

CONTRACEPTION (FPC)

FPC005 The next set of questions asks you about your thoughts and experiences with family planning. These questions are asked of all adults, regardless of age.

Please remember that all of your answers will be kept confidential.

Enter **1** to continue.

<1> CONTINUE

FPC010 Some things people do to prevent a pregnancy include abstaining from having sex at certain times, using birth control methods (such as the pill, implants, shots, condoms, diaphragm, foam, and IUD), having their tubes tied, or having a vasectomy.

Are you or your partner doing anything now to keep you/her from getting pregnant?
If you have more than one partner, please answer these questions about your usual partner.

Please enter **1** for **YES**, or **2** for **NO**. **FPC010 FMT_YES_NO.**

<1> YES

<2> NO (Skip to FPC030)

<d> DON'T KNOW (End of Qnr) <r> REFUSED (End of Qnr)

<q> REPLAY QUESTION <a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO ON (SOUND IS NOW OFF)

<z> TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)

FPC020A What are you or your partner doing now to prevent a pregnancy?

Have you or your partner had tubes tied?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020A FMT_YES_NO.**

<1> YES

<2> NO

<d> DON'T KNOW <r> REFUSED

<q> REPLAY QUESTION <a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO ON (SOUND IS NOW OFF)

<z> TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)

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FPC020B (What are you or your partner doing now to prevent a pregnancy?)

Have you or your partner had a hysterectomy, that is female sterilization?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020B FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> **REPLAY QUESTION**

<a> **REPLAY RESPONSES**

<y> **TURN QUESTION AUDIO ON (SOUND IS NOW OFF)**

<z> **TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)**

FPC020C (What are you or your partner doing now to prevent a pregnancy?)

Have you or your partner had a vasectomy, that is male sterilization?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020C FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> **REPLAY QUESTION**

<a> **REPLAY RESPONSES**

<y> **TURN QUESTION AUDIO ON (SOUND IS NOW OFF)**

<z> **TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)**

FPC020D (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use a birth control pill?

This means all kinds, but not including the morning-after pill.

Please enter **1** for **YES**, or **2** for **NO**. **FPC020D FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> **REPLAY QUESTION**

<a> **REPLAY RESPONSES**

<y> **TURN QUESTION AUDIO ON (SOUND IS NOW OFF)**

<z> **TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)**

CONTRACEPTION (FPC)

FPC020E (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use the morning-after pill, that is an emergency contraceptive?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020E FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> REPLAY QUESTION

<a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO ON (SOUND IS NOW **OFF**)

<z> TURN RESPONSE AUDIO ON (SOUND IS NOW **OFF**)

FPC020F (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use either a male or female condom?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020F FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> REPLAY QUESTION

<a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO ON (SOUND IS NOW **OFF**)

<z> TURN RESPONSE AUDIO ON (SOUND IS NOW **OFF**)

FPC020G (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use birth control implants, such as Jadelle or others?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020G FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> REPLAY QUESTION

<a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO OFF (SOUND IS NOW **ON**)

<z> TURN RESPONSE AUDIO OFF (SOUND IS NOW **ON**)

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FPC020H (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use shots, such as Depo-Provera?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020H FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> **REPLAY QUESTION**

<a> **REPLAY RESPONSES**

<y> **TURN QUESTION AUDIO ON (SOUND IS NOW OFF)**

<z> **TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)**

FPC020I (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use a birth control ring, such as Nuvaring or others?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020I FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> **REPLAY QUESTION**

<a> **REPLAY RESPONSES**

<y> **TURN QUESTION AUDIO ON (SOUND IS NOW OFF)**

<z> **TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)**

FPC020J (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use a birth control patch?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020J FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> **REPLAY QUESTION**

<a> **REPLAY RESPONSES**

<y> **TURN QUESTION AUDIO ON (SOUND IS NOW OFF)**

<z> **TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)**

CONTRACEPTION (FPC)

FPC020K (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use a diaphragm, cervical ring, or cap?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020K FMT_YES_NO.**

<1> YES

<2> NO

<d> DON'T KNOW

<r> REFUSED

<q> REPLAY QUESTION

<a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO ON (SOUND IS NOW OFF)

<z> TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)

FPC020L (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use an IUD, that is an intrauterine device, including Mirena?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020L FMT_YES_NO.**

<1> YES

<2> NO

<d> DON'T KNOW

<r> REFUSED

<q> REPLAY QUESTION

<a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO ON (SOUND IS NOW OFF)

<z> TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)

FPC020M (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use withdrawal or pulling out?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020M FMT_YES_NO.**

<1> YES

<2> NO

<d> DON'T KNOW

<r> REFUSED

<q> REPLAY QUESTION

<a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO ON (SOUND IS NOW OFF)

<z> TURN RESPONSE AUDIO ON (SOUND IS NOW OFF)

CONTRACEPTION (FPC)

FPC020N (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner not have sex at certain times or use the rhythm method?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020N FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> REPLAY QUESTION

<a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO ON (SOUND IS NOW **OFF**)

<z> TURN RESPONSE AUDIO ON (SOUND IS NOW **OFF**)

FPC020O (What are you or your partner doing now to prevent a pregnancy?)

Do you or your partner use another method, such as foam, jelly, or cream?

Please enter **1** for **YES**, or **2** for **NO**. **FPC020O FMT_YES_NO.**

<1> **YES**

<2> **NO**

<d> **DON'T KNOW**

<r> **REFUSED**

<q> REPLAY QUESTION

<a> REPLAY RESPONSES

<y> TURN QUESTION AUDIO OFF (SOUND IS NOW **ON**)

<z> TURN RESPONSE AUDIO OFF (SOUND IS NOW **ON**)

[END OF QUESTIONNAIRE]

FPC030_R4 What is your main reason for not preventing a pregnancy?

<1> YOU DIDN'T THINK YOU WERE GOING TO HAVE SEX, OR YOU DON'T HAVE A REGULAR PARTNER **FPC030_R5 FMT_FPC030_R3_.**

<2> YOU WANT A PREGNANCY

<3> YOU OR YOUR PARTNER DON'T WANT TO USE BIRTH CONTROL

<4> YOU OR YOUR PARTNER DON'T LIKE BIRTH CONTROL OR FEAR SIDE EFFECTS

<5> YOU CAN'T PAY FOR BIRTH CONTROL

<6> THERE WAS A LAPSE IN THE USE OF A METHOD

<7> YOU KNOW OR THINK THAT YOU OR YOUR PARTNER CAN'T GET PREGNANT

CONTRACEPTION (FPC)

- <8> YOU OR YOUR PARTNER ARE TOO OLD TO GET PREGNANT
 - <9> YOU OR YOUR PARTNER ARE CURRENTLY BREAST-FEEDING
 - <10> YOU OR YOUR PARTNER JUST HAD A BABY OR ARE POSTPARTUM
 - <11> YOU HAVE SOME OTHER REASON FOR NOT DOING ANYTHING TO PREVENT PREGNANCY
 - <12> YOU DON'T CARE IF YOU OR YOUR PARTNER GET PREGNANT
 - <13> YOU OR YOUR PARTNER IS PREGNANT NOW
 - <14> YOU HAVE A SAME-SEX PARTNER
 - <15> YOU OR YOUR PARTNER HAD TUBES TIED
 - <16> YOU OR YOUR PARTNER HAD A VASECTOMY
 - <17> YOU OR YOUR PARTNER HAD A HYSTERECTOMY
-
- <d> **DON'T KNOW** <r> **REFUSED**
 - <q> REPLAY QUESTION <a> REPLAY RESPONSES
 - <y> TURN QUESTION AUDIO ON (SOUND IS NOW **OFF**)
 - <z> TURN RESPONSE AUDIO ON (SOUND IS NOW **OFF**)

[END OF QUESTIONNAIRE]