

## National Survey of Family Growth MALE Questionnaire in CAPI-Lite Format

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{THIS TEXT WILL BE ADDED TO THE QUESTIONNAIRE IN RESPONSE TO NEW OMB GUIDELINES.

*All information which would permit identification of any individual, a practice, or an establishment will be held confidential, will be used for statistical purposes only by NCHS staff, contractors, and agents only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or the establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m) and the Confidential Information Protection and Statistical Efficiency Act (PL-107-347).*

{THIS ITALICIZED TEXT APPEARS ON SCREEN, IN COMPLIANCE WITH OMB GUIDELINES.

*Public reporting burden of this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, GA 30333; ATTN: PRA (0920-0314)*

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(NOTE: CAPI is Computer-Assisted Personal Interviewing. This is the "CAPI-Lite" version of the NSFG Cycle 7, Year 3 male questionnaire, showing basic question wording and routing. The full specifications, with detailed routing statements and all variants of each question are included in the CAPI Reference Questionnaire ("CRQ") that was used to guide programming of the instrument.)

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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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to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74,  
Atlanta, GA 30333; ATTN: PRA (0920-0314)

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.)***

(ASKED IF RESPONDENT DID NOT KNOW OR REFUSED TO PROVIDE AGE AND BIRTHDAY  
**MISSBRTH:**

AA-2A. In order to proceed with this interview, we need to know either  
your age or your date of birth. I'd like to assure you that all  
information collected in this survey will remain confidential and  
be used only for statistical tabulations. Would you please give  
me your age or date of birth?

Yes .....1 **RETURN TO AGE\_A AA-1**  
No .....5 **GO TO TERMINATION SCRIPT TERMAGE AA-3A.**

{ 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 marital status and living together. Please look at Card 1. What is your current marital or cohabiting 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

{ASKED 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

{ASKED IF HISPANIC

**HISPGRP**

AC-2. Are you Puerto Rican, Cuban, Mexican, Central or South American, or a member of some other group?

Puerto Rican.....1  
Cuban.....2  
Mexican.....3  
Central or South American.....4  
Member of some other group.....7

**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.

{(NOTE: IF THE RESPONDENT HIMSELF PROVIDED THE SCREENER INFORMATION, (IS THE  
 "SCREENER INFORMANT"), HE ONLY PROVIDES RELATIONSHIP ("Relar") OF EACH PRE-  
 FILLED HOUSEHOLD MEMBER. IF HE IS NOT THE SCREENER INFORMANT, HE VERIFIES THE  
 INFORMATION OF EACH PRE-FILLED HOUSEHOLD MEMBER AND PROVIDES RELATIONSHIP.)

	Verify	Name	UsualRes	Sex	Age	Relar	RowDone
HHL[1]							
HHL[2]							
HHL[3]							
HHL[4]							
HHL[5]							
HHL[6]							
HHL[7]							
HHL[8]							
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 FINAL 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 R says 'foster sister' or 'foster brother', enter 23, 'Other non relative'.*

(IF HOUSEHOLD MEMBER IS MALE, DISPLAY:)

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

(IF HOUSEHOLD MEMBER IS FEMALE, DISPLAY:)

Wife .....	1
Female partner .....	2
Biological daughter .....	3
Step-daughter (daughter of spouse) .....	4
Adopted daughter .....	5
Legal ward .....	6
Foster child .....	7
Partner's daughter .....	8
Granddaughter .....	9
Niece .....	10
Biological mother .....	11
Step-mother (wife of father) .....	12
Adoptive mother .....	13
Legal guardian .....	14
Foster parent .....	15
Your parent's female partner .....	16
Grandmother .....	17
Aunt .....	18

Sister .....	19
Other female relative .....	20
Roommate (female) .....	21
Tenant or boarder (female) .....	22
Other female nonrelative .....	23

**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 TO A MALE

**SMSEXMAR**

AD-7a. Because this questionnaire was originally designed to capture information on opposite-sex marriages, some of the questions may not pertain to your situation. We would appreciate it if you would answer as many questions as are relevant.

{ASKED IF R IS MARRIED/COHABITING BUT WIFE/PARTNER NOT LISTED IN HH ROSTER

**WPLOCATN**

AD-8. Please look at Card 5. 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 7. What is [WIFE/PARTNER'S NAME]'s relationship to [CHILD'S NAME]?

Biological mother .....	1
Stepmother .....	2
Adoptive mother .....	3
Aunt, grandmother, or some other relation .....	4
Foster mother or legal guardian.....	5
Not related (legally or by blood).....	6

**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 or middle school, 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 8. 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)

**COMGRD**

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 12 YRS OF SCHOOLING



**DIPGED**

AE-6. Do you have either a high school diploma, a GED certificate, or both?

High school diploma only ...1  
GED certificate only.....2 (GO TO AE-8 HISCHGRD)  
Both .....3  
Neither.....5 (GO TO AE-8 HISCHGRD)

{ASKED IF R HAS A HIGH SCHOOL DIPLOMA

**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 H.S. DIPLOMA AND HIGHEST GRADE IS > 12

**HISCHGRD**

AE-8. (Not counting your GED classes,) what is the highest grade of elementary, junior high or middle school, 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?  
If R indicates he has a trade-school degree, such as cosmetology or truck driving, ENTER [5].

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

{ASKED IF R HAS A COLLEGE OR UNIVERSITY DEGREE

**DEGREES**

AE-11. Please look at Card 9. What is the highest college or university degree you have?

Associate's degree .....1 (GO TO AF SERIES)  
Bachelor's degree .....2  
Master's degree .....3

Doctorate degree .....4  
Professional School degree ...5

{ ASKED IF R HAS AT LEAST A BACHELOR'S DEGREE

**EARNBA\_M, EARNBA\_Y**

AE-12. In what month and year did you get your Bachelor's degree?

*ENTER month and year*

---

**Childhood background (AF)**

**AFINTRO**

AF-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

{ ASKED IF AGE >=18 OR IF (AGE<18 AND R HAS A PARENT OR PARENT-LIKE PERSON IN { THE HOUSEHOLD

**ONOWN**

AF-0a. (Before you turned 18, did you ever live/Have you ever lived) away from your parents or guardians?

Please include times you were away at college or in the Armed Forces. But, do not include times you were away at boarding school for elementary, middle, or high school, or living in an institution or jail or group home. Also, please do not include temporary supervised arrangements such as summer camp.

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

{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**

AF-1. Between your birth/adoption 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 or adoption and the present time.*

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

{ASKED OF ALL

**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 10, 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 who was 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.....5  
Foster father.....6  
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

{ASKED IF R HAD A MOTHER OR ANY MOTHER-FIGURE WHO RAISED HIM

**MOMDEGRE**

AF-6. Please look at Card 11. 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

{ASKED IF R HAD A MOTHER OR ANY MOTHER-FIGURE WHO RAISED HIM

**MOMWORK**

AF-7. During most of the time you were growing up, that is when you were 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

{ASKED IF R HAD A MOTHER OR ANY MOTHER-FIGURE WHO RAISED HIM

**MOMCHILD**

AF-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**

AF-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**

AF-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**

AF-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

{ASKED IF R HAD A FATHER OR ANY FATHER-FIGURE WHO RAISED HIM  
**DADDEGRE**

AF-12. Please look at Card 11. 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, EVCOHAB1=1  
**NUMCOH1**

AG-4. Not including the (woman/women) you married, how many other female

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

**OMB No. 0920-0314**

**Expiration: 04/30/09**

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

{ ASKED IF NEVER MARRIED AND EVER COHABITED, EVCOHAB2 AG-5 = 1

**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

#### Ever had Sex; Sex Communication (BA)

{ ASKED IF R NEVER MARRIED, NEVER COHABITED

#### **EVERSEX**

BA-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

{ ASKED IF R NEVER MARRIED, NEVER COHABITED BUT HAD SEX

#### **SXMTONCE**

BA-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**

BA-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 AGE AT SCREENER > 24, GO TO BB-1 EVEROPER**

{ ASKED IF AGE AT SCREENER <= 24

#### **TALKPAR**

BA-4. 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 prevent HIV/AIDS.....5  
How to use a condom .....6  
None of the above .....7

{ ASKED IF AGE AT SCREENER <= 24

**SEDNO**

BA-5. 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-8 SEDBC)

{ ASKED IF AGE AT SCREENER <= 24 AND SEDNO = YES

**SEDNOG**

BA-6. 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 when received instruction .....96

{ASKED IF RESPONDENT HAD SEX

**SEDNOSX**

BA-7. Did you receive instruction about how to say no to sex before or after the first time you had sex?

Before.....1  
After.....2



{ ASKED IF AGE AT SCREENER <= 24

**SEDBC**

BA-8. 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

{ ASKED IF AGE AT SCREENER <= 24 AND SEDBC = YES

**SEDBC**

BA-9. 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 when received instruction .....	96

{ ASKED IF AGE AT SCREENER <= 24

**SEDSTD**

BA-11. IF AGE\_R LT 18, SAY: Have you ever had any formal instruction at school, church, a community center or some other place about sexually transmitted diseases?

ELSE, SAY: Before you were 18, did you ever have any formal instruction at school, church, a community center or some other place about sexually transmitted diseases?

Yes.....1

No.....5 (BA-6 SEDHIV)

{ ASKED IF AGE AT SCREENER <= 24 AND HAD SEX ED ABOUT ASEXUALLY TRANSMITTED {DISEASES"

**SEDSTDG**

BA-12. What grade were you in when you first received instruction on sexually transmitted diseases?

*ENTER 96 if R was not in school when he received the instruction*

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 when received instruction .....	96

{ASKED IF RESPONDENT HAD SEX AND RECEIVED INSTRUCTION ABOUT SEXUALLY TRANSMITTED DISEASES

**SEDSTD SX**

BA-13. Did you receive instruction about sexually transmitted diseases before or after the first time you had sex?

Before.....1  
 After.....2

{ ASKED IF AGE AT SCREENER <= 24

**SEDHIV**

BA-14. IF AGE\_R LT 18, SAY: Have you ever had any formal instruction at school, church, a community center or some other place about how to prevent HIV/AIDS?

ELSE, SAY: Before you were 18, did you ever have any formal instruction at school, church, a community center or some other place about how to prevent HIV/AIDS?

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

{ASKED IF RESPONDENT RECEIVED INSTRUCTION ABOUT HOW TO PREVENT HIV/AIDS

**SEDHIVG**

BA-15. What grade were you in when you first received instruction on how to prevent HIV/AIDS?

*ENTER 96 if R was not in school when he received the instruction*

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 when received instruction .....	96

{ ASKED IF AGE AT SCREENER <= 24

**PLEDGE**

BA-17. (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 ANY STERILIZING 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  
**VASEC\_M/VASEC\_Y**

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 OR HAD AN OPERATION FOR WHICH HE ANSWER NO, DK, OR RF ON WHETHER IT WAS FULLY STERILIZING

**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 Biological Kids; Number of Sexual Partners (BC)**

**{ 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 LIFEPR)

**{ 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**  
**LIFEPR**

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, INTERVIEW YEAR -  
1)?

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, INTERVIEW YEAR - 1)?

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

{ ASKED IF R HAD AT LEAST ONE SEX PARTNER IN THE LAST 12 MONTHS

**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 \_\_\_\_\_

{ ASKED IF R HAD AT LEAST ONE SEX PARTNER IN THE LAST 12 MONTHS

{ AND HAD SEX IN THE LAST 4 WEEKS

**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 partner(s) or last partner ever (BD)**

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

**P1NAME**

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 FINAL DATA FILE.)**

{ ASKED IF R EVER MARRIED

**P1RLTN1**

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

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

{ ASKED IF R CURRENTLY MARRIED

**P1CURRWIFE**

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

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

{ ASKED IF R CURRENTLY SEPARATED

**P1CURRSEP**

BD-4. *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

**P1RLTN2**

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

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

{ ASKED IF R WAS NEVER MARRIED TO THIS PARTNER AND HE EVER LIVED WITH THIS  
 { PARTNER AND HE IS CURRENTLY COHABITING

**P1COHABIT**

BD-6. *If necessary, ASK:* (Is she the woman you live with now?)

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

**P1SXLAST\_M**

BD-7. IF SEXSTAT =2,4,5, or 6, SAY: Please think of the last time that you had sexual intercourse with her. In what month and year was that?

ELSE IF SEXSTAT=1 OR 3, SAY: That time that you had sexual intercourse with her, in what month and year was that?

[HELP AVAILABLE]

*ENTER month.*  
*PROBE for season if DK month.*

- |             |               |
|-------------|---------------|
| 1. January  | 5. May        |
|             | 9.            |
|             | September 13. |
|             | Winter        |
| 2. February | 6. June       |
|             | 10.           |
|             | October       |
|             | 14. Spring    |
| 3. March    | 7. July       |
|             | 11.           |
|             | November 15.  |
|             | Summer        |
| 4. April    | 8. August     |
|             | 12.           |
|             | December 16.  |
|             | Fall          |

**P1SXLAST\_Y**

BD-8. IF SEXSTAT =2, 4, 5, or 6, SAY: (Please think of the last time that you had sexual intercourse with her. In what month and year was that?)

ELSE IF SEXSTAT=1 OR 3, SAY: (That time that you had sexual intercourse with her, in what month and year was that?)

[HELP AVAILABLE]

ENTER year in 4 digits \_\_\_\_\_

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

**P2NAME**

BD-9. 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 FINAL DATA FILE.)

**P2RLTN1**

BD-10. 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-11. 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-12. 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-13. Did you ever live together with (PARTNER'S NAME)?

Yes .....1

No .....5

{ ASKED IF R WAS NEVER MARRIED TO THIS PARTNER AND HE EVER LIVED WITH THIS  
{ PARTNER AND HE IS CURRENTLY COHABITING AND THIS COHABITING PARTNER NOT YET  
{ IDENTIFIED

**P2COHABIT**

BD-14. If necessary, ASK: (Is she the woman you live with now?)

Yes .....1

No .....5



**P2SXLAST\_M**

BD-15. IF SEXSTAT =2, 4, 5, or 6, SAY: Please think of the last time that you had sexual intercourse with her. In what month and year was that?

ELSE IF SEXSTAT=1 OR 3, SAY: That time that you had sexual intercourse with her, in what month and year was that?

[HELP AVAILABLE]

*ENTER month.*

*PROBE for season if DK month.*

1. January

5. May

9.

September 13.

Winter

2. February

6. June

10.

October

3. March

14. Spring

7. July

11.

November 15.

Summer

4. April

8. August

12.

December 16.

Fall

**P2SXLAST\_Y**

BD-16. IF SEXSTAT =2,4,5, or 6, SAY: (Please think of the last time that you had sexual intercourse with her. In what month and year was that?)

ELSE IF SEXSTAT=1 OR 3, SAY: (That time that you had sexual intercourse with her, in what month and year was that?)

[HELP AVAILABLE]

*ENTER year in 4 digits \_\_\_\_\_*

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

**P3NAME**

BD-17. Think of the last female with whom you had sexual intercourse before (2<sup>ND</sup> TO LAST PARTNER'S NAME). Please give me her name or initials.

Name/ initials \_\_\_\_\_

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

**P3RLTN1**

BD-18. 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-19. *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-20. *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-21. Did you ever live together with (PARTNER'S NAME)?

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

{ ASKED IF R WAS NEVER MARRIED TO THIS PARTNER AND HE EVER LIVED WITH THIS  
 { PARTNER AND HE IS CURRENTLY COHABITING AND THIS COHABITING PARTNER NOT YET  
 { IDENTIFIED

**P3COHABIT**

BD-22. *If necessary, ASK: (Is she the woman you live with now?)*

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

**P3SXLAST\_M**

BD-23. IF SEXSTAT =2, 4, 5, or 6, SAY: Please think of the last time that  
 you had sexual intercourse with her. In what month and year was  
 that?

ELSE IF SEXSTAT=1 OR 3, SAY: That time that you had sexual  
 intercourse with her, in what month and year was that?

[HELP AVAILABLE]

*ENTER month.*  
*PROBE for season if DK month.*

1. January

2. February

3. March

5. May

9.

September 13.

Winter

6. June

10.

October

14. Spring

7. July

		11.
	November	15.
	Summer	
4. April		8. August
		12.
	December	16.
	Fall	

**P3SXLAST\_Y**

BD-24. IF SEXSTAT =2, 4, 5, or 6, SAY: (Please think of the last time that you had sexual intercourse with her. In what month and year was that?)

ELSE IF SEXSTAT=1 OR 3, SAY: (That time that you had sexual intercourse with her, in what month and year was that?)

[HELP AVAILABLE]

ENTER year in 4 digits \_\_\_\_\_

{ ASKED IF TWO OR THREE PARTNERS BOTH IN LIFETIME AND IN THE LAST 12 MONTHS

**FIRST**

BD-25. Were (either/any) of the females we've talked about, [DISPLAY PARTNER NAMES HERE], the first female with whom you ever had sexual intercourse?

Yes, (PARTNER 1 NAME).....1 (GO TO SECTION C)

Yes, (PARTNER 2 NAME).....2 (GO TO SECTION C)

Yes, (PARTNER 3 NAME).....3 (GO TO SECTION C)

No .....5 (GO TO BD-26 FIRST2)

{ ASKED IF TWO OR THREE PARTNERS BOTH IN LIFETIME AND IN THE LAST 12 MONTHS

AND BD-25 FIRST=5

**FIRST2**

BD-26. 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 FINAL 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. You may have already told me this, but 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 FINAL 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)**

**CWPD0B\_M/CWPD0B\_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, and living together .....2

Engaged to her, but not living together .....3  
 Living together in a sexual relationship, but not engaged ....4  
 Going with her or going steady .....5  
 Going out with her once in a while .....6  
 Just friends .....7  
 Had just met her .....8  
 Something else .....9

**CWPFUSE**

CC-4. 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? Please look at Card 45a for some examples of methods, before answering "yes" or "no."

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

{ASKED IF METHODS WERE USED

**CWPFMET**

CC-5. Looking at Card 45b, 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 sterilization ("tubes tied") or other female  
 sterilization .....5  
 Injection (Depo-Provera or Lunelle) .....6  
 Spermicidal foam/jelly/cream/film/suppository .....7  
 Hormonal implant (Norplant™ or Implanon).....8  
 Rhythm or safe period .....9  
 Contraceptive patch (Ortho-Evra) .....10  
 Vaginal contraceptive ring (Nuva Ring).....11  
 IUD, coil, loop.....12  
 Something else .....13

**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 CWPOSS 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"

**CWPTOTST**

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 sterilization?

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 CWPPOSSB) 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)**

{ ASKED ONLY IF CENTURY MONTH OF LAST SEXT WITH CURRENT WIFE/ COHABITING PARTNER UNKNOWN (BLANK)

**CWPLSXWN\_M**

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?

[HELP AVAILABLE]

ENTER month.



*PROBE for season if DK month.*

- |             |               |
|-------------|---------------|
| 1. January  | 5. May        |
|             | 9.            |
|             | September 13. |
|             | Winter        |
| 2. February | 6. June       |
|             | 10.           |
|             | October       |
|             | 14. Spring    |
| 3. March    | 7. July       |
|             | 11.           |
|             | November 15.  |
|             | Summer        |
| 4. April    | 8. August     |
|             | 12.           |
|             | December 16.  |
|             | Fall          |

**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?)

[HELP AVAILABLE]

*ENTER year in 4 digits \_\_\_\_\_*

**CWPLUSE1**

CE-5. 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? Please look at Card 46a for some examples of methods for males, before answering "yes" or "no."

Yes .....1

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

{ ASKED IF HE USED A METHOD

**CWPLMET1**

CE-6. Looking at Card 46b, 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 |

**CWPLUSE2**

CE-7. That last time that you had sexual intercourse with your (wife/partner), did she use any methods to prevent pregnancy or sexually transmitted disease? Please look at Card 47a for some examples of methods for females, before answering "yes" or "no."

Yes .....1

No .....5 (GO TO CF SERIES)  
Don't know..9

{ ASKED IF CE-7 CWPLUSE2=9

**DKFOLLOWUP**

CE-7n. Is that because you don't remember or because you didn't know at the time?

Don't remember.....1  
Didn't know at the time.....2

{ ASKED IF SHE USED A METHOD

**CWPLMET2**

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

*ENTER all that apply.*

Pill .....4  
Tubal sterilization or other female sterilization .....5  
Injection (Depo-Provera or Lunelle) .....6  
Spermicidal foam/jelly/cream/film/suppository .....7  
Hormonal implant (Norplant™ or Implanon) .....8  
Rhythm or safe period .....9  
Contraceptive patch (Ortho-Evra) .....10  
Vaginal contraceptive ring (Nuva Ring).....11  
IUD, coil, loop.....12  
Something else .....13  
Don't know.....19

{ ASKED IF CE-8 CWPLMET2=19

**DKFOLLOWUP**

CE-8n. Is that because you don't remember or because you didn't know at the time?

Don't remember.....1  
Didn't know at the time.....2

**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, INTERVIEW YEAR - 1), 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. 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. (If necessary: Please look at Card 45a for some examples of methods, before answering "yes" or "no.")

Yes .....1

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

**CWPALLBC**

CF-2. Please look at Card 45b. 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 sterilization or other female sterilization .....	5
Injection (Depo-Provera or Lunelle) .....	6
Spermicidal foam/jelly/cream/film/suppository .....	7
Hormonal implant (Norplant™ or Implanon) .....	8
Rhythm or safe period .....	9
Contraceptive patch (Ortho-Evra) .....	10
Vaginal contraceptive ring (Nuva Ring).....	11
IUD, coil, loop.....	12
Something else .....	13

{ 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, INTERVIEW YEAR-1), 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

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

**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 FINAL 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

**CWPCCHRES**

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 CWPCHVR)

{ 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

**CWPCHEVR**

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  
{ AND R DEFINITELY OR PROBABLY WANTED A CHILD  
{ ASKED EVEN IF CHILD IS DEAD, ADOPTED, IN FOSTER CARE

**CWPCHSN**

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

**CWPCHPY**

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

**CWPPRGW**

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

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

{ ASKED IF R'S W/CP NOT PREGNANT NOW

**CWPTRYPG**

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

**CWPTRYLG**

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

**CWPCPWNT**

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 CWPCHPY)  
Definitely no .....4 (GO TO CH-6 CWPCHPY)

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

**CWPCPSON**

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

**CWPCPHY**

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 B Wife/Partner's Children from Her Previous Relationships (CI)**

**CWPOTKID**

CI-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 \_\_\_\_\_

**CWPOKWTH**

CI-2a. (Did this child/ Did any of these children) ever live with you?

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

{ ASKED IF HIS CURRENT WIFE OR PARTNER HAD MORE THAN ONE CHILD AND THE CHILDREN LIVED WITH R

**CWPOKWTHN**

CI-2b. How many of these children lived with you?

Number of children \_\_\_\_\_

{ ASKED IF R LIVED WITH 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 FINAL DATA FILE.)**



**{ SET UP LOOP TO ASK ABOUT EACH CHILD REPORTED IN CI-5 CWPOKNAM**

**{ ASKED IF R LIVED WITH ANY OF HER CHILDREN**

**CWPOKSEX**

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

Male .....1

Female .....2

**CWPOKAD**

CI-6a. Did you legally adopt this child or become (CHILD'S NAME)'s legal guardian?

♦ ENTER [1] if R both adopted and became legal guardian to this child.

Yes, adopted ..... 1

Yes, became guardian ..... 3

No, neither ..... 5

**{ Asked if R became legal guardian to this child**

**CWPOKTRY**

CI-6b. Are you in the process of trying to legally adopt (CHILD'S NAME)?

Yes .....1 (GO TO CWPOKLIV)

No .....5 (GO TO CWPOKLIV)

**{ Asked if R neither adopted nor became legal guardian to this child**

**CWPOKTHR**

CI-6c. Are you in the process of trying to legally adopt (CHILD'S NAME) or to become this child's legal guardian?

Yes, trying to adopt .....1

Yes, trying to become guardian .....3

No, neither .....5

**{ ASKED IF R LIVED WITH 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

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

OMB No. 0920-0314

Expiration: 04/30/09

{ 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 LIVED WITH CHILD AND CHILD NOT DEAD

**CWPOKAGE**

CI-9. 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)**

**CWPNBEVR**

CJ-1. Besides any children that we may have talked about already or any biological children you may have from previous relationships, 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 neither you nor your (wife/partner) are the child's biological parents, but you served as a formal or informal guardian to the child or that you were chiefly responsible for the child's care.)*

*R's own biological children from any previous relationships should not be included here. For example, any biological children that he had with a former wife, cohabiting partner, girlfriend, and so forth will be discussed in later questions.*

Yes .....1

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

**CWPNBNUM**

CJ-2. How many children?

Number of children \_\_\_\_\_

**CWPNBNAM**

CJ-2a. What is the first name or initials of (this child/each of these children)?

{ SET UP LOOP TO ASK ABOUT EACH CHILD REPORTED IN CJ-2a CWPBNAM

{ ASKED IF ANY CHILD/REN UNDER R's AND CURRENT WIFE/PARTNER'S CARE

**CWPNBREL**

CJ-3. When (CHILD'S NAME) began living with you, was he or she the child of a relative by blood or by marriage?

Yes, by blood .....1

Yes, by marriage.....3  
No .....5

{ ASKED IF ANY CHILD/REN UNDER CARE

**CWPNBFOS**

CJ-5. Was this child a foster child who was placed in your home by a court, child welfare department, or social service agency?

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

{ ASKED IF ANY CHILD/REN UNDER R'S AND CURRENT WIFE/PARTNER'S CARE

**CWPNBAD**

CJ-7. Did you legally adopt this child or become (CHILD'S NAME)'s legal guardian?

- *ENTER [1] if R both adopted and became legal guardian to this child.*

Yes, adopted .....1 (Go to CJ-10 CWPNBSEX)  
Yes, became guardian..3 (Go to CJ-7a CWPNBTRY)  
No, neither.....5 (Go to CJ-7b CWPNBTHR)

{ Asked if R became legal guardian to this child

**CWPNBTRY**

CJ-7a. Are you in the process of trying to legally adopt [CHILD'S NAME]?

Yes .....1 (Go to CJ-10 CWPNBSEX)  
No .....5 (Go to CJ-10 CWPNBSEX)

{ Asked if R neither adopted nor became legal guardian to this child

**CWPNBTHR**

CJ-7b. Are you in the process of trying to legally adopt [CHILD'S NAME] or to become this child's legal guardian?

Yes, trying to adopt .....1  
Yes, trying to become guardian .....3  
No, neither .....5

{ ASKED IF ANY CHILD/REN UNDER CARE WITH CURRENT WIFE/PARTNER

**CWPNBSEX**

CJ-10. Is this child male or female?

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

{ ASKED IF ANY CHILD/REN UNDER CARE

**CWPNBLIV**

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?*

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

OMB No. 0920-0314

Expiration: 04/30/09

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 CHILD NOT DECEASED AND NOT IN R'S HH

**CWPNBFAR**

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 CHILDREN NOT DECEASED

**CWPNBAGE**

CJ-13. How old is [CHILD] now?

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

**SECTION D**

**RECENT (OR LAST) SEXUAL PARTNER(S) AND FIRST SEXUAL PARTNER**

**Screener to identify partner (DA)**

**Establish routing for up to 3 recent partners in last 12 months or last partner ever (if none in last 12 months) (DA)**

- If partner is current wife (not separated) or current cohabiting partner, skip to end of loop and check next most recent partner. If no more partners to describe, go to "First sex ever" series (DL)
- If partner is former wife (including separated) or cohab (never wife), ask next series (DB)
- If partner is someone R was never in marr/cohab union, go to flow check before "stability of curr rel'p" series (DC)

**Key Dates for Former Wives & Cohabiting Partners (DB)**

**DINTRO\_1**

DB-0. Now I have some questions about [PxNAME].  
(might want to add relationship fill to the question wording so we can flag cases that say "wait - she wasn't my [relationship] after all!")

{ 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?

{ 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**

DB-11. In what month and year did you and (PARTNER'S NAME) last stop living together?

**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 RECENT 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

**PXLRUSE**

DD-5. 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? Please look at Card 46a for some examples of methods for males, before answering "yes" or "no".

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

{ ASKED IF HE USED METHOD AT LAST SEX

**PXLRMETH**

DD-6. Looking at Card 46b 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

**PXLPUSE**

DD-7. That (last) time that you had sexual intercourse with (PARTNER'S NAME), did she use any methods to prevent pregnancy or sexually transmitted disease? Please look at Card 47a for some examples of methods for females, before answering "yes" or "no".

Yes .....1  
No .....5 (GO TO DD-9 PXLSXPRB)  
Don't know.....9

{ ASKED IF DD-7 PXLPUSE=9

**DKFOLLOWUP**

DD-7n. Is that because you don't remember or because you didn't know at the time?

Don't remember.....1  
Didn't know at the time.....2

{ ASKED IF SHE USED A METHOD AT LAST SEX

**PXLPMETH**

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

*ENTER all that apply.*

Pill .....4

Tubal sterilization or other female sterilization .....5  
Injection (Depo-Provera or Lunelle) .....6  
Spermicidal foam/jelly/cream/film/suppository .....7  
Hormonal implant (Norplant™ or Implanon) .....8  
Rhythm or safe period .....9  
Contraceptive patch (Ortho-Evra) .....10  
Vaginal contraceptive ring (Nuva Ring).....11  
IUD, coil, loop.....12  
Something else .....13  
Don't know.....19

{ ASKED IF DD-8 PXLPMETH=19

**DKFOLLOWUP**

DD-8n. Is that because you don't remember or because you didn't know at the time?

Don't remember.....1  
Didn't know at the time.....2

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

**PXLSXPRB**

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

**PXMTONCE**

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

**PXRELAG**

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, and living together.....2  
Engaged to her, but not living together.....3  
Living together in a sexual relationship, but not engaged ...4  
Going with her or going steady .....5  
Going out with her once in a while .....6  
Just friends .....7  
Had just met her .....8  
Something else.....9

{ 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

**PXRACE**

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

**PXBEST**

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  
**PXDOB\_M/PXDOB\_Y**

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

{ ASKED THIS PARTNER IS CURRENT OR THE MOST RECENT  
**PXEDUC**

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

**PXMARBF**

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

**PXANYCH**

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, and living together.....2  
Engaged to her, but not living together.....3  
Living together in a sexual relationship, but not engaged ...4  
Going with her or going steady .....5  
Going out with her once in a while .....6  
Just friends .....7  
Had just met her .....8  
Something else.....9

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

**PXFUSE**

DF-4. 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? Please look at Card 45a for some examples of methods, before answering "yes" or "no."

Yes .....1

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

{ ASKED IF R HAD SEX WITH THIS WOMAN MORE THAN ONCE AND USED METHOD AT 1<sup>ST</sup> SEX

**PXFMETH**

DF-5. Looking at Card 45b, 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 sterilization or other female sterilization .....	5
Injection (Depo-Provera or Lunelle) .....	6
Spermicidal foam/jelly/cream/film/suppository .....	7
Hormonal implant (Norplant™ or Implanon) .....	8
Rhythm or safe period .....	9
Contraceptive patch (Ortho-Evra) .....	10
Vaginal contraceptive ring (Nuva Ring).....	11
IUD, coil, loop.....	12
Something else .....	13

{ 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, INTERVIEW YEAR - 1), 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  
 { A METHOD IN LAST 12 MONTHS

**PXANYUSE**

DG-1. 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. Please look at Card 45a for some examples of methods, before answering "yes" or "no".

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 45b. 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 sterilization or other female sterilization .....	5
Injection (Depo-Provera or Lunelle) .....	6
Spermicidal foam/jelly/cream/film/suppository .....	7
Hormonal implant (Norplant™ or Implanon) .....	8
Rhythm or safe period .....	9

Contraceptive patch (Ortho-Evra) .....	10
Vaginal contraceptive ring (Nuva Ring).....	11
IUD, coil, loop.....	12
Something else .....	13

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

**PXMSTUSE**

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

**PXCONFREQ**

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, INTERVIEW YEAR - 1), 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 \_\_\_\_\_

**PXCXNAM**

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 FINAL DATA FILE.)**

**{ SET UP LOOP TO ASK ABOUT EACH CHILD**

**{ SAID IF MORE THAN ONE CHILD**

**DHINTRO2**

DH-4. Let's talk about (CHILD)

**PXCXSEX**

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

Male.....1

Female.....2

**PXCXBORN\_M/PXCXBORN\_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**

**PXCXMARB**

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

Yes .....1 (GO TO DH-11 PXCXLIV)

No .....5

**{ ASKED IF COHABITING WITH THIS WOMAN OR (IF MARRIED) NOT MARRIED TO**

**{ HER AT CHILDBIRTH, BUT HAD PREMARITALLY COHABITED**

**PXCXRES**

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

Yes .....1 (GO TO DH-11 PXCXLIV)

No .....5

**{ ASKED IF NOT MARRIED TO OR LIVING WITH WOMAN AT TIME OF BIRTH OR DK/RF**

**PXCXKNOW**

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

**PXCXLIV**

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

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

OMB No. 0920-0314

Expiration: 04/30/09

{ 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

**PXWANT**

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

**PXS00N**

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

**PXRSOON**

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 from her Previous Relationships (former w/p's who were also recent or last partners) (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 \_\_\_\_\_

**PXOKWTH**

DJ-2a. (Did this child/Did any of these children) ever live with you?

Yes .....1

No .....5 (FC D-50a)

**PXOKWTHN**

DJ-2b. How many of these children lived with you?

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 FINAL DATA FILE.)**

{ SET UP LOOP TO ASK FOR EACH CHILD WITH WHOM HE LIVED

**PXOKSEX**

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

Male .....1

Female .....2

**PXOKAD**

DJ-6a. Did you legally adopt (CHILD) or become (CHILD)'s legal guardian?

♦ ENTER [1] if R both adopted and became legal guardian to this child.

Yes, adopted ..... 1

Yes, became guardian ..... 3

No, neither ..... 5 (GO TO PXOKAGE)

{ ASKED IF R ADOPTED OR BECAME LEGAL GUARDIAN FOR THIS CHILD

**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

{ ASKED IF CHILD IS NOT DECEASED AND 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 IF CHILD NOT DECEASED

**PXOKAGE**

DJ-9. 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 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 or any biological children you may have from other relationships, 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 neither you nor your (wife/partner) are the child's biological parents, but you 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)

**PXNBUM**

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

**PXNBNAM**

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 FINAL DATA FILE.)**

{ SET UP LOOP TO ASK ABOUT EACH ADOPTED CHILD

{ ASKED IF R ADOPTED CHILD UNDER CARE

**PXNBXSEX**

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

{ ASK 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. 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 FINAL DATA FILE.)**

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

**FPPAGE**

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

**FPRELAG**

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, and living together.....2  
Engaged to her, but not living together.....3  
Living together in a sexual relationship, but not engaged ...4  
Going with her or going steady .....5  
Going out with her once in a while .....6  
Just friends .....7  
Had just met her .....8  
Something else.....9

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

**FPUSE**

DL-11. That first time that you had sexual intercourse with (PARTNER), did you or she use any methods to prevent pregnancy or sexually transmitted disease? Please look at Card 45a for some examples of methods, before answering "yes" or "no."

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. Looking at Card 45b, 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 sterilization or other female sterilization .....5  
Injection (Depo-Provera or Lunelle) .....6  
Spermicidal foam/jelly/cream/film/suppository .....7  
Hormonal implant (Norplant™ or Implanon) .....8  
Rhythm or safe period .....9  
Contraceptive patch (Ortho-Evra) .....10  
Vaginal contraceptive ring (Nuva Ring).....11  
IUD, coil, loop.....12  
Something else .....13

{ 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

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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  
**EAINTR01**

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 FINAL DATA FILE.)**

{ ASKED IF R WAS MARRIED TO AT LEAST ONE OF HIS 3 MOST RECENT PARTNERS  
REPORTED IN SECTION B

**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 COHABITED WITH ANY OF HIS 3 MOST RECENT PARTNERS IN THE LAST  
12 MONTHS REPORTED IN SECTION B

**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  
{ IN SECTION E, CONTINUE; ELSE GO TO SECTION F.

**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 MARREND)

{ 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 (GO TO ENGAGTHN EB-7)

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

**FWPDOB\_M/FWPDOB\_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**

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

**FWPRACEB**

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

**FWPMARBF**

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

Yes .....1

No .....5

**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?

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*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

**FWPNUMKD**

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 FINAL 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

{ CHILDBIRTH CAME FIRST

**FWCHMARB**

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 CHILDBIRTH, 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 OR DK/RF  
**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

**FWPCHLEG**

ED-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 ED-15 FWPCHLEVR)

{ ASKED IF CHILD <19 AND PATERNITY ESTABLISHED

**FWPCHHOP**

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

Yes .....1

No .....5

{ IF RESPONDENT LIVES WITH CHILD, GO TO FWPRWANT ED-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

**FWPCHEVR**

ED-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

**FWPCHFAR**

ED-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

**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 FWPHPYPG)

Definitely no .....4 (GO TO ED-19 FWPHPYPG)

{ 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

**FWPHPYPG**

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 \_\_\_\_\_

**FWPOKWTH**

EE-2a. (Did this child/Did any of these children) ever live with you?

Yes .....1

No .....5

**FWPOKWTHN**

EE-2b. How many of these children lived with you?

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  
FINAL DATA FILE.)

{ SET UP LOOP TO ASK FOR EACH CHILD WITH WHOM HE LIVED

**FWPOKSEX**

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

Male .....1

Female .....2

**FWPOKAD**



EE-6a. Did you legally adopt (CHILD) or become (CHILD)'s legal guardian?

♦ ENTER [1] if R both adopted and became legal guardian to this child.

Yes, adopted ..... 1  
Yes, became guardian ..... 3  
No, neither ..... 5 (GO TO FWPOKAGE)

{ ASKED IF R ADOPTED OR BECAME LEGAL GUARDIAN FOR THIS CHILD

**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 THE CHILD IS NOT DECEASED AND DOES NOT LIVE IN R'S HOUSEHOLD

~~{ 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 IF CHILD DOES NOT LIVE IN R'S HOUSEHOLD AND NOT DECEASED

~~{ ASK ABOUT ALL ADOPTED CHILDREN NOT DECEASED~~

**FWPOKAGE**

EE-9. 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 or any biological children you may have from other relationships, did you and your (wife/partner) ever have any other children live with you under your care and responsibility?

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IF NECESSARY, SAY: By this I mean that neither you nor your (wife/partner) are the child's biological parents, but you 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 FINAL 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

**FWPNBFAR**

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. 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. Now, I would like to ask you about (other) biological children you may have had with any other sexual partners you never married. (Not counting any children we already talked about/You may have already told me this, but) as far as you know, have you had any other biological children?

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 a sexual partner and you didn't know about it?

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/initials \_\_\_\_\_ **(NO NAMES OR INITIALS ARE PLACED ON THE FINAL 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/initials \_\_\_\_\_ **(NO NAMES OR INITIALS ARE  
PLACED ON THE FINAL DATA  
FILE.)**

**{ 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

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Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

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Expiration: 04/30/09

{ 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

**OBCRWANX**

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  
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

**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, but you were not their biological father. 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), who were not your biological 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 OTNBFOS)

{ 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

**OTNBFOS**

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 OTNBAD)

{ 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

**OTNBAD**

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

**OTNBADN**



FB-8. How many children did you legally adopt?

Number of children \_\_\_\_\_

{ ASKED IF R ADOPTED ONE OR MORE CHILDREN UNDER HIS CARE

**OTBNAM**

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 FINAL 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

**OTNBFAR**

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. How old is [OTBNAM] 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 \_\_\_\_\_

**Establishment of Duplicate Children and Chronologically Arranged Variables for Biological Children (FD)**

**DUPLIST**

**FD-1.** Before we move on to some other questions about the children you've told me about, let's make sure we have things right.

These are some children that may have been listed more than once. There's ...

(BKIDNAM[X]) is your biological (daughter/son), age (BKIDAGE[X])

(BKIDNAM[X]) is your biological (daughter/son), age (BKIDAGE[X])

(AKIDNAM[X]) is your adopted (daughter/son), age (AKIDAGE[X])

ALLOW AS MANY ENTRIES AS THERE ARE DUPLICATE CHILDREN AMONG THE BIOADOPT NUMBER OF CHILDREN

Have we listed any of these children more than once?

Yes .....1

No .....5 (Flow Check F-23)

**DUPCHECK**

**FD-2.** Which child has been listed more than once?

1. (BKIDNAM[X]) is your biological (daughter/son), age (BKIDAGE[X])

2. (BKIDNAM[X]) is your biological (daughter/son), age (BKIDAGE[X])

3. (AKIDNAM[X]) is your adopted (daughter/son), age (AKIDAGE[X])

**ENTER all that apply.**

**Numbers of partners in lifetime & last 12 months (FE)**

{ 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**

FE-1. 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

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

**OMB No. 0920-0314**

**Expiration: 04/30/09**

{ ASKED IF RESPONDENT HAD 7 OR MORE SEXUAL PARTNERS IN LAST 12 MONTHS

**NUM12MO**

FE-2. Altogether, how many different females have you had sexual intercourse with in the past 12 months, that is, since (INTERVIEW MONTH, INTERVIEW YEAR - 1)?

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)

##### GAINTRO

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.*

{ 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, INTERVIEW YEAR - 1), 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, parks, playgrounds, 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

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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/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 **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/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 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**  
{ GB SERIES ASKED ONLY IF R HAS ANY BIOLOGICAL OR ADOPTED CHILDREN AGED 18  
{ OR YOUNGER WHO LIVE ELSEWHERE



**Noncoresidential Children -- Visitation and Activities (GB)**

**GBINTRO**

GB-0. Now I have some questions about your (child who is under age 19 and does/children who are under age 19 and do) 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, INTERVIEW YEAR - 1), about how often did you see or have a visit with (this child/ either of these children/any of 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\_\_\_\_\_

{ Asked if R has any biological or adopted children 18 or younger who do **not** live with him

**NCEMAIL**

GB-2a. Please look at Card 64. During the last 12 months, that is, since (INTERVIEW MONTH, INTERVIEW YEAR - 1), about how often did you talk on the phone with or exchange E-mail with (this child/ either of these children/any of these children)?

Not at all .....0  
Once or twice during the year ....1  
Several times during the year ....2  
1-3 times per month.....3  
About once a week .....4  
Several times a week .....5  
Every day .....6

{ 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/ either of these children/any of these  
children) on an outing away from the home to places such as museums,  
zoos, movies, sports, parks, playgrounds, 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 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 AND  
HE HAS VISITED IN THE LAST 4 WEEKS**

**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 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 HAS VISITED IN THE 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 HAS VISITED IN THE 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 HAS VISITED IN THE 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 HAS VISITED IN THE 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, INTERVIEW YEAR - 1), 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**

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

OMB No. 0920-0314

Expiration: 04/30/09

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 (WIFE/PARTNER) 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 (WIFE/PARTNER) 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  
**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

**EXPECTL**

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)

**Attachment I**

*Cycle 7, Year 3, Quarter 1 (MALE)*

*Field Date: Summer 2008*

**OMB No. 0920-0314**

**Expiration: 04/30/09**

## 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, INTERVIEW YEAR - 1), 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, INTERVIEW YEAR - 1), 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*

[DISPLAY RESPONSES FROM IA-3 COVERHOW (OR ALL RESPONSE CHOICES  
 FROM IA-3 COVERHOW IF R SKIPPED IA-3 COVERHOW OR IF IA-3  
 COVERHOW=DK/RF)]  
 Not covered by any insurance.....11

**Use of Family Planning Clinic (IB)**

{ IF R's AGE >= 25, GO TO IB-3 YUOGOFPC.

{ 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 YUOGOFPC)

**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, INTERVIEW YEAR - 1), 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)

**WHENGOFPC**

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, INTERVIEW YEAR - 1), 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*

A female method of birth control or counseling about female methods of birth control.....1  
A male method of birth control (condoms or vasectomy) or counseling about male methods of birth control.....2  
Testing or treatment for sexually transmitted infection other than HIV .....3  
HIV testing .....4  
Abortion advice or counseling .....5  
Physical exam .....6  
Other .....7

{ 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, INTERVIEW YEAR - 1).

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

**BCADVCEF**

ID-3. (In the past 12 months, have you...)

Received advice or counseling from a doctor or other medical care provider about using female methods of birth control?

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

{ ASKED FOR ALL

**BCADVCEM**

ID-3a. (In the past 12 months, have you...)

Received advice or counseling from a doctor or other medical care provider about using male methods of birth control (condoms or vasectomy)?

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

{ ASKED FOR ALL

**STERADVI**

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

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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 partner 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 70 (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

**INFTEST**

IE-3. Who was it that had infertility testing? Was it you, her, or both of  
you?

You .....1  
Her .....2



Both of you .....3

{ ASKED IF ARTIFICIAL INSEMINATION WAS MENTIONED  
**WHOINSEM**

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.

**INFHLPNW**

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

**LASTVIS\_M/LASTVIS\_Y**

IE-6. In what month and year was your (most recent/last) visit for medical help to have a baby together?

**INFRTHIS**

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

**INTRO\_I2**

IF-0. Now I would like to ask you about testing for HIV, the virus that causes AIDS.

{ ASKED FOR ALL

**DONBLD85**

IF-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 in recent years has been routinely tested for HIV before it can be used. Since March 1985, have you 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. (Not counting tests you may have had as part of blood donations,) Have you ever been tested for HIV?

*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. (Not including blood donations,) in what month and year was your last test for HIV, the virus that causes AIDS?

{ ASKED IF R DOES NOT REPORT SPECIFIC MONTH AND YEAR

**HIVTSTYR**

IF-3b. Did you have this last HIV test since (INTERVIEW MONTH, INTERVIEW YEAR - 1)?

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

{ ASKED IF R HAD ANY HIV TEST OUTSIDE OF BLOOD DONATION

**RAPIDHIV**

IF-3c. When you had this (last) test for HIV (in CMHIVTST\_FILL), was it a rapid test where you could get your results in a couple of hours or less?

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

**HIVSOON**

IF-3d. How soon after your (last) test for HIV did you receive your results? Was it ...

Within 1 day, .....1  
 Within 1 week but longer than 1 day, .....2  
 Longer than 1 week, .....3  
 Or did you never receive the test results? .....4

**HIVKIND**

IF-3e. Did this test use a swab from your mouth, blood from your finger, or blood from your arm?

Swab from mouth .....1  
 Blood from finger .....2  
 Blood from arm .....3  
 Other .....4

**PLCHIV**

IF-4. Please look at Card 72. (Not including your blood donation,) Where did you have that last test for HIV?

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  
Military induction or military service site.....13  
Sexually transmitted disease (STD) clinic.....14  
Laboratory or blood bank.....15  
Some other place .....20

{ ASKED IF IF-4 PLCHIV=20

**SP\_PLCHIV**

IF-4sp Where was this other place that you had your last HIV test?

{ ASKED IF R HAD ANY HIV TEST OUTSIDE OF BLOOD DONATION

**HIVTST**

IF-5. Please look at Card 73b. I am going to show you a list of reasons why some people have been tested for HIV, the virus that causes AIDS. (Not including your blood donations), which of these would you say was the main reason for your last HIV test?

*ENTER all that apply*

Part of a medical checkup or procedure.....1  
For health or life insurance.....2  
Wanted to find out if infected or not.....3  
Someone suggested you should be tested.....4  
For a marriage license or to get married.....5  
You might have been exposed through sex or drug use....6  
Or for some other reason .....20

{ ASKED IF R REPORTED THAT SOMEONE SUGGESTED YOU SHOULD BE TESTED

**WHOSUGG**

IF-5b. Who suggested you should be tested—a doctor or other medical care provider, a sexual partner, or someone else?

Doctor or other medical care provider.....1  
Sexual partner .....2  
Someone else.....3

{ ASKED IF REPORTED "SOME OTHER REASON" AS MAIN REASON FOR HIV TEST

**SP-HIVTST**

IF5sp. What was the main reason for your last HIV test?

{ 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 this last HIV test (outside of blood donation)?

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  
 Other sexually transmitted diseases like  
     gonorrhea, herpes, or Hepatitis C .....2  
 The correct use of condoms .....3  
 Needle cleaning/using clean needles .....4  
 Dangers of needle sharing .....5  
 Abstinence from sex (not having sex) .....6  
 Reducing your number of sexual partners.....7  
 Condom use to prevent HIV or STD transmission....8  
 "Safe sex" practices (abstinence,  
     condom use, etc).....9  
 Other .....20

{ ASKED IF R RESPONDED "OTHER" TO IF-7 AIDSTALK  
**SP\_AIDSTALK**

IF-7sp. What was the other topic covered in your discussion with the  
 doctor or health care professional after this HIV test?

---

{ 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/cohab 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?

{ ASKED FOR ALL

**PAYDU**

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  
R lives in a dormitory .....4

**Religion (JB)**

**RELRS D**

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 the denomination?) If necessary, ENTER [11].*

*If R indicates that he was raised in more than one religion, enter the number of the first one mentioned and insert an F2 comment with the code for the 2<sup>nd</sup> religion with R's comments.*

*ENTER [1] if R was raised "atheist" or "agnostic"*

None.....1  
Catholic.....2  
Jewish.....3  
Southern Baptist.....4  
Baptist.....5  
Methodist or African Methodist.....6  
Lutheran.....7  
Presbyterian.....8  
Episcopal or Anglican.....9  
Church of Jesus Christ of Latter Day Saints (LDS/Mormon).10  
Other .....11

{ ASKED IF R's RELIGION RAISED WAS "OTHER"

**RELRS D1**

JB-2. Please look at Card 78. In what religion were you raised?

Assemblies of God.....12  
Church of Nazarene.....13  
The Church of God.....14  
The Church of God (Cleveland, TN).....15  
The Church of God in Christ.....16  
7<sup>th</sup> Day Adventist.....17

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

OMB No. 0920-0314

Expiration: 04/30/09

United Pentecostal Church.....	18
Pentecostal Assemblies.....	19
Jehovah's Witness.....	20
Christian, another denomination not listed .....	21
Christian, no specific denomination .....	22
Unitarian-Universalist.....	23
Greek Orthodox.....	24
(Other) Orthodox .....	25
Muslim.....	26
Buddhist.....	27
Hindu.....	28
Other (specify).....	29

{ ASKED IF RELIGION RAISED IN WAS "OTHER"

**OTHRLRSD**

JB-3. Please tell me the name of the religion in which you were raised.

{ASKED IF R IS UNDER AGE 25

**ATTND14**

JB-4. 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
2-3 times per month.....	3
Once a month (about 12 times a year) ....	4
3-11 times a year.....	5
Once or twice a year.....	6
Never.....	7

**RELNOW**

JB-5. 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].*

*If R identifies with more than one religion, enter the number of the first one mentioned and insert an F2 comment with the code for the 2<sup>nd</sup> religion with R's comments.*

*ENTER [1] if R was raised "atheist" or "agnostic"*

None.....	1
Catholic.....	2
Jewish.....	3
Southern Baptist.....	4
Baptist.....	5
Methodist or African Methodist.....	6
Lutheran.....	7
Presbyterian.....	8
Episcopal or Anglican.....	9

Church of Jesus Christ of Latter Day Saints (LDS/Mormon).10  
Other .....11

{ ASKED IF R ANSWERS "OTHER" RELIGION

**RELNOW1**

JB-6. Please look at Card 78. What religion are you now?

Assemblies of God.....12  
Church of Nazarene.....13  
The Church of God.....14  
The Church of God (Cleveland, TN).....15  
The Church of God in Christ.....16  
7<sup>th</sup> Day Adventist.....17  
United Pentecostal Church.....18  
Pentecostal Assemblies.....19  
Jehovah's Witness.....20  
  
Christian, another denomination not listed .....21  
Christian, no specific denomination .....22  
  
Unitarian-Universalist.....23  
Greek Orthodox.....24  
(Other) Orthodox .....25  
  
Muslim.....26  
Buddhist.....27  
Hindu.....28  
  
Other (specify).....29

{ ASKED IF R REPORTED "OTHER" RELIGION

**OTHRLNOW**

JF-7. Please tell me the name of the religion you are now.

{ 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-8. Please look at Card 79. Which of these do you consider yourself to be,  
if any?

ENTER all that apply

A born again Christian.....1  
A charismatic.....2  
An evangelical.....3  
A fundamentalist .....4  
None of the above.....5

{ENTER all that apply [1-4]. Response category 5 cannot be  
entered in combination with any other response.]

**RELDLIFE**

JB-9. 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-10 Please look at Card 80. 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  
2-3 times per month.....3  
Once a month (about 12 times a year) ....4  
3-11 times a year.....5  
Once or twice a year.....6  
Never.....7

{ JC SERIES ASKD 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?

*If R is still on active duty, ENTER 96.*

1. January	5. May	9. September	13. Winter
2. February	6. June	10. October	14. Spring
3. March	7. July	11. November	15. Summer
4. April	8. August	12. December	16. Fall

96. If vol: R still on 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. By full-time I mean 35 or more hours a week. 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.

(You may have already told me this but,) 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, INTERVIEW YEAR - 1], 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.

{ ASKED 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 \_\_\_\_\_

**SPFTPTX**

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. Please look at Card 83a. 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?

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.

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 are all right.

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

OMB No. 0920-0314

Expiration: 04/30/09

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.

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.

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 intercourse if they have strong affection for each other.

Strongly agree.....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
IF R INSISTS: Neither agree nor disagree .....5

**CHUNLESS**

JG-6a. People can't be really happy unless they have children.

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.

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.

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.

Strongly agree.....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
IF R INSISTS: Neither agree nor disagree .....5

**OKCOHAB**

JG-10. A young couple should not live together unless they are married.

Strongly agree.....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
IF R INSISTS: Neither agree nor disagree .....5

**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.

Strongly agree.....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
IF R INSISTS: Neither agree nor disagree .....5

**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.

Strongly agree.....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
IF R INSISTS: Neither agree nor disagree .....5

**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.

Strongly agree.....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
IF R INSISTS: Neither agree nor disagree .....5

{ ASKED IF NEITHER R NOR HIS WIFE/PARTNER, IF CURRENTLY MARRIED OR COHABITING,

**IS STERILE**

**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?

Very upset .....1  
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

{ ASKED OF ALL

**MARRFAIL**

JG-16. Marriage has not worked out for most people I know.

Strongly agree .....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
If R insists: Neither agree nor disagree .....5

**CHCOHAB**

JG-17 It is okay to have and raise children when the parents are living together but not married.

Strongly agree .....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
If R insists: Neither agree nor disagree .....5

**PRVNTDIV**

JG-18. Living together before marriage may help prevent divorce.

Strongly agree .....1  
Agree .....2  
Disagree .....3  
Strongly disagree.....4  
If R insists: Neither agree nor disagree .....5

**GETALONG**

JG-19. Living together before marriage is a good way for a couple to make sure they get along.

Strongly agree .....1  
Agree .....2

Disagree .....3  
Strongly disagree.....4  
If R insists: Neither agree nor disagree .....5

{ Asked if R is not currently married or cohabiting

**COHCHANCE**

JG-20. Please look at Card 21. What is the chance that you will ever  
(again) live together with a woman to whom you are not married?

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

{ Asked if R is not currently married or cohabiting

**MARRCHANCE**

JG-21. Please look at Card 21. What is the chance that you will get  
married (again) someday?

No chance .....1 (SKIP JG-22 PMARCOH)  
A little chance .....2  
50-50 chance .....3  
A pretty good chance .....4  
An almost certain chance .....5

{ Asked if R says there's any chance that he will (re)marry someday

**PMARCOH**

JG-22. Please look again at Card 21. What is the chance that you will  
live together with your future wife before getting married?

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

**Attitudes towards Condoms (JH)**

**JHINT1**

JH-1. The next question is about what might happen (if/the next time) you had  
sex and (if) you used a condom. (Even if you have never had sex, please  
think about what might happen if you used a condom the first time you  
had sex.)

**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 (your/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, (your/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 practice questions, just to get you started. 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 tell you 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 \_\_\_\_\_

**PRACMNTH**

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

**PRACCNFM**

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)

**INTROK3a**

KA-3a. Thank you. Now we will go over a few keystrokes which will help you complete the survey.

Please press [Enter] to continue

**INTROK3ab**

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

**INTROK3b**

KA-3b. If you want to hide the question, 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

**INTROK3c**

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

**INTROK3d**

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

**INTROK3e**

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 on your own.

**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, INTERVIEW YEAR - 1) 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

{ Asked only if R is 15-24 years old

**EVSUSPEN**

KB-4. Have you ever been suspended or expelled from school?

Yes .....1  
No .....5 (GO TO Substance Use (KC))

{ Asked only if R is 15-24 years old

**GRADSUSP**

KB-5. What grade were you in when you were suspended or expelled from school?  
If you were suspended or expelled more than once, please enter the grade you were in the most recent time.

Grade \_\_\_\_\_

**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, INTERVIEW YEAR - 1), 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 or more .....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 or more .....4

**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 or more .....4

**CRYSTMTH**

KC-5a. During the last 12 months, how often have you used Crystal or meth,  
also known as tina, crank, or ice?

Never .....1  
Once or twice during the year .....2  
Several times during the year .....3  
About once a month or more .....4

**INJECT12**

KC-6. During the last 12 months, how often have you shot up or injected drugs  
other than those prescribed to you? By shooting up we mean anytime you  
might have used drugs with a needle, by mainlining, skin-popping, or  
muscling.

Never .....1  
Once or twice during the year .....2  
Several times during the year .....3  
About once a month or more .....4

**EVRINJECT**

KC-7. At any time in your life, have you ever shot up or injected drugs other  
than those prescribed for you?

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

{ ASKED IF R EVER INJECTED DRUGS

**EVRSHARE**

KC-8. At any time in your life, have you ever shot up or injected drugs with a  
needle 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. Sometimes men who take part in the study are reluctant  
to tell an interviewer about their experience with pregnancies,  
especially if the pregnancies ended in abortion or with children  
they no longer live with.

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-2b PREGTOT2.

{ ASKED IF R HAS NOT REPORTED FATHERING ANY PREGNANCIES IN SECTIONS C-F OF THE QUESTIONNAIRE

**MADEPREG**

KD-1. To the best of your knowledge, have you ever made someone pregnant?

Yes .....1  
No .....5 (TOLDPREG KD-5)

{ ASKED IF R PREVIOUSLY REPORTED ANY PREGNANCIES IN SECTIONS C-F OF THE QUESTIONNAIRE

**PREGTOT2**

KD-2. To the best of your knowledge, how many times have you ever made someone pregnant? Please include any pregnancies you may have already told the interviewer about.

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 with a female.



Please press [Enter] to continue.

{ READ IF R IS UNDER AGE 20 AND HE HAS NEVER BEEN MARRIED AND NEVER COHABITED.

**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

No .....5

{ 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 IF R HAS NEVER MARRIED, NEVER COHABITED, NEVER FATHERED A PREGNANCY (BASED ON CAPI OR ACASI)

**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 GETORALF)

**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 GETORALF)

**WHYCONDL**

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

**GETORALF**

KE-5. The next few questions are about oral sex. By oral sex, we mean

stimulating the genitals with the mouth. Has a female ever performed oral sex on you, that is, stimulated your penis with her mouth?

Yes .....1  
No .....5 (KE-7 GIVORALF)

**CONDFELL**

KE-6. Did you use a condom the last time a female performed oral sex on you?

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

**GIVORALF**

KE-7. Have you ever performed oral sex on a female?

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

{ASKED IF R IS 15-24 AND HAS EVER HAD ORAL SEX AND VAGINAL INTERCOURSE

**TIMING**

KE-7b. Thinking back to when you had oral sex with a female for the first time, was it before, after, or on the same occasion as your first vaginal intercourse with a female?

Before first vaginal intercourse .....1  
After first vaginal intercourse .....3  
Same occasion.....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, how many female sex partners have you had in the 12 months since (CMLSTYR\_FILL)? Please count every partner even those you had sex with only once in those 12 months.

Number \_\_\_\_\_

**NEWYEAR**

KG-2YR. Earlier you reported having more female partners in the last 12 months than you have had in your life. One or both of these numbers appear to be entered incorrectly, so those questions will be asked again. Your previous answers are displayed below:

DISPLAY:   \_\_\_ female partners in last 12 months  
             \_\_\_ female partners in lifetime

How many female partners did you have in the last 12 months?

Enter number \_\_\_\_\_

{ Asked if R has ever had vaginal intercourse

**VAGNUM12**

KG-2YRa. Your number of female partners in the last 12 months is displayed below. Thinking of your female partners in the last 12 months, with how many of them did you have vaginal intercourse?

DISPLAY:   \_\_\_ female partners in last 12 months

{ Asked if R has ever had oral sex with a female

**ORALNUM12**

KG-2YRb. (Your number of female partners in the last 12 months is displayed below.) Thinking of your female partners in the last 12 months, with how many of them did you have oral sex, either giving or receiving?

DISPLAY:   \_\_\_ female partners in last 12 months

{ Asked if R has ever had anal sex with a female

**ANALNUM12**

KG-2YRc. (Your number of female partners in the last 12 months is displayed below.) Thinking of your female partners in the last 12 months, with how many of them did you have anal sex?

DISPLAY:   \_\_\_ female partners in last 12 months

**NEWLIFE**

KG-2LF. How many female partners did you have in your lifetime?

Enter 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 (CURRPAGE THROUGH HOWMUCH) OF EACH OF 1, 2, OR 3

**CURRENT PARTNERS**

**CURRPAGE**

KG-3a. Earlier you reported that you last had sexual intercourse with the [(first/second/third)] person shown on the screen in (CMLSXPX\_FILL). How old was she at that time?

Age in years \_\_\_\_\_

**RELAGE**

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, INTERVIEW YEAR-1), 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

**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.

**GIVORALM**

KH-1. Have you ever performed oral sex on another male, that is, stimulated his penis with your mouth?

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

**GETORALM**

KH-2. Has another male ever performed oral sex on you, that is, stimulated your penis with his mouth?

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

**ANALSEX2**

KH-3. Has another male ever put his penis in your rectum or butt (anal sex)?

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

**ANALSEX3**

KH-4. Have you ever 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?

Yes.....1

No.....5

**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, how many male sexual partners have you had in the 12 months since (CMLSTYR\_FILL)? Please count every partner, even those you had sex with only once in those 12 months.

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.

**MALSHT12**

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

**HIVMAL12**

KJ-8. In the last 12 months, have you had 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 or straight.....1  
Homosexual or gay.....2  
Bisexual .....3  
Or something else? .....4

{ ASKED ONLY IF R REPORTED ORIENT KK-5 AS "SOMETHING ELSE"

**SP\_ORIENT**

KK-5. When you say something else, what do you mean?

---

**INTROK16**

KK-6. These next questions are about your sexual and reproductive health.

Please press [Enter] to continue.

**STDST12**

KK-7. In the past 12 months, that is, since (INTERVIEW MONTH, INTERVIEW YEAR - 1), 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

**Individual Earnings and 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 each income group get the health services they need.

Please press [Enter] to continue.

**EARNTYPE**

KL-0a. Next, I need to know your total earnings before taxes (on your last job). Will it be easier for you to tell me your total weekly, monthly, or yearly earnings?

Week.....1  
Month.....2  
Year.....3

**EARN**

KL-0b. Which category represents your total (weekly/monthly/yearly) earnings before taxes (on your last job)? (READ CATEGORIES IF NECESSARY.)

(WEEKLY INCOME CATEGORIES)

WEEKLY INCOME

UNDER \$96.....1  
\$ 96-143.....2  
\$ 144-191.....3  
\$ 192-239.....4  
\$ 240-288.....5  
\$ 289-384.....6  
\$ 385-480.....7  
\$ 481-576.....8  
\$ 577-672.....9  
\$ 673-768.....10

\$ 769-961.....11  
\$ 962-1,153.....12  
\$1,154-1,441.....13  
\$1,442 or more.....14

(MONTHLY INCOME CATEGORIES)

MONTHLY INCOME

UNDER \$417.....1  
\$ 417-624.....2  
\$ 625-832.....3  
\$ 833-1041.....4  
\$1,042-1,249.....5  
\$1,250-1,666.....6  
\$1,667-2,082.....7  
\$2,083-2,499.....8  
\$2,500-2,916.....9  
\$2,917-3,332.....10  
\$3,333-4,166.....11  
\$4,167-4,999.....12  
\$5,000-6,249.....13  
\$6,250 or more.....14

(YEARLY INCOME CATEGORIES)

YEARLY INCOME

UNDER \$5,000.....1  
\$ 5,000-7,499.....2  
\$ 7,500-9,999.....3  
\$10,000-12,499.....4  
\$12,500-14,999.....5  
\$15,000-19,999.....6  
\$20,000-24,999.....7  
\$25,000-29,999.....8  
\$30,000-34,999.....9  
\$35,000-39,999.....10  
\$40,000-49,999.....11  
\$50,000-59,999.....12  
\$60,000-74,999.....13  
\$75,000 or more.....14

{ASKED IF R ANSWERED DK OR RF ON KL-0b

**EARNDK1**

KL-0c. Was it \$20,000 or more per year?

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

{ASKED IF R ANSWERED "YES" TO EARNKD1

**EARNDK2**

KL-0d. Was it \$50,000 or more per year?

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

{ASKED IF R ANSWERED "YES" TO EARNKD2

**EARNDK3**

KL-0e. Was it \$75,000 or more per year?

Yes.....1

No.....5

{ 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 (year of interview - 1). 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 (year of interview - 1), 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 (year of interview - 1), 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.*

Yes.....1

No.....5

**SOCSEC**

KL-1c. (In the year (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1).

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 (year of interview - 1), 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)

WEEKLY INCOME

UNDER \$96.....	1
\$ 96-143.....	2
\$ 144-191.....	3
\$ 192-239.....	4
\$ 240-288.....	5
\$ 289-384.....	6
\$ 385-480.....	7
\$ 481-576.....	8
\$ 577-672.....	9
\$ 673-768.....	10
\$ 769-961.....	11
\$ 962-1,153.....	12
\$1,154-1,441.....	13
\$1,442 or more.....	14

(MONTHLY INCOME CATEGORIES)

MONTHLY INCOME

UNDER \$417.....	1
\$ 417-624.....	2
\$ 625-832.....	3
\$ 833-1041.....	4
\$1,042-1,249.....	5
\$1,250-1,666.....	6
\$1,667-2,082.....	7
\$2,083-2,499.....	8
\$2,500-2,916.....	9
\$2,917-3,332.....	10
\$3,333-4,166.....	11
\$4,167-4,999.....	12
\$5,000-6,249.....	13
\$6,250 or more.....	14

(YEARLY INCOME CATEGORIES)

YEARLY INCOME

UNDER \$5,000.....	1
\$ 5,000-7,499.....	2
\$ 7,500-9,999.....	3
\$10,000-12,499.....	4
\$12,500-14,999.....	5
\$15,000-19,999.....	6
\$20,000-24,999.....	7

**Attachment I**

Cycle 7, Year 3, Quarter 1 (MALE)

Field Date: Summer 2008

OMB No. 0920-0314

Expiration: 04/30/09

\$25,000-29,999.....8  
\$30,000-34,999.....9  
\$35,000-39,999.....10  
\$40,000-49,999.....11  
\$50,000-59,999.....12  
\$60,000-74,999.....13  
\$75,000 or more.....14

{ 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)

{ ASKED IF FMINCDK1="YES"

**FMINCDK2**

KL-3b. Was it \$50,000 or more last year?

Yes.....1

No.....5

{ ASKED IF FMINCDK2="YES"

**FMINCDK3**

KL-3c. Was it \$75,000 or more last year?

Yes.....1

No.....5

{ ASKED FOR ALL

**PUBASST**

KL-4. At any time in the (year of interview -1), even for one month, did you or any members of your family living here receive any CASH assistance from a state or county welfare program, such as (DISPLAY STATE PROGRAM NAME(S))?

*Do not include Food Stamps, SSI, Energy Assistance, WIC, School Meals, or Transportation, Child Care, Rental or Education Assistance.*

Yes .....1

No .....5 (KL-6 FOODSTMP)

{ ASKED IF ANY GOVT PAYMENTS WERE REPORTED

**PUBASTYP**

KL-5. From what type of program did you or any members of your family living here receive the CASH assistance? Was it a welfare or welfare-to-work program such as (DISPLAY STATE PROGRAM NAME(S)), General Assistance, Emergency Assistance, or some other program?

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.

(STATE PROGRAM NAME(S))/welfare/AFDC.....1  
General assistance.....2  
Emergency Assistance/short-term cash assistance.....3  
Some other program.....4

**FOODSTMP**

KL-6. In the year (year of interview - 1), did you or any members of your family living here receive food stamps?

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

**WIC**

KL-7. In the year (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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 (year of interview - 1), 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

**Attachment I**

*Cycle 7, Year 3, Quarter 1 (MALE)*

*Field Date: Summer 2008*

**OMB No. 0920-0314**

**Expiration: 04/30/09**

**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.*