NATIONAL SURVEY OF FAMILY GROWTH, YEAR 1 (2022) DRAFT PHASE 4 NONRESPONSE FOLLOWUP MAILED QUESTIONNAIRES

NOTE: This attachment shows the draft Phase 4 nonresponse followup questionnaires to be mailed to a subset of screener and main interview nonrespondents. These questions will be revised as work continues on maximizing their utility for nonresponse bias analysis and weighting adjustment.

Phase 4 Nonresponse Followup Questionnaire: <u>Screener</u>

Below are some questions about the people in your household, that is, the people who usually live here. Please include any unmarried children away from home living in a dormitory, fraternity or sorority. If you live alone, please think of just yourself when answering. Please mark the checkbox next to your answer.

| 1. How many people live in your household? | |
|---|-----|
| _1 | |
| _2 | |
| _ 3 | |
| _4 | |
| _ 5 or more | |
| 2. Please select the age group(s) for the people in your household. Select all that apply. | |
| _ 0-14 years old | |
| _ 15-17 years old | |
| _ 18-49 years old | |
| _ 50 years and older | |
| 3. Please select the category that best describes your household: | |
| _ all members are female | |
| _ all members are male | |
| _ there are both female(s) and male(s) | |
| | |
| 4. Does anyone in your household consider themselves to be Hispanic or Latino? | |
| _ Yes | |
| _ No | |
| 5. What race(s) do members of your household consider themselves to be? (You may select more th | ıan |
| one answer.) | |
| _ American Indian or Alaska Native | |
| _ Asian | |
| _ Native Hawaiian or other Pacific Islander | |
| _ Black or African-American | |
| _ White | |
| | |

Thank you very much for your help with this study. Please return the questionnaire in the provided postage-paid envelope.

Phase 4 Nonresponse Follow-up Questionnaire: Main Interview

_ I have not had sexual intercourse

_ 14 years or younger

(This questionnaire will only be sent to individuals in households where an adult household member was selected for the main interview but did not participate. We will not send to selected respondents who are minors 15-17.)

Your experiences are unique and we hope you can take a minute to answer a few important questions for the National Survey of Family Growth.

| Please mark the checkbox next to the answer. | | |
|--|--|--|
| 1. How old are you? Please select a category below. _ 15-19 _ 20-24 _ 25-30 _ 30-34 _ 35-44 _ 45-49 | | |
| 2. Are you male or female? _ Male _ Female | | |
| 3. What is your current marital status? _ Married _ Divorced, Separated, or Widowed _ Never been married | | |
| 4. What is the highest grade or level of school you have completed or the highest degree you have received? Less than High School graduate High School graduate, GED, or equivalent Some college, no degree Associate degree Bachelor's degree (e.g., BA, BS) Master's, Professional, or Doctoral degree (e.g., MS, MD, PhD) | | |
| 5. Are you currently covered by any kind of health insurance or some other kind of health care pla _ Yes _ No | | |
| 6. Have you smoked at least 100 cigarettes in your life? _ Yes _ No | | |
| 7. The first time you had sexual intercourse, how old were you? | | |

| _ 15-1/ years of ag | ze |
|----------------------------|--|
| _ 18-20 years of a | ge |
| _ 21 years or olde | |
| 8. Have you had sexual int | ercourse in the last 12 months? |
| _ Yes | |
| _ No | |
| 9. How many biological ch | ildren have you had? |
| _ None | |
| _ 1 child | |
| _ 2 children | |
| _ 3 or more childre | en |
| | |
| 10. Do you use the Interne | et at home? This includes accessing the Internet with a cell phone, computer |
| tablet, or other device. | |
| _ Yes | |
| _ No | |
| | |

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