Attachment 1: Changes Proposed for NSFG Year 7 (beginning in Sept 2017)

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Item #	Question numbers/names	Brief description	Which pages of CAPI- lite	Rationale		
			attachments			
FEM/	ALE - See Attachment	2 for specific items				
1	AG-13 FOSTEREV	Revising routing to ask all respondents about any experience in foster care (previously named EVRFSTER)	Att 2: page 16	Foster care experience was previously skipped for those in "intact" families. But because questions related to "intact" family structure ask specifically about the time "between your adoption and present time," foster care experience some respondents may have had prior to adoption may be getting missed. The same change is being made in the male questionnaire.		
2	AG-16 AGEFSTER	Question about age of R when they last left foster care	Att 2: page 16	It can be important when looking at outcomes for those with foster experience to know how long it has been since they exited. Even teens could have been out for 10+ years, so age is not an accurate proxy. The same change is being made in the male questionnaire. About 2-4% of Rs will get this question.		
3	BA/BB series	Revising routing to ask women who haven't had menarche about pregnancies (are they currently preg; have they ever been preg).	Att 2: page 17	This change was requested to provide more complete pregnancy information, including those few respondents who have not yet had a 1st menstrual period. In prior NSFGs, these respondents were skipped past the questions about pregnancy experience.		
4	BH-5a MDSOLID BH-5b WHNSOLID BH-5c MDNUTRIT	Questions about nutrition counseling asked for each bio child aged 6mos to 5 yrs	Att 2: page 27	These questions will provide information on what types of nutritional advice mothers of young children are receiving from their pediatricians or other health care providers. About 15% of women will get these questions		

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5	BL-7 SRCEMBRYO	Follow-up question about source of information (asked only for adult Rs who ever heard of embryo donation or adoption)	Att 2: page 36	This question was requested to obtain more information on where respondents have heard about embryo adoption or embryo donation. About 60% of women will be asked this question.
6	CF-2a SEDNOLC CF-8A SEDWHLC CF-11a SEDCONLC CF-14a SEDSTDLC CF-17a SEDHIVLC	items in the series that did not already have the questions. (how to say	Att 2: page 53 Att 2: page 55 Att 2: page 56 Att 2: page 57 Att 2: page 58	Adding these location questions makes the series more consistent because location(s) of sex ed will be asked consistently for all topics. This information, uniformly collected for all sex ed topics, is particular helpful for those cosponsors focused on school-based education programs. About 25% of respondents will get these questions.
7	DF-6 LASTPER	Adding a question on recency of last menstrual period	Att 2: page 81	This question will provide additional information to measure fecundity and is intended to mirror a similar question asked on the Demographic & Health Surveys conducted in other countries.

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8	DF-7 TRYPREG12	Adding a question on trying to get pregnant in the last year	Att 2: page 82	This question provides an additional measure of pregnancy-seeking and pregnancy intentions within the past year, which will complement questions already in the survey that ask about pregnancy-seeking as a reason for non-use of contraception at time of interview.
9	EA-22a LARC10 EA-22b LARCREMV EA-22c REMOVWHY EA- 22d REMOVDIF EA- 22e REMVDIFY	Added new series about experiences with removal of IUD or implant (LARC) in the past 10 years. Questions ask if used a LARC in the past 10 years, ever wanted a removal, reasons for wanting removal, ever had difficulty with getting removal, and reasons for difficulty.	Att 2: pages 91-92	Given the increased recognition of effectiveness of LARC methods (IUD and implant) for preventing pregnancy, cosponsors focused on contraceptive services and use want to know about potential issues with removal and difficulties with the methods. About 10% of women will get these questions.

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10	EG-11c LATERNUM EG- 11d LATERMY	Added a question about how much too late pregnancy occurred, for pregnancies occuring later than wanted.	Att 2: page 112	We already ask about how much "too soon" pregnancies may have occurred, so this change is intended to get similar detail for those pregnancies deemed "too late." About 5% of women will get this question.
11	EA/EB/ED/EF/EG series	For contraceptives IUD, Patch, and implants: Added new brand names to questionnaire and show cards, and to the questionnaire instrument, added brand names across all occurrences of the corresponding contraceptive method, where they were not yet there, for consistency. Remove "coil,loop" from IUD response category in CRQ, made less prominent in show cards.	Att 2: pages 85- 118	We routinely update brand names listed as examples for contraceptive methods.

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12	FA-5a TALKPROV	Added a question for those who received SRH service, if doctor talked to them about birth control methods, condoms for STD prevention, HPV vaccine	Att 2: page 126	This question assesses provider counseling topics among all women who had a clinical visit for a sexual or reproductive health service in the prior year, rather than linking specific counseling topics to specific services as was previously done. The prior approach was seen as too narrow and potentially missing some relevant counseling that women may have received. About 80% of women will be asked this question.
13	FA-5a PGTSTBC2 FA-5b PAPPLBC2 FA-5c PAPPELEC FA-5d STDTSCON	Deleted these service- specific questions	Att 2: page 126- 127	These questions were deleted because they asked about provider counseling within the context of specific services. They were replaced by TALKPROV.
14	FA-5e1 WHYNOSTD	Added a new question asking main reason did not get tested for STD in the past 12 months	Att 2: page 127	This question will help researchers and service providers better understand the potential barriers to getting an STD test. About 60% of women will get this question.
15	FG-5 TALKDM	Added question similar to male TALKDM (at visit in last 12 months doctor talked about using condom and female method together).	Att 2: page 133	This question is already being asked of men, so we have added it to the female questionnaire to get similar data for women.

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16	FH-0 INTROFH FH-1 PROVRESP FH-2 PROVSAYBC FH-3 PROVPREBC FH-4 PROVINFOBC	Added questions asking those who received SRH service to rate most recent experience with provider.	Att 2: page 133- 135	These questions are intended as measures of the quality of birth control counseling being provided to U.S. women and are drawn from a series validated in smaller-scale studies in different populations. Adding these measures to the NSFG will help track the quality of counseling over time and assess how it may differ among population sub-groups (by age, race, region, etc.). These data may help cosponsors focused on improving contraceptive counseling services in the U.S. About 75% of women will get this series.
17	HA-5a2 OVUL12M	Question asking if she had ovulation drugs within past 12 mos	Att 2: page 140	The NSFG is the primary source of population-based information on the use of infertility services beyond Assisted Reproductive Technologies (ART), but the survey has not included any service- specific measures such as dates or outcomes. For these two of the most commonly received
18	HA-5b2 INSEM12M	Question asking if she had artificial insemination within past 12 mos	Att 2: page 141	whether women received them within the past year, which will be helpful for understanding prevalence and patterns of service use. About 4% of women will get the question OVUL12M and 1% of women will get the INSEM12M question

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117	HD-8a UFSONO HD-8b UFCURR HD-8c UFDIAGNOS HD- 8d UFLIMIT HD-8e UFTREAT	Follow up questions for women reporting uterine fibroids: were they diagnosed by ultrasound, does she have fibroids currently, how long ago was she diagnosed, do her fibroids limit her activities, and how is she being treated for her fibroids.	Att 2: page 145- 146	NSFG has routinely asked questions about health conditions that may impact fertility and reproductive health. Uterine fibroids and Endometriosis are two such gynecological health conditions, and each has been reported by roughly 5% of NSFG respondents. Other national surveys, including those conducted by NCHS, do not currently collect these additional details about uterine fibroids or endometriosis. Our cosponsors view the collection of these data as valuable unto themselves, but particularly in the context of other NSFG survey content.
20	HD-9a ENDOCURR HD-9b ENDODIAG HD-9c ENDOLIM HD-9d ENDOTREAT	Follow up questions for women reporting endometriosis, similar to those asked for fibroids, except for the ultrasound diagnosis	Att 2: page 147- 148	
21	HD-10b PCOS HD-10c PCOSSYMP	Questions asking about polycystic ovarian syndrome	Att 2: page 148	The NSFG gathers information on several benign gynecological conditions that could significantly impact women's fertility. Adding these questions will help to monitor the prevalence of this syndrome and how it was diagnosed in order to further assess the impact of the condition on women's reproductive and general health.

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22	HE-5b WHOSUGG	Deleting question about who suggested HIV testing	Att 2: page 156	The cosponsors have gathered sufficient data from previous NSFG file releases, and they no longer need this question to be included in the NSFG.
23	HE-5c PREPHIV	Question asking about pre-exposure prophylaxis meds for HIV (plus also adding a response category on PrEP to HE-7 AIDSTALK)	Att 2: page 157	The addition or modification of these questions will allow the NSFG to monitor awareness in the general household population of this relatively new medical advancement. Since there are currently few, if any, related measures on PrEP on national surveys and the NSFG collects information on a wealth of specific risk behaviors these changes are well positioned to provide information on PrEP among people with and without these risk behaviors.
24	HG-4 NUTRINFO	Question asking about sources of nutrition information for women living with any child(ren) 5 years or younger	Att 2: page 159	Along with the new items described under item 4, this question will provide information on what types of nutritional advice mothers of young children are receiving and from what sources they receive it.
25	IC-3 OTHRLRSD	Deleting question asking R to specify what "other" religion was raised in.	Att 2: page 163	This change will save some post-processing time and expense in the production of the public use data files. Most respondents who get asked this verbatim follow up question are simply coded as 'other,' so the expense does not seem warranted.
26	IC-7 OTHRLNOW	Deleting question asking R to specify what "other" religion is currently	Att 2: page 164	

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Item #	Question numbers/names	Brief description	Which pages of CAPI- lite attachments	Rationale
27	JH-1a DATEAPP	Question asking about sex with partners met via dating apps	Att 2: page 187	This was requested by cosponsors to provide some measure of the use of the internet or apps for dating among both females and males.
28	JH-3a CONFCONC	Broadened universe to all Rs 15-25, regardless of insurance status	Att 2: page 188	This change provides more detailed information on teen and young adults' concerns about the confidentiality of their health care, whether or not they are on their parent's insurance.
MALE	- See Attachment 3 fo	or specific items		
29	AF-13 FOSTEREV	Revised routing to ask all Rs about any experience in foster care (previously named EVRFSTER)	Att 3: page 14	Foster care experience was previously skipped for those in "intact" families. But because questions related to "intact" family structure ask specifically about the time "between your adoption and present time," foster care experience some respondents may have had prior to adoption may be getting missed. The same change is being made in the female questionnaire.
30	AF-16 AGEFSTER	Question about age of R when they last left foster care	Att 3: page 15	It can be important when looking at outcomes for those with foster experience to know how long it has been since they exited. Even teens could have been out for 10+ years, so age is not an accurate proxy. The same change is being made in the female questionnaire. About 2-4% of Rs will get this question.

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Item #	Question numbers/names	Brief description	Which pages of CAPI- lite attachments	Rationale
31	BA-5a SEDNOLC BA-11a SEDWHLC BA-14a SEDCONLC BA- 17a SEDSTDLC BA- 20a SEDHIVLC	education instruction for items in the series that did not already have the	Att 3: page 18 Att 3: page 20 Att 3: page 21 Att 3: page 21 Att 3: page 22	Adding these location questions makes the series more consistent because location(s) of sex ed will be asked consistently for all topics. This information, uniformly collected for all sex ed topics, is particular helpful for those cosponsors focused on school-based education programs. About 25% of respondents will get these questions.

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32	CG-18c CWPLATEN CG-18d CWPLATEMY CH-5c CWPCPLATEN CH- 5d CWPCPLATEMY DH-18c PXLATEN DH-18d PXLATEMY DI-5a	Question on how much later did the pregnancy occur [current wife/cohabiting partner].	Att 3: page 43 Att 3: page 45 Att 3: page 64 Att 3: page 65	We already ask about how much "too soon" pregnancies may have occurred, so this change is intended to get similar detail for those deemed "too late." (Similar rationale for these revisions in sections D, E, F.) About 5% of men will be asked these questions.
33	PXRLATEN DI-5B later did the pregnancy occur [Recent/last partner].	Att 0. page 03		
34	ED-18c FWPLATEN ED-18d FWPLATEMY	Question on how much later the pregnancy occurred [Former wife /cohabiting partner].	Att 3: page 80	
35	FA-21c OBCLATEN FA-21D OBCLATEMY	Question on how much later did the pregnancy occur [Other partners]	Att 3: page 90	

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36	FC-7a AGENONLB	Question on respondent's age at first or only nonlivebirth	Att 3: page 93	Currently there is limited data on pregnancies that did not end in a live birth and it will be useful to have additional information and characteristics about pregnancies that did not end in live birth for analyses such as teen pregnancies. About 20% of men will get this
37	FC-7b HERAGENLB	Question on partner's age when 1st or only	Att 3: page 93-94	question.
38	IB-3 YOUFPSVC	Revised response categories to separate "advice on strategies to prevent pregnancy" from "advice on strategies to prevent STDs or HIV"	Att 3: page 116	Response categories were revised to bettter capture Information or advice about using condoms to prevent pregnancy versus to prevent STDs
39	ID-2 SVC12MO	Revised response categories to separate "advice about using condoms to prevent pregnancy" from "advice about using condoms to prevent STDs "	Att 3: page 119	
40	ID-8b WHYNOSTD	Added a question asking main reason did not get tested for STD in the past 12 months	Att 3: page 121	This question will help researchers and service providers better understand the potential barriers to getting an STD test. About 65% of respondents will be asked this question.

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Item #	Question numbers/names	Brief description	Which pages of CAPI- lite attachments	Rationale
41	IF-5b WHOSUGG	Deleting question about who suggested HIV testing	Att 3: page 127	The cosponsors have gathered sufficient data from previous NSFG file releases, and they no longer need this question to be included in the NSFG.
42	IF-5c PREPHIV	Question asking about pre-exposure prophylaxis meds for HIV (plus also adding a response category on PrEP to HE-7 AIDSTALK)	Att 3: page 127	The addition or modification of these questions will allow the NSFG to monitor awareness in the general household population of this relatively new medical advancement. Since there are currently few, if any, related measures on PrEP on national surveys and the NSFG collects information on a wealth of specific risk behaviors these changes are well positioned to provide information on PrEP among people with and without these risk behaviors.
43	JB-3 OTHRLRSD	Deleting question asking R to specify what "other" religion was raised in	Att 3: page 130	This change will save some post-processing time and expense in the production of the public use data files. Most respondents who get asked this verbatim follow up question are simply coded as 'other,' so the
44	JB-7 OTHRLNOW	Deleting question asking R to specify what "other" religion is currently	Att 3: page 132	expense does not seem warranted.
45	KJ-9 MSMWEB12	This item deleted and replaced with DATEAPP	Att 3: page 160	This question that had only been asked for men who have sex with men is being replaced with DATEAPP (item 46).
46	KK-3a DATEAPP	Question asking about sex with partners met via	Att 3: page 161	This was requested by cosponsors to provide some measure of the use of the internet or apps for dating among both females and males.
47	KK-6a CONFCONC	Broadened universe to all Rs 15-25, regardless of insurance status	Att 3: page 162	This change provides more detailed information on teen and young adults' concerns about the confidentiality of their health care, whether or not they are on their parent's insurance.