**NATIONAL SURVEY OF FAMILY GROWTH, YEAR 3 (2024)**

**HOUSEHOLD SCREENER INSTRUMENT in CAPI-LITE FORMAT**

{ASKED OF ALL

**SCINTRO**

**SC-0.**

IF WEB SCREENER, DISPLAY:
Below we tell you more about the survey and how your information is kept confidential.)

Revision of burden estimate to 5 minutes (formerly 3 minutes) and update to Assurance of Confidentiality text

DISPLAY FOR ALL:

**Notice** – CDC estimates the average public reporting burden for this collection of information as 5 minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information 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 aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road, MS D-74, Atlanta, GA 30333; ATTN: PRA (0920-0314).

**Assurance of Confidentiality** – We take your privacy very seriously.  All information that relates to or describes identifiable characteristics of individuals, a practice, or an establishment will be used only for statistical purposes.  NCHS staff, contractors, and agents will not disclose or release responses in identifiable form without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 U.S.C. 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act (44 U.S.C. 3561-3583).  In accordance with CIPSEA, every NCHS employee, contractor, and agent has taken an oath and is subject to a jail term of up to five years, a fine of up to $250,000, or both if he or she willfully discloses ANY identifiable information about you. In addition to the above cited laws, NCHS complies with the Federal Cybersecurity Enhancement Act of 2015 (6 U.S.C. §§ 151 and 151 note) which protects Federal information systems from cybersecurity risks by screening their networks.

IF WEB SCREENER, DISPLAY:

To move thought the survey, **click [Next] or swipe left** to move to the next question.

If you want to go back to a previous question, **click [Back] or swipe right**.)

{ ASKED OF ALL

**SCDESCRP**

SC-0aa. We are doing an important study called the National Survey of Family Growth (NSFG). To prepare for this study, we are asking a scientifically selected sample of households to take part in a brief screening survey. Any adult who lives in this household can answer the brief screening survey. Based on the answers to the screening questions, you or someone else in your household may be asked to complete the main NSFG survey. **The selected person will receive (TOAAMT\_FILL) as a token of appreciation**. Thank you for your help with this important study.

 IF WEB SCREENER, DISPLAY: Please press [Next] to begin the brief screening survey.]

{ ASKED IF WEB SCREENER

**WSCRLANG**

SC-0a. Would you prefer to complete this screening survey in English or Spanish?

1. English

2. Spanish

{ ASKED IF WEB SCREENER

**SCIAGE**

SC-0b. Are you [STATE’S AGE OF MAJORITY] years of age or older and a member of this household?

1. Yes

2. No

{ ASKED IF WEB SCREENER AND SCIAGE=2

**NEWSCIF**

SC-0c. A household member age [STATE’S AGE OF MAJORITY] or older is needed to complete this interview. Please ask a household member who is at least [STATE’S AGE OF MAJORITY] years of age to complete this interview.

Please exit this screening survey.

{ ASKED FOR ALL

**CONFIRMA**

SC-1.

**** Screener checkpoint:

If in-person screener display: This is sample ID [Sample ID preload].

Display for ALL:

(You are at/Your address is):

**[Address number preload], [Street name preload]**

**[Apartment number preload, if app]
[City name preload],** **[State where Interview is being conducted preload], [Zip code preload]**

If in-person screener display:

 If this address is incorrect, please suspend this screener interview

 Please re-enter the numeric portion of the address to continue

If web screener, display:

Is this correct?

Information is correct ................1

Information is not correct 2

*IF R SELECTS “Information is not correct”, DISPLAY: Thank you for your time. Please close this window to exit the survey.*

{ Asked if web screener

INTRO\_ROSTER

SC-1a. If at any point during this survey you get disconnected, please log back in using the same credentials (provided in the letter).

The next questions are about the people who live in this household.

{ ASKED IF INTERVIEWER-ADMINISTERED SCREENER

**INFORMANT**

SC-1b.

**** Interviewer checkpoint:  Who are you talking to now?

1.  Household Member
5.  Proxy Reporter

**DK** Don’t Know

**RF** Refused

{ ASKED FOR EACH HOUSEHOLD MEMBER

**HHPerson[1].NAME**

SC-2.(I would like/Please enter) the first name (or initials) of the people who usually live here. Please include any unmarried household members away from home living in a dormitory, fraternity or sorority.

Let's start with you, what is your name?

       ENTER Name

{ ASKED FOR EACH HOUSEHOLD MEMBER

**HHPerson[1].SEX**

SC-3a. If necessary, ask: (Is [Name of household member] male or female?)

1.  Male
2.  Female

{ ASKED ONLY IF SC-3a WAS NOT ANSWERED AS MALE OR FEMALE FOR SCREENER INFORMANT

**SEX[X]PROMPT**

SC-3a.Some questions in this survey ask about topics such as pregnancy, contraception, reproductive health, and healthcare. Different versions of these questions are asked depending on biological sex, rather than gender identity. To help with survey selection and to ask questions that may apply to you, are you…

Male ................1

Female ..............2

Prefer not to answer.8

{ ASKED FOR EACH HOUSEHOLD MEMBER

**HHPerson[1].AGE[X]**

SC-4. How old (are you/is (she/he))?

 If necessary, ask: (How old (were you/was (he/she) on (your/his/her) last birthday?)

{ ASKED IF DK/RF RESPONSE FOR SC-4 AGE[X]

**HHPerson[1].AGE\_X**

SC-4a.

 Age probes: Is the household member

            14 or under? If yes, enter [14]. If no, continue;
            15-17? If yes, enter [16]. If no, continue;
            18-19? If yes, enter [18]. If no, continue;
            20-49? If yes, enter [32]. If no, continue;
            50 or older? If yes, enter [50].

       ENTER [0] if less than 1 year

{ ASKED FOR EACH HOUSEHOLD MEMBER

**HHPerson[1].HISP**

SC-5. (Do you/Does [Name of household member]) consider (yourself/himself/herself) to be Hispanic or Latino?

[HELP AVAILABLE]

1.  Yes
5.  No

{ ASKED IF HISP=NO FOR HOUSEHOLD MEMBER

**HHPerson[1].RACE**

SC-6. What race (do you/does ([Name of household member]) consider (yourself/himself/herself) to be?

[HELP AVAILABLE]

       If in-person screener, READ list:

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

{ ASKED IF AGE OF HH MEMBER IS 17-22

**HHPerson[1].DORMRES**

SC-7. (Do you/does ([Name of household member]) live in a college or university dormitory, fraternity, or sorority during the school year?

1.  Yes
5.  No

{ ASKED FOR ALL

**EndRoster**

SC-8a.IF WEB SCREENER, DISPLAY:

(You have listed: [LIST HOUSEHOLD MEMBERS]

Are there any other members of this household who are currently living in a college or university dormitory, fraternity, or sorority?

*If there are no other household members, press [NEXT] to continue.*

*If there are other household members to enter, press [BACK] to return to the last screen screen and enter additional household members.)*

 IF IN-PERSON SCREENER, DISPLAY:

Are there any other members of this household
who are currently living in a college or university dormitory,
fraternity, or sorority?

       If informant says there are no others, press [Next] to continue

 Otherwise, if informant has more people to describe, press the [Back] to return to the roster screen and enter additional household information

{ ASKED FOR ALL

**VERROSTER**

SC-8b. To ensure all information is entered correctly, (I would like to/please) review the list of household members. Please indicate if any of this information is incorrect.

Currently the following members of this household have been listed:

(You're/There’s) [Name of household member] and (you’re/she’s/he’s) [Age of household member] years old and (consider yourself/considers (himself/herself)) to be [Hispanic or Latino/American Indian or Alaska Native/Asian/Native Hawaiian or Other Pacific Islander/Black or African-American/White] and [female/male].

There is also the following information about others who live here or are away at college:

       Is all of the information correct?

To make changes to list of household members, click EDIT to move to a household member to edit.

To remove household member, click DELETE. You will be presented with updated list of household members.

Once you make the change, please click "Next" until you reach the household members verification screen again.

{ ASKED IF NO HOUSEHOLD MEMBER IS AGE-ELIGIBLE FOR THE SURVEY OR SCREENER INFORMANT CHOSE PREFER NOT TO ANSWER FOR SC-3a SEX[X} FOR THEMSELF

**EXITAGE**

SC-9. Thank you. These are all the questions for you now. On behalf of RTI and the National Center for Health Statistics, and the U.S. Department of Health and Human Services, thank you for taking the time to help with this screening interview.

We may need to verify later that this screening interview was conducted by a household member for the correct address. For this reason, will you provide a phone number?

  ENTER phone number (XXX-XXX-XXXX)

  Prefer not to provide phone number

{ ASKED IF IN-PERSON SCREENER AND SELECTED HH MEMBER IS A DORM RESIDENT

**EXITSCR1**

SC-10. Thank you for your time. [Name of selected household member] has been selected to provide additional information for this study . Is [Name of selected household member] currently away at school or college?

1.  Yes
5.  No

{ ASKED IF IN-PERSON SCREENER

**EXITSCR2**

SC-11. Thank you for your time. (You have been selected for the study and receive **[TOAAMT\_FILL]** token of appreciation.  May we begin the interview now? /[Name of selected household member] has been selected to provide additional information for this study and receive **[TOAAMT\_FILL]** token of appreciation. May I speak to (a parent or guardian of) [Name of selected household member] now?)

1.  Yes
5.  No

{ ASKED IF IN-PERSON SCREENER

**ST\_sPhone**

SC-12. IF AGEINELIG=1, ASK:

We may need to verify later that this screening survey was conducted by a household member for the correct address. For this reason, will you provide a phone number?

ELSE:

May I have a telephone number to contact you in case my supervisor needs to verify my work?

       ENTER phone

{ ASKED IF IN-PERSON SCREENER

**LANG**
SC-13. Please code the likely interview language.

 1.  English
 2.  Spanish

3. Unknown

4. Other

{ ASKED IF WEB SCREENER AND INFORMANT SELECTED FOR MAIN INTVW

**WEXITSCRC**

SC-14. (Please confirm your contact information in case we need to reach you by phone or email./You have been selected for the study. It would be helpful for us to have at least one additional way to contact you - phone, text, or email. If you prefer not to provide either your phone number or email address, any follow-up information will be sent to you by mail.)

What is your phone number, so we can text or call you? You provided this number. Please verify.

 ENTER phone number (XXX-XXX-XXXX)

 Prefer not to provide

What is your email address?

 ENTER email address (example@mail.com)

 Prefer not to provide

{ ASKED IF WEB SCREENER AND INFORMANT SELECTED FOR MAIN INTVW}

**WEXITSCRC2**

SC-14b. ~~Just in case, below is~~ Please write down ~~your survey~~ the log~~-~~in information below. ~~you will need for the NSFG survey (please write it down)~~. You will receive **[TOAAMT\_FILL]** token of appreciation upon survey completion. We recommend continuing on a device or computer with the largest screen you have available.

Web site:

Passcode:

Would you like to continue on this device ~~begin your NSFG survey now?~~

1.  Yes, I would like to continue on this device
5.  No, I would like to switch to a larger device using the login above

 ~~Please click “Next” to continue to the next survey.~~

{ ASKED IN WEB SCREENER IF ANOTHER HOUSEHOLD MEMBER IS SELECTED AND THAT PERSON IS UNDER STATE’S AGE OF MAJORITY

**WEXITSCRPG**

SC-15. Since [Name of selected household member] is under [STATE’S AGE OF MAJORITY] years of age we need permission from their parent or legal guardian in order to proceed. Are you the parent or legal guardian of [Name of selected household member]?

1.  Yes
5.  No

**Note:** If web screener informant is the parent or legal guardian of the selected household member they will be asked for permission for their participation. If web screener informant is not the parent or legal guardian they will be asked to indicate in SC-16 who in the household is the parent or legal guardian.

{ ASKED IF WEB SCREENER, ANOTHER HOUSEHOLD MEMBER IS SELECTED AND THAT PERSON IS UNDER STATE’S AGE OF MAJORITY AND THE SCREENER INFORMANT IS NOT THEIR PARENT OR LEGAL GUARDIAN (WEXITSCRPG=NO)

**WEXITSCRPG2**

SC-16. Please indicate which household member is a parent or legal guardian of [Name of selected household member] who can be asked for permission for [Name of selected household member] to take part in this survey?

(List of household members is displayed)

 ENTER number/name of a household member

 Parent or guardian is not in household

[IF PARENT OR GUARDIAN IS NOT IN HOUSEHOLD GO TO CLOSEOUT SCREEN]

{ ASKED IF WEB SCREENER AND AND PARENT OR LEGAL GUARDIAN WAS SELECTED FROM HOUSEHOLD ROSTER IN WEXITSCRPG2 (SC-16)

**WEXITSCRPG3**

SC-17b. Is [household member named in WEXITSCRPG2] available now to give permission for [Name of selected youth household member] to participate in the survey?

1.  Yes
5.  No

{ASKED IF WEB SCREENER, INFORMANT IS NOT THE PARENT OR LEGAL GUARDIAN OF SELECTED MINOR R (WEXITSCRPG=1 AND HOUSEHOLD MEMBER SELECTED IN WEXITSCRPG2 IS NOT AVAILABLE (WEXITSCRPG3=2 (NO))

**WSCRPGPE**

SC-17. Please provide contact information for us to reach [household member named in WEXITSCRPG] to request permission for [Name of selected household member] to participate in this survey and receive (TOAAMT\_FILL)?

  ENTER phone number (XXX-XXX-XXXX)

  ENTER email address (example@mail.com)

  Prefer not to provide email address or phone number

{ASKED IF SC-17b WEXITSCPRG EQ NO (SCREENER INFORMANT IS NOT SELECTED MINOR’S PARENT OR GUARDIAN)

**WEXITSCRPG4**

SC-17c. Thank you for completing the screening survey. Please ask [household member who is named in WEXITSCRPG2] to complete the last question now to give permission for [Name of selected youth household member] to participate in the survey.

 [GO TO MINOR PERMISSION SCREEN FOR OTHER HOUSEHOLD MEMBER’S COMPLETION]

{ ASKED IF WEB SCREENER ANOTHER HOUSEHOLD MEMBER IS SELECTED AND THAT PERSON IS OVER STATE’S AGE AT MAJORITY

**WEXITSCR2**

SC-18. Thank you for your time. [Name of selected household member] has been selected to take part in this study. Please provide contact information for us to reach [Name of selected household member] [IF WEBSCREEN=1, FILL: about participating in the survey and receiving [TOAAMT\_FILL]/IF WEBSCREEN=2, FILL: by phone or email to follow-up about the survey if needed].

 (What is/Enter)[selected household member]’s phone number(?) (XXX-XXX-XXXX)

 (What is/Enter) [selected household member]’s email address(?) (example@mail.com)

 Prefer not to provide phone number or email address

{ ASKED IF MINOR SELECTED AND PARENTAL/GUARDIAN PERMISSION OBTAINED

**WSCRPGPE0.WebPhone**

WebPhone. Please provide contact information for us to reach [UNDERAGE HH MEMBER] about participating in this survey and receiving [TOA\_FILL].

 What is [selected underage household member]’s phone number so that we may text or call?

 ENTER phone number (XXX-XXX-XXXX)

{ ASKED IF TEEN SELECTED AND PARENTAL PERMISSION OBTAINED

**WSCRPGPE0.Email**

Email. What is [selected household member]’s email address?

 (What is/Enter) [selected household member]’s email address(?) (example@mail.com)

{ ASKED FOR WEB SCREENER

**WLANG**

SC-19. Please enter (your/[Name of selected household member]’s) likely preferred language for the main interview. English or Spanish are available.

1.  English
2.  Spanish

*[CLOSEOUT OF SCREENER INTERVIEW OPERATES DIFFERENTLY BY MODE AND SELECTED HOUSEHOLD MEMBER.]*

{ COMPLETED BY INTERVIEWER IF IN-PERSON SCREENER

**SCOBS\_2**

**** Interviewer checkpoint:

 Do you think the selected respondent is in a current sexual relationship with an opposite-sex partner?

[HELP AVAILABLE]

1.  Yes
5.  No

{ COMPLETED BY INTERVIEWER IF IN-PERSON SCREENER

**SCOBS\_3**

**** Interviewer checkpoint:

       What is the probability of getting the main interview?

1.  High
2.  Medium
3.  Low

{ COMPLETED BY INTERVIEWER IF IN-PERSON SCREENER

**SCComplete**

**** Interviewer checkpoint:

       You have reached the end of the NSFG Screener

       SELECT [1] to exit interview

[NOTE: FOR WEB SCREENERS (FTFMODE=2) and WEB MAIN INTERVIEWS, THE FOLLOWING TIME OUT TEXT IS USED:

Your survey session has expired.  Please do not refresh this page.

To get back in the survey, please use the website and login information provided in your invitation letter.]