REPRODUCTIVE HEALTH - RHQ

RHQ.010   The next series of questions are about {your/SP's} reproductive history. I will begin by asking some questions about {your/SP's} period or menstrual cycle.

How old {were you/was SP} when {you/she} had {your/her} **first** menstrual period?

CODE "0" IF HAVEN'T STARTED YET.

CAPI INSTRUCTION:
SOFT EDIT VALUES: 8-25 YEARS.
HARD EDIT VALUES: AGE OF 1ST PERIOD CANNOT BE GREATER THAN CURRENT AGE.

|___|___|
ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

BOX 1

CHECK ITEM RHQ.015:
■   IF PERIODS HAVEN'T STARTED (CODED '0') IN RHQ.010 AND SP 12-13 YEARS OLD OR 50 YEARS OR OLDER, GO TO END OF SECTION.
■   IF PERIODS HAVEN'T STARTED (CODED '0') IN RHQ.010 AND SP 14-49 YEARS OLD, GO TO RHQ.700.
■   IF PERIODS HAVE STARTED AND SP REPORTS AGE (CODED '1' - '76') IN RHQ.010, OR IF SP REFUSES AGE (CODED '77') IN RHQ.010, GO TO RHQ.030.
■   OTHERWISE, CONTINUE WITH RHQ.020.

RHQ.020   {Were you/Was SP} . . .

younger than 10, ... 1
10 to 12, ... 2
13 to 15, or 3
16 or older? 4
REFUSED 7
DON'T KNOW 9

RHQ.030   {Have you/Has SP} had **a period** in the **past 12 months**? (Please do not include bleedings caused by medical conditions or surgeries.)

YES 1   (BOX 3)
NO 2
REFUSED 7   (RHQ.050)
DON'T KNOW 9   (RHQ.050)

RHQ.040   What is the reason that {you have/SP has} not had **a period** in the past 12 months?

CAPI INSTRUCTION:
IF SP CURRENTLY PREGNANT (CODED '1' IN RHQ.040), MARK AS PREGNANT (CODE '1') IN RHQ.140.

PREGNANT NOW...	1	(BOX 3)
BREAST FEEDING	2	(BOX 3)
PREGNANT IN PAST YEAR........................	3	(BOX 3)
PERIODS USUALLY IRREGULAR	4	
GOING/GONE THROUGH MENOPAUSE	5	
MEDICAL CONDITIONS/TREATMENTS......	6	
REFUSED	77	
DON'T KNOW	99	

RHQ.050   When did {you/SP} have {your/her} **last** period?

PROBE: How many years or months ago was {your/SP's} last period?

HAVING IT NOW..	1	(BOX 3)
LESS THAN 2 MONTHS AGO	2	(BOX 3)
3-5 MONTHS AGO	3	(BOX 3)
6-8 MONTHS AGO	4	(BOX 3)
9-11 MONTHS AGO	5	(BOX 3)
12 OR MORE MONTHS AGO	6	
REFUSED	77	(BOX 3)
DON'T KNOW	99	(BOX 3)

RHQ.060   About how old {were you/was SP} when {you/she} had {your/her} **last** menstrual period?

|___|___|
ENTER AGE IN YEARS

REFUSED	77
DON'T KNOW	99

BOX 2

CHECK ITEM RHQ.065:
- IF SP DOESN'T KNOW AGE AT LAST MENSTRUAL PERIOD (CODED '99') IN RHQ.060, CONTINUE WITH RHQ.070.
- OTHERWISE, GO TO BOX 3.

RHQ.070 {Were you/Was SP} . . .

younger than 30,	1
30 to 34,	2
35 to 39,	3
40 to 44,	4
45 to 49,	5
50 to 54, or	6
55 or older?	7
REFUSED	77
DON'T KNOW	99

BOX 3

CHECK ITEM RHQ.075:
- IF SP HAD REGULAR PERIODS (CODED '1' IN RHQ.030) AND 12-60 YEARS OLD, CONTINUE WITH RHQ.080.
- IF SP HAD LAST PERIOD BETWEEN 0-2 MONTHS AGO (CODED 1-2 IN RHQ.050) AND <u>NOT</u> CURRENTLY PREGNANT (CODED '2-9' IN RHQ.040) AND 12-60 YEARS OLD, CONTINUE WITH RHQ.080.
- OTHERWISE, GO TO RHQ.130.

RHQ.080 What was the date that {your/SP's} last period started?

|___|___| / |___|___|
ENTER DATE OF LAST PERIOD (MONTH, DAY)

REFUSED	77-77
DON'T KNOW	99-99

RHQ.130 The next questions are about {your/SP's} pregnancy history.

{Have you/Has SP} **ever** been pregnant? Please include (current pregnancy,) live births, miscarriages, stillbirths, tubal pregnancies and abortions.

MARK IF KNOWN. OTHERWISE ASK.

YES	1	
NO	2	(BOX 11)
REFUSED	7	(BOX 11)
DON'T KNOW	9	(BOX 11)

BOX 4

CHECK ITEM RHQ.135A:
- IF SP HAD LAST PERIOD LESS THAN 6 MONTHS AGO AND NOT CURRENTLY MENSTRUATING (CODED '2', '3' IN RHQ.050) AND SP 12-59 YEARS OLD, CONTINUE WITH RHQ.141.
- IF SP HAD REGULAR PERIODS (CODED '1' IN RHQ.030) AND SP 12-59 YEARS OLD, CONTINUE WITH RHQ.141.
- OTHERWISE, GO TO RHQ.160.

RHQ.141   {Are you/Is SP} pregnant **now**?

                                          YES   1
                                          NO   2   (RHQ.160)
                                          REFUSED   7   (RHQ.160)
                                          DON'T KNOW   9   (RHQ.160)

RHQ.151   {The next questions are about {your/SP's} pregnancy history.}

            Which month of pregnancy {are you/is she} in?

            CAPI INSTRUCTION:
            IF CODED '1' IN RHQ.040, DISPLAY BRACKETED TEXT.

                                          |___|___|
                                          ENTER NUMBER OF MONTHS

                                          REFUSED   77
                                          DON'T KNOW   99

RHQ.160   How many times {have you/has SP} been pregnant? ({Again, be/Be} sure to count all {your/her} pregnancies
            including (current pregnancy,) live births, miscarriages, stillbirths, tubal pregnancies, or abortions.)

                                          |___|___|
                                          ENTER NUMBER OF PREGNANCIES

                                          REFUSED   77
                                          DON'T KNOW   99

BOX 5

CHECK ITEM RHQ.165:
- ■   IF SP ONLY HAD ONE PREGNANCY (CODED '1') IN RHQ.160 AND
     CURRENTLY PREGNANT (CODED '1') IN RHQ.140, SKIP TO RHQ.300.
- ■   OTHERWISE CONTINUE WITH RHQ.170.

RHQ.170   How many of {your/her} pregnancies resulted in a live birth?

            COUNT THE NUMBER OF TOTAL PREGNANCIES, NOT NUMBER OF LIVE-BORN CHILDREN. FOR
            EXAMPLE, IF SP HAD TWINS OR OTHER MULTIPLE BIRTH, COUNT AS A SINGLE PREGNANCY.

                                          |___|___|
                                          ENTER NUMBER OF PREGNANCIES

                                          REFUSED   77
                                          DON'T KNOW   99

BOX 6

```
CHECK ITEM RHQ.175:
■   IF SP HAD NO PREGNANCIES THAT RESULTED IN A LIVE BIRTH (CODED '0')
    IN RHQ.170, GO TO BOX 11.
■   IF SP HAD ONE PREGNANCY THAT RESULTED IN A LIVE BIRTH (CODED '1')
    IN RHQ.170, GO TO RHQ.190.
■   OTHERWISE, CONTINUE WITH RHQ.180.
```

RHQ.180   How old {were you/was SP} at the time of {your/her} **first** live birth?

|___|___|
ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

RHQ.190   How old {were you/was SP} at the time of {your/her} {**last**} live birth?

CAPI INSTRUCTION:
IF SP HAD MORE THAN 1 LIVE BIRTH (CODED >= 2) IN RHQ.170, DISPLAY {LAST}.

|___|___|
ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

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                             BOX 7

CHECK ITEM RHQ.195:
■   IF DIFFERENCE BETWEEN AGE AT TIME OF LAST LIVE BIRTH IN RHQ.190
    AND CURRENT AGE IS ZERO OR 1, CONTINUE WITH RHQ.200.
■   OTHERWISE, GO TO RHQ.210.
```

RHQ.200   {Are you/Is SP} **now** breast feeding a child?

YES 1   (BOX 8)
NO 2
REFUSED 7
DON'T KNOW 9

RHQ.210   Did {you/SP} breast feed {your/her} child/any of {your/her} children?

CAPI INSTRUCTION:
IF SP HAD ONE LIVE BIRTH (CODED '1') IN RHQ.170, DISPLAY {YOUR CHILD}.
IF SP HAD MORE THAN ONE LIVE BIRTH (CODED >= 2) IN RHQ.170, DISPLAY {ANY OF YOUR CHILDREN}.

YES .... 1 (BOX 8)
NO 2 (RHQ.250)
REFUSED .... 7 (BOX 9)
DON'T KNOW .... 9 (BOX 9)

BOX 8

CHECK ITEM RHQ.215:
- IF SP HAD ONE PREGNANCY THAT RESULTED IN A LIVE BIRTH (CODED '1') IN RHQ.170, CONTINUE WITH RHQ.220.
- OTHERWISE, GO TO RHQ.230.

RHQ.220   Did {you/SP} breast feed {your/her} child for **at least 1 month**?

YES .... 1 (BOX 9)
NO 2 (RHQ.250)
REFUSED .... 7 (BOX 9)
DON'T KNOW .... 9 (BOX 9)

RHQ.230   How many of {your/SP's} children did {you/she} breast feed for **at least 1 month**?

|___|___|
ENTER NUMBER OF CHILDREN

REFUSED 77
DON'T KNOW 99

BOX 9

CHECK ITEM RHQ.245:
- IF SP HAD AT LEAST ONE PREGNANCY THAT RESULTED IN A LIVE BIRTH (**NOT** CODED '0') IN RHQ.170, CONTINUE WITH RHQ.250.
- OTHERWISE, GO TO RHQ.280.

RHQ.250   {Did {your/SP's} child/Did any of {your/SP's} children} weigh **less than 5 ½ pounds** (2500 g) at birth?

CAPI INSTRUCTION:
IF SP HAD ONE LIVE BIRTH (CODED '1') IN RHQ.170, DISPLAY {YOUR CHILD}.
IF SP HAD MORE THAN ONE LIVE BIRTH (CODED >= 2) IN RHQ.170, DISPLAY {DID ANY OF YOUR CHILDREN}.

CAPI INSTRUCTION:
IF YES (CODED '1') IN RHQ.250 AND SP HAD ONLY ONE LIVE BIRTH (CODED '1') IN RHQ.170, ENTER '1' IN RHQ.260.

YES	1	
NO	2	(BOX 11)
REFUSED	7	(BOX 11)
DON'T KNOW	9	(BOX 11)

RHQ.260   How many of {your/her} children weighed less than **5 ½ pounds (2500 g)** at birth?

|___|___|
ENTER NUMBER OF CHILDREN

REFUSED	77
DON'T KNOW	99

BOX 10

CHECK ITEM RHQ.262:
- IF SP HAD ONLY ONE LIVE BIRTH (CODED '1') IN RHQ.170, CONTINUE WITH RHQ.264.
- OTHERWISE, GO TO RHQ.270.

RHQ.264   Was this baby born preterm? A preterm delivery is one that occurs at 36 weeks or earlier in pregnancy.

CAPI INSTRUCTION:
IF YES (CODED '1') IN RHQ.264, ENTER 1 IN RHQ.270.

YES	1	(BOX 11)
NO	2	(BOX 11)
REF	7	(BOX 11)
DK	9	(BOX 11)

RHQ.270   How many of these babies were born preterm? A preterm delivery is one that occurs at 36 weeks or earlier in pregnancy.

|___|___|
ENTER NUMBER OF CHILDREN

REFUSED	77
DON'T KNOW	99

RHQ.280   {Have you/Has SP} had a hysterectomy, that is, surgery to **remove** {your/her} uterus or womb?

MARK IF KNOWN. OTHERWISE ASK.

YES 1
NO.. 2 (RHQ.300)
REFUSED 7 (RHQ.300)
DON'T KNOW 9 (RHQ.300)

RHQ.290   How old {were you/was SP} when {you/she} had {your/her} (hysterectomy/uterus removed/womb removed)?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

RHQ.300   {Have you/Has SP} had at least one of {your/her} ovaries removed (either when {you/she} had {your/her} uterus removed or at another time)?

YES 1
NO.. 2 (BOX 13)
REFUSED .... 7 (BOX 13)
DON'T KNOW .... 9 (BOX 13)

RHQ.310   Were both ovaries removed or only one?

BOTH 1
ONE.. 2 (RHQ.330)
REFUSED .... 7 (BOX 13)
DON'T KNOW .... 9 (BOX 13)

RHQ.320   Were both of {your/SP's} ovaries removed at the same time or at different times?

SAME TIME.. 1
DIFFERENT TIMES 2 (RHQ.340)
REFUSED .... 7 (BOX 13)
DON'T KNOW .... 9 (BOX 13)

RHQ.330   How old {were you/was SP} when {you/she} had {your/her} {ovary/ovaries} removed?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

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                          BOX 12

CHECK ITEM RHQ.335:
GO TO BOX 13.
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RHQ.340   How old {were you/was SP} when {you/she} had the second ovary removed?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

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                          BOX 13

CHECK ITEM RHQ.355:
■    IF SP 20-54 YEARS OLD, CONTINUE WITH RHQ.360.
■    OTHERWISE, GO TO RHQ.420.
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RHQ.360   Has a doctor or other health professional **ever** told {you/SP} that {you/she} had endometriosis?
(Endometriosis is a disease in which the tissue that forms the lining of the uterus/womb attaches to other
places, such as the ovaries, fallopian tubes, or abdominal cavity.)

YES   1
NO   2   (RHQ.380)
REFUSED   7   (RHQ.380)
DON'T KNOW   9   (RHQ.380)

RHQ.370   How old {were you/was SP} when {you were/she was} **first** told {you/she} had endometriosis?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

RHQ.380　　　Has a doctor or other health professional **ever** told {you/SP} that {you/she} had uterine fibroids? (Uterine fibroids are benign (not cancerous) tumors growing in various locations on or within the uterus/womb.)

                              YES 1
                              NO.. 2　(RHQ.420)
                              REFUSED .... 7　(RHQ.420)
                              DON'T KNOW .... 9　(RHQ.420)

RHQ.390　　　How old {were you/was SP} when {you were/she was} **first** told {you/she} had uterine fibroids?

                              |___|___|___|
                              ENTER AGE IN YEARS

                              REFUSED 777
                              DON'T KNOW 999

RHQ.420　　　Now I am going to ask you about {your/SP's} birth control history.

             {Have you/Has SP} **ever** taken birth control pills for any reason?

                              YES 1
                              NO .... 2　(RHQ.510)
                              REFUSED .... 7　(RHQ.510)
                              DON'T KNOW .... 9　(RHQ.510)

RHQ.430　　　How old {were you/was SP} when {you/she} began using birth control pills?

                              |___|___|
                              ENTER AGE IN YEARS

                              REFUSED 77
                              DON'T KNOW 99

BOX 14

CHECK ITEM RHQ.435:
- IF SP IS <u>NOT</u> PREGNANT (CODED '2') IN RHQ.140 OR MENOPAUSAL (CODED '6') IN RHQ.050 AND IF SP HAS AT LEAST ONE OVARY (<u>NOT</u> CODED '1') IN RHQ.310, AND IF SP HAS UTERUS (CODED '2', '7', '9') IN RHQ.280, CONTINUE WITH RHQ.440.
- OTHERWISE, GO TO RHQ.450.

RHQ.440　　　{Are you/Is SP} taking birth control pills **now**?

                              YES .... 1　(RHQ.460)
                              NO.. 2
                              REFUSED .... 7　(RHQ.510)
                              DON'T KNOW .... 9　(RHQ.510)

RHQ.450   How old {were you/was SP} when {you/she} stopped taking birth control pills?

|___|___|
ENTER AGE IN YEARS

REFUSED 77
DON'T KNOW 99

RHQ.460   Not counting any time when {you/SP} stopped taking them, for how long **altogether** {have you taken/did you take/has she taken/did she take} birth control pills?

CODE "1" FOR LESS THAN ONE MONTH.

|___|___|
ENTER NUMBER

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MONTHS 1
YEARS 2
REFUSED 7
DON'T KNOW 9

RHQ.510   {Have you/Has SP} **ever** used Depo-Provera or injectables to prevent pregnancy?

YES 1
NO 2   (BOX 15)
REFUSED 7   (BOX 15)
DON'T KNOW 9   (BOX 15)

RHQ.520   {Are you/Is SP} **now** using Depo-Provera or injectables to prevent pregnancy?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

BOX 15

CHECK ITEM RHQ.535:
■   IF SP 20 YEARS OF AGE OR OLDER, CONTINUE WITH RHQ.540.
■   OTHERWISE, SKIP TO BOX 19.

RHQ.540   {Have you/Has SP} **ever** used female hormones such as estrogen and progesterone? Please include any forms of female hormones, such as pills, cream, patch, and injectables, but **do not** include birth control methods or use for infertility.

YES	1	
NO	2	(BOX 19)
REFUSED	7	(BOX 19)
DON'T KNOW	9	(BOX 19)

RHQ.541   Which forms of female hormones {have you/has SP} used?

CODE ALL THAT APPLY

PILLS..	1
PATCHES	2
CREAM/SUPPOSITORY/INJECTION...........	3
REFUSED	7
DON'T KNOW	9

RHQ.550   At the time {you/SP} started using female hormones or hormone replacement therapy, {were you/was she} still having {your/her} periods or had {you/she} completely stopped having {your/her} periods?

STILL HAVING PERIODS	1
COMPLETELY STOPPED HAVING	
PERIODS	2
REFUSED	7
DON'T KNOW	9

RHQ.551   What are {your/SP's} reasons for having used estrogen or progesterone?

CODE ALL THAT APPLY

MENOPAUSE-RELATED SYMPTOMS	
(HOT FLASHES, SWEATING, VAGINAL	
DRYNESS, BLADDER PROBLEMS	1
DEPRESSION, ANXIETY, EMOTIONAL	
DISTRESS	2
HYSTERECTOMY OR OOPHERECTOMY	
(OVARY REMOVAL)	3
OSTEOPOROSIS, BONE LOSS/THINNING	
FRACTURE PREVENTION.........................	4
CARDIOVASCULAR DISEASE	
PREVENTION	5
IRREGULAR MENSTRUAL PERIODS, TO	
REGULATE PERIODS	6
OTHER REASONS	7
REFUSED	77
DON'T KNOW	99

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┌─────────────────────────────────────────────────────────────────┐
│                          BOX 16                                    │
│                                                                    │
│ CHECK ITEM RHQ.552:                                                │
│ IF SP USED FEMALE HORMONE PILLS (CODE '1') IN RHQ.541, CONTINUE WITH│
│ RHQ.554.                                                           │
│ OTHERWISE, GO TO BOX 17.                                           │
└─────────────────────────────────────────────────────────────────┘
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RHQ.554   {Have you/Has SP} **ever** taken female hormone **pills** containing **estrogen only** (like Premarin)? (Do not include birth control pills.)

YES 1
NO.. 2 (RHQ.562)
REFUSED 7 (RHQ.562)
DON'T KNOW 9 (RHQ.562)

RHQ.556   How old {were you/was SP} when {you/she} **first** started taking pills containing estrogen only?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

RHQ.558   {Are you/Is SP} taking pills containing estrogen only **now**?

YES 1
NO.. 2
REFUSED 7
DON'T KNOW 9

RHQ.560   Not counting any time when {you/SP} stopped taking them, for how long **altogether** {have you taken/did you take/has she taken/did she take} pills containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MONTHS... 1
YEARS 2
REFUSED 7
DON'T KNOW 9

RHQ.562   {Have you/Has SP} taken female hormone **pills** containing **progestin only** (like Provera)? (Do not include birth control pills.)

YES	1	
NO	2	(RHQ.570)
REFUSED	7	(RHQ.570)
DON'T KNOW	9	(RHQ.570)

RHQ.564   How old {were you/was SP} when {you/she} **first** started taking pills containing progestin only?

|___|___|___|
ENTER AGE IN YEARS

REFUSED	777
DON'T KNOW	999

RHQ.566   {Are you/Is SP} taking pills containing progestin only **now**?

YES	1
NO	2
REFUSED	7
DON'T KNOW	9

RHQ.568   Not counting any time when {you/SP} stopped taking them, for how long **altogether** {have you taken/did you take/has she taken/did she take} pills containing progestin only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED	77
DON'T KNOW	99

ENTER UNIT

MONTHS	1
YEARS	2
REFUSED	7
DON'T KNOW	9

RHQ.570   {Have you/Has SP} taken female hormone **pills** containing **both estrogen and progestin** (like Prempro, Premphase)? (Do not include birth control pills.)

YES	1	
NO	2	(BOX 17)
REFUSED	7	(BOX 17)
DON'T KNOW	9	(BOX 17)

RHQ.572   How old {were you/was SP} when {you/she} **first** started taking pills containing both estrogen and progestin?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

RHQ.574   {Are you/Is SP} taking pills containing both estrogen and progestin **now**?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

RHQ.576   Not counting any time when {you/SP} stopped taking them, for how long **altogether** {have you taken/did you take/has she taken/did she take} pills containing both estrogen and progestin?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MONTHS... 1
YEARS 2
REFUSED 7
DON'T KNOW 9

BOX 17

CHECK ITEM RHQ.578:
IF SP USED PATCHES (CODE '2') IN RHQ.541, CONTINUE WITH RHQ.580.
OTHERWISE, GO TO BOX 18.

RHQ.580   {Have you/Has SP} **ever** used female hormone **patches** containing **estrogen only**?

YES 1
NO 2 (RHQ.596)
REFUSED 7 (RHQ.596)
DON'T KNOW 9 (RHQ.596)

RHQ.582   How old {were you/was SP} when {you/she} **first** started using patches containing estrogen only?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

RHQ.584   {Are you/Is SP} using patches containing estrogen only **now**?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

RHQ.586   Not counting any time when {you/SP} stopped using them, for how long **altogether** {have you used/did you use/has she used/did she use} patches containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MONTHS... 1
YEARS 2
REFUSED 7
DON'T KNOW 9

RHQ.596   {Have you/Has SP} used female hormone **patches** containing **both estrogen and progestin**?

YES 1
NO 2   (BOX 18)
REFUSED 7   (BOX 18)
DON'T KNOW 9   (BOX 18)

RHQ.598   How old {were you/was SP} when {you/she} **first** started using patches containing both estrogen and progestin?

|___|___|___|
ENTER AGE IN YEARS

RHQ.600   {Are you/Is SP} using patches containing both estrogen and progestin **now**?

                                        YES 1
                                        NO 2
                                        REFUSED 7
                                        DON'T KNOW 9

RHQ.602   Not counting any time when {you/SP} stopped using them, for how long **altogether** {have you used/did you
           use/has she used/did she use} patches containing both estrogen and progestin?

           CODE "1" FOR LESS THAN 1 MONTH

                                        |___|___|
                                        ENTER NUMBER

                                        REFUSED 77
                                        DON'T KNOW 99

                                        ENTER UNIT

                                        MONTHS 1
                                        YEARS 2
                                        REFUSED 7
                                        DON'T KNOW 9

+---+
| **BOX 18** |
| |
| **CHECK ITEM RHQ.604:** |
| IF SP USED VAGINAL CREAM, SUPPOSITORIES OR INJECTIONS (CODE '3') IN |
| RHQ.541, CONTINUE WITH RHQ.606. |
| OTHERWISE, GO TO BOX 19. |
+---+

DROPPED
RHQ.606   {Have you/Has SP} **ever** used female hormone **creams, suppositories, or injections** containing **estrogen
           only**?

                                        YES 1
                                        NO 2 (RHQ.614)
                                        REFUSED 7 (RHQ.614)
                                        DON'T KNOW 9 (RHQ.614)

DROPPED
RHQ.608   How old {were you/was SP} when {you/she} **first** started using creams, suppositories, or injections
           containing estrogen only?

                                        |___|___|___|
                                        ENTER AGE IN YEARS

                                        REFUSED 777
                                        DON'T KNOW 999

DROPPED

RHQ.610   {Are you/Is SP} using creams, suppositories, or injections containing estrogen only **now**?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

DROPPED

RHQ.612   Not counting any time when {you/SP} stopped using them, for how long **altogether** {have you used/did you use/has she used/did she use} creams, suppositories, or injections containing estrogen only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MONTHS 1
YEARS 2
REFUSED 7
DON'T KNOW 9

DROPPED

RHQ.614   {Have you/Has SP} used female hormone **creams, suppositories, or injections** containing **progestin only**?

YES 1
NO 2 (RHQ.622)
REFUSED 7 (RHQ.622)
DON'T KNOW 9 (RHQ.622)

DROPPED

RHQ.616   How old {were you/was SP} when {you/she} **first** started using female hormone creams, suppositories, or injections containing progestin only?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

DROPPED

RHQ.618   {Are you/Is SP} using creams, suppositories, or injections containing progestin only **now**?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

DROPPED

RHQ.620   Not counting any time when {you/SP} stopped using them, for how long **altogether** {have you used/did you use/has she used/did she use} creams, suppositories, or injections containing progestin only?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MONTHS 1
YEARS 2
REFUSED 7
DON'T KNOW 9

DROPPED

RHQ.622   {Have you/Has SP} used female hormone **creams, suppositories or injections** containing **both estrogen and progestin**?

YES 1
NO 2   (BOX 19)
REFUSED 7   (BOX 19)
DON'T KNOW 9   (BOX 19)

DROPPED

RHQ.624   How old {were you/was SP} when {you/she} first started using creams, suppositories, or injections containing **both estrogen and progestin**?

|___|___|___|
ENTER AGE IN YEARS

REFUSED 777
DON'T KNOW 999

DROPPED

RHQ.626   {Are you/Is SP} using creams, suppositories, or injections containing both estrogen and progestin **now**?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

DROPPED

RHQ.628   Not counting any time when {you/SP} stopped using them, for how long **altogether** {have you used/did you use/has she used/did she use} creams, suppositories, or injections containing both estrogen and progestin?

CODE "1" FOR LESS THAN 1 MONTH

|___|___|
ENTER NUMBER

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MONTHS 1
YEARS 2
REFUSED 7
DON'T KNOW 9

BOX 19

CHECK ITEM RHQ.640:
■   IF SP CURRENTLY PREGNANT (CODED '1') IN RHQ.140, CONTINUE WITH FSQ.650.
■   IF THE AGE DIFFERENCE BETWEEN SP's CURRENT AGE AND AGE AT LAST LIVE BIRTH IN RHQ.190 IS ZERO OR 1, CONTINUE WITH FSQ.650.
■   IF SP CURRENTLY LACTATING (CODED '1') IN RHQ.200, CONTINUE WITH FSQ.650.
■   IF SP 14-49 YEARS OLD, GO TO RHQ.700.
■   OTHERWISE, GO TO END OF SECTION.

FSQ.650   These next questions are about participation in programs for women with young children.

Did {you/SP} personally receive benefits from WIC, that is, the Women, Infants, and Children Program, in the **past 12 months**?

YES 1
NO .... 2 (BOX 20)
REFUSED .... 7 (BOX 20)
DON'T KNOW .... 9 (BOX 20)

FSQ.660   {Are you/Is SP} **now** receiving benefits from the WIC Program?

YES 1
NO 2
REFUSED 7
DON'T KNOW 9

FSQ.670   Thinking about {your/SP's} most recent pregnancy or delivery, how long {did you receive/have you been receiving/did she receive/has she been receiving} benefits from the WIC Program?

CAPI INSTRUCTION:
IF SP CURRENTLY RECEIVING WIC BENEFITS (CODED '1') IN FSQ.660, DISPLAY {HAVE YOU BEEN RECEIVING/HAS SHE BEEN RECEIVING}.
OTHERWISE, DISPLAY {DID YOU RECEIVE/DID SHE RECEIVE}.

|___|___|
ENTER QUANTITY

REFUSED 77
DON'T KNOW 99

ENTER UNIT

MONTHS 1
YEARS 2
REFUSED 7
DON'T KNOW 9

BOX 20

CHECK ITEM RHQ.690:
- IF SP 14-49 YEARS OLD, CONTINUE WITH RHQ.700.
- OTHERWISE, GO TO END OF SECTION.

RHQ.700   During the **past month**, {have you/has SP} used any of the following products for feminine hygiene?

HAND CARD RHQ1

YES 1
NO 2   (RHQ.720)
REFUSED 7   (RHQ.720)
DON'T KNOW 9   (RHQ.720)

RHQ.710   Which of these products did {you/SP} use?

CODE ALL THAT APPLY.

TAMPONS... 1
SANITARY NAPKINS................................... 2
VAGINAL DOUCHES 3
FEMININE SPRAY 4
FEMININE POWDER 5
FEMININE CLEANSING WIPES/
   TOWELETTES 6
OTHER FEMININE HYGIENE PRODUCTS ... 7
REFUSED 77
DON'T KNOW 99

RHQ.720 During the **past 6 months**, did {you/SP} douche? By douching, we mean putting a substance into {your/her} vagina either for routine cleansing or for vaginal irritation or signs of infection?

                              YES 1
                              NO 2 (RHQ.740)
                              REFUSED 7 (RHQ.740)
                              DON'T KNOW 9 (RHQ.740)

RHQ.730 During the **past 6 months**, how often did {you/SP} douche? Would you say . . .

                              5 or more times a month, ... 1
                              2 to 4 times a month, ... 2
                              once a month, or 3
                              less than once a month? 4
                              REFUSED 7
                              DON'T KNOW 9

RHQ.740 During the **past month**, did {you/SP} have any of the following problems: vaginal itching, an unpleasant vaginal odor, or an unusual vaginal discharge?

                              YES 1
                              NO .... 2 (END OF SECTION)
                              REFUSED .... 7 (END OF SECTION)
                              DON'T KNOW .... 9 (END OF SECTION)

RHQ.750 Which of these problems did {you/SP} have?

         CODE ALL THAT APPLY.

                              VAGINAL ITCHING 1
                              UNPLEASANT VAGINAL ODOR 2
                              UNUSUAL VAGINAL DISCHARGE 3
                              REFUSED 7
                              DON'T KNOW 9