you or your (wife or) partner at the
time ever been) to a doctor or other medical care provider to talk about
ways to help you have a baby together?

NOTE: Do not code yes if main purpose of visit was for something other
than seeking help to have a baby.

Yes ............1
No .............5 (INTRO-I2)

INFSVCS

IE-2. Which of the services shown on Card 44 (did / have) you or your
(wife/partner) (have / had) to help you have a baby together?

ENTER all that apply

- Advice.............................................1
- Infertility testing ...............................2
- Drugs to improve ovulation .................3
- Surgery to correct blocked tubes ..........4
- Artificial insemination .......................5
- Treatment for varicocele ..................6
- Other types of medical help ............7
ASKED IF INFERTILITY TESTING WAS MENTIONED

IE-3. Who was it that had infertility testing?
   You ................1
   Her ................2
   Or both of you .....3

ASKED IF ARTIFICIAL INSEMINATION WAS MENTIONED

IE-4. Was your wife or partner inseminated with sperm from you only, from some other donor only, or from both?
   You only .................1
   Some other donor only .....2
   Both .......................3

IF R IS NOT CURRENTLY MARRIED OR COHABITING, GO TO IE-6 LASTVIS.

IE-5. Are you and your (wife/partner) currently pursuing medical help to have a baby together?
   NOTE: "Currently pursuing help" means that R or his (wife/partner) plan to visit the doctor or infertility clinic again.
   Yes ...............1
   No .............5

IE-6. In what month and year was your (most recent/last) visit for medical help to have a baby together?

IE-7. When you and your wife or partner went for medical help to have a baby together, were you ever told that you had any of the following male infertility problems shown on Card 71?
   ENTER all that apply
   Sperm or semen problems ..................1
   Varicocele ................................2
   Other .....................................3
   NONE OF THE ABOVE .......................4
   CODE 4 CANNOT BE ENTERED WITH ANY OTHER CODE.

HIV TESTING AND AIDS KNOWLEDGE/COUNSELING (IF)

ASKED FOR ALL

IE-0. Now I would like to ask you about blood tests for HIV, the virus that causes AIDS.

ASKED FOR ALL

IE-1. First, I’ll ask you about blood donations you may have made to the Red Cross or other blood banks because all blood donated since March 1985 has been routinely tested for HIV before it can be used. (Since March 1985, have you / Have you ever) donated blood at the Red Cross, at a
bloodmobile, at a blood drive, or at other blood banks?

Yes ........... 1
No ............ 5

(ASKED FOR ALL)

HIVTEST

IF-2. (Apart from testing that may have been done with your blood donations,) have you ever had your blood tested for HIV, the virus that causes AIDS?

NOTE: Explain if necessary that the interviewer will not be asking for the results of any test he may have ever had.

Yes ...................... 1
No ....................... 5 (IF-8 RETROVIR)

(ASKED IF R HAD ANY HIV TEST OUTSIDE OF BLOOD DONATION)

WHENHIV_M/WHENHIV_Y

IF-3. When, in what month and year, did you have your test for HIV? If you have had more than one test, please tell me the date of the most recent one.

(ASKED IF R HAD ANY HIV TEST OUTSIDE OF BLOOD DONATION)

PLCHIV

IF-4. Please look at Card 72. Where did you have that (last) blood test for HIV (in (DATE OF HIV TEST))? 

Private doctor's office ........................................1
HMO facility .........................................................2
Community health clinic, community clinic, public health clinic ........................................3
Family planning or Planned Parenthood clinic ........4
Employer or company clinic ........................................5
School or school-based clinic ....................................6
Hospital outpatient clinic ......................................7
Hospital emergency room .......................................8
Hospital regular room ..........................................9
Urgent care center, urgi-care, or walk-in facility ........10
Your worksite ....................................................11
Your home .........................................................12
Some other place ................................................20

(ASKED IF R HAD ANY HIV TEST OUTSIDE OF BLOOD DONATION)

HIVTST

IF-5. Please look at Card 73b. Why did you have that HIV test?

ENTER all that apply

For a hospitalization or surgical procedure...1
To apply for health or life insurance........2
Just to find out if you were infected........3
Because of a referral by a doctor.............4
To apply for a marriage license..............5
Or for some other reason .....................6

(ASKED IF R HAD ANY HIV TEST OUTSIDE OF BLOOD DONATION)

TALKDOCT

IF-6. Did a doctor or other medical care provider talk with you about AIDS after you had your (most recent) HIV test?

Yes ........................................1
No ........................................5 (IF-8 RETROVIR)

{ ASKED IF R TALKED WITH A DOCTOR OR MEDICAL CARE PROVIDER
AIDSTALK
IF-7. Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional?

ENTER all that apply

How HIV/AIDS is transmitted .........................1
How to prevent transmission of HIV/AIDS ..........2
Other sexually transmitted diseases like
gonorrhea, syphilis, or herpes .............3
The correct use of condoms .........................4
Needle cleaning/using clean needles .............5
Dangers of needle sharing .........................6
Abstinence from sex (not having sex) ............7
Birth control methods .............................8
Safe sex practices ...............................9
Other ........................................10

{ ASKED FOR ALL
RETROVIR
IF-8. Please tell me if you think the following statement is definitely true, probably true, probably false, or definitely false, or if you don’t know whether it is true or false.

“There is a treatment available for pregnant women who are infected with the HIV virus to prevent passing the virus to their baby.”

Definitely true .....................1
Probably true .....................2
Probably false ..................3
Definitely false .................4
Don’t know if true or false ...5
SECTION J
Residence and Place of Birth; Religion; Military Service; Past and Current Work (R and Wife/cohаб Partner); Attitudes

Residence and Place of birth (JA)

SAMEADD
JA-0a. Now I have some questions about where you live.

 Were you living at this same address on April 1, 2000?

 Yes.................1 (BRNOUT JA-7)
 No.................5

CNTRY00
JA-1. Were you living in the United States on April 1, 2000?

 Yes.................1
 No.................5 (BRNOUT JA-7)

ASTREET
JA-2. Please tell me the address where you were living on April 1, 2000.

 NOTE: RECORD R's best possible address
 ENTER street number and street name

ACITY
JA-3. (Please tell me the address where you were living on April 1, 2000.)

 City __________

ASTATE
JA-4. (Please tell me the address where you were living on April 1, 2000.)

 [LINK STATE DATABASE]
 State

AZIP
JA-5. (Please tell me the address where you were living on April 1, 2000.)

 Zip code____________

CNTY2000
JA-6. What county did you live in then?

 County __________

BRNOUT
JA-7. Were you born outside of the United States?

 Yes ............1
 No ............5 (PAYDU JA-9)

{ASKED IF R WAS BORN OUTSIDE THE U.S.

STRUS_M/STRUS_Y
JA-8. In what month and year did you come to the United States to stay?
JA-9. This next question is about your residence. Are your current living quarters owned or being bought by you or someone in your household, rented for cash, or occupied without payment of cash rent?

- Owned or being bought by you or someone in your household: 1
- Rented for cash: 2
- Occupied without payment of cash rent: 3
- IF VOL: R lives in a dormitory: 4

**Religion (JB)**

JB-1. Now I have a few questions about religion.

Please look at Card 77. In what religion were you raised, if any?

If R says Protestant, ASK: (What is the complete name of your denomination?) **If necessary, ENTER [II].**

- ENTER [I] if R was raised "atheist" or "agnostic": 1
- None: 2
- Catholic: 2
- Jewish: 3
- Southern Baptist: 4
- Baptist: 5
- Methodist, African Methodist: 6
- Lutheran: 7
- Presbyterian: 8
- Episcopal: 9
- Church of Jesus Christ of Latter Day Saints (LDS/Mormon): 10
- Other: 11

(ASKED IF R’S RELIGION RAISED WAS “OTHER”)

JB-2. Please look at Card 78. In what religion were you raised?

- Church of Christ: 12
- United Church of Christ: 13
- Assemblies of God: 14
- Church of Nazarene: 15
- The Church of God: 16
- The Church of God (Cleveland, TN): 17
- The Church of God in Christ: 18
- 7th Day Adventist: 19
- United Pentecostal Church: 20
- Pentecostal Assemblies: 21
- Jehovah’s Witness: 22
- Protestant or Christian - another denomination not listed: 23
- Protestant or Christian - no specific denomination: 24
- Muslim: 25
- Unitarian-Universalist: 26
- Greek Orthodox: 27
(Other) Orthodox ....................................28
Another Religion Not Listed..........................29

(ASKED IF R IS UNDER AGE 25
ATTN14
JB-3. Please look at Card 79. When you were 14, about how often did you usually attend religious services?

More than once a week..............1
Once a week..........................2
1-3 times per month.............3
Less than once a month...........4
Never...................................5

RELNOW
JB-4. Please look at Card 77. What religion are you now, if any?

If R says Protestant, ASK: (What is the complete name of the denomination?) If necessary, ENTER [11].

ENTER the religion respondent identifies with most, if R identifies with more than one religion

ENTER [1] if R was raised "atheist" or "agnostic"

None......................................................1
Catholic...................................................2
Jewish...................................................3
Southern Baptist.................................4
Baptist.................................................5
Methodist, African Methodist.............6
Lutheran..............................................7
Presbyterian........................................8
Episcopalian......................................9
Church of Jesus Christ of Latter Day Saints (LDS/Mormon)10
Other .................................................11

( ASKED IF R ANSWERS “OTHER” RELIGION
RELNOW1
JB-5. Please look at Card 78. What religion are you now?

Church of Christ.................................12
United Church of Christ....................13
Assemblies of God.............................14
Church of Nazarene............................15
The Church of God...........................16
The Church of God (Cleveland, TN).....17
The Church of God in Christ.............18
7th Day Adventist............................19
United Pentecostal Church...............20
Pentecostal Assemblies.....................21
Jehovah’s Witness.............................22

Protestant or Christian –
another denomination not listed ...............23
Protestant or Christian –
no specific denomination ....................24

Muslim..................................25
Unitarian-Universalist .................26
Greek Orthodox..............................27
(Other) Orthodox ....................................28
Another Religion Not Listed......................29

{ IF R’S RELIGION IS JEWISH OR MUSLIM OR DON’T KNOW OR REFUSE,
{   GO TO JB-7 RELDLIFE
{ ELSE IF R’S RELIGION IS NONE, GO TO JB-8 ATTNDNOW

FUNDAM
JB-6. Please look at Card 80. Which of these do you consider yourself to be, if any?

   A born again Christian..............1
   A charismatic....................2
   An evangelical..................3
   A fundamentalist ...............4
   None of the above...............5

RELDLIFE
JB-7. Currently, how important is religion in your daily life? Would you say it is very important, somewhat important, or not important?

   Very important....................1
   Somewhat important...............2
   Not important....................3

ATTNDNOW
JB-8. Please look at Card 79. About how often do you attend religious services?

   If R has difficulty answering, HAVE him think in terms of the past year.

   More than once a week.............1
   Once a week........................2
   1-3 times per month...............3
   Less than once a month............4
   Never.........................5

{ JC SERIES ASKED ONLY IF R IS 18 OR OLDER

Military Service (JC)

MILSVC
JC-1. Have you ever been on active duty in the Armed Forces for a period of 6 months or more?

   Yes..................1
   No..................5 (JD-1 EVWRK6MO)

BEGMIL_M/BEGMIL_Y
JC-2. In what month and year did that period of active duty begin?

ENDMIL_M/ENDMIL_Y
JC-3. What was the month and year of your last separation from active duty?

Work (JD)

EVWRK6MO
JD-1. Now I’m interested in knowing if you’ve ever worked full-time, for
6 months or longer. If you’ve ever taken leave from work, such as family leave, vacations, disability leave, strikes, and temporary layoffs, that counts as still working, as long as you were still officially employed.

Have you ever worked for pay, full-time, for six months or longer?

NOTE: A period of employment is not necessarily the same as a job. If he went from one job right to a different job, that is still one period of employment.

Yes.............1
No..............5 (WRK12MOS JD-4)

BEGFSTWK_MO/BEGFSTWK_YR
JD-2. When, in what month and year, did you start your first period of full-time work that lasted 6 months or longer altogether?

EVRNTWRK
JD-3. Since you started that first period of work, has there ever been a time lasting 6 months or longer when you weren’t working full-time?

IF Necessary, SAY: (Remember, family leave, disability leave, strikes, temporary layoffs, paternity leave, and similar situations count as working if your employer considered you as still employed there.)

Yes.............1
No..............5

WRK12MOS
JD-4. Now I’d like to ask about your work experience in the last 12 months. By work, I mean any job for pay that was regularly scheduled, for which you were expected to show up. Please include full-time, part-time, and temporary or summer jobs.

In the last 12 months, that is since [INTERVIEW MONTH, 2001], for how many months did you have any job for pay?

Number of months __________ (IF ZERO, DK, RF, GO TO SECTION JE)

FPT12MOS
JD-5. In the last 12 months, did you work all full-time, all part-time or some of each?

Full-time..........1
Part time..........2
Some of each.......3

Current/Last Job Series (JE)

DOLASTWK
JE-1. Please look at Card 82. Last week, what were you doing? Were you working, keeping house, going to school, or something else?

ENTER all that apply

Working................................. 1
Not working at job due to temporary illness, vacation, strike, etc..................... 2
On paternity or family leave from job........... 3
Unemployed, laid off, or looking for work..... 4
Keeping house.................................... 5
Taking care of family ............................ 6
Going to school.................................... 7
On permanent disability.......................... 8
Something else .................................... 9

{ IF R IS CURRENTLY EMPLOYED OR EVER WORKED, GO TO JE-3 RNUMJOB.

{ ASKER IF R NEVER WORKED FULL-TIME AND DIDN’T WORK IN THE LAST 12 MONTHS
{ AND WASN’T WORKING LAST WEEK

RPAYJOB
JE-2. Did you ever work at a job or business for pay on a regular basis?

Yes.................................1
No......................................5 (GO TO JF SERIES)

RNUMJOB
JE-3. How many jobs did you work (last week / during the last week you
worked)?

Number of jobs __________

RFTPTX
JE-4. (Please think about the last week you worked on your (primary) job. Did
/ At your primary job, do/ Do) you work part-time or full-time, or some
of each? By full-time I mean 35 or more hours a week.

Full time.................1
Part time.................2
Some of each...........3

Spouse/Partner’s Current/Last Job Series (JF)

{ IF R IS NOT CURRENTLY MARRIED OR COHABITING, GO TO JG SERIES

SPLSTWK
JF-1. Please look at Card 81. Last week, what was (WIFE/PARTNER) doing? Was
she working, keeping house, going to school, or something else?

ENTER all that apply

Working............................................ 1 (GO TO SPNUMJOB JF-3)
Not working at job due to temporary illness,
vacation, strike, etc......................... 2 (GO TO SPNUMJOB JF-3)
On maternity or family leave from job.......... 3 (GO TO SPNUMJOB JF-3)
Unemployed, laid off, or looking for work.... 4
Keeping house.................................... 5
Taking care of family ............................ 6
Going to school.................................... 7
On permanent disability.......................... 8
Something else .................................... 9

{ASKED IF WIFE/PARTNER NOT EMPLOYED/WORKING LAST WEEK

SPPAYJOB
JF-2. Did she ever work at a job or business for pay on a regular basis?

Yes.................................1
No......................................5 (GO TO JG SERIES)
SPNUMJOB
JF-3. How many jobs did she work (last week/ during the last week she worked)?

Number of jobs ________

SPPTPTX
JF-3. (Please think about the last week she worked on her (primary) job. Did / At her primary job, does / Does) she work part time or full time, or some of each? By full time I mean 35 or more hours a week.

Full-time.................1
Part time................2
Some of each............3

Attitudes towards Sex, Contraception, Marriage, Gender and Parenthood (JG-JH)
{ JG series asked of all, unless otherwise indicated

JGINTR01
JG-0. Next, I would like to get your opinion on some matters concerning family life. I will read you some statements, and I would like you to tell me if you strongly agree, agree, disagree, or strongly disagree. The first is:

BETTER
JG-1. It is better for a person to get married than to go through life being single. Do you strongly agree, agree, disagree, or strongly disagree?

PROB if R says Neither agree nor disagree.

Strongly Agree ..................................1
Agree ...........................................2
Disagree ........................................3
Strongly Disagree ...............................4
IF R INSISTS: Neither agree nor disagree ........5

STAYTOG
JG-2. Divorce is usually the best solution when a couple can’t seem to work out their marriage problems.

PROB if R says Neither agree nor disagree.

Strongly Agree ..................................1
Agree ...........................................2
Disagree ........................................3
Strongly Disagree ...............................4
IF R INSISTS: Neither agree nor disagree ........5

SAMESEX
JG-3. Sexual relations between two adults of the same sex is always wrong. Do you strongly agree, agree, disagree, or strongly disagree?

PROB if R says Neither agree nor disagree.

Strongly Agree ..................................1
Agree ...........................................2
Disagree ........................................3
Strongly Disagree ...............................4
IF R INSISTS: Neither agree nor disagree ........5

ANYACT
JG-4. Any sexual act between two consenting adults is all right.
PROB if R says Neither agree nor disagree.

Strongly Agree ..................................1
Agree ...........................................2
Disagree ........................................3
Strongly Disagree ...............................4
IF R INSISTS: Neither agree nor disagree .......5

SXOK18
JG-5. It is all right for unmarried 18 year olds to have sexual relations if they have strong affection for each other.

PROB if R says Neither agree nor disagree.

Strongly Agree ..................................1
Agree ...........................................2
Disagree ........................................3
Strongly Disagree ...............................4
IF R INSISTS: Neither agree nor disagree .......5

SXOK16
JG-6. It is all right for unmarried 16 year olds to have sexual relations if they have strong affection for each other.

PROB if R says Neither agree nor disagree.

Strongly Agree ..................................1
Agree ...........................................2
Disagree ........................................3
Strongly Disagree ...............................4
IF R INSISTS: Neither agree nor disagree .......5

CHREWARD
JG-7. The rewards of being a parent are worth it, despite the cost and the work it takes.

PROB if R says Neither agree nor disagree.

Strongly Agree ..................................1
Agree ...........................................2
Disagree ........................................3
Strongly Disagree ...............................4
IF R INSISTS: Neither agree nor disagree .......5

CHSUPPOR
JG-8. It is okay for an unmarried female to have a child. Would you say you strongly agree, agree, disagree, or strongly disagree?)

PROB if R says Neither agree nor disagree.

Strongly Agree ..................................1
Agree ...........................................2
Disagree ........................................3
Strongly Disagree ...............................4
IF R INSISTS: Neither agree nor disagree .......5

GAYADOPT
JG-9. Gay or lesbian adults should have the right to adopt children.

Probe “neither agree nor disagree”

Strongly Agree ..................................1
**OKCOHAB**

JG-10. A young couple should not live together unless they are married.

PROB if R says Neither agree nor disagree.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>IF R INSISTS: Neither agree nor disagree</th>
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**WARM**

JG-11. A working mother can establish just as warm and secure a relationship with her children as a mother who does not work.

PROB if R says Neither agree nor disagree.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>IF R INSISTS: Neither agree nor disagree</th>
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**ACHIEVE**

JG-12. It is much better for everyone if the man earns the main living and the woman takes care of the home and family.

PROB if R says Neither agree nor disagree.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>IF R INSISTS: Neither agree nor disagree</th>
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**FAMILY**

JG-13. It is more important for a man to spend a lot of time with his family than to be successful at his career. Do you strongly agree, agree, disagree, or strongly disagree?

PROB if R says Neither agree nor disagree.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>IF R INSISTS: Neither agree nor disagree</th>
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(ASKED IF R IS LESS THAN 20 YEARS OLD)

**REACTSLF**

JG-14. If you got a female pregnant now how would you feel? Would you be very upset, a little upset, a little pleased, or very pleased?

Probe if R says he wouldn’t care

Very Upset

<table>
<thead>
<tr>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>IF R INSISTS: Neither agree nor disagree</th>
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</tbody>
</table>
A little Upset ..................2
A little Pleased ...............3
Very Pleased ..................4
IF R INSISTS: he wouldn’t care...5

( ASKED IF R NEVER HAD BIOLOGICAL OR ADOPTED CHILDREN)

CHBOther
JG-15. If it turns out that you do not have any children, would that
bother you a great deal, some, a little, or not at all?
A great deal ..............................1
Some ........................................2
A little ....................................3
Not at all .................................4

( IF R IS 25 OR OLDER, GO TO JH-6 ACASILANG.)

Attitudes towards Condoms (JH)

JHINT1
JH-1. The next question is about what might happen if you had sex and used a
condom. (Even if you have never had sex or used a condom, please think
about what might happen if you did.)

LESSPLSR
JH-2. Please look at Card 21. What is the chance that if you used a condom
during sex, you would feel less physical pleasure?
No chance..........................1
A little chance......................2
50-50 chance......................3
A pretty good chance...........4
An almost certain chance.......5

JHINTRO2
JH-3. (Now imagine that you are no longer in your current relationship for
whatever reason, and / Now think about what might happen if) you are
with a person with whom you are about to have sexual intercourse for the
first time.

EMBARRAS
JH-4. Please look at Card 21. What is the chance that it would be embarrassing
for you and a new partner to discuss using a condom?
No chance..............................1
A little chance..........................2
50-50 chance.........................3
A pretty good chance...............4
An almost certain chance.........5

APPREC1
JH-5. Please look at Card 21. What is the chance that if you used a condom, a
new partner would appreciate it?
No chance..............................1
A little chance..........................2
50-50 chance.........................3
A pretty good chance...............4
An almost certain chance.........5

( Question only intended for interviewer.)

ACASILANG
JH-6. Interviewer: Should ACASI be in English or Spanish?

   English............................1
   Spanish.........................2
SECTION K

Audio CASI

{ READ BY INTERVIEWER FROM THE SCREEN

INTRO_K1
INTRO-K1. For this last part of the interview, I’ll turn the computer over to you so that you can enter your answers by yourself. We have these headphones so that you can listen to the questions in privacy, and you can also read the questions on the computer screen. I will not be able to hear the questions or see the answers you type into the computer. After I explain a few of the keys that you’ll be using, I’ll help you with the first few questions, just to get you familiar with how this will work. Then I’ll leave you on your own to answer the rest of the questions in privacy.

When you are done with this section, a screen will come up that will instruct you in how to lock away your responses so that no one can see how you answered the questions. Then you can return the computer to me.

INTRO_K1b
INTRO-K1b. INTERVIEWER: Explain the following things to R:

Connect the headphones to the laptop.
Give the computer to the Respondent.
Show Respondent where to find number keys, Enter, Backspace, F11, F12, and Hyphen keys.

Show Respondent the Aid Card.
Explain how to adjust the volume.

Explain that you will be doing an unrelated task while the Respondent completes Audio CASI, but Respondent should feel free to interrupt with questions.

The next screen is for the Respondent.

A-CASI PRACTICE QUESTIONS (KA)

{ MACHINE AUDIO BEGINS HERE

INTRO_K2
INTRO-K2. These questions are for you to practice with. The interviewer is going to help you do this.

You may press the [BACKSPACE] key to clear an entry when you want to change an answer, or when the computer asks you to correct an answer.

Please press the large [Enter] key on the right side of the keyboard to see the first question.

PRACYEAR
KA-1. In what year were you born?

Please enter the 4-digit year you were born and press the [Enter] key.

Year ________
KA-2. In what month in [PRACYEAR] were you born?

Please enter the number for the month.

January ..........01
February ..........02
March ...........03
April ............04
May ..............05
June ............06
July .............07
August ..........08
September ......09
October ..........10
November .......11
December .......12

KA-3. The computer has recorded that you were born in [PRACMNTH, PRACYEAR]. Is this correct?

YES ........1 (KA-0 INTROK3a)
NO ...........5 (RETURN TO KA-1 PRACYEAR TO RE-ENTER CORRECT INFO)

KA-3a. Thank you. Now we will go over a few keystrokes which will help you complete the survey.

Please press [Enter] to continue

KA-3ab. If you want to replay the audio, press the [F11] key. It is located rear the top right side of the keyboard.

Please press [Enter] to continue

KA-3b. If you want to hide the question for a moment, press the [F12] key. To make the question reappear, simply press [F12]again. The [F12] key is located near the [F11] key on the top right side of the keyboard.

Please press [Enter] to continue

KA-3c. If you do not know the answer to a question, press the [CTRL] and [D] keys at the same time.

The [CTRL] key is at the bottom left of the keyboard. It is labeled “Ctrl”.

Please press [Enter] to continue

KA-3d. If you do not wish to answer a particular question, press the [CTRL] and [R] keys at the same time.

Please press [Enter] to continue

KA-3e. If you have any questions about how to use the computer, please
ask your interviewer now. Otherwise, please press the [Enter] key to continue.

**INTRO_K4**

**INTRO-K4.** These first questions are about your general health.

Please press [Enter] to continue

**GENHEALT**

**KA-4.** In general, how is your health? Would you say it is...

- Excellent ......................1
- Very good .....................2
- Good ..........................3
- Fair ..........................4
- Poor ..........................5

**RHEIGHT_FT**

**KA-5.** How tall are you?

First, please select the number of feet, then press [Enter].

- 3 feet ............ 3
- 4 feet ............4
- 5 feet ............5
- 6 feet ............6
- 7 feet ............7

(DK OR RF: GO TO KB SERIES)

**RHEIGHT_IN**

**KA-5.** Now please select the number of inches and then press [Enter].

- 0 inches ........00
- 1 inch ..........01
- 2 inches ........02
- 3 inches ........03
- 4 inches ........04
- 5 inches ........05
- 6 inches ........06
- 7 inches ........07
- 8 inches ........08
- 9 inches ........09
- 10 inches ......10
- 11 inches ......11

**RWEIGHT**

**KA-6.** How much do you weigh?

Please answer in pounds and then press [Enter].

Pounds _______

**Significant Events (KB)**

**INTRO_K5**

**INTRO-K5.** Now let’s talk about some things that you may have experienced recently in your life. We know that some of our questions are about things that you may not think about or talk about often. These things may be difficult to remember and some are personal.

Because this information is very important, please take as much
time as you need to read the questions and put your answers into
the computer in complete privacy. Your interviewer will never
know how you answer and will not ask you any questions about your
answers.

Please press [Enter] to continue

SHELTER
KB-1. In the last 12 months, that is, since (INTERVIEW MONTH, 2001) have you
stayed overnight in a shelter for the homeless or some other type of
shelter?

Yes ............1
No ..............5

JAILED
KB-2. In the last 12 months, have you spent any time in a jail, prison or a
juvenile detention facility?

Yes ............1 (GO TO INTRO_K6)
No ..............5

JAILED2
KB-3. Have you ever spent time in a jail, prison or juvenile detention center?

Yes ............1
No ..............5

Substance Use (KC)

INTRO_K6
INTRO-K6. These next questions are about your use of alcohol and other
substances.

Please press [Enter] to continue.

DRINK12
KC-1. During the last 12 months, that is, since (INTERVIEW MONTH, 2001), how
often have you had beer, wine, hard liquor, or other alcoholic
beverages?

Never ................................1
Once or twice during the year ........2
Several times during the year ........3
About once a month ..................4
About once a week ...................5
About once a day .....................6

( ASKED IF R REPORTED ANY ALCOHOL CONSUMPTION IN LAST 12 MONTHS

BINGE12
KC-2. During the last 12 months, how often did you have 5 or more drinks
within a couple of hours?

Never ................................1
Once or twice during the year ........2
Several times during the year ........3
About once a month ..................4
About once a week ...................5
About once a day .....................6

POT12
KC-3. During the last 12 months, how often have you smoked marijuana?
   Never ....................................1
   Once or twice during the year ..........2
   Several times during the year ..........3
   About once a month .....................4
   About once a week ......................5
   About once a day ........................6

COC12
KC-4. During the last 12 months, how often have you used cocaine?
   Never ....................................1
   Once or twice during the year ..........2
   Several times during the year ..........3
   About once a month .....................4
   About once a week ......................5
   About once a day ........................6

CRACK12
KC-5. During the last 12 months, how often have you used crack?
   Never ....................................1
   Once or twice during the year ..........2
   Several times during the year ..........3
   About once a month .....................4
   About once a week ......................5
   About once a day ........................6

INJECT12
KC-6. During the last 12 months, how often have you taken non-prescription drugs using a needle, that is, you took them only for the experience or feeling it caused? This includes “shooting up” and “skin-popping.”
   Never ....................................1
   Once or twice during the year ..........2
   Several times during the year ..........3
   About once a month .....................4
   About once a week ......................5
   About once a day ........................6

EVRSHARE
KC-7. At any time in your life, have you ever used a needle that you knew or suspected someone else had used before you?
   Yes ..................1
   No .................5

Pregnancy/Abortion (KD)
INTRO_K7
INTRO-K7. Here are a few questions asking about pregnancies you have fathered.

   Please press [Enter] to continue.

{ IF R HAS NOT REPORTED FATHERING ANY PREGNANCIES IN SECTIONS C-F OF THE QUESTIONNAIRE, ASK KD-1 MADEPREG;
{ ELSE IF ANY PREGNANCIES PREVIOUSLY REPORTED, GO TO KD-2 PREGTOT.

MADEPREG
KD-1. To the best of your knowledge, have you ever made someone pregnant?
   Yes ............1
   No ............5 (TOLDPREG KD-5)

PREGTOT
KD-2. To the best of your knowledge, how many times have you ever made someone pregnant?
   Number ____

NUMABORT
KD-3. To the best of your knowledge, how many of these pregnancies ended in abortion?
   Number ____

NUMLIVEB
KD-4. ASK ONLY IF NUMBER OF ABORTIONS < NUMBER OF TOTAL PREGNANCIES:
   To the best of your knowledge, how many of these pregnancies resulted in a baby being born?
   (Twins or triplets from a pregnancy count as one pregnancy.)
   Number ____

{ IF R’S AGE >= 25, GO TO INTRO_K8.

{ ASKED ONLY FOR R’s UNDER AGE 25.

TOLDPREG
KD-5. Have you ever been told by someone that you may have made her pregnant?
   Yes ............1
   No ............5 (GO TO KE SERIES)

WHATHAPP
KD-6. The last time you were told by someone that you may have made her pregnant, ...
   Did it turn out that she was pregnant and you were the father, ....1
   Or was she pregnant but you were not the father, ..................2
   Or did it turn out that she was not pregnant? .....................3

Sex with Females (KE)
INTRO_K8
INTRO-K8. The next questions are about sexual experiences that you may have had.
   Please press [Enter] to continue.

{ READ IF R IS UNDER AGE 20 AND HE HAS NEVER BEEN MARRIED.
INTRO_K9a
INTRO-K9a. Here are some things you may have done with a female. If you have ever done this at least one time with a female, answer yes. If you have never done this, answer no.
   Please press [Enter] to continue.

{ ASKED IF R IS UNDER AGE 20 AND HE HAS NEVER BEEN MARRIED.
FEMTOUCH
KE-1. Has a female ever touched your penis until you ejaculated, or "came"?

Yes ............1 (KE-2 VAGSEX)
No ............5 (KE-2 VAGSEX)

READ IF R IS 20 OR OLDER OR IF R HAS EVER BEEN MARRIED.

INTRO_K9b

INTRO-K9b. Here are some things you may have done with a female. If you have ever done this at least one time with a female, answer yes. If you have never done this, answer no.

ASKED FOR ALL VAGSEX

KE-2. Have you ever put your penis in a female's vagina (also known as vaginal intercourse)?

Yes ............1
No ............5 (KE-5 ORALSEX2)

AGEVAGR

KE-2b. The first time this occurred, how old were you?

Age in years ________

CONDVAG

KE-3. Did you use a condom the last time you had vaginal intercourse with a female?

Yes ............1
No ............5 (KE-5 ORALSEX2)

WHYCONDNL

KE-4. The last time you had vaginal intercourse with a female, did you use the condom...

To prevent pregnancy, .........................................................1
To prevent diseases like syphilis, gonorrhea or AIDS, ..2
For both reasons, .................................................................3
Or for some other reason ......................................................4

ORALSEX2

KE-5. Has a female ever put her mouth on your penis (also known as oral sex or fellatio)?

Yes ............1
No ............5 (KE-7 ORALSEX1)

CONDFELL

KE-6. Did you use a condom the last time a female put her mouth on your penis?

Yes ............1
No ............5

ORALSEX1

KE-7. Have you ever put your mouth on a female’s vagina (also known as oral sex or cunnilingus)?

Yes ............1
No ............5

ANALSEX

KE-8. Have you ever put your penis in a female's rectum or butt (also known as
anal sex)?

Yes ............1
No .............5 (CONDSEXL KE-10)

CONDANAL
KE-9. Did you use a condom the last time you had anal sex with a female?

Yes ............1
No .............5

{ ASKED IF R REPORTED MORE THAN 1 TYPE OF MALE-GENITAL-INVOLVING SEX WITH A FEMALE PARTNER.

CONDSEXL
KE-10. The very last time you had any type of sex -- that is, vaginal intercourse or anal sex or oral sex -- with a female partner, did you use a condom?

Yes ............1
No .............5

{ IF R’S AGE >= 18, CONTINUE WITH KF SERIES.
{ ELSE IF R’S AGE< 18, GO TO KG SERIES.

Non Voluntary Intercourse: Female - Male (KF)

{ KF SERIES ASKED ONLY IF R AGED 18 OR OLDER.

{ IF R EVER HAD VAGINAL SEX, ASK KF-1 WANTSEX1;
{ ELSE GO TO KF-2 EVRFORCD.

WANTSEX1
KF-1. Think back to the very first time you had vaginal intercourse with a female. Which would you say comes closest to describing how much you wanted that first vaginal intercourse to happen?

I really didn’t want it to happen at the time ........1
I had mixed feelings -- part of me wanted it to happen at the time and part of me didn’t ........2
I really wanted it to happen at the time .............3

{ IF DK OR RF, GO TO KF-1b HOWOLD

HOWOLD
KF-1b. How old were you when this first intercourse happened?

Age in years _____

EVRFORCD
KF-2. At any time in your life, have you ever been forced by a female to have vaginal intercourse against your will?

Yes............1
No.............5 (KG SERIES)

{ REMAINING ITEMS IN KF SERIES ONLY ASKED IF R REPORTED EVER BEING FORCED BY A FEMALE

AGEFORC1
KF-3. How old were you the very first time you were forced by a female to have vaginal intercourse against your will?

Age in years _____
INTROK10
INTROK10. The first time this occurred, were any of these kinds of force used?

Please press [Enter] to continue.

GIVNDRG2
KF-4a. Were you given alcohol or drugs?

Yes.........1
No.........5

SHEBIGOL
KF-4b. Did you do what she said because she was bigger than you or a grown-up, and you were young?

Yes.........1
No.........5

ENDRELA2
KF-4c. Were you told that the relationship would end if you didn’t have sex?

Yes.........1
No.........5

WRDPRES2
KF-4d. Were you pressured into it by her words or actions, but without threats of harm?

Yes.........1
No.........5

THRTPHY2
KF-4e. Were you threatened with physical hurt or injury?

Yes.........1
No.........5

PHYSHRT2
KF-4f. Were you physically hurt or injured?

Yes.........1
No.........5

HELDDWN2
KF-4g. Were you physically held down?

Yes.........1
No.........5

STD/HIV Risk Behaviors: Females (KG)

{ IF R NEVER HAD ORAL, ANAL, VAGINAL SEX WITH FEMALE, GO TO SECTION KH

INTROK11
INTR-K11. This next section is about your female sex partners. Now please think about any female with whom you have had vaginal intercourse, oral sex, or anal sex -- any of these.

Please press [Enter] to continue.
PARTSLIF

KG-1. Thinking about your entire life, how many female sex partners have you had? Please count every partner even those you had sex with only once.

Number _______

PARTS12

KG-2. Thinking about the last 12 months, that is, since (INTERVIEW MONTH, 2001), how many female sex partners have you had? Please count every partner even those you had sex with only once.

Number _______

{ IF R’S AGE < 18 AND R HAS A CURRENT SEXUAL PARTNER, READ INTROK12.
{ ELSE IF R’S AGE < 18 AND R HAS NO CURRENT SEXUAL PARTNERS OR
{ R’S AGE >= 18, GO TO KG-4 NONMONOG

INTROK12

INTRO-K12. You indicated in the interview that you have (NUMBER) current sexual partner. Here are a couple of questions about (her/those partners).

{ SET UP LOOP TO ASK AGE OF EACH OF 1, 2, OR 3 CURRENT PARTNERS

CP#AGE1

KG-3a. Earlier you reported that you last had sexual intercourse with (PARTNER’S NAME) in (INTERVIEW MONTH, 2001). How old was she at that time?

Age in years_________ (NONMONOG KG-4)

RELAUGE#

KG-3b. Is she older than you, younger than you or about the same age?

Older .................1
Younger .................2
About the same age ...3 (NONMONOG KG-4)

HOWMUCH#

KG-3c. By how many years?

1-2 years ............1
3-5 years ............2
6-10 years ...........3
More than 10 years ...4

{ IF R HAD NO FEMALE SEXUAL PARTNERS IN LAST 12 MONTHS, GO TO SECTION KH

{ ASKED IF R HAD AT LEAST 1 FEMALE SEXUAL PARTNER IN LAST 12 MONTHS

NONMONOG

KG-4. During the last 12 months, that is, since (INTERVIEW MONTH, 2001), did you have sex with any females who were also having sex with other people at around the same time?

Yes ............1
No ............5

{ ASKED IF R HAD FEMALE SEXUAL PARTNER IN LAST 12 MONTHS

HIGHsx12

KG-5. During the last 12 months, how often were you "high" on alcohol or drugs when you had sex with a female?
Never ..................1
Sometimes ..............2
About half the time ....3
Often ..................4
Always ................5

{ ASKED IF R HAD FEMALE SEXUAL PARTNER IN LAST 12 MONTHS

FEMSHT12
KG-6. In the last 12 months, have you had sex with a female who takes or
shoots street drugs using a needle?

Yes ..........1
No ...........5

{ ASKED IF R HAD FEMALE SEXUAL PARTNER IN LAST 12 MONTHS

JOHNFREQ
KG-7. In the last 12 months, have you given a female money or drugs in
exchange for having sex with you?

Yes ..........1
No ...........5

{ ASKED IF R HAD FEMALE SEXUAL PARTNER IN LAST 12 MONTHS

PROSTFRQ
KG-8. In the last 12 months, has a female given you money or drugs to have sex
with her?

Yes ..........1
No ...........5

{ ASKED IF R HAD FEMALE SEXUAL PARTNER IN LAST 12 MONTHS

HIVFEM12
KG-9. In the last 12 months, have you had sex with a female who you knew was
infected with the AIDS virus?

Yes ..........1
No ...........5

Sex with Males (KH)

{ ASKED FOR ALL

INTROK13
KH-0. The next questions ask about sexual experience you may have had with
another male. Have you ever done any of the following with another
male?

Please press [Enter] to continue.

ORALSEX3
KH-1. Put his penis in your mouth (oral sex)?

Yes ............1
No .............5

ORALSEX4
KH-2. Put your penis in his mouth (oral sex)?

Yes ............1
No .............5
ANALSEX2
KH-3. Put his penis in your rectum or butt (anal sex)?

Yes ............1
No .............5

ANALSEX3
KH-4. Put your penis in his rectum or butt (anal sex)?

Yes ............1
No .............5

Non Voluntary Intercourse: Male -> Male (KI)
{ IF R’S AGE < 18, GO TO KJ SERIES.
{ IF R’S AGE >= 18, CONTINUE WITH KI SERIES.

EVRFORC2
KI-1. At any time in your life, have you ever been forced by a male to have oral or anal sex against your will?

Yes............1
No.............5 (KJ SERIES)

{ REMAINDER OF KI SERIES ONLY ASKED IF R REPORTED EVER BEING FORCED BY A MALE

AGEFORC2
KI-2. How old were you the very first time you were forced by a male to have sexual intercourse against your will?

Age in years ____

INTROK14
KI-3. The first time this occurred, were any of these kinds of force used?

Please press [Enter] to continue.

GIVNDRG3
KI-3a. Were you given alcohol or drugs?

Yes............1
No.............5

HEBIGOLD
KI-3b. Did you do what he said because he was bigger than you or a grown-up, and you were young?

Yes............1
No.............5

ENDRELA3
KI-3c. Were you told that the relationship would end if you didn’t have sex?

Yes............1
No.............5

WRDPRES3
KI-3d. Were you pressured into it by his words or actions, but without threats of harm?
THRTPHY3  
KI-3e. Were you threatened with physical hurt or injury?  
Yes........1  
No........5

PHYSHRT3  
KI-3f. Were you physically hurt or injured?  
Yes........1  
No........5

HELDDWN3  
KI-3g. Were you physically held down?  
Yes........1  
No........5

STD/HIV Risk Behaviors: Males (KJ)  
{ IF R REPORTED NO ORAL OR ANAL SEX WITH A MALE PARTNER, GO TO KK-4 ATTRACT.  

INTROK15  
INTRO-K15. This next section is about males with whom you have had sexual contact. Think about any male with whom you have had oral or anal sex.  

Please press [Enter] to continue.  

MALEPRTS  
KJ-1. Thinking about your entire life, how many male sex partners have you had?  

Number ________

MALPRT12  
KJ-2. During the last 12 months, that is, since (INTERVIEW MONTH, 2001), how many male sexual partners have you had?  

Number ________

CNDLSMAL  
KJ-3. The last time you had oral or anal sex with a male partner, was a condom used?  

Yes ............1  
No .............5

{ IF R REPORTED NO MALE SEXUAL PARTNERS IN LAST 12 MONTHS, GO TO KK SERIES.  

{ ASKED IF R HAD AT LEAST 1 MALE SEXUAL PARTNER IN LAST 12 MONTHS

HIMAL12  
KJ-4. During the last 12 months, that is, since (INTERVIEW MONTH, 2001), how often were you “high” on alcohol or drugs when you had sex with a male?  

Never ...............1  
Sometimes ............2  
About half the time ....3
Often ..................4
Always .................5

MALSH12
KJ-5. In the last 12 months, have you had sex with a male who takes or shoots street drugs using a needle?

Yes ............1
No ............5

JOHN2FRQ
KJ-6. In the last 12 months, have you given a male money or drugs in exchange for having sex with you?

Yes ............1
No ............5

PROS2FRQ
KJ-7. In the last 12 months, has a male given you money or drugs to have sex with him?

Yes ............1
No ............5

HIVMALL12
KJ-8. In the last 12 months, did you have sex with a male who you knew was infected with the AIDS virus?

Yes ............1
No ............5

Sexual Attraction, Orientation, & Experience with STDs (KK)

{ IF R HAD SEXUAL ACTIVITY WITH ONLY FEMALES OR WITH ONLY MALES IN HIS LIFE,
{ GO TO KK-4 ATTRACT.

{ IF R HAD SEXUAL ACTIVITY WITH BOTH FEMALES AND MALES IN HIS LIFE,
{ BUT ONLY WITH MALES OR ONLY WITH FEMALES IN LAST 12 MONTHS,
{ GO TO KK-4 ATTRACT

{ ASKED IF R HAD BOTH MALE AND FEMALE PARTNERS IN THE LAST 12 MONTHS

CONDALLS
KK-1. The very last time you had any type of sex -- that is vaginal intercourse or anal sex or oral sex -- with a male or female partner, was a condom used?

Yes ............1
No ............5 (KK-4 ATTRACT)

MFLASTP
KK-2. Was that last sexual partner male or female?

Male ............1 (KK-4 ATTRACT)
Female ........2

{ ASKED ONLY IF LAST SEXUAL PARTNER WAS A FEMALE

WHYCOND
KK-3. Was the condom used...

To prevent pregnancy ...........................................1
To prevent diseases like syphilis, gonorrhea or AIDS ........................................2
For both reasons .................................................................................................3
Or for some other reason .....................................................................................4

ATTRACT

KK-4. People are different in their sexual attraction to other people. Which best describes your feelings? Are you...

Only attracted to females .........................................................1
Mostly attracted to females ......................................................2
Equally attracted to females and males ...............................3
Mostly attracted to males .........................................................4
Only attracted to males ..........................................................5
Not sure .........................................................................................6

ORIENT

KK-5. Do you think of yourself as ...

Heterosexual ..............................................................1
Homosexual .............................................................2
Bisexual ..........................................................................3
Or something else? .........................................................4

INTROK16

KK-6. These next questions are about your sexual and reproductive health.

Please press [Enter] to continue.

STDTST12

KK-7. In the past 12 months, that is, since (INTERVIEW MONTH, 2001), have you been tested by a doctor or other medical care provider for a sexually transmitted disease like gonorrhea, chlamydia, herpes, or syphilis?

Yes ................1
No ................5

STDTRT12

KK-8. In the past 12 months, have you been treated or received medication from a doctor or other medical care provider for a sexually transmitted disease like gonorrhea, chlamydia, herpes, or syphilis?

Yes ................1
No ................5 (KK-11 HERPES)

( ASKED ONLY IF R REPORTED STD TREATMENT IN LAST 12 MONTHS

GON

KK-9. In the last 12 months, have you been told by a doctor or other provider that you had gonorrhea?

Yes ................1
No ................5

( ASKED ONLY IF R REPORTED STD TREATMENT IN LAST 12 MONTHS

CHLAM

KK-10. In the last 12 months, have you been told by a doctor or other medical care provider that you had chlamydia?

Yes ................1
No ................5

HERPES

KK-11. At any time in your life, have you ever been told by a doctor or
other medical care provider that you had genital herpes?

Yes ............1  
No ............5

**GENWARTS**

KK-12. At any time in your life, have you ever been told by a doctor or other medical care provider that you had genital warts?

Yes ............1  
No ............5

**SYPHILIS**

KK-13. At any time in your life, have you ever been told by a doctor or other medical care provider that you had syphilis?

Yes ............1  
No ............5

**Family Income and Public Assistance (KL)**

**INTROK17**

KL-0. Income is important in analyzing the information we collect. For example, this information helps us to learn whether persons in one income group use health services more or less often than another group.

Please press [Enter] to continue.

( READ IF HOUSEHOLD INCLUDES MORE THAN JUST R. 

**INTROK18**

KL-1. IF R IS MARRIED AND HOUSEHOLD SIZE > 2, SAY:

The next questions are about your combined family income last year, that is, in the year 2001. When answering these questions, please remember that "combined family income" means your income plus your wife’s income, income from any of your family members that live here, and income from any of your wife’s family members that live here, before taxes.

( THERE ARE OTHER WORDING VARIANTS, DETERMINED BY HOUSEHOLD SIZE & COMPOSITION

Please press [Enter] to continue.

**WAGE**

KL-1a. In the year 2001, did (you or any members of your family living here) receive any wages and salaries, including tips, bonuses and overtime?

Wages and salaries (including tips, bonuses, and overtime) are paid by employers in compensation for work performed by the employee. This includes wages to armed forces personnel.

Yes.....1
No......5

**SELFINC**

KL-1b. In the year 2001, did you (or any members of your family living here) receive any income from self employment including business and farm income?

Self employment means being a full or part owner in a business or farm.
SOCSEC
KL-1c.
(In the year 2001, did you (or any members of your family living here) receive...?)

Any income from Social Security or Railroad Retirement?

Social Security retirement benefits are administered by the Social Security Administration and are paid to retired workers and their families.

Railroad Retirement benefits are administered by the Railroad Retirement Board and are paid to retired railroad workers and their families.

Yes.....1
No.......5

DISABIL
KL-1d.
(In the year 2001, did you (or any members of your family living here) receive...?)

Any income from any disability pension (other than Social Security or Railroad Retirement)?

Yes.....1
No.......5

RETIRE
KL-1e.
(In the year 2001, did you (or any members of your family living here) receive...?)

Any income from any retirement or survivor pension (other than Social Security or Railroad Retirement)?

Yes.....1
No.......5

SSI
KL-1f.
(In the year 2001, did you (or any members of your family living here) receive...?)

Any income from Supplemental Security Income (SSI)?

Supplemental Security Income is paid to persons aged 65 and over and to blind or disabled persons with incomes below specified levels. The benefits are administered by the Social Security Administration.

Yes....1
No.....5

UNEMP
KL-1g.
(In the year 2001, did you (or any members of your family living here) receive...?)

Any income from unemployment compensation?
Unemployment compensation is payment made by states to involuntarily unemployed workers who are able to work, available to work, and meet other state requirements.

Yes.....1
No.......5

CHLDSUPP
KL-1h. (In the year 2001, did you (or any members of your family living here) receive...)

Any income from child support?

Yes.....1
No.......5

INTEREST
KL-1i. (In the year 2001, did you (or any members of your family living here) receive...)

Any income from interest from savings or other bank accounts?

Yes.....1
No.......5

DIVIDEND
KL-1j. (In the year 2001, did you (or any members of your family living here) receive...)

Any income from dividends received from stocks or mutual funds, or net rental income from property, royalties, estates or trusts?

Yes.....1
No.......5

OTHINC
KL-1k. In the year 2001, did you (or any members of your family living here) receive any income from any other source, such as alimony, contributions from family or others, Veteran's Administration (VA) payments, or Worker's Compensation?

Any other source could include alimony, VA payments, worker's compensation, foster care payments, and other retirement income. Also include cash awards, education stipends, trust funds from other relatives, and anything else adding to family income.

Yes.....1
No.......5

TOTINCWMY
KL-2. The next question will ask about (your total income / the total combined income of your family) in the year 2001.

Remember, this item is important and your answers will be kept confidential. Will it be easier for you to report the total income per week, per month, or per year?

Week............1
Month.............2
Year.............3

TOTINC
KL-3. Which category represents your total (weekly/monthly/yearly) income / the total combined (weekly/monthly/yearly) income of your family in the year 2001, including income from all the sources you just went through, such as wages, salaries, Social Security or retirement benefits, help from relatives, and so forth? Please enter the amount before taxes.

{ONSCREEN NOTES REMIND R OF WHOSE INCOME TO INCLUDE

(WEEKLY INCOME CATEGORIES)

<table>
<thead>
<tr>
<th>Weekly Income</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNDER $96</td>
<td>1</td>
</tr>
<tr>
<td>$96-143</td>
<td>2</td>
</tr>
<tr>
<td>$144-191</td>
<td>3</td>
</tr>
<tr>
<td>$192-239</td>
<td>4</td>
</tr>
<tr>
<td>$240-288</td>
<td>5</td>
</tr>
<tr>
<td>$289-384</td>
<td>6</td>
</tr>
<tr>
<td>$385-480</td>
<td>7</td>
</tr>
<tr>
<td>$481-576</td>
<td>8</td>
</tr>
<tr>
<td>$577-672</td>
<td>9</td>
</tr>
<tr>
<td>$673-768</td>
<td>10</td>
</tr>
<tr>
<td>$769-961</td>
<td>11</td>
</tr>
<tr>
<td>$962-1,153</td>
<td>12</td>
</tr>
<tr>
<td>$1,154-1,441</td>
<td>13</td>
</tr>
<tr>
<td>$1,442 or more</td>
<td>14</td>
</tr>
</tbody>
</table>

(MONTHLY INCOME CATEGORIES)

<table>
<thead>
<tr>
<th>Monthly Income</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNDER $417</td>
<td>1</td>
</tr>
<tr>
<td>$417-624</td>
<td>2</td>
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<tr>
<td>$625-832</td>
<td>3</td>
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<tr>
<td>$833-1,041</td>
<td>4</td>
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<tr>
<td>$1,042-1,249</td>
<td>5</td>
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<tr>
<td>$1,250-1,666</td>
<td>6</td>
</tr>
<tr>
<td>$1,667-2,082</td>
<td>7</td>
</tr>
<tr>
<td>$2,083-2,499</td>
<td>8</td>
</tr>
<tr>
<td>$2,500-2,916</td>
<td>9</td>
</tr>
<tr>
<td>$2,917-3,332</td>
<td>10</td>
</tr>
<tr>
<td>$3,333-4,166</td>
<td>11</td>
</tr>
<tr>
<td>$4,167-4,999</td>
<td>12</td>
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<tr>
<td>$5,000-6,249</td>
<td>13</td>
</tr>
<tr>
<td>$6,250 or more</td>
<td>14</td>
</tr>
</tbody>
</table>

(YEARLY INCOME CATEGORIES)

<table>
<thead>
<tr>
<th>Yearly Income</th>
<th>Code</th>
</tr>
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<tbody>
<tr>
<td>UNDER $5,000</td>
<td>1</td>
</tr>
<tr>
<td>$5,000-7,499</td>
<td>2</td>
</tr>
<tr>
<td>$7,500-9,999</td>
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<tr>
<td>$10,000-12,499</td>
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<tr>
<td>$12,500-14,999</td>
<td>5</td>
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<tr>
<td>$15,000-19,999</td>
<td>6</td>
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<tr>
<td>$20,000-24,999</td>
<td>7</td>
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<tr>
<td>$25,000-29,999</td>
<td>8</td>
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<td>$30,000-34,999</td>
<td>9</td>
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<tr>
<td>$35,000-39,999</td>
<td>10</td>
</tr>
<tr>
<td>$40,000-49,999</td>
<td>11</td>
</tr>
</tbody>
</table>
{ IF TOTINC IS REPORTED, GO TO KL-4 PUBASST.

{ ASKED IF INCOME = DK OR RF

FMINCDK1
KL-3a. Was it $20,000 or more last year?
Yes...........1
No.............5 (KL-4 PUBASST)

FMINCDK2
KL-3b. Was it $50,000 or more last year?
Yes...........1
No.............5

PUBASST
KL-4. At any time in the year 2001, even for one month, did you or any members of your family living here receive any government payments because your income was low, such as public assistance or welfare?
Yes ............1
No .............5 (KL-6 FOODSTMP)

PUBASTYP
KL-5. In the year 2001, did you or any members of your family living here receive welfare or public assistance payments sometimes called Aid to Families with Dependent Children (AFDC), Aid to Dependent Children (ADC), or some other type of assistance payments?

Please enter all that apply.

To enter multiple answers, enter the number of the first answer, press the space bar, enter the number of the next answer, and so forth. The space bar is the long key at the bottom of the keyboard, in the middle. Press [Enter] once you're finished entering all your answers.

Your state's public assistance program, possibly referred to as AFDC or ADC.................................1
General assistance/Emergency Assistance....................2
Other assistance.............................................3

FOODSTMP
KL-6. In the year 2001, did you or any members of your family living here receive food stamps?
Yes ............1
No .............5

WIC
KL-7. In the year 2001, did you or any members of your family living here receive WIC, the Women, Infants, and Children Nutrition Program?
Yes ............1
No .............5

HLPTRANS
KL-8a. In the year 2001, did you or any members of your family living here receive the following type of government assistance because
your income was low...

Transportation assistance, such as gas vouchers, bus passes, or help registering, repairing, or insuring a car?

Yes............1  No.............5

**HLPCHLDC**

KL-8b. *(In the year 2001, did you or any members of your family living here receive the following type of government assistance because your income was low...)*

Any child care services or assistance so you or they could go to work or school or training?

Yes............1  No.............5

**HLPJOB**

KL-8c. *(In the year 2001, did you or any members of your family living here receive the following type of government assistance because your income was low...)*

A social services or Welfare office’s help with job training, a Job Club, a job search program, or anything else to help you or anyone in the household try to find a job?

Yes............1  No.............5

**Lock**

The responses you have given in this section will now be locked away to maintain your privacy. In order to activate the lock, please enter a number between 1 and 100 and press [Enter].

**CONCLUSN**

CONCLUSN. Thank you again for your participation in this study. Your responses to this special section have been successfully locked away. Please turn the computer back to the interviewer.

**INTVCLOSE**

INTVCLOSE. INTERVIEWER: PLEASE ENTER [1] TO END THE INTERVIEW.